



Terms of Reference

**GRZ/UNFPA 8TH COUNTRY PROGRAMME
2016 - 2020**

COUNTRY PROGRAMME EVALUATION

ZAMBIA

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Acronyms

8CP	8 th Country Programme
CO	Country Office
CPE	Country Programme Evaluation
DSA	Daily subsistence allowance
EO	Evaluation Office
EQA	Evaluation Quality Assessment
ERG	Evaluation Reference Group
ESARO	East and Southern Africa Regional Office
GRZ	Government of Zambia
HIV	Human Immunodeficiency Virus
ICPD	International Conference on Population and Development
M&E	Monitoring and Evaluation
RO	Regional Office
SDGs	Sustainable Development Goals
ToC	Theory of Change
ToR	Terms of Reference
UN	United Nations
UNCT	United Nations Country Team
UNEG	United Nations Evaluation Group
UNFPA	United Nations Population Fund
UNSDPF	United Nations Sustainable Development Partnership Framework

1. Introduction

The eighth Country Programme (2016-2020) of United Nations Population Fund (UNFPA) Zambia Country Office (CO) support to the Government of Zambia (GRZ) responds to national priorities as articulated in the Seventh National Development Plan and the United Nations Sustainable Development Partnership Framework (UNSDPF). The GRZ and UN agreed to collaborate on achieving eight Partnership Framework outcomes under three broad results pillars: (i) Inclusive Social Development; (ii) Environmentally Sustainable and Inclusive Economic Development and (iii) Governance and Participation. UNFPA Zambia contributes to result pillars (i) and (iii). As part of the UN reform agenda, the Country Programme (CP) is implemented within the framework of Delivering-as-One. According to the UNFPA Strategic Plan 2018-2021 business model, Zambia falls in the red quadrant as a low-income country and applies five modes of engagement at the national and sub-county levels, namely: (a) Advocacy and policy dialogue; (b) capacity development; (c) knowledge management; and (d) partnership and coordination and; (e) service delivery.

The 2019 UNFPA Evaluation Policy requires Country Programmes to be evaluated at least once every two cycles and this policy will guide the evaluation process. In addition, the ten general, the United Nations Evaluation Group (UNEG) principles as well as the four institutional norms (see Annex 1) will be upheld and reflected in the management and governance of the evaluation. The Zambia Country Programme Evaluation (CPE) will document key achievements against set objectives as well as identify opportunities of operationalizing Zambia's Vision 2030 of becoming a "*prosperous middle-income country by 2030*" and inform the next country programme. The evaluation will demonstrate accountability to stakeholders on performance in achieving development results, value for money on invested resources, support evidence-based decision-making and contribute important lessons learned on how to further improve programming.

The evaluation will be conducted by a team of independent evaluators and will be managed by the UNFPA Zambia CO, with support provided by the East and Southern Africa (ESA) Regional Monitoring and Evaluation (M&E) advisor in the various stages of the evaluation process. The primary users of the evaluation results are the UNFPA Executive Board, UNFPA Zambia Country Office, the Government of Zambia, Cooperating Partners and the Implementing Partners. Evaluation findings will be disseminated to these audiences as appropriate including digital platforms such as social media and the country office website.

2. Country Context

The Republic of Zambia comprises 10 provinces and 105 districts. The 2018 population is projected at 16.4 million, with young people aged 10-24 years representing 34.4 per cent and women aged 15-49 years representing 51 per cent of the population. With an annual growth rate of 2.8 per cent and a 2013 total fertility rate of 5.3, the population is projected to reach 49 million by 2050.

Zambia is lower-middle-income country; its gross domestic product has averaged about 7 per cent for the past five years. However, a 2015 poverty report estimates 60 per cent of Zambians live below the poverty line, with extreme poverty levels of 42 per cent in rural areas and over 60 per cent for female-headed households. Zambia has a 2014 Gini coefficient of 0.65, illustrating high levels of inequality.

The maternal mortality ratio is still high, despite a decline from 591 deaths per 100,000 live births in 2007 to 398 per 100,000 live births in 2013. Though skilled birth attendance increased, from 47 per cent to 64 per cent, and institutional delivery increased from 48 per cent to 67 per cent over that period, both indices remain below national targets of 80 per cent. Despite improvement in the modern contraceptive prevalence

rate, from 33 per cent in 2007 to 45 per cent in 2013, unmet need for family planning remains significant, at 21 per cent. Complications during pregnancy account for 60 per cent of maternal deaths, with Human Immunodeficiency Virus (HIV)-related maternal deaths accounting for 15.4 per cent. Health system performance reveals an inequitable distribution of skilled human resources for health, weak capacities for emergency obstetric care and stock-outs of reproductive health commodities in rural and underserved areas. Poorly resourced community support systems and limited male involvement also contribute to inequitable access and utilization of sexual reproductive health information and services.

Despite a slight decline since 2013, HIV prevalence remains high, at 11.63 per cent (8.9 per cent in male and 14.5 per cent in female populations). Comprehensive knowledge of HIV is low (42 per cent among women and 49 per cent among men aged 15-49), as is condom use (29.7 per cent among women and 27.4 per cent among men aged 15-49 years). These are a result of policy and programme barriers that limit equitable access to information and services in rural and underserved areas. This is important, as most HIV infections in the country are sexually transmitted or associated with pregnancy, childbirth or breastfeeding. Drivers of HIV transmission equally lead to sexually transmitted infections and unintended pregnancies, and include high levels of transactional sex, multiple sexual partners and sexual gender-based violence (17 per cent among women and girls aged 15-49 years).

Limited coverage of rights-based comprehensive sexuality education for in-school and out-of-school youth, amid strong social norms and cultural practices, contributes to high levels of teenage pregnancy (29 per cent), which accounts for 58 per cent of school dropouts. Despite implementation of a school re-entry programme for pregnant girls, less than half return after delivery. Some 45 per cent of girls aged 25-49 years were married by age 18 and 65 per cent by age 20. In-depth analysis of the 2010 census and the 2013-2014 demographic and health survey indicates that the girls most vulnerable to teenage pregnancy and child marriage have low levels of education and belong to households in the lowest wealth quintile.

