

# Formative evaluation of the organizational resilience of UNFPA in light of its response to the COVID-19 pandemic



**Volume 2**

**UNFPA Independent Evaluation Office**

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## Contents

Annex 1: Terms of Reference .....	3
Annex 2: Evaluation Management .....	12
Annex 3: Methodology .....	13
Annex 4: Theory of Change .....	37
Annex 5: Evaluation Matrix .....	40
Annex 6: Additional Analyses .....	46
Annex 6a: Analysis of 2017 UNFPA Business Continuity Plans (BCPs) .....	46
Annex 6b: UNFPA participation in the UN COVID-19 MPTF .....	48
Annex 6c: Analysis of COVID-19-relevant programme expenses, 2020-2021 .....	50
Annex 6d: COVID-19 in Country Programme Evaluations 2020-2022 .....	56
Annex 6e: COVID-19 in Global Evaluations/Assessments 2020-2022 .....	57
Annex 6f: Organizational Resilience Management System Key Performance Indicators .....	58
Annex 6g: Joint Inspection Unit Recommendations on Business continuity management in United Nations system organizations .....	59
Annex 7: List of Evaluation Key Informants .....	60
Annex 8: Bibliography .....	68
Annex 8a: Desk Review Documentation .....	68
Annex 8b: UNFPA Global and Regional COVID-19-Related Publications .....	72
Annex 8c: UNFPA Country Programme Evaluations Included in Systematic Review .....	74
Annex 8d: Selected UNFPA Climate Change Resources .....	75

## Annex 1: Terms of Reference

### Formative evaluation of the organizational resilience of UNFPA in light of its response to the COVID-19 pandemic

#### Terms of reference (Draft)

#### I. Introduction

1. Evaluation at the United Nations Population Fund (UNFPA) serves three main purposes: (a) demonstrate accountability to stakeholders on performance in achieving development results and on invested resources; (b) support evidence-based decision-making; (c) contribute key lessons learned to the existing knowledge base on how to accelerate implementation of the Programme of Action of the 1994 International Conference on Population and Development (ICPD).
2. The Evaluation Office will conduct a **formative evaluation of the organizational resilience of UNFPA in light of its response to the COVID-19 pandemic**, as per the UNFPA quadrennial budgeted evaluation plan 2022-2025<sup>1</sup>.
3. The primary intended users of the evaluation are: (i) UNFPA senior management; (ii) the UNFPA Policy and Strategy Division; (iii) the UNFPA Technical Division; (iv) the UNFPA Humanitarian Office; (v) UNFPA business units at headquarters; (vi) UNFPA Regional and Country Offices. The results of the evaluation should also be of interest to a wider group of stakeholders, such as UNFPA Executive Board members and other UN organizations.
4. The preparation of these terms of reference was based on a document review and initial consultations with key stakeholders within UNFPA. The evaluation team will conduct the evaluation in conformity with the terms of reference, under the management of the UNFPA Evaluation Office and guidance from the evaluation reference group.

#### II. Context

##### a. The COVID-19 pandemic

5. Since the World Health Organization (WHO) declared the COVID-19 outbreak to be a pandemic, on 11 March 2020<sup>2</sup>, the virus has spread to almost every country in the world, triggering an unprecedented global crisis. As of September 26<sup>th</sup>, 2022, WHO has reported a total of 612,236,677 confirmed cases of COVID-19, including 6,514,397 deaths<sup>3</sup>.
6. In addition to its direct health impacts, the COVID-19 pandemic has rapidly evolved into a global multidimensional crisis, affecting societies, economies and the environment around the world. COVID-19 has disproportionately hit low and middle-income countries, with many countries facing major setbacks to progress toward the Sustainable Development Goals. The pandemic has also

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<sup>1</sup> Following internal discussions on the scoping of the evaluation, the initial scope of the evaluation was enlarged to an assessment of the ability of UNFPA to adapt and to respond to global crises (organizational resilience).

<sup>2</sup> [WHO Director-General's press conference - 11 March 2020](#)

<sup>3</sup> [WHO Coronavirus \(COVID-19\) Dashboard](#)

Formative evaluation of the organizational resilience of UNFPA in light of its response to the COVID-19 pandemic – Volume 2

exacerbated existing inequalities, further adding to the vulnerabilities of marginalized and excluded populations to the socioeconomic impact of the virus.

### b. The UNFPA response to COVID-19

7. The COVID-19 pandemic exacted (and continues to exact) a particular toll on women and girls, by disrupting access to life-saving sexual and reproductive health services, deepening existing gender inequalities and increasing gender-based violence. In this context, progress toward achieving the three transformative results committed to by UNFPA is at risk.
8. In order to address the multiple challenges raised by the COVID-19 pandemic, UNFPA has developed a **Global Response Plan**<sup>4</sup>, meant as a “whole of organization approach” through the integration of its humanitarian and development assets and expertise.
9. Published in June 2020, the UNFPA Global Response Plan is structured around three strategic priorities:
  - **Strategic priority 1:** Continuity of sexual and reproductive health services and interventions, including protection of the health workforce;
  - **Strategic priority 2:** Addressing gender-based violence and harmful practices;
  - **Strategic priority 3:** Ensuring the supply of modern contraceptives and reproductive health commodities.
10. Under these three strategic priorities, four accelerator interventions, which all integrate a gender lens, have been identified:
  - **Leaving no one behind:** analysis of who is marginalized and at risk; focusing interventions on and advocating for those most at risk from COVID-19, with special attention to those left furthest behind;
  - **Data:** assuring data continuity, population mapping and assessing impact and response measures;
  - **Risk communication and community engagement:** support to risk communication and community engagement in primary prevention and stigma reduction; ensuring women and girls’ agency, decision-making and voice with a constant focus on their safety, dignity and rights;
  - **Youth engagement:** engaging young people and involving them effectively in innovative approaches to risk communication and community engagement efforts.

### III. Purpose, objectives and scope

11. The evaluation has a dual purpose:
  - To account for the **results** achieved by UNFPA in responding to the pandemic;
  - To draw lessons from the COVID-19 response with a view to **informing UNFPA’s preparedness and response to future global crisis** – this learning and forward-looking dimension explains the formative nature of the evaluation.

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<sup>4</sup> [Coronavirus Disease \(COVID-19\) Pandemic UNFPA Global Response Plan](#)

12. More specifically, the objectives of the evaluation are to:

- Assess the performance of UNFPA in responding to COVID-19;
- Analyse UNFPA's ability to work across the humanitarian-development-peace nexus during the pandemic;
- Analyse UNFPA's organisational capacity to anticipate, prepare for, respond and adapt to global crises (organizational resilience).

13. In addressing the above objectives, particular attention will be paid to cross-cutting issues such as **equity and vulnerability, disability inclusion, gender equality and human rights**.

14. The scope of the evaluation will cover all UNFPA strategies and programmes implemented within the COVID-19 context, including (but not limited to) interventions directly aiming at the response to COVID-19, both in development and humanitarian settings. The evaluation will cover all levels of the organization (global, regional and country-level), from March 2020 (i.e., when COVID-19 was officially declared to be a pandemic) to the end of the data collection phase.

#### IV. Evaluation questions

15. The evaluation will be based on the following five evaluation criteria: relevance, effectiveness, coherence, efficiency and sustainability.

16. The evaluation will seek to answer the following key questions:

- To what extent has UNFPA been responsive to COVID-19 related needs and priorities in pursuing the achievement of the three TRs? (**Relevance**)
- Which ways of working have supported successful adaptation as the pandemic evolved and needs and priorities changed? (**Relevance**)
- To what extent has UNFPA been able to ensure continuity of SRH services, address GBV and harmful practices and empower youth as part of the COVID-19 response and recovery efforts, including for vulnerable and marginalized groups? (**Effectiveness**)
- To what extent has UNFPA systematically incorporated and implemented data-driven, gender responsive and human-rights based interventions within the framework of its COVID-19 response and recovery efforts? (**Effectiveness**)
- To what extent has UNFPA contributed to synergies and complementarity (i) among COVID-19 responses within the UN system and (ii) across the humanitarian-development-peace nexus? (**Coherence**)
- To what extent have UNFPA systems, processes and procedures supported a timely and continuous response to the COVID-19 pandemic? (**Efficiency**)
- To what extent has the UNFPA response to COVID-19 contributed to strengthening (i) the organization's capacity to anticipate, prepare for, respond and adapt to future global crises and (ii) the national health systems and emergency preparedness strategies in UNFPA programme countries? (**Sustainability**).

17. The above list of key questions and areas for enquiry will be further refined by the evaluation team at inception stage, leading to a final list of a **maximum of ten evaluation questions**. Based on this

final list of questions, the evaluation team will prepare an evaluation matrix, linking evaluation questions with assumptions to be assessed, indicators, data sources and data collection tools.

## **V. Methodological approach**

18. The evaluation will follow a mixed-method approach, but mostly relying on qualitative sources of information which will be quantified as relevant. The evaluation will rely primarily on the following sources of information:

- Desk review of strategic and programmatic documents pertaining to (i) the UN collective response to COVID-19; (ii) the UNFPA response to COVID-19;
- Desk review of UNFPA centralized and decentralized evaluations conducted during the period under evaluation (from March 2020 to the end of the data collection phase)
- Operational and financial data (from ATLAS)
- Interviews with UNFPA key informants (at HQ, regional and country levels);
- Interviews with key representatives of United Nations entities;
- Five (5) country case studies.

## **VI. Evaluation process**

19. The evaluation will unfold in five phases and lead to the production of associated deliverables as follows.

### **1) Preparatory phase**

20. This phase will be led by the Evaluation Manager. It will include: (i) an initial documentation review; (ii) scoping interviews with UNFPA key informants (iii) the drafting of evaluation terms of reference; (iv) the selection and hiring of the evaluation team; (v) the constitution of an evaluation reference group.

### **2) Inception phase**

21. The evaluation team will conduct the inception phase, in consultation with the evaluation manager and the evaluation reference group. This phase includes:

- a document review of all relevant documents available at UNFPA headquarters, regional office and country office levels;
- an analysis of all the monitoring and financial data pertaining to the UNFPA response to COVID-19;
- a methodological framework for the systematic review of all completed (and quality assessed) UNFPA centralized and decentralized evaluations conducted during the period covered by the evaluation (from March 2020) with a view to extracting relevant COVID-19 response learning;
- a stakeholder mapping displaying the relationships between different sets of stakeholders;
- a reconstruction of the theory of change of the UNFPA response to COVID-19;

- the development of the final list of evaluation questions and of the associated evaluation matrix presenting, for each evaluation question, the assumptions to be assessed and the respective indicators, sources of information and methods and tools for the data collection (cf. annex 2, outline of the evaluation matrix);
- the selection of topics for two (2) thematic workshops and related issue papers; the papers will serve as inputs into the final evaluation report but will also be used to trigger further reflection within the organization on the selected topics;
- the selection of five (5) countries for the conduct of country case studies; outline of corresponding country briefing notes and/or evidence tables will be agreed with the EM in consultation with the ERG and annexed to the inception report;
- the development of a comprehensive data collection and analysis strategy;
- the conduct of a pilot field visit in one of the five previously selected case-study countries with the aim to test the evaluation framework (EQs, evaluation matrix, data collection methods and tools);
- an updated and detailed timeline for the evaluation.

22. The outputs of this phase are:

- a **draft inception report**, along the structure set out in annex 3; the draft inception report will serve as a basis for the pilot country case study;
- 1 **country briefing note** summarizing the findings emerging from the pilot case study and/or 1 **evidence table** compiling the data and information collected;
- a **final inception report**;
- a **powerpoint presentation** structured around the key components of the inception report, for the inception evaluation reference group meeting<sup>5</sup>.

### 3) Data collection phase

23. During this phase, the evaluation team will:

- Conduct an in-depth document review;
- Conduct a systematic review of UNFPA evaluations (see above);
- Conduct interviews with UNFPA key informants (at HQ, regional and country levels);
- Conduct interviews with external key informants (at HQ, regional and country levels);
- Carry out 4 country case studies;
- Conduct 2 thematic workshops<sup>6</sup> respectively covering the 2 topics identified at inception stage and develop 2 related issue papers

24. The outputs of this phase are:

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<sup>5</sup> The inception ERG meeting will be virtual.

<sup>6</sup> The thematic workshops will take place at HQ (New York).

- **4 country briefing notes** and/or **4 evidence tables** compiling the data and information collected through the country case studies;
- **2 Powerpoint presentations** for the two thematic workshops;
- **2 issue papers** covering the two topics selected at inception stage;
- **1 Powerpoint presentation** for an end-of-data-collection ERG meeting<sup>7</sup>.

#### 4) Reporting phase

25. The reporting phase will open with a 3-day analysis workshop<sup>8</sup> bringing together the evaluation team and the evaluation manager to discuss the results of the data collection. The objective is to help the evaluation team to deepen their analysis with a view to identifying the evaluation findings, main conclusions and related recommendations. The evaluation team then proceeds with the drafting of the **first draft final report**.
26. This first draft final report will be submitted to the evaluation manager for comments. The evaluation manager will control the quality of the submitted draft report. If the quality of the draft report is satisfactory (form and substance), the manager will circulate it to the reference group members. In the event that the quality is unsatisfactory, the evaluators will be required to produce a new version of the draft report.
27. The **second draft final report**, and in particular the tentative conclusions and recommendations, will be presented by the evaluation team during a stakeholder workshop<sup>9</sup> (attended by the ERG as well as other relevant stakeholders) and circulated to UNFPA Executive Committee members.
28. On the basis of comments expressed, the evaluation team will make appropriate amendments to the report, finalize the recommendations and submit the **final report**. For all comments, the evaluation team will indicate how they have responded in writing (“trail of comments”).
29. The report is considered final once it is formally approved by the Director of EO in consultation with the evaluation manager and the reference group.
30. The final report will follow the structure set out in annex 4.

#### 5) Dissemination phase

31. The evaluation team will assist the evaluation manager in selected dissemination activities. In particular, they will prepare a **Powerpoint presentation** on key highlights of the evaluation report and an **evaluation brief**.

### VII. Management and governance

32. The responsibility for the management and supervision of the evaluation will rest with the Evaluation Office.
33. **The evaluation manager.** The evaluation manager will have overall responsibility for the management of the evaluation process, including hiring and managing the team of external consultants. The evaluation manager is responsible for ensuring the quality and independence of

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<sup>7</sup> The end-of-data collection ERG meeting will be virtual.

<sup>8</sup> The analysis workshop will take place in Europe (Brussels, TBC).

<sup>9</sup> The stakeholder workshop will take place at UNFPA HQ (New York).

the evaluation (in line with UNEG Norms, Standards and Ethical Guidelines). The main responsibilities of the evaluation manager are to:

- lead the hiring of the team of external consultants
- chair the reference group and convene review meetings with the evaluation team
- supervise and guide the evaluation team all through the evaluation process
- review, provide substantive comments and approve the inception report, including the work plan, analytical framework and methodology
- review and provide substantive feedback on all evaluation outputs in general and on the draft and final evaluation reports in particular, for quality assurance purposes
- approve the final evaluation report in coordination with the reference group
- disseminate the evaluation results and contribute to learning and knowledge sharing at UNFPA

**34. The evaluation reference group.** The conduct of the evaluation will be followed closely by an evaluation reference group consisting of staff members of UNFPA. The reference group will support the evaluation at key points during the evaluation process. It will provide substantive technical inputs, facilitate access to documents and informants, and ensure the high technical quality of the evaluation products. The specific responsibilities of the reference group are to:

- provide feedback and comments on the terms of reference of the evaluation
- provide feedback and comments on the inception report
- provide comments and substantive feedback from a technical perspective on the draft and final evaluation reports
- act as the interface between the evaluators and the UNFPA services (in headquarters, regional and country offices), notably to facilitate access to informants and documentation
- assist in identifying external stakeholders to be consulted during the evaluation process
- participate in review meetings with the evaluation team as required
- play a key role in learning and knowledge sharing from the evaluation results, contributing to disseminating the results of the evaluation as well as to the completion and follow-up of the management response

## VIII. Evaluation team

35. The core evaluation team will be composed of three external consultants, as follows:

- 1 experienced **team leader**, with:
  - at least 15 years of experience in designing and carrying out complex evaluations of both development and humanitarian assistance;
  - knowledge in and experience of the UN system, the SDGs, etc.
  - Good knowledge of the UNFPA mandate.
- 1 **senior evaluator**, with at least 10 years of experience working in the UN system, as well as significant evaluation experience
- 1 **research assistant**, capable of organizing and analyzing large sets of data in support of the rest of the evaluation team.

36. Depending on the topics selected for the thematic workshops / issue papers, the evaluation team may be joined by an additional expert of the topic(s) considered, at data collection phase.

37. The evaluation team will collectively bring the below expertise and experience:

- Familiarity with the UN collective response to COVID-19;
- Expertise in evaluation of development and humanitarian assistance;
- Good understanding and knowledge of UNFPA mandate and processes;
- Excellent analytical skills;
- Excellent communication skills (written, spoken) in English;
- Good communication skills (written, spoken) in languages spoken in the regions and countries covered is desirable.

**IX. Timeline and deliverables**

	Phase	Time
1	<b>Preparatory phase</b> <ul style="list-style-type: none"> <li>• <i>Internal consultations</i></li> <li>• <i>Drafting of terms of reference</i></li> <li>• <i>Hiring of evaluation team</i></li> <li>• <i>Constitution of evaluation reference group</i></li> </ul>	<b>September-October 2022</b>
2	<b>Inception phase</b> <ul style="list-style-type: none"> <li>• <b><i>Draft inception report</i></b></li> <li>• <i>Inception ERG meeting (virtual)</i></li> <li>• <b><i>Pilot country case study / briefing note / evidence table</i></b></li> <li>• <b><i>Final inception report</i></b></li> </ul>	<b>November-December 2022</b> <i>November 2022</i> <i>End-November 2022</i> <i>December 2022</i> <i>End December 2022</i> <i>End December 2022</i>
3	<b>Data collection phase</b> <ul style="list-style-type: none"> <li>• <i>Country case studies</i></li> <li>• <b><i>Country briefing notes / evidence tables (x4)</i></b></li> <li>• <i>Thematic workshops (x2), NYC</i></li> <li>• <b><i>Issue papers (x2)</i></b></li> <li>• <i>End of data collection ERG meeting (virtual)</i></li> <li>• <i>Analysis workshop</i></li> </ul>	<b>January - May 2023</b> <i>January-March 2023</i> <i>March 2023</i> <i>March 2023</i> <i>March 2023</i> <i>April 2023</i> <i>May 2023</i>
4	<b>Reporting and review</b> <ul style="list-style-type: none"> <li>• <b><i>Draft final report</i></b></li> <li>• <i>Stakeholder workshop on recommendations (NYC)</i></li> <li>• <b><i>Revised draft final report</i></b></li> <li>• <b><i>Final report (unedited) + Powerpoint + Brief</i></b></li> </ul>	<b>June - October 2023</b> <i>June-July 2023</i> <i>July-August 2023</i> <i>September 2023</i> <i>October 2023</i>
5	<b>Management response and dissemination</b> <ul style="list-style-type: none"> <li>• <i>Dissemination of the report</i></li> <li>• <i>Development of management response</i></li> <li>• <i>Presentation to the Executive Board</i></li> </ul>	<b>November-February 2024</b> <i>November 2023</i> <i>November 2023</i> <i>TBD</i>

## Annex 2: Evaluation Management

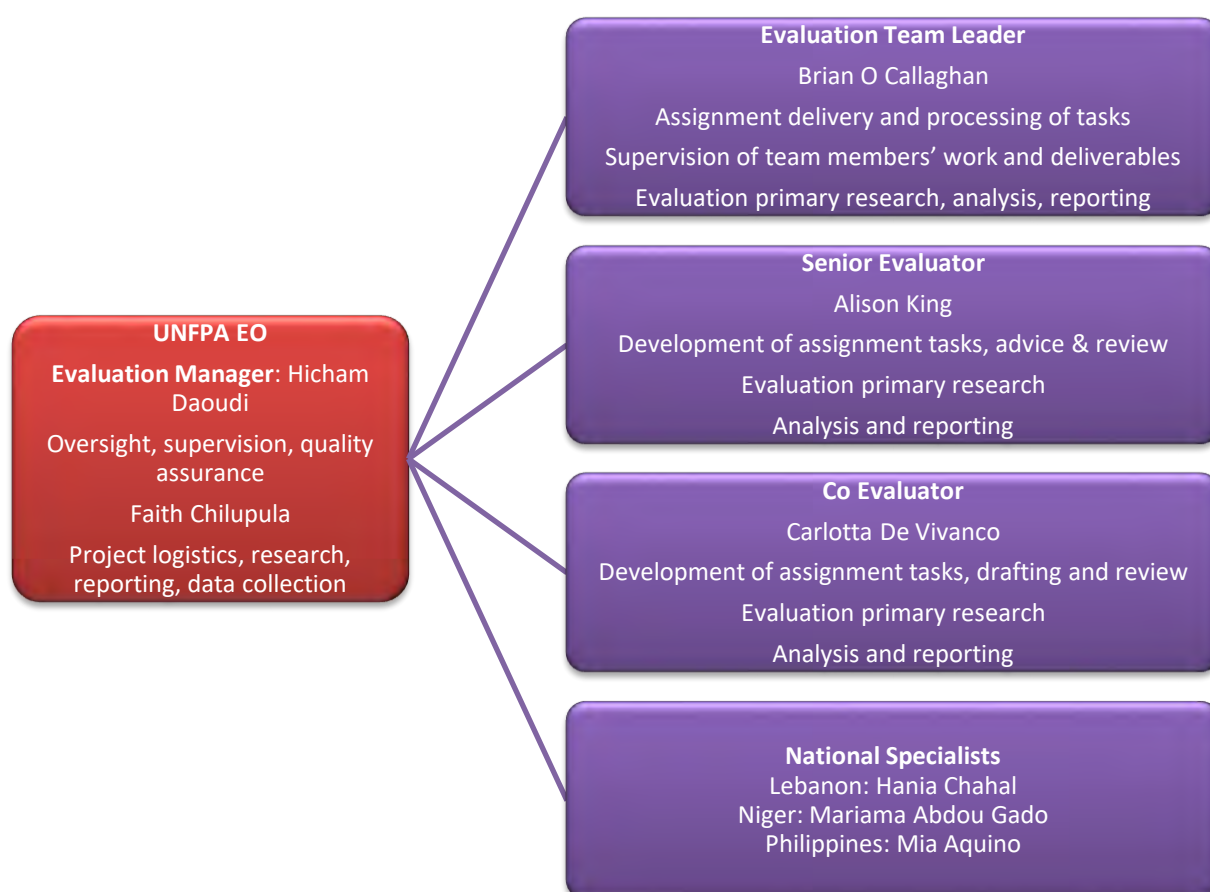


Figure 1: Team structure and areas of responsibility

### Team Leader

The evaluation team will consist of a team leader (Brian O' Callaghan) who is responsible for the delivery of the assignment process and deliverables. He will coordinate closely with Alison King and Carlotta De Vivanco (technical specialists and co-evaluators). The team leader will oversee the development of all deliverables and work with the evaluation team to coordinate fieldwork and data collection to ensure they are at the highest standard of quality and lead communication with UNFPA.

