



**Terms of Reference for
Evaluation of
UNFPA Egypt 9th Country Program
Mid 2013- End 2017**

**Egypt Country Office
April 2016**

1. Context

Egypt is a low middle income country; GNI per capita is \$3,050 (WB 2014)¹, it is the most populated in the Middle East. Egypt is at a stage of demographic transition with a marked "youth bulge," a period in which the proportion of youth in the population increases significantly compared to other age groups. 61% of the population is under the age of 30 and 40% between the ages of 10 and 29 (SYPE, 2009 and 2014)².

The youth bulge will become a demographic dividend, where economic benefit arising from increase in the ratio of working-aged relative to dependents can be harnessed. However, if a large cohort of young people cannot find employment and earn satisfactory income, the youth bulge will become a demographic issue, because a large mass of frustrated youth is likely to become a potential source of social and political instability. In Egypt, youth (15-24) unemployment rate is 34% (HDR, 2015)³. The dynamic population provides both latent productive capacity and increasing consumer demand. The technological aspects in Egypt are limited, all elements of the innovation pillars got low scores including R&D activity (GCR, 2016)⁴.

Egypt's political transition culminated in the election of a parliament, which held its first session in January 2016. The economic outlook since the July 2014 Presidential election looks optimistic. Assumptions expect economic growth to average 4.2% in 2016 onward as political stability improves and economic reform progresses. Yet economic recovery remains fragile due to high inflation rate, budget deficit, high outstanding public debt to GDP ratio; and a rising unemployment rate.

Actually, Egypt has made advances along a number of human development indicators, but economic growth has been moderate, insufficient to absorb the rapidly growing population and labour force. Child mortality, life expectancy, primary and secondary school enrolment, and literacy rates have improved in the past thirty years, while average per capita income growth has been around 2% per year since 1980 resulting in an increase in poverty rates.

In the course of implementing the current UNFPA CP, Egypt has faced the consequences of two consecutive revolutions; where the political landscape reflected instability and anxiety that generated on-going protests, increased violence and strikes by segments within the society. That in-turn, impacted some of the gained development results as the political and social unrest resulted in change of strategic directions in many areas and affected the national priorities. According to Demographic Health Survey (EDHS 2014)⁵, the Family Planning indicators deteriorated, such as decline in contraceptive prevalence rate, negative shift in method mix from Long-Acting to Short-Acting that allows higher discontinuation rate, decreased utilization of public sector services by beneficiaries, and increased unmet need.

Egypt is aiming through the recently launched *Egypt 2030 Sustainable Development Strategy*, to raise Gross Domestic Product (GDP) to >10% in 2030, up from the 4.2%, and to reduce the budget deficit to 2% from 11%. The strategy is aligned with the 2030 Agenda for Sustainable Development. Reinforcing the role of youth in sustainable development, the president of Egypt declared 2016 is the year of youth.

¹ World Bank <http://data.worldbank.org/country/egypt-arab-republic>

² Survey on Young People: http://egypt.unfpa.org/Images/Publication/2015_06/6be3baf2-61e3-4de4-bc9b-221f5180cd18.pdf

³ UNDP Human Development Report: <http://hdr.undp.org/en/countries/profiles/EGY>

⁴ Global Competitiveness Report: <http://reports.weforum.org/global-competitiveness-report-2015-2016/economies/#economy=EGY>

⁵ Demographic Health Survey: http://dhsprogram.com/Publications/Publication-Search.cfm?ctry_id=10&country=Egypt

Based on indicators, an overview of Egypt needs/challenges and interests/capacities is found under Annex A.

2. Background

In close collaboration with Government of Egypt and based on a situation analysis, the United Nations Development Assistance Framework (UNDAF, mid 2013-2017) was developed where five priority areas were identified for interventions by UN. At the same time, UNFPA Egypt Country Office (CO) developed its 9th country programme (CP), in consultation with national partners. The program aims to expand the possibilities for women and young people to lead healthy and productive lives, by tackling reproductive health, gender and population needs and working with implementing partners to accelerate progress in addressing those needs.

The CP is composed of three outputs that are measured by ten indicators, in addition to one output selected from UNFPA global Strategic Plan 2014-2017 (SP) and the relevant indicators. The CP contributes to four UNDAF outcomes in three priority areas, and its focus areas are reproductive health (RH), young people, population and development (PD) and gender based violence (GBV). The CP works to strengthen health systems/duty bearers to fulfill their obligations on the supply side, and assists community members/rights holders to claim their rights on the demand side. Also the program works to support knowledge generation to supply decisions makers with evidence. The geographical focus of the grass root interventions is Upper Egypt namely Assiut and Sohag. The CP estimated budget is \$14 million from both regular and other resources.

To mention, the SP was developed in the course of implementing the CP, where a new business model was introduced to respond to the changing environment in program countries, to improve focus and coherence of UNFPA work, and to deploy resources to where most in need. The model classifies countries based on their ability indicator (GNI per capita) to finance their own development, and the countries social needs indicators (MMR etc) where the modes of engagement (the how) with national partners were defined. Egypt was classified as yellow country where the focus must be on upstream interventions, namely 1) Advocacy and Policy dialogue/advice 2) Knowledge management. In 2014, Egypt CO had to align its 9th CP strategies to the new modes of engagement, while guaranteeing the achievement of same CP outputs, where the focus was on aspects of change linked with capacity development and service delivery interventions according to the program design and Theory of Change at the time of CP development.

