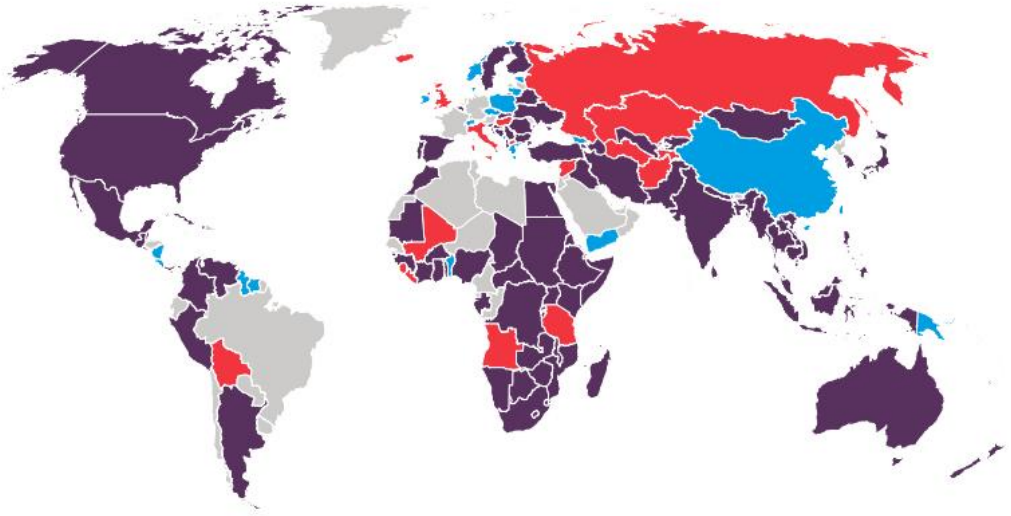
Counting People Reached

Technical Note



National Societies that reach out to people in their country via disaster response and early recovery programmes, long-term services and development programmes, or both[1]

- Disaster response
- Disaster response and long-term services
- Long-term services
- No data

Everyone Counts Report 2018 using 2016 data

Federation-wide Databank and Reporting System

Geneva, 1 September 2018

This Technical Note was prepared by the Planning, Monitoring, Evaluation and Reporting (PMER) Unit from the IFRC Secretariat in Geneva with inputs from PMER, gender and social inclusion technical advisors in the IFRC Regional and Country Offices as well as in Geneva. It will be periodically reviewed and updated to ensure it conforms to the highest standards and meets the needs of its intended audience.

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Introduction

Purpose

This technical note provides guidance for measuring people reached by services provided by Red Cross Red Crescent National Societies and the IFRC (hereafter referred as the Federation Network). This includes services provided in an emergency operations or development programming, or as part of overall National Society of IFRC Secretariat annual reporting.

As **Box 1** highlights, counting people reached can be tricky and this technical note is in response to field-based demand for guidance to help programme and project team reliably count people reached, providing evidence-based data that support:

- Decision-making,
- Organisational learning,
- Accountability to those we serve and those who fund our services.

It is important to note that there may be instance where counting requirements from donors for people reached may differ from that presented in this guide. In such instances, it is important to dialogue with the donor to see whether the protocol outlined in this guide can replace those of the donor, or whether funding requirements necessitate a different protocol.

BOX 1. Counting people reached is not always easy!

While counting people reached by RCRC services is a basic output measure, it can be challenging. Especially:

- Counting people indirectly-reached,
- Quality insurance to avoid double counting when running programmes over different time period, overlapping locations or among shared populations.

Therefore, there is no "magic formula" or blueprint to arrive at an accurate count. There are cases in which it is not possible to get complete accuracy in people reached count. However, it does not mean that you give up and dismiss the effort. In such challenging circumstances, measurement will need to rely on good judgment of what is reasonable and reliable to estimate counts given specific context, time, capacity and resources. It is useful to remember that in the absence of definitive "proof", you can still collect a lot of good evidence.

Audience

There are 3 primary audiences for this technical note:

- **Federation Network project and programme management and teams** counting, disaggregating and reporting on people reached by RCRC services
- **Federation Network organisational management** reporting on people reached for multiple projects and programmes across time and place, especially to the Federation-wide Databank and Reporting System (FDRS) (**Box 2**)
- **Federation Network external stakeholder** seeking the technical rationale and assurance for reliable and accountable counts of people reached

BOX 2. The Federation-wide Databank and Reporting System

The FDRS aggregated data on Key Proxy Indicators (KPIs) from National Societies (NS) which is available in the FDRS website to boost NS profiles in a consistent and transparent manner and to support NS and IFRC service delivery and accountability. The FDRS was introduced with the Strategy 2020 decided at the 17th Session of the General Assembly and approved by the Governing Board of May 2010.

The FDRS people reached indicator should be considered as a minimum counting and reporting standard for any Federation Network project/ programme. It refers only to people reached by NS within their borders by the NS, partners NS and IFRC. It does not take into consideration people reached by international programmes delivered in other countries. As IFRC programming is delivered with and through NS, the FDRS minimum counting standards also apply to these Secretariat programmes and projects. In addition to direct and indirect people reached annual totals, NS are asked to report on counts disaggregated by sex and age (following Sphere standards). Also, in 2018, two questions about disability disaggregated data and the use of the Washington Group of Questions have been introduced. The illustrative table below provides a visual summary of the FDRS reporting standard for people reached:

	Direct Recipients			Indirect Recipients
Age group	Male	Female	Total	
0 to 5			0	
6 to 12			0	
13 to 17			0	
18 to 29			0	
30 to 39			0	
40 to 49			0	
50 to 59			0	
60 to 69			0	
70 to 79			0	
80+			0	
Total	0	0	0	

Is your National Society capturing disaggregated data based on disability for this indicator, i.e. the number of persons with disabilities? (Type Yes or No in the yellow box)

If answered yes, is your disability disaggregated data in accordance to the Washington Group questions ? (Type Yes or No in the yellow box)

For more information on FDRS KPIs, you can read the FDRS User Guide by contacting the FDRS team: fdrs@ifrc.org

Key Concepts and Considerations

People Reached

People reached is a count during and *after* service delivery of the number of people who are directly and/or indirectly reached by a Federation Network service. ***Service*** is used broadly to refer to the provision of tangible goods/materials as well as intangible services, such as protection and other types of assistance, including a range of activities to change or support knowledge, skills, awareness, attitudes, behaviour, and psychosocial well-being. As we shall see in **Section 3** of this technical note, people reached can be subdivided into people directly and indirectly reached.

People reached is an indicator of service outreach, but does NOT measure other quality criteria, such as service relevance, efficiency, effectiveness, impact and sustainability[1]. In other words, counts of people reached in themselves do not tell us how well services are delivered (quality) and what difference they make (impact). For instance, you may count 5,000 people reached by shelter provision, but that does not reflect how well the shelters were built, and whether people are satisfied with and use the shelters. For

[1] Adopted in the IFRC Framework for Evaluation (2011), these five criteria are internationally recognized by the Organization for Economic Co-operation and Development, Development Assistance Committee (OECD/DAC) in its Principles for Evaluating Development Assistance (1991).

this reason, we have indicators to measure higher-level results, (and we do not refer to people reached as "beneficiaries," which implies that they actually benefit from the services – which is not always the case)[2].

Related, counts of people reached do NOT reflect differences in service type or investment. For example, depending on the programme area, one person counted may receive a house, another a vaccination, and another safety messages, but they are each counted equally as people reached. In other words, the count of people reached by these services does not reflect the difference in the investment (and impact) of these services.

For the above reasons, it is important to remember the good practice to **triangulate (combine) different data sources for a better understanding** of higher level changes, and what differences the services we provide make. Counts of people reached is only one source of data, and quality and impact measurement should include other indicators, such as the satisfaction of people reached, and changes in their knowledge, attitude, behaviour and ultimately condition, (see **Box 3**).