### Co-Evaluators

As co-evaluators, Ms. King and Ms. De Vivanco will be responsible for provision of feedback on the development of all key deliverables and will assist with inception report design and development, including tool development, participate in data collection activities (field visits and desk reviews) and will be involved in the analysis and reporting phase. The co-evaluators will report directly to the team leader.

### National Specialists & Translators/Interpreters and project management support

For many evaluations, national specialists are recruited to ensure regional/local representation and strengthen national level data collection processes. These individuals are responsible for assisting with in-country data collection activities as well as data collation, analysis, and, at times, are involved in report writing. National specialists report to the team leader. The national specialists will be identified once the field visit countries are selected. The UNFPA EO shall also provide team members' research and data collection, reporting and management support.

## Annex 3: Methodology

### Evaluation process

The following sections detail the specific phases and tasks within each of the five phases outlined in the ToR.

#### Phase 1: Preparation

The preparatory phase was internal to UNFPA and included the drafting of the ToR, discussion of the evaluation scope internally, the establishment of an ERG, procurement processes and contract signature with commissioned consultant team members.

#### Phase 2: Inception

Inception covered the initial familiarization of the evaluation team with the evaluation theme, scope, background and the subsequent development and testing of the methodological approach and a theory of change (ToC) that accurately describes the topic of the evaluation, in this case to cover the resilience of UNFPA systems, processes and programming in the light of the organization's response to the COVID-19 crisis. The ToC, reviewed by the ERG for robustness and comprehensiveness, underpinned the analytical approach of the evaluation, which sets out what will be measured by the evaluation (i.e., questions and assumptions) and how (i.e., using what tools).

#### Evaluation Matrix

The evaluation matrix (see Annex 2) built on the evaluation criteria and evaluation questions to ensure that the framing of the evaluation was robust, useful, and remained so within the broader framework of the *UNFPA Strategic Plan 2022-2025*, the *UNFPA Global Response Plan*, the *Global COVID-19 Humanitarian Response Plan*.

#### Evaluation questions

Evaluation criteria

ToR criteria	Overview	Comments
Relevance	Assess link to both identified needs of affected populations and the UNFPA mandate and strategic direction	Relevance remains as the overarching criteria and will also include elements of coherence and accountability and engagement. Coherence will include coherence with external frameworks including the SDGs, the Sendai Framework, the UNFPA Global Response Plan, the Global COVID-19 Humanitarian Response Plan.
Effectiveness	Assess the extent to which UNFPA is achieving objectives and coverage (geographical, demographic)	Remains the same and encompasses initial areas of inquiry within the ToR. Ensuring that UNFPA responds in a timely manner to the COVID-19 crisis and reaches those most in need and furthest behind.
Coherence	Assess the extent to which UNFPA is working within the humanitarian-development-peace nexus working closely in partnership and building the capacity of national and community stakeholders (including service providers) operating through the different humanitarian and development contexts	Includes elements of complementarity. Ensuring UNFPA has appropriate preparedness for humanitarian emergencies (working through the nexus with local/national stakeholders).
Efficiency	Assess the extent to which Internal systems, processes, policies, and procedures being conducive to efficient humanitarian action	Remains the same and encompasses initial areas of inquiry within the ToR.
Sustainability	Assesses how UNFPA has integrated the lessons of previous resilience/preparedness activities and the COVID-19 response into long-term solutions for overall global response to crises and support national partners	Remains the same and includes elements of working not just with national (i.e., governmental) systems but also civil society organizations.

Areas of inquiry and suggested evaluation questions within the ToR<sup>10</sup> are all covered within the refined and expanded evaluation matrix.

The evaluation was framed by eight evaluation questions, as follows:

### **Relevance**

EQ1. Before the COVID-19 pandemic, to what extent was UNFPA prepared for responding to global crises?

This EQ links to the level of inputs/strategies in the ToC.

EQ2. To what extent was UNFPA responsive to the COVID-19 pandemic and successfully adapted its strategies and programmes as the pandemic evolved and needs and priorities changed?

This EQ links to the level of inputs/strategies in the ToC and is furthermore guided by the preparedness elements including the UNFPA strategic plan(s) and the United Nations ORMS.

### **Effectiveness**

EQ3. To what extent has UNFPA achieved the objectives of the UNFPA Global Response Plan to COVID-19 within the overarching framework of the UNFPA strategic plans 2018-2021 and 2022-2025?

This EQ both link to the level of outcomes in the ToC and the UNFPA Global Response Plan.

EQ4: To what extent has UNFPA systematically incorporated and implemented data-driven interventions and successfully engaged young people and supported risk communication and stigma reduction within the framework of its COVID-19 response and recovery efforts?

This EQ links to the level of activities/outputs in the ToC.

### **Coherence**

EQ5. To what extent has UNFPA contributed to synergies and complementarity among COVID-19 responses within the UN system?

This EQ links to the level of activities/outputs in the ToC.

EQ6. To what extent has UNFPA contributed to synergies and complementarity across the humanitarian-development-peace nexus?

This EQ links to the level of activities/outputs in the ToC.

### **Efficiency**

EQ7: At the onset and during the COVID-19 pandemic, to what extent have UNFPA systems, processes and procedures supported a safe and timely and continuous response?

This EQ links to the level of inputs/strategies in the ToC.

### **Sustainability**

EQ8. To what extent has the UNFPA response to COVID-19 contributed to strengthening the organization's capacity to anticipate and prepare for responding to disruptions caused by future global crises?

This EQ links to the level of outcomes in the ToC.

### **Sustainability**

EQ9. To what extent has the UNFPA response to COVID-19 contributed to strengthening the organization's programming towards the three transformative results, including support for national emergency preparedness?

This EQ links to the level of outcomes in the ToC.

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<sup>10</sup> See Annex 6.

## Departures from the Terms of Reference

The evaluation, inasmuch as possible, adhered to the purpose, objectives and provisions of the original ToR for the evaluation. However, on discussions with the ERG, the decision was taken by the UNFPA EO to increase the number of field visits from five to six countries (to better represent all UNFPA regions) and to complement them with desk reviews covering nine additional countries. Further, in the development of the analytical approach to the evaluation, the evaluation team, in close consultation with the evaluation manager and the ERG refined the list of evaluation questions initially proposed in the terms of reference. Notably, the original question 5 was split into two questions to best deal with issues of coherence within the United Nations system and across the humanitarian-development-peace nexus separately and similarly with the original question 8 – now divided across questions 8 and 9.

## Selection of Countries for Evaluation

Countries were selected using the following criteria elaborated below, including the indicator used to determine them. An initial shortlist was developed taking in to account the four selection criteria. The balancing criteria was subsequently applied to ensure a cross-section of country typologies.

1. **Regional balance.** The evaluation will seek to select at least one country per region.
  - UNFPA region
2. **COVID-19 context.**
  - *INFORM COVID-19 Risk class*: Preference given to countries marked High and Medium
  - *Fluctuation in CO delivery*: Countries with large drops and increases in delivery from 2019 to 2020 will be given priority.
  - *GPS COVID-19 tagging*: Countries with a variation from the global average of 17 per cent of COVID tagged delivery between 2020-2022 will be given priority.
  - Countries included in Global COVID-19 HRP
  - *ERG flagged country* as case study to consider
3. **UNFPA Representative/Head of Office.** Countries with UNFPA Representatives/Heads of offices with a tenure spanning the evaluation period will be given priority, to ensure access to as much institutional memory as possible.
  - UNFPA Rep arrival date
4. **Previous Evaluative Evidence.** Countries with CPEs conducted in 2021 and 2022, which already include COVID-19 evidence, were excluded. Preference given to countries not used as case studies in the Inter-Agency Evaluation of the Humanitarian Response to the COVID-19 Pandemic (2021) and the System-wide Evaluation of the UNDS Response to COVID-19 (2022).

Balancing criteria:

5. **UNFPA country presence.** The evaluation will seek to select a variety of UNFPA country office sizes and compositions.
  - *Country Quadrant* in SP 2017-2021
  - *Country Tier* in SP 2022-2025: Preference given to Tier I countries, where feasible.
  - UNFPA Supplies Partnership Programme (Y/N)
  - Presence of an International Operations Manager, Operations Manager and number of Administrative staff
6. **Country Context.** The evaluation will seek to include a cross-section of country typologies.
  - UNFPA humanitarian needs country (as per HAO 2023) and *HRP* (Y/N)
  - *INFORM Risk Index*
  - Income level (including LDCs, LLDCs, SIDS)
  - UNCT size
7. **Other factors**
  - Logistical feasibility of field mission, i.e. travel time, security (for field visit countries only)
  - ERG feedback provided

## Shortlist of Countries and Selection Criteria

Country	RO	Tier	UNFPA Rep arrival	INFORM Covid Risk index	% of '20-22 delivery tagged COVID	UNFPA Supplies Partnership	UNFPA CPE	IASC COVID Eval 2021	System-wide COVID Eval 2022	Delivery 2019	Delivery 2020	Delivery 2021	CO Operations Manager	# of Admin & Finance staff	UNCT Size
Indonesia	AP	II	Sep-19	Medium	26%	N		N	Y	\$7.81 M	\$6.70 M	\$7.11 M	National	8	22
Myanmar	AP	II	Apr-18	Medium	14%	Y		Y	N	\$12.0 M	\$14.12 M	\$14.67 M	International	7	22
India	AP	I	Feb-22	Medium	19%	N	2020	N	N	\$7.15 M	\$8.39 M	\$9.17 M	National	10	22
Philippines	AP	I	Feb-21	Medium	58%	N		N	N	\$4.50 M	\$8.25 M	\$7.49 M	International	12	22
Lebanon	AS	II	?	High	32%	N		N	N	\$3.45 M	\$7.09 M	\$6.18 M	In RO	4	32
Egypt	AS	III	Sep-18	Medium	5%	N		N	N	\$12.61 M	\$12.09 M	\$13.30 M	In RO	6	22
Armenia	EECA	III	Jan-20	Medium	28%	N	2019	N	N	\$.73 M	\$1.59 M	\$1.08 M	In RO	3	23
Bosnia and Herzegovina	EECA	III	Jan-20	Medium	12%	N	2019	N	N	\$1.22 M	\$1.89 M	\$1.88 M	In RO	3	14
Moldova	EECA	III	Jan-20	Medium	15%	N		N	N	\$1.61 M	\$2.39 M	\$2.53 M	National	13	24
Namibia	ESA	II	?	High	46%	N		N	N	\$1.24 M	\$1.95 M	\$1.44 M	RO vacant?	5	13
Zambia	ESA	I	Apr-18	High	12%	Y	2019	N	N	\$8.16 M	\$8.08 M	\$10.04 M	National	6	20
Togo	WCA	I	Sep-19	High	26%	Y		N	N	\$2.63 M	\$3.82 M	\$4.74 M	National	5	14
Niger	WCA	I	Apr-18	High	16%	Y		N	N	\$11.06 M	\$19.30 M	\$19.03 M	International	10	26
Colombia	LAC	II	Apr-19	Medium	25%	N	2019	Y	N	\$2.70 M	\$4.04 M	\$4.03 M	RO vacant?	23	26
Guatemala	LAC	I	Mar-20	Medium	19%	N	2019	N	N	\$7.09 M	\$3.81 M	\$3.41 M	National	20	18

## Stakeholder Map

1. STAKEHOLDERS FOR CONSULTATION AT THE COUNTRY LEVEL (FOR 6 COUNTRY VISITS) (standard list was refined by country)		
Category	Stakeholder	Focus of data collection
UNFPA	Representative/Head of Office/Country Director	To talk about different aspects of UNFPA organizational resilience in the country, analyse strengths and weaknesses of the CO's programmes and targeted COVID-19 response within the overarching framework of the UNFPA Global Response Plan and the transformative results, and identify key accomplishments.
	Operations Manager/Admin & Finance staff	To talk about business continuity aspects of UNFPA organizational resilience and the agility of the CO to anticipate and react promptly at the onset of the pandemic.
	Programme staff	To talk about UNFPA programme (with a focus on the nexus and support for national emergency preparedness) and adaptations since the onset of COVID-19 (humanitarian response and recovery actions).
	Humanitarian Focal Point	To talk about UNFPA engagement in the HCT and the CO's MPAs and support for national emergency preparedness, the agility of the CO to react promptly at the onset of the pandemic, key humanitarian accomplishments, and efforts to provide humanitarian and development assistance in a complementary manner (nexus).
	Security Focal Points	To talk about the implementation and adaptation of security plan and measures, contingency plan and business continuity plan to ensure staff safety and security in anticipation of and during the pandemic.
	Business Continuity Focal Points	To talk about business continuity aspects of UNFPA organizational resilience and the agility of the CO to anticipate and react promptly at the onset of the pandemic.
United Nations	Resident Coordinator/Humanitarian Coordinator	To talk about the UNFPA strategic role within the UNCT/HCT/OMT, especially in response to the pandemic (humanitarian response and recovery actions across the H-D-P nexus) and to gather views on UNFPA programme performance during the pandemic.
	Security Advisor (UNDSS)	To talk about the UNCT's and UNFPA security policies and procedures, contingency plan, business continuity plan and adaptations to the COVID-19 situation to ensure a safe and timely response.
	Chair of OMT	To talk about the continuity of UNCT-wide business operations, including UNFPA, in the COVID-19 context, and adaptations because of COVID-19.
	WHO	To talk about the country-level implementation of the WHO-led Strategic Readiness, Preparedness and Response Plan to COVID-19 and UNFPA alignment/contribution/performance, and to gather views on UNFPA as regards its support for national emergency preparedness and bilateral policy-level/programmatic collaboration at the onset of COVID-19 and during the pandemic.
	UNDP	To talk about the formulation and overall implementation of the SERP, and the UNFPA role/alignment/contribution/performance (SERPs were formulated under the leadership of RCs, supported by UNDP), and to gather views on UNFPA as regards its support for national emergency preparedness and bilateral policy-level/programmatic collaboration at the onset of COVID-19 and during the pandemic.
	OCHA	To talk about the formulation and overall implementation of the UN's emergency response to COVID-19 and the UNFPA role/alignment/contribution/performance, and to gather views on UNFPA as regards its support for national emergency preparedness and bilateral policy-level/programmatic collaboration at the onset of COVID-19 and during the pandemic.

	Other UN agencies as appropriate	To talk about the UNFPA role in and contributions to UNCT inter-agency groups and humanitarian clusters and about the performance of any UN joint activities and programmes in the context of and in response to the COVID-19 pandemic.
Government (Implementing partners and non-implementing partners)	Primary counterpart ministry of the UN (e.g., Planning)	To talk about the overall UN humanitarian, health and socio-economic response to COVID-19 and the UNFPA role therein.
	Ministries/Departments (e.g., Health, Gender, Youth, Education, Disaster Management)	To talk about UNFPA support for national emergency preparedness and UNFPA humanitarian assistance and country programme implementation in the context of and in response to COVID-19 (relevance, efficiency, effectiveness, sustainability).
Civil society (Implementing partners and non-implementing partners)		To talk about UNFPA support for national emergency preparedness and UNFPA humanitarian assistance and country programme implementation in the context of and in response to COVID-19 (relevance, efficiency, effectiveness, sustainability).
UNFPA donors (in-country)		To talk about the relevance and performance of donor-funded programmes/projects during the COVID-19 pandemic.
Service providers		To talk about the relevance, performance and timeliness of UNFPA support in light of the challenges posed by the COVID-19 pandemic (response and recovery).
Community members		To talk about the relevance, performance and timeliness of UNFPA support in light of the challenges posed by the COVID-19 pandemic (response and recovery).

## 2. STAKEHOLDERS FOR CONSULTATION AT THE COUNTRY LEVEL (FOR 9 DESK REVIEW COUNTRIES) (standard list was refined by country)

Category	Stakeholder	Focus of data collection
UNFPA	Representative/Head of Office/Country Director	To talk about different aspects of UNFPA organizational resilience in the country, analyse strengths and weaknesses of the CO's programmes and targeted COVID-19 response within the overarching framework of the UNFPA Global Response Plan and the transformative results, and identify key accomplishments.
	Operations Manager	To talk about business continuity aspects of UNFPA organizational resilience and the agility of the CO to anticipate and react promptly at the onset of the pandemic.
	Programme staff	To talk about UNFPA programmes (with a focus on the nexus and support for national emergency preparedness) and adaptations since the onset of COVID-19 (humanitarian response and recovery actions).

## 3. STAKEHOLDERS FOR CONSULTATION AT THE HQs LEVEL

Category	Stakeholder	Focus of data collection
UNFPA	Executive Director	To talk about UNFPA business continuity management, of which the Executive Director has the overall oversight and about the UNFPA response to the COVID-19 pandemic, for which the executive director has provided overall strategic leadership and oversight (including the role and functioning of the SMG and the CRT), and lessons learned from the pandemic for UNFPA organizational resilience and accelerating progress towards the transformative results (during the strategic plan 2022-2025 cycle).
	Deputy Executive Director (Management)	Including in his function as chair of the UNFPA SMG that oversees the implementation of business continuity management, to talk about the UNFPA Business Continuity Management Policy and system and experiences/lessons learned during COVID-19 for improving business continuity within UNFPA,

		especially as regards risk management, FTPs and protecting the health and lives of staff and their families and partners. As UNFPA representative in the HLCM, to talk about implications of and UNFPA contributions to the UN Organizational Resilience Management Policy. To talk about the adequacy and adaptation of corporate systems and processes for generating programme, financial and management monitoring data and analysis in the context of COVID-19.
	Deputy Executive Director (Programmes)	Including in her function as chair of the global Crisis Response Team (CRT), to talk about the UNFPA ability to adapt and respond to the COVID-19 pandemic (e.g., leadership and workforce, processes and decision-making authority, organizational structure, strategic prioritization and alignment to transformative results, appropriateness of prior support for national emergency preparedness, partnerships and resource mobilization, monitoring and reporting) and to draw conclusions regarding UNFPA organizational resilience. To talk about strengths and weaknesses and key accomplishments of UNFPA programme performance (humanitarian and development) in responding to the pandemic and helping programme countries to recover (including data interventions).
	Executive Board Branch	To talk about reporting on organizational resilience to the UNFPA executive board and the role of the executive board in ensuring and overseeing UNFPA organizational resilience to shocks, including at the onset and during the COVID-19 pandemic. To talk about the ability of the executive board itself to continue functioning at an acceptable level throughout the pandemic (existence of a dedicated business continuity plan to address disruptions to governance activities?). To talk about the UNFPA Global Response Plan and programming during the pandemic (humanitarian assistance and in support of the health and socio-economic responses), about reporting on the UNFPA COVID-19 response and recovery actions to the executive board, and about the influence of COVID-19-related experience on the UNFPA strategic plan 2022-2025.
	Enterprise Risk Management & Oversight Compliance	To talk about the UNFPA Business Continuity Management Policy and system and the role and work in (e.g., enterprise, security, finance and programme) risk management as part of ensuring UNFPA organizational resilience (alongside other organizational preparedness measures), and any particular actions/changes necessitated by the COVID-19 situation.
	Office of Security Coordinator (OSC)	To talk about the design and implementation (organizational structures, resources, processes, tools) of the UNFPA Business Continuity Management Policy at all levels and in the context of COVID-19 and upcoming revision of the policy (?), under the umbrella of the UN Organizational Resilience Management Policy and other related CEB/HLCM work and considering the 2021 JIU report. To request responses to questionnaire about implementing business continuity plans to manage risks and maintain or initiate new critical and life-saving operations in response to the impact of the COVID-19.
	Division for Human Resources (DHR)	To talk about human resources aspects of the UNFPA Business Continuity Management Policy and system in terms of the FTPs, the surge mechanism and managing the safety, security and wellbeing of UNFPA personnel and their dependents and partners (including alternate work modalities), experiences made in responding to COVID-19 and any particular actions/changes necessitated by the COVID-19 situation.
	Division of Management Services (DMS)	To talk about the division's preparedness efforts as part of the UNFPA Business Continuity Management Policy and system to ensure the ability of UNFPA to continuously deliver its mandate in case of emergencies, as regards issues such as procurement and contracts, finance, transportation, infrastructure and equipment, and experiences made in responding to COVID-19 and actions/changes necessitated by the COVID-19 situation.
	Division of Communications	To talk about the division's role in and contributions to UNFPA organizational resilience, especially in terms of preparedness to sustain relationships with strategic partners and external communications and intensify resource

