



**End-of-Programme Evaluation  
of the**

**The Transformative Agenda for Women, Adolescents and Youth in the Pacific  
Programme (TA) 2018-2022**

**Terms of Reference**

**July 2022**

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## Acronyms

APRO	Asia Pacific Regional Office
CCA	Common country assessment/analysis
DSA	Daily subsistence allowance
ERG	Evaluation reference group
FSM	Federated States of Micronesia
GBV	Gender-based violence
ICPD	International Conference on Population and Development
IPs	Implementing Partners
M&E	Monitoring and evaluation
PHT	Pacific Humanitarian Team
PICTs	Pacific Island Countries and Territories
RMI	Republic of the Marshall Islands
SDGs	Sustainable Development Goals
SRHR	Sexual and reproductive health and rights
SRO	Sub regional office
SRP	Sub regional programme
SRPAP	Sub regional programme action plan
SRPD	Sub regional programme document
ToR	Terms of reference
UNCT	United Nations Country Team
UNPS	United Nations Pacific Strategy
UNEG	United Nations Evaluation Group
UNFPA	United Nations Population Fund

## 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. In pursuing this mission in the Pacific, the Executive Board approved the 6<sup>th</sup> cycle Sub Regional Programme (SRP6) for the Pacific 2018-2022, currently under implementation. The overall goal of the SRP6 was to achieve **universal access to sexual and reproductive health, realized reproductive rights and reduced maternal mortality, to accelerate progress on the agenda of the International Conference on Population and Development and to improve the lives of women, adolescents and youth in the Pacific**

A flagship programme of the UNFPA PSRO that contributes to the SRP6 goal is the **“Transformative Agenda for Women, Adolescents and Youth in the Pacific Programme (TA) 2018-2022**, funded by Australian Government's Department of Foreign Affairs and Trade (DFAT). The goal of the TA programme is to achieve transformative change in the lives of women, adolescents and youth across the Pacific by moving unmet need for family planning in the Pacific towards zero by 2022. To achieve this goal, the programme concentrates on three outcomes namely; 1- Increased and improved supply of integrated SRH information and services, particularly for family planning; 2- Increased demand for integrated SRH information and services, particularly for family planning; and 3- A more conducive and supportive environment for people to access and benefit from quality SRH, especially contraceptive choice

The TA programme which focusses on 6 countries namely Fiji, Kiribati, Samoa, Solomon Islands, Tonga and Vanuatu began implementation in 2018 and will reach the end of its term in December 2022. An end of programme evaluation is due to provide an independent assessment of the relevance and performance of the programme (2018-2022), and offer an analysis of various facilitating and constraining factors influencing programme delivery and the achievement of intended results. The TA evaluation will also draw conclusions and provide a set of actionable recommendations for future SRH/FP programming.

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 quality evaluations in line with the United Nations Evaluation Group (UNEG) norms and standards and international good practice for evaluation.

The main audience and key users of the evaluation are: (i) DFAT; (ii) the UNFPA Pacific SRO; (iii) the Governments of six Pacific Island Countries; (iv) implementing partners of the UNFPA Pacific SRO; and (v) rights-holders involved in UNFPA interventions and the organizations that represent them (in particular women, adolescents and youth). The evaluation results will be disseminated as appropriate, using traditional and digital channels of communication.

## 2. The Transformative Agenda for Women, Adolescents and Youth in the Pacific Programme (TA) 2018-2022

The United Nations Population Fund (UNFPA) Pacific Sub-Regional Office (PSRO) implements programmes in 14 Pacific Island countries and territories (PICTs). It supports sexual and reproductive health (SRH) and the fulfilment of reproductive rights as essential for gender equality, the empowerment of women and young

people, and women's participation in the economy. Under the 2030 Agenda for Sustainable Development, Sustainable Development Goal (SDG) target 3.7 calls for universal access to SRH, including family planning (FP), as a key driver of poverty reduction and sustainable development.

Yet key SRH indicators in the Pacific show alarming trends. Adolescent birth rates are rising in 6 of 14 PICTs, contrary to the trend in most other regions. Fertility rates are growing in 4 out of 14 PICTs, given low contraceptive prevalence rates and some of the world's highest rates of unmet need for FP<sup>1</sup>.