On average, about 113,000 households in Zambia are adversely affected by floods annually, cutting them off from road networks and health facilities, thereby limiting equitable access to integrated HIV, gender-based violence and sexual reproductive health information and services. Annual humanitarian preparedness planning and pre-positioning of reproductive health and dignity kits continue to play a critical role in saving the lives of vulnerable women and young people.

National laws, policies and strategic frameworks recognize the progressive realization of the right to health; to decide on the number of children and timing and spacing of births; to education and information; and to gender equality and freedom from all forms of violence and discrimination. However, gaps exist in effective and efficient implementation of priority interventions required to actualize the targets in the revised sixth national development plan, Vision 2030 and the Sustainable Development Goals (SDGs).

Zambia's national statistical system, though improving in its institutional capacity to generate and analyze disaggregated data, requires improved capacities at provincial and district levels to generate timely disaggregated data by geographic location, sex, wealth quintile and age groups. Further use of disaggregated data in the design of plans, strategies and targeted interventions at national, provincial and district levels is required to address the socioeconomic disparities in the country.

3. UNFPA Programmatic Support to Zambia

The 8th Country Programme (8CP) responds to national priorities and is guided by analytical studies and assessments, and benefited from multi-sectoral consultations with the Government, civil society organizations, academia, the private sector, young people and United Nations organizations. It is aligned to

the revised sixth national development plan, Vision 2030, the United Nations Sustainable Development Partnership Framework (2016-2020) and UNFPA Strategic plan (2014-2017). In 2018, the country office undertook the process of aligning the 8CP to the 2018-2021 Strategic Plan. The 2018–2021 Strategic Plan is the first of three UNFPA strategic plans leading to 2030. It focuses on the three transformative results; (i) ending unmet need for family planning, (ii) ending preventable maternal deaths, and (iii) ending violence and harmful practices including child marriage. These transformative results will contribute to the achievement of the SDGs, in particular, good health and well-being, the advancement of gender equality, and the empowerment of women and adolescent girls, with a focus on eradicating poverty. The Country office is addressing all the three transformative results.

The programme is results-focused and builds on the experiences of targeted geographic focus. The programme supports national-level policies, programme design and nation-wide interventions, while providing targeted support to marginalized population groups, and underserved districts in six provinces to ensure continuity and significant programme coverage aimed at addressing some of the issues identified in the situation analysis.

The 8CP contributes to three outcomes of the 2014-2017 UNFPA Strategic Plan and intends to achieve the following results with an overall focus on women and young people particularly adolescent girls.

Outcomes

- Increased availability and use of integrated sexual and reproductive health services (including family planning, maternal health and HIV) that are gender-responsive and meet human rights standards for quality of care and equity in access
- Increased priority on adolescents, especially on very young adolescent girls, in national development policies and programmes, particularly increased availability of comprehensive sexuality education and sexual and reproductive health
- Strengthened national policies and international development agendas through integration of evidence-based analysis on population dynamics and their links to sustainable development, sexual and reproductive health and reproductive rights, HIV and gender equality

Outputs

- National, provincial and district institutions have increased capacity to deliver gender-sensitive sexual and reproductive health and HIV services
- National, provincial and district institutions have the capacity to increase demand for and improve supply of life-saving reproductive health commodities and medicines, including modern contraceptives
- Increased capacities of national, provincial and district institutions to design, implement and monitor comprehensive sexuality education programmes that promote human rights and gender equality
- Increased capacity of national, provincial and district institutions to design and implement comprehensive programmes for marginalized adolescent girls, including safe spaces, for those at risk of child marriage
- Increased availability of disaggregated evidence through cutting-edge data generation and in-depth analysis of population dynamics, sexual and reproductive health, HIV, and gender-equality outcomes

GRZ/UNFPA 8th Country Programme Results Framework

Goal: Achieve universal access to sexual and reproductive health, realize reproductive rights, and reduce maternal mortality to accelerate progress on the ICPD agenda

UNFPA Strategic Areas

I. Sexual and reproductive health

II. Adolescents and youth

IV. Population dynamics

UNFPA Strategic Outcomes

Increased availability and use of integrated sexual and reproductive health services (including family planning, maternal health and HIV) that are gender-responsive and meet human rights standards for quality of care and equity in access

Increased priority on adolescents, especially on very young adolescent girls, in national development policies and programmes, particularly increased availability of comprehensive sexuality education and sexual and reproductive health

Strengthened national policies and international development agendas through integration of evidence-based analysis on population dynamics and their links to sustainable development, sexual and reproductive health and reproductive rights, HIV and gender equality

UNFPA Zambia 8th Country Programme Outputs

1. National, provincial and district institutions have increased capacity to deliver gender-sensitive sexual and reproductive health and HIV services
2. National, provincial and district institutions have the capacity to increase demand for and improve supply of life-saving reproductive health commodities and medicines, including modern contraceptives

1. Increased capacities of national, provincial and district institutions to design, implement and monitor comprehensive sexuality education programmes that promote human rights and gender equality
2. Increased capacity of national, provincial and district institutions to design and implement comprehensive programmes for marginalized adolescent girls, including safe spaces, for those at risk of child marriage

1. Increased availability of disaggregated evidence through cutting-edge data generation and in-depth analysis of population dynamics, sexual and reproductive health, HIV, and gender-equality outcomes

UNFPA Zambia 8th Country Programme Intervention Areas

- 1.1 Develop the capacity of health-care providers on effective planning, delivery and monitoring of high-quality emergency obstetric and neonatal care services, including post-abortion care, as well as maternal death surveillance and response, in line with international standards and guidelines
- 1.2 Implement evidence-based advocacy and technical support for the establishment of accountability frameworks to monitor quality

