



COUNTRY PROGRAMME EVALUATION

TERMS OF REFERENCE

SYRIA COUNTRY OFFICE

Final version

November 2018

1. INTRODUCTION

UNFPA uses evaluation to aid accountability for development results, foster learning in order to improve development and implementation of interventions, and to contribute to knowledge and good practices in the sector. In consonance with UN system wide declarations and resolutions on evaluation practices, the UNFPA evaluation policy makes provision, and encourages the conduct of Evaluation in the organization.

This evaluation will be conducted in order to enable the country office have robust information on the programs and interventions it has implemented in the last few years and to use this information to improve on the focus and strategies of the next cycle of programs. The primary audience of the evaluation will be the UNFPA CO in Syria, its implementing partners, including the relevant agencies of the Syria government and other development partners in the country.

In 2018, the UNFPA Evaluation Office conducted an evaluation of the UNFPA response to the Syria crisis, which covers its program interventions in Syria, Lebanon, Jordan, Turkey, Iraq to some extent Egypt.¹ It is expected that as much as possible, this evaluation exercise would take into consideration the findings and conclusions of the evaluation where appropriate, in addition to seeking to follow-up on any relevant findings that could be beneficial to explore due to the potential impact on the Syria CO operations in the country.

Importantly, this Country Program Evaluation (CPE) would be the first to be conducted in a nearly-wholly humanitarian context for any CPE of such magnitude in the organization. Therefore, the organization plans to ensure that this evaluation documents critical guides and recommendations that should be adhered to when conducting CPEs for humanitarian programs in UNFPA.

UNFPA has been active in the Syrian Arab Republic since 1971, and has positively impacted development indicators in the country targeting both IDPs and host communities. In 2015, UNFPA Syria continued implementing humanitarian programmes (which started in 2011) under the framework of the Strategic Response Plan for the Syrian Arab Republic. The two-year 8th program cycle (2016-2017) was designed to be aligned with the national development priorities and the United Nations Strategic Framework 2016-2017.

The 8th Country Programme (CP) (2016-2017) reflects the priorities identified in the Synthesis report and the United Nations Strategic Framework², that has been extended till 2019. Similarly, the 8th CP was extended till the end of 2019 so that the CP cycle is harmonized with the SF and other United Nations agencies in the Syrian Arab Republic. The current CPD was developed through an intensive consultative process with the Government and development partners, including UN sister agencies and was designed to contribute to three pillars of the UN Strategic Framework:

- 1) Targeted institutions have mechanisms to develop, implement and monitor evidence-based policies, strategies, plan and resilience programmes.
- 2) Basic and social services and infrastructure restored, improved and sustained for self-supporting, living, enabling and promoting enhanced resilience.
- 3) Households and communities benefit from sustainable livelihood opportunities, including economic recovery and social inclusion.

¹ The results of the evaluation should be publicly available by the end of 2018.

² The UN agencies in consultation with the Government named the UNDAF the Strategic Framework.

2. CONTEXT

Syria was considered a middle-income country before the crisis started in 2011, on track to achieve the MDGs. In March 2018 the crisis in Syria entered its eighth year. With the geo-political dynamics significantly evolving throughout 2017, the scope of humanitarian needs remains much at the same level compared with the situation in the last two years. The scale, severity and complexity of needs across Syria remains overwhelming.

According to data from the 2018 HNO, 13.1 million are in need of some form of humanitarian relief, some 5.6 million people are in acute need of humanitarian assistance and protection, including 2,981,200 people living in hard-to-reach and besieged areas with acute needs across multiple sectors such as health and protection. 6,150,000 are internally displaced and 674,400 are returnees. The existing monitoring and assessment methodologies cannot ascertain the voluntariness and sustainability of these returns, or whether they took place in safety and dignity.

Approximately 4.8 million women and girls of reproductive age have been affected by the crisis, including three million inside Syria. Nearly 430,000 Syrian women are currently pregnant and of those women an estimated 76,000 will require emergency obstetric care to manage a complication. Women and girls have become front row witnesses and survivors of violence, including gender-based violence and forced marriages.

The crisis has forced many young males to flee the country to avoid direct involvement and security threats as well as to seek economic or education opportunities. As a result, the majority of young people find themselves either involved in the ongoing crisis or having limited opportunities, which leads to alienation and exclusion.

