



Independent evaluation of the capacity of UNFPA in humanitarian action 2019-2025

Evaluation Report

Volume 2



UNFPA Independent Evaluation Office

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Disclaimer on the use of artificial intelligence (AI)

This report incorporates the use of artificial intelligence (AI) technologies to enhance and support content analysis in the data-collection and analysis phase of the evaluation. The AI tools used in this report adhere to UNFPA's AI Use Clause, ensuring ethical and responsible use, transparency, validation of results, and compliance with relevant internal regulations. For more details on the specific AI methodologies and tools used and on the validation of AI-generated analysis and the ethical safeguards applied, see Annex III.

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Annex I: Selection of countries for evaluation

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

1. Regional balance

The evaluation selected one country per UNFPA region for direct field visits and balanced the desk review countries across regions.

2. Humanitarian context

- *INFORM Severity Index*: Preference given to countries marked High and Medium
- *Type of crisis*: A mix of conflict, natural disaster and complex/combined crises (including acute/protracted crises).

3. UNFPA response

- *UNFPA humanitarian funding*: The level of total humanitarian funding reported via the Humanitarian Action Overviews from 2019–2023 was considered. A mix of response scales/sizes using the total humanitarian funding 2019–2023 as a proxy measure was used (e.g. 2x top third size, 2x middle third, 2x smallest third).
- *Proportion of funding needs met*: The average proportion of funding needs met from 2019–2023 according to the CERF funding tracker was considered to ensure a mix of well-funded vs. underfunded responses.

4. Previous evaluative evidence.

Countries with CPEs conducted in 2023 and 2024, which already include humanitarian response-related evidence, were excluded. Preference given to countries not used in any other interagency humanitarian evaluations in this period also.

Balancing criteria

5. Country context

The evaluation included a cross-section of country typologies.

- Country Tier in SP 2022–2025: Preference given to Tier I and II countries.
- *INFORM Climate Risk Index*: A balance of medium–very high risk countries.
- Income level (including MICs, LDCs, LLDCs, SIDS).

6. Other factors

- Logistical feasibility of field mission, i.e. travel time, security (for field visit countries only – countries that meet the criteria but were not feasible due to logistics were prioritised for extended desk reviews).
- ERG feedback (subjective judgements on quality/availability of data, representativeness of the mix of countries in regions, etc).

Annex II: Expanded methodology

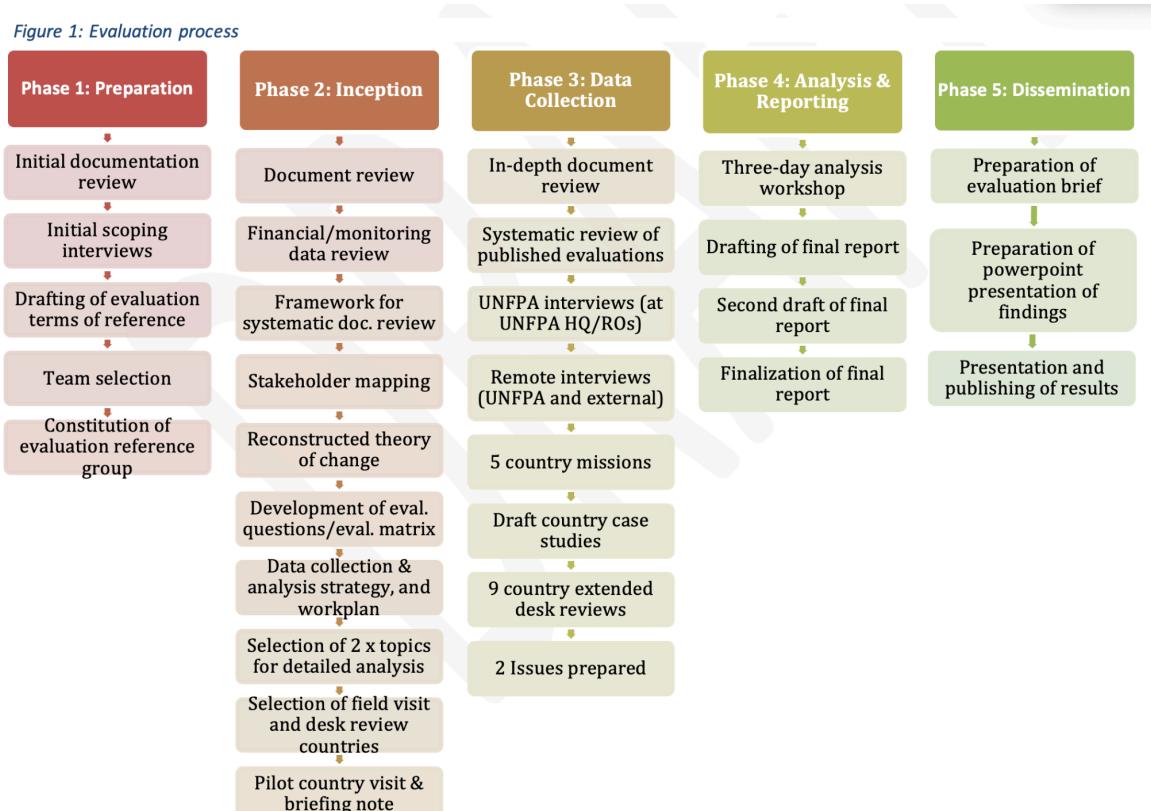
Evidence for this evaluation (both qualitative and quantitative) has been collected through a range of methodologies, including:

- Key informant interviews (see Annex IX for list of key informants).
- Desk review of documentation and data (see Annex VIII for a list of documentation and datasets reviewed).
- Field and site visits to locations of UNFPA humanitarian response programming.
- Community-based focus-group discussions (FGDs).

The evaluation was conducted in accordance with the United Nations Evaluation Group (UNEG) *Norms and Standards for Evaluations*, the UNEG *Ethical Guidelines for Evaluations*, 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 following principles:

- **Consultation** with, and participation by, key stakeholders
- **Methodological rigor** to ensure that the most appropriate sources of evidence for answering the evaluation questions are used in a technically appropriate manner
- **Technical expertise and expert knowledge** to ensure that the assignment benefits from knowledge and experience in the fields of gender-based violence (GBV) and sexual and reproductive health and rights (SRHR)
- **Independence** to ensure that the findings stand solely on an impartial and objective analysis of the evidence.

Figure 1: Evaluation process



The evaluation follows five phases as outlined in the ToR and expanded upon in the evaluation Inception Report. The five phases are presented in summary in the following graphic.

Departures from the Terms of Reference and Inception Report

The evaluation, in as much as possible, adheres to the purpose, objectives and provisions of the original ToR and restated in the Inception Report. 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. Further, one primary data collection tool (the online staff survey) was removed in place of a secondary global staff survey that covered similar areas. No other changes were made.

Sampling

Geographical Sampling: Regions and Countries

The evaluation applied a multi-stage sampling process for selection of countries to participate in the evaluation, combining stratified and purposing sampling approaches. Initially, all countries where UNFPA had undertaken humanitarian response operations between 2019 and 2024 (103 in total) were included in the group from which the sample was drawn. An initial shortlist of 20 countries was developed taking into account the selection criteria to ensure a cross-section of country typologies. The full set of criteria, including the indicators used, can be found in Annex I.



Figure 2: Country-based sampling process

Primary criteria

- UNFPA region – one per region for field visit, 1-2 for extended desk review.
- A mix of humanitarian crises – complex, refugee/IDP, substantial response/smaller responses.
- INFORM crisis severity and climate risk.
- UNFPA programme delivery – mix of high/low, met and unmet funding needs.
- Previous evaluative evidence: no UNFPA CPE and not a case study in global evaluations in the last 12 months.

Balancing criteria

- Range of country typologies: preference to Tier I countries, variety of income typologies.
- Countries flagged by ERG members as of particular interest (subjective judgement).
- Logistical feasibility of field mission (travel time, security – for field visit countries only).

The second stage of sampling involved one-on-one scoping discussions with ERG members to explore individual perceptions of either specific criteria that were of greater significance for UNFPA, particular countries that might present useful data or indeed countries that could be excluded using the above, or other, criteria (such as the availability of staff, institutional memory etc.). The following countries were selected in consultation with the ERG, building on analysis of the portfolio of UNFPA humanitarian response countries. Note that some “high profile” humanitarian response countries (Afghanistan, Yemen, Palestine, Sudan, Haiti, Ethiopia) in terms of resources and operation scale were not selected for this evaluation due to not meeting the required criteria (most notably participation in evaluations conducted in the past year).

Countries in **BOLD*** were in-person field visits (one per UNFPA region), the remaining countries were the subject of extended desk reviews.

Table 1: Evaluation Research Countries

APRO	ASRO	EECARO	ESARO	LACRO	WCARO
Bangladesh	Egypt	Moldova	Uganda	Colombia	Chad
Myanmar	Somalia	Ukraine	Burundi	Peru	Burkina Faso
	Syria		Madagascar	Venezuela	

Geographical Sampling: Programme Site Visits

As part of the planning for country visits, 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 served as examples of UNFPA-supported programming (e.g., clinics, women/girls' safe spaces if relevant, camps, 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.

Key Issues Papers – Issue Sampling

As part of the original ToR, and based on consultation and feedback from ERG members, the evaluation team identified two issues to be expanded upon in the evaluation via standalone internal analysis papers. The full list of suggested topics and the underlying sampling criteria and approach to the issues are presented in the evaluation Inception Report. The final discussion topics selected in consultation with the ERG (at the first meeting of the ERG with the evaluation team) and in consultation with ERG members one-on-one and with other UNFPA technical experts to be the most **insightful** and **forward-looking** for UNFPA as an organization and for future programming were:

- Topic 1: Resource mobilization and resource allocation
- Topic 2: Preparedness & Anticipatory Action

Key Informant Sampling

The evaluation utilized a **purposive sampling** approach to select key informants, shortlisting global, regional, and internal/external stakeholders based on their engagement levels in the six field visit and nine desk review countries. Additionally, a **snowball sampling** technique was employed at all levels, where interviewees were asked to identify further relevant key informants.

The key informant sampling process began with a stakeholder mapping exercise initiated by the IEO and subsequently including the ERG membership to prepare a list of (primarily internal) key informants at global and regional levels.

On finalization of the geographical sample, stakeholder mapping exercises of key informants at country levels were undertaken in consultation with UNFPA staff, and interview shortlists shared with country focal points to ensure logistical feasibility.

Rights-Holder Sampling

The evaluation utilized a combination of purposive and convenience sampling approaches for Focus

Group Discussions to gather insights directly from community members. Participants for these discussions were selected to form sex and age-disaggregated groups where possible (in some contexts, the cultural and logistical dynamics did not permit this). This method ensures that sensitive topics could be discussed freely among individuals of similar backgrounds and experiences. The process for conducting these FGDs involved working via UNFPA implementing partners or supported service provider staff to gather between 8 and 15 people in a safe space for approximately 1.5 hours, with the assistance of a gender-appropriate translator familiar with the discussion topics. Ethical guidelines precluded the participation of children under 12 years of age in this research.

Secondary Data Sampling

The evaluation team undertook a detailed review of documents to include United Nations/UNFPA global-level and regional-level guidelines, policies, strategies, databases, standards and training materials; and country level programme/project and other relevant documents and data (including organizational policies, procedures and strategies; project/programme proposals, reports, sit-reps and technical outputs; and monitoring data related to humanitarian response policies, procedures, interventions and coordination). This secondary research was conducted at the global level and for each of the countries selected for the evaluation research.

ERG members, UNFPA focal points and other key informants were requested to provide some of these documents, with additional documents obtained by the evaluation team via access to the UNFPA data management system and independent research of both published and grey literature. The secondary data:

- (a) Guided the initial development of the research tools (high-level strategic/global documentation);
- (b) Was used to develop secondary data evidence tables for global and regional level work and for each of the selected countries;
- (c) Provided background to each of the countries to be visited directly and feed into the development of the country briefing notes subsequent to the field visits;
- (d) Fed into the development of country briefing notes/issues papers and the final synthesis report

Sample Sizes

The following table summarises the specific numbers of primary research targets achieved for the evaluation. A curated list of secondary sources is provided in Annex VIII of the report. In total, 1,530 secondary sources were reviewed, although only not all of these provided useful data.

Table 2: Final Sample of Primary Data Targets

	Women/Girls	Men/Boys	Total Pax	Total KII/FGD	Target	% Met
Global level (KIIIs)	11	11	22	20		
Regional level (KIIIs)	19	9	38	23	30-50	100%
Country level (KIIIs)	185	165	350	183	125-165	113%
Country level (FGDs)	176	24	200	23	30	77%
Total	391	209	600	249	245 (max)	100%

Data Collection

The evaluation team conducted:

- 1) **An in-depth document review** of all documents collected related to humanitarian 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.
- 2) **Remote interviews with key UNFPA stakeholders at country, headquarters/global and regional levels.** A list of key informants interviewed (either individually or in a group discussion format) at the global and regional levels was developed in consultation with UNFPA.
- 3) **In-person interviews with stakeholders** in six countries (including the pilot visit to collect data used to prepare individual country briefing notes and the two issues papers as well as for this synthesis report).
- 4) **Focus group discussions (FGDs) with beneficiaries** on humanitarian response programming in six countries. 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.

The evaluation originally planned an online survey of UNFPA focal points for humanitarian response at country and regional levels, but in order to minimise the burden on humanitarian personnel, data from the internal global UNFPA staff survey, conducted in late 2024, were made available for secondary analysis.

Triangulation: Throughout the evaluation, the team sought 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 throughout the evaluation in order to triangulate information - checking and corroborating findings from multiple sources to ensure that they are consistent and accurate and conducting additional primary or secondary research throughout the analysis phase as needed.

Prior to data collection: During the assignment preparation phase, the evaluation team ensured that evidence tables were prepared that are in full alignment with the evaluation matrix (see Annex V) and reconstructed ToC to ensure complete consistency between what was being collected and the research questions.

Figure 3: Evaluation Analytical Approach



During data collection: Field-based data collection was undertaken via the research tools which were prepared as a series of template forms in MS Word provided in Annex VI. Data was saved to the secured shared cloud-based folders specific to this evaluation.

On agreement of the evaluation scope and approach/methodology via the draft inception report, the evaluation team tested the approach and associated tools (including the evaluation matrix) in one pilot country, Uganda. This country was selected as representing a good spectrum of humanitarian

response programming in UNFPA, and being logically/programmatically accessible for the evaluation team.

The six country field missions (including the pilot) were conducted between December 2024 and April 2025. A schedule for desk-based research (global/regional) interviews and field visits is presented in Annex VII.

Data management: 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 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 UNFPA's cloud-based database, and access to this was shared only between team members and the evaluation manager for storing evaluation data. Uploading the data took place at a minimum daily to ensure the safety and security of evaluation data. 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 was anonymized - personal identifiers (names, positions etc.) were removed. Throughout the data collection and 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.

Analysis and Reporting

Data Coding

The evaluation team coded qualitative interview/discussion data and the outputs of the secondary data review 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 the dataset that address the specific evaluation assumptions. During or immediately after field visits, while information was still fresh, the team performed initial coding, and the evaluation team leader instituted a series of cross-checks as data was uploaded to the evidence tables to ensure quality control. This facilitated preparation of country notes for each of the six sampled country subsequent to the field visits. As discussed above, all coded data was compiled into master databases (primary and secondary) which were then used for analysis.

The synthesis analysis opened with a workshop at the UNFPA Humanitarian Response Division office in Geneva between the evaluation team and the evaluation managers. The outputs of the workshop directed the evaluation team on initial findings and guided the development of the first draft of the evaluation report.

The following specific analytical approaches were used:

- **Descriptive analysis** to understand the contexts in which UNFPA team members related to humanitarian programming
- **Content analysis** constitutes the core of qualitative analysis. The evaluation team analysed 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** examined findings across different countries, themes, or other criteria. It was also used to identify good practices, innovative approaches and lessons learned.

The evaluation team also **triangulated** findings across data collection methods (document review, KII, FGDs and site visits) where possible to corroborate and increase the quality and credibility of the evaluation findings and conclusions.

The evaluation team used Artificial Intelligence (AI) for more efficient data collection and analysis, in line with UNFPA and UNEG guidelines. This involves using AI for advanced data analytics, pattern recognition, and synthesising large datasets, thereby enhancing the depth and speed of analysis (discussed in Annex III).

Evaluation Deliverables

The primary deliverables associated with this assignment (i.e. not including interim presentations to evaluation stakeholders such as the ERG) are as follows. A more detailed description of the deliverable structure was presented in the evaluation inception report.

- ***Evaluation inception report***

This was prepared in draft form for the pilot field mission in December 2024. The drafts were reviewed by all team members, the evaluation manager and finally by all ERG members, with comments and revisions incorporated for a final draft subsequent to the pilot visit.

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

Subsequent to each of the six country visits, the respective evaluation team member prepared a country note following a similar analytical structure to that planned for the overall evaluation (i.e. according to the evaluation criteria and evaluation questions/assumptions). 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 was provided to the ERG and form part of the published deliverables of this evaluation.

- ***Two issues papers***

The evaluation team drafted and finalized the two issues papers based on the topics agreed with the ERG during the inception phase of the evaluation. The papers are for internal (i.e. UNFPA) publication only, with the second draft after IEO review being provided to the ERG for review and comments before preparation of a final draft for internal circulation to relevant stakeholders (as determined by the IEO and ERG).

- ***Final evaluation synthesis report***

The final report was guided by the evaluation analysis workshop, during which the evaluation team drafted initial findings based on the previous iterative reviews of the datasets. These initial findings were then articulated in line with the evidence in the first draft of the evaluation report, which was reviewed internally by the evaluation manager. Feedback from this review fed the second draft of the evaluation report, upon submission of which the evaluation team presented the results of the data collection, including preliminary findings, to the ERG. On the basis of feedback from this workshop, the evaluation team finalized conclusions and recommendations and submitted the final report for approval by the UNFPA evaluation manager in consultation with the ERG.

- ***Evaluation brief & findings presentation***

On approval of the final report, the evaluation team prepared an evaluation brief (in English) to assist in the dissemination of findings as outlined below, as well as prepare a PowerPoint presentation of headline findings, conclusions and recommendations.

Evaluation Ethics

The evaluation team ensured the evaluation was sound in its ethical research design and the implementation of data collection in order to safeguard stakeholders' right to privacy and confidentiality. To achieve this, the evaluation was conducted in accordance with the principles outlined in the following key guidance:

- [The United Nations Evaluation Group \(UNEG\) norms and standards for evaluation;](#)
- [The UNEG Ethical Guidelines for Evaluation;](#)
- [The UNFPA Evaluation Handbook;](#)
- [UNEG Ethical Principles for Harnessing AI in United Nations Evaluations;](#)
- [Evaluation Quality Assurance and Assessment: Tools and Guidance.](#)

In line with the above, an evaluation reference group was established to provide oversight and technical assistance (see title pages for ERG composition) during each aspect of the design, implementation, and validation phases of the evaluation.

The following steps were taken to ensure the evaluation followed appropriate ethical processes and the obligations/principles in the 2020 revised UNEG Ethical Guidelines.