The purpose of this evaluation is to conduct an end of country program evaluation (CPE) to demonstrate accountability to stakeholders on performance achieved. The primary audiences of this evaluation are UNFPA senior management, executive board, donors, government partners, and CP managers. Most of the program partners especially the government are part of the evaluation process either as sources of data (primary/secondary) or through representation in the evaluation reference group (ERG).

3. Objectives and Scope of the Evaluation

The overall objective of the CPE is to provide an independent assessment of the effectiveness and relevance of UNFPA Egypt 9th country program and to inform the design of the next program. Furthermore, the CPE is expected to highlight important lessons to enrich the knowledge base of UNFPA

for learning in order to improve the quality of future actions. The specific objectives cover two analyses, a) CP focus areas namely RH, GBV PD and young people b) CO strategic positioning within Egypt developing community and national partners and they are:

- Assess relevance of the program and progress in the achievement of outputs and outcomes against what was planned (effectiveness) in the country program action plan (CPAP), as well as efficiency of interventions and sustainability of effects;
- Assess responsiveness of the CO to changes/additional requests from national partners caused by an evolving country context as well as by the influx of Syrian refugees to the country
- Assess the added-value of UNFPA program to the national partners and to the development community in Egypt
- Assess alignment of CPAP with the UN Development Assistance Framework (UNDAF) and role of UNFPA country office as an active contributor to the coordination mechanism of the UN country team.

The scope of the evaluation is to cover activities implemented from mid-2013 to mid-2016 with ministries/institutions/NGOs involved in the CP implementation. Some interventions are implemented at the national level, others target specific governorates namely Assiut, Sohag and Greater Cairo. The CPE will cover the 3 outputs of the CPD 2013-2017 in addition to one output selected from UNFPA SP on PD. Also contributions of the outputs to humanitarian needs are covered in the evaluation.

4. Evaluation Criteria and Evaluation Questions

UNFPA [Handbook on How to Design and Conduct a Country Program Evaluation](#) (HB) spells out the approaches and methodologies of designing and conducting an evaluation, and is considered as the main guiding document to accomplish this evaluation. In the process of designing and conducting the evaluation, a set of tools and resources are available in Part III of the Handbook that support the evaluators as well as a number of templates recommended to be used throughout the different phases of the evaluation.

The evaluation will follow OECD/DAC criteria: Relevance, Efficiency, Effectiveness and sustainability to analyze and evaluate the focus areas namely RH, PD & GBV, in addition to analysis of CO strategic positioning with regard to responsiveness, added value and coordination with UN country team in Egypt.

Below is the list of indicative questions, the final list will be formulated by the evaluation team in the design report. The total number of Evaluation Questions (EQs) should be limited to ten maximum (the selection will be made in the long list of questions under Effectiveness criteria).

Relevance:

1. To what extent are the interventions of UNFPA Egypt CP 2013-2017 (1) relevant to the needs of the intended beneficiaries (women and young people); (2) in line with the government priorities; and (3) aligned with UNFPA policies and strategies?
2. To what extent has the CO been able to respond to changes in national needs and shifts caused by major political changes?

Efficiency:

3. To what extent did the intervention mechanisms (organizational procedures) foster or hinder the achievement of the program outputs?

4. To what extent has UNFPA made good use of its human, financial and technical resources in pursuing the achievement of the results defined in the country program?

Effectiveness:

5. To what extent has UNFPA support helped to ensure RH and the needs of young people, GBV issues and population and development are appropriately integrated into the national systems and are positioned on the national agenda?
 - a. To what extent has the CP contributed to improving the capacity of the national health system to provide high-quality maternal health services to women of reproductive age?
 - b. To what extent have the interventions supported by UNFPA in the field of reproductive health (RH) contributed to (or are likely to contribute to) improved access and utilization of maternal health and family planning services, including deprived communities?
 - c. To what extent has the CP contributed to strengthening the national capacities for community-based interventions in reproductive health to empower women and young people?
 - d. To what extent has the CP contributed to creating demand and raising awareness on RH services through utilization of social media platforms?
 - e. To what extent has the CP contributed to enhancing the institutional mechanisms to protect against and respond to gender-based violence against women and girls? (In particular by helping to build the national capacity to implement laws and policies that curtail harmful practices i.e. FGM/C)?
 - f. To what extent has the CP strengthened national capacity for using data and evidence to monitor and evaluate national policies and programs in the areas of population dynamics, sexual and reproductive health and reproductive rights, HIV, adolescents and youth and gender equality, including in humanitarian settings?
 - g. To what extent have the interventions supported by UNFPA in the field of population and development (PD) contributed to an increased availability and use of data on emerging population issues at central and local levels?
 - h. To what extent has CO humanitarian assistance contributed to an improved emergency preparedness and response for SRH and GBV in Egypt?

Sustainability:

6. To what extent has the CP been able to support its partners and beneficiaries in developing capacities and establishing mechanisms (for example: youth friendly services) to ensure ownership and sustainability of achieved results?

