



## **Terms of Reference**

# **United Nations Population Fund (UNFPA) Namibia 6<sup>th</sup> Country Programme (2019-2023)**

## **Country Programme Evaluation**

**February 2022**

## Contents

1.	Introduction	2
2.	Country Context	3
3.	UNFPA Country Programme	9
4.	Evaluation Purpose, Objectives and Scope	15
4.1.	Purpose	15
4.2.	Objectives	15
4.3.	Scope	15
5.	Evaluation Criteria and Preliminary Evaluation Questions	16
5.1.	Evaluation Criteria	16
5.2.	Preliminary Evaluation Questions	16
6.	Approach and Methodology	18
6.1.	Evaluation Approach	18
6.2.	Methodology	20
7.	Evaluation Process	23
8.	Expected Deliverables	27
9.	Quality Assurance and Assessment	28
10.	Indicative Timeframe and Work Plan	30
11.	Management of the Evaluation	33
12.	Composition of the Evaluation Team	35
12.1.	Roles and Responsibilities of the Evaluation Team	35
12.2.	Qualifications and Experience of the Evaluation Team	37
13.	Budget and Payment Modalities	39
14.	Bibliography and Resources	41
15.	Annexes	<b>Error! Bookmark not defined.</b>

## Acronyms

AIDS	Acquired Immunodeficiency Syndrome
ART	Antiretroviral therapy
CCA	Common country assessment/analysis
CHE	Comprehensive Sexuality Education
CO	Country office
CP	Country programme
CPAP	Country programme action plan
CPD	Country programme document
CPE	Country programme evaluation
DSA	Daily subsistence allowance
EQA	Evaluation quality assessment
EQAA	Evaluation quality assurance and assessment
ERG	Evaluation reference group
ESARO	Eastern and Southern Africa Regional Office
HCT	Humanitarian Country Team
HCWs	Health Care Workers
HIS	Health Information System
HIV	Human Immunodeficiency Virus
ICPD	International Conference on Population and Development
IUM	International University of Management
M&E	Monitoring and evaluation
MIC	Middle Income Countries
MoHSS	Ministry of Health and Social Services
MPI	Multidimensional Poverty Index
NDP 5	5th National Development Plan
NDP 6	6th National Development Plan
NHIES	Namibia Household Income and Expenditure Survey
NSA	Namibia Statistics Agency
NSDS	National Strategy for Development of Statistics
PLWHA	People Living with HIV/AIDS
SDGs	Sustainable Development Goals
SGBV	Sexual and Gender Based Violence
SRHR	Sexual and reproductive health and rights
SYP	Safeguard Young People
ToR	Terms of reference
UNAM	University Of Namibia
UNCT	United Nations Country Team
UNDAF	United Nations Development Assistance Framework
UNEG	United Nations Evaluation Group
UNFPA	United Nations Population Fund
UNPAF	United Nations Partnership Framework

## 1. Introduction

The United Nations Population Fund (UNFPA) is the lead United Nations agency for delivering a world where every pregnancy is wanted, every childbirth is safe and every young person's potential is fulfilled. The strategic goal of UNFPA is to “achieve universal access to sexual and reproductive health, realize reproductive rights, and reduce maternal mortality to accelerate progress on the agenda of the Programme of Action of the International Conference on Population and Development (ICPD), to improve the lives of women, adolescents and youth, enabled by population dynamics, human rights and gender equality.”<sup>1</sup> In pursuit of this goal, UNFPA works towards three transformative and people-centered results: (i) end preventable maternal deaths; (ii) end the unmet need for family planning; and (iii) end sexual and gender-based violence (SGBV) and all harmful practices, including female genital mutilation and child, early and forced marriage. These transformative results will contribute to the achievement of the Sustainable Development Goals (SDGs), in particular good health and well-being (Goal 3), the achievement of gender equality and the empowerment of women and girls (Goal 5), the reduction of inequality within and among countries (Goal 10), and peace, justice and strong institutions (Goal 16). In line with the vision of the 2030 Agenda for Sustainable Development, UNFPA seeks to ensure that no one is left behind and that the furthest behind are reached first.

UNFPA has been operating in Namibia since 1990. The support that the UNFPA Namibia Country Office (CO) provides to the Government of Namibia under the framework of the 6th Country Programmes (CP) (2019 -2023) builds on national development needs and priorities articulated in the following documents:

- Harambee Prosperity Plan 2016/17 – 2019/20
- Harambee Prosperity Plan II (2021-2025)
- Namibia's 5th National Development Plan 2017/18 – 2021/22
- National Gender Policy 2010 – 2020
- National Policy on Sexual, Reproductive and Child Health 2013
- National Youth Policy (Second Revision) 2009 – 2019
- United Nations Common Country Analysis/Assessment (CCA) –2017
- United Nations Partnership Framework (UNPAF) 2014 – 2018
- United Nations Partnership Framework (UNPAF) 2019 – 2023

The 2019 UNFPA Evaluation Policy requires CPs to be evaluated at least every two-programme cycles, “unless the quality of the previous country programme evaluation was unsatisfactory and/or significant

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<sup>1</sup> UNFPA Strategic Plan 2018-2021, p. 3. The document is available at: [https://www.unfpa.org/sites/default/files/resource-pdf/DP.FPA\\_2017.9\\_-\\_UNFPA\\_strategic\\_plan\\_2018-2021\\_-\\_FINAL\\_-\\_25July2017\\_-\\_corrected\\_24Aug17.pdf](https://www.unfpa.org/sites/default/files/resource-pdf/DP.FPA_2017.9_-_UNFPA_strategic_plan_2018-2021_-_FINAL_-_25July2017_-_corrected_24Aug17.pdf).

changes in the country contexts have occurred.”<sup>2</sup> The country programme evaluation (CPE) will provide an independent assessment of the relevance and performance of the UNFPA 6th CP (2019 - 2023) in Namibia, and offer an analysis of various factors influencing programme delivery and the achievement of intended results. The CPE will also draw conclusions and provide a set of actionable recommendations for the next programme cycle.

The evaluation will be implemented in line with the *Handbook on How to Design and Conduct a Country Programme Evaluation at UNFPA* (UNFPA Evaluation Handbook), which is available at <https://www.unfpa.org/EvaluationHandbook>. The Handbook provides practical guidance for managing and conducting CPEs to ensure the production of quality evaluations in line with the United Nations Evaluation Group (UNEG) norms and standards and international good practice for evaluation. It offers a step-by-step guidance to prepare methodologically robust evaluations and sets out the roles and responsibilities of key stakeholders at all stages of the evaluation process. The Handbook includes a number of tools, resources and templates that provide practical guidance on specific activities and tasks that the evaluators and the evaluation manager perform during the different evaluation phases.

The main audience and primary intended users of the evaluation are: (i) The UNFPA Namibia CO; (ii) the Government of the Republic of Namibia; (iii) implementing partners of the UNFPA Namibia CO; (iv) rights-holders involved in UNFPA interventions and the organizations that represent them (in particular women, adolescents and youth); (v) the United Nations Country Team (UNCT); (vi) UNFPA East and Southern Africa Regional Office (ESARO); and (vii) donors. The evaluation results will also be of interest to a wider group of stakeholders, including: (i) UNFPA headquarters divisions, branches and offices; (ii) the UNFPA Executive Board; (iii) academia; and (iv) local civil society organizations and international NGOs. The evaluation results will be disseminated as appropriate, using traditional and digital channels of communication.

The evaluation will be managed by the evaluation manager within the UNFPA Namibia CO, with guidance and support from the regional monitoring and evaluation (M&E) adviser at the ESARO, and in consultation with the evaluation reference group (ERG) throughout the evaluation process. A team of independent external evaluators will conduct the evaluation and prepare an evaluation report in conformity with these terms of reference.

## **2. Country Context**

Namibia is one of the largest countries in the world, with a size of 820,000 square kilometers, but given the country’s arid condition and topography, the larger percentage of the country’s land is inhabitable<sup>3</sup>. Namibia is the least densely populated country in the world with a population density estimated at 2.6

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<sup>2</sup> UNFPA Evaluation Policy 2019, p. 20. The document is available at <https://www.unfpa.org/admin-resource/unfpa-evaluation-policy-2019>.

<sup>3</sup> Profile of Namibia (2013)

persons per square kilometer<sup>4</sup>. However, regional population densities vary substantially, with almost two-thirds of the population living in the four northern regions (Oshikoto, Oshana, Ohangwena, and Omusati), and less than one-tenth living in the south of the country<sup>5</sup>.

Namibia is an upper middle-income country with an estimated population of 2.3 million in 2016 and a projected annual growth of 1.9 per cent<sup>6</sup>. The population of Namibia is youthful, with about 37 per cent of the population aged below 15 years, and only about 5 per cent of the population aged 65 years and above<sup>7</sup>. Moreover, sixty-four per cent of the population is below the age of 30, and 10 to 24 year-olds constitute 30 per cent of the total population. Although the total fertility rate in Namibia fell from 5.4 in 1992 to 3.6 in 2013, it remains high in several regions, particularly in Ohangwena (5.3 per cent), Kavango (4.6 per cent), Omaheke (4.6 per cent), and Kunene (4.5 per cent)<sup>8</sup>. While the country has made great progress in improving access to education, in 2013 only 42 per cent of girls completed secondary education. With an increase in the youth unemployment rate, from 37.8 in 2013 to 43.4 per cent in 2016, combined with a critical skills shortage such as medical, dental, engineers, and financial professionals, especially among youth, significant investments are required for the country to benefit from the demographic dividend<sup>9,10</sup>.

Although Namibia is ranked as an upper middle-income country, the country has one of the most unequal distributions of wealth globally with a national Gini index of 59.1 per cent, ranking second after South Africa<sup>11</sup>. Even though efforts are made to eradicate poverty in the country, poverty rates remain high at 17.4 per cent in 2016, a fall from 27.6 per cent in 2004<sup>12</sup>. Female-headed households are the most affected, with the incidence recorded at 19.2 per cent compared to the male-headed households (15.8 per cent) in 2016<sup>13</sup>. In addition, 32 per cent of women live below the poverty line<sup>14</sup>. After independence, in 1990, the country experienced an average economic annual growth of 4.4 per cent between 1991 and 2015. However, this economic growth stagnated in 2016 and the country fell into a recession in the following year. The economy has since struggled due to the COVID-19 pandemic<sup>15</sup>.

The maternal mortality ratio is high for an upper middle-income country, at 385 per 100,000 live births in 2014<sup>16</sup>. The three main contributing factors are limited access to high quality emergency obstetric and newborn care, the high prevalence of HIV (the indirect cause of more than half of reported maternal

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<sup>4</sup> World Population Review (2022) <https://worldpopulationreview.com/countries/namibia-population>

<sup>5</sup> Namibia Inter-censal Demographic Survey 2016 Report (2017)

<sup>6</sup> Namibia Inter-censal Demographic Survey Report (2017)

<sup>7</sup> Namibia Inter-censal Demographic Survey Report (2017)

<sup>8</sup> Namibia Demographic and Health Survey Report (2014)

<sup>9</sup> Demographic Dividend Study Report (2018)

<sup>10</sup> The Namibia Labour Force Survey Report (2017)

<sup>11</sup> World Population Review (2022) <https://worldpopulationreview.com/country-rankings/gini-coefficient-by-country>

<sup>12</sup> Namibia Household Income and Expenditure Survey Report (2017)

<sup>13</sup> Namibia Household Income and Expenditure Survey Report (2017)

<sup>14</sup> Namibia Household Income and Expenditure Survey Report (2017)

<sup>15</sup> World Bank (2022) <https://www.worldbank.org/en/country/namibia/overview#1>

<sup>16</sup> Namibia Demographic and Health Survey Report (2014)

deaths) and limited access to adolescent friendly health services to prevent unintended pregnancies<sup>17</sup>. Despite a high-skilled birth attendance rate of 88.2 per cent, access to high-quality emergency obstetric care services is very limited, especially in the northern regions. Moreover, multiple and overlapping deprivations among children (0-5 years) leads to high rates of mortality, morbidity, stunting, inadequate care, and protection<sup>18</sup>. In 2019, the under-5 mortality rate for Namibia was 42.4 deaths per thousand live births. Even though this has fallen gradually from 50.5 deaths per thousand live births in 2012, the rate remains high as compared to the global target of 25 deaths per thousand live births<sup>19</sup>. The Ministry of Health is currently implementing a National Strategy for Women, Children Adolescents' Health and Nutrition to ensure minimum standards of coverage and quality to meet international standards. The national adolescent pregnancy rate is 19 per cent, with regional variations ranging from 38.9 and 36.3 per cent in Kunene and Omaheke, respectively, to 9 per cent in Oshana<sup>20,21</sup>. Adolescent girls in rural areas and those with only a primary level education tend to start childbearing earlier than their urban and higher-educated peers<sup>22</sup>. A 2016 UNFPA study on teenage pregnancy in Namibia found that the first sexual experience is unwanted for 54 per cent of girls<sup>23</sup>. Thirty-four per cent of girls aged 17-19 years are not in school, largely due to adolescent pregnancy and socioeconomic reasons, including domestic duties and long traveling distances to schools<sup>24</sup>.

