**Terms of reference for the evaluation of**

**Albania UNFPA Country Programme**

1. **INTRODUCTION**

The United Nations Population Fund (UNFPA) is the lead United Nations sexual and reproductive health agency for ensuring rights and choices for all. The strategic goal of UNFPA globally is to achieve three transformative results by 2030: ending unmet need for family planning, ending preventable maternal deaths, and ending gender-based violence and harmful practices. In pursuing its goal, UNFPA has been guided by the International Conference on Population and Development (ICPD) Programme of Action (1994), Millennium Development Goals (2000) and the 2030 Agenda for Sustainable Development (2015).

UNFPA Albania effectively collaborates with the Government of Albania, line ministries (Ministry of Europe and Foreign Affairs, Ministry of Health and Social Protection, Ministry of Education, Youth and Sports, INSTAT, Council of Ministers), civil society, development partners UN sister agencies, Human Rights Institutions and academia. During this programme cycle, 2017-2021, UNFPA is also partnering with Local Government Units at municipal level. Throughout all country programme cycles the Government of Albania has been the principal strategic partner of UNFPA.

The current CPD aims at achieving 2 Outcomes and 4 Outputs:

**Outcome 1: Sexual reproductive health services**

**Output 1**: Strengthened health system to provide equal access to quality integrated sexual and reproductive health services at national and municipal levels and in humanitarian settings.

**Output 2**: Strengthened engagement and partnerships between government and non-government institutions to promote reproductive rights and empowerment of women, and reduce inequalities in sexual and reproductive health.

**Outcome 2: Adolescents and youth**

**Output 1:** Rights and needs of adolescents and youth are fully addressed in laws, policies and programmes, including comprehensive sexuality education at national and subnational levels and in humanitarian settings.

**Output 2:** Strengthened multi sectoral response for the prevention and management of gender based violence and harmful practices, with a focus on adolescents and youth, including in humanitarian settings.

As the current programme cycle is approaching completion, the UNFPA Country Office in Albania, in collaboration with the UNFPA Regional Office for Eastern Europe and Central Asia and UNFPA Evaluation Office, is planning to conduct an independent evaluation of the fourth UNFPA Country Programme for Albania (2017-2021) as part of the Country Office evaluation plan and in accordance with the UNFPA evaluation policy (DP/FPA/2013/5).

The UNFPA country programme evaluation (CPE) will provide an independent assessment of relevance, performance and sustainability of UNFPA support provided to Albania during 2017-2021, as well as an analysis of various facilitating and constraining factors influencing programme delivery. The overall objective of the evaluation is to assess the extent to which the country programme is achieving intended results and use the findings for the purposes of further programme design and interventions. The primary users of this evaluation are the decision-makers within the UNFPA country offices and organization as a whole, government counterparts in the country, the UNFPA Executive Board, and other development partners. The UNFPA Regional Office for Eastern Europe and Central Asia and UNFPA Headquarters divisions, branches and offices will also use the evaluation as an objective basis for programme performance review and decision-making.

The evaluation will be managed by the steering committee consisting of the country office evaluation manager with guidance and support from the UNFPA Regional Advisor on Monitoring and Evaluation, and in consultations with the Evaluation Reference Group. A team of competitively selected independent evaluators will conduct the evaluation and prepare the evaluation report.

1. **CONTEXT**

**B1. Country Profile**

1. Albania is an upper middle-income country that has undergone political, economic and social changes over the past 25 years and still faces many challenges to fulfilling its aspirations for accession to the European Union. New reforms have been introduced to improve local government functions and service delivery. Gross domestic product (GDP) is $4.619 with significant regional disparities. Spending on health care is about 2.6 per cent of GDP and 10 per cent of national budget. The percentage of the health budget allocated to sexual and reproductive, health, including

mother and child health and family planning, is estimated at 15 per cent.

2. Owing to the combined effect of increasing life expectancy, reduced fertility and emigration of young adults, the population share of persons aged 65 and over increased from 5 to 11 per cent from 1989 to 2011. The number of elderly almost doubled in this period to 318,000 persons, and is projected to reach 591,000 in 2031, accounting for 33 per cent of the total population. The UNFPA survey on sex imbalances at birth (2012) shows a sex ratio at birth of 111.7 while the Census 2011 and the annual Report “Men and Women” 2018 shows a ratio of 109. This suggests that sex-selective abortions continue to be performed.