UNFPA Added Value:

7. What are the main UNFPA comparative strengths in Egypt, particularly in comparison to other UN agencies?
8. What is the main UNFPA added value in the country context as perceived by national stakeholders?

9. To what extent was the CO able to shift the mode of engagement and focus on upstream interventions?

UNCT Coordination Mechanisms:

10. To what extent is the UNFPA CO coordinating with other UN agencies in inter-agency overlapping activities?
11. To what extent was this coordination effective to boost the program implementation and achieve better results?

5. Evaluation Methodology and Approach

Methods for Data Collection: The evaluators are expected to review and refine the evaluation questions and develop the evaluation matrix. For data collection, the evaluation will use both primary and secondary data that could include desk reviews, group and in-depth interviews, and field visits.

Validation mechanisms: The evaluation team will use a variety of methods to ensure that the data is valid, including systematic triangulation of data sources and data collection methods. The precise methods of data collection, analysis and validation will be detailed in the design report.

Selection of the Sample of the Stakeholders: The evaluation will adopt an inclusive approach that involves a range of stakeholders to generate diverse views on the program performance. The evaluation team will consider both UNFPA direct and indirect partners including beneficiaries of the program to participate in the evaluation, a stakeholders' map will be handed to the team.

Evaluability assessment, Limitations and Risks: The team needs to explain data gaps and describe factors that restrict access to sources of information. In case of lack of sufficient results framework, setting ad-hoc proxy indicators that can be used as a reference to establish the degree of progress and success of the intervention is required.

6. Evaluation Process and Expected Deliverables

The evaluation will be conducted over a period of five months with a total of 116 working days; it can be divided into three phases each including several steps:

Phase 1: Design phase (1.5 months):

For desk review, mapping of stakeholders (Annex B refers), analysis of intervention logic, refining the evaluation questions in the evaluation matrix⁶, development of data collection tools/ interview guides and analysis strategy, development of a concrete work plan for the field visits, and ends with production of the Design Report⁷ (20 – 30 pages maximum). The design report provides clarification on methodology, tools, division of labor among the evaluation team, a work-plan to reflect timelines as per ToR, agenda for the field phase, and validation mechanisms to enable verification of preliminary findings.

⁶ HB, Evaluation matrix Page (109-122) Annex C

⁷ HB, Design Report: Page (157-167) Annex D

Phase 2: Field phase:

For data collection, validation, analysis and drafting a set of preliminary findings, conclusions and recommendation, preliminary results are to be presented (power-point presentation) to the CO during a debriefing session at the end of field phase.

Phase 3: Synthesis Phase:

Based on the sound analysis of the preliminary findings, conclusions will be derived from findings and need to be assembled by homogeneous "clusters". Recommendations will be derived from conclusions; recommendations may be organized by clusters (strategic and programmatic). Within each cluster, recommendations need to be ranked by priority level, with a time horizon. The report must mention to whom recommendations are addressed. For submission of the 1st draft final report for comments by evaluation reference group, a 2nd draft final report incorporating feedback follows. Based on the 2nd draft a presentation is to be disseminated in a seminar, to be shared with key counterparts for comments. The final evaluation report⁸ taking into account all potential comments is the last deliverable with a maximum of 70 pages plus annexes.

All deliverables will be drafted in English. Final CPE (e-copy) will be disseminated to all partners and will be posted on UNFPA evaluation database along with the management response⁹ to the CPE recommendations and the CPE final quality assessment (EQA¹⁰) by Egypt CO.

Indicative Timeframe

	Phases/Deliverables	Timeline (start and end)
1	Preparatory Phase (drafting/ Finalization of ToR/ constitution of ERG/preparation of documents)	Jan-May 2016
	Advertisement and recruitment of evaluation team	May-July 2016
2	Design Phase – design report	Aug-Mid Sept 2016
3	Field phase – complete evaluation matrix and ppt presentation	Mid Oct 2016
4	Synthesis Phase 1 st draft final report (Mid Nov)-2 nd draft final report (1 st week in Dec)-Presentation- Final evaluation report (last week in Dec)	Mid Nov-Dec 2016

7. Required Skills and Experience

The evaluation team will be composed of a team leader and two national experts. The selection of the evaluation team will be based on ensuring a consortium of experts specialized in UNFPA focus area and in evaluation.

⁸ HB, Evaluation Report: Page (168-181) please refer to Annex E

⁹ HB, Management Response: Page (100) please refer to Annex F

¹⁰ HB, EQA: Page (208-212) please refer to Annex G

Education:

Masters in relevant field of social science, health, development studies and human rights or comparable field

Experience (team leader)

- At least 10 years of directly relevant professional experience in conducting and managing project and program evaluations of development aid at country/field level.
- Expertise in one UNFPA programmatic areas is required, such as reproductive health/maternal health, including knowledge of themes relevant to: Family planning, human resources in the health sector, and gender issues or Population/demography focus area
- Knowledge of United Nations system, demonstrated capacity for strategic thinking and policy advice, familiarity with UNFPA or United Nations operations will be advantage.
- Fluency in English, knowledge of Arabic
- Excellent oral and written English

Responsibility (team leader)