The promotion of family planning and ensuring access to preferred contraceptive methods for adolescents, youth, and women in Namibia is key in order to secure their well-being and autonomy, while supporting the health and development of the country. According to the Namibia Demographic and Health Survey of 2013/14, nine per cent of women aged between 15-24 years indicated that they had sex before 15 years. The use of modern contraceptive methods among adolescent girls in Namibia is observed to be low, at 24 per cent; however this increases with age, recorded at 62 per cent among women aged 25-29 years<sup>25</sup>. Underlying factors include limited knowledge of family planning, reduced availability of commodities, limited access to skilled health professionals, and insufficient domestic resources. Moreover, the country is sparsely populated and access to information and high-quality social and health services, especially in rural areas, remains a challenge<sup>26,27</sup>.

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<sup>17</sup> Namibia Demographic and Health Survey Report (2014)

<sup>18</sup> Namibia Demographic and Health Survey Report (2014)

<sup>19</sup> Monitoring the situation of children and women (2022) <https://data.unicef.org/country/nam/>

<sup>20</sup> Namibia Demographic and Health Survey Report (2014)

<sup>21</sup> Analysis of Factors Influencing Teenage Pregnancy in Namibia (2020) <https://esmed.org/MRA/mra/article/view/2102>

<sup>22</sup> Namibia Demographic and Health Survey Report (2014)

<sup>23</sup> National formative study on child marriage (2019)

<sup>24</sup> National Formative study on child marriage (2019)

<sup>25</sup> Namibia Demographic and Health Survey Report (2014)

<sup>26</sup> Namibia Demographic and Health Survey Report (2014)

<sup>27</sup> World Health Organization (2017) <https://www.afro.who.int/news/increased-access-quality-family-planning-services-key-health-adolescent-girls-and-young-women>

Namibia introduced Comprehensive Sexuality Education (CSE) in 2013 to support adolescents and youth to develop life skills and abilities to make informed choices about their well-being<sup>28</sup>. Scaling up and monitoring of the CSE programme leads to children and young people becoming empowered in realizing their health, well-being and dignity, and developing respectful social and sexual relationships. This can be done through capacity building of teachers. With in-school CSE, this was incorporated into the Namibian school curriculum through Life Skills subject; a compulsory subject for Namibian learners that commences at grade 4 and continues through to grade 12. Life Skills has three main domains covered within its syllabus which are: career guidance, holistic wellness (which covers CSE) and civic affairs. In 2016, approximately 900 Life skills teachers have been appointed who are dedicated to teach the subject<sup>29</sup>. The University Of Namibia (UNAM) and the International University of Management (IUM) with support from development partners such as UNFPA and UNESCO introduced the pre-service training curriculum to train student teachers on CSE. Moreover, in-service trainings on CSE have been conducted with the support of UNFPA and UNESCO. In addition, the CSE curriculum has been revised to incorporate comprehensive sexuality education for out-of-school youth. In 2017, a total of 127 out-of-school youth, many who are community volunteers, have received CSE training<sup>30</sup>.

HIV/AIDS remains the leading cause of death in Namibia. The HIV prevalence in the general population is 8.3 per cent, with women having the highest prevalence of 19.6 per cent compared to 12.7 per cent for men<sup>31</sup>. Moreover, the annual incidence of HIV was observed to be higher among women aged 15-24 years (0.99 per cent) as compared to other age groups<sup>32</sup>. Although limited data are available on sex-specific positivity rates among children and young people, an estimated 0.98 per cent of those under 15 years of age are HIV positive, underscoring the need for prioritizing HIV prevention among adolescent girls and young women<sup>33</sup>.

Even though HIV claims more lives as compared to other causes of deaths in the country, the estimated number of People Living with HIV/AIDS (PLWHA) slightly increased from 180,000 in 2000 to 200,000 in 2015 and this could partly be attributed to the successful implementation of the Antiretroviral Therapy (ART) and Prevention of Mother-To-Child Transmission (PMTCT) programmes<sup>34</sup>. The number of facilities dispensing ARTs has increased over the years, with a total 271 health facilities dispensing ART in 2016 as compared to less than 10 facilities in 2002<sup>35</sup>. In 2017, slightly over 96 per cent of PLWHA aged between 15 – 64 years were on ART, of which 97.1 per cent were females and 94.9 per cent were males<sup>36</sup>.

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<sup>28</sup> Strengthening sexual and reproductive health and HIV prevention amongst children and young people through promoting comprehensive sexuality education in eastern and southern Africa (2016)

<sup>29</sup> Strengthening sexual and reproductive health and HIV prevention amongst children and young people through promoting comprehensive sexuality education in eastern and southern Africa (2016)

<sup>30</sup> Empowering adolescents to make healthy choices (2017) <https://namibia.unfpa.org/en/news/empowering-adolescents-make-healthy-choices>

<sup>31</sup> National HIV Sentinel Survey Report (2016)

<sup>32</sup> NAMPHIA (2017)

<sup>33</sup> National HIV Sentinel Survey Report (2016)

<sup>34</sup> National HIV Sentinel Survey Report (2016)

<sup>35</sup> National HIV Sentinel Survey Report (2016)

<sup>36</sup> NAMPHIA (2017)



Sexual and gender-based violence (SGBV) remains a major issue, with about 33 per cent of Namibian women aged 15-49 who have experienced some form of physical and sexual violence<sup>37</sup>. In 2019, Namibia recorded at least 200 cases of domestic violence per month<sup>38</sup>. Several measures have been put in place to fight SGBV as highlighted in the 5th National Development Plan (2017/18 -2021/22) (NDP 5) and in the National Gender policy. This includes refining and improving relevant legal and policy frameworks, improving services for survivors, increasing the understanding of SGBV in the country through national campaigns, training of service providers, and improving and expanding on data collection mechanisms. Despite considerable progress made, there are still lengths to go in reducing sexual and gender-based violence (SGBV) in Namibia.

Gender-related barriers continue to be inherent in the HIV legal environment, such as unequal age of consent to marriage, inheritance rights for female widows and gaps in sexual and reproductive health rights<sup>39</sup>. Based on the study conducted in Namibia on Child Marriage, 2020, the prevalence of child marriage among girls in Namibia is 18 per cent, while that for boys it is considerably lower, at 4.1 per cent<sup>40</sup>. The highest prevalence of child marriage among girls was reported to be high in the Kavango regions (39.7 per cent), followed by Kunene (24 per cent), Zambezi (23.8 per cent), Omaheke (23 per cent), and Otjozondjupa region (22.6 per cent)<sup>41</sup>. The first sexual encounter for adolescent girls in Namibia was reported to be between 12 and 17 years. Poverty, culture and traditions, alcohol abuse, and lack of educational opportunities were identified as key drivers of child marriage in Namibia<sup>42</sup>.

The last population census took place in 2011 and the Inter-Censal Demographic Survey of 2016 provides data that are more recent. The Namibia Statistics Agency (NSA) is responsible for census undertaking and conducts thematic research, including the Household Income and Expenditure Survey and Multidimensional Poverty Index (MPI) surveys. Namibia conducts regular censuses with the next census initially planned for 2021, however it was postponed to August 2022 due to the COVID-19 situation. The country also conducts regular surveys and collects data through the Health Information System. However, limited analysis of socioeconomic and demographic data and inadequate monitoring and evaluation systems were identified during the development of the NDP 5 as key barriers to evidence-based planning and decision-making. The country is currently undertaking the review of NDP 5 and formulating the 6th National Development Plan (NDP 6) for the period 2022/23- 2026/27.

Namibia is prone to natural disasters, health emergencies, and an influx of migrants and refugees. The country is severely affected by climate change, as seen in cyclical droughts/floods mostly in the Cuvelai-Etosa and the Zambezi-Kwando-Linyanti Basins<sup>43</sup>. In 2013-2019, the country experienced severe

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<sup>37</sup> Namibia Demographic and Health Survey Report (2014)

<sup>38</sup> Violence against Women and Children (2019)

[https://www.unodc.org/documents/southernafrica/Consultancies\\_and\\_Opportunities/2019/REWRITTEN\\_WEBSTORY\\_OF\\_LAUNCH\\_GBVPU\\_071019\\_002.pdf](https://www.unodc.org/documents/southernafrica/Consultancies_and_Opportunities/2019/REWRITTEN_WEBSTORY_OF_LAUNCH_GBVPU_071019_002.pdf)

<sup>39</sup> National HIV Sentinel Survey Report (2016)

<sup>40</sup> National formative study on child marriage (2019)

<sup>41</sup> National formative study on child marriage (2019)

<sup>42</sup> National formative study on child marriage (2019)

<sup>43</sup> National Policy on Climate Change for Namibia (2010)

droughts and floods in some areas. The impact of recurrent droughts was on crops, pasture and water availability, which resulted in livestock deaths, crop failures, food insecurity, and increased poverty. Out of the population of 2.6 million, 778 504 people were severely affected by these droughts<sup>44</sup>. More than 60 000 children between 5-16 years and 23 180 pregnant mothers were at risk of malnutrition<sup>45</sup>. The UNFPA CO has been actively involved in supporting the government during these crises specifically in areas of sexual and reproductive health and rights and SGBV. In addition, Namibia has experienced an outbreak of the Hepatitis E virus since December 2017. The initial cases were reported in the informal settlements of Windhoek, which later spread to all the 14 regions, and by February 2022, 7,247 cases were reported. Among all reported cases, 6,068 (84 per cent) were reported from Khomas and Erongo regions, which have large informal settlements.

The first case of the COVID-19 epidemic in Namibia was reported on March, 13, 2020 and a state of emergency declared on March, 17, 2020. The Ministry of Health and Social Services (MoHSS) established an Emergency Response team, which aimed to intensify the surveillance of COVID-19 in the country, especially at the borders of Namibia. On 28 March 2020, the country went into a full lockdown. COVID-19 has disrupted the already limited services available, such as access to SRH services, schools, and others, and has increased the urgency to meet the needs of the most vulnerable populations. Already impoverished populations are facing greater disadvantages with an increase of unemployment, particularly to those in informal employment (such as street vendors), coupled with an increase of prices of commodities. As of 23 January, 2022, the outbreak had reached all the 14 regions of the country. In total, 155,424 cases have been reported and there have been 3,924 deaths<sup>46</sup>.