- 1.1 Targeted capacity development of provincial and district-level staff to strengthen innovative out-of-school programmes that scale up equitable access to high-quality, youth-friendly and gender-sensitive sexual reproductive health information and services, including HIV prevention
- 1.2 Reviewing in-school comprehensive sexuality education curricula to ensure incorporation and delivery of gender-sensitive sexual

- 1.1 Capacity development of national, provincial and district-level institutions to undertake data generation, in-depth analysis and utilization of disaggregated data by age, sex, wealth quintile and geographic location, to inform national development processes, including humanitarian preparedness and response
- 1.2 Evidence-based advocacy for integration of population variables in the seventh national development plan and sector policies,

midwifery production, deployment and retention, especially in underserved areas

- 1.3 Institutionalize routine fistula case identification, treatment and linkages to social reintegration programmes, in line with international standards
- 1.4 Rollout sexual reproductive health and HIV linkages service models at health facility levels, alongside health sector response for gender-based violence
- 1.5 Support the design and delivery of the Minimum Initial Service Package in humanitarian settings within the national contingency plan
- 1.6 Promote evidence-based and innovative demand-creation interventions that address social norms and cultural practices limiting equitable access to sexual reproductive health and HIV services
- 1.7 Support multi-sectoral coordination mechanisms at national and provincial levels that advance sexual reproductive health issues

- 2.1 Implement evidence-based advocacy to increase domestic funding for public sector procurement needs for modern contraceptives and life-saving maternal health medicines, while meeting procurement shortfalls
- 2.2 Develop capacity for evidence-based forecasting, quantification, logistics and supply chain management systems, including last-mile distribution from national to health facility levels
- 2.3 Support innovations and documentation of success factors that improve delivery of gender-sensitive family planning services, including male and female condoms, within marginalized and key populations

reproductive health components through school grades 5 to 12

- 1.3 Supporting national and provincial level policy coherence and multi-sectoral coordination mechanisms for youth health and development programmes

- 2.1 Implement and monitor national strategies and community-based programmes, such as child marriage free zones and effective community support systems with active male involvement, aimed at ending child marriages, addressing teenage pregnancy and ending sexual gender-based violence
- 2.2 Foster strategic partnerships to build social and economic assets of women and adolescent girls through safe spaces
- 2.3 Design of accountability mechanisms that enforce legislative and policy actions on the legal age of marriage and improve access to sexual reproductive health services

programmes, budgets and expenditure frameworks

- 1.3 Empowering women and young people to engage in policy dialogues on the rights of women and young people in national development processes

4. Objectives and Scope of the Evaluation

The overall **objectives** of the 8th CPE are:

- i. enhancing the accountability of UNFPA for the relevance and performance of the country programmes;
- ii. broadening the evidence base for the design of the next programming cycle; and
- iii. generating a set of clear forward-looking and actionable recommendations logically linked to the findings and conclusions. These recommendations will include specific guidance on the development of the 9th country programme.

Specifically, the CPE aims to:

- (i) Provide an independent assessment of the relevance, effectiveness, efficiency and sustainability of UNFPA support and progress towards the expected outputs and outcomes set forth in the results framework of the country programme;
- (ii) Provide an assessment of the country office's positioning within the developing community and national partners, in view of its ability to respond to national needs while adding value to the country development results;
- (iii) Provide an assessment of the role played by the UNFPA country office in the coordination mechanisms of the United Nations Country Team (UNCT) with a view to enhancing the United Nations collective contribution to national development results
- (iv) Assess the extent to which the implementation framework enabled or hindered achievements of the results chain i.e. what worked well and what did not work well;
- (v) Draw key lessons from past and current cooperation and provide a set of clear and forward- looking options leading to strategic and actionable recommendations for the next programming cycle.

Scope of the Evaluation

The evaluation will cover interventions planned and/or implemented within the current country programme during the period 2016-2019. The evaluation will cover all/the following provinces where UNFPA implemented interventions: Western, North Western, Luapula, Central, Lusaka and Copperbelt. The evaluation will also cover the technical areas of the 8CP namely; Sexual and Reproductive Health, Adolescents and Youths and Population Dynamics. In addition, the evaluation will cover crosscutting aspects such as human rights-based approach, gender and disability mainstreaming, coordination, monitoring and evaluation, and partnerships.

5. Evaluation Criteria and Evaluation Questions

In accordance with the methodology for CPEs as outlined in the UNFPA Handbook: How to Design and Conduct Country Programme Evaluations 2019 (<https://www.unfpa.org/EvaluationHandbook>), the evaluation will assess the relevance of the 8CP including the capacity of the CO to respond to the country needs and challenges. The evaluation will also assess progress in the achievement of outputs and outcomes against what was planned (effectiveness) in the country Programme Results and Resources Framework (RRF), efficiency of interventions in terms of human as well as financial resources and sustainability of results. The focus of the evaluation is summarized in the table below;

Relevance	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. The ability to <i>respond</i> to: (i) changes and/or additional
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	requests from national counterparts, and (ii) shifts caused by external factors in an evolving country context
Effectiveness	The extent to which intended outputs have been achieved and the extent to which these outputs have contributed to the achievement of the outcomes.
Efficiency	How funding, personnel, administrative arrangements, time and other inputs contributed to, or hindered the achievement of results
Sustainability	The extent to which the benefits from UNFPA support are likely to continue, after it has been completed
Coordination	The extent to which UNFPA has been an active member of, and contributor to existing coordination mechanisms of the UNCT

The indicative questions based on the above main components are given below:

Relevance

1. To what extent is the country programme adapted to: national needs and policies; priorities of the programme stakeholders and target groups; the goals of the International Conference on Population and Development (ICPD) Programme of Action, SDGs, and the strategies of UNFPA?
2. To what extent has the country office been able to respond to changes in national needs and priorities caused or to shifts caused by major political change? What was the quality of the response?