- Have the overall responsibility for the production of the draft and final evaluation reports
- Responsible for the evaluation of one focus area (either RH, GE, or PD)
- Lead and coordinate the work of the evaluation team
- Responsible for the quality assurance of all evaluation deliverables.
- Debrief the findings, and present in the dissemination workshop

Experience (team members)

- At least 5 years of experience in conducting evaluation of projects
- Solid understanding of evaluation methodologies, a proven expertise of research in social science
- Expert in one of UNFPA thematic areas, namely sexual and reproductive health, population/demography or gender issues
- Proven drafting skills in English
- Ability to provide deliverables on time

Responsibility (team members)

- Prepare the design report in accordance with UNFPA standards
- Evaluate the UNFPA's contribution to the relevant thematic areas of the CP
- Participate in the debriefing meetings
- Deliver quality reports on time

The team must be committed to respecting deadlines of delivery outputs within the agreed timeline, and be able to work in a multidisciplinary team and multicultural environment. The division of labor is to be spelled out in the design report.

The work of the evaluation team will be guided by the Norms and Standards established by the UN Evaluation Group (UNEG). Team members will adhere and sign on the Ethical Guidelines for Evaluators in the UN system and the code of conduct.

Duration of Contracts and Remuneration

Indicative distribution of workdays among the team of experts will be as follows:

	T I	Expert 1	Expert 2
Design phase	8	5	5
Field phase	15	15	15
Reporting phase	22	12	12
Total days	45	32	32

Payment of fees will be based on the delivery of outputs, as follows:

- Approval of the design report 20%
- Approval of the draft final evaluation report 50%
- Approval of the final evaluation report 30%

Daily subsistence allowance will be paid per nights spent at the place of the mission following UNFPA DSA standard rates. Travel costs will be settled separately from the consultant fees.

Application process

Interested candidates can apply by submitting a UN Personal History, resume and a short cover note explaining why they are well suited to undertake the evaluation to Egypt.jobs@unfpa.org by **27 June 2016**. In addition, to a clear statement by candidates stating their independence from any organization that have been involved in designing, executing or advising on any aspect of the interventions subject of the evaluation.

The UN terms and conditions will govern the engagement of consultants, including fee and remuneration levels.

8. Management of the evaluation

The management structure for the evaluation is composed of:

1. **Evaluation Manager (EM):** Under the overall guidance of UNFPA Representative for Egypt, the M&E associate will act as the evaluation manager to oversee the entire process of the CPE. The EM will support the team in designing the evaluation; will provide ongoing feedback for quality assurance during the preparation of the design report and the final report. Supported by the Regional M&E adviser, the EM will:
 - Prepare the terms of reference for the evaluation

- Identify potential evaluators and share with the Evaluation office for pre-qualification
 - Compile a preliminary list of background information on both the country context and UNFPA CP
 - Constitute an evaluation reference group
 - Prepare a first stakeholders mapping (Annex B) of the main partners relevant to the CPE and the country overview (Annex A)
2. **Evaluation Reference Group (ERG):** will be composed of representatives from national partners, country and regional offices. The ERG will provide guidance and comments on implementation and the main deliverables of the evaluation, and advice on the quality of the work done. The ERG is responsible for:
- Contribute to the selection of the evaluation team
 - Provide comments on the design report
 - Facilitate access of evaluation team to information sources/interviewees to support data collection
 - Provide comments on the main deliverables of the evaluation
 - Advise on the quality of the work performed by the evaluation team

Quality Assurance:

Each phase of the evaluation will go through a rigorous quality assurance mechanism for validation as follows:

- Design phase: the report will be approved by the evaluation manager, after contribution from the Regional Office, the evaluation reference group and the Evaluation Office adviser/HQ.
- Field phase: the evaluation manager will be responsible to ensure that the data collection is in accordance with the approved design report.
- Synthesis phase: the final report will be reviewed by the EM, ERG, M&E regional advisor, and the evaluation office to ensure credibility of the evaluation findings, soundness of conclusions, alignment of the recommendations to the findings and conclusions as well as feasibility of the recommendations.

Resources

Initial list of documents to be reviewed by the evaluation team

1) *Online*

- a) UNFPA Egypt Country Program Document and Country Program Action Plan:
 - <http://egypt.unfpa.org/english/publication/80d3a855-255e-4a9c-bf13-f8ca7732a81b>
 - <http://egypt.unfpa.org/english/publication/2bb00f8e-d5ca-4a50-9cdd-bb5ce8f8d7d9>
- b) UN Assistance Development Framework:
 - http://www.moic.gov.eg/MopRep/MIC/UNDAF%202013-2017--.pdf_1214201522131AM.pdf
- c) UNFPA Strategic Plan: <http://www.unfpa.org/strategic-direction>
- d) UNFPA 8th CP Evaluation: add the link
- e) How to Design and Conduct a Country Program Evaluation at UNFPA <http://www.unfpa.org/admin-resource/how-design-and-conduct-country-programme-evaluation-unfpa>

2) *Background Documents (to be handed to the evaluator prior inception)*

- List of Atlas projects for the 9th CP
- Copies of annual work plans for the 9th CP
- Country office annual reports during the cycle
- Resource Mobilization Strategy
- CP Reviews (quarterly and annual) during the cycle
- Trip and monitoring reports during the cycle
- CP Products: strategies- manuals – curricula – researches
- Annual budget and expenditure reports during the cycle
- Problem analysis and interventions logic
- Evaluation Report outline