	& Strategic Partnerships (CSP)	mobilization efforts in case of emergencies, and experiences made in responding to COVID-19 and actions/changes necessitated by the COVID-19 situation.
	Humanitarian Response Division (HRD)	To talk about the division's contributions to UNFPA organizational resilience by engaging in coordination (IASC) and policy advocacy to integrate SRHR and GBV/harmful practices into partner emergency preparedness actions; by supporting national emergency preparedness measures as part of UNFPA CPDs; by collaborating with other UNFPA business units to institutionalize and systematize a nexus approach; as well as to talk about the UNFPA global CRT (of which HRD and OED are the secretariat) and the FTPs (of which HRD is the "owner"), in particular in light of experiences made in responding to COVID-19 and actions/changes necessitated by the COVID-19 situation.
	Policy and Strategy Division (PSD)	To talk about the division's role in ensuring UNFPA organizational resilience and its experiences with and contributions to adapting to and responding to COVID-19. Specially to talk about the UNFPA Global Response Plan and other corporate policies as well as experience with reworking existing programmes, repurposing funds and initiating new interventions in response to evolving programme country needs and priorities (in the context of UN system-wide coordination mechanisms and responses including SERPs and joint programmes). To talk about changes to corporate systems and processes for generating programme, financial and management monitoring data and analysis for the purpose of accountability and lessons learning for the strategic plan 2022-2025 cycle. To enquire about the UNFPA COVID-19 surveys in 2020 and 2021.
	Technical Division (TD)	To talk about the division's role in UNFPA organizational resilience management system in theory and in practice in light of the COVID-19 pandemic and the UNFPA Global Response Plan with its strategic priorities and accelerator interventions (e.g., technical briefs; "COVID-19 Reader's Digest" compiled by TD; COVID-19 Population Vulnerability Dashboard). To talk about the HRBA to COVID-19 and extent of gender-responsiveness of the UNFPA COVID-19 response.
	Supply Chain Management Unit (SCMU)	To talk about the dedicated role of the unit in ensuring that UNFPA is a resilient organization in terms of providing the organization with a responsive and resilient supply chain system across development and humanitarian settings, about the unit's experience with challenges posed by the COVID-19 pandemic (supply chain disruptions), and good practices/lessons learned for future UNFPA resilience to shocks (e.g., importance of risk identification, timely project planning and involvement of supply chain experts and effective collaboration, including from the industry).
	UNFPA Staff Council Representative(s) (Henia Dakkak, HRD) (Danielle Okoro, SRHB)	To talk about any involvement and concerns of the Staff Council in matters concerning the rights, interests and welfare of UNFPA personnel connected to the COVID-19 pandemic and ideas, good practices and lessons learned.
United Nations	UN Department of Management Strategy, Policy and Compliance	As "point of contact", to talk about the UN Organizational Resilience Management System policy (pre- and post-COVID-19), UNFPA engagement in inter-agency coordination around organizational resilience and UNFPA adherence in terms of mandatory implementation of the policy (progress reporting against KPIs and JIU review).
	OCHA	To talk about UNFPA alignment and contributions to the collective response to the COVID-19 crisis, especially regarding the Global Humanitarian Response Plan (GHRP) to address the immediate humanitarian consequences of the pandemic, operational guidance to address critical aspects of the humanitarian response, resource mobilization, logistics and activation of IASC clusters and other sectoral coordination mechanisms at the country level. To talk about the adequacy of the humanitarian system's (including UNFPA) support for national emergency

		preparedness in light of the needs created by the pandemic and humanitarian-development collaboration (nexus).
	WHO	To talk about UNFPA involvement in and contribution to implementing the WHO-led COVID-19 Strategic Preparedness and Response Plans for the system-wide health response (in a coordinated manner and working across the nexus) (especially as regards data collection and analysis; supply chain management; risk communication and community engagement; and essential SRH and GBV services, in face of a steep rise in the incidence of GBV due to the pandemic).
	DCO	As co-chair of the UN Task Team for the Socio-Economic Response to COVID-19 to talk about UNFPA involvement in and contribution to implementing the UN Socio-Economic Framework for responding to the socio-economic impacts of COVID-19 (through SEIAs/SERPs and CCAs/UNSDCFs) (especially as regards data, advocacy, SRH services, youth empowerment and GBV) (and across the nexus).
	UNDP	As co-chair of the UN Task Team for the Socio-Economic Response to COVID-19 and technical lead at the country level, to talk about UNFPA involvement in and contribution to implementing the UN Socio-Economic Framework for responding to the socio-economic impacts of COVID-19 (through SERPs and UNSDCF) (especially as regards data, advocacy, SRH services, youth empowerment and GBV) (and across the nexus).
Government	Executive Board members (donor and programme countries)	To talk about reporting on organizational resilience to the UNFPA executive board and the role of the executive board in ensuring and overseeing UNFPA organizational resilience to shocks, including at the onset and during the COVID-19 pandemic. To talk about the ability of the executive board itself to continue functioning at an acceptable level throughout the pandemic (existence of a dedicated business continuity plan to address disruptions to governance activities?). To talk about the UNFPA Global Response Plan and programming during the pandemic (humanitarian assistance and in support of the health and socio-economic responses), about reporting on the UNFPA COVID-19 response and recovery actions to the executive board, and about the influence of COVID-19-related experience on the UNFPA strategic plan 2022-2025.

4. STAKEHOLDERS FOR CONSULTATION AT THE REGIONAL LEVEL (standard list was refined by region)		
Category	Stakeholder	Focus of data collection
UNFPA	Regional Director	To talk about different aspects of UNFPA organizational resilience in the region, analyse strengths and weaknesses of the individual country programmes (focus on country visit and desk review countries) and targeted COVID-19 response within the overarching framework of the UNFPA Global Response Plan and the transformative results, and identify key accomplishments.
	Deputy Regional Director	To talk about different aspects of UNFPA organizational resilience in the region, analyse strengths and weaknesses of the individual country programmes within their responsibility and oversight (focus on country visit and desk review countries) and targeted COVID-19 response within the overarching framework of the UNFPA Global Response Plan and the transformative results, and identify key accomplishments.
	International Operations Manager/Admin & Finance staff	To talk about business continuity aspects of UNFPA organizational resilience and the agility of the RO to anticipate and react promptly at the onset of the pandemic, in particular in support of COs.
	Regional Advisors Programme (SRHR, Gender, P&D,	To talk about UNFPA regional programme (with a focus on the nexus and support for national emergency preparedness) and adaptations since the onset of COVID-19 (humanitarian response and recovery actions). Support to CO programmes and their adaptations, as relevant.
	Regional Advisor Humanitarian	To talk about UNFPA engagement in regional humanitarian processes. Support to CO's MPAs and support for national emergency preparedness.

		Agility of the RO to react promptly at the onset of the pandemic, key humanitarian accomplishments, and efforts to provide humanitarian and development assistance in a complementary manner (nexus), in particular in the countries visited and desk review countries.
	Regional Advisor Communication	To talk about the RO's role in and contributions in terms of preparedness to sustain external communications, collection and dissemination of material across the region and experiences made in responding to COVID-19 and actions/changes necessitated by the COVID-19 situation.
	Regional Advisor Resource Mobilization and Partnerships	To talk about the RO's role in and contributions in terms of preparedness to sustain relationships with strategic partners and intensify resource mobilization efforts in case of emergencies, and experiences made in responding to COVID-19 and actions/changes necessitated by the COVID-19 situation.
	Regional Security Advisor/ RO Security Focal Point	To talk about the implementation and adaptation of security plan and measures, contingency plan and business continuity plan to ensure staff safety and security in anticipation of and during the pandemic in the RO. To discuss support and review of CO security plans and measures, contingency plans and business continuity plans.
	RO Business Continuity Focal Points	To talk about business continuity aspects of UNFPA organizational resilience and the agility of the RO to anticipate and react promptly at the onset of the pandemic and support provided to the COs.

### Selection of Topics for Discussion Workshops

As part of the evaluation, the evaluation team will present two **discussion workshops** that complement and support the overall evaluation findings and conclusions. The overall goal of the workshops is to deepen and consolidate the analysis of selected topics in one place and early in the evaluation process in order to initiate further discussions within UNFPA. Two workshops scheduled for June 2023 (exact dates to be confirmed) will serve to kick off such discussions, which the full evaluation can also capitalize on.

The workshop outputs will serve two primary purposes for UNFPA:

- (i) To complement the evaluation report with standalone internal analysis focusing on issues of strategic importance for UNFPA,
- (ii) Provide early lessons on these issues (as the workshop outputs will be made available before the end of the evaluation process - by the end of the data collection phase) with a view to informing further going discussions, decision making and quick action by management.

The underlying rationale for selecting the two topics is that they should share several common criteria related to the robustness of the information and planned utility for UNFPA. They should also differ in some key ways, notably that topic 1 (Human Resources/Duty of Care) will be more retrospective, focused on UNFPA resilience and/or COVID-19-related performance against existing internal standards or plans, whereas topic 2 (Climate Change and Resilience) is more forward-looking and outward-looking, gauging UNFPA resilience and existing performance against emerging issues in the area of climate change. Criteria for selection of the topics for discussion are summarised in the following table:

Common Criteria	
- Analysis of the issues will provide useful learning/insights for future UNFPA policies/programming/business operations.	
- Issues having past or current impact upon UNFPA operations or programming.	
- A sufficient body of evidence exists on the issue and its relation to UNFPA mandate areas to generate analysis/findings.	
- Learning can be quickly generated to provide insights for the fuller evaluation analysis.	
Criteria for Topic 1	Criteria for Topic 2
- <b>Summative</b> in nature (i.e., determining the extent to which planned results or outcomes were produced.	- <b>Formative/developmental</b> in nature (i.e., taking a broad view of UNFPA assumptions and ideas behind the topic and challenge these where necessary.
- More retrospective – looking at achievements against policies/processes, highlighting good practices and suggesting options for action.	- More forward-looking – exploring potentially emerging areas of concern to be considered through a resilience lens.
- Links more to internal strategies, SOPs, policies etc.	- Links more to external standards, approaches, policies, trends/data etc.

#### Methodological approach to the discussion workshops

Data collection and analysis for both topics will use a similar approach to the main evaluation, so analysis of data can be done in parallel and findings can be related directly to the broader findings emerging as part of that research. If required, UNFPA will retain additional external technical expertise in one or more of the specific areas under research, to ensure the analytical approach and data collection is in line with good practices in the area. This will also provide the evaluation team with guidance on specific sources of data, policies, standards etc. and facilitate a more efficient and effective research process.

#### Shortlist of topics

Initial discussions and feedback from Evaluation Reference Group (ERG) members permitted compilation of criteria for selection of, and suggestions for, a shortlist of topics, as follows:

- Human resource issues, duty of care, ability of people to work and support others and UNFPA to support staff and partners during the COVID-19 pandemic.
- COVID-19 response and leaving no one behind (LNOB) – how effective has UNFPA been?
- Gender dynamics during COVID-19 – rise of gender-based violence (GBV) (even internally).

- COVID-19 guidance and messaging - was the guidance for low-resource settings appropriate?
- The role of the UNFPA Crisis Response Team and appropriateness of the organizational structures within UNFPA.
- Effectiveness of changing workplans from development to emergency programming.
- Leveraging the lessons of COVID-19 for the emerging challenges of climate change.
- Resource mobilization modalities at the global, regional and national levels; use of the UNFPA trust funds.
- Use of FTPs and procurement – financing, management, country level strategies for global bottlenecks and last mile.

The final discussion topics selected in consultation with the ERG (at the first meeting of the ERG with the evaluation team) and via subsequent discussions with ERG members and other UNFPA technical specialists that are most in compliance with the above indicators are:

- Learning from UNFPA human resources management during the COVID-19 pandemic.

Including appropriateness of FTPs, implementation of adequate duty of care provisions, ensuring staff and partner ability to work and introducing new ways of working.

- Resilience, COVID-19 and climate change.

Leveraging lessons from UNFPA operational and programmatic preparedness and response to COVID-19 for ensuring business continuity in anticipation of more frequent and dangerous climate-induced shocks.<sup>11</sup>

### Phase 3 Data Collection

Phase 3 of the assignment comprised a more comprehensive data collection process across the individual countries and UNFPA business entities, and the preparation of country briefing notes and discussion workshops. During this phase, the evaluation team conducted:

- 1) **An in-depth document review** of all documents collected related to resilience and COVID-19 response at UNFPA (and/or the wider United Nations system), and those global-level and regional-level documents of relevance to the mandate of UNFPA. This phase also included a **systematic review** of all completed (and quality assessed) UNFPA centralized and decentralized evaluations conducted during the period covered by the evaluation (from March 2020) with a view to extracting relevant COVID-19 response learning.
- 2) **Remote interviews with key UNFPA stakeholders at headquarters/global and regional levels**. A list of key informants to be interviewed (either individually or in a group discussion format) at the global and regional levels was developed in consultation with UNFPA. This list included key UNFPA staff at headquarters and stakeholders or partner staff at global and regional levels, primary stakeholders in other agencies and other locations.
- 3) **In-person interviews with stakeholders** in six countries<sup>12</sup> (including one pilot visit, conducted during Phase 1) to collect data used to prepare individual country briefing notes and the two discussion workshops.
- 4) **Focus group discussions (FGDs) with beneficiaries** on COVID-19 programming (or on UNFPA programmes that have been adjusted to accommodate COVID-19) in three countries (the only countries of the six field-visit countries where beneficiaries of COVID-19 related programming were still available for discussion). These enabled the evaluation team to obtain the views and understanding the experiences of community members, and especially women and adolescent girls, to ensure the findings are contextually grounded and the recommendations for future programming relevant.

Throughout the evaluation, the team aimed to ensure that the most appropriate sources of evidence for undertaking the evaluation were used in a technically appropriate manner. The evaluation team collected and analysed data from different available sources and maintained an on-going consultation process with UNFPA staff

<sup>11</sup> As climate change and resilience is a specialised area of work, the Evaluation Office will recruit a short-term technical specialist external to the evaluation team to provide initial guidance and support to the team in this area.

<sup>12</sup> Bosnia & Herzegovina, Colombia, Lebanon, Niger, Philippines, Zambia.

throughout the evaluation in order to triangulate information - checking and corroborating findings from multiple sources to ensure that they were consistent and accurate.

### Prior to data collection

During the assignment preparation phase, the evaluation team prepared evidence tables in full alignment with the evaluation matrix (see Annex 6) and reconstructed ToC. The team undertook iterative rounds of review of all elements to ensure complete consistency between the agreed reconstructed ToC, the evaluation matrix (comprising evaluation questions, assumptions, indicators), and the content of the research tools.

Figure 2: Development of evidence tables



### During data collection

Field-based data collection was undertaken via the research tools were prepared as a series of template forms in MS Word provided in Annex 1. The evaluation team, when conducting interviews or discussions, entered stakeholder responses directly into a fresh research template and saved the templates directly to the secured shared cloud-based folders specific to this evaluation.

Data collected during the field visits was reviewed, cleaned and coded into the evidence tables in real-time (i.e., during the field visits, as schedules permitted, and/or immediately after the conclusion of the visits) to ensure rapid availability of coded and cleaned data, minimum risk of data loss and early identification of any gaps to be addressed. The evaluation team used a cloud-based database, and access to this was shared only between team members and the evaluation manager for storing evaluation data. The pilot field visit provided a further opportunity to test and refine data collection processes.

### Sample Selection

**Key informant interviews.** The full list of potential key informants constructed during the stakeholder mapping process formed the sampling frame for key informant interviews (KIIs). The evaluation team shortlisted global-level and regional-level external and internal stakeholders with the input of the evaluation manager and ERG, and those from the six field visit countries and nine desk review countries based on the level of engagement (i.e., amount of funding and number of years) with individual partners for specific interviews.

As part of planning for individual country visits (including the pilot visit), the research team shared the shortlist with UNFPA country focal points to ensure that the full breadth of stakeholders had been identified and individual research targets were logistically feasible.

The evaluation team used a *snowball sampling* technique whereby interviewees were requested to identify further key informants who may have presented a useful perspective on resilience programming and COVID-19 response within UNFPA.

**Site visits and FGDs.** Similarly, the evaluation team utilized secondary research data (from the desk reviews of individual country documentation), the in-country experience and expertise of ERG members and country focal points to identify a shortlist of sites that could serve as examples of UNFPA-supported programming (e.g., clinics, women/girls' safe spaces, youth centres). General criteria for selection of these sites included those representative of a long-term continuum of substantial UNFPA support and those relevant to the objectives of this evaluation and the reconstructed ToC. FGDs, with appropriate translation and facilitation services provided in each context, took place with sex and age-disaggregated groups, thus allowing for sensitive topics to be addressed - individuals are more likely to share their perceptions/opinions in a group setting with others of a similar background/experience.

### Phase 4 Analysis and Reporting

This stage of the evaluation comprised data synthesis, detailed analysis and reporting, and dissemination of findings. The evaluation team used the evidence tables and evaluation matrix (see Annex 6) to systematically collect, collate and continually triangulate the data collected from various sources and from each team member. The reporting phase opened with an analysis workshop at the UNFPA Liaison Office in Brussels between the evaluation team and the evaluation manager. The outputs of the workshop helped the evaluation team to refine initial findings and guide the development of the evaluation report.

On completion of data collection activities, all evidence and data was retained in a secure online location with access only by the evaluation team and evaluation manager. For the purposes of analysis and synthesis of data, and handover of all deliverables, all data has been anonymized - personal identifiers (names, positions etc.) have been removed.

**Data synthesis and analysis:** Throughout the data analysis process, the evaluation team ensured validity and reliability through triangulation, the use of standardized data collection tools, and compliance with OECD/DAC and UNEG standards.

As discussed above, the evaluation team code qualitative interview/discussion data and the outputs of the systematic review of evaluations into meaningful pre-agreed categories based on the evaluation questions and assumptions/indicators, enabling an easy and efficient organization of notes and determining themes or patterns common to KIIs/FGDs and responses that address the specific assumptions and/or indicators.

Data collected was parsed and entered into the evidence tables in a spreadsheet format, to facilitate the allocation of themes across the full datasets. The team then finalized the analysis of the data by extracting the meaning and significance of the coded themes and integrating these with the themes, findings and lessons obtained through data collection.

The team then finalized the analysis of the qualitative KII data by extracting the meaning and significance of the coded themes and integrating these with the themes, findings and lessons obtained through the other data collection methods.

The following specific analytical approaches were used:

- **Descriptive analysis** to understand the contexts in which UNFPA team members related to humanitarian programming
- **Content analysis** will constitute the core of the qualitative analysis. The evaluation team will analyse documents, data interview transcripts, and observations from the field to identify common trends, themes, and patterns for each of the key evaluation questions and criteria.
- **Comparative analysis** will examine findings across different countries, themes, or other criteria. It will also be used to identify good practices, innovative approaches and lessons learned.
- The evaluation team also **triangulated** findings across data collection methods (document review, KII and site visits if feasible/appropriate) where possible to corroborate and increase the quality and credibility of the evaluation findings and conclusions

## Work Plan, Deliverables, Management and Quality Assurance Mechanisms

### Key Deliverables

Deliverables associated with this assignment are as follows. A more detailed description of the deliverable structure is presented in Annex 7.

- Evaluation inception report

Quality assurance included a first draft reviewed by all team members; a second draft reviewed by the evaluation manager; a third draft reviewed by all ERG members, with comments and revisions incorporated for a final draft.

- **Six country briefing notes** (one per field visit country)

Quality assurance included a review of first drafts by all evaluation team members; a country review; and review by the UNFPA evaluation manager. The final draft after the country review will be provided to the ERG, but without expectation of comments from the ERG.

- Two discussion workshops (outputs via PowerPoint presentation)

The evaluation team drafted and finalized the two discussion workshop outputs based on the topics agreed with the ERG during Phase 1. Selection of the topics for the discussion workshops was undertaken by the ERG, discussed above.

- Evaluation final report

The final evaluation report has undergone rigorous quality assurance. An initial zero draft was fully reviewed by all evaluation team members. This was submitted to the UNFPA EO for initial comments to be incorporated into this draft. This zero draft was then shared with ERG members for a first round of comments; this first draft based upon revisions made was shared for a second and final round of comments.

- Summary of evaluation findings (evaluation brief)

The evaluation team worked with the UNFPA evaluation office to produce a professionally edited summary of evaluation findings.

### Field Logistics

Each in-country mission lasted **5-6 working days** with the following qualitative data collection targets:

Table 3 Data collection targets during field missions

	Pilot (Lebanon)	Country 1	Country 2	Country 3	Country 4	Country 5
Days in country	6	6	6	6	6	6
Team	Full evaluation team (and UNFPA evaluation manager)	One evaluator and national specialist	One evaluator and national specialist	One evaluator and national specialist	One evaluator and national specialist	One evaluator and national specialist
Projected KIIs	15-20	15-20	15-20	15-20	15-20	15-20
Projected FGDs	4-5	3-5	3-5	3-5	3-5	3-5
Site Visits	3-4	2-3	2-3	2-3	2-3	2-3

At the end of each mission, the evaluation team conducted a debrief presentation to staff from the country office on the preliminary results of the mission, with a view to validating preliminary findings, identifying and amending errors or gaps and outlining next steps.