3. Disparities and inequalities among some groups of the population persist in Albania, notably between urban, rural and different ethnic groups. The 2011 census identified 8,300 Roma and 3,368 Egyptians. Other studies report figures from 18,276 to 120,000 Roma and over 200,000 Egyptians (Albanian Action Plan for the Integration of Roma and Egyptian, 2016-2020), revealing their significantly worse health situation compared to the rest of the population (European Commission, Roma Health Report, April 2014).

4. The health system faces challenges related to: ensuring universal access to high quality health-care services; integrating services at the primary health care level; generating data for planning and reporting; monitoring quality of care; strengthening skills of health personnel to implement health programmes and clinical guidelines and protocols at every level; out-of-pocket expenditures (55 per cent of total health expenditures). These factors have led to fragmented health care and increased inequalities in accessing quality health services, especially at the primary health care level. In addition, confidence in health institutions has decreased significantly as per the latest opinion polls, rating satisfaction less than 50 per cent. Selected key facts in relation to family planning in Albania are summarized below:

• Overall population of Albania: about 2,8 million inhabitants (INSTAT, 2018)

• Women of reproductive age (15-49 years): 693,111 (INSTAT, 2016)

• Fertility rate: 1.54 (INSTAT, 2017); 1.8 (ADHS 2017-18)

• Abortion rate: 8.0 abortions per 1000 women of reproductive age (15-49 years)

 [IPH, 2018]

• Ratio abortions/births: 191.2 abortions per 1000 live births (IPH, 2018)

• Contraceptive prevalence rate: 4% (ADHS 2017-18)

• Infant mortality rate: 8.9 deaths per 1000 live births (INSTAT, 2018)

• Child (0-5 years) mortality rate: 10.8 deaths per 1000 live births (INSTAT, 2018)

• Maternal mortality ratio: 9.7 deaths per 100,000 women (INSTAT, 2017)

5. Cervical cancer in Albania is a public health problem. It is, with uterus cancer, the second most frequent cancer among women of reproductive age (15-49 years), below only to breast cancer, mainly due to its characteristic increase of risk at middle age. The sexual lifestyle trends among Albanians point to a potential increase of this cancer in the absence of preventative strategies. According to country official data, the average mortality rate of cervical cancer for the period 2013-2017 in Albania is 2.9/100,000 and the incidence rate for the year 2015 (the first year, the national cancer registry has started to operate) is 9.2/100,000 (National NCD report). The mortality/incidence ratio for cervical cancer in Albania is 32%. Its standardized incidence is lower compared to South East European countries but much higher than Eastern Mediterranean countries.

6. The adolescent birth rate in the general population is less than 30 per 1,000 persons but much higher for Roma. According to the 2011 census 2011, within the Roma population, 19 per cent marry before the age of 17. At the age of 18, over 43 per cent of Roma women have already given birth.

7. Albania has a low HIV prevalence rate, estimated at 0.03 per cent. However, it is difficult to determine the extent and dynamics of HIV and AIDS in Albania, due to the low rate of voluntary testing, reported to be the lowest in the WHO Europe region. Syndromic surveillance shows that the number of cases of sexually transmitted infections has increased from 802 in 2010 to an average of 1,330 cases per year between 2011 and 2014.

8. Access to all levels of education has shown a significant increase, with primary and lower secondary school enrolment nearly universal. Still, severe disparities in access to education among vulnerable groups – including low-income families, Roma, Egyptian, street children and children with disabilities – continue to exist. On average, Roma and Egyptians complete five to six years of education (Roma and Egyptian Social Economic Survey, 2011), compared to the national average of 10 years (2011 census). The pre-university education reform has created an enabling environment for scaling up comprehensive life-skills, health and sexuality education, and for improving the quality of education.

9. More than half of Albanian women (aged 15-49 years) have experienced at least one form of domestic violence in their lifetime. The National Survey on Violence against Women and Girls in Albania, 2018, which captured age group 18-74, showed that 1 in 2 or 52.9% of these women have experienced at least 1 form of the five types of violence (intimate partner violence, dating violence non intimate partner violence, sexual harassment, stalking) that the Survey analysed.