3) *Annexes (to be handed to the evaluator prior inception)*

- A. Country Overview
- B. Stakeholders Map with online links
- C. Ethical Code of Conduct for UNEG/UNFPA Evaluations
- D. Evaluation Matrix
- E. Design report outline
- F. Structure of Final Report
- G. Tips for PPT on evaluation dissemination
- H. Evaluation Quality Assessment template and explanatory note
- I. Management response template

Online Resources relevant to UNFPA program areas

- Ministry of Planning, 2015-2016 Development Plan: <http://www.mop.gov.eg/plan/Plan2016.aspx?ModID=2&MID=31>
- Ministry of Planning, Sustainable Development Strategy: <http://www.mop.gov.eg/EGYPT'SVISION.html>

- Egypt's Progress towards MDG
http://www.mop.gov.eg/MopRep/Final%20MDG%20English.pdf_107201520545PM.pdf
- 2030 Agenda: <https://sustainabledevelopment.un.org/>

Annex A

Egypt Needs/Challenges								
MIC Sub-Category	Millennium Development Goals (MDGs)		Gender Development Index (GDI)		Poverty	Population	Age Distribution	Egypt Competitiveness worldwide
Lower Middle Income country	Achieved	Not achieved	GDI Group	GDI Value	Extreme Poverty (inability to get food-sever deprivation)	Population Size (2016 estimation, Base year: 2006 Census)	Median age	Global Competitiveness Index Rankings
\$3,050 in 2014	MDG 3.1 MDG 4.1 MDG 5.3 MDG 6 & MDG 7	MDG1 MDG2 MDG 3 (2 & 3) MDG 4.2 MDG 5 (1,2&4)	5	0.868	2.6% in 2012-2013 from 2.1% in 2010-2011	90,690,095	25 years (Est 2014)	116/140
Source: World Bank	Source : Egypt's Progress towards MDGs		Source: Human Development Report 2015		Source: CAPMAS	Source: CAPMAS Population Clock on 29 Mar2016	Index mundi	Source: Global Competitiveness Report 2015–2016
Egypt Interests & Capacities								
Commitment to Health	National Population Policy	Anti-ICPD Lobby?	Debt	Efficiency	Internet & Mobile penetration	ODA	Donors' forward spending plan	UNFPA Support
Health Expenditure as % of State total Exp.	Existence of population program to balance Pop Growth with economic	(Yes: Strong/ Moderate /Weak; No)	Public* Debt as % of GDP	Public Sector Performance	43% Internet penetration rate	Net ODA received (% of GNI)	CPA*/ GNI	Egypt lies in third yellow quadrat (61 countries are in first and second quadrants)
0.054	no	Moderate ??	0.945	3.3/7	115% mobile phone subscriptions (per 100 person)	2.1% in 2013	1.8 in 2013 to 0.7 in 2017	Egypt receives support based on this classification
Source: CAPMAS #STAT_Egy 2015	Source: Egypt Constitution Article #41		Source: IMF estimates 2015 *General Gov. gross debt	Source: Global Competitiveness Report 2015–2016	Source: CAPMAS	Source: WB - World databank	Source: OECD 2014 *CPA=Country Programmable Aid	Source: CP Regular resource Distribution (RDS) FOR 2014-2017

J. Sexual and Reproductive Health

SP O/C 1	Increased availability & use of integrated sexual & RH services (including FP, MH & HIV) that meet HR standards for quality of care & equity in access	
CPAP O/P	Improved capacity of the national health system to provide quality maternal health services to women of reproductive age	
Project	EGY09MRH	Maternal Health Services

Donors	Implementing Agencies	Other partners	Beneficiaries
UNFPA Norway European Community Japan USA Multi donor	MoHP/FP Sector http://www.mo hp.gov.eg/default.aspx	Population Council (Int'l) http://www.popcouncil.org/research/egypt	MoHP personnel at Central, governorates, districts levels
	MoHP/MCH Directorate	Researchers	SDPs at (government, NGOs, Private Sector, Hospitals) Ra'edat Refayat
	Aga Akhan NGO http://www.akdn.org/egypt_social.asp#nursing	WHO, Unicef, World Bank	WRA in the intervention governorates
	UNFPA CO http://egypt.unfpa.org/		

II. Adolescent Sexual and Reproductive Health

SP O/C 2	Increased priority on adolescents, especially on very young adolescent girls, in national development policies and programmes, particularly increased availability of comprehensive sexuality education & SRH	
CPAP O/P	Strengthened national capacity for community-based interventions in RH to empower women and young people	
Project	EGY09YRH	SRH for young people

Donors	Implementing Agencies	Other partners	Beneficiaries and Target Groups
UNFPA Norway	Youth & Dev. Consultancy Instit. http://www.etijah.org/	UN Agencies	selected YFC personnel & youth centers personnel
UNDP Multi-partner TF	Population Council (Int'l) MoHP/School Age Health Dept El Shehab Institution for Comprehensive Development http://www.shehabinstitution.org/	YPeer, IMFSA, Ma3looma https://www.facebook.com/YPeerEgypt/ https://www.facebook.com/ma3looma.net/?fref=ts	selected Peer-educators NGOs personnel Youth in the intervention governorates
	UNFPA CO	Ministry of Youth & Sports http://youth.gov.eg/pages/plan	MARPs (F sex workers) & M partners/G. keepers