The Australian Department of Foreign Affairs and Trade (DFAT) has invested AUD 30 million over four years to expand access to quality sexual and reproductive health (SRH)<sup>2</sup> in six Pacific countries with a focus on reducing unmet need for family planning. The Transformative Agenda for Women, Adolescents and Youth: Towards Unmet Need for Family Planning by 2022 (TA) is implemented in Fiji, Kiribati, Samoa, Solomon Islands, Tonga and Vanuatu. Implementation is managed by UNFPA's Pacific Sub-regional Office (PSRO) and works with implementing partners (IPs) from both government and civil society in Fiji, Kiribati, Samoa, Solomon Islands, Tonga and Vanuatu. It is a high priority for the Australian Government and its performance is of strong interest to a wide range of stakeholders. The three intended outcomes of the TA Program are:

1. Increased and improved supply of integrated SRH information and services, particularly for FP
2. Increased demand for integrated SRH information and services, particularly for FP
3. More conducive and supportive environment for people to access and benefit from quality SRH, especially contraceptive choice

The TA program is implemented through partnerships with national and regional entities. The primary implementing partners (IPs) in each of the six countries are:

- Fiji: Ministry of Health and Medical Services; Ministry of Youth and Sports; Ministry of Women, Children and Poverty Alleviation
- Kiribati: Ministry of Health and Medical Services; Ministry of Education; Ministry of Women, Youth and Social Services; Ministry of Finance and Economic Development/National Statistics Office<sup>3</sup>
- Samoa: Ministry of Finance
- Solomon Islands: Ministry of Development Planning and Aid Coordination<sup>4</sup>, Ministry of Health and Medical Services
- Tonga: Ministry of Health
- Vanuatu: Ministry of Health and Medical Services; Ministry of Youth and Sports; Ministry of Education and Training; Vanuatu National Statistics Office<sup>5</sup>, CARE International and World Vision

The primary IPs in Tonga and Samoa also work with a broad range of national sub-implementing partners (line ministries and NGOs) contracted to carry out various aspects of their country programs.

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<sup>1</sup> Based on analysis of countries' latest National Population and Housing Census, Demographic Health Surveys, Administrative Data or Annual report.

<sup>2</sup> Defined in Making Reproductive Rights and SRH a Reality for All: Reproductive Rights and SRH Framework, 2008, UNFPA as: a) Family planning; (b) Antenatal, safe delivery and post-natal care; (c) Prevention and appropriate treatment of infertility; (d) Prevention of abortion and management of the consequences of abortion; (e) Treatment of reproductive tract infections; (f) Prevention, care and treatment of STIs and HIV/ AIDS; (g) Information, education and counselling, as appropriate, on human sexuality and reproductive health; (h) Prevention and surveillance of violence against women, care for survivors of violence and other actions to eliminate traditional harmful practices, such as FGM/C; (i) Appropriate referrals for further diagnosis and management of the above.

<sup>3</sup> Ceased being an implementing partner post MTR due to slight change in scope of TA programme

<sup>4</sup> Refer to footnote 2 above

<sup>5</sup> Refer to footnote 2 above

Non-government regional implementing partners (RIP) include: John Snow International (JSI), Australian Broadcasting Corporation (ABC), Burnet Institute, Nossal Institute, Family Planning New South Wales (FPNSW), International Planned Parenthood Federation Sub-regional Office of the Pacific (IPPF SROP), World Vision, CARE and Women Enabled International (WEI).

As mentioned above, the TA program is nested within the UNFPA PSRO Sub Regional Program 6 (SRP6) 2018-2022. The New Zealand Ministry of Foreign Affairs and Trade (MFAT) Pacific Regional SRH Program (PRSRHP) operated in five of the six TA countries from 2014 to September 2020. The TA programme built on a number of elements of the PSRHP, such as developing Family Life Education in Kiribati. In 2018 the PRSRHP was revised to closely align with the TA theory of change, and objectives, but with a specific focus on adolescents and youth. In addition, the UNFPA Global Supplies program services all six MOH programs in ensuring that FP commodities are available and supply chain system capacity is strengthened. The TA programme has over the last few years developed multiple additional synergies with other SRHR-related programs and projects within the six participating countries.

### **Humanitarian context**

The implementation of the Transformative agenda has taken place against a backdrop of around eight tropical cyclones or around an average of two cyclones per year in the Pacific region since 2018. The most notable recent of these occurred in April 2020 with category five tropical cyclone Harold hitting Vanuatu affecting 160,000 individuals and causing widespread damage to health infrastructure thus restricting access to SRH services in the health facilities of Sanma and Malampa provinces. The cyclone also caused widespread destruction in Fiji, Solomon Islands and Tonga. In December 2020, Tropical cyclone Yasa crossed Vanua Levu island in Fiji affecting 93,000 people . Towards the end of 2019, the measles epidemic struck Samoa and resulted in a state of emergency declared by the Samoa Ministry of Health leading to a total of 80 measles related deaths.

Additionally, the January Hunga Tonga–Hunga Ha'apai volcano in the Tongan archipelago damaging public utilities and disrupting communications due to the damages to the southern cross cables that ran close to near the centre of the eruption. This consequently affected delivery of SRH/FP services.

### **COVID 19 Pandemic**

While the Pacific region was largely spared widespread mortality arising from the COVID 19 pandemic, it has nonetheless had major negative effects, from deterring health seeking behaviour, the closure of SRH clinics, and diversion of human resources and financial resources to vaccine campaigns and public health measures. Major components of the TA experienced delays due to these issues.