BOX 3. More does not mean better

It is important to remember that *people reached* is an output measure of service outreach, and other higher-level measures (indicators) should be used in a programme's design to measure higher level results such as outcomes and impact[3]. For example, in an HIV/AIDS awareness programme, the number of people reached by awareness raising messaging would be an output indicator, whereas other indicators can be used to measure performance towards higher level objectives, such as outcome indicators for knowledge and behavioural changes to reduce HIV transmission, and impact indicators to measure changes in condition, such as HIV prevalence and the number of deaths attributed to AIDS.

Target Population

Another important distinction to understand is that between *people reached by* versus *people targeted for* (target population) Federation Network services. The target population are those people *identified to be reached* by Federation Network services, whereas the count of people reached are those people who are *actually reached* (directly or indirectly) by the services. It may be the case that not everyone

[2] The use of "beneficiary" is also criticized because in English and other languages it comes across for many as patronizing and disempowering. Etymologically speaking, critics point out that the word implies people are passive recipients of charity rather than participants in their own development, (relevant to Principles 6 and 7 of the Code of Conduct for The International Red Cross and Red Crescent Movement and NGOs in Disaster Relief).

[3] A project or programme design or theory of change, (typically a log frame at the IFRC), identifies a hierarchy of results (objectives) that guide measurement of performance and achievement of desired results. Further information can be found in the IFRC Project/Programme Planning Guidance Manual.

identified in the target population is actually reached by a Federation Network service, or there may be people reached by services who were not initially targeted (unintended recipients).

Typically, the target population is identified during the initial (needs) assessment phase that informs the design of a project/programme. It is also during this stage that one can begin to identify key categories in the target population that can be later used to disaggregate people reached counts (see **Box 4**). The selection of the target population is based on those people in need of services, and other contextual factors, such as the population's size and geographic scope, and what is realistic and advisable given a project/programme's resources and capacity. Although the target population is identified early to inform the programming and service outreach, those targeted for service may change based on M&E data after service delivery has begun, including real-time data on the number of people reached.

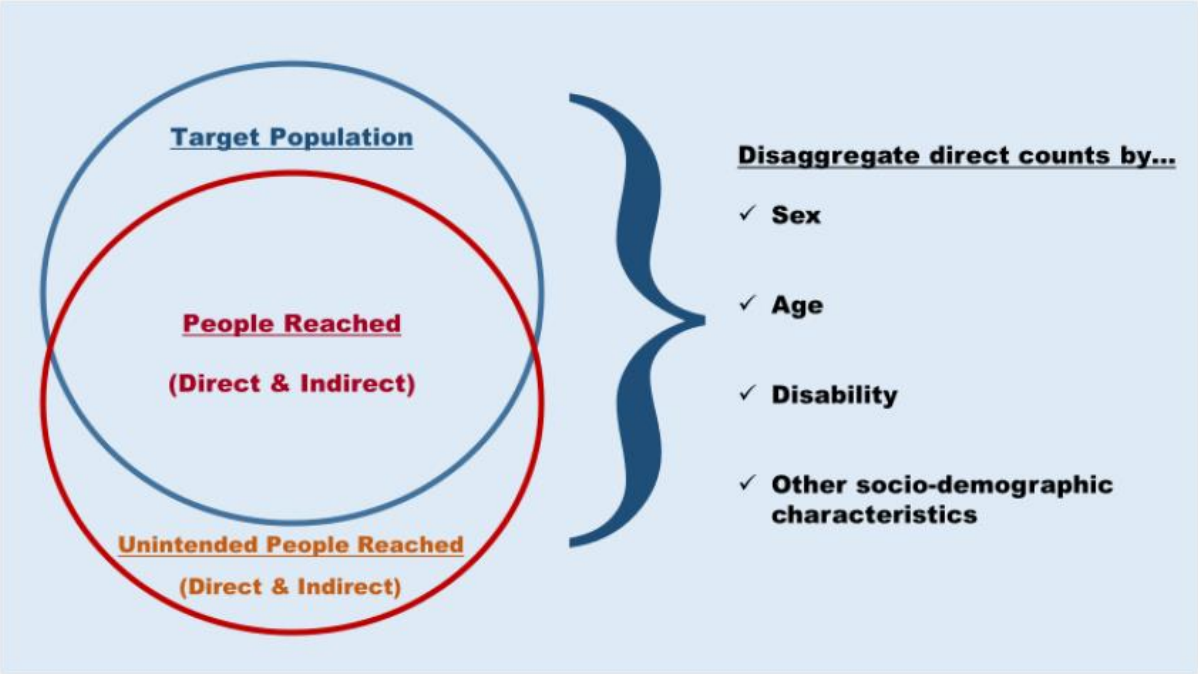
BOX 4. Disaggregating data for better programme delivery

"Disaggregating" the people we seek to reach and those we actually reach with services is critical to help us better understand who we serve, how well we are serving them, and especially who we may not be reaching with our services. As acknowledged above, counts of people reached is limited in what it tells us. Disaggregating counts according to socio-demographic characteristics, such as age, sex, and disability, provides more detail to inform service delivery. The disaggregation of people reached counts is a first, critical step towards an analysis of who we are reaching and not reaching with service. This is critical for the Red Cross Red Crescent Movement that seeks to help the most vulnerable in an equitable, impartial manner based on need. In **Section 4**, we examine socio-demographic disaggregation more closely.

Figure 1 below provides a visual summary of the key concepts we have discussed thus far and will explore further in this technical note. It represents how people reached are typically those targeted by an intervention, (but not necessarily all the target population). It also shows that sometimes, (not necessarily all the time), there will be people reached outside of the target population (for example, an awareness campaign for diabetes targeting community residents will inevitably reach other people – friends or family – visiting the community during the campaign). You will note that people reached, whether targeted or not, can be direct or indirect recipients, and the right side of the diagram illustrates the importance to disaggregate counts of people reached by sex, age, disability and other

relevant socio-demographic characteristics. We will further discuss direct, indirect and disaggregated counts of people reached in this technical note.

Figure 1 - Conceptual Diagram for Counting People Reached



Capacity for Responsible Data Management (RDM)

An important consideration for reliable counts of people reached, (as well as any data to be collected and reported), is the capacity of projects and programmes to manage data along the "data lifecycle." ***Data management*** concerns a range of processes, from data collection, verification, organization, cleaning, storage, analysis, presentation, to the eventual "retirement" of data.

However, it is not enough to build the capacity to conduct these data processes, but they should be managed in a responsible manner. With technical innovation that allows for easier and faster data processing of increasing quantities of personal and organizational data, *responsible* data management has received increasing attention. But responsible data management is more than technical security and encryption of data to protect individual and organizational privacy.

Responsible data management refers to safeguarding the dignity, respect and privacy of the individuals, organizations, and other key groups from which we collect data. For people reached, this include balancing key principles related to people's right to be counted, informed consent, data sharing and transparency,

and ensuring that we act in the best interests of the people we count to serve. Currently, the IFRC is drafting a policy for responsible data management and use.[4]

One should not underestimate the capacity requirements for reliable and accountable data management – not just for counts of people reached, but also other indicators. For instance, data collection templates/forms are required at the field level, as is an understanding among data collectors to use these tools (whether on paper or using a handheld digital device). From the field level, data management systems are required to aggregate, safely store and access data at the unit, branch, chapter, and headquarters' levels. Other considerations include quality assurance checks that cross-check and clean data.