Effectiveness

1. To what extent did the interventions supported by UNFPA in all programmatic areas contribute to the achievement of planned results (outputs and outcomes)? Were the planned geographic areas and target groups successfully reached?
2. To what extent has the programme integrated gender and human rights-based approaches?

Efficiency

1. To what extent has UNFPA made good use of its human, financial and technical resources to pursue the achievement of the outcomes defined in the county programme?

Sustainability

1. To what extent have UNFPA supported interventions contributed to the development of capacities of its partners?
2. To what extent have the partnerships established by UNFPA promoted the national ownership of supported interventions, programmes and policies?

Coordination

1. To what extent has the UNFPA Country Office contributed to the functioning and consolidation of UNCT coordination mechanisms?

The final evaluation questions and the evaluation matrix will be finalized by the evaluation team in the design report.

6. Methodology and Approach

6.1. Approach

The evaluation should be transparent, inclusive, participatory, and responsive to gender and human rights. The evaluation team will use a mixed-method approach including document review, group and individual key informant interviews, focus group discussions, observations and field visits as appropriate. Quantitative methods will encompass compiling and analyzing quantitative secondary data through relevant reports, financial data, and indicator data. Quantitative data will be used to assess trends in programming, investment and outcomes. This information will be complemented by qualitative methods for data collection consisting of document review, interviews, focus group discussions and observations through field visits.

These complementary approaches described above will be deployed to ensure that the evaluation:

- a) Responds to the needs of users and their intended use of the evaluation results;
- b) Integrates gender and human rights principles throughout the evaluation process, including participation and consultation of key stakeholders (rights holders and duty-bearers) to the extent possible;
- c) Provides credible information about the extent of results and benefits of support for beneficiaries and stakeholders.

The country programme evaluation will be carried out in accordance with the 2019 UNFPA Evaluation Policy. The work of the evaluation team will be guided by the Norms and Standards established by UNEG. Team members will adhere to the Ethical guidelines for Evaluators in the UN system and the Code of Conduct (see Annex 2), also established by UNEG. The evaluators will be requested to sign the Code of Conduct prior to engaging in the evaluation exercise. The evaluation will also follow the guidance on the integration of gender equality and human rights as established in the UNEG guidance document “*Integrating Human Rights and Gender Equality in Evaluations*”.

The evaluation will adopt an inclusive and participatory approach, involving a broad range of partners and stakeholders at both national and sub-national levels. The evaluation will ensure the participation of women, girls and youths in particular, those from vulnerable groups of targeted populations.

6.2. Methodology

The evaluation methodology will be guided by the UNFPA’s Evaluation Handbook (2019) mentioned earlier, which provides a detailed approach to UNFPA evaluations. The evaluation team is strongly encouraged at all times to refer to the Handbook including specific templates for use at different stages of the evaluation process (https://www.unfpa.org/sites/default/files/admin-resource/UNFPA_Evaluation_Handbook_FINAL_Chap7.pdf). The CPE evaluation must be designed to meet the objectives spelt out under section four by using contribution analysis as its central, theory based analytical approach. The **theory-based approach** means that the evaluation methodology will be based on the careful analysis of the intended outcomes, outputs, activities, and the contextual factors and their potential to achieve the desired outcomes. The analysis of the country programme’s Theory of Change (ToC), and the reconstruction of its intervention logic, as necessary, will therefore play a central role in the design of the evaluation, in the analysis of the data collected throughout its course, in the reporting of findings, and in the development of conclusions and of relevant and practical recommendations. The ToC

reflects the conceptual and programmatic approach taken by UNFPA Zambia over the period under evaluation including the most important implicit assumptions underlying the change pathway. The ToC will include intervention strategies and modes of engagement used in program delivery, guiding principles, the intervention logic and causal links, expected changes as well as risk factors and critical assumptions. The evaluation team will be expected to represent the ToC in a diagram as part of the inception report. The ToC will be also be tested during the field and data collection phase.

Evaluators will base their assessment on the analysis and interpretation of the logical consistency of the chain of effects: linking programme activities and outputs with changes in higher-level outcome areas, based on observations and data collected along the chain. This analysis should serve as the basis of a judgment by the evaluators on how well the programme under way is contributing to the achievement of the intended results foreseen in the country programming documents.

The evaluation team will develop the evaluation methodology in line with the Evaluation Handbook and design corresponding tools to collect data and information as a foundation for valid, evidence-based answers to the evaluation questions and an overall assessment of the country programme. The methodological design will include: an analytical framework; a strategy for collecting and analyzing data; specifically designed tools; an evaluation matrix; and a detailed work plan. The Evaluation Handbook is designed as a practical guide to help the evaluation team apply methodological rigour to the design and implementation of the CPE. It is expected that the evaluation team is well acquainted with the Handbook at inception stage of the CPE.

Finalization of the Evaluation Questions and Assumptions

The finalization of the evaluation questions that will guide the evaluation should clearly reflect the evaluation criteria and indicative evaluations questions listed in the present terms of reference. They should also draw on the findings from the reconstruction of the intervention logic of the country programme. The evaluation questions will be included in the evaluation matrix (see Annex 8) and must be complemented by sets of assumptions that capture key aspects of the intervention logic associated with the scope of the question. The data collection for each of the assumptions will be guided by clearly formulated quantitative and qualitative indicators also indicated in the matrix.

Data Collection

Data will be collected via multiple approaches including documentary review, group and individual interviews, focus groups and field visits as appropriate. The evaluation will consider both secondary and primary sources for data collection. Secondary sources will inform the desk review that will focus primarily on programme reviews, progress reports, monitoring data gathered by the country office in each of the programme components, evaluations and research studies conducted and large scale and other relevant data systems in country. Primary data collection will include semi-structured interviews at national and subnational level with beneficiaries, government officials, representatives of implementing partners and civil society organizations and other key informants. Field visits will be conducted on sample basis during which focus group discussions will be conducted with beneficiaries and observations will provide additional primary data. Data is to be disaggregated by sex, age and location, where possible.