Subsequent to each country visit, the evaluation team prepared a **country briefing note** (six including the pilot visit).

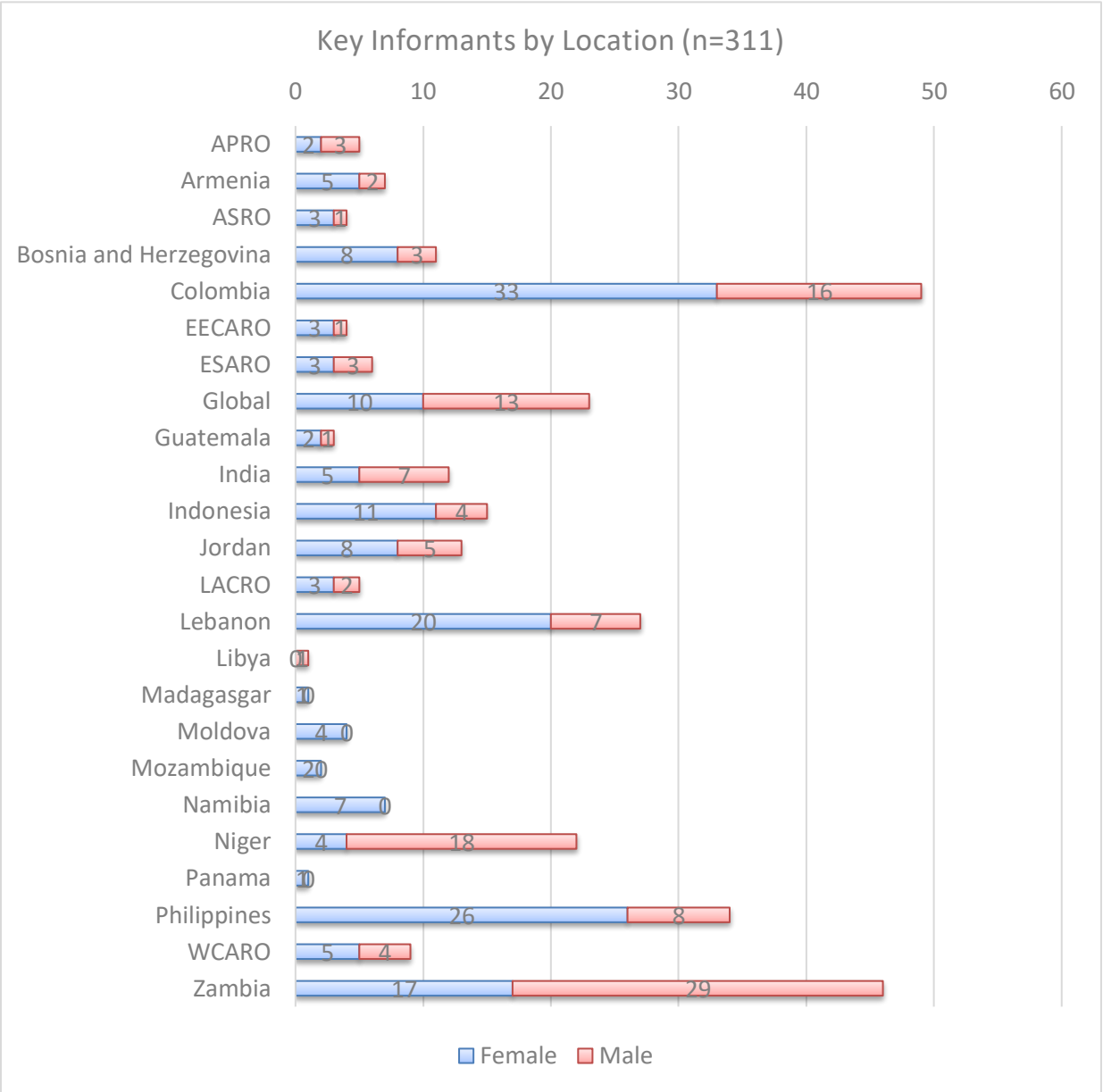


Figure 3: Key Informants by Sex and Location

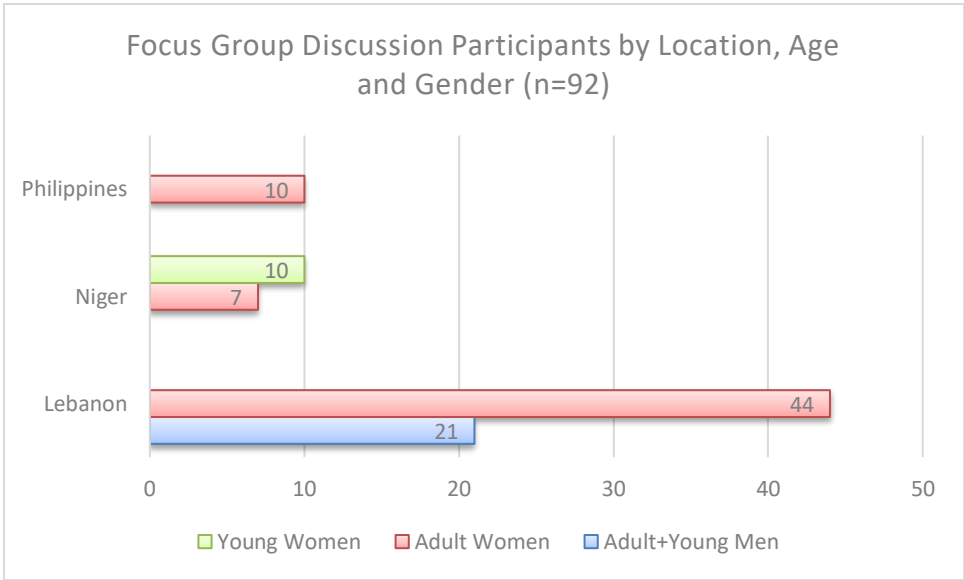


Figure 4: FGD Participants by Location, Age & Gender

## Ethical Approaches and Quality Assurance

The evaluation team ensured that its work complies with standards set by UNFPA Evaluation Office, specifically the *UNFPA Country Programme Evaluation Handbook*, and the *WHO Ethical and Safety Recommendations for Researching, Documenting and Monitoring Sexual Violence in Emergencies*, and with adherence to the principles of independence and impartiality, credibility, and utility,<sup>13</sup> UNEG, and professional associations, such as ALNAP.<sup>14</sup>

Further, the evaluation team ensured the quality of all deliverables through the following means:

Principle	How the evaluation has put principles into practice
<b>Independence &amp; impartiality</b>	<ul style="list-style-type: none"> <li>• <b>A transparent and inclusive evaluation process:</b> The evaluation team visited Bosnia and Herzegovina, Colombia, Lebanon, Niger, Philippines, Zambia and New York (HQ) and conducted remote interviews with stakeholders in the nine other countries, as well as representatives from all regional offices, consulting with 311 stakeholders from UNFPA and other United Nations agencies, governments, partners, NGOs, and donors. The evaluation team also met with XXX community members via FGDs. All responses have been systematically recorded against evaluation questions and coded appropriately. Each interviewee was provided with a background of the evaluation; what the purpose and intended use of the evaluation was to be; how the information provided would be used; and the confidentiality of information provided between the respondent and the evaluation team.</li> </ul>
<b>Clarity</b>	During the inception phase the evaluation team clarified the needs and expectations of UNFPA via the ERG and evaluation manager. Data collection tools were developed from the key evaluation questions and the reconstructed ToC, discussed and reviewed to ensure appropriateness, and finally piloted in Lebanon.
<b>Communication</b>	The evaluation team met regularly to review progress on the assignment and critiqued draft briefs and reports as required. The evaluation team provided regular status progress briefings to the UNFPA evaluation manager to share information on work completed, next steps, as well as any areas of concern such as difficulties, possible solutions, and important events affecting the evaluation.
<b>Credibility</b>	<ul style="list-style-type: none"> <li>• <b>Design and methodological rigour</b> The evaluation inception phase developed an evaluation matrix consisting of nine evaluation questions (covering OECD-DAC evaluation criteria, as best pertains to the evaluation) and 26 associated assumptions. All data received (qualitative and quantitative, and primary and secondary) has been coded against the assumptions.  Country level analysis was performed after each country mission (or remote data collection) and provided the basis for findings, conclusions, and recommendations in country notes, and issues papers. Consolidated data was analysed by the team at a three-day workshop in Brussels and potential synthesis findings were then tested against the data reviewing each data point for support to proposed finding, neutrality, or contradictory to proposed finding. Findings were then verified or adapted as necessary.</li> <li>• <b>Integration of human rights and gender equality and ethics</b> The evaluation team has conducted the evaluation in an ethical manner and taking into account <i>WHO Ethical and Safety Recommendations for Researching, Documenting and Monitoring Sexual Violence in Emergencies</i> and other generalized ethical guidelines. All interviews have been kept confidential within the evaluation team, with respondents being coded with type of organizational affiliation. The evaluation has disaggregated respondents by gender.  In terms of community engagement, FGDs were disaggregated by gender and age, with age categories being 15-24 or 25 and above: no children under 15 were interviewed as per <i>Child Protection Minimum Standards</i> guidance. All FGD participants were informed of the</li> </ul>

<sup>13</sup> UNFPA Internal Document: Concept Dimensions of Evaluation Quality, February 2017.

<sup>14</sup> See <http://www.alnap.org>

	purpose of the discussion, the intended use of the data, the confidentiality of the discussion, and that no person had to answer any question they did not want to answer, and everyone was free to leave at any time (see Annex 1b for FGD methodology).
<b>Timing</b>	The timeline for the evaluation allowed sufficient time for review of all draft deliverables and for revisions to these deliverables to make sure that feedback was acted upon.
<b>Utility</b>	<ul style="list-style-type: none"> <li>• <b><i>Continuous consultation with and participation by key stakeholders.</i></b></li> </ul> <p>The UNFPA evaluation manager joined the evaluation team on the pilot mission to Lebanon (including all evaluation team members) from which the inception report, including the evaluation matrix of evaluation questions and assumptions, the evaluation methodology, including interview questionnaires and FGD methodology, and the reconstructed ToC were finalized.</p> <p>All country visits culminated in a verification debriefing session where emerging findings were discussed and then validated by country office colleagues. Country offices were then provided with a second option to review reports before wider feedback was received from key stakeholders within the ERG only after which reports were finalized. The issues papers were developed on the basis of two remote stakeholder workshops held with key UNFPA stakeholders on July 10 and 11, 2023.</p> <p>Final recommendations were developed in a participatory manner between the evaluation team and a range of key internal UNFPA stakeholders via a workshop in NYC (HQ) on XXX, 2023.</p>

## Primary Research Tools

Key: 1=UNFPA Global; 2=UNFPA RO; 3=UNFPA CO; 4=UN Agency; 5=Donor; 6=Govt partner; 7=NGO partner

### Annex 1a: Key Informant Interview Template

<b>Interviewer:</b>	
<b>Interviewee:</b>	
<b>Job Title:</b>	
<b>Date:</b>	
<b>Location:</b>	

#### Any Background Information:

**EQ1: RELEVANCE:** Before the COVID-19 pandemic, to what extent was UNFPA prepared for responding to global crises

**A1.1** Before COVID-19, UNFPA had organization-wide guidance, contingency plans and risk management processes in place for ensuring safe and timely organizational, programming and resource continuity in case of major disruptions

What, if any, guidance, UNFPA or UN-wide plans, policies or processes related to maintaining business continuity or managing risks in the event of a crisis were you aware of that existed BEFORE the COVID pandemic? How useful (or otherwise) did you feel they were at the time? **(1,2,3,4,6)**

**EQ2: RELEVANCE:** To what extent was UNFPA responsive to the COVID-19 pandemic and successfully adapted its strategies and programmes as the pandemic evolved and needs and priorities changed?

**A2.1** At the onset of and during the pandemic, UNFPA reprioritized and adapted existing country-level programming, repurposed funds and initiated new programming in alignment with COVID-19 response priorities

After the COVID pandemic was declared, did UNFPA change existing programming to bring it more closely in line with national plans and/or responses? If so, how? If not, why not? **(3,4,5,6,7)**

Did UNFPA change existing programming to bring it more closely in line with beneficiary needs? If so, how? How, if it all, did adapted programming seek to focus on the most vulnerable? **(3,4,5,6,7)**

**A2.2** UNFPA reprioritized and adapted corporate (global/regional) plans and strategies in response to COVID-19, while keeping in line with its strategic focus on the three transformative results, human rights and leaving no one behind

How, if at all, did the global/regional response maintain focus on the TR to end preventable maternal deaths by 2030? **(1,2)**

How, if at all, did the global/regional response maintain focus on the TR to meet the needs for family planning? **(1,2)**

How, if at all, did the global/regional response maintain focus on the TR to end GBV and/or harmful practices? **(1,2)**

Did the global/regional response successfully target countries with weaker public health or social support systems? How? If not, why not? **(1,2)**

Did the global/regional response successfully integrate a human rights approach? How? **(1,2)**

**EQ3: EFFECTIVENESS:** To what extent has UNFPA achieved the objectives of the UNFPA Global Response Plan to COVID-19 within the overarching framework of the UNFPA strategic plans 2018-2021 and 2022-2025?

<b>A3.1 UNFPA has ensured continuity of SRH services and interventions in COVID-19-affected programme countries, including protection of the health workforce (GRP strategic priority 1), while ensuring no one is left behind</b>
<p>Was the UNFPA pandemic response at country level successful in maintaining pre-COVID levels of institutional deliveries (in line with the Global Response Plan)? If not, why not? <b>(3,6,7)</b></p> <p>Was UNFPA at country level successful in ensuring continued SRH service delivery and utilization during the pandemic (in line with the Global Response Plan)? If not, why not? <b>(3,4,6,7)</b></p> <p>Was the UNFPA pandemic response at country level successful in addressing the SRH needs of the most vulnerable to COVID (including front-line workers)? How so? <b>(3)</b></p> <p>Was UNFPA COVID-related programming at country level successful in supporting national emergency preparedness measures in SRH? How so? <b>(3,4,5,6,7)</b></p>
<b>A3.2 UNFPA has addressed GBV and harmful practices in COVID-19-affected programme countries (GRP strategic priority 2), while ensuring no one is left behind</b>
<p>Was the UNFPA pandemic response at country level successful in helping addressing the GBV needs of the most vulnerable to COVID (including front-line workers, marginalised, the elderly)? How so? <b>(3,4,6,7)</b></p> <p>Was the UNFPA pandemic response at country level successful in ensuring measures to address GBV and/or harmful practices are included in national preparedness/response/recovery plans (in line with the Global Response Plan)? If not, why not? <b>(3,4,6,7)</b></p> <p>Did the UNFPA pandemic response at country level address the increased risk of GBV and/or harmful practices as a result of the pandemic? How so? Was it successful? <b>(3,4,5,6,7)</b></p>
<b>A3.3 UNFPA has ensured the supply of modern contraceptives and RH commodities in COVID-19-affected programme countries (GRP strategic priority 3), while ensuring no one is left behind</b>
<p>Was the UNFPA pandemic response at country level successful in ensuring access to family planning supplies (i.e. no contraceptive stock-outs &amp; adequate couple-years protection), in line with the Global Response Plan? How so? <b>(3,6,7)</b></p>

<b>EQ4: EFFECTIVENESS: To what extent has UNFPA systematically incorporated and implemented data-driven interventions and successfully engaged young people and supported risk communication and stigma reduction within the framework of its COVID-19 response and recovery efforts?</b>
<b>A4.1 UNFPA COVID-19 strategies/interventions have been designed and managed on the basis of accurate, relevant and timely data initiatives and datasets</b>
<p>What, if any, data collection initiatives did UNFPA develop for or adapt to the COVID pandemic (e.g., censuses, CODs etc.)? <b>(1,2,3,5)</b></p> <p>How effectively were new or revised datasets used in programming? <b>(3,6,7)</b></p>
<b>A4.2 UNFPA has supported risk communication and stigma reduction to achieve its objectives</b>
<p>Has COVID-related stigma been an issue in this country? If so, did UNFPA work to address it? Was this successful? <b>(3,4,5,6,7)</b></p> <p>What risk-communication activities has UNFPA undertaken to contain the spread of the COVID pandemic? How successfully? <b>(3,4,5,6,7)</b></p>
<b>A4.3 UNFPA has empowered and engaged with young people to respond to the pandemic</b>
<p>Do you think that UNFPA supported work has led to common understanding of the health and non-health impacts of COVID among young men/women? If so, how so, if not, why not? <b>(3,4,5,6,7)</b></p> <p>To what extent has UNFPA engaged youth in pandemic-related outreach activities? How successfully? <b>(1,2,3,4,5,6,7)</b></p>

<b>EQ5: COHERENCE: To what extent has UNFPA contributed to synergies and complementarity among COVID-19 responses within the United Nations system?</b>
<b>A5.1 At different levels, UNFPA has successfully promoted SRHR and GBV (including other harmful practices) prevention and response as critical interventions across partner responses to COVID-19</b>
How successfully (if at all) has UNFPA used COVID coordination mechanisms to promote SRHR and GBV/harmful practices in COVID responses? <b>(3,4,5,6,7)</b>
How successfully (if at all) has UNFPA engaged in advocacy and policy dialogue to promote SRHR and GBV/harmful practices in COVID responses? <b>(1,2,3,4,5,6,7)</b>
<b>A5.2 Extent to which UNFPA has initiated and participated in UN joint activities and programmes in response to COVID-19 within the context of its mandate</b>
What new joint programmes/activities on COVID has UNFPA undertaken with other UN agencies? Have ongoing ones been adapted in response to COVID? <b>(1,2,3,4,5,6,7)</b>
Have there been any synergies or efficiencies generated that would not have happened separately? <b>(3,4,5)</b>

<b>EQ6: COHERENCE: To what extent has UNFPA contributed to synergies and complementarity across the humanitarian-development-peace nexus?</b>
<b>A6.1 UNFPA has systematized working across the H-D-P nexus in its COVID-19 response and recovery efforts to address both the immediate public health emergency and the longer-term socio-economic vulnerabilities of programme countries to the COVID-19 pandemic</b>
How well, if at all, did UNFPA COVID programming support integration with and/or complementarity of emergency response and longer term development activities? <b>(1,2,3,4,5,6,7)</b>
<b>A6.2 To what extent did corporate structures and mechanisms ensure/were adapted to ensure regular exchanges and close collaboration among UNFPA development and humanitarian structures in response to COVID-19</b>
Was this programming a result of deliberate UNFPA policies or strategies to maximize complementarity? How so?? <b>(1,2,3,4,5,6,7)</b>

<b>EQ7: EFFICIENCY: At the onset and during the COVID-19 pandemic, to what extent have UNFPA systems, processes and procedures supported a safe and timely and continuous response?</b>
<b>A7.1 UNFPA has protected the health and lives of its staff and their families as well as its partners and maintained capacities to deliver during the pandemic</b>
What duty of care provisions were implemented for UNFPA and/or partner staff as a result of COVID? <b>(1,3,4,6,7)</b>
What outcomes did the duty of care provisions have on staff health and welfare since COVID? <b>(1,3,6,7)</b>
What other measures, if any, did UNFPA take to facilitate maintaining business-as-usual during the pandemic? How successful were they? <b>(1,3,4,5,6,7)</b>
<b>A7.2 At the onset and throughout the challenges presented by the pandemic, ongoing activities have continued and new activities started in a timely and continuous manner</b>
Did UNFPA make use of fast-track procedures to manage the pandemic responses? If so, how successful (or not) were they? <b>(1,2,3,4)</b>
Did UNFPA mobilize sufficient (and timely) financial resources to address the pandemic needs? Why was resource mobilization successful/not successful? <b>(1,3,4,5,6,7)</b>

Was UNFPA able to respond fast enough to the changing needs of national partners and beneficiaries as the pandemic evolved? <b>(3,4,5,6,7)</b>
A7.3 UNFPA adapted existing or introduced new corporate systems for generating programme, financial and management monitoring data and analysis in the context of COVID-19
How were UNFPA programme information systems (monitoring, planning data etc.) adapted (if at all) to the pandemic? <b>(1,3,4,5,6,7)</b>
Were data systems successfully adapted to ensure comprehensive and on-time analysis and reporting? <b>(3,6,7)</b>

EQ8: SUSTAINABILITY: To what extent has the UNFPA response to COVID-19 contributed to strengthening the organization's capacity to anticipate and prepare for responding to disruptions caused by future global crises?
A8.1 UNFPA has sought to generate lessons and learning on organizational resilience and preparedness from its response to the COVID-19 crisis
To what extent has UNFPA enabled learning from the pandemic response activities? <b>(1,2,3)</b>
What, if any, are the important lessons you have learned from the pandemic response? <b>(1,2)</b>
A8.2 UNFPA has sought to apply innovations and experiences from the UNFPA COVID-19 response to organization-wide guidance, contingency plans and risk management processes
Have these lessons been successfully applied to risk management and/or contingency planning/preparedness for future crises? <b>(1,2)</b>

EQ9: SUSTAINABILITY: To what extent has the UNFPA response to COVID-19 contributed to strengthening the organization's programming towards the three transformative results, including support for national emergency preparedness?
A9.1 UNFPA is capturing and applying innovations and experiences from the UNFPA COVID-19 response for its programming
To what extent has UNFPA enabled learning from the pandemic response activities? <b>(3,6,7)</b>
Can you give examples of some of the most important lessons that have been learned in terms of programming? <b>(3,6,7)</b>
Have these lessons contributed to progress on any of the UNFPA transformative results? <b>(3,6,7)</b>
A9.2 The UNFPA nexus approach and investments in national emergency preparedness are benefiting from innovations and experiences from the COVID-19 response
What, if any, preparedness initiatives have emerged during or since the pandemic? <b>(3,6,7)</b>
What, if any, are the additional resources for preparedness that have emerged during or since the pandemic? <b>(1,2,3,5)</b>

## Annex 1b: Focus Group Discussion Template

### UNFPA resilience programming and COVID-19 response evaluation

#### Focus Group Discussion (FGD) Methodology

Community Focus Group Discussions should take place in sex and age disaggregated groups:

- 2x Male Adolescents/Youth: 15-24 (collect ages)
- 2x Female Adolescents/Youth: 15-24 (collect ages)<sup>15</sup>
- 2x Male Adults: 25+ (do not collect ages)
- 2x Female Adults: 25+ (do not collect ages)

Focus Group Discussions should have between 8 and 15 people; in a safe space; *with a gender-appropriate translator who is familiar with the materials before the FGD starts*; and should last for no longer than 1.5 hours.