## **3. Purpose, Objectives and Scope of Evaluation**

## Purpose

The Transformative Agenda final evaluation 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 specified in the design 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 on ending unmet need for family planning in the six programme countries in the Pacific

## Objectives

The **objectives** of the evaluation are:

1. To provide the UNFPA Pacific SRO DFAT, national stakeholders and rights-holders with an independent assessment of the TA Programme's relevance, coherence, effectiveness, efficiency and sustainability.
2. To inform the design of the future investments in SRHR in the Pacific

## Scope

The evaluation will cover the following six Pacific Island countries where UNFPA implemented the TA programme: Fiji, Kiribati, Samoa, Solomon Islands, Tonga and Vanuatu and will cover the TA outcomes including:

1. Increased and improved supply of integrated SRH information and services, particularly for FP
2. Increased demand for integrated SRH information and services, particularly for FP
3. More conducive and supportive environment for people to access and benefit from quality SRH, especially contraceptive choice

In addition, the evaluation will evaluate TA performance in advancing cross-cutting issues, such as human rights; gender equality; youth friendly, and disability inclusion; and transversal functions, such as coordination; monitoring and evaluation (M&E); innovation; communications; strategic partnerships, etc.

## 4. Evaluation Criteria and Preliminary Evaluation Questions

### *Evaluation Criteria*

In accordance with the methodology outlined in the UNFPA Evaluation Handbook (see section 3.2, pp. 51-61), the evaluation will examine the following five OECD/DAC evaluation criteria: relevance, coherence, effectiveness, efficiency and sustainability.<sup>6</sup>

<b>Relevance</b>	The extent to which the objectives of the TA programme correspond to population needs at country level (in particular, those of vulnerable groups), and were aligned throughout the programme period with government priorities.
<b>Coherence</b>	The level of compatibility (complementarity, harmonization and coordination) of the TA programme with other Government, NGOs and CSOs interventions in a country and with coordination mechanisms (e.g., RMNCAH or relevant SRH/Health sector coordination mechanisms).
<b>Effectiveness</b>	The extent to which TA programme outputs have been achieved and the extent to which these outputs have contributed to the achievement of the TA programme outcomes.
<b>Efficiency</b>	The extent to which TA programme outputs and outcomes have been achieved with the appropriate amount of resources (funds, expertise, time, administrative costs, etc.).

<sup>6</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>.

<b>Sustainability</b>	The continuation of benefits from a UNFPA-financed intervention after its termination, linked, in particular, to their continued resilience to risks.
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### *Preliminary Evaluation Questions*

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

The evaluation questions presented below are indicative and preliminary. Based on these questions, the evaluator is expected to consult with the Evaluation Manager and International Programme Coordinator and develop a final set of evaluation questions, in consultation with the ERG.

### *Relevance*

1. To what extent is the TA programme adapted to the 6 countries in terms of: (i) the needs of women of reproductive age, adolescents and young people, and diverse populations, including the needs of marginalized and vulnerable groups (e.g., people with disabilities; (ii) national development strategies and policies; and (iii) shifts caused by crisis, including COVID-19 and other humanitarian crises, and/or major political changes?

### *Coherence*

2. To what extent is the TA programme coherent with (i) priorities articulated in international and regional frameworks and agreements, in particular the ICPD Programme of Action, the SDGs, Samoa Pathway and Moana Declaration?

3. To what extent is the TA programme compatible with other Government, NGOs and CSO interventions in a country and with existing coordination mechanisms?

### *Effectiveness*

4. To what extent have the interventions and outputs supported by UNFPA and its implementing partners contributed to the achievement of the outcomes of the TA programme?

5. To what extent has UNFPA successfully integrated and advanced human rights, gender equality, youth and disability inclusion<sup>7</sup> in the design, implementation and monitoring of the TA programme and improved results for marginalized and vulnerable populations such as people with a disability?

### *Efficiency*

6. 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 overcome barriers and pursue the achievement of the outputs and outcomes defined in the TA programme?

### *Sustainability*

7. To what extent has UNFPA been able to support implementing partners and beneficiaries (notably, women, adolescents and youth) in developing capacities and establishing mechanisms to ensure the sustainability of the TA programme effects across the development and humanitarian continuum?

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

## **5. Approach and Methodology**

### *Approach*

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<sup>7</sup> See [Guidance on disability inclusion in UNFPA evaluations](#)

The evaluation of the transformative agenda will adopt a theory based approach that would be **participatory** and focused on the **mixed-method approach** to data collection. The theory-based approach will utilize the TA programme theory of change, which depicts how the interventions supported by the TA are expected to contribute to a series of set results (outputs and outcomes) which in turn contribute to the overall goal of the TA programme outlined in Annex A. The theory of change identifies the causal links between the results, as well as critical assumptions and contextual factors that support or hinder the achievement of desired changes

In ensuring the participation of stakeholders, the evaluation will be inclusive, transparent involving a broad range of partners and stakeholders at national and sub-national levels. The stakeholder map will be provided that identifies stakeholders who have been involved in the preparation and implementation of the TA programme. These stakeholders include government representatives, NGOs, civil society organizations, implementing partners, academia, and DFAT.

