### Education Sector

#### Project Area:
TEFL

#### Project Activity Area/Training Package:
English Proficiency

#### Type:
Outcome

#### Unit of Measure:
Students

#### Disaggregation:
- Sex: Male, Female
- Age: 5-9, 10-14, 15-24

### Definitions:

**Written Composition in English** – the production of a sample of meaningful text in writing

**Academic** – school-related activities (i.e., passing exams)

**Professional** – job-related activities (i.e., writing a resume)

**Class content** – topics, knowledge, or information learned in class

**Formal or informal assessments include but are not limited to** – on-going records, oral fluency assessment, improved student performance in fast reading (skimming or scanning) in English, more correctly answering lower and higher order comprehension questions after completing readings in English, or more effective application to post reading tasks conducted in English

### Rationale:
An increase in the number of students who improve their English language skills will broaden their academic and professional opportunities.

### Measurement Notes:

1. **Sample Tools and/or Possible Methods (for Peace Corps staff use):** Volunteers should use data collection tools to measure progress against project indicators. A data collection tool to measure this indicator could be based on one of the following methods—observation, interview—though there may be other data collection methods that are appropriate as well. For more information on the suggested methods, please see [Appendix I in the MRE Toolkit](#). Also be sure to check [this link](#) on the intranet page as sample tools are regularly uploaded for post use. Once a tool has been selected and/or developed for the post, staff should have a few Volunteers and their partners pilot it, and then distribute and train Volunteers on its use.

2. **General Data Collection for Volunteer Activities:** All Volunteer activities should be conducted with the intention of achieving outcomes – knowledge change (short-term), skills demonstration (intermediate-term), and behavioral changes (intermediate to long term) as defined by the progression of indicators within the objectives of a project framework. The progression of measurement for all Volunteer activities should begin with baseline data being conducted prior to the implementation of an activity (or set of activities), followed by documenting any outputs of the activities and then later at the appropriate time, measurements of specific outcomes (see “Frequency of Measurement”).

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**Students: English Literacy** - Number of students, out of the total number of students the Volunteer/partner worked with, who demonstrated improved performance in reading or written composition in. (ED-005-C)
3. **Activity-Level Baseline Data Collection**: Activity-level baseline data should be collected by Volunteers/partners before or at the start of their activities with a student or group of students. It provides a basis for planning and/or assessing subsequent progress or impact with these same people. Volunteers should take a baseline measurement regarding the outcome(s) defined in this data sheet. Volunteers should collect baseline information early in their work with students, and may use their judgment to determine timing because the information will be more accurate if the Volunteer has built some trust with the students first. The information for the baseline measurement will be the same or very similar to the information that will be collected in the follow-on measurement (see “Frequency of Measurement”) after the Volunteer has conducted his/her activities and it is usually collected using the same data collection tool to allow for easy management of the data over time.

Because Volunteers are expected to implement relevant and focused activities that will promote specific changes within a target population (see “Unit of Measure”), taking a baseline measurement helps Volunteers to develop a more realistic snapshot of where students within the target population are in their process of change instead of assuming that they are starting at “0.” It also sets up Volunteers to be able to see in concrete terms what influence their work is having on the students they work with during their service. Please note that data collection is a sensitive process and so Volunteers will not want to take a baseline measurement until they have been able to do some relationship and trust-building with the person/people the Volunteer is working with, and developed an understanding of cultural norms and gender dynamics.

4. **Frequency of Measurement**: For reporting accurately on this outcome indicator, Volunteers must take a minimum of two measurements with students of the target population reached with their activities. After taking the baseline measurement (described above), Volunteers should take at least one follow-on measurement with the same student(s), typically 

- **after** completing one or more activities focused on achieving the outcome in this indicator and once they have determined that the timing is appropriate to expect that the outcome has been achieved. Once Volunteers have measured that at least one student has achieved the indicator, they should report on it in their next VRF.

Volunteers may determine to take more than one baseline and one follow-on measurement with the same student (or group of students) for the following valid reasons:

- a. Volunteers may want to measure whether or not any additional students initially reached with activities have now achieved the outcome in the indicator, particularly for any activities that are on-going in nature (no clear end date);
- b. Volunteers may want to enhance their own learning and the implementation of their activities by using the data collected as an effective monitoring tool and feedback mechanism for the need to improve or increase their activities;
- c. A Peace Corps project in a particular country may choose to increase the frequency of measurement of the indicator and Volunteers assigned to that project will be required to follow in-country guidance.

In all cases, any additional data collection above the minimum expectation should be based on the time, resources, accessibility to the target population, and the value to be gained versus the burden of collecting the data. Following any additional measurements taken, Volunteers should report on any new students achieving the outcome in their next VRF.

5. **Definition of Change**: The minimum change to report against this indicator is any student demonstrating improved performance in reading or written composition in English for academic or professional purposes (based on class content), through formal or informal assessment.
6. **General Reporting in the VRF:** The “number achieved” (or numerator) that Volunteers will report against for this indicator in their VRFs is the number of students who, as a result of working with the Volunteer, demonstrated improved performance in reading or written composition in English for academic or professional purposes (based on class content), through formal or informal assessment. The “total number” (or denominator) that Volunteers will report on for this indicator in their VRFs is the total number of students who participated in the activities designed to meet this indicator.

7. **Reporting on Disaggregated Data in the VRF:** This indicator is disaggregated by “Sex” and “Age.” When reporting in the VRF, a Volunteer should disaggregate the students who achieved the outcome based on male and female gender and by age group. When entering data, the Volunteer will report the number achieved and the total number with whom they worked for each of six rows: “Male Age 5-9,” “Male Age 10-14,” “Male Age 15-24,” “Female Age 5-9,” “Female Age 10-14,” and “Female Age 15-24.”

**Data Quality Assessments (DQA):** DQAs are needed for each indicator selected to align with the project objectives. DQAs review the validity, integrity, precision, reliability, and timeliness of each indicator. For more information, consult the Peace Corps MRE Toolkit.

**Alignment with Summary Indicator:** ED IMPROVED STUDENTS