III. Gender Based Violence

SP O/C3 Advanced GE, women's and girls' empowerment, & RRs, including for the most vulnerable & marginalized women, adolescents & youth

CPAP O/P 3 Enhanced institutional mechanisms to protect against and respond to GBV against women and girl

Project EGY09GBV Gender Based Violence

Donors	Implementing Agencies	Other partners	Beneficiaries and Target Groups
UNFPA	National Council for Women http://ncwegypt.com/index.php/en/home	CAPMAS http://www.capmas.gov.eg/	GBV service providers in targeted SDPs
Norway	AZHAR - IICPSR http://alazhar-iicpsr.org/?lang=en	UN Agencies	Religious leaders
Joint Program UNDP	Regional Center for Training		Decision makers
Multi-partner TF	MoHP/Curative Care Dept		Girls and vulnerable women in selected areas of intervention
Japan	Bishopric of Public Ecum.		
European Community	NGOs Union Against Harmful Practices on Women & Children		
USA	Care International In Egypt		
	Egypt Center for Women's Rights http://ecwronline.org/		
	UNFPA CO		

IV. Population & Development

SP O/C 4 Increased availability & use of integrated sexual & RH services (including FP, MH & HIV) that meet human rights standards for quality of care and equity in access

SP O/P 15 Strengthened national capacity for using data & evidence to monitor & evaluate national policies and program in the areas of population dynamics, sexual & reproductive health & reproductive rights, HIV, adolescents & youth and gender equality, including in humanitarian settings

CPAP O/P 2 Improved capacity of the national health system to provide quality maternal health services to women of reproductive age

Project EGY09PDC Data for M&E Policies

Donors	Implementing Agencies	Other partners	Beneficiaries and Target Groups
UNFPA	National Population Council http://www.npc.gov.eg/	Parliamentarians http://www.parliament.gov.eg/home/	Partners personnel (NPC, CAPMAS, Line ministries)
Norway	UNFPA CO	CAMPAS Bassera http://www.baseera.com.eg/home_en.aspx Ministry of International Cooperation http://www.moic.gov.eg/	Decision makers Poor & Vulnerable population (nationally)

Ethical Code of Conduct for UNEG/UNFPA Evaluations
RFP No. UNFPA/Evaluation

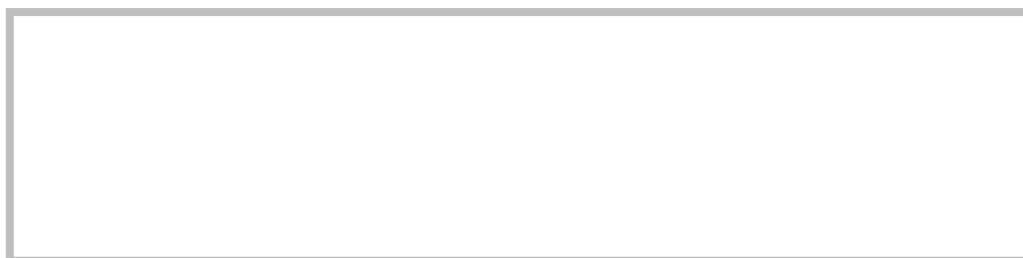
Evaluations of UNFPA-supported activities need to be independent, impartial and rigorous. Each evaluation should clearly contribute to learning and accountability. Hence evaluators must have personal and professional integrity and be guided by propriety in the conduct of their business. In particular:

1. To avoid **conflict of interest** and undue pressure, evaluators need to be **independent**, implying that members of an evaluation team must not have been directly responsible for the policy-setting/programming, design, or overall management of the subject of evaluation, nor expect to be in the near future. Evaluators must have no vested interests and have the full freedom to conduct impartially their evaluative work, without potential negative effects on their career development. They must be able to express their opinion in a free manner.
2. Evaluators should protect the anonymity and **confidentiality of individual informants**. They should provide maximum notice, minimize demands on time, and respect people’s right not to engage. Evaluators must respect people’s right to provide information in confidence, and must ensure that sensitive information cannot be traced to its source. Evaluators are **not expected to evaluate individuals**, and must balance an evaluation of management functions with this general principle.
3. Evaluations sometimes uncover suspicion of wrongdoing. Such cases must be reported discreetly to the appropriate investigative body.
4. Evaluators should be **sensitive to beliefs, manners and customs** and act with integrity and honesty in their relations with all stakeholders. In line with the UN Universal Declaration of Human Rights, evaluators must be sensitive to and **address issues of discrimination and gender equality**. They should avoid offending the dignity and self-respect of those persons with whom they come in contact in the course of the evaluation. Knowing that evaluation might negatively affect the interests of some stakeholders, evaluators should conduct the evaluation and communicate its purpose and results in a way that clearly respects the stakeholders’ dignity and self-worth.
5. Evaluators are responsible for the clear, accurate and fair written and/or oral presentation of study limitations, evidence based findings, conclusions and recommendations.