The mixed method application will primarily use qualitative methods for data collection, including document reviews, key informant interviews, group discussions and observations during field visits, where appropriate. This 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 related to the TA programme and will use of disaggregated data by relevant criteria i.e. age, gender, marginalized and vulnerable groups, etc. wherever possible.

### *Methodology*

The evaluation team shall develop the evaluation methodology in line with the evaluation approach and guidance provided in the UNFPA Evaluation Handbook as needed. The TA evaluation will be conducted in accordance with the *UNEG Norms and Standards for Evaluation*,<sup>8</sup> *Ethical Guidelines for Evaluation*,<sup>9</sup> *Code of Conduct for Evaluation in the UN System*<sup>10</sup>, *Guidance on Integrating Human Rights and Gender Equality in Evaluations*<sup>11</sup> and *UNFPA's Guidance on Disability Inclusive Evaluations*<sup>12</sup>. When contracted by the UNFPA Pacific SRO, the evaluator/s will be requested to sign the *UNEG Code of Conduct* prior to starting their work.

The methodology that the evaluator 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 the TA's support in the Pacific. The methodological design of the evaluation shall include in particular: (i) the programme 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

The evaluator will be required to maintain an evaluation matrix and an updated version will need to be submitted each time a key deliverable of the evaluation is due. The evaluation matrix is centerpiece to the methodological design of the evaluation<sup>13</sup> and outlines (i) what will be evaluated<sup>14</sup> and (ii) how it will be evaluated<sup>15</sup>. The consultant will also be required to finalize a sampling strategy outlining and justifying the sample of stakeholders and sites to be attended to in the data collection phase. The stakeholder map and the

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<sup>8</sup> Document available at: <http://www.unevaluation.org/document/detail/1914>.

<sup>9</sup> Document available at: <http://www.unevaluation.org/document/detail/102>.

<sup>10</sup> Document available at: <http://www.unevaluation.org/document/detail/100>.

<sup>11</sup> Document available at: <http://www.unevaluation.org/document/detail/980>.

<sup>12</sup> Document available at: <https://www.unfpa.org/admin-resource/guidance-disability-inclusion-unfpa-evaluations>

<sup>13</sup> 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

<sup>14</sup> i.e. final evaluation questions for all evaluation criteria and key assumptions to be examined;

<sup>15</sup> i.e. data collection methods and tools and sources of information for each evaluation question and associated key assumptions.

list of interventions by country will be the key information used to determine the sample. As for the sample sites, it is proposed that the consultant will travel to 3 TA countries<sup>16</sup>.

The evaluation will also need to outline in the design report the primary and secondary sources of information<sup>17</sup> and all the data collection tools and protocols proposed. Primary data collection should include but not be limited to semi-structured interviews with key informants, group discussions with service providers, a few illustrative case studies with rights-holders<sup>18</sup> and direct observation during visits to selected sites. Secondary data collection should consider and not be limited to desk review of TA program documents and evidence materials including records and data repositories of the TA and its implementing partners, such as health clinics/centres. Particular attention will be required for compiling data on key performance indicators of the Transformative Agenda.

In terms of analyzing the data collected from the field, the consultant will need to fully explain the method of analyses that will be used to answer the evaluation questions. This will include and not be limited to the major framework for analyzing the data i.e. the evaluation matrix. All findings of the evaluation need to be firmly grounded in evidence. The evaluator will be required to include in the design report the variety of mechanisms that would be used to ensure the validity of collected data and information. These mechanisms include (but are not limited to): systematic triangulation of data sources and data collection methods<sup>19</sup>; regular exchange with the evaluation manager and TA Programme Coordinator at the PSRO; debriefing meeting with UNFPA at the end of the field phase to present findings and UNFPA provides any additional information for clarification; debriefing meeting with UNFPA and DFAT to present findings and DFAT provides any additional information and clarification: The debriefing meeting with the PSRO and the ERG at the end of the field phase, when the evaluator presents the emerging findings and preliminary conclusions.

## 6. Evaluation Process

The evaluation process can be broken down into five different phases that 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 evaluator 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.

### Design Phase

The evaluator, will work in close consultation with the evaluation manager and the ERG. This phase includes:

- Participating in an evaluation kick-off meeting between UNFPA and the evaluator
- Desk review of background information and documentation on the country context and TA, as well as other relevant documentation.
- 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 the six TA Countries through interviews and group discussions.

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<sup>16</sup> Depending on the COVID-19 situation and related travel restrictions, remote data collection methods will be utilized if face-to-face data collection is not feasible. If face-to-face data collection is feasible, it will be done under strict prevention measures to ensure that both evaluator and key informants are not exposed to any risk of COVID-19 infection.

<sup>17</sup> For detailed guidance on the different data collection methods typically employed in final evaluations, see Handbook, section 3.4.2, pp.