- Trained and Experienced Data Collectors: The evaluation team are **independent** and **impartial** consultants and experienced field researchers who are also technical subject matter specialists, with considerable experience in the policies and procedures around ethical data collection ensuring findings **credibility** and **integrity**. The evaluation manager/IEO ensured that no **conflicts of interest** were present.
- The evaluation team, as part of the process of developing the data collection tools, incorporated self-guided training on research ethics and safeguarding to ensure the principle of **beneficence** was upheld.
- Informed consent was obtained from every respondent participating in data collection activities, i.e. key informants, focus group discussion participants or virtual interview respondents. For rights holders participating in the evaluation, an appropriate script was developed to ensure their fully-informed consent in line with the evaluation obligation of **respect** for rights-holders.
- Youth respondents (those <18) were asked to provide verbal assent after obtaining consent from their caregiver/s. Youth were explained the purpose of the evaluation, the voluntary and non-incentivized nature of the interview, the confidentiality, privacy and non-disclosure. Children under the age of 12 did participate in the evaluation research.
- Survivors of GBV: The team ensured that appropriate mechanisms existed to provide required support to any participant (especially a child/youth or caregiver) who disclosed any form of abuse or be found to be at risk of abuse. A reporting procedure was agreed with the UNFPA focal point, service provider or implementing partner relevant to the rights-holders being contacted for referring any affected participant to the appropriate service to facilitate the provision of needed support.
- Data Management: The evaluation team anonymized all responses and data collected to ensure that no information provided by any respondent reflected in the published findings (in draft or final form) could be traced back to them. Datasets were managed through UNFPA secure storage and electronic data management systems (all evaluation team members were provided UNFPA online credentials to access these). All notes and recordings were uploaded to

the secured UNFPA server and deleted from all personal computers as soon as the final evaluation report was approved.

- Consultation in Evaluation Design and Planning: The team ensured that all stakeholders had a good understanding of the evaluation purpose, ensuring full **accountability**. All tools and design elements were endorsed by the ERG via the inception report review and any subsequent or related meetings.

Ethical/Security Clearances: Given the heightened security situation in many of the countries where UNFPA conducts humanitarian responses, prior to the implementation of data collection missions, the evaluation team members secured travel clearance from UNFPA (the IEO, UNDSS and individual country offices) to travel to the selected countries and from the country office in coordination with the national authorities to specific sites. Data collection did not proceed until approval and the relevant permits/authorisations have been granted.

Annex III: Use of artificial intelligence (AI)

Introduction

As part of the design of the evaluation, the evaluation team developed a strategy for the use of Artificial Intelligence/Large-Language Model tools. The use of these emerging tools necessitated a robust framework of ethical, oversight, and quality control principles, coupled with clear methodologies governing their practical application. The core aim of employing AI was to facilitate advanced data analytics, pattern recognition, and synthesising large datasets, thereby enhancing the depth and speed of analysis.

Most importantly, effective, efficient and safe integration of these tools was driven by the principle of ethical and appropriate use of AI/LLMs. The key elements of this adopted by the evaluation team were:

- Adherence to established ethical guidelines,
- Robust data protection measures,
- Human oversight to ensure the integrity and reliability of AI-assisted findings.

As such, the evaluators undertook all such analysis in line with overarching UN policies and guidance as articulated in the following key resources:

- [GenAI-powered evaluation function at UNFPA](#) (2024)
- [Digital and Technology Network \(DTN\) Guidance Note on the Use of Generative Artificial Intelligence \(AI\) Tools in the UN System](#) (2023 – internal document)
- [UNEG Ethical Principles for Harnessing AI in United Nations Evaluations](#) (2025)
- UNEG Ethical Guidelines for Evaluation

Ethical Principles and Responsible AI Use

Drawing upon the above, and also general principles for responsible AI development and deployment, such as those articulated by Google¹ (the developer of NotebookLM – the primary AI tool used in this evaluation), the following specific ethical considerations guided the evaluation's approach to AI:

Principle	How it was applied
Transparency and Explainability	Evaluators established an understanding of how the AI processes data and arrives at its outputs, rather than treating it as a "black box." Any AI-generated synthesis involved clear attribution of the source material (either primary or secondary) and was subjected to evaluator validation directly with the sources.
Fairness and Bias Mitigation	In humanitarian contexts, where vulnerability and marginalization are central, mitigating bias is paramount. The evaluators explicitly ensured that needs of and voices of marginalized and vulnerable groups were present in the analysis through careful AI prompt engineering.
Privacy and Confidentiality	Personal identifiers in the evaluation dataset were rigorously removed before any data was analyzed by an AI system. Further, the AI tools and platforms used (InsightWise and NotebookLM) were selected on the basis of their adherence to stringent data protection regulations and commitment to not retaining any sensitive evaluation data for purposes beyond the immediate analytical task. These commitments had been

¹ <https://ai.google/principles/>.

	established through UNFPA's contractual agreements with the providers (not specific to this evaluation).
Data Security	Consistent with the evaluation's overall data management plan, the AI tools employed integrated with secure, cloud-based storage solutions with restricted access. UNFPA has an enterprise agreement with Google which ensures that sensitive information, even in anonymized form, is protected from unauthorized access or breaches.
Human Oversight and Accountability	The ultimate responsibility for the findings, conclusions, and recommendations rested with the evaluation team. Evaluators retained full critical oversight, reviewed AI outputs, correlated all statements with primary or secondary sources and corrected or discarded erroneous or biased results.

Oversight and Quality Control Mechanisms

To ensure that AI use aligned with the ethical principles and contributed effectively to the evaluation's quality, several oversight and quality control mechanisms were planned:

- **Pre-computation Validation and Methodological Alignment:** As discussed in Annex II, before data collection, "evidence tables" were prepared in full alignment with the evaluation matrix and reconstructed ToC. This provided a structured basis for AI-assisted coding and analysis, through careful articulation/engineering of AI prompts, ensuring that AI outputs could be directly mapped back to evaluation questions, assumptions, and indicators.
- **Dummy Coding and Piloting:** The evaluation team undertook several rounds of dummy coding prior to data collection to verify the practicality of the research tools and the familiarity of all members with data entry processes. While not explicitly for AI, this rigorous preparation was essential for preparing data for AI processing and validating AI-generated analysis against manual established benchmarks. The pilot country visit to Uganda was also intended to test and refine data collection processes, which included preparing for AI integration.
- **Triangulation:** The evaluation emphasises the importance of triangulation of evidence from multiple sources to ensure findings are consistent and accurate. AI assisted in this process by linking to individual pieces of evidence across the dataset or primary and secondary data which facilitated triangulation between different data sources, highlighting patterns or links for evaluator scrutiny.
- **Iterative Review and Refinement:** The evaluation process included multiple rounds of review for all deliverables, from inception report to country briefing notes and the final report. This iterative process, involving the evaluation team, evaluation manager, and the ERG, served as critical quality control for any AI-assisted insights, allowing for validation, correction, and refinement before finalization.
- **Analysis & Co-Creation Workshops:** Two workshops underpinned creation and validation of the analysis, findings and evaluation recommendations. The first analysis workshop between the evaluation team and the evaluation managers took place immediately after full data collection was complete and consisted of a review of the breadth and depth of the evaluation evidence, identifying key emerging findings and any gaps in data/evidence. This guided the application of the AI tool to more systematically explore the evidence base to support or (if necessary) amend the primary findings. The second workshop was conducted between the evaluation team, the IEO and the ERG where the findings and main conclusions were presented for scrutiny with respect to the evidence, and related recommendations based on

the agreed evidence were developed. This provided an external quality check (via the ERG) for critically assessing AI-supported findings and analysis.

Practical Application of AI

The evaluation team, during the inception phase, identified three potential uses for AI to support data analysis: text analysis, secondary data context analysis (literature review), and primary data synthesis/summarization.

The evaluation process involved extensive data collection, including secondary document/data review, remote and in-person KIIs and FGDs with rights-holders. This generated a significant volume of both qualitative and quantitative data, which were stored in evidence tables in a spreadsheet (MS Excel) format. The evaluation team tested two AI/LLM models for the purpose above: InsightWise² and (Google) NotebookLM³, both of which exhibited an ability to integrate, analyze, and synthesize various document types, presents a relevant tool for these envisioned applications. Ultimately, the evaluation team selected NotebookLM for the majority of its analysis due to greater ease of use and (vitally) its capacity to leverage Google Translate to seamlessly integrate documents not in English.⁴

The following describes the key steps followed in application of the AI tools.

a) Data Preparation for AI Processing

Before AI tools were applied (in line with the above protocols and principles) the following preparation of datasets was undertaken:

- **Anonymization:** For primary data (i.e. KII and FGD transcripts), personal identifiers (names, positions etc.) were removed from the full dataset before uploading to the platform. Only locations and organization names (or typology for rights-holders, e.g. “refugee women”).
- **Standardization and Formatting:** All data was converted into a format compatible with NotebookLM (i.e. PDF).

b) Application 1: Text Analysis and Coding of Qualitative Data (KIIs & FGDs)

The evaluation used text analysis (natural language processing) of KII and FGD transcripts to complement manual coding based on the pre-established evaluation matrix questions, assumptions and indicators. This was done as follows:

- **Transcript Summarization:** Once anonymized KII and FGD transcripts were uploaded, the AI model generated concise summaries of each interview or discussion to provide evaluators with quick overviews of key points raised by different stakeholders, significantly reducing manual review time.
- **Theme Identification:** The AI was prompted to identify recurring themes, patterns, or sentiment across a large set of transcripts related to specific evaluation questions (e.g., EQ1 on relevance or EQ3 on GBV interventions). While the evaluation undertook manual coding against the pre-agreed categories based on the evaluation questions and assumptions/indicators, AI was used to analyse the dataset for re-coding suggestions, highlighting emergent themes not explicitly covered by the predefined matrix.

² <https://www.insightwise.ai>.

³ <https://notebooklm.google.com>.

⁴ Of the 15 countries sampled for the evaluation, four are francophone and three are Spanish-speaking. The majority of secondary sources for these countries were in the respective language.

- **Key Information Extraction:** Evaluators prompted the AI model to extract specific details, such as examples of successful SRHR programming, challenges in GBV response, or opinions on UNFPA's leadership role from KIIs.

c) Application 2: Secondary Data Context Analysis (Literature Review)

The evaluation compiled more than 1,500 documents and publications (many of which were in Spanish or French) across the 15 sampled countries and at global level. To enable efficient analysis of these, AI tools were used to automate scanning and identification of relevant passages of text across the evaluation assumptions and questions. The following steps were applied:

- **Automated Literature Review:** The NotebookLM model is designed such that individual documents can be uploaded into a specific project database. Once the suite of secondary sources was compiled, evaluators designed specific prompts for each evaluation assumption to guide the AI/LLM in searching the database of documents for evidence related to that specific assumption. The following were the key elements of the prompts that were applied:
 - Defining the scope of the analysis, i.e. focusing exclusively on UNFPA's humanitarian preparedness and response work in the specified country/region (or globally as relevant).
 - Including both humanitarian actions and longer-term developmental or resilience-related activities (and specify each).
 - Ensuring that for each piece of evidence highlighted, the document name, date, program/project name and dates/duration were included.
 - Extracting detailed information related to (and only related to) the specific assumption/indicator that was being queried, including achievements, results and/or challenges or issues.
 - Organizing the extracted information chronologically
 - Referencing the source document for each example or piece of evidence provided.
- **Synthesis of Policies and Frameworks:** Evaluators used NotebookLM to rapidly synthesize information on complex topics such as the evolution of the international humanitarian coordination system. NotebookLM was able to identify and summarize how key developments or concepts were addressed across various UNFPA documents and external guidance. This significantly reduced the manual effort of reviewing substantial amounts of documentation, allowing the evaluators to quickly grasp the contextual landscape and UNFPA's strategic positioning within it.

d) Application 3: Primary Data Analysis and Summarization

The NotebookLM-powered synthesis and summarization provided the evaluation team initial indications on key findings based on rapid scanning of compiled datasets that also indicated the degree of triangulation between different data sources. The following steps were applied:

- **Cross-Country Synthesis:** With six field visits and nine extended desk reviews (as well as global/regional level data collection), the evaluation generated a very substantial body of primary and secondary data. NotebookLM was tasked to review the (anonymized via deletion of all personal identifiers – country locations and organizational affiliation were the only permitted signifiers) evidence tables with

compiled KII/FGD data. It was prompted to identify and synthesize evidence (appropriately cited) in relation to the specific assumptions and/or emerging findings related to UNFPA humanitarian interventions.

- **Identifying Triangulation Points and Divergences:** While the evaluation team undertook validation and additional manual triangulation, NotebookLM assisted by flagging areas where different data sources converge (e.g., KIIs and FGDs both highlighting unmet SRHR needs in a specific area) or diverge (e.g., official reports present a different picture of resource allocation efficiency than staff interviews). This enabled evaluators to prioritize areas requiring deeper investigation or validation.

Conclusion and future implications:

The UNFPA evaluation inception report placed ethical consideration and safeguarding in the forefront of its approach to the prospective integration of AI tools. By explicitly linking AI use to UNFPA and UNEG guidelines, prioritizing data protection and confidentiality, and committing to human oversight and triangulation, the evaluation took an ethics-first approach, followed by a comprehensive process of validation of any findings. The "exploratory" nature of AI integration and the emerging concerns around its usage obliged the evaluators to adopt a cautious, iterative approach, allowing the team to learn and adapt as they gained experience. The ongoing and rapid evolution of individual AI tools over the course of the evaluation period (from late 2024 to mid-2025) also required a flexible approach. This was assisted by UNFPA's proactive organizational stance on AI, grounded in its enterprise adoption of the Google suite of technologies, which facilitated the use of pre-approved and vetted tools.

However, as with any emerging technology, effective ethical and appropriate use depended on continuous oversight and learning of the evaluation team during implementation. Challenges remain, particularly regarding the full implications of using external AI services on data governance and the ongoing need for rigorous human validation of all AI-generated insights to mitigate bias and ensure accuracy.

Annex IV: Reconstructed humanitarian theory of change

As noted in the methods section of this report, this reconstructed ToC 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*'.⁵ 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. These three results underpin the **impact** of the reconstructed ToC for this evaluation:

1. Needs

There are four key needs that the evaluation has identified as being features of a humanitarian response organization (in the context of the mandate of UNFPA and its operating context). These reflect the underlying reality of increasing numbers of humanitarian crises worldwide, caused by natural disasters, epidemics (such as COVID-19) and conflict, and exacerbated by the increasingly-felt effects of global climate change. The needs are for:

- SRH services, including maternal and neonatal health, HIV, clinical management of rape, and family planning;
- Disaggregated population and programme data;
- Prevention of and response to GBV and harmful practices, including mental health and psychosocial support;
- Youth to access essential services and opportunities to realize their full potential;

All of these needs underlie humanitarian responses at UNFPA, 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-evaluation period.

2. Inputs

Linked to and derived from the needs are six inputs or strategies that UNFPA globally and nationally should initiate and undertake at the onset of any humanitarian crises to pivot to an appropriate response to the challenges of the crisis response AND safeguard programmatic trajectory towards the transformative results.

- Human and financial resources;
- Systems, policies and procedures;
- Data and knowledge management;
- Capacity development of staff in humanitarian assistance;
- Integration of the modern humanitarian architecture and related commitments across all UNFPA strategies and plans;
- Integration of humanitarian principles, human rights, gender equality, disability inclusion, climate action, social and environmental standards and a **humanitarian-development-peace nexus** approach across all UNFPA strategies and plans.

3. Activities

The ToC articulates 12 activity areas that directly lead from the inputs or strategies above. These activities are key actions (though not exhaustive) that transform the inputs into planned outputs within a specified period of time. These are grouped around the priority mandate areas of UNFPA:

⁵ <https://www.unfpa.org/about-us>.

SRHR, GBV and Data, with the coordination and leadership function of UNFPA in SRHR, GBV and youth programming noted separately.

4. Outputs

The ToC articulates a further nine key outputs or activity areas that directly lead from the inputs and activities. These should flow logically from the specific activities undertaken are directly related to the planning, assessments and responses that are generally undertaken as a result of the UNFPA mobilization to address humanitarian responses.

5. Outcomes

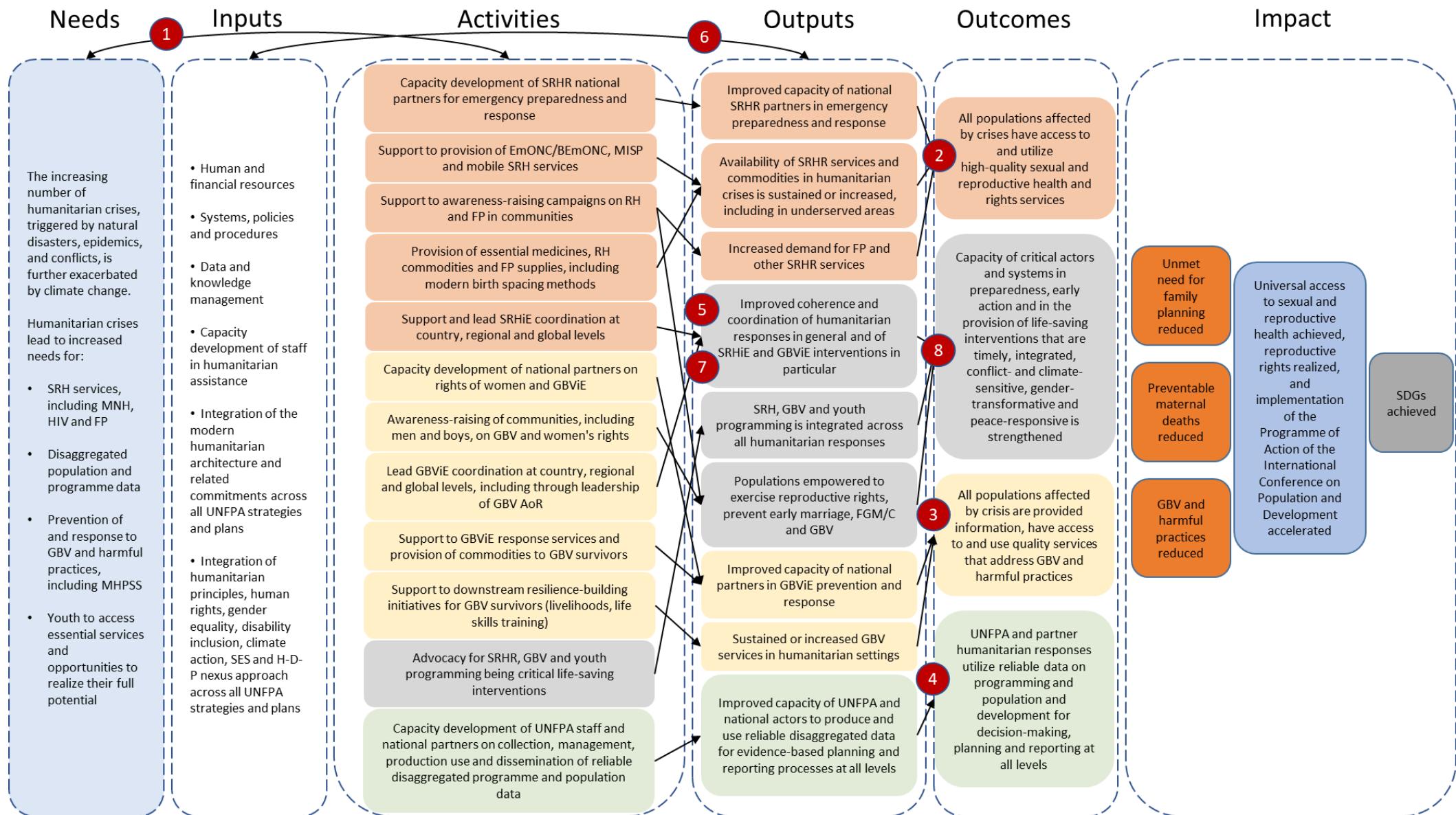
The nine outputs then contribute to four related **outcomes** which cover the breadth of response programming as outlined in the UNFPA strategic plans and individual response plans and strategies. The first, third and fourth of these outcomes are directly related to the UNFPA humanitarian responses, whereas the second is a reflection of the effective integration of good practices, lessons learned, improved systems and additional resources both during and subsequent to crises:

- All populations affected by crises have access to and utilize high-quality sexual and reproductive health and rights services;
- Capacity of critical actors and systems in preparedness, early action and in the provision of life-saving interventions that are timely, integrated, conflict- and climate-sensitive, gender-transformative and peace-responsive is strengthened;
- All populations affected by crisis are provided information, have access to and use quality services that address GBV and harmful practices;
- UNFPA and partner humanitarian responses utilize reliable data on programming and population and development for decision-making, planning and reporting at all levels.