Data collection methods will be linked to the evaluation criteria, evaluation questions and assumptions that are included within the scope of the evaluation. The evaluation matrix¹ will be utilized to link these elements together.

The evaluation team is expected to spend three weeks in Zambia meeting with stakeholders at national and sub-national levels. The proposed field visit sites, stakeholders to be engaged and interview protocols will be outlined in the inception report to be submitted by the evaluation team. When choosing sites to visit, the evaluation team should make explicit the reasons for selection. The choice of the locations to visit at sub-national level needs to take into consideration the implementation of UNFPA's program components in those areas and done in consultation with the evaluation manager and Evaluation Reference Group (ERG).

Data Analysis

The focus of the data analysis process in the evaluation is the identification of evidence. The evaluation team will use a variety of both quantitative and qualitative methods to ensure that the results of the data analysis are credible and evidence-based. The analysis will be undertaken at the level of programme outputs and their contribution to outcome level changes.

Evaluation questions set within the change pathway of the ToC will be tested to assess change as well as UNFPA's contribution to the changes observed over the years. The reconstructed ToC and the assumptions therein will be tested during the conduct of the evaluation. Determination of progress will be based on data responding to the indicators in the evaluation matrix. By triangulating all data from all sources and methods, a comprehensive picture should emerge on the validity of the reconstructed ToC, and UNFPA's contribution to the change observed.

Validation mechanisms

All findings of the evaluation need to be supported with evidence. The evaluation team will use a variety of methods to ensure the validity of the data collected. Besides a systematic triangulation of data sources and data collection methods and tools, the validation of data will be sought through regular exchanges with the UNFPA Zambia Country Office programme managers and other key program stakeholders. A validation workshop with members of the ERG and other key stakeholders will be conducted at the end of the field phase.

Limitations to the methodology

The evaluation team will identify possible limitations and constraints during the data collection phase and present mitigating measures in the draft report.

7. Evaluation Process

¹ The evaluation matrix specifies the evaluation; the particular assumptions to be assessed under each question; the indicators, the "sources of information" (where to look for information) that will be used to answer the questions; and the methods and tools for data collection that will be applied to retrieve the data. The evaluation matrix must be included in the design report as an annex. During the field phase, the matrix will be used as a reference framework to check that all evaluation questions are being answered. At the end of the field phase, evaluators will use the matrix to verify that enough evidence has been collected to answer all the evaluation questions. The evaluation matrix must be included in the final report as an annex.

The evaluation will be undertaken in five phases: (i) preparatory phase, (ii) design phase, (iii) field phase (iv) reporting phase (v) facilitation of use and dissemination phase. Quality assurance measures should be integrated in all the phases to ensure high quality work.

i) Preparatory Phase

- Preparation and approval of the Terms of Reference (ToR)
- Constitution of the reference group for the ERG
- Selection, prequalification and hiring of the evaluation team
- Collection of relevant documents regarding the country programme for the period being examined
- Preparation of a stakeholder map (see Annex 4) - the Evaluation Manager will prepare a preliminary mapping of stakeholders relevant to the evaluation (to be provided to the evaluation team)
- Development of a communication plan for sharing results - as the evaluation progresses, any new opportunities for communication and dissemination should be identified and the plan should be updated accordingly.

ii) Design Phase

During this phase, the evaluation team will complete:

- A document review of all relevant documents available at the UNFPA Zambia Country Office and UNFPA Headquarters regarding the GRZ/UNFPA 8CP
- A stakeholder mapping - The evaluation team, in consultation with the ERG, will perform a stakeholder mapping in order to identify both UNFPA direct and indirect partners (i.e. partners who do not work directly with UNFPA and yet play a key role in a relevant outcome or thematic area in the national context). The stakeholders may include representatives from the government, civil society organizations, the private sector, UNFPA, peer UN organizations, other multilateral organizations, bilateral donors, and most importantly, the beneficiaries of the programme;
- Assess limitations to the data collection process and provide mitigation measures.
- An analysis of the results matrix and reconstruction of the intervention logic of the programme i.e. the theory of change meant to lead from planned activities to the intended results of the programme;
- The finalization of the list of evaluation questions;
- Preparation of the evaluation matrix
- The development of a data collection and analysis strategy, as well as a concrete work plan for the field phase

At the end of the design phase, the evaluation team will produce a **design report** describing the results of the above-listed steps and tasks. An **evaluation matrix** will accompany the design report highlighting the core elements of the evaluation: a) *what* is to be evaluated (evaluation criteria, questions and assumptions) and b) *how* to evaluate - the sources of information and methods and tools for data collection.

iii) Field Phase

The evaluation team will undertake a three-week in-country mission to collect and analyze the data required in order to answer the evaluation questions consolidated at the design phase. Fieldwork will commence with a briefing to CO staff on the evaluation.

At the end of the field phase, the evaluation team will provide the CO with a debriefing presentation on the preliminary results of the evaluation, with a view to validating preliminary findings and testing tentative conclusions and/or recommendations.

iv) Reporting Phase

During this phase, the evaluation team will continue the analytical work initiated during the field phase and prepare a **first draft of the final evaluation report**, taking into account comments made by the Country Office at the debriefing meeting. This first draft final report will be submitted to the ERG for comments (in writing) while respecting the independence of the evaluation team in expressing its judgment. The Evaluation Manager in coordination with the ESA Regional M&E advisor will use the Evaluation Quality Assessment Grid to assess the quality of the draft evaluation report.

Comments made by the reference group and consolidated by the Evaluation Manager will then allow the evaluation team to prepare a **second draft of the final evaluation report**. This second draft report will form the basis of a validation and dissemination seminar, which should be attended by the country office, as well as all the key programme stakeholders (including key national counterparts).