For details on the ethics and independence in evaluation, please see UNEG Ethical Guidelines and Norms for Evaluation in the UN System

<http://www.unevaluation.org/search/index.jsp?q=UNEG+Ethical+Guidelines>
http://www.unevaluation.org/papersandpubs/documentdetail.jsp?doc_id=21

[Please provide date, signature, and write “Read and approved” in the space below]



Evaluation Matrix

Evaluation Question (EQ) 1:			
Assumptions to be assessed	Indicators	Sources of information	Methods and tools for the data collection
			•
EQ 2:			
Assumptions to be assessed	Indicators	Sources of information	Methods and tools for the data collection
	• •		•

Template 8 - The design report structure

Cover page

UNFPA COUNTRY PROGRAMME EVALUATION: *NAME OF THE COUNTRY*
Period covered by the evaluation (2008-2011)

DESIGN REPORT
Date (February 15, 2011)

Second page

Country map (*half page*)



Table (*half page*)

Evaluation team	
Titles / position in the team	Names

Third page

Table of contents

Section	Title	Suggested length
CHAPTER 1:	Introduction	
1.1	Purpose and objectives of the country programme evaluation	1-2 pages max
1.2	Scope of the evaluation	
1.3	Purpose of the design report	
CHAPTER 2:	Country context	
2.1	Development challenges and national strategies	4-6 pages max
2.2	The role of external assistance	
CHAPTER 3:	UNFPA strategic response and programme	
3.1	UNFPA strategic response	5 – 7 pages max
3.2	UNFPA response through the country programme	
3.2.1	The country programme	
3.2.2	The country programme financial structure	
CHAPTER 4:	Evaluation methodology and approach	
4.1	Evaluation criteria and evaluation questions	7-10 pages max
4.2	Methods for data collection and analysis	
4.3	Selection of the sample of stakeholders	
4.4	Evaluability assessment, limitations and risks	
CHAPTER 5:	Evaluation process	
5.1	Process overview	3-5 pages max
5.2	Team composition and distribution of tasks	
5.3	Resource requirements and logistic support	
5.4	Work plan	
		20-30 pages max
ANNEXES		
Annex 1 Terms of Reference		
...		

Following page

Abbreviations and Acronyms

List of tables

List of figures

Following page

The key facts table

Template 10 - The structure of the final report

Cover page

UNFPA COUNTRY PROGRAMME EVALUATION: *NAME OF THE COUNTRY*

Period covered by the evaluation

FINAL EVALUATION REPORT

Date

Second page

Country map (*half page*)



Table (*half page*)

Evaluation Team	
Titles / position in the team	Names

Third page

Acknowledgements

Fourth page

Table of contents

Section	Title	Suggested length
EXECUTIVE SUMMARY		3-4 pages max
CHAPTER 1: Introduction		
1.1	Purpose and objectives of the Country Programme Evaluation	5-7 pages max
1.2	Scope of the evaluation	
1.3	Methodology and process	
CHAPTER 2: Country context		
2.1	Development challenges and national strategies	5-6 pages max
2.2	The role of external assistance	
CHAPTER 3: UN / UNFPA response and programme strategies		
3.1	UN and UNFPA response	5-7 pages max
3.2	UNFPA response through the country programme	
3.2.1	Brief description of UNFPA previous cycle strategy, goals and achievements	
3.2.2	Current UNFPA country programme	
3.2.3	The financial structure of the programme	
CHAPTER 4: Findings: answers to the evaluation questions		
4.1	Answer to evaluation question 1	25-35 pages max
4.2	Answer to evaluation question 2	
4.3	Answer to evaluation question 3	
4.4	Answer to evaluation question X	
CHAPTER 5: Conclusions		
5.1	Strategic level	6 pages max
5.2	Programmatic level	
CHAPTER 6: Recommendations		
6.1	Recommendations	4-5 pages max
<i>(Total number of pages)</i>		50 – 70 pages

ANNEXES

- Annex 1 Terms of Reference
- Annex 2 List of persons / institutions met
- Annex 3 List of documents consulted
- Annex 4 The evaluation matrix

Fifth page

- Abbreviation and acronyms
- List of tables
- List of figures

Sixth page

- Key facts table

Seventh page

- Structure of the country programme evaluation report

Eight page

- Key facts table: *(name of the country)*

Template 13 - Evaluation Quality Assessment Grid and explanatory note

Title of Evaluation Report:

Name of Evaluation Manager:

Name of EQA Reviewer (if different to above):

Budget and time frame allocated for this evaluation:

Overall Assessment: Note that the overall assessment must address, as a minimum, the following issues: *scope of the evaluation; methodological design; findings and analysis; credibility of data; recommendations; conclusion; executive summary.*