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 needs through activities to contribution to the UNFPA 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 “siloed” 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.

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.



Annex V: Evaluation matrix

Ref 1	Ref 2	Evaluation assumptions to be tested	Illustrative indicators	Desk Review		KII					FGD
				Strategy docs	Program docs	UNFPA staff	IP staff	UN orgs	Donors	Govt partners	
		EQ1 (Relevance/Appropriateness): To what extent do UNFPA's humanitarian strategy and programmes correspond to the identified needs of affected populations, including the needs of the marginalized and vulnerable groups, while remaining aligned with the UNFPA mandate?									
A111	A1.1	The current UNFPA Strategic Plan, the regional programmes and CPDs integrate the UNFPA commitments to the global architecture that governs humanitarian action.	Degree of alignment of strategic plans (global, regional, national) alignment with WHS, GB, SPHERE, HPs	x							
A112			Degree of integration of humanitarian preparedness and response programming within regional and national programme documents (Regional programmes, CPDs, CPAPs and related results frameworks)	x	x	x					
A113			Degree of integration of global UNFPA commitments to climate change action in UNFPA's strategic and programming documents (SP, regional programmes, CPDs, CPAPs and related results frameworks).	x	x	x					
A121	A1.2	UNFPA mandate areas are integrated within HNO, HRPs and other appeal documents such as (country and regional) refugee response plans, flash appeals and other appeals (e.g. famine prevention response etc.).	Evidence of UNFPA's advocacy efforts for the inclusion and prioritization of mandate areas within interagency responses.	x	x	x	x	x	x		
A122			UNFPA mandate-related priorities are reflected in interagency Humanitarian Response Plans, refugee response plans, flash appeals and other appeals.	x							
A123			Level of funding of UNFPA mandate areas within interagency responses	x		x		x	x		
A124	A1.3	Humanitarian programming at UNFPA ensures that the needs of affected populations are adequately addressed.	Evidence of available, appropriate and practical rights-holder consultation mechanisms			x	x	x			
A125			Evidence of uptake and use of consultation mechanisms by rights-holders								x
A126			Extent of UNFPA responsiveness to the needs and concerns expressed by crisis-affected populations		x	x	x				
A127			Evidence that UNFPA humanitarian programming adequately identifies and addresses the specific needs of the most vulnerable groups and those left furthest behind		x	x	x			x	
		EQ2 (Effectiveness/Coverage): To what extent do UNFPA humanitarian interventions contribute to an improved access to and increased use of quality sexual and reproductive health services for affected populations, including the most vulnerable and marginalized groups?									

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A211	A2.1	Quality SRHR services and commodities are accessible in all humanitarian settings.	Level of provision of UNFPA-supported key SRHR services and commodities		x	x	x	x	x	x	x	x
A212			Evidence of timeliness of MISP provision		x	x						
A213			Evidence that UNFPA humanitarian interventions reach the most vulnerable and those left furthest behind.		x	x	x	x		x	x	
A214			Degree to which humanitarian principles, human rights and gender equality are integrated in the implementation of and reporting on UNFPA SRHR humanitarian interventions		x	x	x			x		
A221	A2.2	Utilization of quality sexual and reproductive health services has increased, including family planning, maternal and newborn and adolescent responsive health services for affected populations.	Level of awareness and acceptance of FP and other SRHR services in all humanitarian settings.		x	x	x			x	x	
A222			Evidence on uptake of FP and other SRHR services among affected populations that are targeted by humanitarian responses.		x	x	x			x	x	
A223			Changes in SRHR programme outcomes for populations targeted by humanitarian responses.		x	x	x			x	x	
A224			Satisfaction levels of assisted populations (women, men, boys, girls, and marginalised/vulnerable groups) with UNFPA support to SRHR services.				x			x	x	
		EQ3 (Effectiveness/Coverage): To what extent do UNFPA humanitarian interventions contribute to preventing, mitigating and responding to gender-based violence and harmful practices for affected populations, including the most vulnerable and marginalized groups?										
A311	A3.1	Quality GBV services are accessible in all humanitarian settings	Level of provision of UNFPA-supported GBV and related prevention, response and mitigation services, including downstream resilience-building initiatives.		x	x	x	x	x	x	x	x
A312			Evidence of UNFPA acting as provider of last resort for GBV services when required		x	x						
A313			UNFPA GBV humanitarian interventions benefit the most vulnerable and those left furthest behind.		x	x	x	x		x	x	
A314			Humanitarian principles, human rights and gender equality are integrated in the implementation of and reporting on UNFPA GBV humanitarian interventions		x	x	x			x		
A321	A3.2	Utilization of quality GBV services by crisis-affected populations has increased.	Awareness and acceptance of GBV services has increased in all humanitarian settings.		x	x	x			x	x	
A322			Evidence on uptake of GBV and related services among affected populations that are targeted by humanitarian responses.		x	x	x			x	x	
			Changes in knowledge, attitudes or practices related to GBV or gender equality for populations targeted by humanitarian responses.		x	x	x			x	x	

A32 3			Satisfaction levels of assisted populations (women, men, boys, girls, and marginalised/vulnerable groups) with UNFPA-supported GBV services				x			x	x
			EQ4 (Effectiveness/Coverage): To what extent do UNFPA interventions contribute to the use and dissemination of reliable and disaggregated programme and population data for evidence-based humanitarian responses?								
A41 1	A4. 1	Capacity of UNFPA and national actors to produce and use reliable disaggregated data for evidence-based planning and reporting processes at all levels	Evidence of systematic, organization-wide efforts to capture consistent (across time and geography) and accurate output and outcome-level data that reflects all humanitarian response programming	x	x	x					
A41 2			Evidence of capacity-building of UNFPA business units and partners on data collection, analysis and reporting requirements.		x	x	x			x	
A42 1	A4. 2	UNFPA and national actors produce reliable disaggregated programming and population data.	Presence of outcome/impact measurement mechanisms in programme policies and applied at implementation level by UNFPA and/or partners.		x	x	x				
A42 2			Presence of up-to date, disaggregated population dynamics data at country level.		x	x	x				
A43 1	A4. 3	UNFPA and partner humanitarian responses utilize reliable data on programming and population and development for decision-making, planning and reporting at all levels.	Evidence that accurate humanitarian response data from UNFPA and partners is communicated in a timely manner to UNFPA decision-makers at national, regional and global levels.			x					
A43 2			Evidence that humanitarian response programming is driven by up-to-date monitoring and reporting data.			x					
A43 3			Evidence that population data is used to design and course correct programming in a timely fashion.			x					
A43 4			Satisfaction levels of UNFPA and partner decision-makers with the quantity, quality, timeliness and type of programme and population data.			x					
			EQ5 (Effectiveness): To what extent has UNFPA adequately performed its leadership role on SRHiE and GBViE and Youth, Peace and Security?								
A51 1	A5. 1	UNFPA leads interagency coordination efforts on SRHiE within the framework of the IASC cluster approach, as the leader of the SRH Task Team under the IASC Health Cluster.	Evidence of UNFPA engagement with and leadership on SRHiE mechanisms (clusters/working groups, task teams etc.).		x	x	x	x	x	x	
A51 2			Sector, sub-cluster and working group member satisfaction levels with UNFPA participation or leadership in the forums for coordination and programming.		x	x	x	x	x	x	
A51 3			UNFPA strategies and plans at global level reference and include/are harmonised with relevant elements of interagency planning and implementation (e.g. HNO, HRP, AOR, clusters/sectors).		x		x	x	x	x	
A51 4			Evidence of advocacy efforts to mainstream SRHR across joint work/coordination forums with other actors.		x	x	x	x	x	x	

A51 5			Evidence of synergies and reduction of duplication of programming through coordination mechanisms.			x	x	x	x	x	
A51 6			Evidence that integrated and interoperable information and monitoring systems have been created and UNFPA data is reflected accurately, consistently and promptly.			x		x	x		
A52 1	A5. 2	UNFPA leads coordination on GBViE as the leader of the GBV AoR.	Evidence of UNFPA engagement with and leadership on GBViE coordination mechanisms (clusters/sectors, AOR etc.).		x	x	x	x	x	x	
A52 2			AoR/Sector, sub-cluster and working group member satisfaction levels with UNFPA participation in the forums for coordination and programming, including global AoR support to country levels.			x	x	x	x	x	
A52 3			UNFPA strategies and plans at global level reference and include/are harmonised with relevant elements of interagency planning and implementation (e.g. HNO, HRP, AOR, clusters/sectors).			x		x	x	x	
A52 4			Evidence of advocacy efforts to mainstream GBV across joint work/coordination forums with other actors.			x	x	x	x	x	
A52 5			Evidence of synergies and reduction of duplication of programming through coordination mechanisms.			x	x	x	x	x	
A52 6			Evidence that integrated and interoperable information and monitoring systems have been created and UNFPA data is reflected accurately, consistently and promptly.			x		x	x		
A53 1	A5. 3		Evidence of active UNFPA co-leadership on the Department of Political and Peacebuilding Affairs (DPPA) 2024-2026 Strategy on YPS at the global level.		x	x		x			
A53 2		UNFPA leads coordination on both the Youth Compact and Youth, Peace and Security within the framework of its commitments via the UN YPS Secretariat.	Evidence of UNFPA contribution to 3 priorities of the YPS agenda as articulated in the 2024-2026 strategy: contribution towards increased awareness of the agenda; strengthened capacities to implement the agenda; contribution to national indicators for YPS at country level.		x	x		x			
A53 3			Evidence that UNFPA provide overall co-chair leadership for the Youth Compact at the global level across five key actions: services; participation; capacity; resources; and data.		x	x		x			
A53 4			As Task Team Lead for Youth Compact Key Action 4: resources: evidence that UNFPA has developed an outreach strategy and package of communication materials and a strong business case as an advocacy tool.		x	x		x			

A53 5			As Task Team Lead for Youth Compact Key Action 5: data: evidence that UNFPA has created a mapping tool to understand available data; recommended credible data collection methods; and established sex and age-disaggregated data standards,		x	x		x				
			EQ6 (Efficiency): To what extent are internal resources, structures, systems, processes, policies and procedures at UNFPA conducive to efficient and timely humanitarian action, at all levels of the organization (global, regional, national)?									
A61 1	A6. 1	Changes to the UNFPA humanitarian governance and architecture since 2019 have added value, promoted efficiencies and optimized programme delivery.	Evidence that the establishment of the HRD has led to organizational improvements		x	x	x	x				
A61 2			Evidence of operationalization and implementation of commitments to the new way of working and grand bargain (incl: collective outcomes, comparative advantage, risk-sharing, multi-year time frames, transparency, increased funding for local partners, etc.).	x	x	x	x	x	x	x		
A62 1	A6. 2	UNFPA processes and procedures (including policy guidance, Fast Track Procedures, humanitarian supply management chain, CVA provision etc.) support humanitarian action in the field and ensure a timely response.	Type and amount of humanitarian funding available to UNFPA since 2019, specifically: - Overall totals (globally and per response) - Core vs. non-core		x							
A62 2			Amounts of non-core funding returned to donors and reasons why			x			x			
A62 3			Type and number of humanitarian crises responded to since 2019									
A62 4			Number of people affected by humanitarian crises and supported by UNFPA with response programming since 2019		x							
A62 5			Amount of unmet needs across crises (proportion of needs met globally and within crises)		x							
A62 6			Quicker responses to crises (in terms of time from onset to delivery of assistance)		x							
A62 7			Extent to which UNFPA (at country, regional and global levels) has mobilized sufficient resources (core and non-core resources) for humanitarian responses, and in a timely fashion			x						
A62 8			Cost-effectiveness and timeliness of general and emergency procurement, stockpiling, prepositioning and last-mile delivery of different commodity types and CVA.			x	x	x	x	x		
A63 1	A6. 3	Humanitarian human resources (including surge, roving teams, logistics and GERT, regular	Number, type and organization of key humanitarian staff positions at country, region and global levels (including temporary mechanisms e.g. roving teams, surge, GERT).		x							

A63 2		recruitment) meet the needs of humanitarian response programming.	Number and type of vacancies among humanitarian teams at country, region and global levels.			x					
A63 3			Perception among UNFPA staff of effectiveness of recruitment and human resource supply (including via temporary mechanisms e.g. roving teams, surge, GERT).			x					
A63 4			Number and type of humanitarian skills trainings (by types of training, #s of attendees)		x						
A63 5			UNFPA internal/external capacity building reflects humanitarian skills and principles, including prevention of PSEAH.		x						
A63 6			Satisfaction levels of UNFPA and external stakeholders with skills of humanitarian staff and humanitarian response capacity-building efforts of UNFPA			x	x				
A64 1	A6. 4	UNFPA collects and produces data that contributes to timely, accurate and useful decision-making and communications for humanitarian action at national, regional and global levels	Degree to which UNFPA knowledge management/enterprise data systems provide for or integrate current or evolving humanitarian response work.								
A64 2			Evidence of the use of UNFPA humanitarian and population data management systems in decision-making and communications.								
A64 3			Presence of outcome/impact measurement mechanisms & up-to date, disaggregated population dynamics data at country level.								
A64 4			Evidence that population dynamics data is used to design and course correct programming in a timely fashion.								
A64 5			Satisfaction levels of UNFPA and partner staff in the timeliness, accuracy and usefulness of population and programme data collection and management processes								
		EQ7 (Coherence): To what extent are UNFPA humanitarian interventions internally coherent and complementary to that of other humanitarian actors, thus reducing gaps, avoiding duplications and creating synergies?									
A711	A7.1	Humanitarian strategies and programmes at UNFPA have been well integrated and mutually reinforcing, helping to achieve comprehensive outcomes for the most vulnerable and marginalized groups?	Evidence of a policy/strategy of mutual reinforcement between programming elements in UNFPA strategies and plans.	x	x						
A71 2			Evidence of a balance between SRHR and GBV across or within needs assessments utilised by UNFPA	x	x						
A71 3			GBV and SRHR programming is conducted, where needed, in the same locations and with the same (or similar) populations (including especially vulnerable groups).			x	x			x	x

A71 4			Proportion of rights-holders at community level benefitting from interventions across multiple programming elements (SRHR, GBV and Youth).		x							
A71 5			Satisfaction levels of rights-holders (including vulnerable groups) at community level with access to/availability of multiple service types supported by UNFPA.			x				x	x	
A72 1	A7. 2		UNFPA strategies and plans at national level reference and include/are harmonized with relevant elements of interagency planning and implementation (e.g. HNO, HRP, clusters/WGs).	n/a								
A72 2			UNFPA engagement in partnerships in joint planning, coordination, resource mobilization, and implementation of humanitarian interventions (including data initiatives)			x	x	x	x	x		
A72 3			Evidence of synergies and reduction of duplication of programming through coordination mechanisms at country level.			x	x	x	x	x		
		EQ8 (Connectedness): To what extent is humanitarian action at UNFPA linked to preparedness and longer term development processes and programmes, across the humanitarian-development-peace nexus?										
A81 1	A8. 1	UNFPA's humanitarian preparedness and response interventions support, and plan for, longer-term (i.e., developmental and/or resilience-related) goals of countries affected by humanitarian crises	Clear articulation of a strategy to address longer-term development and peace objectives (e.g. the H-D-P nexus, or a continuum approach) in UNFPA strategies, plans and programme documents at national, regional and global levels.	x	x	x						
A81 2			Evidence of addressing both humanitarian and development objectives in UNFPA programmes at national, regional and global levels.			x	x			x		
A81 3			Evidence of UNFPA-supported interventions contributing to reducing the risks from climate-related loss/change of livelihoods at country levels.		x	x	x			x		
A82 1	A8. 2	UNFPA's humanitarian interventions contribute to capacity development and ownership at national and local level to strengthen the resilience of countries, systems, communities and individuals to reduce disaster risks and respond to crises.	Evidence of timely and appropriate engagement with and support to national partners (government and civil society)		x	x	x			x		
A82 2			UNFPA and partner satisfaction levels with partnerships.			x	x			x		
A82 3			Evidence of increased capacity and sustainability among national partners.			x	x			x		
A82 4			Evidence of positive outcomes on crisis preparedness (both human-induced and natural/environmental) among national stakeholders from UNFPA-supported programming.			x	x			x	x	

Annex VI: Primary research tools

A: Key Informant Interview Template

NOTE: Questions will be tailored to specific stakeholders, either organisational or sectoral (e.g. GBV vs SRHR vs Youth) per the evaluation matrix (see Annex 6).

Interviewer:	
Interviewee:	
Job Title:	
Date:	
Location:	

Any Background Information:

EQ1 (Relevance/Appropriateness) To what extent do UNFPA's humanitarian strategy and programmes correspond to the identified needs of affected populations, including the needs of the marginalized and vulnerable groups, while remaining aligned with the UNFPA mandate?

A1.1 The current UNFPA Strategic Plan, the regional programmes and CPDs integrate the UNFPA commitments to the global architecture that governs humanitarian action.

- To what extent have UNFPA programmes and strategic plans taken into account humanitarian preparedness and response - which ones?
- To what extent have your key humanitarian programme and strategic plans taken UNFPA commitments to climate change action into account - which ones?
- To what extent is climate change action “linked” with your humanitarian preparedness and response work - and how?

A1.2 UNFPA mandate areas are integrated within HNO, HRPs and other appeal documents such as (country and regional) refugee response plans, flash appeals and other appeals (e.g. famine prevention response etc.).

- To what extent has UNFPA worked to mainstream SRHR and/or GBV/gender and/or youth work and/or humanitarian data across interagency responses? Give examples.
- Do you consider that SRHR/GBV/Youth/humanitarian data (as appropriate) are funded to the same extent as other sectoral areas (taking into account overall funding shortfalls)?

A1.3 Humanitarian programming at UNFPA ensures that the needs of affected populations are adequately addressed

- To what extent has UNFPA programming been based on the assessed needs of affected communities, especially the most vulnerable and marginalized populations (e.g. youth, people with disabilities, refugees, urban and rural poor, ethnic/religious minorities, those affected by climate change)? *Probe:*

- o What mechanisms or tools do you use to consult and communicate with rights-holders/community members? Which ones (e.g. vulnerable groups)? How are they involved? How effective are they in soliciting or communicating information? *Probe for accountability to affected populations (AAP) mechanisms.*

- o How are the outcomes of consultative processes with communities used? Does UNFPA sufficiently recognize rights-holder considerations in planning and implementation of programming?