The general purpose of the FGD methodology within the UNFPA Resilience/COVID-19 Response Evaluation is:

- To understand community experiences during COVID-19, the additional challenges people faced and needs they had;
- To understand people's perceptions of the activities supported by UNFPA in responding to the global COVID-19 pandemic;
- To assess any ongoing changes in behaviours among community members as a result of COVID-19 and the activities supported by UNFPA and its partners.
- To better understand ongoing and developing risks especially under the umbrella of climate change and how local communities are being effected

Introductions:

- The team should introduce themselves (all facilitators within the group, including the translators if present) and a summary of what we would like to talk about, and how the data will be used. The following to be included:
- The FGD is voluntary and nobody will be forced to answer any question they are uncomfortable with (although we encourage everyone to tell us what they would like to tell);
- Everything is confidential – participants are also urged to keep the responses of others confidential;
- We cannot promise any further services or programming based on responses today (not raising expectations).

Introductions: participants to introduce themselves (for younger cohorts, ask for names and ages; for older cohorts ask just for names).

- Record ages for 15-18 and 19-24-year-old groups but no need to record names for either group.

#### **Question Areas:**

##### ***(1) General Situation / Priority Concerns***

- Since the COVID pandemic started here, how did your and your children's/family's health [for SRH beneficiaries] and/or support [for GBV beneficiaries] needs change?
- Did the activities supported by [UNFPA/PARTNER] change to meet these needs?
- What about for vulnerable people (youth, people with disabilities, older people)?

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<sup>15</sup> 15-24 is UN 'youth definition' and it is important to allow young people the opportunity to speak honestly which normally cannot be done in front of the older generation. It is generally considered appropriate to engage adolescents aged 15 and above: CPIE Minimum Standards and other ethical guidelines strongly dissuade interviewing younger children unless there is no other way that particular information can be obtained due to the high risk of doing harm, and then only by evaluators experienced in child protection issues.

WHO Scientific and Research Group ethics of child participation: Parents and guardians have a legal and ethical responsibility to protect very young and dependent adolescents and to provide them with preventative and therapeutic care. If the results of an assessment will lead to an improvement in preventative and therapeutic care then parents/guardians should not oppose assessment. Parents / guardians generally do not have the legal power to overrule older (mature/competent) adolescents who wish to participate. (but local law and parents' understanding of parental rights should be respected). The goal of the assessment must be to obtain information that is relevant to adolescents' health needs and well-being and it must relate to information that could not reliably or accurately be gained from adult sources. The risk of conducting assessment must be considered low in comparison with benefit that will be obtained with the information.

**(2) SRH services**

- [For SRH beneficiaries] Did the activities that [UNFPA/PARTNER] supported during the pandemic help you to continue using the SRH services?
- Did things improve, stay the same or get worse?
- What about for those people who were most vulnerable to COVID? [Prompt - elderly, people with disabilities, health workers]

**(3) GBV issues – prevention and response**

- [For GBV beneficiaries] Did the activities that [UNFPA/PARTNER] supported during the pandemic help you to continue using the GBV/safe space services?
- Did things improve, stay the same or get worse?
- What about for those people who were most vulnerable to COVID? [Prompt - elderly, people with disabilities, health workers]
- Did women face increased risks of violence at home?
- Did the activities supported by [UNFPA/PARTNER] help address this?
- What about for those people who were most vulnerable to COVID? [Prompt - elderly, people with disabilities, service provider workers]

**(4) Effectiveness of UNFPA/Partner Activities**

- Did [UNFPA/PARTNER] undertake or support any activities to reduce the spread of the virus?
- If so, what activities?
- Did you or people you know undertake any of these activities?
- Are you/they still doing so? If so why? If not, why not?
- Did [UNFPA/PARTNER] involve young men and women in the COVID work it was doing?
- If so, please describe the activities.

**(5) Efficiency of the response**

- During the pandemic, did [UNFPA/PARTNER] move quickly enough to meet the needs you had as a result of COVID?
- If not, why do you think not?

**(6) Impact of climate change on peoples' lives**

- Are there any challenges or issues related to changes in climate that you have experienced in your lives in the past few years?
- Prompt/examples: More frequent or severe wildfires, droughts, water shortage, increased daily temperatures, floods, disasters that require movement or migration or reduced agricultural productivity.
- Do you feel that climate change will affect you in the future? If so, how?
- How might UNFPA/[Implementing Partner Name] help you/your community address climate change impacts in the coming years?

## Annex 4: Theory of Change

The reconstructed ToC for the evaluation of resilience programming and COVID-19 response at UNFPA is grounded primarily in the overall mandate and purpose of UNFPA which, since the establishment of UNFPA in 1969, works towards the ‘*realization of reproductive rights for all and supports access to a wide range of sexual and reproductive health services*’.<sup>16</sup> The purpose of UNFPA has been articulated slightly differently across different iterations of its strategic plans, with the overall UNFPA ambition expressed in the UNFPA Strategic Plan for 2022-2025 as three transformative results to be achieved by 2030:

- 1) Ending the unmet need for family planning,
- 2) Ending preventable maternal deaths and
- 3) Ending gender-based violence and harmful practices.”<sup>17</sup>

Cognizant of this important statement, the **goal** (i.e., impact) of the reconstructed ToC for this evaluation links to the above-noted purpose (and including, as the UNFPA strategic approach does, due regard to achievement of the SDGs):

- Universal access to SRH and realization of reproductive rights are achieved (ICPD Programme of Action), and
- Achievement of the SDGs by 2030.

This links to both the UNFPA strategic plans for 2018-2021 and 2021 and is reflected in all UNFPA strategic plans and documents since the strategic plan was launched.

To progress towards the organizational goal, or impact, in the light of crises such as the COVID-19 pandemic, the ToC identifies characteristics of **preparedness** (analogous to baseline conditions that, if adequately present, would contribute to UNFPA being a resilient organization), **inputs/strategies**, **outputs/activities**, and then **outcomes** whilst taking into account **assumptions** and **barriers** given the unprecedented COVID19 pandemic.

Both assumptions and barriers have been restricted to those specific to areas of responsibility and accountability held by UNFPA rather than general barriers and assumptions.

### 1. Preparedness Characteristics (PRE-crisis)

There are six key preparedness characteristics that the evaluation has identified as being features of a resilient organization (in the context of the mandate of UNFPA and its operating context). These reflect best practices in resilience or preparedness, including as articulated in the UNFPA strategic plan, the UNFPA Global Response Plan and the United Nations ORMS (and its foundational policies):

- Timely guidance, contingency plans and risk reviews in place pre-crisis;
- Advocacy and policy dialogue for recognition of the life-saving nature of SRHR, GBV and youth programming in crisis responses;
- Institutionalization of a humanitarian-development-peace nexus approach across the organization (or a “Whole of UNFPA approach”);
- Contribution to inter-agency crisis coordination/ preparedness mechanisms, including within the IASC;
- Support to national emergency response preparedness (including pre-positioning of commodities/PPE);
- Rapid, appropriate and iterative data collection and management;

All of these characteristics are a precondition for effective resilience in the face of crises, and are as such analogous to baseline characteristics. The evaluation team will, to the extent possible, seek to determine the extent to which these were a feature of UNFPA strategies, plans and operations in the pre-COVID period.

### 2. Inputs/strategies (DURING crisis)

Linked to and derived from the preparedness characteristics are five inputs or strategies that UNFPA should have initiated and undertaken at the onset of the COVID-19 crisis to pivot to an appropriate response to the challenges of the crisis response AND safeguard programmatic trajectory towards the transformative results.

- Rapid/ongoing needs analysis, prioritization and planning for at-risk groups with increased vulnerabilities;

<sup>16</sup> <https://www.unfpa.org/about-us>

<sup>17</sup> UNFPA, 2017, Strategy Plan 2018-2021 Annex 2 Theory of Change, Final, 24Jul17

- Contribution to global COVID-19 response coordination complementarity and coherence within the United Nations system and with national response plans on a country basis;
- Humanitarian-development-peace nexus approach systematized across the UNFPA COVID-19 response, recovery actions and resilience building;
- Protection of UNFPA staff, partners and beneficiaries;
- Adaptation of existing programming and implementation of crisis mitigation/response programming.

### 3. Outputs/activities (DURING/POST crisis)

The ToC articulates a further five key outputs or activity areas that directly lead from the inputs or strategies outlined above. All but the last one of these are directly related to the planning, assessments and responses that have been undertaken as a result of the UNFPA mobilization to address the COVID-19 pandemic. The final output is partially related to COVID-19, but overlaps with all other programming also:

- Planned activities are reprioritized, funds and programmes are repurposed and additional resource mobilization successfully conducted;
- Systems, processes and procedures are adapted to ensure a rapid, effective and timely response;
- UNFPA staff and partners' wellbeing and capacity to deliver programming are maintained safely and securely;
- Human rights, leaving no one behind (LNOB), risk and stigma reduction and vulnerable group (people with disabilities, elderly, LGBTQI etc.)/youth engagement incorporated in all UNFPA interventions;
- UNFPA development and humanitarian programmes are evidence-based using up-to-date and accurate/appropriate data.

### 4. Outcomes (POST-crisis)

These outputs lead to three **outcomes** which cover the breadth of response programming as outlined in the UNFPA strategic plans and the Global Response Plan. The first two of these outcomes are directly related to the UNFPA response to COVID-19, whereas the third is a reflection of the effective integration of good practices, lessons learned, improved systems and additional resources both during and subsequent to the crisis:

- Immediate effects of COVID-19 on health and lives are mitigated;
- Continuity of SRH services and interventions, GBV and harmful practices are addressed and the supply of modern contraceptives and RH commodities is ensured;
- Capacity of UNFPA to anticipate and prepare for future crises is strengthened.

These outcomes directly contribute to the three transformative results and ultimately the achievement of the UNFPA global goal and the SDGs.

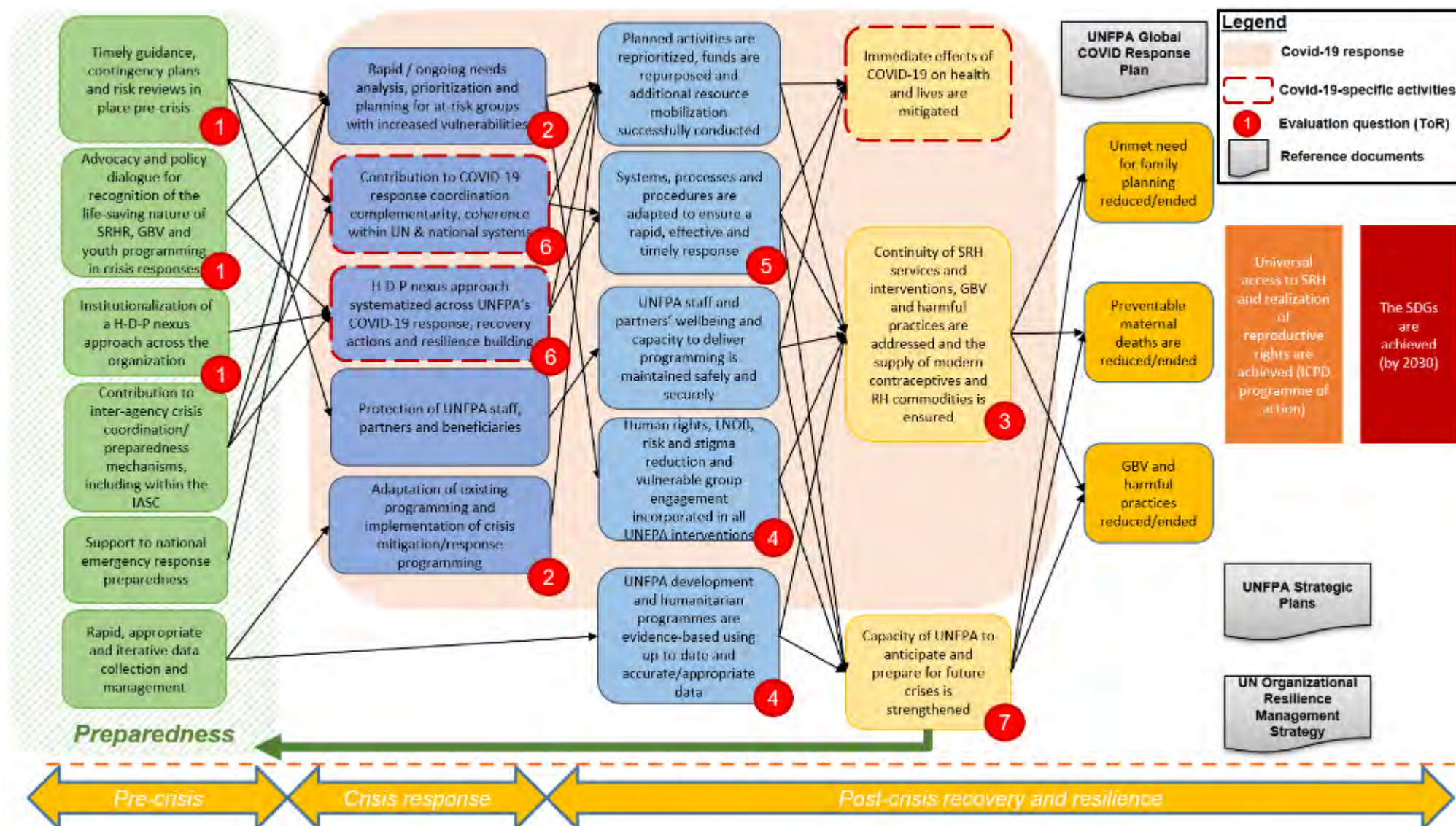
Underpinning the chain of causality from preparedness characteristics to goal are two factors linking to the external and internal (within UNFPA) context of changing understanding of crisis response. Both stem from the 2016 World Humanitarian Summit (WHS). One is the increasing understanding that humanitarian action can no longer be "siloe" from development work or from peace processes, and so it is necessary to ground the ToC within an understanding of the **development-humanitarian-peace nexus**. This is particularly relevant to UNFPA, with an emerging leadership role of working with youth both in the context of preparedness and crisis response and within the context of *UN Security Council resolution 2250* on youth, peace, and security.<sup>18,19</sup>

Secondly, the **overall external humanitarian/crisis response framework** emanating from the WHS - the *Grand Bargain*, the *New Way of Working* and the *Sendai Framework for Disaster Risk Reduction*, including workstreams specifically on localization and accountability - must underpin this ToC to ensure it remains relevant within the system within which it is being applied.

<sup>18</sup> UNFPA developed a specific campaign on youth engagement in COVID19 response, see <https://www.unfpa.org/resources/adolescents-and-young-people-coronavirus-disease-covid-19> and [https://www.unfpa.org/sites/default/files/resource-pdf/YouthAgainstCovid19\\_Campaign.pdf](https://www.unfpa.org/sites/default/files/resource-pdf/YouthAgainstCovid19_Campaign.pdf)

<sup>19</sup> See Section Background and Context, Youth.

Figure 6 Reconstructed Theory of Change



## Annex 5: Evaluation Matrix

Ref	Evaluation Assumptions to be tested	Illustrative Indicators	Desk Review	KII	FGD
EQ1	RELEVANCE: Before the COVID-19 pandemic, to what extent was UNFPA prepared for responding to global crises				
A.1.1	Before COVID-19, UNFPA had organization-wide guidance, contingency plans and risk management processes in place for ensuring safe and timely organizational, programming and resource continuity in case of major disruptions	IND1.1.1: Extent of pre-COVID-19 structures, guidance, plans and processes at different levels for ensuring continuation of UNFPA business functions during crises	x		
		IND1.1.2: Extent to which UNFPA business continuity guidance, plans and processes integrated consideration of at-risk population groups	x		
		IND1.1.3: Extent to which UNFPA business continuity guidance, plans and processes were in line with UN system policies and plans for organizational resilience	x		
		IND1.1.4: Level of awareness of and stakeholder views on organization-wide business continuity guidance, contingency plans and risk management processes pre-COVID-19		x	
A.1.2	Before COVID-19, UNFPA had institutionalized a H-D-P nexus approach to working in fragile and humanitarian settings	IND1.2.1: Extent of pre-COVID-19 corporate policies, guidance and structures integrating humanitarian and development assistance	x		
		IND1.2.2: Extent of pre-COVID-19 engagement in coordination, in advocacy and policy dialogue to leverage partners around integrating SRHR, GBV and youth programming into emergency preparedness	x		
		IND1.2.3: Extent of pre-COVID-19 activities (interventions and funding) supporting the implementation of national emergency preparedness measures	x		
EQ2	RELEVANCE: To what extent was UNFPA responsive to the COVID-19 pandemic and successfully adapted its strategies and programmes as the pandemic evolved and needs and priorities changed?				
A.2.1	At the onset of and during the pandemic, UNFPA reprioritized and adapted existing country-level programming, repurposed funds and initiated new programming in alignment with COVID-19 response priorities	IND2.1.1: Extent to which UNFPA programmes and interventions have aligned to national responses to the pandemic	x	x	
		IND2.1.2: Extent to which UNFPA programmes and interventions have targeted COVID-19-induced beneficiary needs (disaggregated by gender and other characteristics), with a focus on particularly vulnerable groups (e.g., adolescents, people with disabilities, elderly, LGBTQI, IDPs, refugees)	x	x	x

Ref	Evaluation Assumptions to be tested	Illustrative Indicators	Desk Review	KII	FGD
A.2.2	UNFPA reprioritized and adapted corporate (global/regional) plans and strategies in response to COVID-19, while keeping in line with its strategic focus on the three transformative results, human rights and leaving no one behind	IND.2.2.1: Extent to which the global/regional UNFPA response has focused on maintaining achievements and mitigating the impact of the pandemic on progress towards <b>zero preventable maternal deaths</b>	x	x	
		IND.2.2.2: Extent to which the global/regional UNFPA response has focused on maintaining achievements and mitigating the impact of the pandemic on progress towards <b>ending unmet need for family planning</b>	x	x	
		IND.2.2.3: Extent to which the global/regional UNFPA response has focused on maintaining achievements and mitigating the impact of the pandemic on progress towards <b>ending GBV and harmful practices</b>	x	x	
		IND.2.2.4: Extent to which the global/regional UNFPA response has focused on programme countries with especially weak public health and social support systems	x	x	
		IND.2.2.5: Extent to which UNFPA has promoted respect for and protection of human rights, especially of women and young people, during the COVID-19 crisis in policies, advocacy and programming		x	
EQ3	EFFECTIVENESS: To what extent has UNFPA achieved the objectives of the UNFPA Global Response Plan to COVID-19 within the overarching framework of the UNFPA strategic plans 2018-2021 and 2022-2025?				
A.3.1	UNFPA has ensured continuity of SRH services and interventions in COVID-19-affected programme countries, including protection of the health workforce (GRP strategic priority 1), while ensuring no one is left behind	IND3.1.1: Key results achieved in responding to the pandemic and extent to which they contributed to maintaining pre-COVID-19 levels of institutional deliveries (GRP indicator 1.1)	x	x	
		IND3.1.2: Key results achieved in responding to the pandemic and extent to which they have contributed to supporting women and young people to continue utilizing integrated SRH services (GRP indicator 1.2)	x	x	x
		IND3.1.3: Extent to which the UNFPA COVID-19 response has benefited those most vulnerable to COVID-19 and its secondary impacts (disaggregated by gender and other characteristics such as age, disability, role (for workforce))	x	x	x
		IND3.1.4: Extent to which UNFPA COVID-19-related programming supported implementation of national emergency preparedness measures in SRH	x	x	