Quality Assessment criteria	Assessment Levels			
	Very Good	Good	Poor	Unsatisfactory
<p>1. Structure and Clarity of Reporting</p> <p><i>To ensure report is user-friendly, comprehensive, logically structured and drafted in accordance with international standards.</i></p> <p>Checklist of minimum content and sequence required for structure:</p> <ul style="list-style-type: none"> • i) Acronyms; ii) Exec Summary; iii) Introduction; iv) Methodology including Approach and Limitations; v) Context; vi) Findings/Analysis; vii) Conclusions; viii) Recommendations; ix) Transferable Lessons Learned (where applicable) • Minimum requirements for Annexes: ToRs; Bibliography List of interviewees; Methodological instruments used. 	<p>Please insert <u>assessment level</u> followed by your main <u>comments</u>.</p>			
<p>2. Completeness and concision of the executive summary</p> <p><i>To provide an overview of the evaluation, written as a stand-alone section and presenting main results of the evaluation.</i></p> <p>Structure (paragraph equates to half page max):</p> <ul style="list-style-type: none"> • i) Purpose, including intended audience(s); ii) Objectives and Brief description of intervention (1 para); iii) Methodology (1 para); iv) Main Conclusions (1 para); v) Recommendations (1 para). Maximum length 3-4 page 				
<p>3. Justification of the design and of the methodological approach</p> <p><i>To provide a clear explanation of the following elements/tools</i></p> <p>Minimum content and sequence:</p> <ul style="list-style-type: none"> • Explanation of methodological choice, including constraints and limitations; • Techniques and tools for data collection provided in a detailed manner; • Triangulation systematically applied throughout the evaluation; 				

<ul style="list-style-type: none"> • Details of participatory stakeholders' consultation process are provided. • Details on how cross-cutting issues (vulnerable groups, youth, gender equality) were addressed in the design of the evaluation. 	
<p>4. Reliability of Data</p> <p><i>To clarify data collection processes and data quality</i></p> <ul style="list-style-type: none"> • Sources of qualitative and quantitative data have been identified; • Credibility of primary (e.g. interviews and focus groups) and secondary (e.g. reports) data established and limitations made explicit; • Disaggregated data by gender has been utilized where necessary. 	
<p>5. Soundness of the analysis and credibility of the findings</p> <p><i>To ensure sound analysis and credible findings</i></p> <p><u>Findings</u></p> <ul style="list-style-type: none"> • Findings stem from rigorous data analysis; • Findings are substantiated by evidence; • Findings are presented in a clear manner <p><u>Analysis</u></p> <ul style="list-style-type: none"> • Interpretations are based on carefully described assumptions; • Contextual factors are identified. • Cause and effect links between an intervention and its end results (including unintended results) are explained. 	
<p>6. Validity of the conclusions</p> <p><i>To assess the validity of conclusions</i></p> <ul style="list-style-type: none"> • Conclusions are based on credible findings; • Conclusions must convey evaluators' unbiased judgment of the intervention. 	
<p>7. Usefulness of the recommendations</p> <p><i>To assess the usefulness and clarity of recommendations</i></p> <ul style="list-style-type: none"> • Recommendations flow logically from conclusions; • Recommendations must be strategic, targeted and operationally-feasible; • Recommendations must take into account stakeholders' consultations whilst remaining impartial; • Recommendations should be presented in priority order 	
<p>8. Meeting Needs</p> <p><i>To ensure that evaluation report responds to requirements (scope & evaluation questions/issues/DAC criteria) stated in the ToR (ToR must be annexed to the report).</i></p> <p><i>In the event that the ToR do not conform with commonly agreed quality standards, assess if evaluators have highlighted the deficiencies with the ToR.</i></p>	

Quality assessment criteria (and Multiplying factor *)	Assessment Levels (*)			
	Unsatisfactory	Poor	Good	Very good
5. Findings and analysis (50)				
6. Conclusions (12)				
7. Recommendations (12)				
8. Meeting needs (12)				
3. Design and methodology (5)				
4. Reliability of data (5)				
1. Structure and clarity of reporting (2)				
2. Executive summary (2)				
TOTAL				

(*) Insert the multiplying factor associated with the criteria in the corresponding column e.g. - if "Finding and Analysis" has been assessed as "good", please enter the number 50 into the "Good" column. The Assessment level scoring the higher number of points will determine the overall quality of the Report
OVERALL QUALITY OF REPORT: [Insert overall Assessment Level based on highest score above – see Explanatory Note for further guidance

Template 12 - Management response

UNFPA Management response	Country Programme Evaluation (from-to):(name of the country)
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Note: The following management response lists the recommendations as they appear in the evaluation report. Please refer to the report for more details on each recommendation. Recommendations may be organized by clusters, e.g.: strategic recommendations and recommendations associated with the country programme. Within each cluster, recommendations should be ranked by priority levels (high, medium, low).

Instructions for completing the management response:

1. Boxes in white to be completed upon receiving the present request
2. Boxes in grey to be completed one year later.

Cluster 1: Strategic recommendations				
Recommendation #	To (e.g Office of the Executive Director)	Priority Level: high, medium, low		
<p><i>Management response - Please provide your response to the above recommendation. Where recommendations (or parts of) are not accepted, please provide detailed justification. Where accepted, please indicate key actions for implementation:.....</i></p> <p>.....</p> <p>.....</p> <p>.....</p>				
Key action(s)	Deadline	Responsible unit(s)	Annual implementation status updates	
			Status (ongoing or completed)	Comments

Recommendation #	To(e.g. Country office)	Priority level
<p><i>Management response - Please provide your response to the above recommendation. Where recommendations (or parts of) are not accepted, please provide detailed justification. Where accepted, please indicate key actions for implementation:.....</i></p> <p>.....</p> <p>.....</p> <p>.....</p>		