EQ2 (Effectiveness/Coverage) To what extent do UNFPA humanitarian interventions contribute to an improved access to and increased use of quality sexual and reproductive health services for affected populations, including the most vulnerable and marginalized groups?

A2.1 Quality SRHR services and commodities are accessible in all humanitarian settings.

- Over the past 5 years, how successfully has UNFPA supported the implementation of SRH programming in humanitarian (in terms of quantity and quality of services)? What are the main activities undertaken? What have been the biggest challenges? *Probe:*
 - o Is MISP implemented as part of humanitarian responses? If so, has it been delivered within 48 hours of the crisis onset? If not, why not?
 - o How have humanitarian principles of impartiality, neutrality, independence and humanity influenced and supported SRHRIE programming? What have been the challenges?
 - o How have principles of human rights, gender equality and disability inclusion influenced and supported SRHR programming? What have been the challenges?
- Does supported programming include specific strategies to reach and measure the most vulnerable and marginalized people such as youth, ethnic/religious minorities, people with disabilities, refugees, urban and rural poor, those affected by climate change etc.? If so, what are they? How successful have they been? *Probe:*
- o To what extent has UNFPA contributed to the availability and accessibility of youth-responsive SRHR services in humanitarian and nexus contexts?

A2.2 Utilization of quality sexual and reproductive health services has increased, including family planning, maternal and newborn and adolescent responsive health services for affected populations.

- Have you seen any changes in the levels of acceptance of and demand for family planning and other SRH services where UNFPA provides support? *Probe:*
 - o Have any positive changes translated into changes into the level of uptake of such services? Are needs being met? If not, why not?
 - o Are positive changes being seen in the reality of sexual and reproductive health of the people and communities supported by UNFPA and partners? If not, why not?
 - o How happy are you with the level (both quantity and type) of SRH support provided by UNFPA in this area? What could or should have been done differently?

EQ3 (Effectiveness/Coverage) To what extent do UNFPA humanitarian interventions contribute to preventing, mitigating and responding to gender-based violence and harmful practices for affected populations, including the most vulnerable and marginalized groups?

A3.1 Quality GBV services are accessible in all humanitarian settings

- Over the past five years, how successfully has UNFPA supported the implementation of GBV prevention and response programming (in terms of quantity and quality of services)? What are the main activities undertaken? What have been the biggest challenges? *Probe:*

- To what extent has UNFPA implemented UNFPA Minimum Standards for GBV in Emergencies and/or inter-agency SOPs for GBViE both in UNFPA programming and with other partner organizations).
- If there are no other GBV response services available in this location, does UNFPA ensure that needs are met (as a provider of last resort)? If not, why not?
- How have humanitarian principles of impartiality, neutrality, independence and humanity influenced and supported GBV programming? What have been the challenges?
- How have principles of human rights, and gender equality and disability inclusion influenced and supported SRHR programming? What have been the challenges?
- Does UNFPA-supported GBV programming include specific strategies to reach and measure the most vulnerable and marginalized people such as youth, refugees, ethnic/religious minorities, people with disabilities, urban and rural poor, those affected by climate change etc.? If so, what are they? How successful have they been? *Probe:*
 - To what extent has UNFPA contributed to the availability and accessibility of youth-responsive GBV prevention and response services in humanitarian and nexus contexts?

A3.2 Utilization of quality GBV services by crisis-affected populations has increased

- Have you seen any positive changes in the levels of acceptance of and demand for GBV services where UNFPA provides support? *Probe:*
 - Have any positive changes translated into changes into the level of uptake of such services? Are needs being met? If not, why not?
 - Are positive changes being seen in the reality of gender equality norms and practices among the people and communities supported by UNFPA and partners? If not, why not?
 - How happy are you with the level (both quantity and type) of support provided by UNFPA in this area? What could or should have been done differently?

EQ4 (Effectiveness/Coverage) To what extent do UNFPA interventions contribute to the use and dissemination of reliable and disaggregated programme and population data for evidence-based humanitarian responses?

A4.1 Capacity of UNFPA and national actors to produce and use reliable disaggregated data for evidence-based planning and reporting processes at all levels is improved.

- What UNFPA humanitarian data collection-related policies, procedures, frameworks etc. are you aware of? How accurate and widely used are they?
- Have you received training on humanitarian data collection, analysis and reporting requirements for UNFPA (what, when)? How useful was it? What could or should have been done differently?

A4.2 UNFPA and national actors produce reliable disaggregated programming and population data.

- How do you measure and report data on your humanitarian programming performance, i.e. monitoring and evaluation systems do you use for your humanitarian and/or HDP nexus programming?
- Do you have access to up-to-date and disaggregated population data for use in humanitarian preparedness and response? How accurate and useful is it?

A4.3 UNFPA and partner humanitarian responses utilize reliable data on programming and population and development for decision-making, planning and reporting at all levels.

- What data do you collect, report and/or receive related to humanitarian programming? How satisfied are you that the data is accurate and up to date?
- Do you use this data to guide your programming and/or strategic decisions on humanitarian programming (i.e. what, where and how humanitarian programming is implemented)? If not, why not? *Probe:*
 - Do you use POPULATION data to guide your programming and/or strategic decisions on humanitarian programming (i.e. what, where and how humanitarian programming is implemented)? If not, why not?
 - How satisfied are you that the humanitarian programming data and/or population data that you collect or receive is appropriate, accurate and on-time?

EQ5 (Effectiveness) To what extent has UNFPA adequately performed its leadership role on SRHiE and GBViE and Youth, Peace and Security?

A5.1 UNFPA leads interagency coordination efforts on SRHiE within the framework of the IASC cluster approach, as the leader of the SRH Task Team under the IASC Health Cluster.

- How well does UNFPA engage with and lead SRHR in inter-agency humanitarian coordination mechanisms? What are the achievements and challenges? *Probe:*
 - How satisfied have you been with UNFPA participation in and/or leadership of the interagency coordination forums (SRH working groups, SRHiE Task Team), now and in the past 5 years? What have been UNFPA's distinct contributions and results?
 - To what extent have UNFPA's plans and strategies been harmonised or aligned with the interagency SRHR implementation plans and strategies (i.e. HNOs/HRPs, cluster/WG strategies etc.) and national priorities?
 - To what extent has UNFPA worked to mainstream SRHRiE work (as "lifesaving"), including MISP, across different coordination forums and among different organizations?
 - Have the coordination mechanisms been effective in reducing duplication or adding value to SRHR programming? How have they changed over time?
 - To what extent has UNFPA contributed to interagency SRHR monitoring and information systems for crises? Is the information accurate? Consistent? Timely? What can be improved?

A5.2 UNFPA leads coordination on GBViE as the leader of the GBV AoR.

- How well does UNFPA engage with and lead GBV in inter-agency humanitarian coordination mechanisms? What are the achievements and challenges? *Probe:*

- How satisfied have you been with UNFPA participation in and/or leadership of the interagency coordination forums (GBV AoR/subcluster), now and in the past 5 years?
- To what extent have UNFPA's plans and strategies aligned with or driven/supported the interagency GBV implementation plans and strategies (i.e. HNOs/HRPs, AOR/subcluster/WG strategies etc.)?
- To what extent has UNFPA worked to mainstream GBV work across different coordination forums and among different organizations? (Prompt: e.g. the Interagency Minimum Standards and the IASC GBV Guidelines)
- Have the coordination mechanisms been effective in reducing duplication or adding value to programming? How have they changed over time?
- To what extent has UNFPA contributed to interagency monitoring and information systems for GBV in crises? Is the information accurate? Consistent? Timely? What can be improved?
- How effectively is UNFPA advocating for GBV services as being “lifesaving” in inter-agency platforms?

A5.3 UNFPA leads coordination on both the Youth Compact and Youth, Peace and Security within the framework of its commitments via the UN YPS Secretariat.

- To what extent has UNFPA been active on the Department of Political and Peacebuilding Affairs (DPPA) strategy on YPS? *Probe:*
 - What have been the key achievements of UNFPA in regard to the three YPS agenda priorities?
- To what extent has UNFPA provided overall leadership on the Youth Compact across the five key actions? *Probe:*
 - Specifically on action 4 - what has UNFPA achieved as task team lead?
 - Specifically on action 5 - what has UNFPA achieved as task team lead?

EQ6 (Efficiency) **To what extent are internal resources, structures, systems, processes, policies and procedures at UNFPA conducive to efficient and timely humanitarian action, at all levels of the organization (global, regional, national)?**

A6.1 Changes to the UNFPA humanitarian governance and architecture since 2019 have added value, promoted efficiencies and optimized programme delivery.

- What effects have the reorganization of UNFPA's humanitarian function into HRD had upon how UNFPA responds to humanitarian crises? What are the main achievements? What are the challenges? *Probe:*
 - How is internal coordination between global (HRD), other HQ units, regional and country levels (probe how technical assistance is provided to COs from HRD and ROs regarding humanitarian action - notably in technical areas including SRHRiE, GBViE, CVA etc. and whether this assistance is timely and effective)?
 - How has it impacted operational agility and accountability, risk appetite and no regrets, risk management, risk sharing etc. in UNFPA humanitarian responses?
 - Are CPDs adequately reflecting UNFPA humanitarian priorities and needs?

- To what extent has UNFPA implemented its commitments to the NWOW and Grand Bargain? (Prompt: collective outcomes, comparative advantage, risk-sharing, multi-year time frames, transparency, increased funding for local partners) What remains to be done?

A6.2 UNFPA processes and procedures (including policy guidance, Fast Track Procedures, humanitarian supply management chain, CVA provision etc.) support humanitarian action in the field and ensure a timely response.

- Is UNFPA mobilizing adequate resources to respond to humanitarian crises (compared to the overall response community)? *Probe:*
 - Is the mix of core vs. non-core resources appropriate?
 - How quickly are resources mobilised? What are the challenges or constraints?
 - How effective are UNFPA contributions to joint inter-agency resource mobilization efforts for SRHR/MISP or GBViE based on its global mandate as the lead on GBV AoR or in SRHR, including for CERF funding?
- How much (if any) non-core funding was returned to donors since 2019 (or another available timeframe)? What were the reasons? Were these acceptable? What needs to be done to avoid returning humanitarian funds to donors?
- What needs to be done - for example within the risk sharing approaches mandated by the Grand Bargain - to increase the flexibility/ quality of funding from donors?
- How effective have UNFPA's overall procurement processes (kits and other commodities) and cash/voucher assistance matched the needs - in terms of quantity needed, timeliness of delivery, and quality of commodities?

A6.3 Humanitarian human resources (including surge, roving teams, logistics and GERT, regular recruitment) meet the needs of humanitarian response programming.

- Do you have a full-strength humanitarian team currently or in the past 5 years? What are the key vacancies?
- What challenges do you face in ensuring adequate human resources for humanitarian response? Do temporary mechanisms fill gaps adequately (if so, which ones)? What needs to be done to strengthen humanitarian HR?
- How satisfied are you with training provided by UNFPA related to your work in humanitarian response? What needs to be improved?

EQ7 (Coherence) To what extent are UNFPA humanitarian interventions internally coherent and complementary to that of other humanitarian actors, thus reducing gaps, avoiding duplications and creating synergies?

A7.1 Humanitarian strategies and programmes at UNFPA have been well integrated and mutually reinforcing, helping to achieve comprehensive outcomes for the most vulnerable and marginalized groups?

- To what extent does UNFPA support the provision of SRHR, GBV and youth services in the same locations, so those that need it can be referred easily from one to another? If UNFPA only supports one of these services (e.g. SRHR), is the other type of services (GBV) available from another provider?

<ul style="list-style-type: none"> Are you satisfied with the availability and quality of both SRHR and GBV services in your region/community? Do you feel UNFPA and/or its partners should be doing something different to reduce gaps, avoid duplication and/or create better synergies?
A7.2 UNFPA coordinates with other agencies to create synergies and avoid duplication (including data initiatives).
<ul style="list-style-type: none"> Are the UNFPA activities on the ground being aligned or integrated well with those of other actors (e.g. probe for joint needs assessments, planning and implementation, complementary services, same populations served)? To what extent have the existing coordination mechanisms been effective in reducing duplication or adding value to programming? How have they changed over time?
<p>EQ8 (Connectedness) To what extent is humanitarian action at UNFPA linked to preparedness and longer-term development processes and programmes, across the humanitarian-development-peace nexus?</p>
<p>A8.1 UNFPA's humanitarian preparedness and response interventions support, and plan for, longer-term (i.e., developmental and/or resilience-related) goals of countries affected by humanitarian crises</p> <ul style="list-style-type: none"> Since 2019, has UNFPA developed or followed any strategy to address longer-term development and peace objectives (e.g. the H-D-P nexus, or a continuum approach)? To what extent do you feel that UNFPA has addressed both humanitarian and development objectives in humanitarian response programming? To what extent do you feel that UNFPA has tried to address climate change mitigation in programming since the crisis started (e.g. effects on livelihoods)? How is UNFPA supporting preparedness policies and programming? Probe: <ul style="list-style-type: none"> Is UNFPA supporting anticipatory action (or other preparedness efforts)? Have these efforts been adequate? What could be done differently or improved?
<p>A8.2 UNFPA's humanitarian interventions contribute to capacity development and ownership at national and local level to strengthen the resilience of countries, systems, communities and individuals to reduce disaster risks and respond to crises.</p> <ul style="list-style-type: none"> Since the onset of the crisis, what has UNFPA done to support local and national partners (both government and civil society) to build their capacity and leadership for more localized and sustainable response (e.g. in programming, advocacy, policy making, coordination, etc.? Probe: <ul style="list-style-type: none"> Has this been adequate? What could be done differently? Has UNFPA support to partners led to improved capacity or sustainability of partners in their work? If so, how do you know? If not, why not? Does UNFPA support to partners make them better prepared to respond to future crises? What needs to be done differently?

B: Focus Group Discussion Template

UNFPA Evaluation of the UNFPA capacity in humanitarian action 2019-2024

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)⁶
- 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 Humanitarian Response Evaluation is:

- To understand community experiences during humanitarian crises, the additional challenges people faced and needs they had;
- To understand people's perceptions of the activities supported by UNFPA in responding to the crisis;
- To assess any ongoing changes in behaviours among community members as a result of the humanitarian crisis 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 affected

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 humanitarian crisis started here, how did your and your children's/family's health [for SRH beneficiaries] and/or support [for GBV beneficiaries] needs change?

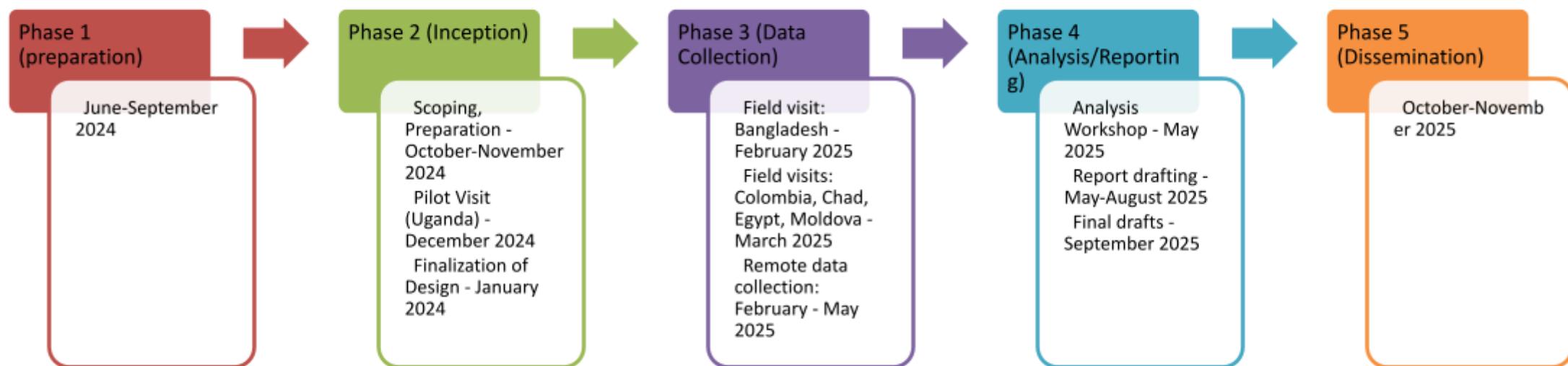
Did the activities supported by [UNFPA/PARTNER] change to meet these needs?

What about for vulnerable people (youth, people with disabilities, older people)?

⁶ 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.

- Are you consulted or met with by UNFPA/IP to ask about your needs or any issues you face with the support provided? How often? Are vulnerable people (specify as required) included in these? Do you see any positive outcomes from this consultation?
- Over the past number of years, what SRH services does UNFPA/partner provide here? What services did you receive and what do you think about the services you received (in terms of quantity and quality of services)? What are the main activities undertaken? What have been the biggest challenges? What do people do when the facility (e.g. health centre, WGSS, youth centre) is closed? Where do they seek care?
- Does supported programming include specific strategies to reach vulnerable people such as ethnic/religious minorities, people with disabilities etc.? What are the benefits of the supported services for such groups of people? can you share any examples or success stories?
- Have you seen any changes in the levels of acceptance of and demand for family planning and other SRH services where UNFPA provides support?
- Have any positive changes translated into changes into the level of uptake of such services? If not, why not?
- Are positive changes being seen in the reality of sexual and reproductive health of the people and communities supported by UNFPA and partners? If not, why not?
- Over the past number of years, how successfully has UNFPA implemented GBV prevention and response programming (in terms of quantity and quality of services)? What are the main activities undertaken? What have been the biggest challenges?
- Does UNFPA-supported GBV programming include specific strategies to reach vulnerable people such as ethnic/religious minorities, people with disabilities etc.? If so, what are they? How successful have they been?
- Have you seen any changes in the levels of acceptance of and demand for GBV services where UNFPA provides support?
- Have any positive changes translated into changes into the level of uptake of such services? If not, why not?
- Are positive changes being seen in the reality of gender equality norms and practices among the people and communities supported by UNFPA and partners? If not, why not?
- To what extent does UNFPA provide SRHR and GBV programming in the same locations, so those that need it can be referred easily from one to another?
- Are you satisfied with the availability of both SRHR and GBV services in your region/community? Do you feel UNFPA or its partners should be doing something different?
- Does UNFPA support to partners make them better prepared to respond to future crises? What needs to be done better?

Annex VII: Evaluation timeline



Annex VIII: List of key references

The evaluation team solicited, searched for and/or downloaded a total of 1,534 secondary data sources for the purposes of the evaluation. As noted under Annexes II and III above, only a proportion of these provided useful evidence – AI tools were used to rapidly scan many of these sources for data related to the evaluation questions/assumptions and extract this data for review by the evaluators. The following table notes the specific totals of documentary sources for each of the 15 participating countries and at global/regional levels.

The following list are the *key* references that were used to provide substantive evidence for the evaluation – and footnoted as such within the findings of the evaluation report in volume 1.

Key documents noted in report

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Location	# of Items
Global/Regional	136
Bangladesh	476
Burkina Faso	59
Burundi	60
Chad	54
Colombia	131
Egypt	140
Madagascar	15
Moldova	126
Myanmar	65
Peru	45
Somalia	78
Syria	26
Uganda	30
Ukraine	35
Venezuela	58

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- UNFPA, Cash & Voucher Assistance Annual Report, UNFPA 2024

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- WHO, Health Cluster, Baseline Assessment on Sexual and Reproductive Health Coordination, 2024

Annex IX: List of key informants

The following table lists the locations, positions and organizational affiliations of the stakeholders contributing to this evaluation via interview. Names have been redacted for ethical purposes.