Ref	Evaluation Assumptions to be tested	Illustrative Indicators	Desk Review	KII	FGD
A.3.2	UNFPA has addressed GBV and harmful practices in COVID-19-affected programme countries (GRP strategic priority 2), while ensuring no one is left behind	IND3.2.1: Key results achieved in responding to the pandemic and extent to which they have contributed to supporting women and girls subjected to violence (including harmful practices) to access essential services (GRP indicator 2.1)	x	x	x
		IND3.2.2: Key results achieved in responding to the pandemic and extent to which they have contributed to including GBV and harmful practices in national preparedness, response and recovery plans for COVID-19 (GRP indicator 2.2)	x	x	
		IND3.2.3: Extent to which the UNFPA COVID-19 response has addressed heightened vulnerabilities to GBV and harmful practices (including among vulnerable groups) as a result of the COVID-19 pandemic	x	x	x
A.3.3	UNFPA has ensured the supply of modern contraceptives and RH commodities in COVID-19-affected programme countries (GRP strategic priority 3), while ensuring no one is left behind	IND3.3.1: Key results achieved in responding to the pandemic and extent to which they have contributed to no contraceptive stock-outs (GRP indicator 3.1)	x	x	
		IND3.3.2: Key results achieved in responding to the pandemic and extent to which UNFPA has procured total couple-years of protection for contraceptives, including condoms (GRP indicator 3.2)	x	x	
EQ4	EFFECTIVENESS: To what extent has UNFPA systematically incorporated and implemented data-driven interventions and successfully engaged young people and supported risk communication and stigma reduction within the framework of its COVID-19 response and recovery efforts?				
A.4.1	UNFPA COVID-19 strategies/interventions have been designed and managed on the basis of accurate, relevant and timely data initiatives and datasets	IND4.1.1: Typology of data collection and analysis activities relevant to COVID-19 (ongoing M&E, censuses, CODs etc.)	x	x	
		IND4.1.2: Nature and extent of UNFPA work to ensure continuity of data collection and analysis activities during COVID-19	x	x	
		IND4.1.3: Extent to which UNFPA-generated data and analyses have been utilized by UNFPA business units and external stakeholders	x	x	
A.4.2	UNFPA has supported risk communication and stigma reduction to achieve its objectives	IND4.2.1: Type and extent to which UNFPA has worked with different stakeholders to reduce COVID-19-related stigma	x	x	
		IND4.2.2 Type and extent of UNFPA risk communication activities to contain the spread of the coronavirus	x	x	x
		IND4.2.3: Extent to which UNFPA-supported action has built knowledge and influenced behaviours related to COVID-19 stigma and risk reduction	x		x

Ref	Evaluation Assumptions to be tested	Illustrative Indicators	Desk Review	KII	FGD
A.4.3	UNFPA has empowered and engaged with young people to respond to the pandemic	IND4.3.1: Extent to which UNFPA has supported a common understanding of the health and non-health impacts of the pandemic on young men and women	x	x	
		IND4.3.2: Extent to which UNFPA has drawn on and has engaged young men and women in COVID-19 pandemic outreach at global, regional and country levels	x	x	x
EQ5	COHERENCE: To what extent has UNFPA contributed to synergies and complementarity among COVID-19 responses within the United Nations system?				
A.5.1	At different levels, UNFPA has successfully promoted SRHR & GBV (including other harmful practices) prevention & response as critical interventions across partner responses to COVID	IND5.1.1: Extent to which UNFPA has successfully promoted inclusion of SRHR, GBV and harmful practices in <b>inter-agency coordination mechanisms</b> for COVID-19	x	x	
		IND5.1.2: Extent to which UNFPA has engaged its partners in COVID-19-related <b>advocacy and policy dialogue</b> with a focus on SRHR, GBV and harmful practices	x	x	
A.5.2	Extent to which UNFPA has initiated and participated in <b>UN joint activities and programmes</b> in response to COVID-19 within the context of its mandate	IND5.2.1: Type and number of joint activities/programmes between UNFPA and other UN agencies	x	x	
		IND5.2.2: Type and extent of synergies or efficiencies generated as a result of joint programming in response to COVID-19	x	x	
EQ6	COHERENCE: To what extent has UNFPA contributed to synergies and complementarity across the humanitarian-development-peace nexus?				
A.6.1	UNFPA has systematized working across H-D-P nexus in its COVID-19 response/recovery efforts to address both immediate public health emergency and longer-term socio-economic vulnerabilities of prog. countries to the pandemic	IND6.1.1: Extent to which UNFPA COVID-19-related programmes and projects addressed immediate public health emergencies and longer-term socio-economic vulnerabilities in a coherent manner (i.e. reached across the nexus)	x	x	
A.6.2	To what extent was programming across the H-D-P nexus an outcome of UNFPA policies, guidance and strategies to ensure integration/complementarity of UNFPA humanitarian and development assistance	IND6.2.1: Extent to which UNFPA corporate policies, guidance and structures have facilitated integration/complementarity of UNFPA humanitarian and development assistance	x	x	
EQ7	EFFICIENCY: At the onset and during the COVID-19 pandemic, to what extent have UNFPA systems, processes and procedures supported a safe and timely and continuous response?				

Ref	Evaluation Assumptions to be tested	Illustrative Indicators	Desk Review	KII	FGD
A.7.1	UNFPA has protected the health and lives of its staff and their families as well as its partners and maintained capacities to deliver during the pandemic	IND7.1.1: Extent to which duty of care provisions were implemented/adapted to COVID-19-related circumstances	x	x	
		IND7.1.2: Extent to which measures were taken to enable staff/partners to continue functioning, including by enabling new ways of working (e.g., home office; upgraded ICT)	x	x	
A.7.2	At the onset and throughout the challenges presented by the pandemic, ongoing activities have continued and new activities started in a timely and continuous manner	IND7.2.1: Extent to which UNFPA activated, adapted and complemented its FTPs (financial operations management; human resources; emergency procurement), and range of experiences with their implementation	x	x	
		IND7.2.2: Extent to which UNFPA (at country, regional and global levels) has mobilized sufficient resources (core and non-core resources), and in a timely fashion	x	x	
		IND7.2.3: Extent to which UNFPA has been able to make time-critical interventions in response to programme government and beneficiary demands	x	x	x
A.7.3	UNFPA adapted existing or introduced new corporate systems for generating programme, financial and management monitoring data and analysis in the context of COVID-19	IND7.3.1: Extent to which programme planning, monitoring and reporting information systems were adapted to inform and account for the UNFPA COVID-19 response	x	x	
		IND7.3.2: Extent to which corporate monitoring systems have ensured timely/robust analysis, reporting on and adjustments to the UNFPA COVID-19 response and recovery actions	x	x	
EQ8	SUSTAINABILITY: To what extent has the UNFPA response to COVID-19 contributed to strengthening the organization's capacity to anticipate and prepare for responding to disruptions caused by future global crises?				
A.8.1	UNFPA has sought to generate lessons and learning on organizational resilience and preparedness from its response to the COVID-19 crisis	IND8.1.1: Extent of organizational feedback mechanisms that solicit or compile learning from the COVID-19 crisis response	x	x	
		IND8.1.2: Types of key organizational lessons learned from the COVID-19 response for improving <b>UNFPA business continuity</b> (structures, guidance, plans and processes)	x	x	
A.8.2	UNFPA has sought to apply innovations and experiences from the UNFPA COVID-19 response to organization-wide guidance, contingency plans and risk management processes	IND8.2.1: Extent to which UNFPA guidance, plans and processes and systems have internalized <b>innovative or good practices</b> from the COVID-19 response	x		
		IND8.2.2: Extent to which UNFPA guidance, plans and processes and systems have internalized improved risk management and/or contingency planning since the COVID-19 pandemic	x	x	
EQ9	SUSTAINABILITY: To what extent has the UNFPA response to COVID-19 contributed to strengthening the organization's programming towards the three transformative results, including support for national emergency preparedness?				

Ref	Evaluation Assumptions to be tested	Illustrative Indicators	Desk Review	KII	FGD
A.9.1	UNFPA is capturing and applying innovations and experiences from the UNFPA COVID-19 response for its programming	IND9.1.1: Types of key lessons learned from the COVID-19 response for improving <b>UNFPA programming</b> , and extent to which they have been captured and disseminated	x	x	
		IND9.1.2: Extent to which lessons have been applied to sustain or accelerate progress towards the transformative results		x	
A.9.2	UNFPA investments in national emergency preparedness are benefiting from innovations and experiences from the COVID-19 response	IND9.2.1: Number and types of preparedness programme initiatives across global/regional/national levels	x	x	
		IND9.2.2: Type and quantity of preparedness resources (human, financial) in place at global/regional/ national levels	x	x	

## Annex 6: Additional Analyses

### Annex 6a: Analysis of 2017 UNFPA Business Continuity Plans (BCPs)

An inventory of UNFPA Business Continuity Plans (BCPs) for all headquarter business units, regional and country offices was shared by the UNFPA Office of Security Coordinator (OSC). The most complete set of BCPs could be found for 2017 for UNFPA country offices. This analysis examined 97 country office BCPs, out of a possible 121<sup>20</sup> (80%).

#### Availability of 2017 BCPs by region<sup>21</sup>

Region	2017 BCP	%	No BCP available	Total
AP	16	70%	7	23
AS	15	100%	-	15
EECA	16	94%	1	17
ESA	21	95%	1	22
LAC	19	90%	2	21
WCA	10	43%	13	23
<b>Total</b>	<b>97</b>	<b>80%</b>	<b>24</b>	<b>121</b>

#### Pandemics or similar included as anticipated disruptions

##### Number of BCPs (% of total possible BCPs) (% of available BCPs)

Region	Y	N	No BCP available	Total
AP	2 (9%) (13%)	14 (61%) (88%)	7 (30%) -	23
AS	-	15 (100%) (100%)	-	15
EECA	-	16 (94%) (100%)	1 (6%) -	17
ESA	11 (50%) (52%)	10 (45%) (48%)	1 (5%) -	22
LAC	5 (24%) (26%)	14 (67%) (74%)	2 (10%) -	21
WCA	4 (17%) (40%)	6 (26%) (60%)	13 (57%) -	23
<b>Total</b>	<b>22 (18%) (23%)</b>	<b>75 (63%) (77%)</b>	<b>24 (18%) -</b>	<b>121</b>

#### Working-from-home modality, even if only for some staff, specified in BCP

##### Number of BCPs (% of total possible BCPs) (% of available BCPs)

Region	Y	N	No BCP available	Total
AP	3 (13%) (19%)	13 (57%) (81%)	7 (30%) -	23
AS	10 (67%) (67%)	5 (33%) (33%)	-	15
EECA	3 (18%) (19%)	13 (76%) (81%)	1 (6%) -	17
ESA	9 (41%) (43%)	12 (54%) (57%)	1 (5%)	22
LAC	4 (19%) (21%)	15 (67%) (79%)	2 (14%) -	21
WCA	-	10 (43%) (100%)	13 (57%) -	23
<b>Total</b>	<b>30 (26%) (31%)</b>	<b>67 (55%) (70%)</b>	<b>24 (18%) -</b>	<b>121</b>

#### Disruptions longer than five weeks foreseen by COs in BCPs

##### Number of BCPs (% of total possible BCPs) (% of available BCPs)

<sup>20</sup> 118 country offices, the Caribbean Sub-regional Office, the Pacific Sub-regional Office, and the Office for the Gulf Cooperation Council. (<https://www.unfpa.org/worldwide>).

<sup>21</sup> The OSC shared their inventory of BCPs, by region. In addition, the evaluation team collected some additional BCPs through the country studies and desk review countries.

Regions	Y	N	n/a	Total
AP	3 (13%) (19%)	13 (57%) (81%)	7 (30%) -	23
AS	1 (7%) (7%)	14 (93%) (93%)	-	15
EECA	-	16 (94%) (100%)	1 (6%) -	17
ESA	1 (5%) (5%)	20 (90%) (95%)	1 (5%) -	22
LAC	5 (24%) (26%)	14 (67%) (74%)	2 (10%) -	21
WCA	1 (4%) (10%)	9 (39%) (90%)	13 (57%) -	23
<b>Total</b>	<b>11 (9%) (11%)</b>	<b>86 (71%) (87%)</b>	<b>24 (20%) -</b>	<b>121</b>

**BCPs with pandemics or similar included as anticipated disruptions**

Country	Pandemic-like reference	Longest disruption foreseen	Work-from-home modality
Angola	Others include natural calamities like pandemics	24 hours, running to days and extending to weeks if not addressed on time	Work-from-home modality for critical personnel
Burundi	pandemic (cholera, malaria)...virus infections	No indication	No work-from-home modality specified
Colombia	pandemias	anticipados para que duren al menos 3 meses	No work-from-home modality specified
Dominican Republic	pandemic (high likelihood/low impact)	No indication	No work-from-home modality specified
Eritrea	natural calamities like pandemics	anticipated to last for at least 24 hours or running into days if not addressed on time	Alternate Work Modalities for other personnel. (Critical personnel will have easy access from the Representative's home location site by use of independent wireless mobile modems to access internet, assigned official phones, satellite phones, VHF Radios)
Lesotho	Others include natural calamities like pandemics	At least 24 hours	Critical personnel will have easy access from home and/or remote location site by use of independent wireless mobile modems to access internet, ISP, assigned official phones, satellite phones, VHF Radio
Mexico	pandemic	24 hours, likely up to 7 days	No work-from-home modality specified
Nicaragua	diseases (pandemic/influenza/zika/dengue)	No indication	No work-from-home modality specified
Nigeria	Pandemics such as Flu influenza, Lassa fever and Ebola	No indication	No work-from-home modality specified
South Sudan	Others include natural calamities like pandemics	24 hours, running to days and extending to weeks if not addressed on time	Alternate Work Modalities for other personnel. (Other personnel will have easy access from home and/or remote location site by use of independent wireless mobile modems to access internet, ISP, assigned official phones, satellite phones, VHF Radios)
Tanzania	epidemic/pandemic	24 hours to weeks	No work-from-home modality specified
Uganda	Others include natural calamities like pandemics	24 hours, running to days and extending to weeks	No work-from-home modality specified

**Annex 6b: UNFPA participation in the UN COVID-19 MPTF**

Country	Theme	Project title	Participating UN entities	Approved budget	Expenditure
<b>Asia &amp; Pacific (Cambodia, Lao PDR, Maldives, Mongolia, Papua New Guinea, Tokelau, Viet Nam)</b>					
Cambodia	Suppress transmission	Strengthened National Preparedness, Response and Resilience to COVID-19 in Cambodia	IOM, <b>UNFPA</b> , UNICEF, WHO	\$200,000	\$200,000
Lao PDR	Suppress transmission	Supporting essential sexual, reproductive, maternal, newborn, child and adolescent health services during COVID-19 in Lao PDR	UNAIDS, <b>UNFPA</b>	\$198,350	\$198,350
Maldives	Mitigate social impact	Protecting women & children: digitalizing & streamlining social services, & creating a unified platform for national care	<b>UNFPA</b> , UNICEF, UNDP	\$127,500	\$90,239
Mongolia	Suppress transmission	Strengthening the national capacity to suppress transmission and maintain essential services in the COVID-19 pandemic in Mongolia	UNESCO, <b>UNFPA</b> , UNICEF, WHO	\$100,000	\$100,000
Papua New Guinea	Suppress transmission	Integrating WASH, Nutrition, MNH interventions for COVID-19 Response in Western Province, Papua New Guinea	IOM, <b>UNFPA</b> , UNICEF	\$332,480	\$320,735
Tokelau	Suppress transmission	Enabling quarantine and isolation capacity on the three atolls, convertible to long-term use post-COVID-19 in line with Tokelau Preparedness & Response Plan for COVID-19	<b>UNFPA</b> , UNDP	\$69,950	\$35,267
Viet Nam	Mitigate social impact	Mitigating the Socio-Economic Impact of COVID-19 in Viet Nam on the Most Vulnerable Groups and Supporting More Resilient Policies and Systems	<b>UNFPA</b> , UNICEF, UNWOMEN, UNDP	\$250,000	\$242,364
<b>Arab States (Morocco)</b>					
Morocco	Suppress transmission	Ensuring the continuity of essential primary healthcare and hospital services for the most vulnerable and developing prevention and hygiene measures for essential non-health sectors during the COVID-19 pandemic in Morocco	<b>UNFPA</b> , UNIDO, WHO	\$600,000	\$600,000
<b>Eastern Europe &amp; Central Asia (Armenia, Georgia, Kosovo, Kyrgyzstan, North Macedonia, Tajikistan, Türkiye, Uzbekistan)</b>					
Armenia	Mitigate social impact	COVID-19 and Resilience in Armenia: Mitigating the Socio-Economic Impact on Vulnerable People and Communities	IOM, <b>UNFPA</b> , UNICEF, UNDP	\$149,907	\$149,907
Georgia	Suppress transmission	Assisting the Georgian Government and Local Communities in Mitigating the Impact of COVID-19	<b>UNFPA</b> , UNICEF, UNDP	\$175,000	\$174,581
Kosovo	Mitigate social impact	Return to (New) Normal: Strengthening resilience through a safe and inclusive return to normality in health and education in Kosovo1 in the wake of COVID-19	<b>UNFPA</b> , UNICEF, UNWOMEN, WHO	\$469,421	\$469,421
Kyrgyzstan	Suppress transmission	Safety First: Securing Health Care Workers and Health Systems in the Response to the Immediate Needs of Vulnerable Populations during COVID-19 in Kyrgyzstan	<b>UNFPA</b> , UNICEF, WHO, UNDP	\$274,990	\$274,990
North Macedonia	Suppress transmission	Safe and Innovative Health Services in Times of COVID-19	<b>UNFPA</b> , UNICEF, WHO	\$350,000	\$341,148
Tajikistan	Suppress transmission	Strengthening health system in Tajikistan to prepare and respond to COVID-19	<b>UNFPA</b> , UNICEF	\$65,185	\$64,499
Turkey	Suppress transmission	Promoting innovative service provision models to support the health system response to Covid-19	<b>UNFPA</b> , WHO	\$598,463	\$597,912

Country	Theme	Project title	Participating UN entities	Approved budget	Expenditure
Uzbekistan	Mitigate social impact	Support to Early Recovery and Inclusive Service Delivery for Vulnerable Groups Heavily Affected by the COVID-19 Crisis in Uzbekistan	IOM, <b>UNFPA</b> , UNICEF, UNDP	\$185,110	\$173,110
<b>Eastern &amp; Southern Africa (DRC, Eswatini, Lesotho, Malawi)</b>					
DRC	Mitigate social impact	Concerted action with forcibly displaced women, girls and host communities against consequences of the COVID-19 crisis	<b>UNFPA</b> , UNHCR, UNWOMEN	\$361,647	\$359,329
Eswatini	Suppress transmission	Supporting The Eswatini Government's Urgent Need In Responding To The Covid 19 Health & Food Emergency	<b>UNFPA</b> , UNICEF, WHO	\$130,000	\$130,000
Lesotho	Suppress transmission	UN support to control spread and minimize the social-economic impact of COVID-19 in Lesotho	<b>UNFPA</b> , UNICEF, WHO, UNDP	\$109,680	\$102,054
Malawi	Suppress transmission	Covid-19 Emergency Response for Continuity of Maternal and New-born Health Services in Malawi	<b>UNFPA</b> , UNWOMEN, WHO	\$700,400	\$615,312
<b>Latin America &amp; the Caribbean (Belize, Brazil, Dominican Republic, Guatemala, Honduras, Jamaica, Peru, Uruguay)</b>					
Belize	Suppress transmission	COVID-19 response to vulnerable population and frontline workers in Belize	ILO, <b>UNFPA</b> , UNHCR, PAHO/WHO	\$32,635	\$32,268
Brazil	Suppress transmission	Supporting emergency measures and recovery actions to tackle COVID-19 in the indigenous territories in the Amazon Region	UNESCO, <b>UNFPA</b> , UNWOMEN, PAHO/WHO	\$100,580	\$100,580
Dominican Republic	Mitigate social impact	Protección de la población más vulnerable a través del análisis de necesidades en tiempo real - intervenciones adaptadas	FAO, <b>UNFPA</b> , UNICEF, WFP, UNDP	\$105,936	\$105,894
Guatemala	Mitigate social impact	Implementation of the Gender Responsive Integrated National Household Social Registry for Guatemala	<b>UNFPA</b> , OHCHR, UNICEF, UNDP	\$245,565	\$239,834
Guatemala	Suppress transmission	Support to the Guatemalan Humanitarian Response Plan to COVID-19	IOM, <b>UNFPA</b> , UNICEF, PAHO/WHO	\$50,000	\$49,555
Honduras	Suppress transmission	Saving Lives in COVID-19 Times in Honduras	<b>UNFPA</b> , PAHO/WHO	\$300,006	\$300,006
Jamaica	Suppress transmission	Suppress Transmission of COVID-19 and Save Lives in Jamaica	<b>UNFPA</b> , PAHO/WHO	\$111,066	\$111,066
Peru	Mitigate social impact	Saving lives and protecting the rights of indigenous Amazonian women in the COVID-19 response	<b>UNFPA</b> , WFP, PAHO/WHO	\$250,000	\$249,359
Uruguay	Mitigate social impact	Strengthening a gendered and generational socioeconomic response through evidence-based policy advocacy and analyses	<b>UNFPA</b> , UNICEF, UNWOMEN, UNDP	\$189,176	\$188,989
<b>West &amp; Central Africa (Cameroon, Gambia, Ghana, Liberia)</b>					
Cameroon	Mitigate social impact	Support To Jobs, The Resilience Of The Small Enterprises And Informal Workers During And Beyond The Covid19 In Cameroon	ILO, UNHABITAT, UNESCO, <b>UNFPA</b>	\$202,536	\$192,392
Gambia	Suppress transmission	Increased capacity of the Government and the Communities to suppress transmission and mitigate the impact of COVID-19 in The Gambia	<b>UNFPA</b> , UNICEF, UNOPS	\$259,560	\$250,290
Ghana	Suppress transmission	Addressing gaps in Ghana's Pandemic Response for the most vulnerable populations	<b>UNFPA</b> , UNICEF, WHO, UNDP	\$242,193	\$240,853
Liberia	Recover better	Building Back a Resilient Health System Responsive to the needs of women, children and adolescents	IOM, <b>UNFPA</b> , UNICEF, WHO	\$379,050	\$377,907