With the above in mind, **careful attention should be given to what is realistic and feasible to reliably collect and report given the existing capacities within a National Society** (and respective project/programme teams). For example, the degree to which a National Society can disaggregate data according to sex, and categories of ages and disability will depend on the specific operational context (e.g. timing, scale and scope of the intervention), and the given capacities within the National Society at both the headquarters' and field levels. This includes not only to existing systems for responsible data management, but also human and financial resources, and the potential to build these capacities when required.

Counting Direct and Indirect People Reached

One fundamental way that counts of people reached can be disaggregated is by whether they received the service directly or indirectly from a Federation Network provider.[5] Below we discuss these two categories more closely, especially counting people indirectly reached, which is usually more challenging.

People Reached Directly

People directly reached (also known as "direct recipients") by Federation Network services are countable service recipients by a Federation Network provider (or affiliate)[6] present at the service delivery point. This can include people who were intended or unintended to be reached (see Section 2.2). "Delivery point"

[4] This technical note will be periodically reviewed and revised to ensure it is aligned with any future IFRC policy for responsible data management. Meanwhile, two useful resources on this topic include the Handbook on Data Protection in Humanitarian Action, and the Responsible Data Forum Handbook.

[5] "Federation Network" includes National Societies and the IFRC Secretariat.

[6] "Affiliate" refers to a person or entity vetted by a Federation service provider as competent and reliable to accurately record people reached by Federation services at delivery points; for instance, a local community-based partner organization working with the Federation to provide services.

refers to a location where a Federation Network provider is physically present to record delivery of services provided directly to people. This can be stationary, as with a National Society health provider at a clinic who records people receiving services, or mobile, as with a roving IFRC health provider recording people vaccinated at households. The key element is that the Federation Network provider (or affiliate) is present to verify delivery of service. **Annex 1** provides examples of counts of people directly reached for different service types.

It is worth noting that there are some instances, such as using household or catchment counts, where it is acceptable to estimate direct and indirect counts of people reached when the Federation Network service provider is not present to verify service delivery. However, caution should be used in such instances (**Box 5**).

BOX 5. Using household and catchment counts

The average household size and catchment counts of an area's (e.g. community) population are sometimes used to count people directly reached or to estimate counts of people indirectly reached (see below). However, it is important to remember a few key points. Firstly, household and catchment counts do not provide important disaggregated data often needed for accountable programming, (as discussed below in Section 5). Secondly, the average household size and catchment population should come from reliable sources specific to the service area. For example, while the average household size for a country may be five people, this will vary according to locality, (i.e. a rural versus an urban household), and one should not automatically assume the national average household size for the programme area. Thirdly, if a household or catchment count is to be used, there should be reliable justification that everyone is indeed reached by services in the households or catchment area. For example, if a billboard messages or a bridge serves one part of a large urban area, it may not be reasonable to assume the whole city (catchment) is reached

People Reached Indirectly

People indirectly reached (also known as "indirect recipients") by Federation Network services are estimate counts of service recipients when a Federation Network provider (or affiliate) is not present at the service delivery point to verify service delivery. This is most common with messaging used in awareness raising and behaviour change initiatives. For example, the average listening audience for a radio programme, (i.e. a road safety awareness-raising project), in a certain region and time of the day can be an estimation based on marketing research of the listening audience.

The important point is that service provision to people indirectly reached cannot be confirmed with certainty, and therefore counts of people indirectly reached are estimates. The degree of accuracy is limited because Federation Network service providers are not present to confirm, and count people reached by services. Furthermore, the ability to estimate people indirectly reached will often depend on the availability of reliable and relevant data from secondary data sources[7], or the available resources and capacity of the Federation Network service provider to obtain such data themselves through primary data collection.

For instance, with the example of the average listening audience for a radio programme, secondary data from market research of the listening audience may not always be available. In such a circumstance, a project team would need to exercise good judgement of what is reasonable and reliable estimate count given the specific context, such as the target population's size, their access to radios, and the times of the radio broadcasts relative to other activities that can compete with listening to the broadcasts.

As Box 1 highlights, accurate measurement is limited, and we must acknowledge the difference between "evidence" versus "proof." Box 6 below illustrates inherent measurement limitations when determining people reached by social media. ***Recognizing such limitations, it is important not to inflate (or deflate) counts of people indirectly reached. Guidance for counting indirect recipients should carefully consider the credibility and legitimacy of counts for all stakeholders involved, (from donors to the general public).***

BOX 6. Indirect counts and the social media

Social media includes an assortment of outlets provided through the internet via handheld devises or desktop computers, including websites, communities of practice, videos (e.g. YouTube), Twitter activity, email listservs, etc. Social media is increasingly used to reach people, either for messaging, learning or some other form of engagement. Counts of people reached through social media are indirect because RCRC personnel are not physically present to verify reached.

Indirect counts of people reached can be estimated in different ways according to context and analytics available. For instance, registration to join a listserv or community of practice, or to download a resource or application, can require user information to support counting people reached and to disaggregate by sex, age, disability and other relevant socio-demographic data. But note that data accuracy will be compromised if people fabricate registration information.

Counting people reached through internet activity such as website visits or Twitter tweets can be even trickier. Analytics and the ability to distinguish between activity from different people versus repeat activity

[7] Secondary data refers to data that is not directly collected by and for the project/programme, but which can nevertheless meet project/programme informational needs.

from the same people (a risk of double counting), will vary based on available resources and technical expertise. Sometimes the best that can be done is to report on the social media counts and clearly define just what they count and explain related limitations regarding people reached.

Google Analytics is a good place to start to track website activity, and there are a range of metrics, including: click rates, track click through with bounce rates, referral rates, share of internet traffic, comments and conversation rates, amplification rates, likes and applause rates, and leads – (far from exhaustive, you can read more about these from 19 Social Media Metrics that Really Matter—and How to Track Them). The field of media analytics is rapidly growing, and we recommended you consult Communications or IT specialists for additional technical guidance.

Other humanitarian and development organizations also grapple with the challenge to count people indirectly reached. There is no universally recognized practice or "blueprint" for counting people indirectly reached in the international aid community[8]. Sometimes, a donor may have specific requirements, but more often such specificity is absent.

As such, it is helpful to consider different examples of how the Federation Network should count people indirectly reached in a variety of contexts and circumstances – which we do in **Annex 1**. Although far from exhaustive, these different scenarios help highlight lessons to guide counting indirect recipients, which we can summarize as follows:

1. **It is typically unreliable to estimate counts of indirect recipients when they receive services from another person directly reached by a Federation Network service, *unless there is a structured mechanism to ensure this takes place.*** For example, we do not assume family members receive messaging provided to students at school, unless an activity ensures it is transferred from students to their family – (see the examples in **Annex 1** for school presentations on RCRC principles, and taxi driver road safety programme).

2. **It is typically unreliable to estimate counts of people indirectly reached by Federation Network messages or learning from another indirect recipient**, such as people who do not hear first-hand a radio message, but learn about it through another radio listener, (i.e. see the example for community radio and TV broadcasts in **Annex 1**).

[8] The IFRC was one of seven global organizations included in a 2015 study conducted by Oxfam Great Britain to explore methods and strategies to estimate indirect reach in service delivery, which highlighted the different conception of and methods used to measure indirect people reached and beneficiaries; (other organizations in the study included Save the Children, Catholic Relief Services, PCI Global, the UN Food and Agriculture Organization, the DFID-financed BRACED project, and DFID's Civil Society Challenge Fund).

3. **Be careful not to extrapolate and estimate counts of a national population as people indirectly reached,** such as counting a city or country population when providing services aimed at government system strengthening, capacity building, advocacy or policy development and change, (see the example for advocacy for national policy development or change in Annex 1).

4. **It is sometimes acceptable to use the average household size or catchment populations to count people directly reached or to estimate counts of people indirectly reached**, but this overlooks important detail provided by further disaggregation, (see Box 5, and examples in Annex 1).