The **final report** will be drafted shortly after the seminar, taking into account comments made by the participants. The consultants will be invited to look at good quality CPE reports that can be found on the UNFPA evaluation database at <https://web2.unfpa.org/public/about/oversight/evaluations/>. These must be read in conjunction with their Evaluation Quality Assessment (EQA) (also available in the database) in order to gain a clear idea of the quality standards expected the evaluation team.

v) Facilitation of use and dissemination phase

During this phase, the evaluation manager together with the Communications Analyst will implement the communication plans to share the evaluation results with the CO, Regional Office (RO), ERG, implementing partners and other stakeholders. The evaluation manager also makes sure that the final evaluation report is communicated to relevant business units in the CO, invites them to submit a management response and consolidates all responses in a final management response document (see Annex 7).

The final evaluation report, along with the management response, and EQA of the report will be published on the UNFPA evaluation database. The evaluation report will also be made available to the UNFPA Executive Board and will be published on the CO website (<https://zambia.unfpa.org/en/publications>)

8. Expected Outputs/deliverables

The evaluation will be expected to produce the following deliverables:

- A design/inception report (*maximum 70 pages*) including (as a minimum): (a) a stakeholder mapping; (b) the evaluation matrix (including the final list of evaluation questions and indicators); (c) the overall evaluation design and methodology, with a detailed description of the data collection plan for the field phase; (see Annex 5)
- Debriefing presentation documents (Power Point) synthesizing the evaluation design and later, main preliminary findings, conclusions and recommendations of the evaluation, to be presented and discussed with the country office during the debriefing meeting foreseen at the end of the field phase;

- A final evaluation report (*maximum 70 pages plus annexes*). This will be potentially followed by a second draft, taking into account comments from the ERG; (see Annex 5)
- A PowerPoint presentation of the results of the evaluation for the validation and dissemination seminar
- A final evaluation report based on recommendations from the validation and dissemination seminar.

Quality Assurance

The CPE has a three-stage evaluation quality assessment (EQA) of the final evaluation report. The first level of quality assurance of all evaluation deliverables will be conducted by the **evaluation team leader** prior to submitting the deliverables to the review of the CO.

The CO recommends that the evaluation quality assessment checklist (see below) is used as an element of the proposed quality assurance system for the draft and final versions of the evaluation report. The main purpose of this checklist is to ensure that the evaluation report complies with evaluation professional standards.

<p>1. Structure and Clarity of the Report To ensure report is user-friendly, comprehensive, logically structured and drafted in accordance with international standards.</p>
<p>2. Executive Summary To provide an overview of the evaluation, written as a stand-alone section including key elements of the evaluation, such as objectives, methodology and conclusions and recommendations.</p>
<p>3. Design and Methodology To provide a clear explanation of the methods and tools used including the rationale for the methodological choice justified. To ensure constraints and limitations are made explicit (including limitations applying to interpretations and extrapolations; robustness of data sources, etc.)</p>
<p>4. Reliability of Data To ensure sources of data are clearly stated for both primary and secondary data. To provide explanation on the credibility of primary (e.g. interviews and focus groups) and secondary (e.g. reports) data established and limitations made explicit.</p>
<p>5. Findings and Analysis To ensure sound analysis and credible evidence-based findings. To ensure interpretations are based on carefully described assumptions; contextual factors are identified; cause and effect links between an intervention and its end results (including unintended results) are explained.</p>
<p>6. Validity of conclusions To ensure conclusions are based on credible findings and convey evaluators' unbiased judgment of the intervention. Ensure conclusions are prioritised and clustered and include: summary; origin (which evaluation question(s) the conclusion is based on); detailed conclusion.</p>
<p>7. Usefulness and clarity of recommendations To ensure recommendations flow logically from conclusions; are targeted, realistic and operationally feasible; and are presented in priority order. Recommendations include: Summary; Priority level (very high/high/medium); Target (administrative unit(s) to which the recommendation is addressed); Origin (which conclusion(s) the recommendation is based on); Operational implications.</p>
<p>8. SWAP - Gender To ensure the evaluation approach is aligned with SWAP (guidance on the SWAP Evaluation Performance Indicator and its application to evaluation can be found at http://www.unevaluation.org/document/detail/1452 -</p>

UNEG guidance on integrating gender and human rights more broadly can be found here: <http://www.uneval.org/document/detail/980>)

The second level of quality assurance of the evaluation deliverables will be conducted by the **CO evaluation manager**.

Finally, the evaluation report will be subject to an independent assessment by the **UNFPA Evaluation Office (EO)**. The EO quality assurance system, based on the UNEG norms and standards and good practices of the international evaluation community, defines the quality standards expected from this evaluation. A key element is the EQA (see Annex 6), which sets out processes with in-built steps for quality assurance and outlines for the evaluation report and the review thereof. The EQA will be systematically applied to this evaluation. The evaluation quality assessment will be published along with the evaluation deliverables on the EO website at: <https://web2.unfpa.org/public/about/oversight/evaluations/>.

Final

9. Workplan/Indicative Timeframe

CPE Phases and Task	March				April				May				June				July				August				Sept				Oct							
	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4				
Preparatory phase																																				
Drafting of the Terms of Reference	■	■	■	■																																
Review and approval of Terms of Reference by ESARO and EO					■	■	■	■																												
Pre-qualification of consultants									■	■	■	■																								
Recruitment of the evaluation team													■	■	■	■																				
Design phase																																				
Evaluation Reference Group meeting																	■								■				■				■			
Understanding of the UNFPA strategic response, programmatic response																					■	■														
Submission of design/inception report by the evaluation team																									■											
Field phase																																				
Data collection, analysis and debriefing																									■	■	■	■								
Reporting phase																																				
1 st draft final report																													■							
Feedback to draft report																														■						
2 nd draft final report																															■					
Feedback on 2 nd draft final report																																■				
Final report																																■				
Use, dissemination and management response phase																																				
Quality assessment of final report																																				■
Dissemination among stakeholders																																				■
Management response preparation																																				■

10. Composition of the Evaluation Team

The evaluation will preferably be conducted by an evaluation team comprised of a team leader and two experts with expertise to cover each of the thematic area: i.e. a technical expert for each thematic programme area - (i) sexual and reproductive health (with a special focus on adolescents and youth; gender) and (ii) population and development (including gender mainstreaming). The team leader will also act as a technical expert evaluator for a programme component.