<sup>18</sup> (notably women, adolescents and youth, representatives of other vulnerable and marginalized groups)

<sup>19</sup> see Handbook, section 4.2, pp. 94-95

- Development of a data collection and analysis strategy, as well as a concrete and feasible evaluation work plan
- 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).

At the end of the design phase, the evaluator will develop a **design report** that presents a robust, practical and feasible evaluation approach, detailed methodology and work plan. The evaluator will develop the design report based on the proposed format outlined in Annex C.

### Field Phase

The evaluator will collect the data and information required to answer the evaluation questions in the field phase. Towards the end of the field phase, the evaluator will conduct a preliminary analysis of the data to identify emerging findings that will be presented to the Pacific SRO and the ERG. The field phase should allow the evaluator/s sufficient time to collect valid and reliable data to cover the thematic scope of the TA evaluation. A period of 6 weeks for data collection is planned for this evaluation

The field phase includes:

- Meeting with the UNFPA Pacific SRO staff to launch the data collection.
- Meeting of the evaluator with relevant programme officers at the UNFPA Pacific SRO and its field staff in country<sup>20</sup>.
- Data collection at national and sub-national levels.

At the end of the field phase, the evaluator will hold a series of **debriefing meetings with the UNFPA, DFAT 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 evaluator and important stakeholders, and will enable the evaluators to refine the findings, formulate conclusions and develop credible and relevant recommendations.

### Reporting Phase

In the reporting phase, the evaluator 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 UNFPA, DFAT and the ERG at the debriefing meeting at the end of the field phase.

UNFPA will collect and consolidate the written comments and any and feedback provided by the members of the ERG. On the basis of the comments, the evaluator 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

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<sup>20</sup> UNFPA PSRO is physically present in the following TA countries - Fiji (main sub regional office), Kiribati, Samoa, Solomon Islands, Tonga and Vanuatu.

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 PSRO Deputy Director in the UNFPA Pacific SRO.

### **Dissemination and Facilitation of Use Phase**

In the dissemination and facilitation of use phase, the evaluator 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 evaluator, will also develop an **evaluation brief**. This concise note will present the key results of the TA evaluation, thereby making them more accessible to a larger audience. A format will be provided to follow.

## **7. Expected Deliverables**

The evaluator is expected to produce the following deliverables:

1. **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. A proposed format for the evaluation design report is attached in Annex C.
2. **PowerPoint presentation of the design report.** The PowerPoint 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 and UNFPA the evaluator will develop the final version of the design report.
3. **PowerPoint presentation for debriefing meeting with PSRO, DFAT 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 evaluator, UNFPA Pacific SRO staff (incl. senior management), DFAT 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.
4. **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 UNFPA PSRO, DFAT and the ERG. Based on the comments and feedback provided by these stakeholders, the evaluator will develop a final evaluation report.
5. **Final evaluation report.** The final evaluation report (*maximum 50 pages, including the executive summary and excluding annexes*) will present the findings and conclusions, as well as a set of practical and actionable recommendations to inform the next programme cycle. The proposed format for the final report is outlined in Annex C.

6. **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.
7. **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 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 English language.

## 8. 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 and specific dates for the submission of corresponding deliverables. The deliverables are the responsibility of the evaluator.

Table 2: Evaluation Tasks and Timeline

Evaluation Plan and Activities		1 Evaluation Consultant	
		# of days	Indicative deadlines
<b>Design Phase</b>			
1	Evaluation kick-off meeting between the evaluator and UNFPA	0.5	<i>August 29</i>
2	Desk review of background information and documentation on the country contexts and the TA programme	10	<i>August 29-September 9</i>
3	Drafting of the design report (incl. approach and methodology, theory of change, evaluation questions, <u>duly completed evaluation matrix</u> , final stakeholder map and sampling strategy, evaluation work plan and agenda for the field phase)	10	<i>September 12-23</i>
	Review of the draft design report by UNFPA and ERG	7	<i>September 26-October 5</i>
4	Integration of feedback and Draft Final Design Report	1	<i>October 5</i>
5	Develop Presentation	1	<i>October 6</i>
6	Presentation of the Draft Final Design Report to the ERG for any final comments and feedback (Meeting to endorse in principle or not pending incorporation of any final comments)	0.5	<i>October 7</i>
7	Incorporation of ERG feedback in draft report and submission of the Final Design Report	0.5	<i>October 7</i>
	<b>Subtotal</b>	<b>23.5</b>	
<b>Field Phase</b>			
8	Inception meeting for data collection with PSRO staff	1	
9	Individual meetings with relevant SRO programme officers	4	<i>October 10-14</i>
10	Data collection (incl. interviews with key informants, site visits for direct observation, group discussions, desk review, etc.)	30	<i>October 14-November 25</i>
11	Participation in TA annual planning workshop/phase 2 programme design meeting.)	3	<i>October-TBD</i>
12	Debriefing meeting with UNFPA staff, DFAT and the ERG to present emerging findings and preliminary conclusions after data collection (1.5 days to prepare power point and 0.5 days to meet)	2	<i>November 28-29</i>
	<b>Subtotal</b>	<b>40</b>	
<b>Reporting Phase</b>			
13	Drafting of the evaluation report and circulation to the evaluation manager	15	<i>November 30-December 20</i>
	Review of the draft report by UNFPA and ERG	5	<i>December 20-January 20, 2023</i>