5. **Typically, it is not possible to disaggregate people indirectly reached because the service provider is not present to count and record demographic differences.** However, there are exceptions when it may be justifiable to conclude about overall demographic characteristics for certain service recipients. For example, if the viewing audience for an awareness raising TV programme has a certain demographic profile determined through marketing research, (e.g. a show targeting children, teenagers or women), it can be reasonable to categorize counts of people indirectly reached according to such demographic characteristic[9].

While the above observations are helpful, decisions will ultimately be context specific, and if you are unsure, you can consult with an IFRC country, regional or global Planning, Monitoring, Reporting and Evaluation (PMER) advisor.

Disaggregating People Reached

Disaggregating people reached means counting and reporting on people reached according to different categories that help us better understand who we serve and adapt our programming to better serve them. As Box 4 highlights, this is the first step towards understanding who we are and are not reaching, providing a better understanding ("richer picture") to help us better serve our target populations.

Typically, categories to disaggregate people reached are socio-demographic characteristics. One critical set of socio-demographic characteristics is **sex, age, and disability disaggregation (SADD)**, where disability is disaggregated in relation to impairment in six domains: walking, seeing, hearing, cognition, self-care and

[9] Secondary data sources for this can include the TV network or a reliable marketing firm, or they may not be available, in which case the programme team can consider its ability to reliability conduct primary data collection on the audience demographic. As we highlight in Section 2.3, this capacity for a project team to collect primary data themselves may not always be present, in which case generalizations cannot be made about the people reached.

communication. Other examples of socio-demographic categories used in disaggregation include: race, ethnicity, nationality, sexual orientation, socio-economic status (e.g. income and education), legal status (refugee, asylum seeker), etc[10].

A large and growing body of evidence shows that disaggregation based on socio-demographic characteristics can have a considerable influence on service delivery and programme outcomes (intended and unintended)[11].

The above examples are far from exhaustive, and ultimately the socio-demographic categories used to disaggregate counts of people reached will vary by programme area and context.

BOX 7. Demographically – Differentiated indicators to help count who we reach

To help us better understand how our services are reaching and impacting different groups of people within the community, we may use specific indicators designed to collect this information – known as "demographically differentiated indicators." For example: the number of ***women*** participating in a cash-for-work programme; the percentage of ***children under the age of 1*** that had diarrhoea in the past two weeks; the percentage village committee members who are ***Tamil***; the proportion of ***elderly*** who have had their vision tested. Gender- and age-differentiated indicators are the two most common categories of differentiated indicators, but other categories can be used. Such indicators demonstrate the ways in which disaggregated data can be used to better understand service delivery and impact according to the specific group or sub-group.

Identifying categories to disaggregate people reached typically begins with the initial assessment of the target population that informs the design of an intervention (e.g. project/programme). However, "emergent" categories to disaggregate people reached may become apparent after programme implementation begins based on monitoring and evaluation data. For example, a programme focused on HIV/AIDS awareness may identify certain groups at higher risk to disaggregate, (such as truck drivers), after program implementation.

[10] Race" refers to physical characteristics of distinct populations within the larger species (e.g. Caucasian). "Ethnicity" describes the cultural identity that unites a group of people, which can include tradition, language, religion, behaviour traits, and racial ancestry. Two people can identify their ethnicity as Canadian, but their races may be Black and Caucasian. "Nationality" is the relationship between a person and the political state to which s/he belongs or is affiliated. Someone may identify their ethnicity as Chinese, but their nationality may be Canadian.

[11] For example: Sex and Age Matter; Leaving No One Behind: Disaggregating Indicators for the SDGs; Unseen, Unheard: Gender-based Violence in Disasters Global Study (IFRC 2016)

Socio-demographic categories for disaggregation are also informed by an intervention's specific thematic (programme) area/s. For instance, in addition to sex, age and disability, a livelihoods programme may also want to disaggregate by level of income and education; a rural health programme by the distance individuals are from health facilities and providers; and a social inclusion programme for migrants may find it useful to disaggregate by country of origin, language, ethnicity, religion, etc.

Our ability to disaggregate people reached needs to be realistic given the available time and resources (see Section 3.3). While it may not be possible to disaggregate our people counts initially, effort should still be made to do so at earliest opportunity given the urgency and available resources. As the Sphere Project guidelines "Detailed disaggregation is rarely possible initially but is of critical importance to identify the different needs and rights of children and adults of all ages."[12].

Below we take a closer look at sex, age, and disability disaggregation (SADD) in separate sub-sections, but it is important to keep in mind that they are interrelated. For example, an impairment like low vision can worsen with age, and a female may have limited access to eye care and glasses in certain societies in comparison with a male.

Sex & Gender

Often, project teams ask what is the difference between "sex" and "gender," and what is meant by gender analysis:

- ***Sex*** refers to the physical and biological differences, usually between males and females[13].
- ***Gender*** refers to the social differences between females and males throughout their life cycles. Although deeply rooted in every culture, these social differences between females, males and other gender identities are changeable over time and are different both within and between cultures. **Gender determines the roles, power and resources for females and males in any culture[14]**.
- **Gender analysis** helps understand how opportunities and inequalities may be affected based on a person's sex or the gender role that people identify with.

What does this mean for disaggregating people reached? Firstly, we disaggregate by sex to support gender analysis. This form of disaggregation is good practice because the biological distinction between man and woman is more commonly understood and straightforward to measure than socially-constructed differences that can change over time based on cultural differences and individual perception.

[12] The Sphere Project Humanitarian Charter and Minimum Standards in Humanitarian Response, 2011: p. 63.
[13] UN Women Gender Equity Glossary
[14] Adapted from IFRC Strategic Framework on Gender and Diversity Issues 2013 – 2020

However, there may be instances where people do not identify with the 'binary' option of male or female, but instead identify with one of a variety of potential gender roles, such as *transgender*, *transsexual, or they may not wish to identify as any gender*.

Does that mean we need to disaggregate for the assortment of potential gender categories? This will depend on context, including programme area and the target population. When considering this, attention should be given to the implications for data collection, including the degree that individuals requested to identify their gender may understand or react to various less-conventional gender categories, not to mention potential limitations for data management to encompass numerous gender categories.

One approach often used to disaggregate for gender identities is to have an "Other" category in addition to "Male" and "Female." This will allow respondents to opt out of identifying only a male or female if they perceive their gender otherwise.

When deciding how to collect data based on sex and gender, it is important to decide how the data will be analysed and used to enhance programming once collected. Providing options for people to identify based on gender allows for a dignified approach to service delivery, that can also improve our understanding to better deliver services.

Age

In addition to sex and gender, disaggregation by age deserves special mention, especially because project teams often have questions as to what age groupings to disaggregate. There is no one, absolute set of age groups to disaggregate people reached, but in humanitarian operations, the Sphere Project guidelines for age disaggregation summarized in **Table 1** recommends three age groups from childhood through adolescents, and then 10-year age brackets thereafter.

Table 1 The Sphere Project age disaggregation for humanitarian services[15]

0-5		6-12		13-17		18-29		30-39		40-49		50-59		60-69		70-79		80+	
F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M

It is important to note that these recommended age groupings from The Sphere Project are for humanitarian contexts, and are informed by, "age-related differences linked to a range of rights, social and cultural issues." Depending on the type of programme/service being delivered, other age groups may be better suited for analysis. For instance, if you are working on a nutrition or vaccination programme for children, smaller intervals may be used before 10 years. Or if you are working in education, (e.g. RCRC

[15] Adapted from The Sphere Project Humanitarian Charter and Minimum Standards in Humanitarian Response, 2011: p. 63.

principles and values school programme), it may be preferable to have age intervals for each year that coincide with student grade levels.