The support that the UNFPA Namibia Country Office (CO) provides to the Government of Namibia as articulated by the 6th Country Programmes (CP) (2019 -2023) builds on the following national policies, laws, and strategic framework:

Harambee Prosperity Plan II, 2021 – 2025

Harambee Prosperity Plan, 2016-2020

Namibia National Strategy for Women, Children Adolescent's- Health and Nutrition, 2018 - 2022

Namibia Standard Treatment Guideline, 2011

Namibia Statistics Policy, 2014

Namibia's 5th National Development Plan, 2017/18 – 2021/22

National Action plan for Health Security, 2021 – 2025

National Gender policy, 2010- 2020

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<sup>44</sup> Namibia Meteorological Services (2014) [https://www.droughtmanagement.info/literature/UNW-DPC\\_NDMP\\_Country\\_Report\\_Namibia\\_2014.pdf](https://www.droughtmanagement.info/literature/UNW-DPC_NDMP_Country_Report_Namibia_2014.pdf)

<sup>45</sup> Namibia Meteorological Services (2014) [https://www.droughtmanagement.info/literature/UNW-DPC\\_NDMP\\_Country\\_Report\\_Namibia\\_2014.pdf](https://www.droughtmanagement.info/literature/UNW-DPC_NDMP_Country_Report_Namibia_2014.pdf)

<sup>46</sup> Outbreak of Hepatitis E Virus (HEV) in Namibia (2019) <file:///C:/Users/saima.heita/Downloads/National%20SITREP%2064%20on%20Hepatitis%20E%20%20%20outbreak%20Final.pdf>

National Guidelines for Review and Response to Maternal Deaths, Near Misses, Stillbirth, and Neonatal Deaths, 2019  
National Guidelines on Family Planning, 2019  
National Guidelines: Antenatal Care for a positive pregnancy experience, 2020  
National policy on Sexual, Reproductive and Child Health, 2013  
National Statistics Act, 9, 2011  
National Strategic Framework for HIV and AIDS response in Namibia, 2017/18 – 2021/22  
National Youth policy, third revision, 2020- 2030  
National spatial data infrastructure strategy and action plan (2015 - 2020)  
Namibia Statistics Agency strategic plan (2017/18 – 2021/22)

### 3. UNFPA Country Programme

UNFPA has been working with the Government of Namibia since 1990 towards enhancing sexual and reproductive health and rights (SRHR), advancing gender equality, realizing rights and choices for young people, and strengthening the generation and use of population data for development. UNFPA is currently implementing the 6th CP in Namibia.

The 6th CP (2019 -2023) is aligned with the 5th National Development Plan (2017/18-2021/22), the Harambee Prosperity Plan (2016/17 – 2019/20), the 2063 African Union Agenda, the UNPAF (2019 – 2023), the UNFPA Strategic Plan (2018 -2021), and they contribute to the Sustainable Development Goals 3 and 5. It was developed in consultation with the Government, civil society, bilateral and multilateral development partners, including United Nations organizations, the private sector and academia.

The UNFPA Namibia CO delivers its CP through the following modes of engagement: (i) advocacy and policy dialogue, (ii) capacity development, (iii) knowledge management, (iv) service delivery, and (v) partnerships and coordination. The overall goal of the UNFPA Namibia 6th CP (2019-2023) is **universal access to sexual and reproductive health and reproductive rights and reduced maternal mortality**, as articulated in the UNFPA Strategic Plans 2018-2021. The CP contributes to the following **outcomes** of the UNFPA Strategic Plan:

- **Outcome 2.** *Every adolescent and youth, in particular adolescent girls, is empowered to have access to sexual and reproductive health and reproductive rights, in all contexts.*
- **Outcome 3.** *Gender equality, the empowerment of all women and girls, and reproductive rights are advanced in development and humanitarian settings.*

The UNFPA Namibia 6th CP (2019 - 2023) has 2 thematic areas of programming with distinct outputs that are structured according to the 2 outcomes in the Strategic Plan to which they contribute.

**Outcome 2: Every adolescent and youth, in particular adolescent girls, is empowered to have access to sexual and reproductive health and reproductive rights, in all contexts**

**Output 1: Young people, particularly adolescent girls, are better equipped with knowledge and skills to take informed decisions on their reproductive health and rights.**

This was delivered through (a) engaging with parliamentarians, civil society organizations, community leaders, youth networks and the media to advocate for the implementation of laws, policies and programmes that promote adolescent sexual and reproductive health and rights, and for increased investments to achieve the government target of 90 per cent of youth with accurate knowledge of HIV; (b) strengthening the institutional capacity to deliver high-quality and evidence-based comprehensive sexuality education in higher learning institutions and to out-of-school youth; (c) advocating for investment in youth leadership, participation, economic empowerment and employability, including through the 'be free' and 'break-free' campaigns; (d) facilitating youth dialogue and national dialogue to counter negative social norms and adopt positive values; and (e) facilitating the development of information communication and technology solutions to reach, engage and empower adolescents and young people in relation to sexual and reproductive health and rights.

**Output 2: Adolescents and young people have improved access to adolescent and youth-friendly health services.**

This was delivered through the (a) training of health workers and building institutional capacity to deliver high-quality, adolescent-friendly health services, including the scale up of integrated sexual and reproductive health and HIV services by ensuring 'no one is left behind' in the UNFPA focus districts; (b) training of relevant Ministry of Health staff to ensure an efficient and sustainable supply chain management system that delivers a reliable supply of contraceptive methods, including long-acting reversible methods; (c) promoting the rights of sex workers and improving their access to integrated sexual and reproductive health services; and (d) supporting the generation of demographic intelligence, with a focus on the most vulnerable adolescents and youth, to inform advocacy, policymaking and resource allocation.

**Outcome 3: Gender equality, the empowerment of all women and girls, and reproductive rights are advanced in development and humanitarian settings**

**Output 3: Strengthened capacity of national institutions to deliver comprehensive and integrated gender-based violence response services and to empower communities to prevent gender-based violence.**

In order to combat sexual violence and address unmet need for contraceptives, UNFPA delivered several activities such as engaging in advocacy and policy dialogue, capacity development and knowledge management. These were completed through (a) equipping key government staff and health service providers with the skills to effectively coordinate and deliver the integrated essential service package for women and girls subjected to violence, including the delivery of contraceptive information and services, and emergency contraception options; (b) advocating for the effective implementation of legal and policy frameworks, and international instruments for gender-based violence prevention and response; (c) strengthening the generation, management and analysis of high-quality disaggregated data to inform

policies, laws and programmes for the prevention of gender-based violence and harmful practices (such as early and forced marriages), and the promotion of equitable access to contraceptives, with a particular focus on the most vulnerable and furthest behind; (d) supporting social mobilization programmes targeting men and boys, to combat discriminatory norms and promote positive values and behaviours (including supporting activists to speak out and share their stories); promote dialogue among parents, educators, community leaders, media practitioners, social media influencers and the youth; and raise awareness among parliamentarians of the need to advocate for the promotion and protection of the rights of adolescents and young people; (e) supporting innovation, including the use of information communication and technology solutions for sexual reproductive health and gender-based violence prevention and response; and (f) providing technical assistance for the integration of gender-based violence and sexual and reproductive health services into disaster risk management and humanitarian response programmes.

The UNFPA Namibia CO also takes part in activities of the UNCT, with the objective to ensure inter-agency coordination and the efficient and effective delivery of tangible results in support of the national development agenda and the SDGs. Beyond the UNCT, the UNFPA Namibia CO participates in the Humanitarian Country Team (HCT) to ensure that inter-agency humanitarian action is well-coordinated, timely, principled and effective, to alleviate human suffering and protect the lives, livelihoods and dignity of people affected by humanitarian crisis.

The **theory of change** that describes how and why the set of activities planned under the CP are expected to contribute to a sequence of results that culminates in the strategic goal of UNFPA is presented in Annex A. The theory of change will be an essential building block of the evaluation methodology. The CP theory of change explains how the activities undertaken contribute to a chain of results that lead to the intended or observed outcomes. At the design phase, the evaluators will perform an in depth review of the CP theory of change. This will help them refine the evaluation questions (see preliminary questions in section 5.2), identify key indicators for the evaluation, plan data collection (and identify potential gaps in available data), and provide a structure for data collection (the evaluation matrix – see section 6.2 and Annex C) analysis and reporting. The evaluators’ review of the theory of change (its validity and comprehensiveness) is also crucial with a view to informing the preparation of the next country programme’s theory of change by the BP.

The UNFPA Namibia 6th CP (2019 -2023) is based on the following results framework presented below:

## Namibia/UNFPA 6<sup>th</sup> Country Programme (2019-2023) Results Framework

<b>Goal: Achieved universal access to sexual and reproductive health, realized reproductive rights, and reduced maternal mortality to accelerate progress on the ICPD agenda, to improve the lives of adolescents, youth and women, enabled by population dynamics, human rights, and gender equality</b>	
<b>UNFPA Thematic Areas of Programming</b>	
<b>I. Adolescents and youth</b>	<b>II. Gender equality and women’s empowerment</b>
<b>UNFPA Strategic Plan Outcomes</b>	
<b>UNFPA Strategic Plan (2018 - 2021) Outcome 2: Every adolescent and youth, in particular adolescent girls, is empowered to have access to sexual and reproductive health and reproductive rights, in all contexts.</b>	<b>UNFPA Strategic Plan (2018 – 2021) Outcome 3: Gender equality, the empowerment of all women and girls, and reproductive rights are advanced in development and humanitarian settings.</b>
<b>UNFPA Namibia 6th CP Outputs</b>	
<b>Output 1:</b> Young people, particularly adolescent girls, are better equipped with knowledge and skills to make informed decisions on their reproductive health and rights.  <b>Output 2:</b> Adolescents and young people have improved access to adolescent and youth-friendly health services.	<b>Output 3.</b> Strengthened capacity of national institutions to deliver comprehensive and integrated gender-based violence response services and empower communities to prevent gender-based violence
<b>UNFPA Namibia [6th CP Intervention Areas</b>	
(1) Activities planned and implemented: <ul style="list-style-type: none"> <li>● National Youth policy reviewed and finalized</li> <li>● Capacity building of member of parliament to advocate and lobby for SRHR conducted</li> <li>● Life skills teachers and final year students at the University of Namibia trained on the Comprehensive Sexuality Education (CHE)</li> </ul>	(1) Activities planned and implemented: <ul style="list-style-type: none"> <li>● National Gender Based Violence database reviewed,</li> <li>● Minimum initial services package developed and integrated into the National Disaster Risk Management Plan,</li> <li>● Clinical Handbook finalized,</li> </ul>

- Mapping of vulnerable Adolescent girls completed
- Menstrual Health Management incorporated into the new integrated HIV policy of the education sector.
- The National HIV and HIV workplace policy for educators reviewed and finalized.
- Strengthen the technical capabilities of the National Healthcare System within the scope of the of the ICPD reference Center for Sexual and Reproductive Health including: strengthening of the national pool procurement of Family Planning commodities, training of Health Care Workers (HCW) on the FP service provision including the long term methods, developing and dissemination of the FP guide, developing the SRHR strategy/ action plan, and procuring of the basic medical equipment and family planning commodities.
- Supporting the capacity building activities of the Namibia Statistics Agency (NSA) in preparation for 2021 Population and Housing Census
- Supported the NSA in the production the first ever of the 2021 Namibia Multidimensional Poverty Index Report
- Coordinated the inclusion of the Washington Group Questions on disability into the 2021 Census tool.

(2) Activities Implemented but not initially-planned:

- **Update the national SRH protocols to include COVID-19 prevention measures,**
- **Procurement of PPE for health providers to prevent COVID-19 infections**
- **Supported the development, printing and dissemination of the Community Engagement Tool kit on the prevention of COVID-19,**
- **Support the NSA to conducting the Impact of COVID-19 on households and job tracker survey.**
- **Supported the NSA in the production of the Vital Statistics and Causes of Deaths reports.**

(3) Activities planned but not implemented:

- *Strengthen capacities of stakeholders in data coordination and promote National Strategy for Development of Statistics (NSDS).*
- *HIS tool reviewed to incorporate missing indicators.*

- Train and capacitate service providers such as the HCWs, police officers, and justice personnel in the provision of quality and coordinated SGBV prevention and responsive services.

(2) Activities Implemented but not initially planned:

- **Procurement of dignity kits for adolescents and women who migrated from Angola**

(3) Activities planned but not implemented:

- *Adapted social norm change strategy not developed, this is a strategy on how to engage the community on harmful practices.*

Nota Bene: "CP Intervention Areas" boxes: **In bold:** Activities that were not initially planned, yet were implemented; *in italics:* Activities that were initially planned but were not implemented.



## 4. Evaluation Purpose, Objectives and Scope

### 4.1. Purpose

The CPE will serve the following three main purposes, as outlined in the 2019 UNFPA Evaluation Policy: (i) demonstrate accountability to stakeholders on performance in achieving development results and on invested resources; (ii) support evidence-based decision-making; and (iii) contribute key lessons learned to the existing knowledge based on how to accelerate the implementation of the Programme of Action of the 1994 ICPD.