While the sexual and reproductive health of young people and gender-based violence services are integrated in the overall provision of social and health services, awareness and acceptance from the community is still limited.

Recurrent displacement has drastically increased vulnerabilities of women and adolescent girls as the lack or inadequate of quality services has put them under high risks within unsafe environments. Critically, adolescent girls are exposed to forced and early marriage, having their reproductive and psychological health compromised.

Providing comprehensive and survivor centered response to GBV in Syria remains challenging. The few organizations active in the sector bring an extremely valuable expertise and experience, but the limited number of actors, the limited accessibility of many areas, and the lack of expertise on the ground results in a minimal geographical coverage of GBV services, which are currently mostly concentrated in urban areas or in IDP shelters. A number of local organizations are active in the field of women empowerment and psychosocial support, but additional capacity and scaling up of the provision of services are critical to respond to the vast needs, particularly in hard to reach and besieged areas.

Around 50% of the hospitals and primary health centers have been damaged. Almost half of all health workers are displaced or have left the country. Most health facilities report shortages of medicines and supplies, due to the deteriorating pharmaceutical industry supply chains, as well as problems with maintenance and repair of medical equipment. Weakened reproductive health services, lack of safe access to health providers coupled with shortages of medicines caused by a sharp drop in domestic production, negatively affects women and girl's health as seen in the increased Maternal Mortality Ratio.

Even when services are available, insecurity and the stigma around GBV still create barriers to accessing these services. The fear of reprisals alone presents a major impediment to survivors seeking life-saving support. Implementing Partners reported about the difficulties for survivors to access services. These challenges vary significantly depending on the groups in control of different areas. In the Eastern part of northern Syria, medical

service providers are at times still permitted to provide services, which also represent one of the only avenues to provide services to GBV survivors.

In response to the above mentioned context, the Government of Syria prioritized the following areas : a) responses to people's basic needs: water, sanitation, health, housing, energy, and sustainable livelihoods and education; b) community needs: infrastructures, reenergizing the productive sectors including women's participation in local economic development, return of IDPs and socio-economic integration in rural areas and c) institutional needs: to enhance institutional performance in analysis, planning, implementation, monitoring and reporting.

The 2011-2015, CP was focused on providing immediate lifesaving humanitarian assistance on RH and GBV due to security context and limited accessibility to services and life-saving commodities at the time of the preparation of the CP in 2015. However, the next CP (2016-2018, then 2019) was developed when some improvements in the security situation was taking place. Therefore, UNFPA provided more development-oriented interventions. The fact that some areas in the country remained necessitated the CO's continued provision of humanitarian response. The major interventions of the current CP however focused on youth integration and participation, youth empowerment, women empowerment, rehabilitation of the health and social facilities, advocacy on SDGs, SG resolution on women and youth and generation of utilization of demographic data.

In order to review the extent of progress in the implementation of the CP components, generate lessons learned and identify the way forward, UNFPA CO, State Planning Commission (the government coordination body) and all the implementing partners conducted annual programme reviews (APR) in 2016 and 2017. The APRs reviewed facilitating and constraining factors as well as programme management and coordination issues, which resulted in strategic recommendations to better improve the CPD implementation. The country program was subsequently extended for two additional years (2018-2019) focusing on improving access to high-quality reproductive health care, scaling-up gender-based violence prevention and response; and supporting capacities to collect and use gender- and age-disaggregated data for tailoring response and recovery programming.

UNFPA Syria CO's current CP directly contributes to the previous and current UNFPA strategic plan, especially the components related to Sexual and Reproductive Health; and Gender Equality and Women's empowerment through the following Outputs: *i. Increased capacity of the health system to deliver high-quality integrated reproductive health services, particularly for the people affected by the crisis, including host communities and displaced populations, with a special focus on young people; ii. Strengthened capacity of implementing partners to prevent and respond to gender-based violence, with a special focus on vulnerable women in humanitarian settings; and iii. Strengthened capacity of community leaders and young people to advocate against gender-based violence, including child, early and forced marriage.*

Supporting the health systems to increase the supply and demand for quality RH services contributes to the RH outcomes of the SP. Supporting the delivery of comprehensive GBV prevention and Response and the increasing the awareness of community leaders and local communities on GBV consequences and response contribute also to the related SP outcome of women empowerment. Youth and population data are integrated within GBV and RH components because they are of high importance and to ensure high efficiency of the humanitarian response, so that no population group is left behind.