BOX 8. Grouping into multiple age brackets

In some instances, it might be required to report to multiple channels that use different age brackets. It will help a lot if the forms or points of data collection captures data for age or date of birth/year of birth. Once the data is collected, it can be analysed and grouped into various standardized age brackets, such as the Sphere Project age disaggregation or other donor specified age brackets.

Our discussion thus far highlights that it is not possible to identify a "magic" set of age categories for disaggregation for all programme areas and contexts. However, this does not mean that one should dismiss efforts to collect age disaggregated data. FDRS[16] recommends National Societies to report people reached as per annual reporting period using age brackets similar to the Sphere Project age disaggregation for humanitarian services, as shown above in **Table 1**.

Disability

The UN Convention on the Rights of Persons with Disabilities defines disability as, "*(A)n evolving concept and that disability results from the interaction between persons with impairments and attitudinal and environmental barriers that hinders their full and effective participation in society on an equal basis with others.*"[17].

The Red Cross Red Crescent Movement's Strategic Framework on Disability Inclusion similarly states that "*Disability is a complex, multidimensional and dynamic concept that has evolved significantly over time. It is the result of the interaction between the person with impairment and enabling or disabling characteristics of his or her socio-economic environment. This is known as the 'social model', in which people are viewed as being disabled by society rather than by their impairments.*"

Consequently, when collecting disability-disaggregated data, we should focus on people's experience of their individual level of function, which better captures the relationship between their disability and environment.

[16] The aim of the FDRS is to establish a databank of objectively-analysed National Society capacities that creates greater self-awareness of their profile at all levels, services, strengths, gaps, and their future potential for boosting their own development.

[17] Article 1. UN Convention on the Rights of Persons with Disabilities

Annex 3 presents one well-received resource to help standardise the collection of disability-disaggregated data based on function called ***The Washington Group Short Set of Disability Questions***[18]. Prepared by the UN Statistical Commission "Washington Group" on Disability Statistics, this tool is increasingly used in humanitarian and development contexts to identify persons at greater risk of experiencing limited or restricted participation in society. It consists of six questions that can be rapidly and easily asked in a variety of settings. Other questionnaires assessing function in more detail are available – which we also introduce in Annex 3[19].

Whenever we collect disability disaggregated data, it is important to carefully consult with people familiar with the local context to best anticipate significant factors that will inform the development of data collection tools and train data collectors. In particular, local disabled people's organisations can be useful resources for conducting training on communicating with persons with disabilities. Wherever possible, include people with disabilities in all phases of the data collection.

When counting people reached disaggregated by disability, it is also important to understand that caregivers may overprotect household members with a disability due to social stigmatisation. This can lead to people with disabilities being hidden by their families or caregivers and often being overlooked in community-based programmes. Therefore, it is critical to pay special attention to counting 'hard-to-reach' people:

> *"Give consideration to hard-to-reach people with disabilities and older people (e.g. those unable to leave their homes or shelters or are purposely hidden by other household members; people with severe communication, intellectual or mental disabilities; or children who are caring for parents or siblings and may therefore not be going to school or accessing programmes for children). Ensure there are people with disabilities and older people among community focal points for assessment teams. Whenever possible, include people with disabilities and older women and men on assessment teams."* [20]

Double Counting

Double counting is an especially challenging aspect of counting-people reached, especially for organizations aggregating counts from multiple services, and services provided over different times and places. **Double counting is counting the same person reached by a Federation Network service more than**

[18] UN Statistical Commission 'Washington Group' on Disability Statistics, "The Washington Group Short Set of Questions on Disability." Accessed 2017.

[19] More detailed resources on collecting and training on disability data are available from the Minimum Standards for Age and Disability Inclusion in Humanitarian Action and the World Health Organization (WHO) Model Disability Survey, as well as the additional questionnaires form Washington Group introduced in Annex 3.

[20] ADCAP, Minimum Standards for Age and Disability Inclusion in Humanitarian Action. 2016. Page 15.

once in the same reporting period. It is to be avoided because it inflates the count of people reached; this is not only misrepresentative, but inaccurate data can negatively affect the services we are responsible to provide to people in need.

Table 2 provides a simple example of how double counting can inflate the total number of people reached where the count is actually more than the total population! Double counting occurs in the example because the organization aggregates counts of people reached by each programme in its recovery operation, rather than adjusting the total count to avoid counting people reached more than once for the given reporting period.

Table 2 Double Counting Example

Xland Disaster Recovery Operation, **(Reporting period: 1 January 2015 – 31 December 2015)**		
Xland population		500,000
People reached by type of services	Food relief items	400,000
	Non-food relief items	300,000
	Shelter provision	200,000
	Water/Sanitation provision	200,000
	Vector-borne disease prevention	200,000
	Psychological services	100,000
Total number of people reached by Xland disaster recovery programme		~~1400,000~~

Table 2 is an illustration of one cause of double counting related to multiple services from one provider. **Table 3** summarizes this and three other common causes of double counting. It worth noting that these causes (or scenarios) are not mutually exclusive, and an organization may confront a combination of these challenges. Annex 1 provides additional examples and guidance to avoid double counting.

Table 3 Common Causes of Double Counting

	Cause Type	Example
1	**Double counting people reached by multiple services from the same provider.**	Organization reaches 100,000 individuals in a disaster recovery operation, and within this group 50,000 also participated in a health care programme provided by the same organization; the total people reached is 100,000, not 150,000.
2	**Double counting people reached by more than one service over time.**	Individuals receiving HIV testing and counselling at a health centre in April, July, and November are counted for each visit, with aggregate counts added

		together, resulting in double and sometimes triple counts of people reached.
3	**Double counting people reached by services at multiple delivery points.**	Individuals attending a family planning presentation on the west side of town is later counted again receiving the same service (or another service type) by the same organization.
4	**Double counting by counting the same people directly and indirectly reached.**	Individuals attending a first aid class and also receiving indirect first aid messages in their community (e.g. billboards, radio or TV) from the same organization are counted more than once.

Double counting can be reduced by establishing data management systems that carefully track people reached by service type, provider, delivery point, and time period. Oftentimes, such systems are already a regular part of programme information management to understand the local context (needs), allocate people and resources, and coordinate services and partners. Some helpful points to keep in mind include:

1. **Anticipate and plan for instances where double counting is more likely**. For example, if there is a logical framework, review programme components and indicators at each level to help identify when certain target populations, services, or providers may overlap. Related, compare logical frameworks between projects/programmes to identify target population overlap.

2. **When possible, use a tracking system[21] that can uniquely identify each individual reached by a service**, so that at the end of the reporting period there are accurate lists of individuals – (by name and/or ID number, recoding their sex and age as well as other factors that can be used to analyse and inform programmes such as disability status or at-risk groups) – that can be used to make and adjust counts across time, place, provider and service type.

3. **When working with households, determine from the outset whether individuals will be counted, or calculated by multiplying the number of households reached by average household size.** If counting individuals and households, make sure that interventions do not overlap the different counting strategies.

[21] This can include mobile data collection applications (software), such as Open Data Kit (ODK), Kobo, and Magpi.

4. **Mapping the programme landscape can help reduce double counting and support the use of catchment counts when appropriate**. This involves the use of maps (paper or computerized), to represent the locations of services and providers. When it is reliable that all individuals in a given target population will receive at least one service over the given time within the service delivery area, the total population can be counted as people reached.

In summary, **the ability to reliably control for double-counting will depend on a variety of factors according to the organizational and operational context**, especially the organization's scale and scope of services, and it capacity (resources and expertise) to establish and operate reliable data management systems for aggregating counts of people reached. For example, it may be possible for an organization to minimize double counting when reaching people with multiple services over time and place by using bar codes to uniquely identify and track individual service recipients; however, this may be possible when access to such technology is affordable and practical.