Evaluation Plan and Activities		1 Evaluation Consultant	
		# of days	Indicative deadlines
14	Incorporation of feedback	1	<i>January 23, 2023</i>
15	Presentation of Draft Final Evaluation Report	0.5	<i>January 24, 2023</i>
16	Incorporation of ERG feedback Submission of Final Evaluation Report (incl. annexes)	1	<i>January 25, 2023</i>
	<b>Subtotal</b>	<b>17.5</b>	
<b>Dissemination Phase</b>			
17	Development of the presentation on the evaluation results	2	<i>January 26-27, 2023</i>
18	Development of the evaluation brief by the evaluator	5	<i>January 30-February 3, 2023</i>
	<b>Subtotal</b>	<b>7</b>	
<b>Total</b>		<b>85<sup>21</sup></b>	

### 9. Management of the Evaluation

The evaluation will be managed by the Monitoring and Evaluation Specialist within the UNFPA Pacific SRO and in consultation with the evaluation reference group (ERG) throughout the evaluation process. An independent external evaluator will conduct the evaluation and prepare an evaluation report in conformity with these terms of reference.

The progress of the evaluation will be followed closely by the **evaluation reference group (ERG)**, which is composed of relevant UNFPA staff from the Pacific SRO, representatives of the national Governments of selected TA countries, implementing partners, DFAT, as well as other relevant key stakeholders. 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 evaluator’s access to sources of information and key informants and undertake quality assurance of the evaluation deliverables from a technical perspective.

### 10. Qualifications and Experience of the Evaluator

The competencies, skills and experience of the evaluation consultant 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,
- 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 Transformative Agenda programme covered by the evaluation**
- 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.
- Ability to ensure ethics and integrity of the evaluation process, including confidentiality and the principle of do no harm.

<sup>21</sup> Only includes evaluator’s activities and excludes number of days by UNFPA and ERG to review the deliverables highlighted in grey

- Ability to consistently integrate human rights and gender perspectives, and youth and disability inclusion in all phases of the evaluation process.
- Excellent management and leadership skills
- 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 Pacific Island countries and territories.
- Fluent in written and spoken English.

**11. Budget and Payment Modalities**

The 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%
Upon completion of the field phase	20%
Upon submission of a draft final evaluation report of satisfactory quality	30%
Upon approval of the final evaluation report, the evaluation brief, and the PowerPoint presentation of the evaluation results	30%

In addition to the daily fees, if the travel will be feasible during the field phase, the evaluator 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:

Evaluation Phase	Number of days
Design phase	23.5
Field phase	40
Reporting phase	17.5
Dissemination and facilitation of use phase	7
<b>TOTAL (days)</b>	<b>88</b>

## 12. Bibliography and Resources

1. TA Project Document
2. TA Contractual Documents
3. TA Annual Reports
4. TA Steering Committee minutes and power point presentations
5. UNFPA Global Strategic Plan
6. Pacific Sub Regional Programme 6 document
7. Evaluability Assessment of UNFPA SRP6
8. PSRO AWP with DFAT funding
9. Regional IPs Annual Work Plans with TA funding
10. Country AWP with TA funding
11. Country Work Plan Progress Reports
12. SIS MyResults Annual Plans and Reports
13. UNFPA Website and social media pages
14. Evaluation Handbook
15. UNFPA Organigram
16. Knowledge Products funded under TA
17. Stories of change and other relevant communications materials
18. UN Pacific Strategy
19. Health facility Readiness and Service Availability Assessments
20. TA Results framework
21. TA Midterm Review
22. TA Mission Reports to 6 countries
23. TA Stakeholder List of Interviews
24. UNFPA full staff contact list
25. UNFPA Supplies Pacific Programme
26. COGNOS Reports
27. PICTs national development plans and strategies
28. AUA97 FACE Processing time

## 13. Annexes

<b>A</b>	Theory of change
<b>B</b>	Evaluation matrix template
<b>C</b>	Proposed outline of design report
<b>D</b>	Proposed outlines of TA evaluation report (draft and final version)