3. PURPOSE AND OBJECTIVES OF THE EVALUATION

The purpose of the evaluation is to assess the achievement of the intended programme results, and to compile lessons learned to inform the next CP. The evaluation will be utilization-focused and expected to provide credible information on the CP relevance, efficiency, effectiveness, sustainability, coordination, coverage and connectedness

in order to support decision-making by the programme management and national counterparts for further programme improvement and strategic positioning over the new country program.

- **The specific objectives of the CPE**

The specific objectives will be to:

- Assess relevance of the program and progress in the achievement of outputs and outcomes against what was planned (effectiveness) in the country program implementation plan, as well as efficiency of interventions and sustainability of effects;
- Assess alignment of CPAP (or other similar documents in use at the CO) 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.
- Since the interventions during the current CP took place largely within a humanitarian context, the evaluation would also seek to assess the “Connectedness” and “Coverage “of the country program.
- Document through a simple guidance note the good practices and/or suggestions on how to conduct Country Program Evaluation in similar contexts.

4. SCOPE OF THE EVALUATION

- **Time period:** The scope of the evaluation is to cover activities implemented from 2011 to 2018 with ministries/institutions/NGOs involved in the CP implementation.
- **Geographical coverage:** The evaluation will cover all the governorates where UNFPA-funded programmes are implemented (all Syrian governorates except Idleb).
- **Programme aspects:** The evaluation will look at the four technical areas of the UNFPA programme (Sexual Reproductive Health, gender-based violence, Adolescents Youth and Population and Development) in all governorates where the partners are implementing. For each thematic area, the evaluation will look at cross cutting aspects such as gender mainstreaming, coordination and partnerships, in addition to the distribution of specialized, customized and culturally sensitive hygiene or dignity kits.
- The evaluation will also look at the deployment of trained personnel to support and encourage the participation of affected groups in society through the facilitation of recreational and educational programs, rehabilitation and psychosocial interventions, and life skills education.
- **Evaluation criteria:**

The evaluation will be based on four OECD/DAC criteria: Relevance, Effectiveness, Efficiency and Sustainability as well as on questions related to Coordination, Connectedness and Coverage of the country program.

- **Evaluation questions**

Below is the list of indicative questions, the final list will be formulated by the evaluation team in the design report and finalised in collaboration with the CO. Please note that the final list of evaluation questions should not exceed ten (10).

Relevance/ Appropriateness

1. To what extent are the interventions of UNFPA Syria CP 2011-2015 and its latest versions and the subsequent CPs (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?
3. What are the main UNFPA comparative strengths in Syria, particularly in comparison to other UN agencies?

Efficiency:

1. To what extent did the intervention mechanisms (organizational procedures) foster or hinder the achievement of the program outputs?
2. 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?
3. To what extent did the CO leverage on partnership to achieve results envisaged for the CP?

Effectiveness:

1. To what extent did the interventions supported by UNFPA in the field of reproductive health and rights contribute to (i) Improved access and utilization of high quality maternal health and family planning services, including populations affected by humanitarian crisis (ii) Increased national and sub-national capacity to deliver integrated sexual and reproductive health services (iii) Increased priority on adolescents, especially on very young adolescent girls, in national development policies and programmes.
2. To what extent have the interventions supported by UNFPA in the field of population and development contributed to increased availability and use of data on emerging population issues.
3. To what extent have the interventions supported by UNFPA in the field of gender contributed to: (i) Strengthened national and sub-national protection systems for advancing reproductive rights, promoting gender equality and non-discrimination and addressing gender-based violence; (ii) Increased capacity to prevent gender-based violence and harmful practices and enable the delivery of multi sectoral services, including in humanitarian settings?
4. Are there any other results that made positive effects at community and/or institutional level?

Sustainability:

1. To what extent are the development gains made under the UNFPA supported interventions in Syria sustainable in terms of continuity in service provisions and partnerships integration of CP activities into the regular country and counterparts' programming?

Connectedness:

1. To what extent was the CO able to establish key linkages between the humanitarian emergency response and the recovery (longer-term) phase?

Coverage:

1. To what extent did the CO response reach those most in need – geographically?
2. To what extent did the CO response reach those most in need – demographically?