Checklist for Counting People Reached

This section provides an overview of key considerations for counting and reporting on people reached, ordered from the organization-wide reminders to those at the program/project level. It is meant to provide a summary of technical concepts while more detailed explanations are provided in the following sections of this technical note.

Organizational Considerations for Counting People Reached

Overall considerations at the National Society level for counting and reporting on people reached include:

1. **Determine the overall purpose and scope of the people-reached reporting** - at the project, program, country, regional or global level?
2. **At a minimum, ensure that counting and reporting on people reached meets the minimum National Society reporting requirements for FDRS** (see Box 2).

3. **Establish data management systems that support systematic and reliable data collection and management that is responsible and realistic to the organization** (see Section 3.3). There is an increasing assortment of software solutions to support information management, from mobile data collection on handheld devices, (e.g. ODK, Magpi, RAMP, KoBoToolbox) to organization-wide, online management systems. At a minimum, Excel spreadsheets can be used.

4. **Promote understanding and commitment at all levels of data collection and management to support and sustain systematic and reliable counting of people reached.** Tailor capacity and incentive building accordingly; in addition to sharing this technical note, consider learning opportunities ranging from in-person and online training to mentoring and direct technical assistance. (Refer to the IFRC FDRS website and Regional PMER technical advisors for further guidance and resources.) Incentive building also includes sharing and reporting back data to stakeholders to build understanding and an appreciation of its use.

Organizational Considerations for Counting People Reached

Key considerations for aggregating counts on people reached by multiple projects and programmes include:

5. **Promote the use of systematic data entry forms/formats in the field that count people reached by service type, provider, delivery point and timeframe.** This will support aggregating data at higher levels for reporting.

6. **Map the service delivery landscape, whether a city or whole country, to help identify and avoid potential double-counting**. This typically involves a review of the project/program plans (frameworks) and consulting with managers to identify when certain target populations, services, or providers may overlap in time and place. (*See discussions in **Section 6**, with attention to **Table 3***.)

7. **Monitor data quality**. Do not wait until preparing an annual report to discover that certain projects or programs did not count people reached properly but be proactive and conduct field monitoring checks on data quality. Typically, such exercises will vary according to program area, and include quality assurance of processes that encompass more than people reached counts. (*Checklists Relating to Quality of Monitoring Information is a useful resource, but ultimately data quality monitoring will need to be tailored according to organization and programme area).*

Counting and Reporting at the Project/Programme Level

Key considerations for counting and reporting on people reached by a single project or programme include:

8. **Follow any specific reporting requirements and formats for people reached counts** *(see **Box 2**, above, on minimum reporting standards for people reached per the FDRS).*

9. **Plan counting, and reporting of people reached as part of a coherent system** to meet other project/program reporting needs. People reached is just one of an assortment of monitoring data needed for management decision-making and accountability. (See the IFRC Project/Programme M&E Guide, Section 2.4 (p. 57) on information reporting and utilization.)

10. **Use data entry forms/formats that support systematic recording and aggregation of people reached counts by service type, provider, delivery point and timeframe.** This will also help identify and avoid double counting.

11. **Ensure human, material and financial resources are adequate and realistic for people reached reporting.**

12. **Know in advance how people reached counts will be analysed and used and adapt data collection forms accordingly** – for instance, vulnerability and capacity assessments (VCAs), baseline studies, emergency plans of action, the FDRS, etc.

13. **Ensure that data collection should be culturally appropriate**, with attention to data collection teams that are representative of the population, linguistically competent, gender-balanced, and aware of cultural norms and taboos.

14. **Ensure people collecting and managing data are trained and prepared** with competencies for data ethics, standards and 'do no harm' principles, such as informed consent, data accuracy, privacy and security.

15. **Identify and plan for collection of people reached data according to service type, with particular attention to direct and indirect counts.**

Direct Counts of People Reached (see Section 3.1)

16. **When possible, use a tracking system to uniquely identify each individual receiving a service** so that at the end of the reporting period there are accurate lists of people reached (by name and/or ID number).

17. **When possible, disaggregate people reached counts** by sex, age, disability and any other relevant socio-demographic characteristics to inform analysis for effective service delivery (see Section 4).

18. **Determine whether using the average household size is necessary and advisable for counting people reached**, with special consideration to inherent limitations in accuracy and disaggregated people reached data (see Box 5). If counting individuals in some instances and households in other instances, be sure the counting does not overlap the different counting strategies.

19. **Determine whether catchment counts are reliable and accurate for counting people reached.** Catchment counts can be used when the target population is likely to receive at least one service during the given time within the service delivery area (see Box 5).

Indirect Counts of People Reached (see Section 3.2)

20. **Counting people indirectly reached is inherently limited in accuracy and detail.** Therefore…

21. **Carefully determine data sources to estimate indirect recipients** with attention to reliability and credibility of counts.

22. **Do not estimate counts of indirect recipients when they receive services from direct recipients**, unless there is a structured mechanism to ensure reliability of this process.

23. **Do not estimate counts of indirect recipients when they are indirectly reached by Federation Network messages or learning from another indirect recipient.**

24. **Do not extrapolate and estimate counts of a national population as people indirectly reached unless there is substantial justification.**

25. **It is sometimes acceptable to use the average household size or catchment populations to help estimate counts of people indirectly reached.**

26. **Typically, it is not possible to disaggregate people indirectly reached because the service provider is not present to record demographic differences.** However, there are exceptions when it may be justifiable to conclude about overall demographic characteristics for certain service recipients.

Annex 1 | Examples for Counting People Reached[22]

As **Box 1** in the introduction to this technical note highlights, counting people reached is not always straightforward, and some aspects, (such as indirect recipients of services), will require a judgement-call based on what is reasonable and reliable. As such, examples are a good way to help guide people, and this Annex provides an assortment of examples, with attention to key distinctions between counting direct and indirect service recipients, and socio-demographic disaggregation of counts – especially sex, age, and disability disaggregation, (SADD). The examples are far from exhaustive, and as will become apparent, specific protocol for counts will depend on the specific operational context (needs and programme area), as well as the available resources (e.g. personnel, technology and transportation).

1. Emergency relief items distributed at a centre – Following large scale flooding, disaster relief services deliver blankets, personal hygiene items, food, and water to people in need at an emergency relief distribution centre.		
People Directly Reached Ideally, count individual recipients receiving distributed relief items; if possible, register recipients so if they receive successive distributions, double counting can later be avoided. If in the urgency of an emergency operation does not allow individual counting of HH members, then the average household for the service area can be used to determine the direct recipients, (multiply the number of HH representatives receiving distributed relief items by the average HH size). (See **Box 5** above.)	**People Indirectly Reached** Indirect recipients are not applicable – as explained in **Box 5**, household members not present during the distribution of services can still be counted as direct recipients. This is not as reliable as being present to verify whether HH members equitably receive emergency items, which is an unavoidable limitation of measurement.	**Disaggregation** If possible during the distribution of emergency items, have HH representatives identify the number, sex, age, and any disabilities or vulnerabilities of their respective HHs members; for example, in addition to disabilities, data collection can include the state of the HH shelter (e.g. non-existent, emergency, temporary, or permanent), and condition of HH shelter (unaffected, partially or extensive damage, or beyond repair). (See **Annex 2**.)
2. Provision of water and/or sanitation facilities – In the aftermath of a tsunami RCRC recovery programming includes water/sanitation programmes proving wells and latrines to 60 communities in an impacted region of the country. In year one, the programme serves 20 communities, in year two the programming continues in the initial 20 communities and additional 30 communities, and in year three the programme continues in 35 communities, as well as an additional 10 communities.		
People Directly Reached	**People Indirectly Reached**	**Disaggregation**

[22] For training purposes, these examples or variations can be placed on index cards and distributed to small groups to discuss how to count people reached, followed by plenary sharing and input, and the providing suggested counting solutions.