### 4.2. Objectives

The **objectives** of this CPE are:

- i. To provide the UNFPA Namibia CO, national stakeholders and rights-holders, the UNFPA ESARO, UNFPA Headquarters as well as a wider audience with an independent assessment of the UNFPA Namibia 6th CP (2019-2023).
- ii. To broaden the evidence base to inform the design of the next programme cycle.

The **specific objectives** of this CPE are:

- i. To provide an independent assessment of the relevance, effectiveness, efficiency and sustainability of UNFPA support.
- ii. To provide an assessment of the geographic and demographic coverage of UNFPA humanitarian assistance and the ability of UNFPA to connect immediate, lifesaving support with long-term development objectives.
- iii. To provide an assessment of the role-played by the UNFPA Namibia CO in the coordination mechanisms of the UNCT, with a view to enhancing the United Nations collective contribution to national development results. In addition, to provide an assessment of the role of the UNFPA Namibia CO in the coordination mechanisms of the HCT, with a view to improving humanitarian response and ensuring contribution to longer-term recovery.
- iv. To draw key conclusions from past and current cooperation and provide a set of clear, forward-looking and actionable recommendations for the next programme cycle.

### 4.3. Scope

#### Geographic Scope

The evaluation will cover the national and subnational level interventions where UNFPA implemented interventions: Ohangwena, Zambezi, Kunene, and Omaheke regions.

#### Thematic Scope

The evaluation will cover the following thematic areas of the 6th CP: adolescents and youth and gender equality and women's empowerment. In addition, the evaluation will cover cross-cutting issues, such as human rights; humanitarian assistance including in the context of COVID1-19; sustainable development;

gender equality; and disability and transversal functions; such as coordination; monitoring and evaluation (M&E); innovation; resource mobilization; strategic partnerships.

### Temporal Scope

The evaluation will cover interventions planned and/or implemented within the time period of the current CP: 2019-2022.

## 5. Evaluation Criteria and Preliminary Evaluation Questions

### 5.1. Evaluation Criteria

In accordance with the methodology for CPEs outlined in the UNFPA Evaluation Handbook (see section 3.2, pp. 51-61), the evaluation will examine the following four OECD/DAC evaluation criteria: relevance, effectiveness, efficiency and sustainability.<sup>47</sup> It will also use the evaluation criterion of coordination to assess the extent to which the UNFPA Namibia CO harmonized interventions with other actors, promoted synergy and avoided duplication under the framework of the UNCT and the HCT. Furthermore, the evaluation will use the humanitarian-specific evaluation criteria of coverage and connectedness to investigate: (i) to what extent UNFPA has been able to provide life-saving services to affected populations that are hard-to-reach; and (ii) to work across the humanitarian-peace-development nexus and contribute to building resilience.

<b>Relevance</b>	The extent to which the objectives of the UNFPA country programme correspond to population needs at country level (in particular, those of vulnerable groups), and were aligned throughout the programme period with government priorities and with strategies of UNFPA.
<b>Effectiveness</b>	The extent to which country programme outputs have been achieved and the extent to which these outputs have contributed to the achievement of the country programme outcomes.
<b>Efficiency</b>	The extent to which country programme outputs and outcomes have been achieved with the appropriate amount of resources (funds, expertise, time, administrative costs, etc.).
<b>Sustainability</b>	The continuation of benefits from a UNFPA-financed intervention after its termination, linked, in particular, to their continued resilience to risks.
<b>Coordination</b>	The extent to which UNFPA has been an active member of and contributor to existing coordination mechanisms of the UNCT. This also includes UNFPA membership of, and contributions to humanitarian coordination mechanisms of the HCT, where applicable.
<b>Coverage</b>	The extent to which major population groups facing life-threatening suffering were reached by humanitarian action.
<b>Connectedness</b>	The extent to which activities of a short-term emergency nature are carried out in a context that takes longer-term and interconnected problems into account.

### 5.2. Preliminary Evaluation Questions

The evaluation of the CP will provide answers to the evaluation questions (related to the above criteria), which determine the thematic scope of the CPE.

<sup>47</sup> The full set of OECD/DAC evaluation criteria, their adapted definitions and principles of use are available at: <https://www.oecd.org/dac/evaluation/revised-evaluation-criteria-dec-2019.pdf>.

The evaluation questions presented below are indicative and preliminary. Based on these examples, the country office staff is expected to develop a set of questions directly relevant to the CP under evaluation and insert them in this section. At the design phase, the evaluators are expected to develop a final set of evaluation questions, in consultation with the evaluation manager at the UNFPA Namibia CO and the ERG.

### **Relevance**

1. To what extent is the country programme adapted to: (i) the needs of diverse populations, including the needs of vulnerable and marginalized groups (e.g. young people and women with disabilities, etc.); (ii) national development strategies and policies; (iii) the strategic direction and objectives of UNFPA; and (iv) priorities articulated in international frameworks and agreements, in particular the ICPD Programme of Action and the SDGs?
2. To what extent has the country office been able to respond to changes in national needs and priorities, including those of vulnerable or marginalized groups, including those entailed by the crises triggered by the COVID-19 pandemic?

### **Effectiveness**

3. To what extent have the interventions supported by UNFPA delivered outputs and contributed to the achievement of the outcomes of the country programme? In particular: (i) increased access and use of integrated sexual and reproductive health services; (ii) empowerment of adolescents and youth to access sexual and reproductive health services and exercise their sexual and reproductive rights; (iii) advancement of gender equality and the empowerment of all women and girls and promoting reduction in gender-based violence and harmful practices; (iv) increased use of population data in the development of evidence-based national development plans, policies and programmes?
4. To what extent has UNFPA successfully integrated human rights, gender perspectives and disability inclusion<sup>48</sup> in the design, implementation and monitoring of the country programme?

### **Efficiency**

5. To what extent has UNFPA made good use of its human, financial and administrative resources, and used a set of appropriate policies, procedures and tools to pursue the achievement of the outcomes defined in the county programme including the use of the mix of resources, procedures and implementation modalities adapted to the COVID-19 context and natural disaster such as drought?

### **Sustainability**

6. To what extent has UNFPA been able to support implementing partners and rights-holders (notably, women, adolescents and youth) in developing capacities and establishing mechanisms to ensure the durability of effects in particular related to SRHR, SGBV prevention and protection and data?

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<sup>48</sup> See [Guidance on disability inclusion in UNFPA evaluations](#)

### ***Coordination***

7. To what extent has the UNFPA country office provided leadership in SGBV and SRHR coordination and contributed to effective coordination, leveraging of partnerships and complementarity within the framework of the United Nations Country Team (UNCT) including to the collective response to the COVID-19 crisis?

### ***Coverage***

8. To what extent have UNFPA humanitarian interventions systematically i) reached all geographic areas in which affected populations (women, adolescents and youth) reside and ii) reached the most vulnerable and marginalized groups (young people and women with disabilities, ethnic, religious and indigenous groups; Sex workers, LGBTQI populations, displaced people, and migrants)

### ***Connectedness***

9. To what extent has UNFPA contributed to developing the capacity of local and national actors (government line ministries, youth and women's organizations, health facilities, communities, etc.) to better prepare for, respond to and recover from humanitarian crisis?
10. To what extent have the interventions supported by UNFPA taken into account complementarity and integration of ongoing development plans, programmes including related thematic areas from various stakeholders?

The final evaluation questions and the evaluation matrix will be presented in the design report.

## **6. Approach and Methodology**

### **6.1. Evaluation Approach**

#### ***Theory-based approach***

The CPE will adopt a theory-based approach that relies on an explicit theory of change, which depicts how the interventions supported by the UNFPA Namibia CO are expected to contribute to a series of results (outputs and outcomes) that contribute to the overall goal of UNFPA. The theory of change also identifies the causal links between the results, as well as critical assumptions and contextual factors that support or hinder the achievement of desired changes. A theory-based approach is fundamental for generating insights about what works, what does not and why. It focuses on the analysis of causal links between changes at different levels of the results chain that the theory of change describes, by exploring how the assumptions behind these causal links and contextual factors affect the achievement of intended results.

The theory of change will play a central role throughout the evaluation process, from the design and data collection to the analysis and identification of findings, as well as the articulation of conclusions and recommendations. The evaluation team will be required to verify the theory of change underpinning the UNFPA Namibia 6th CP (2019 - 2023) (see Annex A) and use this theory of change to determine whether changes at output and outcome levels occurred (or not) and whether assumptions about change hold

true. The analysis of the theory of change will serve as the basis for the evaluators to assess how relevant, effective, efficient and sustainable the support provided by the UNFPA Namibia CO was during the period of the 6th CP.

As part of the theory-based approach, the evaluators shall use a contribution analysis to explore whether evidence to support key assumptions exists, examine if evidence on observed results confirms the chain of expected results in the theory of change, and seek out evidence on the influence that other factors may have had in achieving desired results. This will enable the evaluation team to make a reasonable case about the difference that the UNFPA Namibia 6th CP (2019-2023) made.

### ***Participatory approach***

The CPE will be based on an inclusive, transparent and participatory approach, involving a broad range of partners and stakeholders at national and sub-national levels. The UNFPA Namibia CO has developed an initial stakeholder map (see Annex B) to identify stakeholders who have been involved in the preparation and implementation of the CP, and those partners who do not work directly with UNFPA, yet play a key role in a relevant outcome or thematic area in the national context. These stakeholders include government representatives, civil society organizations, implementing partners, the private sector, academia, other United Nations organizations, donors and, most importantly, rights-holders (notably women, adolescents and youth). They can provide information and data that the evaluators should use to assess the contribution of UNFPA support to changes in each thematic area of the CP. Particular attention will be paid to ensuring participation of women, adolescents and young people, especially those from vulnerable and marginalized groups (e.g. young people and women with disabilities, etc.).

The evaluation manager in the UNFPA Namibia CO has established an ERG comprised of key stakeholders of the CP, including: key CO personnel, key governmental and non-governmental counterparts at national level, Civil Society Organizations (CSOs), Organizations of Persons with Disabilities (OPDs), organizations representing youth and women, the youth team leader and SYP regional advisor, the Strategic Information Specialist for MIC Hub, the Programme Specialist for SRH/HIV and gender in ESARO, and the regional M&E adviser in UNFPA ESARO. The ERG will provide inputs at different stages in the evaluation process.

### ***Mixed-method approach***

The evaluation will primarily use qualitative methods for data collection, including document review, interviews, group discussions and observations during field visits, where appropriate. In the absence of high number of COVID-19 cases, the evaluation team is expected to collect data physically, otherwise this will be done remotely. The qualitative data will be complemented with quantitative data to minimize bias and strengthen the validity of findings. Quantitative data will be compiled through desk review of documents, websites and online databases to obtain relevant financial data and data on key indicators that measure change at output and outcome levels.

These complementary approaches described above will be used to ensure that the evaluation: (i) responds to the information needs of users and the intended use of the evaluation results; (ii) upholds human rights and principles throughout the evaluation process, including through participation and consultation of key stakeholders (rights holders and duty bearers); and (iii) provides credible information about the benefits

for duty bearers and rights-holders (women, adolescents and youth) of UNFPA support through triangulation of collected data.

## 6.2. Methodology

The evaluation team shall develop the evaluation methodology in line with the evaluation approach and guidance provided in the UNFPA Evaluation Handbook. The Handbook will help the evaluators develop a methodology that meets good quality standards for evaluation at UNFPA and the professional evaluation standards of UNEG. It is expected that, once contracted by the UNFPA Namibia CO, the evaluators acquire a solid knowledge of the Handbook and the proposed methodology of UNFPA.

The CPE will be conducted in accordance with the UNEG *Norms and Standards for Evaluation*,<sup>49</sup> *Ethical Guidelines for Evaluation*,<sup>50</sup> *Code of Conduct for Evaluation in the UN System*<sup>51</sup>, and *Guidance on Integrating Human Rights and Gender Equality in Evaluations*.<sup>52</sup> When contracted by the UNFPA Namibia CO, the evaluators will be requested to sign the UNEG *Code of Conduct*<sup>53</sup> prior to starting their work.

The methodology that the evaluation team will develop builds the foundation for providing valid and evidence-based answers to the evaluation questions and for offering a robust and credible assessment of UNFPA support in Namibia. The methodological design of the evaluation shall include in particular: (i) a theory of change; (ii) a strategy for collecting and analyzing data; (iii) specifically designed tools for data collection and analysis; (iv) an evaluation matrix; and (v) a detailed evaluation work plan and agenda for the field phase.