Coordination:

1. To what extent has the UNFPA CO contributed to good coordination among UN agencies in the country, particularly in view of avoiding potential overlaps?
2. To what extent was this coordination effective to boost the program implementation and achieve better results?

5. EVALUATION METHODOLOGY AND APPROACH

The consultants are expected to use a mix of qualitative and quantitative methods and work with primary and secondary data sources.

6.1 Desk review:

- Analysis of available reports including projects documents, annual reports, needs assessment, audit report, progress reports and donor reports and any other materials that the evaluator considers useful for this evidence-based assessment
- Review of project documents such as Country Programme document and financial records available.
- Review of policy documents and strategies at the CO level.

6.2 Field work:

- Interviews with relevant UNFPA programme staff at country office and field offices
- Interviews with relevant implementing partners and project partner organizations
- Interviews and focus group discussions with project beneficiaries and where possible non-beneficiary population in target areas
- Observations and informal interviews.

The detailed methodological approach will be designed by the selected evaluation team and included in the inception report taking into consideration the following:

- The CP evaluation design.
- Size and structure of targeted entities to be interviewed.
- The sampling method.
- Data collection tools and procedures.
- Data management and analysis.
- Selection of sites to host data collection.

Methods may vary by project but should reflect the precise nature of the aspects under examination and the personal expertise. Apart from a preference for triangulation, the evaluators could consider existing data, published research etc.

It is highly possible that Arabic language may be needed during data collection in cases where the targeted respondents do not have adequate English proficiency. If such a risk becomes a reality, then in order to standardize the formulation of the questions and avoid ad-hoc interpretation, the data collection tools will be translated into Arabic.

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, and beneficiaries of the program to participate in the evaluation, a stakeholders' map will be handed to the team.

6.3 Issues to be considered in the CPE preparation and findings:

- The consultants should factor as much as possible the WOS evaluation in the CPE and dig deeper to highlight the country office achievements, failures, challenges and lesson learnt.
- It is important to focus on the efficiency and effectiveness of the CO interventions as they were not addressed clearly in the WOS evaluation.

6. EVALUATION PHASES, TIMELINE AND DELIVERABLES

The number of working days required for the successful completion of this assignment is a maximum of a total 179 work days (entire team) spread over a period of 6-8 months.

Phases/deliverables	Dates
Phase 1: preparatory phase Finalization of the ToR and recruitment of experts	June 2018 - November 2018
Phase 2. Design phase Preparation, review of documents leading to submission of the design report, detailed plan and time frame including travel days and expected start date	December 2018
Phase 3. Field Phase	December 2018 - January 2019
Phase 4. Reporting phase - 1st draft final report - Stakeholders workshop - Final report - CPE guide in Humanitarian setting	February - March, 2019
Phase 5: Management response, dissemination phase	April - May, 2019

7. DURATION OF CONTRACT AND REMUNERATION

The Team Leader and team members would work for 73 and 53 work days respectively as described in the table below.

Milestones	Number of working days	
	Team Leader	Team members (x2)
Design phase	10	7
Field phase	20	20
Data analysis and draft report	25	10
Dissemination workshop	1	1
Final report and annexes	7	5
CPE guide in Humanitarian setting	10	10
Total work days	73	53

8. THE EVALUATION TEAM

The evaluation will preferably be conducted by an independent evaluation consultancy firm which should be legally registered, have past experience in carrying out similar evaluations, and have stable financial records for the last three years. In any case, the evaluation team will comprise of three consultants. The Team Leader must also expertise in one of the listed mandate areas of UNFPA listed below. The team members must be composed in a way that ensures there is at least one expertise for each of the following thematic areas:

- Sexual and Reproductive Health including Maternal Health
- Gender Based Violence and Women empowerment.
- Youth programming, including ASRH and Population & Development

Please note that UNFPA would subject the qualifications of the proposed consultants through its internal vetting processes.

The firm will designate one of the members with broad evaluation expertise as the **team leader**. It should be ensured that interviews and focus group discussions will be possible both for men and women (especially when consulting beneficiaries) therefore gender balance among consultants should be taken care of as much as possible. In addition, one of the team members must be fluent in spoken and written Arabic language with extensive experience in conducting evaluations in Syria. The data collection tools shall be translated into Arabic Language before commencement of the data collection exercise.