Women, girls and other vulnerable and marginalized groups – such as out-of-school young people, Roma, Egyptians and the elderly – need protection and social care systems which ensure that their rights and potential are fulfilled throughout their lifetime.

**B2. UNFPA Country Programme**

The 4th UNFPA Country Programme for Albania 2017-2021 (DP/FPA/CPD/ALB/416-11538 3/7) has been approved by the UNDP/UNFPA/UNOPS Executive Board on the Second regular session 2016, during 6 to 9 September 2016, New York.

The UNFPA financial commitment over 5 years towards the programme was approved at $ $3.5 million: $2.5 million from regular resources and $1 million through co-financing modalities and/or other resources, including regular resources.

The Government and UNFPA developed the fourth country programme, for 2017-2021, through a participatory approach in consultation with national stakeholders, including particularly civil society. The country programme is aligned with national priorities (the National Strategy for Development and Integration), the Government of Albania and United Nations Programme of Cooperation 2017-2021, the 2030 Agenda for Sustainable Development and the national aspiration for European integration. Based on the collective United Nations strategic planning process and corporate UNFPA theory of change analysis, the country programme focuses its strategy on: advocacy for policy implementation; knowledge management for evidence-based policy; and strengthening civil society and communities to hold duty bearers accountable. UNFPA will implement the programme through national ownership, with civil society, United Nations organizations and development partners, in order to reduce inequalities in sexual and reproductive health and rights, including for young people and focused on the most vulnerable and marginalized. The programme will harness the momentum of national reforms, including increased

decentralisation, and work through national coordination mechanisms. The programme contributes to national work on a 2030 Agenda implementation that is universal, inclusive, human-rights based, integrated and anchored in the principles of equality. Key programming strategies include providing policy dialogue and advice to address the needs of the most marginalized groups at the national and subregional levels, and generating evidence for policy development, implementation, and monitoring and evaluation of policy impact.

1. **OBJECTIVES AND SCOPE OF THE EVALUATION**

**The overall objectives of evaluation:** (i) an enhanced accountability of UNFPA and its country office for the relevance and performance of its country programme and (ii) a broadened evidence-base for the design of the next programming cycle.

**The specific objectives:**

* To provide an independent assessment of the progress of the country programme towards the expected outputs and outcomes set forth in the results framework of the country programme;
* To provide an assessment of country office (CO) positioning within the developing community and national partners, in view of its ability to respond to national priority needs while adding value to the country development results.
* To draw key lessons from the past and current cooperation and provide a set of clear, specific and action-oriented forward-looking strategic recommendations in light of agenda 2030 for the next programming cycle.

The evaluation is expected to be completed by September 2020 and carried out in accordance with the Evaluation Implementation Plan (ref: Annex X).

**Scope of evaluation:**

The evaluation will cover Albania and the following four programmatic areas: reproductive health, adolescents and youth, gender equality and population and development.

The evaluation (including country studies) will cover all activities planned and/or implemented during the period **2017-2019. Cross-cutting areas will include**: partnership, resource mobilization and communication.

The evaluation should analyze the achievements of UNFPA against expected results at the output and outcome levels, its compliance with the UNFPA Strategic Plans for 2014-2017 and 2018--2021, the UN GoA Programme of Cooperation for Sustainable Development and national development priorities and needs.

1. **EVALUATION CRITERIA AND EVALUATION QUESTIONS**

The following evaluation questions addressing the evaluation criteria: relevance, effectiveness, efficiency, and sustainability as well as coordination with the UNCT, and added value will be used for the evaluation.

*Relevance:*

EQ1.To what extent is the UNFPA support (i) adapted to the needs of the population with emphasis on the most vulnerable population (ii) and in line with the priorities set by international and national policy frameworks (iii) aligned with the UN GoA PoCSD (iv planned interventions adequately reflect the goals stated in the UNFPA Strategic Plan?