Roles and Responsibilities of the evaluation team

- The team leader will be responsible for the overall evaluation process and the production of the draft and final evaluation reports. S/he will lead and coordinate the work of the evaluation team during all phases of the evaluation and be responsible for the quality assurance of all evaluation deliverables. She/he will liaise with the Evaluation Manager at the CO on various issues related to successful completion of the evaluation exercise.
- The Team Leader is expected to be experienced in conducting complex type of evaluations, such as country programme evaluations, partnership evaluations, strategic evaluations, thematic multi-country evaluations. She/he will have overall responsibility for providing guidance and leadership in: development of the evaluation design including approach, methodology and workplan; drafting the design, draft and final reports, as well as brief summary for presentation at a dissemination workshop. The team leader will lead the CPE process and will provide guidance to the other team members. The Team Leader is expected to have a solid background in one of the two thematic areas of the country programme (sexual and reproductive health or population and development) and, in addition to his/her responsibilities as team leader, will serve as a thematic specialist in the Evaluation Team. The qualifications, experience and competencies of thematic specialists for each thematic area are described below;
- A sexual and reproductive health expert (Consultant) will provide expertise in integrated sexual, reproductive health, HIV and gender as well as maternal health (including adolescent/youth sexual reproductive health, family planning, and human resource management in the health sector). She/he will take part in the data collection and analysis work during the design and field phases. She/he will be responsible for drafting key parts of the design report and of the final evaluation report, including (but not limited to) sections relating to reproductive health and rights.
- A population and development expert (Consultant) will provide expertise in population and development issues (including census, democratic governance, population dynamics, monitoring and evaluation, legal reform processes, national and local capacity development and the national statistical system). She/he will take part in the data collection and analysis work during the design and field phases. She/he will be responsible for drafting key parts of the design report and of the final evaluation report, including (but not limited to) sections relating to population and development.
- All evaluators should assess the extent to which gender and human rights have been mainstreamed in the 8th country programme

11. Qualifications and Experience of the Evaluation Team

Team Leader

- An advanced degree in Social Sciences, Population Studies, Statistics or Demography.

- 10 years' experience in conducting complex evaluations in the field of development aid for UN agencies and/or other international organizations including experience in leading evaluations
- Expert experience in and knowledge of one of the thematic areas relevant to the country programme evaluation (either sexual and reproductive health and rights or population and development)
- Good knowledge of Zambia's national development context including sexual and reproductive health and rights, adolescent and youth, population and development and gender equality
- In-depth knowledge of evaluation methods, data collection and analysis
- Excellent data analysis skills in qualitative and quantitative methods;
- Experience in carrying out country programme evaluations
- Familiarity with UNFPA or UN operations;
- Proven evaluation team leader experience
- Excellent analytical, writing and communication skills
- Experience working with a multi-disciplinary team of experts
- Excellent written and spoken English
- Where languages other than English will be used, the team leader will be assisted by subject matter experts, during the field phase for the conduct of the evaluation.

Sexual and reproductive health expert

- An advanced degree in Public Health, Medicine, Health Economics, Epidemiology or Biostatistics.
- 7 years' experience in conducting evaluations in the field of development aid for UN agencies and/or other international organizations;
- Substantive knowledge of sexual and reproductive health including adolescents and youth; gender as a thematic area
- Good knowledge of the national development context
- Knowledge of evaluation methods, data collection and analysis
- Excellent data analysis skills in qualitative and quantitative methods.
- Familiarity with UNFPA or UN operations;
- Excellent analytical, writing and communication skills
- Experience of operations and response to humanitarian/crisis an advantage
- Ability to work with a multi-disciplinary team of experts
- Ability to provide deliverables on time
- Excellent written and spoken English and local language skills

Population and development expert

- An advanced degree in Population studies, Statistics or Demography.
- 7 years' experience in conducting evaluations in the field of development aid for UN agencies and/or other international organizations;
- Substantive knowledge of population and development including gender mainstreaming as a thematic area
- Good knowledge of the national development context
- Knowledge of evaluation methods, data collection and analysis
- Excellent data analysis skills in qualitative and quantitative methods.
- Familiarity with UNFPA or UN operations;
- Excellent analytical, writing and communication skills
- Experience of operations and response to humanitarian/crisis an advantage
- Ability to work with a multi-disciplinary team of experts
- Ability to provide deliverables on time
- Excellent written and spoken English and local language skills

12. Remuneration and duration of the contract

Repartition of workdays among the team of experts will be the following:

	Team Leader	SRH Expert	Population and Development Expert
Design phase	7	3	3
Field phase	21	21	21
Reporting phase	21	10	10
Dissemination including stakeholder meeting	1	1	1
TOTAL (days)	50	35	35

The consultants will be paid an agreed daily rate within the UN consultants scale based on qualification and experience. Workdays will be distributed between the date of contract signature and end date of evaluation.