Considering the language challenges in Syria, the successful firm is encouraged to hire local research assistants speaking Arabic and with good experience in qualitative data collection, particularly FGDs facilitation and/or note taking.

7.1 Competencies for the thematic consultants

1. Excellent analytical, writing and communication skills
2. Ability to work with a multi-disciplinary team of experts
3. Excellent problem identification and solving skills
4. Excellent written and spoken English Language skills. Knowledge of Arabic is an asset*.
5. Experience of operations and response to humanitarian/crisis an advantage
6. Familiarity with UN and/or UNFPA mandate an asset

7.2 Qualifications and experience of thematic consultants

1. Specialization and/or demonstrated knowledge in at least one UNFPA mandate area(s) of either reproductive health, population and development, or gender field
2. Minimum of five years of experience in conducting evaluations in the development or gender sectors
3. An advanced degree in development studies, Population studies, Reproductive health, Gender or any other relevant area with a demonstrable experience in review and/or evaluation of development programs
4.
 - Good understanding of the inter relationships between population dynamics, reproductive health and rights and gender and its effects on development
 - Extensive previous experience in Health, Sexual RH, Population and Development, researcher, data collection and analysis or other related field.

7.3 Roles and responsibilities of the thematic consultants

1. Contribute to the development of the design report as per UNFPA standards
2. Take charge of Evaluation components related to his thematic section of the country programme as relevant
3. Member of the evaluation team and as such, abides by the requirements and work plan validated by the team
4. Deliver timely quality reports related to his/her field as relevant

7.4 Competencies for the Team Leader

In addition to competencies for the thematic roles above the team leader must possess the following competencies:

1. Development sector background
2. Excellent analytical, writing and communication skills
3. Leadership and good management skills
4. Ability to work with a multi-disciplinary team of experts

5. Excellent problem identification and solving skills
6. Excellent written and spoken English Language skills.

7.5 Qualifications and experience of Team Leader

1. Minimum of 10 years' experience in conducting/managing program evaluations
2. An advanced degree in development studies, Population studies, Reproductive health, Gender or any other relevant area
3. Extensive previous experience in leading evaluations, specifically evaluations of international organizations or development agencies, including in capacity of Team Leader. Previous experience conducting evaluation for UNFPA will be considered as an asset.
4. Experience in mainstreaming and management of cross cutting themes
5. Familiarity with the UNFPA work will be an added advantage
6. Experience in evaluating programmes/projects in fragile context
7. Proven knowledge of the country settings and priorities
8. Experience of operations and response to humanitarian/crisis an advantage

7.6 Roles and responsibilities of the Team Leader

The team leader will have primary responsibility for the timely completion of a high-quality evaluation that addresses all the items required in this TOR. He/she will specifically

1. Provide overall coordination and leadership to the evaluation team
2. Responsible of the assessment of one thematic programme area
3. Provide the inputs for quality aspects of the overall process
4. Compile the design report with the inputs from national consultants
5. Compile draft and final reports and deliver them on time, considering the quality aspects.
6. Responsible for debriefing the findings when required
7. Liaise with Evaluation Manager

9. MANAGEMENT AND CODUCT OF THE EVALUATION

A management structure will be established and will include:

- An Evaluation Reference Group (ERG)
- Evaluation Manager

The specific roles and functions of the ERG as provided in the UNFPA Corporate Evaluation Handbook is to provide guidance and constructive feedback on the products of the evaluation, hence contributing to both the quality and utility of the exercise. The Evaluation Reference Group is composed of representatives from the UNFPA Country Office in Syria, the national counterparts, and the UNFPA Regional M&E Adviser and other relevant colleagues of the regional office.

Throughout the process of the evaluation, the ERG will regularly meet from planning phase to implementation phase. They will be expected to discuss and comment on notes and reports produced by the evaluation team. Members of the ERG are also expected to facilitate the evaluation team's access to information sources and documentation on the activities under evaluation. Specific roles include;

- Provides input to the TOR and to the selection of the team of evaluators
- Contributes to the finalization of the formulation of the evaluation questions
- Provides comments on the design report
- Contribute to the selection of the evaluation team

- As much as possible, facilitates access of evaluation team to information sources (documents and interviewees) to support data collection
- Provides timely comments on the draft evaluation report
- Ensure the final draft meets the UNFPA quality standards

Under the overall guidance of the UNFPA Representative, the Monitoring and Evaluation Analyst will act as the Evaluation Manager. The ERG and the Evaluation Manager will provide oversight to the evaluation. Supported by the Evaluation Manager, the ERG will regularly meet as needed to undertake the main oversight activities such as, to provide technical support, monitor progress and quality of evaluation activities, and review and comment on drafts documents.