The evaluation team is strongly encouraged to refer to the Handbook throughout the whole evaluation process and use the provided tools and templates for the conduct of the evaluation.

### ***The evaluation matrix***

The evaluation matrix is centerpiece to the methodological design of the evaluation (see Handbook, section 1.3.1, pp. 30-31 and Tool 1: The Evaluation Matrix, pp. 138-160 as well as the evaluation matrix template in Annex C). The matrix contains the core elements of the evaluation. It outlines (i) *what will be evaluated*: evaluation questions for all evaluation criteria and key assumptions to be examined; and (ii) *how it will be evaluated*: data collection methods and tools and sources of information for each evaluation question and associated key assumptions. By linking each evaluation question (and associated assumptions) with the specific data sources and data collection methods required to answer the question, the evaluation matrix plays a crucial role before, during and after data collection.

- In the design phase, the evaluators should use the evaluation matrix to develop a detailed agenda for data collection and analysis and to prepare the structure of interviews, group discussions and

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<sup>49</sup> Document available at: <http://www.unevaluation.org/document/detail/1914>.

<sup>50</sup> Document available at: <http://www.unevaluation.org/document/detail/102>.

<sup>51</sup> Document available at: <http://www.unevaluation.org/document/detail/100>.

<sup>52</sup> Document available at: <http://www.unevaluation.org/document/detail/980>.

<sup>53</sup> UNEG Code of conduct: <http://www.unevaluation.org/document/detail/100>.

site visits. At the design phase, the evaluation team must enter, in the matrix, the data and information resulting from their desk (documentary review) in a clear and orderly manner.

- During the field phase, the evaluation matrix serves as a working document to ensure that data and information are systematically collected (for each evaluation question) and are presented in an organized manner. Throughout the field phase, the evaluators must enter, in the matrix, all data and information collected. The evaluation manager will ensure that the matrix is placed in a Google drive and will check the evaluation matrix on a daily basis to ensure that data and information is properly compiled. S/he will alert the evaluation team in the event of gaps that require additional data collection or if the data/information entered in the matrix is insufficiently clear/precise.
- In the reporting phase, the evaluators should use the data and information presented in the evaluation matrix to build their analysis (or findings) for each evaluation question. The fully completed matrix is an indispensable annex to the report and the evaluation manager will verify that sufficient evidence has been collected to answer all evaluation questions in a credible manner.

As the evaluation matrix plays a crucial role at all stages of the evaluation process, it will require particular attention from both the evaluation team and the evaluation manager. The evaluation matrix will be drafted in the design phase and must be included in the design report. The evaluation matrix will also be included in the annexes of the final evaluation report, to enable the evaluation report's users to access the supporting evidence for the answers to the evaluation questions.

#### ***Finalization of the evaluation questions and related assumptions***

Based on the preliminary questions presented in the present terms of reference (section 5.2) and the theory of change underlying the CP (see Annex A), the evaluators are required to refine the evaluation questions. In their final form, the questions should reflect the evaluation criteria (section 5.1) and clearly define the key areas of inquiry of the CPE. The final evaluation questions will structure the evaluation matrix (see Annex C) and shall be presented in the design report.

The evaluation questions must be complemented by a set of critical assumptions that capture key aspects of how and why change is expected to occur, based on the theory of change of the CP. This will allow the evaluators to assess whether the preconditions for the achievement of outputs and the contribution of UNFPA to higher-level results, in particular at outcome level, are met. The data collection for each of the evaluation questions and related assumptions will be guided by clearly formulated quantitative and qualitative indicators, which need to be specified in the evaluation matrix.

#### ***Sampling strategy***

The UNFPA Namibia CO will provide an initial overview of the interventions supported by UNFPA, the locations where these interventions have taken place, and the stakeholders involved in these interventions. As part of this process, the UNFPA Namibia CO has produced an initial stakeholder map to identify the range of stakeholders that are directly or indirectly involved in the implementation, or affected by the implementation of the CP (see Annex B).

Building on the initial stakeholder map and based on information gathered through document review and discussions with CO staff, the evaluators will develop the final stakeholder map. From this final stakeholder map, the evaluation team will select a sample of stakeholders at national and sub-national levels who will be consulted through interviews and/or group discussions during the data collection phase. These stakeholders must be selected through clearly defined criteria and the sampling approach outlined in the design report (for guidance on how to select a sample of stakeholders see Handbook, pp. 62-63). In the design report, the evaluators should also make explicit what groups of stakeholders were not included and why. The evaluators should aim to select a sample of stakeholders that is as representative as possible, recognizing that it will not be possible to obtain a statistically representative sample.

The evaluation team shall also select a sample of sites that will be visited for data collection, and provide the rationale for the selection of the sites in the design report. The UNFPA Namibia CO will provide the evaluators with necessary information to access the selected locations, including logistical requirements and security risks, if applicable. The sample of sites selected for visits should reflect the variety of interventions supported by UNFPA, both in terms of thematic focus and context.

The final sample of stakeholders and sites will be determined in consultation with the evaluation manager, based on the review of the design report.

### ***Data collection***

The evaluation will consider primary and secondary sources of information. For detailed guidance on the different data collection methods typically employed in CPEs, see Handbook, section 3.4.2, pp. 65-73.

Primary data will be collected through semi-structured interviews with key informants at national and sub-national levels (government officials, representatives of implementing partners, civil society organizations, other United Nations organizations, donors, and other stakeholders), as well as group discussions with service providers and rights-holders (notably women, adolescents and youth) and direct observation during visits to selected sites.

Secondary data will be collected through document review, primarily focusing on annual work plans, quarterly work plan progress reports, monitoring data and donor reports for projects of the CO, evaluations and research studies (incl. previous CPEs, mid-term reviews of the CP, evaluations by the UNFPA Evaluation Office, research by international NGOs and other United Nations organizations, etc.), housing census and population data, and records and data repositories of the CP and its implementing partners, such as health clinics/centres. Particular attention will be paid to compiling data on key performance indicators of the UNFPA Namibia CO during the period of the 6th CP (2019-2023).

The evaluation team will ensure that data collected is disaggregated by sex, age, location and other relevant dimensions, such as disability status, to the extent possible.

The evaluation team is expected to dedicate a total of 3 weeks for data collection in the field. The data collection tools that the evaluation team will develop, which may include protocols for semi-structured



interviews and group discussions, checklists for direct observation at sites visited or a protocol for document review, shall be presented in the design report.

### ***Data analysis***

The evaluation matrix will be the major framework for analyzing data. The evaluators must enter the qualitative and quantitative data in the evaluation matrix for each evaluation question and each assumption. Once the evaluation matrix is completed, the evaluators should identify common themes and patterns that will help to answer the evaluation questions. The evaluators shall also identify aspects that should be further explored and for which complementary data should be collected, to fully answer all the evaluation questions and thus cover the whole scope of the evaluation (see Handbook, sections 5.1 and 5.2, pp. 115-117).

### ***Validation mechanisms***

All findings of the evaluation need to be firmly grounded in evidence. The evaluation team will use a variety of mechanisms to ensure the validity of collected data and information (for more detailed guidance see Handbook, section 3.4.3, pp. 74-77). These mechanisms include (but are not limited to):

- Systematic triangulation of data sources and data collection methods (see Handbook, section 4.2, pp. 94-95);
- Regular exchange with the evaluation manager at the CO;
- Internal evaluation team meetings to corroborate data and information for the analysis of assumptions, the formulation of emerging findings and the definition of preliminary conclusions; and
- The debriefing meeting with the CO and the ERG at the end of the field phase, when the evaluation team present the emerging findings of the evaluation.

Data validation is a continuous process throughout the different evaluation phases. The evaluators should check the validity of the collected data and information and verify the robustness of findings at each stage of the evaluation, so they can determine whether they should further pursue specific hypotheses (related to the evaluation questions) or disregard them when there are indications that these are weak (contradictory findings or lack of evidence, etc.).

The validation mechanisms will be presented in the design report.

## **7. Evaluation Process**

The CPE process can be broken down into five different phases that include different stages and lead to different deliverables: preparatory phase; design phase; field phase; reporting phase; and phase of dissemination and facilitation of use. The evaluation manager and the evaluation team leader must undertake quality assurance of each deliverable at each phase and step of the process, with a view to ensuring the production of a credible, useful and timely evaluation.

### 7.1. **Preparatory Phase** (Handbook, pp.35-40)

The evaluation manager at the UNFPA Namibia CO will lead the preparatory phase of the CPE, which includes:

- Establishment of the ERG.
- Compilation of background information and documentation on the country context and CP for desk review by the evaluation team in the design phase.
- Drafting the terms of reference (ToR) for the CPE with support from the regional M&E adviser in UNFPA ESARO and in consultation with the ERG, and submission of the draft ToR (without annexes) to the UNFPA Evaluation Office for review and approval.
- Publication of the call for the evaluation consultancy.
- Completion of the annexes to the ToR with support of the CO staff, and submission of the draft annexes to the UNFPA Evaluation Office for review and approval.
- Pre-selection of consultants by the CO, pre-qualification of the consultants by the UNFPA Evaluation Office, and recruitment of the consultants by the CO to constitute the evaluation team.

### 7.2. **Design Phase** (Handbook, pp. 43-83)

In the design phase, the evaluation manager will lay the foundation for communications around the CPE. All other activities will be carried out by the evaluation team, in close consultation with the evaluation manager and the ERG. This phase includes:

- Evaluation kick-off meeting between the evaluation manager and the evaluation team, with the participation of the regional M&E adviser.
- Development of an initial communication plan (see Template 16 in the Handbook, p. 279) by the evaluation manager, in consultation with the communication officer in the UNFPA Namibia CO to support the dissemination and facilitation of use of the evaluation results. The initial communication plan will be updated during each phase of the evaluation, as appropriate, and finalized for implementation during the dissemination and facilitation of use phase.
- Desk review of background information and documentation on the country context and CP, as well as other relevant documentation.
- Detailed review of the theory of change underlying the CP (see Annex A). This includes a analysis of: assumptions on which the theory of change is based ; contextual factors in which the CP is implemented (how it affect activities and result); indicators of progress in achieving results; links where the causal chain seems to break or are not well established; how results are expected to be sustained after the interventions end, etc.
- Formulation of a final set of evaluation questions based on the preliminary evaluation questions provided in the ToR.
- Development of a final stakeholder map and a sampling strategy to select sites to be visited and stakeholders to be consulted in Namibia through interviews and group discussions.
- Development of a data collection and analysis strategy, as well as a concrete and feasible evaluation work plan and agenda for the field phase (see Handbook, section 3.5.3, p. 80).

- Development of data collection methods and tools, assessment of limitations to data collection and development of mitigation measures.
- Development of the evaluation matrix (evaluation criteria, evaluation questions, related assumptions, indicators, data collection methods and sources of information). The data and information collected through the documentary review must be inserted in the evaluation matrix. The matrix is placed in a Google drive so it is accessible to all evaluation team members and to the evaluation manager for his/her supervision and quality assurance.

At the end of the design phase, the evaluation team will develop a **design report** that presents a robust, practical and feasible evaluation approach, detailed methodology and work plan.

The evaluation team will develop the design report in consultation with the evaluation manager and the ERG and submit it to the regional M&E adviser in UNFPA ESARO for review. The template for the design report is provided in Annex E.

### **7.3. Field Phase** (Handbook, pp. 87 -111)

The evaluation team will collect the data and information required to answer the evaluation questions in the field phase. Towards the end of the field phase, the evaluation team will conduct a preliminary analysis of the data to identify emerging findings that will be presented to the CO and the ERG. The field phase should allow the evaluators sufficient time to collect valid and reliable data to cover the thematic scope of the CPE. A period of 3 weeks for data collection is planned for this evaluation. However, the evaluation manager will determine the optimal duration of data collection, in consultation with the evaluation team during the design phase.

The field phase includes:

- Meeting with the UNFPA Namibia CO staff to launch the data collection.
- Meeting of the evaluation team with relevant programme officers at the UNFPA Namibia CO.
- Data collection at national and sub-national levels.