Location	Interviewee Position	Interviewee Org
Armenia	Chief Operations Officer	Safe You
Bangkok	Maternal health advisor	UNFPA
Bangkok	PD Advisor on Census and Data	UNFPA
Bangkok	Regional M&E Advisor APRO	UNFPA
Bangkok	DRD	UNFPA
Bangkok	GBV Advisor	UNFPA
Bangkok	Regional Humanitarian Advisor APRO	UNFPA
Bangkok	Gender & HR advisor	UNFPA
Bangkok	RMP	UNFPA
Bangkok	Regional Director	UNFPA
Bangladesh	UNFPA Field Officers Development and Disaster Response	UNFPA
Bangladesh	Program Specialist, A&Y Program Analyst, Programme Officer- humanitarian focal point	UNFPA
Bangladesh	Programme Manager- Humanitarian Project Officer- Humanitarian M&E and Documentation Officer Executive Director	Concerned Women for Family Development
Bangladesh	Program Specialist Maternal Health	UNFPA
Bangladesh	Various technical positions	UN agencies and government working in AA
Bangladesh	Information Management, Operations Team	UNFPA
Bangladesh	Various technical positions	Plan, Proptyashi, IPAS, GUK, Action Aid, Brac, Mukti
Bangladesh	Country Rep Bangladesh	UNFPA
Bangladesh	Humanitarian Affairs Resident Coordinators Office	Resident Coordinator's Office
Bangladesh	M&E team members M&E Officer/Consultant Programme Officer, Media and Communication	UNFPA
Bangladesh	Humanitarian Advisor Bangladesh	UNFPA
Bangladesh	Various technical positions	Bandhu, Prerona, GUK, CWFD
Bangladesh	6 medical staff KII	Friendship Hospital
Bangladesh	SRHWG Coordinator GBVSS Coordinator YWG Co-coordinator	UNFPA
Bangladesh	Child Protection Coordinator Education Coordinator	UNICEF
Bangladesh	Deputy Humanitarian Advisor	Australian High Commission
Bangladesh	Deputy Program Manager- EOC, Program manager, DGFP (Adolescent health) Assistant Director, Midwifery	GoB, Directorate General of Health Services (DGHS)

Bangladesh	GBV coordination partners	Action Aid, Concern, World Vision, HI, MJF, CWFD
Bangladesh	GBViE Officer and GBV humanitarian focal, National Consultant (MHPSS and Social Services)	UNFPA
Bangladesh	implementing UNFPA GBV humanitarian response interventions in Disasters	Action Aid , GUK
Bangladesh	(ISCG Coordinator)	ISCG (UNHCR)
Bangladesh	GBV in Disasters Coordinator	UNFPA
Bangladesh	Implementing Partners working on SRH in disaster response	CIPRB, Green Hill, LAMB, PHD
Bangladesh	DISASTER REPSONSE (AND PROVIDES SOME TECHNICAL SUPPORT TO CB)	UNFPA
Bangladesh	Adolescent and Youth Program Specialist	UNFPA
Bangladesh	Protection Sector Coordinator Livelihood Sector Coordinator	UNHCR
Bangladesh	Humanitarian Team Lead	UNFPA
Bangladesh	Head of UNFPA CoxX Bazaar Office	UNFPA
Bangladesh	District Family Planning Officer	DDFP
Burkina Faso	Deputy Rep	UNFPA
Burkina Faso	President/Finance & Admin, Project Manager	Abba's International Healing Centre
Burkina Faso	Dep. PM; PM; Head of IEDA; Admin	UNFPA
Burkina Faso	MEAL Specialist; Humanitarian Project Manager; Deputy Country Director	UNFPA
Burkina Faso	Information Manager/GBV AOR GBV Programme Specialist Strategic Planning, Monitoring & Evaluation Officer Project Coordinator GBV Specialist (East Region)/UNFPA FP Humanitarian Coordinator Netherlands Project Coordinator SRH Programme Officer SRHR Programme Specialist Humanitarian Coordinator International Program Specialist Family Planning/Reproductive Health Commodity Security/HDP Specialist Humanitarian GBV Specialist (North)	UNFPA
Burundi	Director National RH Program Burundi	MOH
Burundi	SRH	UNFPA
Burundi	GBV Specialist CONSULTANT CONTRACT	UNFPA
Burundi	Manager of NGO Seruka Center (GBV case management)	NGO Seruka Center
Burundi	Technical Specialist MH/RHCS Burundi	UNFPA
Burundi	M&E Officer	UNFPA

Chad	Chef de Canton #1, Bol	Local Government
Chad	Chef de Canton #2, Bol	Local Government
Chad	Delegate for Action for Women & Children, Bol District	Local Government
Chad	Charge des affaires humanitaires	OCHA
Chad	Heath Delegate	Local Government
Chad	Resident Coordinator	OCHA
Chad	Cluster/sector lead/co-lead agency representatives (Gender, GBV AoR,PSEA)	CARE, UNICEF, Soid-Trus, Ministry of Women, WFP, OCHA
Chad	Director, Good Neighbours; IGA Officer;, Accountant	Good Neighbours
Chad	Protection Officer/Midwife	Intersos
Chad	Humanitarian Coordinator	UNFPA
Chad	Senior Midwife	UNFPA
Chad	Directrice de... ;Directeur de Planifcation de Action Humnitaire	Ministry of Humanitarian Action
Chad	Directeur de la Promotion et Protection des Droits de Femme	
Chad	Directeur de la Promotion de Gens	Ministry of State, Women, and Children
Chad	Senior Health Coordinator	IRC
Chad	Director of Technidev, Finance Assistant	TechniDev
Chad	UNFPA Midwife	UNFPA
Chad	Country Representative	UNFPA
Chad	Peace and Development Adviser	Peace Building Fund
Chad	Programme Officer for Islamic Affairs	CSAI
Chad	TBA	Association Femme jurist- AGT
Colombia	Regional Coordinator	Alianza por la Solidaridad (Action Aid)
Colombia	Coordinator of Multilateral Sources; Liaison Officer for UNFPA, International Cooperation Demand Management Directorate	Presidential Agency for International Cooperation of Colombia (APC-Colombia)
Colombia	Arauca Local Government: Professional Nurse; Coordinator of Territorial Plan	Local Government
Colombia	Project Manager, Barco Hospital, Psychologist	Barco Hospital
Colombia	MH Specialist government of Health Director of SRHR Dept of Health in Santander Secretary of government for Cucuta city Secretaria of health, Cucuta Council of Rosaria Municipality	Local Government
Colombia	UNHCR Senior Community Protection Officer FOLI Director at national level UNICEF Office coordinator Santander North Interagency Coordination Platform Co-leader OCHA Information Analyst	Various (interagency UN+NGO)
Colombia	PAHO Consultant Psychologist/GBV specialist SCF UN Verification Mission Project coordinator Apoyar (Local NGO)	Various (interagency UN+NGO)
Colombia	Adolescent and Youth Advisor	UNFPA

Colombia	SRH Advisor	UNFPA
Colombia	Gender, Rights and Interculturality Advisor	UNFPA
Colombia	Country Representative	UNFPA
Colombia	Deputy Representative	UN Women
Colombia	Deputy Representative	UNFPA
Colombia	Resident Coordinator	OCHA
Colombia	Territorial Coordinator	UNFPA
Colombia	P&D Advisor	UNFPA
Colombia	M&E Advisor	UNFPA
Colombia	Coordinadora Resuesta Humanitaria; Profesional Para La Coordinación Y Programación Humanitaria En VBG; Profesional para el seguimiento y monitoreo de la respuesta humanitaria	UNFPA
Colombia	Cucuta Programme Team	UNFPA
Colombia	Former GBV Advisor, LACRO (currently humanitarian coordinator, Colombia)	UNFPA
Copenhagen	Humanitarian Supplies Specialist SCMU	UNFPA
Egypt	Gender Specialist, Humanitarian Assistant, Humanitarian Analyst, Country Representative, Assistant Representative, Sub-national humanitarian coordinator, Humanitarian field coordinator	UNFPA
Egypt	Programme Specialist, RH/FP, Programme Specialist RH	UNFPA
Egypt	ASRO humanitarian coordinator, ASRO humanitarian analyst, ASRO REGA, ASRO CVA specialist	UNFPA
Egypt	Programme Specialist, M&E, Programme Coordinator, M&E, M&E Associate	UNFPA
Egypt	ASRO CVA Specialist	UNFPA
Egypt	Gender Specialist, Humanitarian Assistant, Humanitarian Analyst	UNFPA
Egypt	Head of Operations, Programme Associate	UNFPA
Egypt	Various technical positions	Various (interagency UN+NGO)
Egypt	Director of Programmes, Safe Space Manager	Etijah
Egypt	General Manger, Deputy General Manager	MoY&S
Egypt	Amal Philip, Michael Mina	NWC
Egypt	Humanitarian analyst	UNFPA
Egypt	Sub-national humanitarian coordinator	UNFPA
Egypt	Head of Office, Executive Assistant	OCHA
Egypt	GBV Specialist	UNFPA
Egypt	Regional Logistician ASRO and Regional Supply Chain Specialist, ASRO	UNFPA
Geneva	Head of Programme Support Unit, HRD and Global humanitarian SRH Advisor, HRD	UNFPA
Geneva	Senior Advisor, HRD	UNFPA
Geneva	Programme Advisor – HRD	UNFPA

Geneva	Head of External Relations Unit, HRD	UNFPA
Geneva	M&E and Reporting Specialist	UNFPA
Geneva	Director HRD, Deputy Director HRD	UNFPA
Geneva	Senior CBP Officer	UNHCR
Geneva	Emergency Response/Surge Specialist	UNFPA
Istanbul	Regional M&E Advisor, EECARO	UNFPA
Istanbul	Regional Humanitarian Advisor, EECARO	UNFPA
Istanbul	Regional GBV Advisor EECARO	UNFPA
Istanbul	GERT Manager	UNFPA
Jordan	Head of WoS Hub, ASRO	UNFPA
Moldova	International Consultant on Humanitarian Monitoring and Evaluation, Country Representative, Assistant Representative, Emergency Coordinator, Operations Manager	UNFPA
Moldova	Programme Analyst, SRH	UNFPA
Moldova	Operations Manager, Admin / Finance Associate, Procurement Analyst, Finance Assistant, Logistics Assistant, Programme Associate UNFPA	UNFPA
Moldova	Programme Analyst, GBV, RO Gender Specialist on detail assignment	UNFPA
Moldova	Deputy Representative, Interagency Coordinator UNHCR	UNHCR
Moldova	Head of General Department of Integrated Healthcare, Head of Mother and Child Healthcare Ministry of Health	Ministry of Health
Moldova	Head of Department for Gender Equality Policies	MoLSP
Moldova	Deputy Director of Agency on EVAW	Agency for EVAW
Moldova	Health and Nutrition Working Group Coordinator	WHO
Moldova	Coordinator	HelpAge
Moldova	Deputy Director of PHC, Causeni, Director of PHC, Causeni	PHC Causeni
Moldova	Director of Rayonal Hospita, Causeni, Head of perinatal centre, Causeni	Causeni Hospital
Moldova	Head of International Cooperation Section, Accountant, Specialist Coordinator, International Cooperation Section	CNAM
Moldova	Director of IMCH, Obstetrician-Gynecologist within IMCH	IMCH
Moldova	Humanitarian Advisor	FCDO
Myanmar	Gender/GBV Myanmar	UNFPA
Myanmar	Rep to Myanmar	Government
Myanmar	Rep of UNHCR	UNHCR
Nairobi	Coordinator, UNFPA climate change TWG ESARO	UNFPA
Nairobi	Humanitarian Technical Specialist ESARO	UNFPA
Nairobi	Regional M&E Adviser ESARO	UNFPA
New York	Chief of Quality Management	UNFPA

New York	Former Resource Mobilisation Advisor	UNFPA
New York	DED-Management	UNFPA
New York	Chief, Finance Branch; Chief - Strategic Resource Planning Branch	UNFPA
New York	Advisor, DHR	UNFPA
New York	Advisor, Gender & Gender-Based Violence	UNFPA
New York	PSEA	UNFPA
New York	Climate Change, DRR, Anticipatory Action	UNFPA
New Zealand	Population Policy Advisor (formerly) in ESARO	UNFPA
Panama	SRH Coordinator in Emergencies	UNFPA
Peru	DepRep and Rep	UNFPA
Peru	Oficial Nacional de Programa- Género (acting humanitarian coordinator when needed); DepRep, Project Coordinator – but acting SRHiE in previous years; SRH Programme Officer (new)	UNFPA
Poland	IRC Women's Protection and Empowerment Poland	IRC
Romania	GBV Coordinator	EEIRH
Romania	Senior Advisor	EEIRH
Senegal	Deputy RD	UNFPA
Senegal	GBV in Emergency Specialist	UNFPA
Senegal	Humanitarian Advisor, M&E Advisor	UNFPA
Senegal	Resource Mobilization and Strategic Partnership Advisor	UNFPA
Senegal	Commodity Management Team Lead	UNFPA
Somalia	Evaluation Advisor: Focus on Anticipatory Action	UNFPA
Somalia	Dep Rep in Somalia	UNFPA
Somalia	Executive Director of IP	Somali Life Organization
Somalia	Reproductive Health Commodities Security Specialist, also now covering for the SRH position until it is filled	UNFPA
Somalia	currently GBV/Gender Specialist (GBV/Gender Specialist)	UNFPA
Syria	RH and GBV Project Manager	AKDN
Syria	Head of Supply	UNFPA
Syria	Director of Primary Health Care / Head of RH unit and FP	Ministry of Health
Syria	GBV Programme Analyst, Assistant Representative	UNFPA
Uganda	Programme Management	ACORD
Uganda	Senior Program Manager (former)	Danish Embassy, Uganda
Uganda	Programme Delivery and Coordination Specialist/Hum. FP (former)	UNFPA
Uganda	Resource Mobilisation Specialist	UNFPA
Uganda	Data Specialist	UNHCR
Uganda	Maternal Health Specialist	UNFPA
Uganda	Head of Field Office Kiryandongo	UNHCR

Uganda	P&D Specialist	UNFPA
Uganda	Country Representative	UNFPA
Uganda	Coordinator – Kiryandongo Settlement	ACORD
Uganda	M&E Specialist	UNFPA
Uganda	Advisor	Embassy of Netherlands, Uganda
Uganda	Program Assistant - Integrated Field Support; Program Analyst RH	UNFPA
Uganda	UNV for UNFPA & now Iceland MOFA	UNFPA
Uganda	Assistant Public Health Officer – SRH/HIV focal point	UNHCR
Uganda	Humanitarian Programme Analyst	UNFPA
Uganda	DLG Representative, Gender Focal Point, Senior Probation & Welfare Officer, Assistant of Police	Local Government
Uganda	District Planner + UNFPA Focal Point, DHO Representative	Local Government
Uganda	OPM Office	Local Government
Uganda	SRH Officer, Medical Coordinator	Medical Teams International
Uganda	GBV Technical Lead	UNFPA
Uganda	UNV; National Program Analyst -Human Rights (GBV AoR co-Chair)	UNFPA
Uganda	Executive Director	Nagura Teenage Centre
Uganda	RCO Humanitarian Coordinator	UN Resident Coordinator's Office
Uganda	GBV specialist WAY/SAY projects	CARE
Uganda	Part of Gov Team working on Integration of SRH into DRM	Government
Uganda	UNHCR GBV Officer -coordination lead	UNHCR
Uganda	Human Resources Specialist	UNFPA
Uganda	Program Analyst GBV and Human Rights	UNFPA
Uganda	Adolescent and Youth Analyst	UNFPA
Uganda	Midwife and minister of health representative	Government
Uganda	Bududa District Technical Team	Government
Uganda	Mbale District Technical Team	Government
Uganda	Regional Emergency Operations Center	Government
Uganda	Deputy Representative	UNFPA
Uganda	Programme specialist - Head of sub-office	UN Women
Uganda	4x midwives, 1x doctor	Service providers
Uganda	Emergency Operations Center Mbale Staff	Government
Uganda	Village Health Team	Community members
Uganda	various field roles	Namatala Health Facility
Uganda	various field roles	ACORD and UNFPA
Ukraine	Commissioner for gender equality policy	Government of Ukraine
Ukraine	Head of organization	M.ART.IN-Club
Ukraine	Senior Emergency Coordinator and Deputy Representative, Head of External Relations Unit	UNFPA
Ukraine	Executive Director	WHFP
Ukraine	Senior information management officer	OCHA
Venezuela	SRHiE specialist	UNFPA

Venezuela	National GBViE specialist, GBV AoR Coordinator	UNFPA
Venezuela	Representante Nacional/Head of Office	UNFPA
Venezuela	M&E Manager	UNFPA

Annex X: Additional analyses and data

A. Humanitarian plans analysis

The evaluation analysed specific humanitarian plans for the fifteen sampled countries, color-coded for strength of inclusion. Some of the 15 evaluation countries operate under successive HNOs/HRPs and some under a form of RRP. All those that are available for both 2019 and 2024 are listed here for comparative analysis across the four mandate areas. Good (green) reference means that the mandate area is referenced as a key issue and key intervention area. Moderate (yellow) means that the mandate area is referenced either as a key issue or as a key intervention area. Poor (red) means the mandate area is not referenced. Key references to type of documents are: HRP – Humanitarian Response Plan. HNO – Humanitarian Needs Overview. HNRP – Humanitarian Needs and Response Plan. RRP – Refugee Response Plan. RRRP – Regional Refugee Response Plan. JRP – Joint Response Plan. RMRP – Refugee and Migrant Response Plan. IARRP – Inter-Agency Refugee Response Plan.

Country	Type of Document	Year	Ref. to SRHR as key issue	Ref. to GBV as key issue	Re. adolescent & youth	Ref. to pop. data
Bangladesh	JRP ⁷	2019				
	JRP	2024				
Burkina Faso	HRP	2019				
	Sahel HNRP	2024				
Burundi	RRRP	2019				
	IARRP	2024				
Chad	HRP	2019				
	HNRP	2024				
Colombia (same as Peru)	RMRP					
	RMRP					
Egypt	3RP	2019				
	3RP	2024				
Madagascar	No HRPs / RRP					
Moldova	n/a	2019				
	RRRP	2024				
Myanmar	HRP	2019				
	HNRP	2024				
Peru (same as Colombia)	RMRP	2019				
	RMRP	2024				
Somalia	HRP	2019				
	HNRP	2024				
Syria	HRP	2019				
	HNO	2024				

⁷ Bangladesh Joint Response Plan (for the Rohingya Humanitarian Crisis)

Uganda	No HRP s / RRP s					
Ukraine	HRP	2019	Orange	Yellow	Orange	Orange
	HRP	2024	Orange	Orange	Orange	Orange
Venezuela	HRP	2019	Yellow	Yellow	Yellow	Red
	HRP	2024	Orange	Yellow	Orange	Red

B. People in need vs. UNFPA targets vs SRH services provided

The tables provide a 2023 snapshot of countries included in this evaluation. The tables use overall people in need as the base denominator, and the number of people targeted as a percentage of that.⁸ This analysis aims to highlight differences in people reached vs. people targeted / people in need.

The fourth column shows the number of people reached. UNFPA does not seek to address duplication in reporting recipients of services (i.e. a recipient might receive SRH information AND family planning services AND other SRH services (and indeed be a recipient of GBV services or information). Thus, in table 1, an estimated number of discrete service/information recipients is determined as the **highest** number available against a variety of different SRHR and GBV services and information reported by UNFPA. This partially avoids double-counting. The second table ignores double-counting to provide a contrasting analysis.