# Annex A

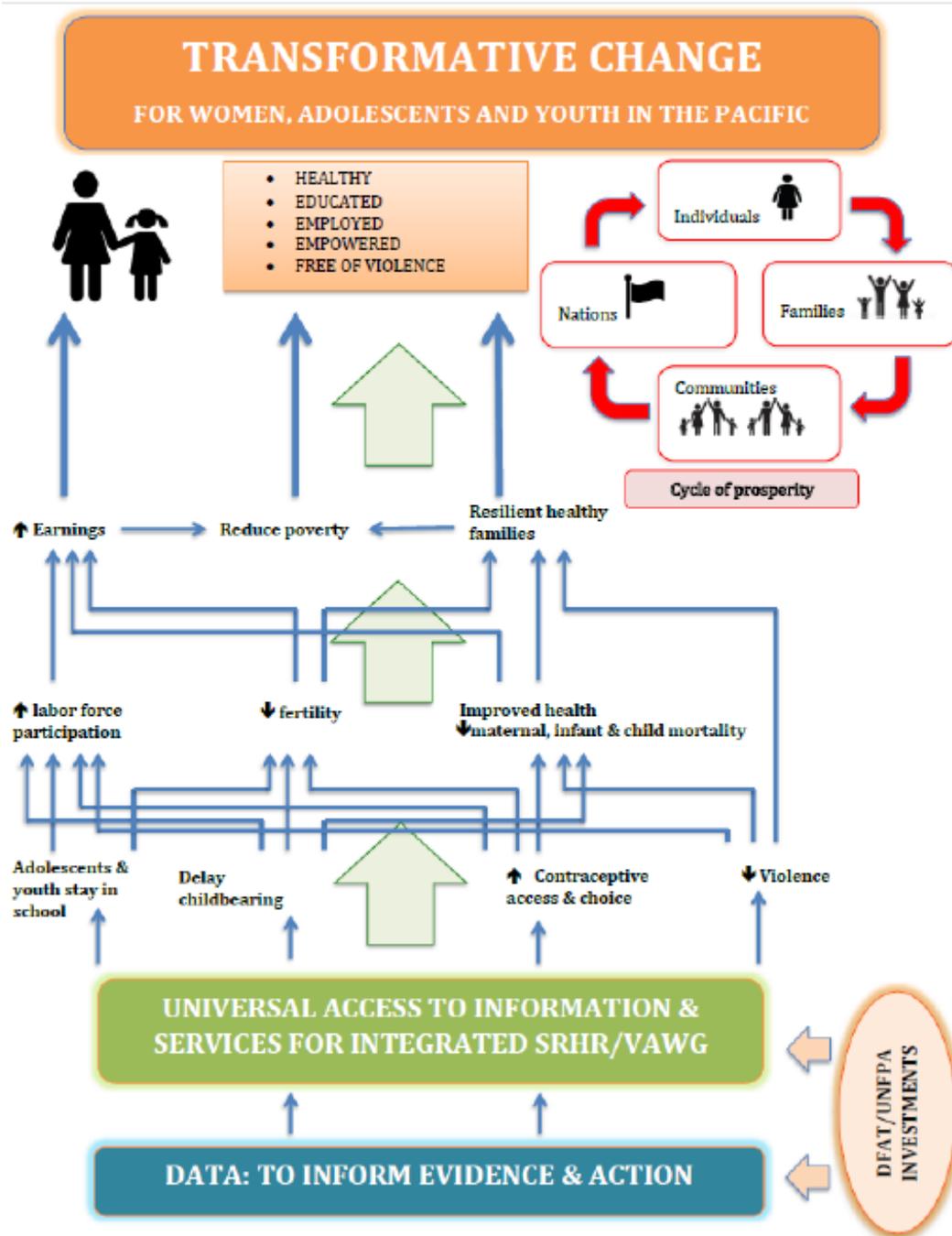
## Theory of Change for the Transformative Agenda for Women, Adolescents and Youth in the Pacific: Towards Zero Unmet Need for Family Planning 2018-2022



### Theory of Change for the Transformative Agenda for Women, Adolescents and Youth in the Pacific: Towards Zero Unmet Need for Family Planning 2018 - 2022



Figure 1. Transformative Change Through Investing in Integrated SRH Information and Services to Reduce Unmet Need for Family Planning/Contraception



## Annex B

### Evaluation matrix template

*The evaluation matrix delineates the scope of the evaluation by specifying for each evaluation question: the related assumptions; the indicators, the sources of information; and the methods and tools for data collection. The evaluation matrix must be included in the design report (as an annex). Throughout the field phase, the matrix will serve as a tool to ensure that the evaluation team has collected all the necessary and sufficient data and information to respond to the evaluation questions. The evaluation matrix must be included in the final evaluation report (as an annex).*

Evaluation Question 1: To what extent...			
Assumptions to be assessed	Indicators	Sources of Information	Methods and tools for data collection
Assumption 1 <i>(See example in the UNFPA Evaluation Handbook Tool 1, section 7.1.1, pp. 138-160)</i>			
<p><i>The evaluator/s must complete this box with all relevant data and information that were gathered during the field phase and that are strictly linked to the assumptions and corresponding indicators. The data and information may stem from: document review, interviews, group discussions, etc. Once completed, the evaluation matrix will become an annex of the final evaluation report, and the evaluation team leader and evaluation manager must ensure that all of the data and information entered:</i></p> <ul style="list-style-type: none"> <li><i>• Are directly related to the indicators listed above;</i></li> <li><i>• are drafted in a clear and understandable manner;</i></li> <li><i>• are triangulated; and</i></li> <li><i>• are referenced (the sources are clearly indicated).</i></li> </ul>			
Assumption 2 <i>(See example in Tool 1)</i>			
Assumption 3 <i>(See example in Tool 1)</i>			
Evaluation Question 2: To what extent...			
Assumptions to be assessed	Indicators	Sources of Information	Methods and tools for data collection
Assumption 1 <i>(See example in Tool 1)</i>			