*Effectiveness:*

* EQ 2To what extent have the intended programme outputs been achieved?
* EQ 3.To what extent did the outputs contribute to the achievement of the planned outcomes (i. increased utilization of integrated SRH Services by those furthest behind, ii. increased the access of young people to quality SRH services and sexuality education, iii. mainstreaming of provisions to advance gender equality, and iv. developing of evidence-based national population policies and what was the degree of achievement of the outcomes?
* EQ4.To what extent has UNFPA policy advocacy and capacity building support helped to ensure that sexual and reproductive health (including Family Planning), and the associated concerns for the needs of young people, gender equality, and relevant population dynamics are appropriately integrated into national development instruments and sector policy frameworks in the programme country?

*Efficiency:*

* EQ5 To what extent has UNFPA made good use of its human, financial and technical resources, and has used an appropriate combination of tools and approaches to pursue the achievement of the Results defined in the UNFPA country programme?

*Sustainability:*

* EQ6.To what extent has UNFPA been able to support its partners and the beneficiaries in developing capacities and establishing mechanisms to ensure ownership and the durability of effects?
* EQ7 To what extent have the partnerships established with ministries, agencies and other representatives of the partner government allowed the country office to make use of the comparative strengths of UNFPA, while, at the same time, safeguarding and promoting the national ownership of supported interventions, programmes and policies?
* EQ8To what extent have some of the results of pilot projects being used to scale up interventions and/or bring relevant evidence to policy-makers to adopt such approaches?

*UNFPA Country programme coordination with UNCT:*

* EQ 9To what extent has the UNFPA country office contributed to the functioning and consolidation of UNCT coordination mechanisms?

*UNFPA Country programme added value:*

* EQ10.What is the main UNFPA added value in the country context as perceived by UNCT and national stakeholders?
1. **METHODOLOGY AND APPROACH**

The evaluation will be based on a participatory design that is expected to include quantitative and qualitative data collection methods.

The proposed methodology by the evaluation team will elaborate in detail on the relevant data sources, sampling size and techniques, data collection instruments and procedures, ethical considerations, as well as the strategies necessary for mitigating the major limitations of the proposed design, if any.

***Data Collection***

The evaluation will use a multiple-method approach to data collection, including desk review, group and individual interviews, focus groups and field visits to programme sites as appropriate. The data will be carried out through a variety of techniques ranging from direct observation to informal and semi-structured interviews and focus/reference groups discussions.

The evaluators will be required to take into account **ethical considerations when collecting information**.

***Data validation***

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 CO programme managers and the Evaluation Reference Group.

***Data Analysis***

The evaluation team will ensure the following in analyzing data, formulating finding and reaching to conclusions.

1. Are the findings substantiated by evidence?
2. Is the basis for interpretations carefully described?
3. Is the analysis presented against the evaluation questions?
4. Is the analysis transparent about the sources and quality of data?
5. Are cause and effect links between an intervention and its end results explained and any unintended outcomes highlighted?
6. Does the analysis show different outcomes for different target groups, as relevant?
7. Is the analysis presented against contextual factors?
8. Does the analysis elaborate on **cross-cutting issues such as equity and vulnerability, gender equality and human rights?**

***Stakeholders’ participation***

The evaluation will adopt an inclusive approach, involving a broad range of partners and stakeholders. **The evaluation manager will perform a stakeholders mapping** for the country 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). These stakeholders may include representatives from the government, civil-society organizations, the private-sector, UN organizations, other multilateral organizations, bilateral donors, and most importantly, the beneficiaries of the programme. The stakeholder mapping must be concluded before the design phase.

An **Evaluation Reference Group (ERG)** will be established by the UNFPA Country Office comprising key programme stakeholders (national governmental and non-governmental counterparts, Evaluation Manager from the UNFPA Country Office). The ERG will review and provide inputs to the country case study, provide feedback to the evaluation design report, facilitate access of evaluators to information sources, and provide comments on the main deliverables of the evaluation, in particular the country case studies at the draft stage.

1. **EVALUATION PROCESS**

The evaluation will unfold in five phases, each of them including several steps.

1. ***Preparation phase:***

This phase, managed by the UNFPA Offices, will include:

* Drafting of programme evaluation (CPE) terms of reference (ToR);
* Establishing an Evaluation Reference Group (ERG);
* Receiving approval of the CPE ToR from the UNFPA Regional Office;
* Selecting potential evaluators ;
* Receiving pre-qualification of potential evaluators from the UNFPA Regional Office;
* Recruiting evaluators and establishing an Evaluation Team chaired by the Evaluation Team Leader;
* Preparing the initial set of documentation for the evaluation, including the list of projects and stakeholder map.