It is noted that the people targeted figure is across both SRHR and GBV services and information. The underlying dataset does not disaggregate those targeted by SRHR or GBV.

De-duplicated recipients						
Country	People in Need	UNFPA People targeted	% UNFPA target of people in need	People reached with SRHR services/information	People reached with GBV services/information	% PEOPLE REACHED against people targeted (GBV+SRH)
Bangladesh	14,150,526	1,013,547	7%	313,182	681,224	98%
Burkina Faso	3,605,000	1,076,989	30%	77,106	41,856	11%
Burundi	1,800,000	429,000	24%	399,000	88,000	114%
Chad	6,900,000	1,364,454	20%	637,466	48,534	50%
Colombia	15,084,894	198,724	1%	11,456	17,958	15%
Egypt	2,921,200	104,830	4%	17,523	23,682	39%
Madagascar	199,700	57,907	29%	29,342	45,000	128%
Moldova	380,000	187,200	49%	72,910	18,218	49%
Myanmar	17,600,000	550,000	3%	233,310	147,985	69%
Peru	2,046,824	46,590	2%	5,256	3,630	19%
Somalia	8,212,000	1,252,800	15%	207,450	77,861	23%
Syria	24,100,000	3,200,000	13%	1,334,207	683,423	63%
Uganda	4,358,768	622,392	14%	447,751	16,452	75%
Ukraine	17,500,000	1,458,000	8%	149,366	277,733	29%
Venezuela	7,750,000	250,998	3%	109,436	43,274	61%

⁸ All data is from <https://www.unfpa.org/data/dashboard/emergencies>.

Total	126,608,912	11,813,431	9%	4,044,761	2,214,830	53%
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This table simply sums the reported recipients for SRHR and GBV information/services as reported by UNFPA. This is likely to entail significant double counting. Given how UNFPA reports its data no further means of determining or mitigating duplication of reported recipients is possible. Therefore, the last column recategorizes the result as **services provided** which is a more accurate description, although this is not a performance indicator that UNFPA uses.

Duplicate recipients						
Country	People in Need	UNFPA People targeted	% UNFPA target of people in need	People reached with SRHR services/information	People reached with GBV services/information	% SERVICES PROVIDED against people targeted (GBV+SRH)
Bangladesh	14,150,526	1,013,547	7%	502,981	1,140,992	162%
Burkina Faso	3,605,000	1,076,989	30%	387,198	70,685	43%
Burundi	1,800,000	429,000	24%	1,061,534	88,525	268%
Chad	6,900,000	1,364,454	20%	1,094,835	53,535	84%
Colombia	15,084,894	198,724	1%	21,949	28,277	25%
Egypt	2,921,200	104,830	4%	36,023	33,307	66%
Madagascar	199,700	57,907	29%	56,686	67,104	214%
Moldova	380,000	187,200	49%	80,140	30,795	59%
Myanmar	17,600,000	550,000	3%	490,764	373,024	157%
Peru	2,046,824	46,590	2%	7,818	4,114	26%
Somalia	8,212,000	1,252,800	15%	450,407	138,450	47%
Syria	24,100,000	3,200,000	13%	2,194,473	1,216,923	107%
Uganda	4,358,768	622,392	14%	615,897	30,329	104%
Ukraine	17,500,000	1,458,000	8%	318,034	535,034	59%
Venezuela	7,750,000	250,998	3%	243,912	83,215	130%
Total	126,608,912	11,813,431	9%	7,562,651	3,894,309	97%

UNFPA does not collect data in a way that allows it to mitigate double-counting. The calculations in the above 2 tables are based on many assumptions, which is why they are not integrated in the main report.

C. Mapping of YPS regional and national action plan

	Countries w/ ongoing YPS work	Status	Timeline & Expected Launch Dates	Entities involved			
				UNFPA	UNDP	UN Women	Other partners engaged/leading the process (if we know)
Regional Action Plans on YPS	Arab States Regional YPS Implementation Plan	The strategy was endorsed and launched in August 2024. The implementation plan of the strategy is developed, named the Strategy and Action Plan, and awaits endorsement from the Arab Ministers of Youth and Sport Council. The Action Plan is likely to be endorsed in the LAS ministerial meeting in January 2025.	Arab Strategy launched Aug 2024	X	X		Lead of the strategy: League of Arab States (LAS) Other partners: UNLOLAS, DPPA, Folke Bernadotte Academy.
	Great Lakes						
	EECA	Joint decision on not pursuing Regional YPS action plan since we have no suitable counterpart to work with, which would result in a Regional Action Plan of little to no value. Some discussion on a possible subregional action plan for Western Balkan.		X	X		
West & Central Africa	Burkina Faso	The process of drawing up the action plan is underway. A diagnostic implementation workshop was organised by the Ministry of Youth with all the structures working on Resolution 2250. A national online consultation was also carried out to find out how informed young people were about the resolution. This workshop was accompanied by a roadmap validated by the stakeholders.	End of 2024	X	X		Direction de l'éducation permanente du ministère des sports, de la jeunesse et de l'emploi

	Benin	<ul style="list-style-type: none"> - Launch of the project "Strengthening national capacities in matters of youth, peace and security in West Africa (Benin) - Establishment of a national coalition on the YPS agenda and on resolution 2250 in Benin, - Dissemination of the coalition's ToR, - Recruitment of the consultant for the development of the YPS plan, - Organization of an information and promotion campaign on the agenda, - Holding of departmental consultations (2 departmental consultations) and 03 virtuals consultations - Design workshop in March/April, Drafting of the NAP is process 	June 2024 to September 2025	X	X		the Ministry of Sports of Benin with the support of the UN Department of Political and Peacebuilding Affairs (DPPA), UNOWAS and WANEP Africa
	Burundi	the country is starting to work on a NAP for YPS			X		
	Cameroon	UNFPA outlined the next steps; these include recruiting a national consultant and forming a multi-stakeholder committee. They shared their plans for webinars and capacity-building activities in Cameroon, focusing on YPS. Consultants were recruited to conduct the writing process of the NAP. Youth Consultations will also be made on December and at the end of December we are expecting to have a draft of NAP	February 2025	X			Ministry of Youth Affairs and Civic Education, Local Youth Corner, Search for Common Ground, GIZ, EU, AU
	Central African Republic						

	Chad	<p>Chad has started the process towards development of its YPS National Action Plan. Some UN agencies (UNFPA, PBF, UNICEF, UNDP) under the lead of the Ministry of Youth held an initial meeting at the office of the Resident Coordinator on the development of the National Youth, Peace and Security Strategy on 6 November 2024. The validation of the ToRs for the elaboration of the National Youth, Peace and Security Strategy (SNJPS) and its National Plan were discussed.</p> <p>The following action plans were adopted as the steps to be followed:</p> <ol style="list-style-type: none"> 1. Development of conceptual documents defining the approach and the strategies 2. Presentation of the draft of conceptual documents to the Minister for Youth. 3. Recruitment of two consultants to develop the National Strategy of YPS and its National Action Plan 4. Consultation process (approach to be defined - national, local through regional pools or other) 5. Consultation workshop with technical and financial partners and young people 6. Feedback and validation process. UNFPA has been designated as the lead agency to carry out this work. 	November 2024 to May 2025	X	X		UNICEF, PBF, UNDP, Ministry of Youth, National Youth Council and other civil society organizations working in the field of peace consolidation
	Guinea	<p>1. Establishment of a national youth-peace and security coalition ; 2. Establishment of a roadmap for the development of a national YPS action plan; 3. Training of key stakeholders on the content of the youth-peace and security agenda</p>	<p>1. In June 2024, the national youth-peace and security coalition was established in Guinea; 2. In 2025, national consultations will be organized for the</p>	X	X		UNRCO/PDO, PBF, UNESCO, UNICEF, HCDH, Ministry of Youth, Ministry of Territorial Administration, National Youth Council and other civil society organizations working in the field of peace consolidation

			development of the YPS action plan				
	Côte d'Ivoire	In a close collaboration with the Minister of youth, National youth council, UNICEF and UNFPA have gathered 402 young people, community leaders, women and others counter parts (ILO, IOM, GIZ, national NGO,) for a national YPS consultative process in August 2024. A draft of the key aspirations of young people and recommendations are available to drive the formulation of the YPS NAP in Cote d'Ivoire particularly in the northern border (Burkina Faso & Mali). An international consultant is recruited to conduct the process under the guidance of the national civic agency, the Youth council, UNFPA and UNICEF.	By February 2025		X		UNICEF, PBF, UNDP, Ministry of Youth, National Youth Council and other civil society organizations working in the field of peace consolidation
	Liberia	- Launch of the project "Strengthening national capacities in matters of youth, peace and security in West Africa (Benin) - Establishment of a national coalition on the YPS agenda and on resolution 2250 in Benin, - Dissemination of the coalition's ToR, - Recruitment of the consultant for the development of the YPS plan, - Organization of an information and promotion campaign on the agenda, - Holding of departmental consultations (6 departmental consultations) Design workshop in March, Drafting of the NAP is process	September 2025	X	X	X	DPPA, Government of Liberia, Federation of Liberian Youth, Mano River Youth Paliment, Liberia National Student Union
	Mali						
	Mauritania	NOTE NOT NAP. The Mauritanian National Youth strategy (2024-2030) was launched on September 2024. In Objective 1.2.4: Improving alternative opportunities and protection factors for vulnerable groups (young refugees, young offenders, young people exposed to discrimination based on gender or race) in the path of civil participation, one of the priorities is to "Improve the role of young people in peace, security and the prevention of extremism, particularly in border areas".	Launched on September 2024	X	X		UNICEF, UNHCR, UNESCO, Gov of Republic Islamic of Mauritania, Youth organizations, NGOs

	Nigeria	<p>The Nigerian National Action Plan (NAP) on Youth, Peace and Security (YPS) was launched in Abuja on the 1st of November 2021 by the Nigerian Federal Ministers of Youth and Sports Development, and Women Affairs. The Centre for Sustainable Development and Education (CSDEA) collaborated with the Federal Ministry of Youth and Sports Development, and the Institute for Peace and Conflict Resolution of the Federal Ministry of Foreign Affairs with support from UNFPA.</p> <p>Sub-national action plans (SAPs) were developed by 2022 in Kogi and Nassarawa States. UNDP has supported the development of SAPs in Kaduna and Katsina States in 2024. These SAPs also come with implementation structures made up of youth-led CSOs, religious bodies, National Youth Councils and Academia. At least 7 other states are developing SAPs according to the Federal Ministry of Youth Development's 2024 progress report.</p> <p>In Northeast Nigeria, UNDP in 2024 limited the vulnerability of 1,000 youth (295 being female) from Monguno, Ngala, and Ngarannam in Borno state to joining non-state armed groups by enhancing their vocational and entrepreneurial skills and providing them with business start-up equipment and cash grants. 400 members (79 being female) of Voluntary Security Organizations (VSOs) in Borno state were empowered with livelihood opportunities following their vocational skills training on solar installation, briquette making, satellite installation, and welding to ensure their sustainable reintegration into productive civil life.</p>	Launched 1st November 2021; various ongoing sub-national launches	X	X	X		DPPA, Nigeria Coalition on Youth Peace and Security, Centre for Sustainable Development and Education (CSDEA), Nigerian Federal Ministry of Youth Development, Federal Ministry of Women Affairs, Institute for Peace and Conflict Resolution of the Federal Ministry of Foreign Affairs, State Ministries of Youth Development, Local CSOs and NGOs.
	Togo							
	The Gambia	The Gambia NAP was launched on 11th February	December 2024 - January 2025	X	X		- Government of The Gambia - Ministry of Youth and Sports and the National Youth Council - GIZ-AU	

							- United Nations Peacebuilding Fund - Action Aid Gambia
Gabon	Gabon does not currently have a national youth, peace and security programme, but discussions began in November 2024 with the Ministry of Youth with a view to drawing up such a programme in March 2025 with the participation of other development partners.	Mars 2025	x				Discussions to develop this programme are ongoing.
Seychelles	They are facing challenges related to financing, but the engagements with youth on YPS are ongoing.		x				
Senegal	the country is working on the development of its NAP. From June 11 to 13, 2024, the Ministry of Youth, Sports, and Culture, with UNDP Senegal, hosted the First National Consultation on UNSCR 2250 – YPS in Ziguinchor. This consultation aimed to enhance youth involvement in peace and security, resulting in the formulation of a provisional National Action Plan for 2024-2028. The plan is scheduled for adoption in December 2025, coinciding with the YPS anniversary. (zinguinchor declaration).		x	x			Minister of Youth, Sports and Culture, UNRCO, UNOWAS, OIM, UNICEF, AYAP
Ghana	Ghana has started the process towards development of its National Action Plan. The following are key actions/milestones indicating current status of the process in Ghana. 1. National consultative meeting held to mobilize national level policy actors and CSOs to share the vision of the NAP development - led by the Ministry of Youth and Sports and the National Youth Authority. 2. National Technical Working Group set-up and inaugurated by the Minister for Youth and Sports and the UNRC to Ghana. 3. Technical Working Group held meeting to develop the Ghana NAP development road map with stakeholders plan, partnerships and resource mobilization strategy. 4. Youth Coalition for YPS in Ghana is currently being formed as a Thematic Pillar under AfriYAN	1. Finalization of NAP Development Framework/strategy - December 2024 2. Resource mobilization, partnerships and stakeholders engagements - Q1 2025 3. Regional and National	x				1. National Youth Authority of Ghana 2. Kofi Annan International Peacekeeping Training Center 3. UNRCO 4. GIZ 5. EU Commission - Ghana

			Consultations - Q2 2025 4. NAP Drafting, finalisation and validation - Q3 2025 5. Launch and Promotional activities - Q4 2025				
	Sierra Leone	Sierra Leone currently does not have a National Action Plan on Youth Peace and Security. UNDP, Ministry of Youth Affairs (MOYA) / National Youth Commission (NAYCOM) and CSOs have identified this as a strategic priority for the country. To date, a CSO-led National Youth Peace Action Coalition of CSOs engaging to push the agenda. The coalition has engaged the DPA, UNDP, MOYA and NAYCOM and developed a concept note. As a way forward, UNDP working with the government and CSOs has the intention to support the advancement of the YPS agenda including NAP development and implementation.	Second half of 2025		X		Ministry of Youth Affairs (MOYA), National Youth Commission (NAYCOM), and a CSOs-led National Youth Peace Action Coalition.
	Niger	Niger plans to draw up a youth peace and security action plan like the women's peace and security agenda. One of the foundations of this work is the national strategy for youth participation in decision-making bodies that the Ministry of Youth has drawn up with the support of UNFPA.	2025 whole				
	Cabo Verde	No plan at country level					
East and Southern Africa	DRC	The National Action Plan (NAP2250) has been in force since 2022 and will last for 4 years, until 2026. The Ministry of Youth and Patriotic Awakening through the National Technical Secretariat 2250 (STN2250) of the country are those who manage the agenda at the national level. A mid-term review of NAP2250 was carried out in August 2024 with the support of UNDP DRC, which should help to engage more partners for efficiency in its operationalization.			X	FBA, MONUSCO, National Youth Council	

	Ethiopia	The preparation of the YPS national Action plan is initiated by the Ministry of Women and Social Affairs. With the support of UNDP, an assessment of the challenges and opportunities of the youth in Ethiopian in the context of YPS, was conducted to inform the NAP preparation. Interactive workshops and capacity building training on YPS programming and NAP preparation were also conducted to facilitate the advancement of the YPS in Ethiopia. This was supported by UNDP, UNFPA, AU, RCO, UN Women and the Ethiopian Peacebuilding Network in Ethiopia		X	X	X		AU, Life and Peace Institute, IOM
	Kenya			X				
	Rwanda							
	Tanzania	We are currently on the initial process of developing the NAP-YPS	2025		X			Prime Minister's Office
	South Sudan							
	Zimbabwe	Recently, a meeting was held with the YPS Expert leading the development of Zimbabwe's YPS NAP, which will be the first in the Southern Africa region. The process has been inclusive, involving a National Steering Committee, with plans underway to launch the NAP.			X	X		Ministry of Youth and Ministry of Defence
	Malawi	1. Malawi has developed the National Action Plan YPS, which will be launched on 12 December. The NAP on YPS for Malawi represents a pivotal opportunity to empower young people and enhance their role in peacebuilding and security. 2. Malawi has integrated YPS into the community policing concept a crucial approach to fostering safer communities and empowering young people. 1,510 Crime Prevention Panel coordinated by youth have been established in Malawi under the Community Policing Concept.	12 December 2024	X	X			Ministry of Youth and Sports, Department of National Unity - NAP Youth in Community policing - Malawi Police Service

	Mozambique	<ul style="list-style-type: none"> • 1,000 young people were trained intensively in sustainable fishing and fish processing. After the training, business kits were distributed to support their activities. • 500 young people were trained in sustainable farming practices and community vaccination against Newcastle disease. They also received business kits. • 100 young people were trained in electrical installation, with the distribution of business kits at the end of the training. • 100 young people were trained in welding, also receiving business kits to start their activities. 	2024		X		Provincial Services for Economic Activities (SPAЕ) Provincial Directorate of Agriculture and Fisheries (DPAP) Industrial and Commercial Institute of Pemba (IICP)
		Discussions on the development still in a nascent stage. The CO held initial discussions with an international expert within the context of AU Youth, Peace and Security Framework. In 2025, the CO intends to engage further with Government and UNFPA on the development of the YPS NAP. Support provided to the launch of the National Youth Policy in March 2024 and ongoing roll out of the policy Implementation Plan that targets greater youth engagement in decision making processes.					
Arab States	Egypt,	UNDP was approached for support on the NAP process by the MOYS in 2024. UNDP had two planning meetings with MOYS, in August and September. This dialogue stopped in November, since the MOYS was unclear whether they want to continue developing the NAP. In January 2025, UNDP decided to approach UNFPA to coordinate on the NAP together. UNDP and UNFPA are currently drafting a concept note and trying to re-engage MOYS. Nothing concrete has been agreed on yet and UNDP is trying to keep the coordination discreet until there is an agreement with MOYS.					Ministry of Youth and Sports
	Iraq,	- As per the held discussion between UNFPA and MOYS, the plan is to deveop a NAP in 2025. On the other hand during Mid-September there is a Diwani order from prime minister office to establish a committee for developing a NAP with certain relevant line ministries and one CSO, as per last update the committee is not fully established yet		X			Ministry of youth and Sports