For annual reporting of direct recipients: in year one count the household population served by the provision of wells and latrines in the 20 communities; in year two count the household population in the initial 20 communities and the additional 30 communities; and in year three count the household population in the continued 25 communities plus the 10 additional communities.	Indirect recipients are not applicable. (One may be tempted to include the total community populations, justifying that improved personal hygiene – e.g. reduced open defecation – reduces communicable diseases and therefore serves everyone. However, this is considered too much inference.)	Disaggregate HH data by sex, age, disability and other characteristics. Also, consider other socio-demographic disaggregation relative to the intervention: e.g. a HH profiles including data such as shelter type, number of people per shelter, HH income level, etc.
3. Livelihoods household programme example – Following an economic recession, a livelihood programme is planned for 2 years in 3 target communities. During the first year, 500 heads of household participate in income generation activities; these 500 continue into year two, with an additional 1000 new people participating in year two		
People Directly Reached For annual reporting, in year one count 500 people and their household members as direct recipients, and in year two count the 500 people who continue and the additional 1000 people for a total count of 1500 people and their household members. In this instance, it is acceptable to include household members as direct recipients even though a RCRC personnel is not present at the service delivery point because it is reasonable and reliable to conclude that household members benefit from the intervention.	**People Indirectly Reached** Indirect recipients are not applicable	**Disaggregation** Disaggregate by sex, age, disability and other vulnerabilities. Also, consider other socio-demographic disaggregation relative to the intervention: e.g. income level, education, etc. This data can be obtained from secondary sources of census data if reliable and relevant to programme area, or through primary data collection of household profiles.
4. First aid services at public events – A principle service area of a NS is the presence of first aid providers at local events to respond to any medical/health incidents. Within the annual reporting period, the NS provide first aid presence at six sporting events, 4 music concerts, a political demonstration and a holiday parade, providing first aid in response to 62 incidents (ranging from minor lacerations to CPR).		
People Directly Reached Do not count the incidents, but the individual people who have received first aid treatment. Ideally, registration of treated people by a unique identifier (name or code) can be used to avoid double counting.	**People Indirectly Reached** Do not estimate counts based on the number of people present at the events assumed to indirectly benefit from the presence of the NS health services.	**Disaggregation** Disaggregated data should be recorded of first aid recipients, including sex, age, disability/injury and other relevant socio-demographic data.
5. School presentations on RCRC principles – A NS has a national programme targeting high school students with school presentations on the RCRC principles.		
People Directly Reached	**People Indirectly Reached**	**Disaggregation**

Count high school students based on class attendance as direct recipients, but only once, regardless of the number of presentations they may have attended during the reporting period.	Do not count family members who may learn second-hand from students about the presentation as indirect recipients. (However, if there is a school homework assignment related to the RCRC principles in which students interact with family members, then these household members can be counted as indirect recipients.)	Disaggregated data should be recorded by grade and corresponding with age, including sex, disability and other relevant characteristics, e.g. ethnicity or religion.
6. Community radio and TV broadcasts – As part of an HIV/AIDS awareness raising campaign, a NS targets a region of the country (including multiple urban and rural areas) with radio and TV broadcasts.		
People Directly Reached Direct recipients are not applicable because people have not yet received services for RCRC personnel to verify.	**People Indirectly Reached** Estimate counts of indirect recipients based on estimates of the radio listenership and television viewership. Oftentimes, these audiences can be estimated from marketing information available for commercial purposes from the broadcasting service. Do not estimate counts of indirect recipients receiving second-hand messaging from first-hand listeners, (people who did not listen or view the radio or TV messaging themselves but learned about it from others who did).	**Disaggregation** Disaggregated data should be recorded of recipients of HIV/AIDS messaging, including sex, age, disability/injury and other relevant socio-demographic data.
7. Bridge and/or road construction project – Following an earthquake, the recovery phase involves a NS constructing bridges and repairing roads in the impacted region.		

People Directly Reached A catchment count of the local population served by the bridge and road construction can be used to estimate the count of direct recipients, (ideally through reliable census data). Even though RCRC personnel are not present to verify use, it is reasonable to assume that the service will reach/impact people. However, as Box 5 highlights, there should be reliable justification that everyone in the catchment area is indeed served by the bridges/roads; for example, if a bridge serves one neighbourhood in large urban area, the catchment count should be limited to that neighbourhood.[23]	People Indirectly Reached Per the methodology described for counting direct recipients, counts of indirect recipients are not applicable.	Disaggregation Accurate disaggregation of indirect recipients is not possible because RCRC personnel are not physically present to record this data during bridge and road use. However, if reliable socio-demographic data is available through census data specific to the catchment area, this can be used to estimate disaggregation, such as sex, age, disability and any other relevant traits. Otherwise, a statistical sampling method can be used to disaggregate the catchment population, (contingent on time and resources).
8. Construction of a community clinic or hospital – Following an earthquake, the recovery phase involves a NS constructing bridges and repairing roads in the impacted region.		
People Directly Reached Direct recipients are not applicable because people have not yet received services for RCRC personnel to verify.	**People Indirectly Reached** Estimate counts of indirect recipients using a catchment count of the local population served by the health facility, (ideally through reliable census data). Even though RCRC personnel are not present to verify use, it is reasonable to assume that the service will serve people through increased health security. However, as Box 5 highlights, there should be reliable justification that everyone in the catchment area is indeed served by health facility; for example, if facility serves	**Disaggregation** Accurate disaggregation of indirect recipients is not possible because RCRC personnel are not physically present to record this data during bridge and road use. However, if reliable socio-demographic data is available through census data specific to the catchment area, this can be used to estimate disaggregation, such as sex, age, disability and any other relevant traits.

[23] Note that an electronic road meter can be used to record people/vehicles using a bridge or road, but this would be a metric of usage and not distinct people reached; this is because repeat users would lead to double-counting and inflate counts of people reached.

	one neighbourhood in large urban area, the catchment count should be limited to that neighbourhood.	
9. Hospital (or health clinic) services – A NS branch operates a hospital and a health clinic serving 5 large neighbourhoods in a municipal region of a mega-city (e.g. in Beirut, Nairobi, Bangkok, or Bogota).		
People Directly Reached Community members treated in the hospital should be counted as direct recipients. However, to avoid double counting, only count each person once per the reporting period, even if they have received more than one medical service (e.g. a flu vaccination one month, and stitches for a laceration another month). Also, only count each person once even if they may have received medical services at both the hospital and clinic. This will require reliable data management systems for patient registration by individual identities (whether names or codes) at each facility, and the linking of this data between facilities for aggregation. Also, if the hospital programme has objectives that target any employees as service recipients (e.g. through gainful employment, training, etc.), they would also be counted as direct recipients, as well as their household members (See Box 5 above).	**People Indirectly Reached** Do not estimate counts of community members assumed to indirectly benefit from increased health security by the presence of the hospital.	**Disaggregation** Disaggregated data should be recorded of people treated at the hospital, including sex, age, disability/injury and other relevant sociodemographic data. Similarly, if the program does target employees, SADD and relevant sociodemographic characteristics should be recorded of employees and their household members.
10. Roadside billboards, roadside or community signs – these outlets are often used for messaging with awareness raising campaigns for health programmes and safety programme, social inclusion, etc. For example, a sign in a post-disaster community discouraging open deification, or with an HIV awareness raising campaign encouraging condom use, or a migration awareness raising encouraging tolerance and acceptance of different peoples.		
People Directly Reached Direct recipients are not applicable because RCRC personnel are not physically present to verify people receiving messaging.	**People Indirectly Reached** Indirect counts of people reached should be estimated according to context. For example, if a billboard is in a relatively small, rural village with only several roads and a population of 2000 adults, it would be reasonable to use this catchment count of 2000 as indirect recipients. However, if the billboard is on one	**Disaggregation** Accurate disaggregation of indirect recipients is not possible because RCRC personnel are not physically present to record this data during service delivery. However, if reliable socio-demographic data is available through secondary sources specific to the catchment area, this can be