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

- Upon approval of the design report; 20%
- Upon satisfactory contribution to the draft final evaluation report; 40%
- Upon satisfactory contribution to the final evaluation report; 40%

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

13. Management of the evaluation

The CPE will be conducted by the evaluation team and managed by the **Evaluation Manager** of the UNFPA Zambia CO. The evaluation manager will oversee the entire process of the evaluation, from its preparation to the dissemination of the final evaluation report and manage the interaction between the team of evaluators and the reference group. She will serve as an interlocutor between evaluation team and the ERG, facilitate, and provide general and logistical support as needed for the evaluation. The evaluation manager will ensure the quality control of deliverables submitted by the evaluation team throughout the evaluation process, communicate this through the EQA process in collaboration with the ESARO M&E advisor and prevent any attempts to compromise the independence of the team of evaluators during the evaluation process.

As per UNFPA's evaluation handbook, an **Evaluation Reference Group** will be established and be tasked to provide constructive guidance and feedback on implementation and products of the evaluation, hence contributing to both the quality and compliance of this exercise. The ERG will be coordinated by the Population and Development Department of the Ministry of National Development Planning. The ERG will be composed of the evaluation manager and other relevant staff from; the UNFPA country office in Zambia; Ministry of National Development Planning; Ministry of Health (national and sub-national levels in UNFPA supported provinces); Ministry of Chiefs and Traditional Affairs, Ministry of Gender; Ministry of Youth, Sports and Child Development; Central Statistical Office; Population Council; Planned Parenthood Association of Zambia (PPAZ); Young Women's Christian Association (YWCA); Southern

Africa HIV and AIDS Information Dissemination Service (SAfAIDS) and the UNFPA East and Southern Africa Regional Office (ESARO). The main functions of the reference group will be:

- To discuss the terms of reference drawn up by the Evaluation Manager;
- To provide the evaluation team with relevant information and documentation on the programme;
- To facilitate the access of the evaluation team to key informants during the field phase;
- To discuss the reports produced by the evaluation team;
- To advise on the quality of the work done by the evaluation team;
- To assist in feedback of the findings, conclusion and recommendations from the evaluation into future programme design and implementation.

The roles and responsibilities of the **ESA Regional M&E advisor** are:

- Provides support (backstopping) to evaluation manager at all stages of the evaluation;
- Reviews and provides comments to the ToR for the evaluation;
- Assists the CO evaluation manager in identifying potential candidates and reviews the summary assessment table for consultants prior to it being sent to the EO;
- Undertakes the EQA of the draft final evaluation report;
- Provides support to the dissemination of evaluation results.

The roles and responsibilities of the **HQ Evaluation Office** are:

- Approves ToR for the evaluation after the review and comments by the ESA Regional M&E advisor (to be included in the draft ToR sent to the EO);
- Pre-qualifies consultants;
- Undertakes final EQA of the evaluation report;
- Publishes final report, EQA and management response in the evaluation database.

14. Bibliography and Resources

The following documents will be availed to the evaluation team upon recruitment using a Google Drive link.

1. UNFPA Strategic Plan (2014-2017)
<https://www.unfpa.org/resources/strategic-plan-2014-2017>
2. UNFPA Strategic Plan (2018-2021)
<https://www.unfpa.org/strategic-plan-2018-2021>
3. Zambia UNSDPF (2016-2021)
http://zm.one.un.org/sites/default/files/final_zambia-united_nations_sustainable_development_partnership_framework.pdf
4. Seventh National Development Plan
<http://www.mndp.gov.zm/wp-content/uploads/2018/05/7NDP.pdf>
5. GRZ/UNFPA 8th Country Programme Document (2016-2020)
<https://zambia.unfpa.org/en/publications/unfpa-zambia-8th-country-programme-document>
6. GRZ/UNFPA 8th Country Programme M&E Plan
7. Zambia Country Office Annual myResults Plans and Reports (2016, 2017, 2018)
<https://zambia.unfpa.org/en/publications/unfpa-zambia-annual-report-2016>
<https://zambia.unfpa.org/en/publications/unfpa-zambia-annual-report-2017>
<https://zambia.unfpa.org/en/publications/unfpa-zambia-annual-report-2018>
8. Implementing Partner work plans and progress reports (2016, 2017, 2018)
9. Relevant national policy documents for each programmatic area
10. Demographic Dividend Study Report
<https://zambia.unfpa.org/en/publications/harnessing-demographic-dividend-future-we-want-zambia>
11. UNFPA Zambia Resource Mobilization Strategy
12. Joint Programme Documents
13. Mid-Term Evaluation of the UNFPA Supplies Programme (2013-2020)
<https://www.unfpa.org/updates/mid-term-evaluation-unfpa-supplies-programme-2013-2020>
14. Evaluation of H4+ Joint Programme Canada and Sweden (Sida)
<https://www.unfpa.org/updates/evaluation-h4-joint-programme-canada-and-sweden-sida>
15. Evaluation of UNFPA support to the prevention, response to and elimination of gender based violence and harmful practices
<https://www.unfpa.org/updates/corporate-evaluation-unfpa-support-prevention-response-and-elimination-gender-based-violence>
16. Reports on core and non-core resources
17. Donor reports
18. Evaluation Handbook: How to Design and Conduct a Country Programme Evaluation at UNFPA (2019)
<https://www.unfpa.org/EvaluationHandbook>
19. UNEG Code of Conduct
20. UNEG Ethical guidelines
21. UNEG Guidance document - Integrating Human Rights and Gender Equality in Evaluations
22. UNEG Norms and Standards

15. Annexes

1. UNEG Norms and Standards for Evaluation



UNEG Norms and
Standards for Evalu:

2. Ethical Code of Conduct of UNEG/ UNFPA Evaluations



Ethical Code of
Conduct of UNEG_U

3. List of Atlas projects for the period under evaluation



List of Atlas
Projects.docx

4. Information on main stakeholders by areas of interventions



The Stakeholder
Map.docx

5. Outlines of the design and final evaluation reports



Design report
structure.docx



Final report
structure.docx

6. Evaluation Quality Assessment template



Evaluation Quality
Assessment Templat

7. Management response template



Management
Response Template.

8. Evaluation Matrix Template



Evaluation Matrix
Template.docx