	Jordan	<p>The NAP has been developed between 2022-2024 and is currently being reviewed and endorsed by the MoY and other relevant ministries.</p> <p>The YPS 2250 JONAP, overseen by the Ministry of Youth (MoY), has experienced delays due to internal changes within the Ministry. However, a new committee has been established within the MOY to prioritize and monitor the plan's progress.</p>	Launch estimated for January - February 2025.	X			Mercy Corps planned the roadmap initiated in March 2022. IDARE consultants who led on the JONAP developmnet, Ministry of Youth and Sport in addition to other ministries focal points who joined the validation sessions, private sector, national coalition members and youth from across the Kingdom. A Youth Core Group was developed in the beginning of the process to ensure youth included in the entire development process.
	Lebanon,	This project has been initiated by UNFPA in July 2023, in partnership with UNICEF, in support to MoYS in Lebanon. However, it is currently paused due to the security situation.		X			Ministry of Youth and Sports - UNICEF Lebanon
	Libya,	Under development		X			Libyan MOY and the NESDB the National Social and Economic Board , in the upcoming stages of the National youth strategy development we plan to integrate the other agencies in the information sessions , validation and/ or consultation phases. the agencies are the Technical Youth Working group that

							is led and chaired by UNFPA Libya Co at the interagency level.
Morocco,	NO Plan in the country Level						
the occupied Palestinian territory,	No Plan, YPS is in the national Youth Strategy 2025-2030	creation/functioning of a serving body- late 2025	X	X	X		Higher Council for youth and sports, ministry of foreign affairs, CSOs, youth advisory panel, UNICEF, UNESCO
Somalia	Somalia: Progress Towards Developing the Youth, Peace, and Security (YPS) National Action Plan (NAP)The Federal Government of Somalia, through the Ministry of Youth and Sports, has initiated the first phase of consultations for the Youth, Peace, and Security (YPS) National Action Plan. These consultations have been conducted in four regions: Jubaland State, Southwest State, Hirshabelle State, and the Banaadir Regional Administration. The process is supported by key UN agencies and development partners, including UNDP, UNESCO, UN Women, IOM, UNSOM, ILO, UNICEF, and UNFPA. The Ministry of Youth has mandated UNDP Somalia to lead the YPS NAP process. While other UN sister agencies pledged technical support, UNDP took a lead role by fully funding the first phase of the YPS NAP consultations with a contribution of \$40,000. UNFPA also provided an additional \$5,000 to support this phase. A national consultant, hired by the Ministry of Youth and Sports, is finalizing the analysis of this initial phase. Preparations for the second phase of the YPS NAP consultation are currently underway. The remaining steps for developing the National Action Plan (NAP) for Youth, Peace, and Security (YPS) include finalizing the NAP development analysis and drafting the first version of the YPS NAP by December 2024, mobilizing resources, establishing partnerships, and engaging stakeholders in Q1 2025, conducting the second round of consultations in Galmudug State, Puntland State, Khaatumo State, and Somaliland in Q2 2025, organizing a validation workshop in Q3	By June 2025	X	X	X		UNDP, UNESCO, UN Women, IOM, UNSOM, ILO, UNICEF, and UNFPA. Ministry of Youth and Sports of the Federal Government of Somalia, Ministry of Youth of Southwest State, Ministry of Youth of Jubaland State, Ministry of Youth of Hirshabelle State, Banaadir Regional Administration, Security advisor unit of the office of the President

		2025, and launching the YPS NAP along with promotional activities in Q4 2025.					
	Sudan	No information					
	Tunisia,	Launched	Launched :	X			Ministry of Sports and Youth
	Yemen,	Not Launched	Not launched	X		X	UNFPA, UN Women, CSOs
Europe, Eastern Europe and Central Asia	Albania,	<p>Albania does not have any separate YPS plan, but the Albania's National Youth Strategy and Action Plan 2022-2029 was concluded in October 2022 and it includes YPS as a separate pillar:</p> <p>chrome-extension://efaidnbmnnibpcajpcgjclefindmkaj/https://riniafemijet.gov.al/wp-content/uploads/2023/04/SKR29_Anglisht.pdf</p> <p>The strategy intends to guide Albanian youth towards further action that positively affects their future. The policies designed for the purposes of this strategy comprise the following goals:</p> <ul style="list-style-type: none"> • Youth actively participating in society and feeling empowered to speak for themselves. • Building youth employment skills, supported by youth-oriented career counselling and employment services, increasing and improving opportunities to enter the labour market on the basis of equity and equal chances. • Active, healthy, physical, social and mental well-being of youth. • Innovation and quality education to support youth in achieving their full potential. • Youth safety, protection, and inclusion across their diversity, particularly at risk or vulnerable youth. • Coordinated, evidence-based cross-sectoral youth policies with well-funded provision, monitoring, and horizontal and vertical evaluation mechanisms. <p>Youth regional exchanges in Albania, with participants from the region, encourage exploration of commonalities to combat hate speech based on ethnicity and nationality. A partnership with</p>	Launched in October 2022	yes	yes		Minister for Youth and Children, UNICEF

		the Minister of State for Youth and Children offers capacity-building opportunities on countering hate speech for representatives of local youth councils at municipal level.					
		Albania completed its second National Action Plan on the implementation of the UN Security Council Resolution 1325 on Women, Peace and Security in December 2023, reaffirming Albania's strong commitment to promote the inclusion of women and girls in peace and security processes: chrome-extension://efaidnbmnnibpcajpcglclefindmkaj/https://www.wpsnaps.org/app/uploads/2019/09/Albania-NAP-2018-2020.pdf					
	Bosnia and Herzegovina	Bosnia and Herzegovina currently lacks a unified state-level action plan for youth, which impedes the development of coordinated national strategies for youth engagement. In response, UNFPA is leading the creation of a comprehensive document that will consolidate all relevant commitments from lower governmental levels into a structured format inspired by the Lisbon+21 Roadmap. This initiative aims to establish a foundation for YPS-focused action plans at the national level. Additionally, UNFPA is actively collaborating with municipal governments to implement the YPS agenda at the local level, following up on commitments made during the regional conference of mayors. These local action plans are designed to address the specific needs and contexts of each community, enhancing the effectiveness of youth initiatives.	2025	x			
	Georgia,	Policy brief and list of recommendations on YPS to be integrated in the National Youth Strategy and Action Plan in 2025-2026 by the Youth Agency	2024	x	x	x	
	Kosovo	The PBF phase one project supported the Ministry of Culture Youth and Sports develop its new Youth Strategy and Action Plan for the period 2025-2032. Consultations on the implementation of the YPS Agenda within the strategy are ongoing with the ministry and will be pursued in phase two of the PBF project.	2025	x	x		
	Finland,	No information					
	Ireland,	No information					

	Kyrgyzstan,	National Action Plan on YPS for the period of 2024-2027 initiated by the Ministry of culture, information, sports and youth policy is under the approval of the Government. The plan was widely discussed with youth organizations, international development partners and relevant ministries/government organizations.	end of 2024	X				UN Youth Thematic Group members reviewed and provided their comments to the draft NAP YPS.
	North Macedonia	No coordinated effort specifically focused on YPS Agenda. While some actions address various pillars of the YPS Agenda, they are not explicitly recognized or identified as YPS Agenda interventions		X				UNFPA along with OSCE currently are working as main actors on YPS Agenda
	Serbia,	YPS has been recognized in the Youth Strategy under relevant International documents influencing overall Strategy development. However, no concrete steps on NAP have been introduced bearing in mind sensitivities around this topic. However, it will be a topic to discuss with the Ministry of Tourism and Youth in the next phase of the PBF Youth 4 Inclusion, Equality & Trust project. It depends on the willingness of the institutions - including GoS. On the side of the CSOs. KOMS (umbrella organisation of youth councils) has been pushing for YPS agenda lately with RYCO also involved bringing that regional angle. The focus in PBF phase 2 work under Output 2 is on cooperation with MTY on that strategic level.		X	X			
Latin America/ Caribbean	Colombia,	Colombia is currently advancing in the development of its first National Action Plan on Youth, Peace, and Security. During 2024, the National Government together with the technical support of the UN System, under UNFPAs leadership, begun the consultative stage towards the design and formulation of the NAP. Up to December, three regional consultative forums were held in Boyacá, La Guajira and Bogota. The protocolary launch of the process (the consultative and formulation stages) will take place in Bogota during February 2025, and at least four more consultative forums will be held in Norte de Santander, Meta, Putumayo and San Andrés, with a national review and validation forum in Bogota. The joint work of the Colombia's UN Agencies, mainly UNICEF, UNDP and UNFPA is currently setting up the road map for widening capacity and foster	2025	X	X			

		advocacy around the Youth, Peace and Security in the country. Four main intancies will be key articulators for 2025 proyections ond the NAP and the national YPS agenda: 1. The UNs interagency Gruop of Youth 2. The UNs interagency Task Force of YPS 3. The international Youth Cooperation Commitee					
Asia Pacific	Philippines,	The NAP-YPS Primer was Launched on August 30, 2022. The NAP-YPS is a 10-year plan that details key action points strengthening the meaningful participation of young people in peacebuilding, governance, protection of human rights, and the implementation of global and national sustainable development agenda.	Launched on August 30, 2022	X	X		OPAPRU, GIZ
	Sri Lanka,	Unfortunately, we were not able to gather any information on this matter. UNDP CO has not yet initiated any engagement on a YPS framework in Sri Lanka	NA				
	Timor-Leste,	Unfortunately, we were not able to gather any information on this matter. UNDP CO has not yet initiated any engagement on a YPS framework in Timor-Leste. Our colleagues from UNFPA have confirmed that they were also not involved.	NA				

D. UNFPA and the Humanitarian-Development-Peace Continuum

UNFPA has integrated many concepts and principles related to operating across the H-D-P continuum (or nexus) in its successive strategic plans. Both the UNFPA strategic plans 2018–2021 and 2022–2025 emphasise working across the development-humanitarian-peace continuum/nexus, so that programme countries are better equipped to respond to and recover from emergencies (and UNFPA-supported achievements are protected). Anticipatory action, a key (and increasingly important) area of work, is one of the core interventions related to continuum work.

In 2018, UNFPA launched the Humanitarian Thematic Fund (HTF) to provide flexible, fast, multiyear funding for rapid and ongoing response, for preparedness and for strengthening the H-D-P continuum.

In mid-May 2020, a sub-group within the IASC (Results Group 4) tasked with work on humanitarian-development collaboration, links and synergies, produced a briefing paper on COVID-19 response and the H-D-P continuum/nexus.⁹ It articulated some key principles and a range of suggested actions to be taken by humanitarian response agencies to reinforce a continuum approach in crisis and fragile contexts.

In mid-2020, the UNFPA Technical Division and the Humanitarian Office convened an online webinar on applying the continuum approach in COVID-19¹⁰ to explore opportunities at country level for a continuum approach to address the pandemic.

Emerging from these efforts, UNFPA sought to further explore efforts to operationalize the H-D-P continuum across the organization via a number of efforts, including:

- Creation of an internal H-D-P Nexus Action Community using the UNFPA intranet community pages as a joint space for information resources and communications (active with 59 members as of mid-2023, but with very limited activity through 2024 and 2025).
- Development of a series of continuum/nexus briefing notes, papers and guidance for internal sharing and dissemination.
- Drafting the “UNFPA Strategic Guidance Framework for Applying the Humanitarian-Development-Peace Nexus Approach” – UNFPA recruited an external consultant to finalise this guidance in 2021 and worked on refining it to maximize its operational utility through 2022 and 2023. It has yet to be published.
- Gathering further information on individual country approaches to the continuum, including retention of a consultant (in 2022) to compile case studies on the experiences of UNFPA country offices or programmes that have adopted continuum approaches.
- Development of a learning series of internal webinars, e-courses and guidance notes on working across the continuum (2022 and 2023).
- Participation in the “Nexus Academy” (launched in February 2022) which is hosted by UNDP and facilitates joint learning and knowledge exchange to accelerate continuum approaches through co-creation and testing of training curricula and assigning CO and HQ staff for training by the Academy.¹¹
- Advocated for UNFPA adherence to the DAC Recommendation on the continuum and for inclusion of the continuum accelerator in the 2022–2025 Strategic Plan.
- Internal 2023 guidance on bringing GBV programming in line with continuum approaches.

⁹ Commitments into Action: A holistic and coherent response to COVID-19 across the Humanitarian-Development-Peace Nexus

¹⁰ Proceedings available at

<https://sites.lumapps.com/a/unfpa/myunfpa/ls/community/gender-human-rights/post/6407904431833088> (intranet access only).

¹¹ See <https://tinyurl.com/5d7ujf3m>

- Preparation of an internal (draft as of mid-2025) advocacy paper on “The case for strengthening Humanitarian-Development-Peace Complementarity (nexus) in UNFPA’s programming” by the internal “nexus task team”.

Annex XI: Evaluation terms of reference

Evaluation of the UNFPA capacity in humanitarian action (2019-2024)

Terms of reference

A. 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 an evaluation of the UNFPA capacity in humanitarian action (2019-2024), as per the UNFPA multi-year costed evaluation plan, 2024-2027.¹ The evaluation is intended as a follow-up to a previous evaluation of the UNFPA capacity in humanitarian action, which covered the period 2012-2019.²
3. The primary intended users of the evaluation are: (i) UNFPA senior management; (ii) the UNFPA Humanitarian Response Division; (iii) the UNFPA Programme Division; (iv) UNFPA business units at headquarters; and, (v) 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 terms of reference were prepared by the Independent Evaluation Office (IEO) evaluation manager, Hicham Daoudi, 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 IEO and guidance from the evaluation reference group (ERG).

B. Context

Global humanitarian overview

5. Since the publication of the 2019 evaluation of the UNFPA capacity in humanitarian action, the global humanitarian landscape has considerably evolved, marked by an increase in both the number and complexity of crises. In response, UNFPA humanitarian strategies and programmes have also undergone substantial changes.
6. In 2023, the world witnessed a surge in humanitarian crises, with escalating needs driven by conflicts, natural disasters, and the deepening climate crisis. Major events like the earthquakes in Türkiye and Syria, which caused mass displacement and loss of life, and the eruption of conflicts in Sudan and Gaza, where fighting led to widespread displacement, severe food insecurity, and the collapse of essential services, led to loss of many lives and further exacerbated the strain on the global humanitarian system. These emergencies

¹ [UNFPA, UNFPA Multi-year costed evaluation plan, 2024-2027](#)

² [UNFPA, Evaluation of the UNFPA capacity in humanitarian action \(2012-2019\)](#)

further compounded existing humanitarian crises in vulnerable countries like Afghanistan, the Democratic Republic of Congo, and Yemen.³

7. Adding to these complex challenges, the climate crisis intensified in 2023, breaking global warming records and triggering a series of extreme weather events and causing humanitarian crises. Cyclones caused widespread destruction and displacement in Malawi, Mozambique, Bangladesh and Myanmar, worsening conditions for vulnerable populations. Storm Daniel brought catastrophic flooding to Libya, resulting in significant loss of life and damage. Heatwaves caused record-breaking temperatures across Europe and Asia, leading to heat-related deaths and straining healthcare systems, while wildfires ravaged vast areas of land in countries like Canada, Greece, and Algeria, causing displacement and economic disruption.⁴
8. According to OCHA,⁵ these interconnected challenges resulted in a staggering 363 million people requiring humanitarian assistance by the end of 2023, a significant increase from the previous year. The UN Secretary-General emphasised the urgent need for increased investment in climate adaptation and resilience to address the growing humanitarian impact of the climate crisis.
9. As UNFPA continues to further enhance its capacity in humanitarian action and accelerate its efforts to strengthen preparedness, response, and recovery of institutions, communities and individuals in areas affected by humanitarian crises, there is a need to take stock of the progress made over the last five years, the lessons learned, and the challenges and opportunities ahead. It is against this backdrop that UNFPA intends to commission an independent evaluation of the UNFPA capacity in humanitarian action covering the period from 2019 to 2024.

UNFPA's humanitarian interventions

10. Between 2019 and 2023, the funding received for UNFPA humanitarian response increased by 75% percent, from \$305,579,463⁶ million to \$534,481,678 million annually.
⁷ In 2019, UNFPA received 54% of the funding required to meet humanitarian needs related to SRH and GBV, while the coverage had declined to 50% in 2023, indicating an increasing funding gap.
11. **Sexual and reproductive health and rights (SRHR)** is one of UNFPA's primary areas of interventions in humanitarian action. During crises, UNFPA is the leading global organization providing access to live-saving SRH services aimed at reducing maternal and newborn mortality, morbidity and long-term disability; prevent unintended pregnancy and care for survivors of sexual violence. UNFPA ensures that the minimum initial services package (MISP) for SRH is available and accessible for all people in need during humanitarian crises. Moreover, training toolkits on SRH in emergencies (SRHiE) help advance country, regional and global capacities on the MISP, clinical management of rape,

³ [OCHA, OCHA Annual Report 2023](#)

⁴ Ibid.

⁵ Ibid.

⁶ [UNFPA, UNFPA Humanitarian Action Overview 2020](#)

⁷ [UNFPA, UNFPA Humanitarian Action Overview 2024](#)

basic emergency obstetric and newborn care and long-acting reversible contraception⁸. UNFPA also serves as the global custodian of inter-agency reproductive health (IARH) kits, which are distributed to visibly pregnant women, health centers, and hospitals during emergencies.

12. In 2023, UNFPA led the process of establishing the SRH Task Team (SRH-TT) within the inter-agency Global Health Cluster and was designated as the lead agency because of its extensive experience in SRH in humanitarian contexts. Recently established as a formal entity under the GHC, the RHR-TT aims to ensure that SRH priorities are systematically addressed in all phases of humanitarian response and that SRH coordination is consistently included in cluster coordination at both the global and country levels.^{9,10} A baseline assessment was conducted to assess existing SRH coordination structures and processes in different humanitarian contexts to provide insights into successes, shortcomings and opportunities. The results were used to inform 2024 priorities which include, amongst others, strengthening coordination capacity through training and coaching and improving links between SRH coordination on GBV responses to increase the quality, efficiency and effectiveness of emergency responses.¹¹
13. In 2023, UNFPA achieved the following results in the field of SRHR in humanitarian contexts:¹²
 - 14 million people reached with sexual and reproductive health services in 50 countries;
 - 2.7 million people reached with family planning in UNFPA-supported facilities in 44 countries;
 - 2.2 million adolescents and youth (ages 10 to 24) reached with adolescent sexual and reproductive health services in 46 countries;
 - 956,000 women assisted to deliver babies safely in UNFPA-assisted facilities in 39 countries;
 - 25,000 women and girls reached with cash and voucher assistance to enable access to life-saving sexual and reproductive health services in 12 countries;
 - 11,900 personnel trained on MISP for sexual and reproductive health in 39 countries;
 - 3,648 health facilities supported by UNFPA in 48 countries;
 - 808 mobile clinics supported by UNFPA in 36 countries.
14. During crises, UNFPA also focuses on **gender-based violence (GBV) prevention and response** in line with the inter-agency Minimum Standards for GBV in Emergencies Programming.¹³ Examples of services provided include GBV case management and establishment of referral pathways, the creation of women's and girls' safe spaces, mental health and psychosocial support (MHPSS), community awareness sessions, vocational training for survivors, security and legal counselling. UNFPA also ensures access to life-

⁸ [UNFPA, Minimum Initial Standard Package \(MISP\) for SRHR in Crisis Situations](#)

⁹ [IASC, ToR SRH Task Team IASC Health Cluster](#)

¹⁰ [UNFPA, UNFPA Humanitarian Action Overview 2024](#), p. 16

¹¹ Ibid.

¹² [UNFPA, UNFPA Humanitarian Action Overview 2024](#)

¹³ [UNFPA, The Inter-Agency Minimum Standards for Gender-Based Violence in Emergencies Programming](#)

saving medical care including preventing and managing the consequences of sexual violence as part of the MISP, which encompasses the clinical management of rape.¹⁴

15. Since 2017, UNFPA has had sole leadership of the Gender-based Violence Area of Responsibility (GBV AoR), the global-level forum for coordination on GBV prevention, risk mitigation and response in humanitarian settings, which functions as part of the Global Protection Cluster under the IASC humanitarian coordination structure. This strategy reinforces UNFPA's IASC-mandated leadership role in inter-agency GBV coordination and as a provider of last resort for GBV response services.¹⁵

16. Furthermore, UNFPA HRD also commissioned an external review of the GBV AoR and collaborated with NORCAP on an external review of the regional GBV AoR support teams (REGA) commissioned by them.