The preparation phase may include a short scoping mission to the UNFPA Country Office in Tirana, Albania by the Evaluation Team Leader to gain better understanding of the development context, UNFPA programme and partners, refine the evaluation scope, identify potential sites for field visits etc.

1. ***Evaluation design phase***

This phase will include:

* a **desk review** of all relevant documents available at UNFPA HQ and CO levels regarding the country programme for the period being examined;
* a **stakeholder mapping** – The evaluation manager will prepare a mapping of stakeholders relevant to the evaluation. The mapping exercise will include state and civil-society stakeholders and will indicate the relationships between different sets of stakeholders;
* an **analysis 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**;
* 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 leader will produce **a design report** that will outline the detailed evaluation methodology, criteria, timeframes and the structure of the final report.

The design report must include the evaluation matrix, stakeholders map, final evaluation questions and indicators, evaluation methods to be used, information sources, approach to and tools for data collection and analysis, calendar work plan, including selection of field sites to be visited – prepared in accordance with the UNFPA Handbook “How to Design and Conduct a Country Programme Evaluation”. The design report should also present the reconstructed programme intervention cause-and-effect logic linking actual needs, inputs, activities, outputs and outcomes of the programme. The design report needs to be reviewed, validated and approved by the **UNFPA Evaluation Steering Committee** before the evaluation field phase commences.

1. ***Field phase***

After the design phase, the evaluation team will undertake a two/three-week in-country collection and analysis of the data required in order to answer the evaluation questions final list consolidated at the design phase. At the end of the field phase, the country evaluation team will provide the COs 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.

1. ***Synthesis and dissemination phase***

During this phase, the Country Evaluation Team will continue the analytical work initiated during the field phase and prepare **country case studies**, taking into account comments made by the Evaluation Steering Committee and Evaluation Reference Group at the debriefing meeting and the Evaluation Team Leader.

1. ***Dissemination and Follow-Up***

This **first draft country report** will be submitted to the Evaluation Reference Group for comments (in writing). Comments from the Country Evaluation Reference Group and evaluation managers will be consolidated. The draft country report will form the basis for a dissemination seminar/s, which will be attended by the CO as well as all the key programme stakeholders in the Evaluation Reference Group (including key national counterparts). The final report will be drafted by the Team Leader based on the comments received. This first draft evaluation report will be shared with the Evaluation Steering Committee for the feedback and comments. The final Evaluation report will be shared with stakeholders in the country, in a format to be agreed upon.

1. **Expected outputs/ deliverables**

The evaluation team will produce the following deliverables:

* + evaluation design report including (as a minimum): a) a stakeholder map; 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. The design report should have a maximum of 70 pages;
	+ a first draft evaluation report and first draft country study accompanied by a debriefing PowerPoint presentation synthesizing the main preliminary findings, conclusions and recommendations of the evaluation, to be presented and discussed with the Evaluation Steering Committee during the (online or in person) debriefing meeting foreseen at the end of the field phase;
	+ a second draft evaluation report and country case study (followed by a second draft, taking into account potential comments from the Evaluation Steering Committee) and Evaluation Reference Group. The evaluation report should have a maximum of 50 pages (plus up to 70 pages for each Case Study, and plus annexes); a PowerPoint presentation of the results of the evaluation for the dissemination seminar to be held in each office and led by the national evaluators;
	+ a final evaluation report including country case study, based on comments expressed during the dissemination seminars.
	+ An evaluation brief (maximum 4 pages) summarizing the evaluation report.

All deliverables will be written in English. All reports should follow structure and detailed outlines provided in the UNFPA Handbook: How to design and conduct a country programme evaluation at UNFPA. [www.unfpa.org/EvaluationHandbook](http://www.unfpa.org/EvaluationHandbook) The final report will be translated into Albanian.