Assumption 2 <i>(See example in Tool 1)</i>			
Assumption 3 <i>(See example in Tool 1)</i>			
<b>Evaluation Question 3: To what extent...</b>			
<b>Assumptions to be assessed</b>	<b>Indicators</b>	<b>Sources of Information</b>	<b>Methods and tools for data collection</b>
Assumption 1 <i>(See example in Tool 1)</i>			

## **Annex C – Proposed Outline of Design Report**

The Design/Inception Report of the evaluation should adopt the following below structure:

- *Cover page*
- *Table of contents*
- *Acronyms and abbreviations*
- *List of tables*
- *List of figures*
- *Key facts table*

### **1. Introduction**

- 1.1 Purpose and objectives of the TA evaluation
- 1.2 Scope of the evaluation (incl. thematic, geographic and temporal scope)
- 1.3 Purpose of the design report

### **2. Country context**

- 2.1 Development challenges and national strategies
- 2.2 The role of external assistance

### **3. United Nations/UNFPA response and programme strategies**

- 3.1 United Nations and UNFPA strategic response
- 3.2 UNFPA response through the country programme (incl. overview of country programme and its financial structure)

### **4. Evaluation approach and methodology**

- 4.1 Evaluation criteria and evaluation questions
- 4.2 Methods for data collection and analysis
- 4.3 Selection of the sample of stakeholders
- 4.4 Evaluability assessment, limitations and risk

### **5. Evaluation process**

- 5.1 Overview of evaluation phases
- 5.2 Team composition and distribution of tasks
- 5.3 Quality assurance
- 5.4 Resource requirements and logistical support
- 5.5 Work plan

### **6. Annexes**

- Annex 1: Terms of references
- Annex 2: Evaluation matrix
- Annex 3: Templates or tools for data collection
- Annex 4: List of UNFPA interventions
- Annex 5: Final stakeholder map
- Annex 6: List of persons consulted
- Annex 6: Bibliography/list of documents consulted
- Annex 7: Evaluation work plan
- Annex 8: Agenda for the field phase

## **Annex D – Proposed Outline of TA Programme Evaluation Report**

**Cover page**

<p>UNFPA TA evaluation: NAME OF THE COUNTRY</p> <p><i>Period covered by the evaluation</i></p> <p><b>FINAL EVALUATION REPORT</b></p> <p><i>Date</i></p>
---

**Second page**

Country map (half-page)

Table (half-page)

Evaluation Team	
Titles/position in the team	Names

**Third page**

Acknowledgement

**Fourth page**

Table of contents

**Fifth page**

Acronyms and abbreviations

List of tables

List of figures

**Sixth page**

Key facts table

Section	Title	Suggested length	
<b>EXECUTIVE SUMMARY</b>		5 pages max	
<b>CHAPTER 1: Introduction</b>			
1.1	Purpose and objectives of the TA evaluation	5-7 pages max	
1.2	Scope of the evaluation		
1.2.1	Thematic scope		
1.2.2	Geographic scope		
1.2.3	Temporal scope		
1.3	Methodology and process		
1.3.1	Evaluation criteria and evaluation questions		
1.3.2	Methods for data collection and analysis		
1.3.3	Selection of the sample of stakeholders		
1.3.4	Limitations		
1.3.5	Overview of the evaluation process		
<b>CHAPTER 2: Country Context</b>			
2.1	Development challenges and national strategies		5-6 pages max
2.2	The role of external assistance		
<b>CHAPTER 3: United Nations/UNFPA response and programme strategies</b>			
3.1	United Nations and UNFPA strategic response	5-7 pages max	
3.2	UNFPA response through the country programme		
3.2.1	Brief description of UNFPA previous cycle strategy, goals and achievements		
3.2.2	Current UNFPA country programme		

3.2.3	The financial structure of the UNFPA country programme	
<b>CHAPTER 4: Findings</b>		
4.1	Answer to evaluation question 1	25-35 pages max
4.2	Answer to evaluation question 2	
4.3	Answer to evaluation question 3	
4.4	Answer to evaluation question X	
<b>CHAPTER 5: Conclusions</b>		
5.1	Strategic level	6 pages max
5.2	Programmatic level	
<b>CHAPTER 6: Recommendations</b>		
6.1	Strategic level	4-5 pages max
6.2	Programmatic level	
(total number of pages)		55-70 pages

#### ANNEXES

Annex 1: Terms of reference

Annex 2: List of persons/institutions met

Annex 3: List of documents consulted

Annex 4: The evaluation matrix

Annex 5: Data collection tools