At the end of the field phase, the evaluation team will hold a **debriefing meeting with the CO and the ERG** to present the emerging findings from the data collection. The meeting will serve as a mechanism for the validation of collected data and information and the exchange of views between the evaluators and important stakeholders. It will enable the evaluation team to refine the findings, which is necessary so they can then formulate their conclusions and develop credible and relevant recommendations.

### **7.4. Reporting Phase** (Handbook, pp.115 -121)

In the reporting phase, the evaluation team will continue the analytical work (initiated during the field phase) and prepare a **draft evaluation report**, taking into account the comments and feedback provided by the CO and the ERG at the debriefing meeting at the end of the field phase.

Prior to the submission of the draft report to the evaluation manager, the evaluation team must perform an internal quality control against the criteria outlined in the Evaluation Quality Assessment (EQA) grid (see Annex F). The evaluation manager and the regional M&E adviser in UNFPA ESARO will subsequently review the draft evaluation report, using the same criteria (defined in the EQA grid). If the quality of the report is satisfactory (in form and substance), the draft report will be circulated to the ERG members for review. In the event that the quality of the draft report is unsatisfactory, the evaluation team will be required to revise the report and produce a second draft.

The evaluation manager will perform his/her review of the draft final report against the completed evaluation matrix (to ensure that the analysis - responses to the evaluation questions - rests on credible data and information and is, in fact, evidence based). S/he will also collect and consolidate the written comments and feedback provided by the members of the ERG. On the basis of the comments, the evaluation team should make appropriate amendments, prepare the **final evaluation report** and submit it to the evaluation manager. The final report should clearly account for the strength of evidence on which findings rest to support the reliability and validity of the evaluation. Conclusions and recommendations need to clearly build on the findings of the evaluation. Each conclusion shall make reference to the evaluation question(s) upon which it is based, while each recommendation shall indicate the conclusion(s) from which it logically stems.

The evaluation report is considered final once it is formally approved by the evaluation manager in the UNFPA Namibia CO.

At the end of the reporting phase, the evaluation manager and the regional M&E adviser will jointly prepare an internal EQA of the final evaluation report. The Evaluation Office will subsequently conduct the final EQA of the report, which will be made publicly available.

## **7.5. Dissemination and Facilitation of Use Phase (Handbook, pp.131 -133)**

In the dissemination and facilitation of use phase, the evaluation team will develop a **PowerPoint presentation of the evaluation results** that summarizes the key findings, conclusions and recommendations of the evaluation in an easily understandable and user-friendly way.

The evaluation manager will finalize the **communication plan** together with the communication officer in the UNFPA Namibia CO. Overall, the communication plan should include information on (i) target audiences of the evaluation; (ii) communication products that will be developed to cater to the target audiences' knowledge needs; (iii) dissemination channels and platforms; and (iv) timelines. At a minimum, the final evaluation report will be accompanied by a PowerPoint presentation of the evaluation results (prepared by the evaluation team) and an evaluation brief (prepared by the evaluation manager).

Based on the final communication plan, the evaluation manager will share the evaluation results with the CO staff (incl. senior management), implementing partners, ESARO, the ERG and other target audiences, as identified in the communication plan. While circulating the final evaluation report to relevant units in the CO, the evaluation manager will also ensure that these units prepare their response to

recommendations that concern them directly. The evaluation manager will subsequently consolidate all responses in a final **management response** document. In a last step, The UNFPA Namibia CO will submit the management response to the UNFPA Policy and Strategy Division in HQ.

The evaluation manager, in collaboration with the communication officer in the UNFPA Namibia CO, will also develop an **evaluation brief**. This concise note will present the key results of the CPE, thereby making them more accessible to a larger audience (see sections 8 and 10 below).

The final evaluation report, along with the management response and the final EQA will be included in the UNFPA evaluation database.<sup>54</sup> The final evaluation report will also be circulated to the UNFPA Executive Board. Finally, the final evaluation report, the evaluation brief and the management response will be published on the UNFPA Namibia CO website.

## 8. Expected Deliverables

The evaluation team is expected to produce the following deliverables:

- **Design report.** The design report should translate the requirements of the ToR into a practical and feasible evaluation approach, methodology and work plan. It should include (at a minimum): (i) the evaluation approach and methodology (incl. the theory of change and sampling strategy); (ii) the final stakeholder map; (iii) the evaluation matrix (incl. the final evaluation questions, indicators, data sources and data collection methods); (iv) data collection tools and techniques (incl. interview and group discussion protocols); and (v) a detailed evaluation work plan and agenda for the field phase. For guidance on the outline of the design report, see Annex E.
- **PowerPoint presentation of the design report.** The PowerPoint presentation will be delivered at an ERG meeting to present the contents of the design report and the agenda for the field phase. Based on the comments and feedback of the ERG, the evaluation manager and the regional M&E adviser, the evaluation team will develop the final version of the design report.
- **PowerPoint presentation for debriefing meeting with the CO and the ERG.** The presentation provides an overview of key emerging findings of the evaluation at the end of the field phase. It will serve as the basis for the exchange of views between the evaluation team, UNFPA Namibia CO staff (incl. senior management) and the members of the ERG who will thus have the opportunity to provide complementary information and/or rectify the inaccurate interpretation of data and information collected.
- **Draft evaluation report.** The draft evaluation report will present findings, conclusions and recommendations, based on the evidence that data collection yielded. It will undergo review by the evaluation manager, the CO, the ERG and the regional M&E adviser. Based on the comments and feedback provided by these stakeholders, the evaluation team will develop a final evaluation report.

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<sup>54</sup> The UNFPA evaluation database can be accessed at the following link:

<https://web2.unfpa.org/public/about/oversight/evaluations/documentList.unfpa>.

- **Final evaluation report.** The final evaluation report (*maximum 70 pages, excluding annexes*) will present the findings and conclusions, as well as a set of practical and actionable recommendations to inform the next programme cycle. For guidance on the outline of the final evaluation report, see Annex G. The set of annexes must be complete and must include the evaluation matrix containing all supporting evidence (data and information).
- **PowerPoint presentation of the evaluation results.** The presentation will provide a clear overview of the key findings, conclusions and recommendations to be used for the dissemination of the final evaluation report.

Based on these deliverables, the evaluation manager, in collaboration with the communication officer in the UNFPA Namibia CO will develop an:

- **Evaluation brief.** The evaluation brief will consist of a short and concise document that provides an overview of the key evaluation results in an easily understandable and visually appealing manner, to promote their use among decision-makers and other stakeholders. The structure, content and layout of the evaluation brief should be similar to the briefs that the UNFPA Evaluation Office produces for centralized evaluations.

All the deliverables will be developed in the English language.

## 9. Quality Assurance and Assessment

The UNFPA Evaluation Quality Assurance and Assessment (EQAA) system aims to ensure the production of good quality evaluations at central and decentralized levels through two processes: quality assurance and quality assessment. Quality assurance occurs throughout the evaluation process, starting with the ToR of the evaluation and ending with the final evaluation report. Quality assessment takes place following the completion of the evaluation process and is limited to the final evaluation report to assess compliance with a certain number of criteria. The quality assessment will be conducted by the independent UNFPA Evaluation Office.

The EQAA of this CPE will be undertaken in accordance with the guidance and tools that the independent UNFPA Evaluation Office developed (see <https://www.unfpa.org/admin-resource/evaluation-quality-assurance-and-assessment-tools-and-guidance>). An essential component of the EQAA system is the EQA grid (see Handbook, pp. 268-276 and Annex F), which defines a set of criteria against which the draft and final evaluation reports are assessed to ensure clarity of reporting, methodological robustness, rigor of the analysis, credibility of findings, impartiality of conclusions and usefulness of recommendations.

The evaluation manager is primarily responsible for quality assurance of the deliverables of the evaluation in each phase of the evaluation process. However, the evaluation team leader also plays an important role in undertaking quality assurance. The evaluation team leader must ensure that all members of the evaluation team provide high-quality contributions (both form and substance) and, in particular, that the draft and final evaluation reports comply with the quality assessment criteria outlined in the EQA grid

(Annex F)<sup>55</sup> before submission to the evaluation manager for review. The evaluation quality assessment checklist below outlines the main quality criteria that the draft and final version of the evaluation report must meet.

<p><b>1. Structure and Clarity of the Report</b></p> <p>Ensure the report is clear, user-friendly, comprehensive, logically structured and drafted in accordance with standards and practices of international organizations, including the editorial guidelines of the UNFPA Evaluation Office (see Annex I).</p>
<p><b>2. Executive Summary</b></p> <p>Provide an overview of the evaluation, written as a stand-alone section, including the following key elements of the evaluation: Purpose of the evaluation and target audiences; objectives of the evaluation and brief description of the country programme; methodology; main conclusions; and recommendations.</p>
<p><b>3. Design and Methodology</b></p> <p>Provide a clear explanation of the methods and tools used, including the rationale for the methodological approach and the appropriateness of the methods selected to capture the voices/perspectives of a range of stakeholders, including vulnerable and marginalized groups. Ensure constraints and limitations are made explicit (incl. limitations applying to interpretations and extrapolations in the analysis; robustness of data sources, etc.)</p>
<p><b>4. Reliability of Data</b></p> <p>Ensure sources of data are clearly stated for both primary and secondary data. Provide explanation on the credibility of primary (e.g. interviews and group discussions) and secondary (e.g. documents) data collected and make limitations explicit.</p>
<p><b>5. Analysis and Findings</b></p> <p>Ensure sound analysis and credible, evidence-based findings. Ensure interpretations are based on carefully described assumptions; contextual factors are identified; cause-and-effect links between an intervention and its end results (incl. unintended results) are explained.</p>
<p><b>6. Validity of Conclusions</b></p> <p>Ensure conclusions are based on credible findings and convey the evaluators' unbiased judgment of the intervention. Ensure conclusions are presented in order of priority; divided into strategic and programmatic conclusions (for guidance, see Handbook, p. 238); briefly summarized in a box that precedes a more detailed explanation; and for each conclusion its origin (on which evaluation question(s) the conclusion is based) is indicated.</p>
<p><b>7. Usefulness and Clarity of Recommendations</b></p> <p>Ensure recommendations flow logically from conclusions, are realistic and operationally feasible. Ensure recommendations are presented in order of priority; divided into strategic and programmatic recommendations (as done for conclusions); briefly summarized in a box that precedes a more detailed explanation of the main elements of the recommendation and how it could be implemented effectively. For each recommendation, indicate a priority level (high/moderate/low), a target (administrative unit(s) to which the recommendation is addressed), and its origin (which conclusion(s) the recommendation is based on).</p>
<p><b>8. United Nations System-wide Action Plan (SWAP) Evaluation Performance Indicator – Gender Equality</b></p> <p>Ensure the evaluation approach is aligned with the United Nations SWAP on Gender Equality and the Empowerment of Women<sup>56</sup> and UNEG guidance on integrating human rights and gender perspectives in evaluation.<sup>57</sup></p>

<sup>55</sup> The evaluators are invited to look at good quality CPE reports that can be found in the UNFPA evaluation database, which is available at: <https://web2.unfpa.org/public/about/oversight/evaluations/>. These reports must be read in conjunction with their EQAs (also available in the database) in order to gain a clear idea of the quality standards that UNFPA expects the evaluation team to meet.

<sup>56</sup> Guidance on the SWAP Evaluation Performance Indicator and its application to evaluation is available at: <http://www.unevaluation.org/document/detail/1452>.

<sup>57</sup> The *UNEG Guidance on Integrating Human Rights and Gender Equality in Evaluations* is available at <http://www.uneval.org/document/detail/980>.

Using the grid in Annex F, the EQAA process for this CPE will be multi-layered and will involve: (i) the evaluation team leader (and each evaluation team member); (ii) the evaluation manager in the UNFPA Namibia CO, (iii) the regional M&E adviser in UNFPA ESARO, and (iv) the UNFPA Evaluation Office, whose roles and responsibilities are described in section 11.

## 10. Indicative Timeframe and Work Plan

The table below indicates all the activities that will be undertaken throughout the evaluation process, as well as their duration or specific dates for the submission of corresponding deliverables. It also indicates all relevant guidance (tools and templates) that can be found in the UNFPA Evaluation Handbook.