**Work plan/ Indicative timeframe**

|  |  |
| --- | --- |
| **Phases/deliverables** | **Dates** |
| Preparation phase* Drafting and approval of the ToR
* Recruitment of experts (International and National Experts)
 | December 2019 |
| Evaluation design phase:* Submission of the design report
 | First 2 weeks in March 2020 |
| Field phase:* Data Collection
* Debriefing CO
 | April- May 2020 |
| Synthesis and dissemination phase:* 1st draft Evaluation Report
* 2nd final draft Evaluation Report
* Final Evaluation Report
* Evaluation brief
 | June- September 2020 |

1. **COMPOSITION OF THE EVALUATION TEAM**

An Evaluation Team Leader and One other Evaluator who are external to UNFPA will carry out the evaluation. At least one member in the evaluation team should be female. The evaluation team members will combine knowledge and experience in evaluation with technical knowledge and expertise in areas related to the UNFPA development and humanitarian programme.

**The evaluation team will consist of:**

**A Team Leader** with overall responsibility for the design and implementation of the CPE. S/he is responsible for the production and timely submission of all expected deliverables of the CPE including design report, draft and final evaluation reports. She/he will lead and coordinate the work of the Evaluation Team and ensure quality of the evaluation products. The Evaluation Team Leader will be responsible for covering at least one programmatic area of the CPE. The Evaluation Team Leader, an international expert,should have the following qualifications:

The Evaluation Team Leader should have the following qualifications:

* Advanced degree in social sciences, political sciences, economics or related fields;
* Minimum 7 years of experience of complex evaluations in the field of development aid for UN agencies and/or other international organizations in the position of lead evaluator,
* Specialization in one of the programmatic areas covered by the evaluation (reproductive health and rights, gender equality, population and development, adolescent and youth policies)
* Demonstrated ability and knowledge to collect and analyze qualitative and quantitative data;
* Good knowledge and experience of programme evaluation including in the humanitarian settings will be strong assets;
* Familiarity with UNFPA or UN programming;
* Excellent writing and communication skills;
* Excellent command of both spoken and written English is required.

**Evaluator** (evaluation team member), is a **national expert**, who will each provide expertise in one programmatic area of the evaluation The evaluator will take part in the data collection and analysis work, and will provide substantive inputs into the evaluation processes through participation at methodology development, meetings, interviews, analysis of documents, briefs, comments, as advised and led by the Evaluation Team Leader. The modality and participation of evaluator in the CPE process, including participation in interviews/meetings, provision of technical inputs and reviews of the design report, drafting parts of the evaluation reports, will be agreed by the Evaluation Team Leader and done under her/his supervision and guidance. The necessary qualifications of the evaluator will include:

* 1. + Advanced degree in public health, with specific focus and understanding of Sexual and Reproductive Health;
		+ At least 5 years of experience in conducting evaluations as a member of evaluation team or individual evaluator for UN agencies and/or other international organizations;
		+ Demonstrated ability and knowledge to collect qualitative and quantitative data;
		+ Knowledge of demographic, political, social and economic conditions in the area in which the evaluation will be conducted;
		+ Good knowledge of the national development context and be fluent in Albanian and English
		+ Familiarity with UNFPA or UN programming;
		+ Excellent writing and communication skills;

1. **Remuneration and duration of contract**

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

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Evaluation Phase** | **Team Leader** | **Evaluator 1** | **Evaluator 2** |  |
| Preparation (scoping mission) | 15 | 15 | 15 |  |
| Design |  5 | 5 | 5 |  |
| Fieldworks | 14  | 14 | 14 |  |
| Reporting, including: | **20**  | **15** | **15** |  |
| Contribution to first draft report |  |  |  |  |
| Consolidation and finalization of the final report |  |  |  |  |
| Preparation and facilitation of stakeholder workshop |  |  |  |  |
| **Total** | **54** | **49** | **49** |  |

The exact number of workdays and workload distribution will be proposed by the Evaluation Team in the evaluation design report, subject to approval by UNFPA.

Payment of the evaluation consultancy fees will be made in two tranches against the following milestones:

* 40% Upon acceptance of the Design Report
* 60% Upon acceptance of the final evaluation report by UNFPA

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 consultant fees.

1. **Management and conduct of the evaluation**

The evaluation will be guided by these terms of reference approved by the UNFPA Regional Office on behalf of UNFPA Evaluation Office, and the UNFPA Handbook “How to Design and Conduct a Country Programme Evaluation”. The evaluation and country case studies will be conducted by an independent Evaluation Team whose members are pre-qualified by the UNFPA Regional Office, but will be managed by the UNFPA Country Office.