The Regional M&E Advisor will be responsible for the approval of the Inception Report, and clearance of the final draft of the evaluation report, and send the final report and EQA to the HQ Evaluation Office.

UNFPA Syria country office, with the support of implementing partners, will provide the logistical support for the overall evaluation process.

After the evaluator team submit the final report, it will provide a power point presentation summarizing the key findings, conclusions and recommendations. The Evaluation Manager will present the final document to the ERG and the CO management.

10. DELIVERABLES

The selected consultant team will submit the following deliverables:

Evaluation Deliverables:

The Consultant will prepare an evaluation draft design report and a final evaluation design report that will describe the evaluation and include evaluator's findings and recommendations to the best approaches of conducting the evaluation. The evaluation team will be asked to make an oral presentation of the design report to UNFPA and its stakeholders including the government entities (through a teleconference or a local team). The Evaluation Manager will coordinate the review of the inception report, compile and summarize comments from the ERG members, the Regional M&E adviser and the Evaluation Office. The consultant will provide comprehensive written response on how they have incorporated or addressed the feedback on the Inception report to the Evaluation Manager within 5 days (please see annex 3 for Inception report outline).

Proposed Guide Note on conducting CPEs in humanitarian settings

A key additional deliverable of this evaluation is the guide on conducting CPE in humanitarian settings – Approaches and good practices including potential pitfalls that could be avoided in future CPEs to ensure the organization has a recognised path to conducting similar CPEs in humanitarian context. The draft version of the guide would also be submitted to the ERG for inputs and would be shared in draft form with the UNFPA Regional Office and the Evaluation Office at HQ for final validation. The final version of the "Guide" would be submitted with the final version of the CPE Report. The guide would be expected to be of a maximum of **20-25 pages** excluding annexes and would have a structure that includes *Introduction; Rationale; General guide on conducting Evaluation in humanitarian settings; Key considerations in managing and conducting UNFPA CPEs in crisis settings: Team composition e.g. Firm/Individual options; Design Report; Methodological approaches; Field works and Reporting; The ERG, Highlights of "good practices"; Annexes etc.* The final outline may be fine-tuned by the team in coordination with the Evaluation Manager and the Regional M&E Adviser.

UNFPA's approval of the design report is required before any field work can be initiated.

The deliverables are to be:

- Prepared in English
- Submitted to UNFPA Syria CO electronically via e-mail
- Submitted in official hard copy format (2 copies)



DELIVERABLE	CONTENT	TIMING	RESPONSIBILITIES
Inception/Design Report	Methodology, data collection tools, detailed plan and time frame.	December 2018	Evaluator provides clarifications on methodology, tools, work schedule
Debriefing presentation	Initial Findings	January 2018	Evaluator present the initial findings after the field visits and Analysis phase
Draft of the Final Report³	Full report	February/March , 2018	Evaluator sends the draft of the final report to the UNFPA Syria. The Evaluation Manager shares the draft report with the Evaluation Reference Group for comments.
Stakeholder workshop	Not more than 20 slides, to be submitted together with the final report and to be used for dissemination workshop.	February/ March 2018	Evaluator needs to carry out a validation session for UNFPA Syrian’s partners and Programme staff immediately after submitting the draft of the Final Report.
Final Report AND a mini-guide on conducting CPE in humanitarian settings – Approaches and good practices	Revised report	April 2018	The Evaluator submits a final report incorporating UNFPA staff and implementing partners comments

QUALITY ASSURANCE AND ASSESSMENT

The UNFPA CO Evaluation Manager will use the UNFPA Evaluation Quality Assessment (EQA) grid in consultation with the RO M&E Adviser, for the quality assurance of the draft final evaluation report. Upon receipt of the final evaluation report, UNFPA Evaluation Office at HQ will conduct an independent assessment of the Evaluation Report in line with its organization procedures and tools.