## Annex 6c: Analysis of COVID-19-relevant programme expenses, 2020-2021

Table 1: Total UNFPA programme expenses by relevance to COVID-19 response, 2020, (US\$ millions)

COVID-19 Response	Regular resources	Other resources	Total	In % of total
5-Primarily COVID-19 response (100%)	25.0	44.2	69.2	6.7
4-Significantly COVID-19 response (75%)	13.7	39.4	53.1	5.2
3-Moderately COVID-19 response (50%)	21.7	65.6	87.3	8.5
2-Marginally COVID-19 response (25%)	38.2	121.8	160.0	15.6
1-Not related to COVID-19 response (0%)	138.8	519.6	658.4	64.0
<b>Total expenses (1-5)</b>	<b>237.4</b>	<b>790.6</b>	<b>1,028.0</b>	<b>100.0</b>
<b>Aggregated share of COVID-19 expenses (2-5)*</b>	<b>55.67</b>	<b>137.0</b>	<b>192.7</b>	<b>18.7</b>

Source: UNFPA. Statistical and financial review, 2020. \*Evaluation team based on GPS tagging percentages

Table 2: Total UNFPA programme expenses by relevance to COVID-19 response, 2021, (US\$ millions)<sup>22</sup>

COVID-19 Response	Regular resources	Other resources	Total	In % of total
5-Primarily COVID-19 response (100%)	11.1	48.8	59.9	5.5
4-Significantly COVID-19 response (75%)	15.7	30.3	46.0	4.2
3-Moderately COVID-19 response (50%)	25.2	62.2	87.4	8.0
2-Marginally COVID-19 response (25%)	47.1	160.8	207.9	19.2
1-Not related to COVID-19 response (0%)	150.1	535.1	685.2	63.1
<b>Total expenses (1-5) (US\$)</b>	<b>249.2</b>	<b>837.2</b>	<b>1,086.4</b>	<b>100.0</b>
<b>Aggregated share of COVID-19 expenses (2-5)*</b>			<b>190.1</b>	<b>17.5</b>

Source: UNFPA. Statistical and financial review, 2021. \*Evaluation team based on GPS tagging percentages

Table 3: Total UNFPA programme expenses by relevance to COVID-19 response, 2020-2021, (US\$ millions)<sup>23</sup>

COVID-19 Response	Regular resources	Other resources	Total	In % of total
5-Primarily COVID-19 response (100%)	36.1	93.0	129.1	6.1
4-Significantly COVID-19 response (75%)	29.4	69.7	99.1	4.7
3-Moderately COVID-19 response (50%)	46.9	127.8	174.7	8.2
2-Marginally COVID-19 response (25%)	85.3	282.6	367.9	17.4
1-Not related to COVID-19 response (0%)	288.9	1054.7	1,343.6	64.0
<b>Total expenses (1-5)</b>	<b>486.6</b>	<b>1,627.8</b>	<b>2,114.4</b>	<b>100.0</b>
<b>Aggregated share of COVID-19 expenses (2-5)*</b>	<b>102.9 (21.1%)</b>	<b>279.8 (17.2%)</b>	<b>382.8</b>	<b>18.1%</b>

Source: UNFPA. Statistical and financial review, 2020; UNFPA. Statistical and financial review, 2021. \*Evaluation team based on GPS tagging percentages

Table 4: UNFPA programme expenses by relevance to COVID-19 response, 2020, ESA region, (US\$ millions)

COVID-19 Response	Regular resources	Other resources	Total	In % of total
5-Primarily COVID-19 response (100%)	2.7	9.8	12.5	6.1
4-Significantly COVID-19 response (75%)	2.1	6.6	8.7	4.3
3-Moderately COVID-19 response (50%)	2.8	11.6	14.4	7.1

<sup>22</sup> Expenses for institutional budget and corporate are excluded.

<sup>23</sup> Expenses for institutional budget and corporate are excluded.

2-Marginally COVID-19 response (25%)	10.5	25.2	35.7	17.6
1-Not related to COVID-19 response (0%)	33.6	98.5	132.1	64.9
<b>Total (1-5) (US\$)</b>	<b>51.7</b>	<b>151.7</b>	<b>203.4</b>	<b>100.0</b>
<b>Aggregated share of COVID-19 expenses (2-5)*</b>			<b>27.653</b>	<b>13.595</b>

Source: UNFPA. Statistical and financial review, 2020; UNFPA. Statistical and financial review, 2021. \*Evaluation team based on GPS tagging percentages

*Table 5: UNFPA programme expenses by relevance to COVID-19 response, 2021, ESA region, (US\$ millions)*

COVID-19 Response	Regular resources	Other resources	Total	In % of total
5-Primarily COVID-19 response (100%)	1.6	11.1	12.7	5.8
4-Significantly COVID-19 response (75%)	1.3	5.6	6.9	3.1
3-Moderately COVID-19 response (50%)	3.6	17.0	20.6	9.4
2-Marginally COVID-19 response (25%)	14.1	36.1	50.2	22.8
1-Not related to COVID-19 response (0%)	34.5	95.4	129.9	58.9
<b>Total (1-5) (US\$)</b>	<b>55.1</b>	<b>165.2</b>	<b>220.3</b>	<b>100.0</b>
<b>Aggregated share of COVID-19 expenses (2-5)*</b>			<b>40,725</b>	<b>18.486</b>

Source: UNFPA. Statistical and financial review, 2020; UNFPA. Statistical and financial review, 2022. \*Evaluation team based on GPS tagging percentages

*Table 6: UNFPA programme expenses by relevance to COVID-19 response, 2020, WCA region, (US\$ millions)*

COVID-19 Response	Regular resources	Other resources	Total	In % of total
5-Primarily COVID-19 response (100%)	2.8	5.7	8.5	5.0
4-Significantly COVID-19 response (75%)	2.4	13.3	15.7	9.2
3-Moderately COVID-19 response (50%)	2.3	13.1	15.4	9.0
2-Marginally COVID-19 response (25%)	9.2	23.1	32.3	18.9
1-Not related to COVID-19 response (0%)	31.3	67.7	99.0	57.9
<b>Total (1-5) (US\$)</b>	<b>48.0</b>	<b>122.9</b>	<b>170.9</b>	<b>100.0</b>
<b>Aggregated share of COVID-19 expenses (2-5)*</b>			<b>36.05</b>	<b>21.094</b>

Source: UNFPA. Statistical and financial review, 2020; UNFPA. Statistical and financial review, 2021. \*Evaluation team based on GPS tagging percentages

*Table 7: UNFPA programme expenses by relevance to COVID-19 response, 2021, WCA region, (US\$ millions)*

COVID-19 Response	Regular resources	Other resources	Total	In % of total
5-Primarily COVID-19 response (100%)	0.8	7.9	8.7	4.6
4-Significantly COVID-19 response (75%)	4.6	9.5	14.1	7.6
3-Moderately COVID-19 response (50%)	4.2	13.8	18.0	9.7
2-Marginally COVID-19 response (25%)	14.5	45.7	60.2	32.3
1-Not related to COVID-19 response (0%)	24.9	60.6	85.5	45.8
<b>Total (1-5) (US\$)</b>	<b>49.0</b>	<b>137.5</b>	<b>186.5</b>	<b>100.0</b>
<b>Aggregated share of COVID-19 expenses (2-5)*</b>			<b>43.325</b>	<b>23.230</b>

Source: UNFPA. Statistical and financial review, 2020; UNFPA. Statistical and financial review, 2022. \*Evaluation team based on GPS tagging percentages

*Table 8: UNFPA programme expenses by relevance to COVID-19 response, 2020, AS region, (US\$ millions)*

COVID-19 Response	Regular resources	Other resources	Total	In % of total
5-Primarily COVID-19 response (100%)	1.8	8.5	10.3	4.7
4-Significantly COVID-19 response (75%)	0.5	6.4	6.9	3.2
3-Moderately COVID-19 response (50%)	1.3	16.4	17.7	8.1
2-Marginally COVID-19 response (25%)	1.8	29.7	31.5	14.4
1-Not related to COVID-19 response (0%)	18.1	134.4	152.5	69.6
<b>Total (1-5) (US\$)</b>	<b>23.5</b>	<b>195.4</b>	<b>218.9</b>	<b>100.0</b>
<b>Aggregated share of COVID-19 expenses (2-5)*</b>			<b>32.2</b>	<b>14.709</b>

Source: UNFPA. Statistical and financial review, 2020; UNFPA. Statistical and financial review, 2021. \*Evaluation team based on GPS tagging percentages

*Table 9: UNFPA programme expenses by relevance to COVID-19 response, 2021, AS region, (US\$ millions)*

COVID-19 Response	Regular resources	Other resources	Total	In % of total
5-Primarily COVID-19 response (100%)	0.7	2.9	3.6	1.8
4-Significantly COVID-19 response (75%)	0.3	4.7	5.0	2.4
3-Moderately COVID-19 response (50%)	1.5	8.6	10.1	5.0
2-Marginally COVID-19 response (25%)	2.3	26.1	28.4	13.9
1-Not related to COVID-19 response (0%)	23.1	134.3	157.4	76.9
<b>Total (1-5) (US\$)</b>	<b>27.9</b>	<b>176.6</b>	<b>204.5</b>	<b>100.0</b>
<b>Aggregated share of COVID-19 expenses (2-5)*</b>			<b>19.5</b>	<b>9.535</b>

Source: UNFPA. Statistical and financial review, 2020; UNFPA. Statistical and financial review, 2022. \*Evaluation team based on GPS tagging percentages

*Table 10: UNFPA programme expenses by relevance to COVID-19 response, 2020, AP region, (US\$ millions)*

COVID-19 Response	Regular resources	Other resources	Total	In % of total
5-Primarily COVID-19 response (100%)	8.4	13.0	21.4	14.5
4-Significantly COVID-19 response (75%)	2.9	5.5	8.4	5.7
3-Moderately COVID-19 response (50%)	4.4	7.5	11.9	8.1
2-Marginally COVID-19 response (25%)	6.3	13.9	20.2	13.7
1-Not related to COVID-19 response (0%)	30.8	54.9	85.7	58.0
<b>Total (1-5) (US\$)</b>	<b>52.8</b>	<b>94.8</b>	<b>147.6</b>	<b>100.0</b>
<b>Aggregated share of COVID-19 expenses (2-5)*</b>			<b>38.7</b>	<b>26.219</b>

Source: UNFPA. Statistical and financial review, 2020; UNFPA. Statistical and financial review, 2021. \*Evaluation team based on GPS tagging percentages

*Table 11: UNFPA programme expenses by relevance to COVID-19 response, 2021, AP region, (US\$ millions)*

COVID-19 Response	Regular resources	Other resources	Total	In % of total
5-Primarily COVID-19 response (100%)	6.1	19.1	25.2	14.1
4-Significantly COVID-19 response (75%)	4.3	4.6	8.9	5.0

3-Moderately COVID-19 response (50%)	3.9	8.3	12.2	6.9
2-Marginally COVID-19 response (25%)	5.9	18.6	24.5	13.8
1-Not related to COVID-19 response (0%)	36.2	71.0	107.2	60.2
<b>Total (1-5) (US\$)</b>	<b>56.4</b>	<b>121.6</b>	<b>178.0</b>	<b>100.0</b>
<b>Aggregated share of COVID-19 expenses (2-5)*</b>			<b>44.1</b>	<b>24.775</b>

Source: UNFPA. Statistical and financial review, 2020; UNFPA. Statistical and financial review, 2022. \*Evaluation team based on GPS tagging percentages

*Table 12: UNFPA programme expenses by relevance to COVID-19 response, 2020, LAC region, (US\$ millions)*

COVID-19 Response	Regular resources	Other resources	Total	In % of total
5-Primarily COVID-19 response (100%)	7.0	3.9	10.9	17.4
4-Significantly COVID-19 response (75%)	2.8	5.4	8.2	13.0
3-Moderately COVID-19 response (50%)	4.7	5.3	10.0	15.9
2-Marginally COVID-19 response (25%)	3.3	5.7	9.0	14.3
1-Not related to COVID-19 response (0%)	9.7	15.1	24.8	39.4
<b>Total (1-5) (US\$)</b>	<b>27.5</b>	<b>35.4</b>	<b>62.9</b>	<b>100.0</b>
<b>Aggregated share of COVID-19 expenses (2-5)*</b>			<b>24.3</b>	<b>38.632</b>

Source: UNFPA. Statistical and financial review, 2020; UNFPA. Statistical and financial review, 2021. \*Evaluation team based on GPS tagging percentages

*Table 13: UNFPA programme expenses by relevance to COVID-19 response, 2021, LAC region, (US\$ millions)*

COVID-19 Response	Regular resources	Other resources	Total	In % of total
5-Primarily COVID-19 response (100%)	1.6	1.8	3.4	5.4
4-Significantly COVID-19 response (75%)	2.7	2.4	5.1	8.1
3-Moderately COVID-19 response (50%)	5.4	5.4	10.8	17.1
2-Marginally COVID-19 response (25%)	3.5	7.0	10.5	16.6
1-Not related to COVID-19 response (0%)	13.1	20.3	33.4	52.8
<b>Total (1-5) (US\$)</b>	<b>26.3</b>	<b>36.9</b>	<b>63.2</b>	<b>100.0</b>
<b>Aggregated share of COVID-19 expenses (2-5)*</b>			<b>15.25</b>	<b>24.129</b>

Source: UNFPA. Statistical and financial review, 2020; UNFPA. Statistical and financial review, 2022. \*Evaluation team based on GPS tagging percentages

*Table 14: UNFPA programme expenses by relevance to COVID-19 response, 2020, EECA region, (US\$ millions)*

COVID-19 Response	Regular resources	Other resources	Total	In % of total
5-Primarily COVID-19 response (100%)	2.1	1.4	3.5	5.6
4-Significantly COVID-19 response (75%)	1.0	1.4	2.4	3.8
3-Moderately COVID-19 response (50%)	2.4	7.4	9.8	15.6
2-Marginally COVID-19 response (25%)	3.0	17.5	20.5	32.6
1-Not related to COVID-19 response (0%)	8.7	-17.9	26.6	42.4
<b>Total (1-5) (US\$)</b>	<b>17.2</b>	<b>45.6</b>	<b>62.8</b>	<b>100.0</b>

Aggregated share of COVID-19 expenses (2-5)*			15.325	24.402
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Source: UNFPA. Statistical and financial review, 2020; UNFPA. Statistical and financial review, 2021. \*Evaluation team based on GPS tagging percentages

Table 15: UNFPA programme expenses by relevance to COVID-19 response, 2021, EECA region, (US\$ millions)

COVID-19 Response	Regular resources	Other resources	Total	In % of total
5-Primarily COVID-19 response (100%)	0.3	1.8	2.1	3.5
4-Significantly COVID-19 response (75%)	0.1	2.1	2.2	3.7
3-Moderately COVID-19 response (50%)	1.8	4.1	5.9	9.9
2-Marginally COVID-19 response (25%)	3.4	18.4	21.8	36.5
1-Not related to COVID-19 response (0%)	10.5	17.2	27.7	46.4
<b>Total (1-5) (US\$)</b>	<b>16.1</b>	<b>43.6</b>	<b>59.7</b>	<b>100.0</b>
Aggregated share of COVID-19 expenses (2-5)*			12.15	20.351

Source: UNFPA. Statistical and financial review, 2020; UNFPA. Statistical and financial review, 2022. \*Evaluation team based on GPS tagging percentages

Table 16: Aggregated share of COVID-19 programme expenses\*, by region, 2020-2021, (US\$ millions)

Region	Total 2020	% 2020	Total 2021	% 2021	Total 2020-2021
AP	38.7	26.2	44.1	24.8	82.8
WCA	36.1	21.1	43.3	23.2	79.4
ESA	27.7	13.6	40.7	18.5	68.4
AS	32.2	14.7	19.5	9.5	51.7
LAC	24.3	38.6	15.3	24.1	39.6
EECA	15.3	24.4	12.2	20.4	27.5

Tables 20-31 above. \*Evaluation team based on GPS tagging percentages

Table 17: Programme budget by strategic plan outcome, 2020-2021

2018-2021 strategic plan outcome areas	Total Budget	COVID-related Budget	COVID-related in % of Total
SRH	1,535,029,607.00	276,105,385.26	18.00%
Gender equality	596,774,502.40	116,042,657.77	19.44%
Youth empowerment	201,874,445.00	33,318,836.02	16.50%
Population and development	183,986,754.60	27,775,009.70	15.10%

Source: Evaluation team from Atlas/GPS data, retrieved July 2022

Table 32: Budget, by fund type, 2020-2022

Fund type	2020		2021		2022		2020-2022	
	Total	COVID-related	Total	COVID-related	Total	COVID-related	Total	COVID-related
<b>Earmarked</b>								
Not related	631,958,985.50	-	693,855,545.80	-	663,148,221.30	-		
Empty	2,109,119.88	-	-	-	-	-		
Marginally related	145,194,661.20	36,298,665.30	189,583,946.20	47,395,986.55	168,075,556.00	42,018,889.00		
Moderately related	76,402,137.03	38,201,068.52	73,320,946.17	36,660,473.09	51,754,406.88	25,877,203.44		
Significantly related	48,818,893.17	36,614,169.88	39,168,418.82	29,376,314.12	31,854,668.92	23,891,001.69		
Primarily related	68,354,845.49	68,354,845.49	52,150,249.97	52,150,249.97	22,829,355.92	22,829,355.92		
<b>Total Earmarked</b>	<b>972,838,642.27</b>	<b>179,468,749.19</b>	<b>1,048,079,106.96</b>	<b>165,583,023.73</b>	<b>937,662,209.02</b>	<b>114,616,450.05</b>	<b>2,958,579,958.25</b>	<b>459,668,222.97</b> <b>15.54%</b>
<b>Un-Earmarked</b>								
Not related	150,502,615.60	-	159,557,599.40	-	181,734,904.70	-		
Empty	710,936.60	-	-	-	955,077.00	-		
Marginally related	42,326,679.32	10,581,669.83	49,141,045.19	12,285,261.30	55,937,426.33	13,984,356.58		
Moderately related	23,216,357.33	11,608,178.67	27,161,150.08	13,580,575.04	27,608,884.55	13,804,442.28		
Significantly related	14,625,683.97	10,969,262.98	15,289,657.89	11,467,243.42	12,088,962.51	9,066,721.88		
Primarily related	29,939,244.64	29,939,244.64	9,590,097.67	9,590,097.67	1,960,722.17	1,960,722.17		
<b>Total Un-Earmarked</b>	<b>261,321,517.46</b>	<b>63,098,356.12</b>	<b>260,739,550.23</b>	<b>46,923,177.43</b>	<b>280,285,977.26</b>	<b>38,816,242.91</b>	<b>802,347,044.95</b>	<b>148,837,776.46</b> <b>18.55%</b>
<b>Total</b>		<b>242,567,105.31</b>						

Source: Atlas/GPS data, retrieved July 2022

## Annex 6d: COVID-19 in Country Programme Evaluations 2020-2022

As part of the systematic review of CPEs conducted as part of this evaluation, evaluations commissioned after the onset of the pandemic were reviewed for their integration of COVID-19 learning elements, notably around lessons learned and recommendations made. The following table notes the extent to which the 17 relevant CPEs have undertaken this:

Table 18: UNFPA Country Programme Evaluations 2020-2023 - COVID-19 Learning Elements

Year	Title	COVID-19 Learning Elements
<b>2020</b>	Évaluation du 9eme programme de pays du fonds des Nations Unies pour la population (UNFPA) Maroc - 2017-2021.	Good analysis of COVID-19 challenges covering 2020. Few lessons learned and good practices captured. One related recommendation.
<b>2021</b>	UNFPA Afghanistan. 4th Country Programme 2015 – 2021	Good analysis of COVID-19 challenges covering 2020. A number of lessons learned and good practices captured.
	Evaluation of the 4th UNFPA Country Programme for Albania (2017-2021)	Good analysis of COVID-19 challenges covering 2020. Some lessons learned and good practices captured.
	Government of the Gambia/UNFPA 8th Country Programme: [2017-2021]: Final Evaluation Report	Good analysis of COVID-19 challenges covering 2020 and 2021. Some lessons learned and good practices captured.
	Evaluation of the 6th UNFPA Iran Country Programme 2017-2021	Extensive analysis of COVID-19 challenges covering 2020 and first months of 2021. Extensive coverage of lessons learned and good practices.
	Evaluation of the 4th UNFPA Country Programme for Kyrgyzstan (2018-2022)	Extensive analysis of COVID-19 challenges covering 2020. Several lessons learned and good practices captured. One related recommendation.
	UNFPA Country Programme Evaluation Lao PDR	Good analysis of COVID-19 challenges covering 2020. No significant learning from COVID-19 articulated.
	GoM/UNFPA 9 th Country Programme Evaluation: Mozambique	Some analysis of COVID-19 challenges covering 2020 and 2021. No significant learning from COVID-19 articulated.
	Evaluation du 7è programme de pays, Sao Tome et Principe: 2017-2021	Good analysis of COVID-19 challenges covering 2020 and 2021. No significant learning from COVID-19 articulated.
	Country Programme Evaluation Somalia 2018-2020	Good analysis of COVID-19 challenges covering 2020. Few lessons learned and good practices captured.
	UNFPA CPE Syria: 8th Country Programme 2016 - 2018	Good analysis of COVID-19 challenges covering 2020. Two related recommendations.
	Evaluation of the UNFPA Eleventh Country Programme of Assistance to the Royal Thai Government. CP11 (2017-2021)	Good analysis of COVID-19 challenges covering 2020. Few lessons learned and good practices captured.
	Government of Zimbabwe/UNFPA 7th Country Programme 2016 – 2020 Evaluation	Good analysis of COVID-19 challenges covering 2020. Few lessons learned and good practices captured.
<b>2022</b>	Joint independent Common Country Programme evaluation: The Republic of Cabo Verde	Some analysis of COVID-19 challenges covering 2020 and 2021. No significant learning from COVID-19 articulated.
	Evaluation of the Government of Ghana/ United Nations Population Fund (UNFPA) Ghana 7th Country Programme (2018 – 2022)	Good analysis of COVID-19 challenges covering 2020, 2021 and some of 2022. No significant learning from COVID-19 articulated.
	United Nations Population Fund (UNFPA) Nigeria 8th Country Programme (2018 – 2022): Final Evaluation Report	Good analysis of COVID-19 challenges covering 2020 and 2021. No significant learning from COVID-19 articulated.
	Evaluation of the Government of the United Republic of Tanzania/UNFPA 8 <sup>th</sup> Country Programme(2016/17 – 2021/22)	Good analysis of COVID-19 challenges covering 2020 and 2021. No significant learning from COVID-19 articulated.