**The Evaluation Steering Group:**

Evaluation Steering Committee (ESC) will have overall responsibility for management and coordination of all components of the evaluation including evaluation design, implementation and dissemination of the evaluation results. The Evaluation Steering Committee will have overall supervision on the Evaluation Team (including International Team Leader and National Team) and evaluation processes. ESC will be comprised of the UNFPA Country Director, Assistant Representative, M&E Focal Point, RO M&E Advisor.

The role of the ESC will include the following tasks, but not limited to:

* Develop and agree ToR for the evaluation along with ToR for Reference Group(s) and ToRs for all Evaluation Team members (International Team Leader, National Evaluators and National Experts);
* Act as first point of contact to the Evaluation Team;
* Develop initial list of stakeholders for interviews and propose documentation for review;
* Review and approve draft design report;
* Review and approve draft evaluation report (including preliminary findings, conclusions and recommendations) and Case Studies;
* Liaise with the Evaluation Reference Groups for any issues related to the evaluation;
* Provide management response to the final evaluation report;
* Review and approve the final evaluation report and Case Studies;
* Disseminate the final evaluation report to relevant stakeholders.

**The Evaluation Manager will:**

* Provide support to the whole evaluation exercise, provide feedback for quality assurance during the preparation of the design report, field work, case studies, dissemination seminar, and the final report;
* Conduct stakeholders mapping;
* Provide evaluation team with available internal and external data relevant to the country
* Provide national experts with the relevant data
* Facilitate the establishment of the Reference Group at country level
* Be supported by the RO M&E adviser

The reference group composed of representatives from the UNFPA country office, the national counterpart, the UNFPA regional office as well as from UNFPA relevant services in headquarters.

**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, conclusions and recommendations from the evaluation into future programme design and implementation.

**BIBLIOGRAPHY AND RESOURCES**

1. UNFPA Country Programme Document for Albania 2017-2021
2. United Nations – GoA Programme of Cooperation for Sustainable Development
3. UNFPA Strategic Plan 2018-2021
4. Handbook [“How to Design and Conduct a Country Programme Evaluation at UNFPA”](http://www.unfpa.org/admin-resource/how-design-and-conduct-country-programme-evaluation-unfpa) (http://www.unfpa.org/admin-resource/how-design-and-conduct-country-programme-evaluation-unfpa)
5. UNFPA [Evaluation Webpage](http://www.unfpa.org/evaluation) (http://www.unfpa.org/evaluation)
6. National Voluntary Report, SDGs
7. MAPS Mission Report
8. ADHS 2
9. 3rd National Survey on Violence against Women and Girls in Albania
10. UNDP Human Development Reports for Kazakhstan
11. Health Strategy,
12. Social Protection and Care Strategy
13. National Youth Action Plan
14. UN PoCSD Annual Reports
15. Any other

Annexes:

Annex 1: Ethical Code of Conduct for UNEG/UNFPA Evaluations

# Annex 2: Evaluation Quality Assurance and Assessment: Tools and Guidance (<https://www.unfpa.org/admin-resource/evaluation-quality-assurance-and-assessment-tools-and-guidance>)

# Annex 3: How to Design and Conduct a Country Programme Evaluation at UNFPA (<https://www.unfpa.org/admin-resource/how-design-and-conduct-country-programme-evaluation-unfpa>)

# Annex 4: Equity-focused and gender-responsive lens evaluation (<https://www.evalpartners.org/evalgender/no-one-left-behind#guidance>)

Annex 5: Country Programme Theory of Change

Annex 6: Evaluation Implementation Plan

**Annex 1: Ethical Code of Conduct for UNEG/UNFPA Evaluations**

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

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

For details on the ethics and independence in evaluation, please see UNEG Ethical Guidelines and Norms for Evaluation in the UN System [http://www.unevaluation.org/search/index.jsp?q=UNEG+Ethical+Guidelines](http://www.unevaluation.org/search/index.jsp?q=UNEG%2BEthical%2BGuidelines) <http://www.unevaluation.org/papersandpubs/documentdetail.jsp?doc_id=21>

**[Please date, sign and write “Read and approved”]**

**Annex 5: Country Programme 2017-2021 Theory of change**