*Nota Bene: Column “Deliverables”:* In italics: The deliverables are the responsibility of the CO/evaluation manager; in bold: The deliverables are the responsibility of the evaluation team.

Evaluation Phases and Activities	Deliverables	Dates/Duration	Handbook/CPE Management Kit
<b>Design and Field Phases</b>			
<b>Inception meeting with CO staff</b>	<i>Meeting between evaluation team/Team leader/Evaluation Manager</i>	July 25	Tool 7: Field Phase Preparatory Tasks Checklist, pp. 177-183
<b>Individual meetings</b> with relevant CO programme officers and management	<i>Meeting of Team leaders/CO programme officers/Management</i>	July 25 – 29	
<b>Data collection</b> (incl. interviews with key informants, site visits for direct observation, group discussions, document review, etc.)	<b>Entering data/information into the evaluation matrix</b>	August 01 – August 12	<p>Tool 12: How to Conduct Interviews: Interview Logbook and Practical Tips, pp. 189-202</p> <p>Tool 13: How to Conduct a Focus Group: Practical Tips, pp. 203-205</p> <p>Template 9: Note of the Results of the Focus Group, p. 262</p> <p>CPE Management Kit: Compilation of Resources for Remote Data Collection (if applicable)</p>
<b>Reporting Phase</b>			



Presentation of Preliminary Findings and 3rd ERG Meeting		August 19	
<b>Drafting of the final evaluation report</b> (incl. annexes) and circulation to the evaluation manager	<b>Final evaluation report (incl. annexes)</b>	August 19 – 31	
<b>Review of the draft evaluation report</b> by the evaluation manager, the ERG and the regional M&E adviser	<i>Consolidated feedback provided by evaluation manager to evaluation team leader</i>	September 01 – 16	
Joint development of the <b>EQA</b> of the final evaluation report by the evaluation manager and the regional M&E adviser	<i>EQA of the draft evaluation report (by the evaluation manager and the regional M&amp;E adviser)</i>	September 19 – 27	<p>Template 13: Evaluation Quality Assessment Grid and Explanatory Note, pp. 269-276</p> <p>Tool 14: Summary Checklist for Human Rights and Gender Equality in the Evaluation Process, pp. 206-207</p> <p>Tool 15: United Nations SWAP Individual Evaluation Performance Indicator Scorecard, pp. 208-209</p>
<b>Circulation of the final evaluation report</b> to the UNFPA Evaluation Office		September 30 - October 07	
Preparation of the independent <b>EQA of the final evaluation report</b> by the UNFPA Evaluation Office	<i>Independent EQA of the final evaluation report (by the UNFPA Evaluation Office)</i>	October 07 - 21	
<b>Update of the communication plan</b> by the evaluation manager (as required)	<i>Updated communication plan</i>	September 30 – October 07	<p>Template 16: Communication Plan for Sharing Evaluation Results, p. 279</p> <p>CPE Management Kit: Guidance on Strategic Communication for a CPE</p>
<b>Dissemination and Facilitation of Use Phase</b>			
Preparation of the <b>management response</b> by the CO and submission to the Policy and Strategy Division	<i>Management response</i>	October 07 - 21	Template 12: Management Response, pp. 266-267

<b>Finalization of the communication plan</b> and preparation for its implementation by the evaluation manager, with support from the communication officer in the CO	<i>Final communication plan</i>	<i>October 10 – 21</i>	Template 16: Communication Plan for Sharing Evaluation Results, p. 279  CPE Management Kit: Guidance on Strategic Communication for a CPE
Development of the <b>presentation</b> on the evaluation results	<b>PowerPoint presentation of the evaluation results</b>	<i>October 21 – 25</i>	Example of PowerPoint presentation (for a centralized evaluation undertaken by the UNFPA Evaluation Office): <a href="https://www.unfpa.org/sites/default/files/admin-resource/FINAL_MTE_Supplies_PPT_Long_version.pdf">https://www.unfpa.org/sites/default/files/admin-resource/FINAL_MTE_Supplies_PPT_Long_version.pdf</a>
Development of the <b>evaluation brief</b> by the evaluation manager, with support from the communication officer in the CO	<i>Evaluation brief</i>	<i>October 25 – 31</i>	Example of evaluation brief (for a centralized evaluation undertaken by the UNFPA Evaluation Office): <a href="https://www.unfpa.org/sites/default/files/admin-resource/UNFPA_MTE_Supplies_Brief_FINAL.pdf">https://www.unfpa.org/sites/default/files/admin-resource/UNFPA_MTE_Supplies_Brief_FINAL.pdf</a>
Announcement of CPE completion in <b>M&amp;E Net Community</b>	<i>Blog post on the M&amp;E Net Community</i>	<i>October 31 – November 04</i>	CPE Management Kit: <a href="#">Guidance on How to Blog on The CPE Process</a>
<b>Publication</b> of the final evaluation report, the independent EQA and the management response in the UNFPA evaluation database by the Evaluation Office		<i>October 31 - November 04</i>	
<b>Publication</b> of the final evaluation report, the evaluation brief and the management response on the CO website		<i>October 31 - November 04</i>	
<b>Dissemination</b> of the evaluation report and the evaluation brief to stakeholders by the evaluation manager	<i>Including: Communication via email; stakeholders meeting; workshops with implementing partners, etc.</i>	<i>November 14 – December 16</i>	CPE Management Kit: Guidance on Strategic Communication for a CPE

Once the evaluation team leader has been recruited, s/he will develop a detailed **evaluation work plan** (see Annex I) in close consultation with the evaluation manager.

## 11. Management of the Evaluation

The **evaluation manager** in the UNFPA Namibia CO will be responsible for the management of the evaluation and supervision of the evaluation team in line with the UNFPA Evaluation Handbook. The evaluation manager will oversee the entire process of the evaluation, from the preparation to the facilitation of the use and the dissemination of the evaluation results. S/he will also coordinate the exchanges between the evaluation team and the ERG. It is the responsibility of the evaluation manager to ensure the quality, independence and impartiality of the evaluation in line with the UNEG norms and standards and ethical guidelines for evaluation. The evaluation manager has the following key responsibilities:

- Establish the ERG.
- Compile background information and documentation on both the country context and the UNFPA CP and file them in a Google Drive to be shared with the evaluation team upon recruitment.
- Prepare the ToR (incl. annexes) for the evaluation, with support from the regional M&E adviser, and submit the ToR and annexes to the Evaluation Office for review and approval.
- Chair the ERG, convene meetings with the evaluation team and manage the interaction between the evaluation team and the ERG.
- Launch and lead the selection process for the team of evaluators in consultation with the regional M&E adviser.
- Identify potential candidates to conduct the evaluation, complete the Consultant Pre-selection Scorecard to assess their respective qualifications, and propose a final selection of evaluators with support from the regional M&E adviser, to be submitted to the UNFPA Evaluation Office for pre-qualification.
- Share the annexes of the ToR with the final selected evaluators and hold an evaluation kick-off meeting with the evaluation team and the regional M&E adviser.
- Provide evaluators with logistical support for data collection (site visits, interviews, group discussions, etc.).
- Prevent any attempts to compromise the independence of the evaluation team throughout the evaluation process.
- Perform the quality assurance of all the deliverables submitted by the evaluators throughout the evaluation process; notably the design report (focusing on the final evaluation questions, the theory of change, sample of stakeholders to be consulted and sites to be visited, the evaluation matrix, and the methods, tools and plans for data collection), as well as the draft and final evaluation report.
- Coordinate feedback and comments of the ERG on the evaluation deliverables and ensure that feedback and comments of the ERG are adequately addressed.
- Undertake quality assurance of the draft evaluation report in collaboration with the regional M&E adviser, according to the criteria specified in the EQA grid.
- Develop an initial communication plan (in coordination with the CO communication officer) and update it throughout the evaluation process, as required, to guide the dissemination and facilitation of use of the evaluation results.
- Prepare the EQA of the final evaluation report in collaboration with the regional M&E adviser, using the EQA grid and its explanatory note.

- Lead and participate in the preparation of the management response.
- Submit the final evaluation report, EQA and management response to the regional M&E adviser, the Evaluation Office and the Policy and Strategy Division at UNFPA headquarters.

At all stages of the evaluation process, the evaluation manager will require support from staff of the UNFPA Namibia CO. Specifically, the responsibilities of the **country office staff** are:

- Contribute to the preparation of the ToR, specifically: the initial stakeholder map, the list of Atlas projects and the compilation of background information and documentation on the context and the CP, and provide input to the evaluation questions.
- Make time for meetings with/interviews by the evaluation team.
- Provide support to the evaluation manager in making logistical arrangements for site visits and setting up interviews and group discussions with stakeholders at national and sub-national levels.
- Provide input to the management response.
- Contribute to the dissemination of the evaluation results.

The progress of the evaluation will be followed closely by the **evaluation reference group (ERG)**, which is composed of relevant UNFPA staff from the Namibia CO, ESARO, representatives of the national Government of Namibia, implementing partners, as well as other relevant key stakeholders, including organizations representing vulnerable and marginalized groups (e.g. persons with disabilities, etc.) (see Handbook, section 2.3, p.37). The ERG will serve as a body to ensure the relevance, quality and credibility of the evaluation. It will provide inputs on key milestones in the evaluation process, facilitate the evaluation team's access to sources of information and key informants and undertake quality assurance of the evaluation deliverables from a technical perspective. The ERG has the following key responsibilities:

- Support the evaluation manager in the development of the ToR, including the selection of preliminary evaluation questions.
- Provide feedback and comments on the design report.
- Act as the interface between the evaluators and key stakeholders of the evaluation, and facilitate access to key informants and documentation.
- Provide comments and substantive feedback from a technical perspective on the draft evaluation report.
- Participate in meetings with the evaluation team.
- Contribute to the dissemination of the evaluation results and learning and knowledge sharing, based on the final evaluation report, including follow-up on the management response.

The **regional M&E adviser** in UNFPA ESARO will provide guidance and backstopping support to the evaluation manager at all stages of the evaluation process. The responsibilities of the regional M&E adviser are:

- Provide feedback and comments on the draft ToR (incl. annexes) in accordance with the UNFPA Evaluation Handbook, and submit the final draft version to the UNFPA Evaluation Office for review and approval.
- Support the evaluation manager in identifying potential candidates and assessing whether they have the appropriate level of qualifications and experience.

- Liaise with the UNFPA Evaluation Office on the completion of the ToR and the selection of the evaluation team.
- Review the design report and provide comments to the evaluation manager, with a particular focus on the final evaluation questions, the theory of change, the sample of stakeholders to be consulted and sites to be visited, the evaluation matrix, and the methods, tools and plans for data collection.
- Review the draft evaluation report and provide comments to the evaluation manager.
- Support the evaluation manager in reviewing the final evaluation report.
- Prepare the EQA of the final evaluation report in collaboration with the evaluation manager, using the EQA grid and its explanatory note.
- Ensure the CO complies with the request for a management response.
- Support the CO in the dissemination and use of the evaluation results.

The UNFPA **Evaluation Office** will play a crucial role in the EQAA of the evaluation. The responsibilities of the Evaluation Office are as follows:

- Review and approve the ToR (incl. annexes).
- Review and pre-qualification of the consultants.
- Commission the independent EQA of the final evaluation report.
- Publish the final evaluation report, independent EQA and management response in the UNFPA evaluation database.

## **12. Composition of the Evaluation Team**

The evaluation will be conducted by a team of independent, external evaluators, consisting of: (i) an evaluation team leader with overall responsibility for carrying out the evaluation exercise, and (ii) team members who will provide technical expertise in thematic areas relevant to the UNFPA mandate (SRHR; adolescents and youth; gender equality and women’s empowerment). As part of the efforts of UNFPA to strengthen national evaluation capacities, the evaluation team will also include a young and emerging evaluator who will provide support to the evaluation team throughout the evaluation process. In addition to his primary responsibility for the design of the evaluation methodology and the coordination of the evaluation team throughout the CPE process, the team leader will perform the role of technical expert for one of the thematic areas of the 6th UNFPA CP in Namibia.

The evaluation team leader will be recruited internationally (incl. in the region or sub-region), while the evaluation team members will be recruited locally to ensure adequate knowledge of the country context including the young and emerging evaluator. Finally, the evaluation team should have the requisite level of knowledge to conduct human rights- and gender-responsive evaluations and all evaluators should be able to work in a multidisciplinary team and in a multicultural environment.