## Annex 6e: COVID-19 in Global Evaluations/Assessments 2020-2022

Since the emergence of the pandemic, UNFPA, through the Evaluation Office has conducted a variety of global-level evaluations or assessments that, to a greater or lesser extent, incorporated elements of learning from the COVID-19 pandemic. The evaluators examined the extent to which these have sought to contribute to learning around COVID-19 for UNFPA, summarized in the following table:

Table 19: UNFPA Corporate Evaluations 2020-2023 - COVID-19 Learning Elements

Year	Title	COVID-19 Learning Elements
2020	Formative evaluation of UNFPA approach to South-South and triangular cooperation	Limited to 2-3 areas for UNFPA consideration as pandemic evolved.
	Evaluation of the UNFPA support to the HIV response (2016-2019)	No COVID-19 learning (maybe too early for inclusion).
	Joint evaluability assessment of the Global Action Plan for Healthy Lives and Well-being for All	Six sub-findings on the Global Action Plan relevance in light of COVID-19.
	Joint report on the evaluability assessment of the common chapter to the strategic plans of UNDP, UNFPA, UNICEF and UN Women	No COVID-19 learning (maybe too early for inclusion).
2021	UNFPA Regional Programme Evaluation for East and Southern Africa Regional Office (2018–2021)	Extensive analysis of regional and country COVID-19 responses, results, learning and recommended ESARO explore opportunities for integrating good practices arising from the COVID-19 response in programming.
	Joint evaluation of the UNFPA-UNICEF Joint Programme on the Elimination of Female Genital Mutilation: Accelerating Change Phase III (2018-2021)	Extensive analysis of how the Joint Programme adapted to COVID-19 and its impact on FGM, including documenting of lessons and good practices.
	Joint assessment of the adaptations of the Global Programme to end Child Marriage in light of COVID-19	Documenting good practices and lessons was a core element of this research.
	Evaluation of the UNFPA Regional Interventions Action Plan for Arab States 2018-2021	Analysed ASRO response to COVID-19, Framed lessons in terms of challenges/gaps resulting from COVID-19.
	Evaluation of UNFPA support to gender equality and women's empowerment (2012-2020)	Documented UNFPA response to COVID-19, challenges highlighted and a variety of lessons/good practices documented.
2022	Formative evaluation of the UNFPA engagement in the reform of the United Nations development system (UNDS)	Limited exploration of impact of COVID-19 response on UNFPA collaboration internally and within the UNDS.
	Mid-term evaluation of the Maternal and Newborn Health Thematic Fund Phase III 2018-2022	Extensive analysis and documentation of lessons and practices from the COVID-19 response, although no recommendations regarding these.
	Joint evaluation of the UN Joint Programme on AIDS's work on efficient and sustainable financing	No significant learning from COVID-19 noted.
	Baseline and evaluability assessment on generation, provision and utilization of data in humanitarian assistance	Extensive analysis of COVID-19 related data initiatives and one related recommendation.
2023	Formative evaluation of UNFPA support to adolescents and youth	Good analysis of relevant COVID-19 work at global, regional, country levels, with good practices, innovations and multiple related recommendations
	Evaluation of UNFPA support to population dynamics and data	Some analysis of COVID-19 challenges to 2020 census round and UNFPA responses, with a selection of lessons/good practices documented.

## Annex 6f: Organizational Resilience Management System Key Performance Indicators

### Policy:

- Entity ORMS policy is promulgated.
- Policy document(s) integrate the different planning instruments and are harmonized (with other applicable standards).

### Governance:

- Availability of designated programme manager for ORMS.
- Coordination structure for crisis management defined and established at all necessary levels with senior level chairing the crisis management structure.
- Inclusion of all relevant UN entities in the crisis management coordination and response.
- Crisis management structure meets at least annually.

### Maintenance, exercise and review:

- ORMS awareness raising materials available for all personnel.
- All members of the crisis management structure should receive ORMS training.
- Maintenance, exercise and review (ME&R) programme implemented.

### Application:

- Leveraging existing tools, implementation of a policy which is in alignment with the HLCM Reference Maturity Model for Risk Management.
- Updating risk registers on a regular basis.
- The risk assessment includes operational risk such as security risks, medical risks, IT disaster recovery risks, business continuity risks etc.
- Risks are identified during ORMS planning, assessed, and the implementation of treatment plans is managed.

### Planning:

- Safety and security of personnel, premises and assets.
- Crisis management.
- Business continuity.
- ICT resilience.
- Crisis communications.
- Emergency medical support.
- Support to UN personnel and eligible family members.
- The above plans are harmonized.
- Frequency of plan reviews and updates.

## Annex 6g: Joint Inspection Unit Recommendations on Business continuity management in United Nations system organizations

**Recommendation 1:** The executive heads of the United Nations system organizations should, by the end of 2023, review their business continuity management framework and ensure that the core elements identified in the present report are established and owned by relevant stakeholders to enable effective coordination of business continuity processes and practices, build coherence in their implementation and promote accountability at all levels.

**Recommendation 2:** The executive heads of the United Nations system organizations should, by the end of 2023, ensure that the maintenance, exercise and review components of their business continuity plans are applied through a consistent and disciplined approach to confirm that the plans remain relevant and effective.

**Recommendation 3:** The executive heads of the United Nations system organizations should, by the end of 2023, strengthen their learning mechanisms to contribute to organizational resilience by requiring after-action reviews following disruptive incidents and periodic internal management reviews of their business continuity management frameworks.

**Recommendation 4:** The executive heads of the United Nations system organizations should, by the end of 2024, report to their legislative organs and governing bodies on the implementation of the policy on the organizational resilience management system and its revised performance indicators<sup>[24]</sup>, and highlight good practices and lessons learned, especially in the area of business continuity management.

**Recommendation 5:** In 2023, the executive heads of the United Nations system organizations should conduct an internal management assessment of the continuity of business operations during the COVID-19 pandemic to identify gaps, enablers, good practices and lessons learned and adjust policies, processes and procedures, in particular in areas such as human resources, information and communications technology management and occupational safety and health, and indicate the necessary measures to better prepare and respond to future disruptive events.

**Recommendation 6:** The legislative organs and governing bodies of United Nations system organizations should consider, at the earliest opportunity, the conclusion of the internal management assessment of the continuity of operations during the COVID-19 pandemic prepared by the executive heads of their respective organizations and, on that basis, take appropriate decisions to address the identified gaps and risks and to ensure continuity of business operations.

## Annex 7: List of Evaluation Key Informants

Name	Job Title	Agency	Duty Station
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Amadou	Programme Manager	APBE	Niger
Ana Lillian Maldonado	Ops Manager	UNFPA	Guatemala
Ana Luisa Rivas	UNFPA Deputy Representative	UNFPA	Guatemala
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Anna Hovhannisyan	PD Programme Analyst	UNFPA	Armenia
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Avani Singh	Communications & Media Analyst	UNFPA	India
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Bjorn Andersson	Regional Director	UNFPA	APRO
Borrry jatta	Regional Humanitarian Adviser	UNFPA	WCARO
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## Annex 8b: UNFPA Global and Regional COVID-19-Related Publications

The following table notes the range of UNFPA publications of practices, lessons etc that have been published at global and regional levels. It does not include situation reports or individual country reporting or publications. Other publications related to COVID-19 learning (notably at global level) are available within via other UNFPA business units (e.g., the Evaluation Office website) and are not necessarily reflected here.

KEY LEARNING Publications	Pandemic Pivot: Achieving Transformative Results in the COVID-19 Pandemic (January 2021) Resilience in Action: Lessons Learned from the Joint UNFPA/UNICEF Programme on FGM during the COVID-19 crisis (September 2020) COVID-19: UNFPA Best Practices and Lessons Learned in Humanitarian Operations in the Arab Region (October 2020) Amidst the COVID-19 Pandemic, Midwives Save Lives – ESARO (2020) Thinking Out of the Box: A Collection of Innovative Case Studies from UNFPA and Partners in ESARO (2021)
	Adapting to the New Normal: Insights and lessons learned from the UNFPA response to the COVID-19 pandemic in the Arab Region (2022) Programming in the Time of the COVID-19 Pandemic: Stories of Hope and Ingenuity (2021). Compendium of Good Practices during the COVID-19 Pandemic for SRH of girls with disabilities (June 2021) State obligations regarding SRHR and GBV and response during the COVID-19 pandemic, Reflections and lessons learned (APRO, 2023)

### Publications by Business Unit

Unit	Publication (UNFPA only – does not include jointly with other UN agencies)
Global	COVID-19 Disrupting SDG 5.3: Eliminating Female Genital Mutilation (April 2020)
	Impact of the COVID-19 Pandemic on Family Planning and Ending Gender-based Violence, Female Genital Mutilation and Child Marriage (April 2020)
	Adolescents and Young People & Coronavirus Disease (COVID-19) (March 2020)
	Interim Technical Brief - Sexual and Reproductive Health and Rights, Maternal and Newborn Health & COVID-19 (March 2020)
	Technical Brief - COVID-19: A Gender Lens. Protecting Sexual and Reproductive Health and Rights, and Promoting Gender Equality (March 2020)
	Gender Equality and Addressing Gender-based Violence (GBV) and Coronavirus Disease (COVID-19) Prevention, Protection and Response. (March 2020)
	Sexual and Reproductive Health and Rights: Modern Contraceptives and Other Medical Supply Needs, Including for COVID-19 Prevention, Protection and Response. (March 2020)
	Technical Brief on the Implications of COVID-19 on Census (March 2020)
	COVID-19 Technical Brief for Family Planning Services (2020)
	COVID-19 Technical Brief for Antenatal Care Services (April 2020)
	COVID-19 Technical Brief for Maternity Services (April 2020)
	Protecting Midwives to Sustain Care for Women, Newborns and their Families in the COVID-19 Pandemic (May 2020)
	COVID-19 Technical Brief for Postnatal Care Services (April 2020)
	UNFPA COVID-19 Regional Technical Guidance on Older Persons (April 2020)
	Implications of COVID-19 for Older Persons: Responding to the Pandemic (Global Technical Guidance) (April 2020)
	COVID-19: A Gender Lens - Protecting Sexual And Reproductive Health And Rights, And Promoting Gender Equality (March 2020)
	COVID-19 Technical Brief Package for Maternity Services. Interim Guidance. Update 2. (July 2020)
	2021 MHTF Annual Report: Strengthening Health System Resilience in the COVID-19 Era (2021)
	How will the COVID-19 pandemic affect births? (2021)
	How will COVID-19 impact fertility? (2021)
	Pandemic Pivot: Achieving Transformative Results in the Covid-19 Pandemic (2021)

	Protecting Girls From Child Marriage During COVID-19 and Always: The UNFPA–UNICEF Global Programme to End Child Marriage (2021)
<b>APRO</b>	<p>COVID-19 and Older People in Asia-Pacific; 2020 in Review (2020)</p> <p>The Impact of COVID-19 on Human Fertility in the Asia-Pacific Region (2020)</p> <p>Easy Read: Gender Disability Sexual and Reproductive Health and Rights Checklist during Covid-19 (2022)</p> <p>Counting What Matters: Maternal and Perinatal Death Surveillance and Response systems in Asia-Pacific during the COVID-19 pandemic (2022)</p> <p>State obligations regarding SRHR and GBV and response during the COVID-19 pandemic, Reflections and lessons learned (2023)</p> <p>Are governments investing in caring and just economies? A gender and human rights assessment of COVID-19 fiscal stimulus measures in Asia and the Pacific (2023)</p>
<b>ASRO</b>	<p>Gender-Based Violence Donor Advocacy Brief on Critical Services During COVID-19 (2020)</p> <p>Ageing and COVID-19 in the Arab region: Leaving no one behind (2020)</p> <p>LEAVING NO ONE BEHIND: Did the response to COVID-19 accommodate the needs of persons with disability? Perspective from the Arab World (2021)</p> <p>Child Marriage in the context of COVID-19 (2021)</p> <p>Adapting to the New Normal: Insights and lessons learned from the UNFPA response to the COVID-19 pandemic in the Arab Region (2022)</p> <p>Adapting to the New Normal - Insights and lessons learned from the UNFPA response to the COVID-19 pandemic in the Arab Region (2023)</p>
<b>EECARO</b>	<p>Turning the Tide? A brief for UNFPA's Regional Office for Eastern Europe and Central Asia (2021)</p> <p>The impact of COVID-19 on sexual and reproductive health in Eastern Europe and Central Asia (2022)</p>
<b>ESARO</b>	<p>Gender-Based Violence and COVID-19: Actions, Gaps and the Way Forward (June 2020)</p> <p>A Rapid Scoping Assessment of the Impact of COVID-19 on Sex Worker Programmes in East and Southern Africa (2020)</p> <p>Amidst the COVID-19 Pandemic, Midwives Save Lives (2020)</p> <p>Thinking Out of the Box: A Collection of Innovative Case Studies from UNFPA and Partners (2021)</p>
<b>LACRO<sup>25</sup></b>	<p>COVID-19: A Gender Approach (March 2020)</p> <p>Implications of COVID-19 on the Afro-descendant population of Latin America and the Caribbean (April 2020)</p> <p>Implications of COVID-19 on the indigenous peoples of Latin America and the Caribbean (April 2020)</p> <p>Sexual and Reproductive Health Care and Family Planning during the COVID-19 health emergency in Latin America and the Caribbean (April 2020)</p> <p>Policy Brief on the Effects of COVID-19 in Latin America and the Caribbean (July 2020)</p> <p>The Impact of COVID-19 on access to contraceptives in Latin America and the Caribbean (2020)</p> <p>Impact of Covid-19 on the borders of MERCOSUR and prospecting scenarios in terms of livelihoods for youth (2021)</p> <p>Challenges for advancing the 2030 Agenda in Latin America and the Caribbean in the framework of COVID-19 (2021)</p> <p>Rapid diagnosis of the determinants and contributing factors to the increase in maternal and perinatal mortality during the COVID-19 pandemic in the Latin American and Caribbean region (2022)</p>
<b>WCARO</b>	<p>Reproductive, Maternal, Newborn and Adolescent Health During Pandemics: Lessons Learned for Practical Guidance (2020)</p> <p>Meaningful Adolescent and Youth Engagement (MAYE) during responses to epidemics and pandemics (2021)</p> <p>Strengthening Resilience For Sexual And Reproductive Health In West And Central Africa (2022)</p>

<sup>25</sup> Documents & Publications in Spanish – titles translated to English

**Annex 8c: UNFPA Country Programme Evaluations Included in Systematic Review**

Country	Evaluation Name	Year Published
<b>Afghanistan</b>	UNFPA Afghanistan. 4TH Country Programme 2015 – 2021: Final Evaluation Report	May-21
<b>Albania</b>	Evaluation of the 4th UNFPA Country Programme for Albania (2017-2021): Evaluation Report	Jan-21
<b>Cabo Verde</b>	Joint Independent Common Country Programme Evaluation: The Republic Of Cabo Verde	Jul-22
<b>Gambia</b>	Government Of The Gambia/UNFPA 8th Country Programme: [2017-2021]: Final Evaluation Report	Sep-21
<b>Ghana</b>	Evaluation Of The Government Of Ghana/ United Nations Population Fund (UNFPA) Ghana 7th Country Programme (2018 – 2022): Final Evaluation Report	Mar-22
<b>Iran</b>	Evaluation Of The 6th UNFPA Iran Country Programme 2017-2021: Evaluation Report	28-Jul-21
<b>Kyrgyzstan</b>	Evaluation of the 4th UNFPA Country Programme for Kyrgyzstan (2018-2022): Final Evaluation Report	Sep-21
<b>Lao PDR</b>	UNFPA Country Programme Evaluation Lao PDR	Jan-21
<b>Morocco</b>	Évaluation Du 9eme Programme Pays Du Fonds Des Nations Unies Pour La Population (UNFPA) Maroc - 2017-2021. Rapport final	Dec-20
<b>Mozambique</b>	GoM/UNFPA 9 th Country Programme Evaluation: Mozambique	Jun-21
<b>Nigeria</b>	United Nations Population Fund (UNFPA) Nigeria 8th Country Programme (2018 – 2022): Final Evaluation Report	Apr-22
<b>Sao Tome</b>	Evaluation Du 7è Programme De Pays, Sao Tome Et Principe: 2017-2021	Sep-21
<b>Somalia</b>	Country Programme Evaluation Somalia 2018-2020	Aug-20
<b>Syria</b>	UNFPA CPE Syria: 8th Country Programme 2016 - 2018	Dec-20
<b>Tanzania</b>	Evaluation Of The Government Of The United Republic Of Tanzania/ United Nations Population Fund 8th Country Programme (2016/17 – 2021/22): Evaluation Report Final	Mar-22
<b>Thailand</b>	Evaluation of the UNFPA Eleventh Country Programme of Assistance to the Royal Thai Government. CP11 (2017-2021): Final Report	May-21
<b>Zimbabwe</b>	Government of Zimbabwe/UNFPA 7th Country Programme 2016 – 2020 Evaluation: Final Evaluation Report	Feb-21

## Annex 8d: Selected UNFPA Climate Change Resources

### UNFPA Strategic Plan 2022 – 2025

This acknowledges the priority of climate change and the need to address its implications. It shows an understanding of climate change links to other mega-trends such as population/ demographic changes. Responsibility for shaping local and operational response is devolved to countries. The policy statement on climate change is broad and does not disaggregate climate change by impact type or area. Regional and country strategic plans are no more specific.

### UNFPA Climate Change Strategy 2022- 2025

UNFPA has developed a multi-pronged programme of action outlined in the Value Proposition of Climate Change that sets four key programmatic areas of work:

1. Investing in a healthy empowered population including women, girls and young people
2. Strengthening and build more climate-resilient health and protection
3. Ensuring better preparedness and response in emergencies including DRR, strengthening systems and services that can meet the sexual and reproductive health and rights needs of those impacted, displaced and at risk of climate crises.
4. Building stronger data systems for climate vulnerability, ensuring climate-related vulnerability assessments and actions are informed by disaggregated population, health and gender data

### The Climate Change Value Proposition

This statement sets out four priorities and notes that climate resilience should be rights-focused, gender-sensitive and people-centred:

1. Healthy, empowered populations including women, girls and young people
2. Climate-resilient health, protection and education systems
3. Risk reduction, enhanced preparedness and strengthened emergency response
4. Strong data systems for climate vulnerability and adaptive capacity

### Existing UNFPA work that addresses climate hazard impacts

The Summary Report of UNFPA works on Climate Change 2019-2022 sets out a comprehensive list of UNFPA activities that are affected by and include entry points for work on, climate change, as follows:

- [Technical Work and evidence generation](#) (conferences/workshops, research partnerships, the [UNFPA and the Climate Crisis Value Proposition](#) (and associated [FAQ](#)) which sets out the UNFPA approach to climate change management and articulates the links between climate change and the UNFPA mandate areas.
- [Data and population vulnerability mapping](#) (Common Operational Datasets, vulnerability mapping, Population Risk and Resilience Assessment Framework, Gender and Environment Data Alliance)
- [Programmatic interventions](#) (Safeguard Young People regional youth programme, Youth engagement and Joint Youth Working Group on SRHR and Climate Change, Youth Engagements at COP 26, the 2021 UNFPA Climate HackLab initiative)
- [Preparedness responses in humanitarian settings](#) (2021 revision of the MPA Guidance, taking into consideration new IASC guidance on ERP and post-2015 Disaster Risk Reduction Framework)
- [Corporate accountability framework](#) (Second generation humanitarian response strategy, the UNFPA programme accountability framework and the new Strategic Plan 2022-2025)

- **Environmental Efficiency Standard** (Since 2014, UNFPA has been carbon neutral, by purchasing Certified Emission Reductions to offset the emissions it cannot reduce, he 2021 UNFPA Environmental Efficiency Strategy, reflecting the UN 2030 vision for sustainable management)
- **Social Environmental Standard** (Social and Environmental Standards in Programming which are a set of standards in eight thematic areas including on climate change)
- **Advocacy, Political Mobilization and Coalition Building** (UNFPA prepared an advocacy document on the impact of climate change on the transformative results with dynamic infographics to support UNFPA engagement in the run-up to COP26)
- **Resource Mobilization**
- **Partnerships** (Work with governments, UN agencies, Academia, Donors, and other development partners to better understand population dynamics, how they affect the changing climate and how people can become resilient in the face of these changes)



## **Driving evidence-based actions**

Delivering rights and choices for all

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