	street in a large urban area with a population of 1.8 million people, then the catchment count of indirect recipients should be limited to the surrounding population of adults – which can either be obtained through census data disaggregated by urban area, and if this is not available, then through estimating the adult population based on household density averages for the particular urban setting (which local partners should be able to help determine).	used to estimate disaggregation, such as sex, age, disability and any other relevant traits.
11. Video messaging for a road safety and traffic through YouTube video – A NS has a nation-wide campaign to reduce injury or death due to road and traffic related accidents. A key component of the campaign is a YouTube video communicating messaging for attitudinal and behaviour change regarding the use of seatbelts and helmets and observing traffic safety laws.		
People Directly Reached Direct recipients are not applicable because RCRC personnel are not physically present to verify people receiving messaging.	**People Indirectly Reached** As Box 6 highlights, the accurate measurement of indirect recipients for initiatives using social media can be challenging. This particular example is one for which there is NOT an easy way to determine people reached (viewers) of the video. YouTube Analytics can be used to determine how many views through a Watch-time Report, but this can include repeat views from the same person. YouTube analytics can also be used to generate a Devices Report of the different devices and operating systems that viewers use to watch your videos. However, this still does not provide distinct counts of individual people reached. Nevertheless, they, and other YouTube metrics can help better understand service outreach. Learn more at YouTube Watch-time	**Disaggregation** Accurate disaggregation of indirect recipients is limited because RCRC personnel are not physically present to record this data during service delivery. However, the Demographics Report from YouTube Analytics does its best to provide a report is organized by gender distribution and age group for your channel or video. However, just as accurate counts of individual people reached (versus repeat viewers) is limited, so will this demographic disaggregation be limited in accuracy.

	Reports, and as advised in Box 6, seek out technical advice from communication and IT specialists.	
12. Downloads and use of software applications – As part of its disaster risk reduction programming, a National Society has developed a software application to explain to people how to best prepare for and respond to relevant disasters for their area (e.g. earthquakes or floods). Users of this software application access and download it online.		
People Directly Reached Direct recipients are not applicable because RCRC personnel are not physically present to verify people receiving messaging.	**People Indirectly Reached** Indirect counts of people can be estimated through a registration process set up before people can download the application. People can register by name, age, sex and other desirable socio-demographic characteristics; this data can then be used to count distinct individuals who download the application, versus double counting people who may download the application multiple times to different devices.	**Disaggregation** Accurate disaggregation of indirect recipients is limited because RCRC personnel are not physically present to record this data during service delivery. Registration for application download can request information to disaggregate by sex, age, disability and other relevant socio-demographic data. But note that data accuracy will be compromised if people fabricate registration information.
13. Taxi driver road safety programme – A NS road safety programme trains taxi drivers to provide safety messaging to passengers, such seatbelt use.		
People Directly Reached Direct recipients include those taxi drivers trained by the RC personnel.	**People Indirectly Reached** Do not estimate counts of taxi passengers assumed to receive taxi driver messages, such as reminders to use their seatbelt, unless there is a reliable means to verify passengers and messaging, such as an automated recorded message when the driver starts the taxi meter.	**Disaggregation** Disaggregate direct counts of taxi drivers by age, sex and disability. Disaggregation of taxi passengers (indirect receipts) will likely not be possible unless the taxi driver (and service) agrees to record such information as passenger's sex, and request age information, etc.
14. Cash-for-work programme – Following a tsunami, a NS implements a cash-for-work programme providing much needed income to participating community members for their labour helping to clean up debris caused by the tsunami, with no more than one HH member participating in the CFW programme`.		
People Directly Reached	**People Indirectly Reached** If CFW projects benefit community members by providing environmental sanitation,	**Disaggregation** Disaggregate CFW HH data by sex, age, disability and other vulnerabilities. Also, consider other

Count CFW participants and their respective household members once for the reporting period as direct recipients (see Box 4). This information can be obtained through participant registration in the CFW programme.	infrastructure, or other forms of public works, then community members served by this can be counted as indirect recipients. (However, community members should not be counted on the justification that introduced cash stimulates certain industries or stimulates the economy, unless this is planned for and executed as part of the CFW programme objectives.)	sociodemographic disaggregation relative to the intervention, such as household income levels, education levels, job/vocational training, etc. This information can be obtained through participant registration in the CFW programme.
15. Establishment of an early warning system – As part of a disaster risk reduction (DRR) programme, a NS establishes or improves early warning systems (EWS) in 60 target communities in a disaster-prone region of the country.		
People Directly Reached Count as direct recipients the population of those communities (if any) for which the EWS is triggered during the reporting period by a disaster and works as intended.	**People Indirectly Reached** If the EWS is not triggered for an actual disaster, then community populations can be counted as indirect recipients in those communities for which the EWS is successfully tested during a disaster simulation. (In the past, people served by interventions that provide a potential future service, such as an EWS, were considered "people covered," but for simplicity, the IFRC has decided to include such service as part of indirect recipient counts.)	**Disaggregation** Disaggregate by sex, age, disability and other vulnerabilities. Also, consider other sociodemographic disaggregation relative to the intervention: e.g. income level, education, etc. This data can be obtained from secondary sources of census data if reliable and relevant to programme area, or through primary data collection of household profiles.
16. Advocacy for national policy development or change – Often a NS or the IFRC will participate in an advocacy campaign to develop or change national or regional policy, such as that towards migration and social inclusion, climate change, health, or disaster preparedness.		
People Directly Reached Count as direct recipients' specific politicians and other stakeholders directly reached by RCRC advocates.	**People Indirectly Reached** Do not assume and count as indirect recipients the whole country or region served by any resultant policy change or development – this assumption is too extreme.	**Disaggregation** Disaggregate direct recipients by sex, age, disability and other relevant characteristics, such as political party, ethnicity, region of origin, etc.

Annex 2 | The Washington Group Short Set of Question on Disability[24]

When delivering the questionnaire, it is important to use the full set of implementation instructions on the Washington Group website. More detailed data collection can be conducted using the Washington Group Extended Set Questionnaire on Disability. Furthermore, age-appropriate short questionnaires for counting children with disabilities developed by the Washington Group in partnership with UNICEF can be found on the webpage for the Washington Group Question Sets for Child Disability

1) **Do you have difficulty seeing, even if wearing glasses?**
   a) No - no difficulty
   b) Yes – some difficulty
   c) Yes – a lot of difficulty
   d) Cannot do at all

2) **Do you have difficulty hearing, even if using a hearing aid?**
   a) No- no difficulty
   b) Yes – some difficulty
   c) Yes – a lot of difficulty
   d) Cannot do at all

3) **Do you have difficulty walking or climbing steps?**
   a) No- no difficulty
   b) Yes – some difficulty
   c) Yes – a lot of difficulty
   d) Cannot do at all

4) **Do you have difficulty remembering or concentrating?**
   a) No – no difficulty
   b) Yes – some difficulty
   c) Yes – a lot of difficulty
   d) Cannot do at all

5) **Do you have difficulty (with self-care such as) washing all over or dressing?**
   a) No – no difficulty
   b) Yes – some difficulty
   c) Yes – a lot of difficulty
   d) Cannot do at all

6) **Using your usual (customary) language, do you have difficulty communicating, for example understanding or being understood?**
   a) No – no difficulty
   b) Yes – some difficulty
   c) Yes – a lot of difficulty
   d) Cannot do at all

[24] UN Statistical Commission 'Washington Group' on Disability Statistics, "The Washington Group Short Set of Questions on Disability." Accessed 2017.