³The evaluation report should not be shared outside of UNFPA before it is **final**



Payment modalities and specifications

Payment of fees will be based on the delivery of the deliverables and as follows:

Deliverables	Rate
Following the submission and approval of the inception report to UNFPA and ERG.	20%
After the 1 st comprehensive draft of the final evaluation report has been submitted and approved by UNFPA Syria and the ERG.	50%
After the final version of the final evaluation report has been submitted and approved by UNFPA Syria and the ERG. And a mini-guide on conducting CPE in humanitarian settings – Approaches and good practices	30%

11. Evaluation Implementation Arrangements

UNFPA Syria shall provide prior arrangements of relevant implementing partner, stakeholders, concerned government officials or beneficiaries for interviews. However, the evaluator must inform UNFPA Syria and the implementing partners in a timely manner when s/he intends to collect information from the respondents at field and office level.

Application Process

For how to submit offers, please refer to the Request for Proposal (RFP).

The requested documentation to be submitted: 1.) Bid Submission Form, 2.) Bidders Identification Form, 3.) Terms of Reference, 4.) Technical Bid and 5.) Price Schedule Form. Please review the RFP attached to this tender for further details

UNFPA SYRIA applies a transparent selection process that will take into account competencies and experience of the applicants as well as their financial offers.

NOTE: the awarded company will responsible for the management of any sub-contractors, local partners and their deliverables. In the case of a joint venture background documentation (described in the RFP document) will be requested from all stakeholders.

12. DISSEMINATION AND USE OF EVALUATION RESULTS

As for the dissemination of the final evaluation report, the following should be considered:

- Upload to UNFPA shared folder.
- The evaluation report to be printed and the hardcopy with a snapshot of findings and recommendations will be distributed among relevant stakeholders.
- The report including key findings and recommendations will be shared electronically among the stakeholders and the report will be uploaded to the UNFPA Syria website.
- Dissemination meetings will be conducted at national level and, when appropriate, at individual level.

Management responses will be prepared for each of the recommendations using the standard UNFPA management response tool and they should be uploaded into central document repository within one month of accepting the final report of an evaluation.



Recommendations will be added collaboratively with relevant stakeholders. The Evaluation Manager and UNFPA Representative draft the management response, circulates the response together with the evaluation report to the relevant partner(s) and convenes a meeting to discuss and agree on the management response. (The required approval will be obtained from the key stakeholders and partners before finalizing). UNFPA Syria country office will prepare a management response, monitoring checklist progress of implementing CPE recommendations.

EVALUATION BUDGET

The evaluation budget is estimated to range between US\$ 100,000 and US\$ 150,000. Consultancy fees are payable according to normal terms of payment and subject to receipt of Certification for Payment form, including the Evaluation Committee and Evaluation Managers’ certification of satisfactory performance. The UNFPA CO will provide for international consultants with a round-trip air ticket (between originating city and duty station) plus the payment of the appropriate per diem by means of the applicable DSA at United Nations established rates.

ANNEXES

Annex 1: Documents to be consulted

The following documents will be shared as part of the desk review:

- Policies and Procedures Manual
- Country Programme Evaluation
- National Reproductive Health Strategy
- Country Programme Document (CPD)
- CP implementation plan
- WOS evaluation report
- Annual Work Plans
- Annual reports
- Evaluation Report on Humanitarian Response Project
- AWP progress reports
- Audit reports
- Financial expenditure reports (face forms)
- UNFPA evaluation policy
- UNEG Ethical Guidelines for Evaluation

Annex 2: Reporting guideline

UNFPA evaluation report should use the following template:

EXECUTIVE SUMMARY	2-4 pages max
CHAPTER 1: Introduction	5-7 pages max
1.1 Purpose and objectives or the Country Programme Evaluation	
1.2 Scope of the evaluation	
1.3 Methodology and process	
CHAPTER 2: Country context	5-7 pages max
2.1 Development challenges and national strategies	
2.2 The role of external assistance	
CHAPTER 3: UN / UNFPA response and programme strategies	5-7 pages max
3.1 UN and UNFPA response	
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: Analysis of the programmatic areas		20-30 pages max
4.1	Reproductive Health	
4.1.1	Relevance	
4.1.2	Effectiveness	
4.1.3	Efficiency	
4.1.4	Sustainability	
4.2	Population and Development	
4.2.1	Relevance	
4.2.2	Effectiveness	
4.2.3	Efficiency	
4.2.4	Sustainability	
4.3	GBV and Gender	
4.3.1	Relevance	
4.3.2	Effectiveness	
4.3.3	Efficiency	
4.3.4	Sustainability	
4.4	Youth	
4.4.1	Relevance	
4.4.2	Effectiveness	
4.4.3	Efficiency	
4.4.4	Sustainability	
CHAPTER 5: Connectedness, Coverage and Coordination		5-10 pages max
5.1	Corporate strategic alignment	
5.2	Strategic alignment	
5.3	Responsiveness	
CHAPTER 6: Assessment of the Monitoring & Evaluation system		4- 8 pages max
6.1	The Country Office Monitoring and Evaluation (M&E) system	
6.2	Support to national partners' capacity in terms of M&E systems	
CHAPTER 7 Conclusions and recommendations		10–15 pages max
7.1	Main conclusions	
7.1.1	Strategic level	
7.1.2	Programmatic level	
7.1.3	Transversal aspects	
7.2	Main recommendations	
7.2.1	Strategic level	
7.2.2	Programmatic level	
7.2.3	Transversal aspects	
(Total number of pages) 60 – 90 pages		
ANNEXES		
Annex 1 Terms of Reference		
Annex 2 List of persons / institutions met		
Annex 3 List of documents consulted		
Annex 4 The evaluation questions		
Annex 5 The evaluation Matrix		

Annex 3: Inception report guidelines

The Inception report should use the following template:

CHAPTER 1: Introduction		1-2 pages max
1.1	Purpose and objectives of the Country Programme Evaluation	
1.2	Scope of the evaluation	
1.3	Purpose of the design report	



CHAPTER 2: Country context	4-6 pages max
2.1 Development challenges and national strategies	
2.2 The role of external assistance	
CHAPTER 3: UNFPA strategic response and programme	5-7 pages max
3.1 UNFPA strategic response	
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	7-10 pages max
4.1 Evaluation criteria and evaluation questions	
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	3-5 pages max
5.1 Process overview	
5.2 Team composition and distribution of tasks	
5.3 Resource requirements and logistic support	
5.4 Work plan and detailed time frame	
(Total number of pages)	20-30 pages max

Annex 4: Additional Resources for the Evaluation

1) Main documents

- a) UNFPA Iraq Country Program Document and Country Program Action Plan:
- b) UN Assistance Development Framework:
- c) UNFPA Strategic Plan: <http://www.unfpa.org/strategic-direction>
- d) 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)

- a) List of Atlas projects for the CP
- b) Copies of annual work plans for the CP
- c) Country office annual reports during the cycle
- d) Resource Mobilization Strategy
- e) CPAP Progress Report (annual) during the cycle
- f) Trip and monitoring reports during the cycle
- g) Annual budget and expenditure reports during the cycle
- h) Problem analysis and interventions logic as available
- i) Evaluation and Assessments Reports during the cycle

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

- 1) Country Overview
- 2) Ethical Code of Conduct for UNEG/UNFPA Evaluations
- 3) Evaluation Matrix
- 4) Design report outline
- 5) Structure of Final Report
- 6) [Evaluation Quality Assessment template and explanatory note](#)
- 7) Management response template

Annexe 5

UNEG Code of Conduct for Evaluation in the UN system
 UNEG Ethical Guidelines for Evaluation



UNEG Norms and Standards

Integrating Human Rights and Gender Equality in Evaluations

Evaluation ethics

The whole evaluation process will be governed by the principles of the United Nations Evaluation Group's ethical guidelines, which have been drawn up with reference to relevant texts, principal among them the UN Norms and Standards for Evaluation. All those engaged in designing, conducting and managing evaluation activities should aspire to conduct high quality work guided by professional standards and ethical and moral principles, as the integrity of evaluation is dependent on the ethical conduct of key actors in the evaluation process.

The CPE is to be conducted legally, ethically and with due regard for the welfare of those involved in evaluation, especially women, children, and members of other vulnerable and disadvantaged groups, and in accordance with the United Nations Evaluation Group ethical guidelines for evaluation, available at www.unevaluation.org/ethicalguidelines.

Annex 5: UNFPA contacts

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 3. Ms. Yamameh Esmail, Monitoring and Evaluation Analyst, UNFPA Syria esmail@unfpa.org; Mobile: +993356832
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