### **12.1. Roles and Responsibilities of the Evaluation Team**

#### ***Evaluation team leader***

The evaluation team leader will hold the overall responsibility for the design and implementation of the evaluation. S/he will be responsible for the production and timely submission of all expected deliverables in line with the ToR. S/he will lead and coordinate the work of the evaluation team and ensure the quality of all evaluation deliverables at all stages of the process. The evaluation manager will provide methodological guidance to the evaluation team in developing the design report, in particular, but not limited to, defining the evaluation approach, methodology and work plan, as well as the agenda for the field phase. S/he will lead the drafting and presentation of the design report and the draft and final evaluation report, and play a leading role in meetings with the ERG and the CO. The team leader will also be responsible for communication with the evaluation manager. Beyond her/his responsibilities as team leader, the evaluation team leader will serve as technical expert for one of the thematic areas of the CP described below.

***Evaluation team member: SRHR/Adolescents and youth expert***

The SRHR expert will provide expertise on integrated sexual and reproductive health services, HIV and other sexually transmitted infections, maternal health, family planning, youth-friendly SRHR services, comprehensive sexuality education, adolescent pregnancy, SRHR of young women and adolescent girls, access to contraceptives for young women and adolescent girls and youth leadership and participation, including knowledge on population and development issues such as census, demographic dividend, and national statistical systems. S/he will contribute to the methodological design of the evaluation and take part in the data collection and analysis work, with overall responsibility of contributions to the evaluation deliverables in her/his thematic area of expertise. S/he will provide substantive inputs throughout the evaluation process by contributing to the development of the evaluation methodology, evaluation work plan and agenda for the field phase, participating in meetings with the evaluation manager, UNFPA Namibia CO staff and the ERG. S/he will undertake a document review and conduct interviews and group discussions with stakeholders, as agreed with the evaluation team leader.

***Evaluation team member: Gender equality and women's empowerment expert***

The gender equality and women's empowerment expert will provide expertise on the human rights of women and girls, especially sexual and reproductive rights, the empowerment of women and girls, engagement of men and boys, as well as SGBV and harmful practices, such as female genital mutilation, child, early and forced marriage. S/he will contribute to the methodological design of the evaluation and take part in the data collection and analysis work, with overall responsibility of contributions to the evaluation deliverables in her/his thematic area of expertise. S/he will provide substantive inputs throughout the evaluation process by contributing to the development of the evaluation methodology, evaluation work plan and agenda for the field phase, participating in meetings with the Evaluation Manager, UNFPA Namibia CO staff and the ERG. S/he will undertake a document review and conduct interviews and group discussions with stakeholders, as agreed with the evaluation team leader.

***Evaluation team member: Young and emerging evaluator***

The young and emerging evaluator will contribute to all phases of the CPE. S/he will support the evaluation team leader and members in developing the evaluation methodology, reviewing and refining the theory

of change, finalizing the evaluation questions, and developing the evaluation matrix, data collection methods and tools, as well as indicators. The young and emerging evaluator will also participate in data collection (site visits, interviews, group discussions and document review) and contribute to data analysis and the drafting of the evaluation report, as agreed with the evaluation team leader. In addition, s/he will provide administrative support throughout the evaluation process and participate in meetings with the evaluation manager, UNFPA Namibia CO staff and the ERG.

The modalities for the participation of the evaluation team members (incl. the young and emerging evaluator) in the evaluation process, their responsibilities during data collection and analysis, as well as the nature of their respective contributions to the drafting of the design report and the draft and final evaluation report will be agreed with the evaluation team leader. These tasks will be performed under her/his supervision.

## 12.2. Qualifications and Experience of the Evaluation Team

### Team leader

The competencies, skills and experience of the evaluation team leader should include:

- Master's degree in public health, social sciences, demography or population studies, statistics, development studies or a related field.
- 10 years of experience in conducting or managing evaluations in the field of international development and/or humanitarian assistance.
- Extensive experience in leading complex evaluations commissioned by United Nations organizations and/or other international organizations and NGOs.
- **Demonstrated expertise in one of the thematic areas of the CP covered by the evaluation (see expert profiles below).**
- In-depth knowledge of theory-based evaluation approaches and ability to apply both qualitative and quantitative data collection methods and to uphold high quality standards for evaluation as defined by UNFPA and UNEG.
- Good knowledge of humanitarian strategies, policies, frameworks and international humanitarian law and humanitarian principles, as well as the international humanitarian architecture and coordination mechanisms.
- Ability to ensure ethics and integrity of the evaluation process, including confidentiality and the principle of do no harm.
- Ability to consistently integrate human rights and gender perspectives in all phases of the evaluation process.
- Excellent management and leadership skills to coordinate the work of the evaluation team, and strong ability to share technical evaluation skills and knowledge.
- Ability to supervise a young and emerging evaluator, create an enabling environment for her/his meaningful participation in the work of the evaluation team, and provide guidance and support required to develop her/his capacity.
- Experience working with a multidisciplinary team of experts.
- Excellent ability to analyze and synthesize large volumes of data and information from diverse sources.

- Excellent interpersonal and communication skills (written and spoken).
- Work experience in/good knowledge of the region and the national development context of Namibia.
- Fluent in written and spoken English.

### **SRHR/ Adolescents and youth expert**

The competencies, skills and experience of the SRHR expert should include:

- Master's degree in public health, medicine, health economics and financing, epidemiology, biostatistics, social sciences or a related field.
- 5-7 years of experience in conducting evaluations, reviews, assessments, research studies or M&E work in the field of international development and/or humanitarian assistance.
- Substantive knowledge of SRHR, including HIV and other sexually transmitted infections, maternal health, and family planning.
- Substantive knowledge of adolescent and youth issues, in particular SRHR of adolescents and youth.
- Good knowledge of humanitarian strategies, policies, frameworks and international humanitarian law and humanitarian principles, as well as the international humanitarian architecture and coordination mechanisms.
- Ability to ensure ethics and integrity of the evaluation process, including confidentiality and the principle of do no harm.
- Ability to consistently integrate human rights and gender perspectives in all phases of the evaluation process.
- Solid knowledge of evaluation approaches and methodology and demonstrated ability to apply both qualitative and quantitative data collection methods.
- Excellent analytical and problem-solving skills.
- Experience working with a multidisciplinary team of experts.
- Excellent interpersonal and communication skills (written and spoken).
- Work experience in/good knowledge of the national development context of Namibia.
- Familiarity with UNFPA or other United Nations organizations' mandates and activities will be an advantage.
- Fluent in written and spoken English, or other local languages.

### **Gender equality and women's empowerment expert**

The competencies, skills and experience of the gender equality and women's empowerment expert should include:

- Master's degree in women/gender studies, human rights law, social sciences, development studies or a related field.
- 5-7 years of experience in conducting evaluations, reviews, assessments, research studies or M&E work in the field of international development and/or humanitarian assistance.
- Substantive knowledge on gender equality and the empowerment of women and girls, SGBV and other harmful practices, such as female genital mutilation, early, child and forced marriage, and issues surrounding masculinity, gender relationships and sexuality.



- Good knowledge of humanitarian strategies, policies, frameworks and international humanitarian law and humanitarian principles, as well as the international humanitarian architecture and coordination mechanisms.
- Ability to ensure ethics and integrity of the evaluation process, including confidentiality and the principle of do no harm.
- Ability to consistently integrate human rights and gender perspectives in all phases of the evaluation process.
- Solid knowledge of evaluation approaches and methodology and demonstrated ability to apply both qualitative and quantitative data collection methods.
- Excellent analytical and problem-solving skills.
- Experience working with a multidisciplinary team of experts.
- Excellent interpersonal and communication skills (written and spoken).
- Work experience in/good knowledge of the national development context of Namibia.
- Familiarity with UNFPA or other United Nations organizations' mandates and activities will be an advantage.
- Fluent in written and spoken English and other local languages.

### **Young and emerging evaluator**

The young and emerging evaluator must be under 35 years of age and her/his competencies, skills and experience should include:

- Bachelor's degree in public health, demography or population studies, social sciences, statistics, development studies or a related field.
- Certificate in evaluation or equivalent qualification.
- Up to five years of work experience in conducting evaluation or M&E in the field of international development.
- Excellent analytical and problem-solving skills.
- Demonstrated ability to work in a team.
- Strong organizational skills, communication skills and writing skills.
- Good command of information and communication technology and data visualization tools.
- Good knowledge of the mandate and activities of UNFPA or other United Nations organizations will be an advantage.
- Fluent in written and spoken English and other local languages.

## **13. Budget and Payment Modalities**

The evaluators (incl. the young and emerging evaluator) will receive a daily fee according to the UNFPA consultancy scale based on qualifications and experience.

The payment of fees will be based on the submission of deliverables, as follows:

Upon approval of the design report	20%
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Upon submission of a draft final evaluation report of satisfactory quality	40%
Upon approval of the final evaluation report and the PowerPoint presentation of the evaluation results	40%

In addition to the daily fees, the evaluators will receive a daily subsistence allowance (DSA) in accordance with the UNFPA Duty Travel Policy, using applicable United Nations DSA rates for the place of mission. Travel costs will be settled separately from the consultancy fees.

The provisional allocation of workdays among the evaluation team will be the following:

	Team leader	SRHR/Adolescents and Youth expert	Gender equality and women's empowerment expert	Young and emerging evaluator
Design phase	7	3	3	3
Field phase	21	21	21	21
Reporting phase	21	10	10	5
Dissemination and facilitation of use phase	1	1	1	1
<b>TOTAL (days)</b>	50	35	35	30

Please note the numbers of days in the table are indicative. The final distribution of the volume of work and corresponding number of days for each consultant will be proposed by the evaluation team in the design report and will be subject to the approval of the evaluation manager.

## 14. Bibliography and Resources

The following documents will be made available to the evaluation team upon recruitment:

### UNFPA documents

1. UNFPA Strategic Plan (2014-2017) (incl. annexes) <https://www.unfpa.org/resources/strategic-plan-2014-2017>
2. UNFPA Strategic Plan (2018-2021) (incl. annexes) <https://www.unfpa.org/strategic-plan-2018-2021>
3. UNFPA Strategic Plan (2022-2025) (incl. annexes) <https://www.unfpa.org/unfpa-strategic-plan-2022-2025-dpfpa20218>
4. UNFPA Evaluation Policy (2019) <https://www.unfpa.org/admin-resource/unfpa-evaluation-policy-2019>
5. *Evaluation Handbook: How to Design and Conduct a Country Programme Evaluation at UNFPA* (2019) <https://www.unfpa.org/EvaluationHandbook>
6. Relevant centralized evaluations conducted by the UNFPA Evaluation Office <https://www.unfpa.org/evaluation>

### Namibia national strategies, policies and action plans [link](#)

7. National Poverty Reduction Strategy
8. National Development Plan
9. United Nations Development Assistance Framework (UNDAF) and/or United Nations Sustainable Development Cooperation Framework (UNSDCF)
10. Relevant national strategies and policies for each thematic area of the country programme

### UNFPA Namibia CO programming documents [link](#)

11. Government of Namibia/UNFPA 6th Country Programme Document (2019-2023)
12. United Nations Common Country Analysis/Assessment (CCA)
13. CO annual work plans
14. Joint programme documents
15. Mid-term reviews of interventions/programmes in different thematic areas of the CP
16. Reports on core and non-core resources
17. CO resource mobilization strategy

### UNFPA Namibia CO M&E documents [link](#)

18. CO annual results plans and reports (SIS/MyResults)

19. CO quarterly monitoring reports (SIS/MyResults)
20. Previous evaluation of the Government of Namibia/UNFPA 6th Country Programme (2019-2023), available at: <https://web2.unfpa.org/public/about/oversight/evaluations/>

**Other UNFPA documents [link](#)**

21. Implementing partner annual work plans and quarterly progress reports
22. Implementing partner assessments
23. Audit reports and spot check reports
24. Meeting agendas and minutes of joint United Nations working groups

**Studies/Survey reports [link](#)**

25. National survey reports
26. Reports on studies conducted in the country
27. 2011 Census report