17. Results achieved in 2023 in the field of GBV prevention and response include:¹⁶

- 4.2 million people reached with GBV prevention, risk mitigation and response services in 50 countries;
- 925,300 dignity kits distributed in 48 countries;
- 30,200 non-specialized humanitarian workers or front-line workers trained or oriented on core concepts and guidelines related to GBV in 51 countries;
- 1,690 safe spaces for women and girls supported by UNFPA in 46 countries;
- 33,000 women reached with humanitarian cash assistance for gender-based violence; case management and/or other response and risk mitigation measures in 23 countries;
- 939 youth-friendly spaces for recreation, vocational training and community outreach in 29 countries.

18. UNFPA also works with and for **young people in humanitarian action**. Together with the International Federation of the Red Cross, UNFPA leads the Compact for Young People in Humanitarian Action. The compact, which is an outcome of the 2016 World Humanitarian Summit, aims at transforming humanitarian action for and with young people to prevent and end conflict, safeguard human rights and the rule of law, and invest in young people now and in the future.

19. UNFPA also plays a critical role in collecting **data** during emergencies:

- UNFPA is the designated lead agency in the UN system on ensuring availability, quality and usability of Common Operational Datasets on Population Statistics (COD-PS) in humanitarian settings and preparedness for natural disasters, which provides a common reference for population estimates, disaggregated by sex, and age at the lowest level of geographic administrative area possible. It can be used to guide the humanitarian needs and response planning round in operational response settings and it is pre-positioned to support rapid humanitarian needs assessment in anticipation of sudden onset disasters.

¹⁴ [UNFPA, UNFPA strategy and operational plan scale and strengthen interventions GBV in emergencies 2023-2025](#)

¹⁵ Ibid.

¹⁶ Ibid.

- UNFPA is also responsible for developing, maintaining and supporting the field usage of the MISP Calculator,¹⁷ the main tool recommended and supported by the IAWG to help coordinators and programme managers determine affected population demographics for advocacy, fundraising and programming.
- Moreover, UNFPA provides technical support to strengthen Gender Based Violence Information Management Systems (GBVIMS) in collaboration with UNHCR, UNICEF, IRC and IMC. UNFPA leads the coordination of the inter-agency global GBVIMS Technical Team, convenes the GBVIMS Steering Committee, and provides backstopping for technical support and training needs in GBVIMS, GBVIMS+, and GBV case managements.¹⁸ Importantly, the GBVIMS is not active in all countries and mainly records incident data.
- In 2022, UNFPA conducted a baseline and evaluability assessment on the generation, provision and utilization of data in humanitarian assistance. The study took stock of the strategic positioning of UNFPA, provided a comprehensive mapping of UNFPA supported interventions and proposed key building blocks for the development of a theory of change for the work of UNFPA in the field of humanitarian data.¹⁹ The assessment report will also inform the present evaluation, notably with regard to its methodological approach, and more broadly, UNFPA efforts to strengthen data in humanitarian assistance.

20. Since 2019, UNFPA has further enhanced its **climate action** advocacy and programming to prevent, reduce and address the heightened health risks women and girls face during humanitarian crises caused by natural disasters and extreme weather events. **UNFPA's value proposition on climate change** puts forward a programmatic framework with four pillars: 1) Healthy, empowered populations including women, girls and young people; 2) Climate-resilient health, protection and education systems; 3) Strengthened risk reduction, preparedness and emergency response; and 4) Strong data systems for climate vulnerability and adaptive capacity.²⁰

21. UNFPA has a multipronged, victim-centred strategy to effectively prevent and respond to sexual misconduct in all contexts. The **UNFPA Protection from Sexual Exploitation, Sexual Abuse and Sexual Harassment (PSEAH)** strategy focuses on a number of concrete measures under three key objectives: prevention, response and assistance embedded in a robust institutional framework. The strategy thus supports the fulfilment of the commitment of the IASC Principles to actively prevent and respond to SEAH by humanitarian workers, and the role of Humanitarian Coordinators and Humanitarian Country Teams to implement PSEA commitments in all response operations.²¹

¹⁷ [Interagency Working Group on Reproductive Health in Crisis, MISP Calculator](#)

¹⁸ [GBVIMS official website](#)

¹⁹ [UNFPA, UNFPA Baseline and evaluability assessment generation provision and utilization data of humanitarian](#)

²⁰ [UNFPA, UNFPA and the Climate Crisis Strengthening Resilience and Protecting Progress within the Decade of Action \(2021\)\(2021\)](#)

²¹ [Inter-Agency Standing Committee, IASC commitment on PSEAH](#)

Key highlights from the 2019 evaluation of the UNFPA capacity in humanitarian action and the 2022 baseline study and evaluability assessment on data in humanitarian assistance

22. The 2019 evaluation of UNFPA humanitarian capacity found that:

- UNFPA humanitarian action had progressively and positively evolved, reaching multiple times more affected people in 2019 than it did in 2012;
- However, UNFPA systems and processes remained predominantly geared towards development;
- There were clear output-level results of maternal and new-born health services and some evidence of gender-based violence service-delivery effectiveness;
- However, there was a need for more robust and comprehensive measurement of outcomes and impacts;
- In a difficult funding environment, UNFPA had been increasingly successful in mobilizing external humanitarian resources at country level, such as pooled funds;
- While UNFPA had many highly knowledgeable humanitarian experts, they were too few in number in view of the scope of UNFPA humanitarian accountabilities. There was a need to increase broad-based humanitarian expertise organization-wide, including on protection from sexual exploitation and abuse;
- UNFPA demonstrated good practices in delivering commodities at the beginning of an emergency but was often found too slow to reach areas of urgent need. A renewed focus on speed and advance positioning of commodities in key locations was needed.

23. Against these findings, the evaluation recommended that UNFPA should:

- Develop a strategic framework for humanitarian action;
- Review datasets and monitoring systems to identify current gaps and bottlenecks and develop a comprehensive data management system to allow reporting of outputs and outcomes at all levels;
- Review the corporate approach on preparedness for supplies, including, where necessary, regional stockpiling and national pre-positioning that considers speed as critical as cost and quality;
- Develop a comprehensive plan for increasing humanitarian expertise at all levels.
- Survey knowledge and capacity on protection from sexual exploitation and abuse at country level to establish the current bottlenecks between global level and country level.

24. While the 2022 baseline study and evaluability assessment on data in humanitarian assistance was not an evaluation per se, it provided useful insights on UNFPA's work on humanitarian data and recommended future areas of inquiry to be further explored:

- Explore how data collected in-country can be better integrated into broader initiatives for improved utilization.
- Develop a forward-looking global theory of change for humanitarian data, considering the humanitarian-development-peace nexus and data standards.
- Examine UNFPA's reliance on ad-hoc humanitarian data staffing and the implications for future resource allocation for robust data workstreams.
- Conduct further research on the direct application of COD-PS data sets by country offices to optimize their utility.

- Investigate how humanitarian data work could be mainstreamed across other thematic areas within UNFPA.

Explore the current role of the IDWG-HA and its synergy with the Humanitarian Office concerning humanitarian data work. **UNFPA's current strategic framework for humanitarian action**

25. Since the 2019 evaluation, UNFPA's strategic framework for humanitarian action has experienced several changes. The examples below are not exhaustive, and it will be one of the objectives of the present evaluation to analyze the evolution of this strategic framework, as well as its effects on UNFPA's humanitarian assistance.
26. **Humanitarian action has become one of the six interconnected outputs of the UNFPA strategic plan, 2022-2025.**²² Aside from the continued mainstreaming of humanitarian assistance across all UNFPA strategies and programmes, the creation of a dedicated output for humanitarian action in the UNFPA strategic plan stems from the understanding that “the acceleration of the three transformative results cannot be realized without prioritizing preparedness, early and anticipatory action and the provision of life-saving interventions, focusing on humanitarian, conflict and post-conflict contexts”.
27. The UNFPA Humanitarian Response Division (HRD) has issued a number of strategic documents and guidance note meant to shape UNFPA's present and future humanitarian action, including amongst others:

- The UNFPA humanitarian supplies strategy, 2021-2025;²³
- The Humanitarian Health Supplies Advanced Preparedness Operational Guide (2024);²⁴
- The UNFPA Guidelines on Non-Food Items in Humanitarian Response Management Guidelines for Field Offices (2024);²⁵
- The UNFPA Strategy and Operational Plan to Scale Up and Strengthen Interventions on GBV in Emergencies 2023–2025.²⁶

Additionally, the HRD is in the process of finalising several other strategic documents and guidance notes for UNFPA humanitarian action, which will be shared with the evaluation team upon finalization.

C. Purpose, objectives and scope

28. This evaluation serves the dual **purpose** of accountability and learning. As such, it will:
 - Assess and report on the UNFPA evolving capacity to prepare for and respond to emergencies (accountability);

²² [UNFPA, UNFPA Strategic Plan 2022-2025](#)

²³ [UNFPA Humanitarian Supplies Strategy, 2021-2025 \(2020\)](#)

²⁴ [The Humanitarian Health Supplies Advanced Preparedness Operational Guide \(2024\)](#)

²⁵ [UNFPA Guidelines on Non-Food Items in Humanitarian Response Management Guidelines for Field Offices \(2024\)](#)

²⁶ [The UNFPA Strategy and Operational Plan to Scale Up and Strengthen Interventions on GBV in Emergencies 2023–2025](#)

- Analyze the extent to which lessons learned and recommendations from the 2019 evaluation of the UNFPA capacity in humanitarian action have been acted upon, and draw lessons for UNFPA's present and future humanitarian action in view of the implementation of the next UNFPA strategic plan (learning).

29. More specifically, the **objectives** of the evaluation are to:

- Assess the **relevance** of UNFPA's humanitarian programming and, in particular, its ability to adapt to changing emergency response needs of different categories of affected people;
- Assess the extent to which UNFPA's internal systems, processes, policies and procedures allow for **efficient** and timely humanitarian action at all levels of the organization (global, regional, and national); in particular, the evaluation will delve into UNFPA's human and financial resources (funding) for humanitarian action, including progress on institutionalisation and standardisation of processes related to its SRHR and GBV inter-agency mandates, as well as UNFPA's approach on preparedness and pre-positioning of humanitarian supplies;
- Assess the **effectiveness** as well as the **coverage** of UNFPA's humanitarian interventions, in terms of preparedness, anticipatory action, response to and recovery from humanitarian crises across different thematic areas (GBViE, SRHRiE, young people in emergencies, and data for humanitarian assistance etc.);
- Analyze the extent to which humanitarian principles, humanitarian minimum standards, human rights, gender equality, disability inclusion, climate action, and social and environmental standards are integrated in UNFPA's humanitarian programming;
- Analyze UNFPA's ability to strengthen the "resilience and adaptation, and complementarity among development, humanitarian and peace-responsive efforts"²⁷ in line with the humanitarian-development-peace (HDP) nexus approach;
- Propose recommendations for UNFPA's present and future humanitarian action.

30. The **temporal scope** of the evaluation will span from 2019 (when the previous evaluation of the UNFPA capacity in humanitarian action was finalized) to date (i.e., at the end of the data collection phase of the present evaluation).

31. The **geographic scope** of the evaluation is global, with a focus on all countries considered as "priority countries" by UNFPA since 2019.

D. Evaluation criteria and guiding evaluation questions

32. The evaluation will be based on the following evaluation criteria: relevance/appropriateness, efficiency, effectiveness, coverage, connectedness and coherence, as defined in **Annex 7**.

²⁷ UNFPA Strategic Plan 2022-2025

33. The below 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 (see **Annex 2**), linking evaluation questions with assumptions to be assessed, indicators, data sources and data collection tools.

Key guiding evaluation questions	Lines of inquiry
<p>To what extent does UNFPA's humanitarian programming correspond to the identified needs of affected populations, while remaining aligned with UNFPA's mandate and strategic direction? (Relevance / Appropriateness)</p>	<ul style="list-style-type: none"> ● Extent to which UNFPA has been able to integrate UNFPA mandate relates areas within HNO / HRPs and other appeal documents such as (regional) refugee response plans, flash appeals and other appeals (e.g. famine prevention response etc). ● Extent to which UNFPA's humanitarian programming ensures accountability to affected populations in terms of feedback mechanisms, participation in decision-making, and responsiveness to their needs and concerns ● Extent to which Country Programme Documents (CPDs) integrate humanitarian preparedness and response programming, and extent to which CPDs are a suitable tool for humanitarian programming. ● Extent to which UNFPA's programmes of response to humanitarian crises address the needs of affected populations, particularly those left furthest behind in humanitarian contexts. ● Extent to which humanitarian principles, human rights and gender equality are integrated into UNFPA's humanitarian programming. ● Extent to which UNFPA humanitarian preparedness and response interventions have been able to build on the global UNFPA Climate Change strategy.
<p>To what extent are UNFPA's internal systems, processes, policies and procedures</p>	<ul style="list-style-type: none"> ● Extent to which UNFPA's institutional arrangements (including

Key guiding evaluation questions	Lines of inquiry
<p>conducive to an efficient and timely humanitarian action, at all levels of the organization (global, regional, national)? (Efficiency)</p>	<p>policy guidance, governance/architecture, Fast Track Procedures (FTP), etc) support the humanitarian programming in the field and ensure a timely humanitarian response;</p> <ul style="list-style-type: none"> ● Analysis of UNFPA's funding mechanisms, including the extent to which the resource mobilization strategy for humanitarian action is implemented, funds are spent efficiently, and the extent to which UNFPA is able to mobilize resources for humanitarian financing; ● Analysis of UNFPA's humanitarian supply management chain in general, and procurement and last-mile distribution in particular; ● Analysis of UNFPA's human resources for humanitarian action and, in particular the surge mechanism, the roving team arrangement and GERT, relevant capacity building initiatives (both internal and external mechanisms), and funding and sustainability of humanitarian HR. ● Assessment of whether UNFPA has the appropriate human resource capacity at global, regional and country office level to ensure effective humanitarian action
<p>To what extent have the objectives pertaining to humanitarian action, as set out in the UNFPA strategic plan, 2022-2025, and the annual Humanitarian Action Overviews, been achieved? (Effectiveness, Coverage)</p>	<ul style="list-style-type: none"> ● Extent to which UNFPA is implementing its commitments to the new way of working and grand bargain (incl: collective outcomes, comparative advantage, multi-year time frames, transparency, increased funding for local partners, etc) ● Extent to which UNFPA humanitarian interventions contribute to an increased access to

Key guiding evaluation questions	Lines of inquiry
	<p>and utilization of quality sexual and reproductive health, including family planning, maternal and newborn and adolescent responsive health services for affected populations</p> <ul style="list-style-type: none"> • Extent to which UNFPA humanitarian interventions contribute to the prevention, mitigation and response to gender based violence for affected populations in line with the UNFPA GBV in Emergencies Minimum Standards • Extent to which UNFPA humanitarian interventions contribute to the collection, analysis, dissemination and use of reliable disaggregated data and information for appropriate preparedness and response to emergency situations. • Extent to which UNFPA humanitarian interventions benefit the most vulnerable and those left furthest behind • Extent to which humanitarian principles, human rights and gender equality are integrated in the implementation of UNFPA humanitarian interventions • Extent to which UNFPA is capable to deliver the MISP within 48 hours at the onset of all crises, following the commitment taken by UNFPA during the 2016 World Humanitarian Summit • Extent to which UNFPA, as GBV AoR leader, is capable to be the actor of last resort in crises where no other actor has the capacity to coordinate and deliver GBV-related humanitarian response.
To what extent does UNFPA's humanitarian action contribute to longer term	<ul style="list-style-type: none"> • Extent to which UNFPA's humanitarian preparedness and

Key guiding evaluation questions	Lines of inquiry
<p>development, across the humanitarian-development-peace nexus? (Connectedness)</p>	<p>response interventions support, and plan for, longer-term (i.e., developmental and/or resilience-related) goals of countries affected by humanitarian crises</p> <ul style="list-style-type: none"> Extent to which UNFPA's humanitarian interventions contribute to capacity development and ownership at national and local level to strengthen the resilience of countries, systems, communities and individuals.
<p>To what extent has UNFPA humanitarian action been complementary to those of other development and humanitarian actors, thus reducing gaps, avoiding duplications and accelerating results, given the operational context? (Coherence)</p>	<ul style="list-style-type: none"> Extent to which UNFPA's humanitarian strategies and programmes have been well integrated and mutually reinforcing, helping to achieve comprehensive outcomes for the most vulnerable and marginalized groups? Analysis of the partnerships in which UNFPA engages with for joint planning, coordination, resource mobilisation, and implementation humanitarian interventions Analysis of UNFPA's contribution to the inter-agency coordination of humanitarian action, particularly within the framework of the IASC cluster approach, as the leader of the GBV AoR, and the SRH Task Team under the IASC Health Cluster. Extent to which UNFPA has effectively positioned and strengthened its core mandate (SRHR/GBV in emergencies) in inter-agency coordination platforms and processes at all levels. What have been the drivers and obstacles to strategic and effective humanitarian coordination, partnerships and external coherence to advance the ICPD agenda and UNFPA's three transformative results?

Methodological approach

E. Approach

34. The evaluation will be based on mixed methods, combining quantitative and qualitative data collection methods and tools.

35. At a minimum, the methodological approach will comprise:

- A **reconstruction of the theory of change** of UNFPA's humanitarian action;
- A thorough **gender responsive stakeholder analysis**, including a **beneficiary typology**;
- A **document review** as well as an **analysis** of the available programme, administrative and financial data pertaining to UNFPA's humanitarian action;
- The conduct of **key informant interviews, focus group discussions and surveys**;
- Nine (9) extended **desk country reviews**;
- Six (6) **country field visits** (1 per UNFPA region of intervention), with a view to illustrating UNFPA's humanitarian work in different types of emergencies;
- Two (2) **issue papers** focusing on two topics to be determined at inception stage (among potential topics are: (i) humanitarian programming; (ii) funding for humanitarian action; (iii) human resources for humanitarian response; (iv) humanitarian data; (v) humanitarian-development-peace nexus; (vi) intersection between UNFPA humanitarian action and Climate Change action etc.). The issue papers are meant to delve into issues of strategic importance for UNFPA, particularly in view of the design and the implementation of the next strategic plan.

36. The selection of extended desk review countries and of country field visits will be made at inception stage from the list of priority countries and using selection criteria which will be determined with the evaluation reference group.

37. Particular attention will be paid to triangulation of information, both in terms of data sources and methods and tools for data collection.

38. The evaluation team will present a detailed methodological approach in the inception report.

F. Evaluation process

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

1) Preparatory phase

40. 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

41. 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;
- a stakeholder mapping displaying the relationships between different sets of stakeholders;
- a reconstruction of the theory of change of UNFPA's humanitarian action;
- 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 feed into the preparation of the next strategic plan;
- the selection of countries for six (6) field visits studies and nine (9) desk reviews ; 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 visit²⁸ in one of the six previously selected field visit 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.

42. 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 field visit study;
- **1 country briefing note** summarizing the findings emerging from the pilot field visit and/or **1 evidence table** compiling the data and information collected;

²⁸ The duration of each country field visit (including the pilot field visit) will be 5 working days.

- a **final inception report**;
- a **powerpoint presentation** structured around the key components of the inception report, for the inception evaluation reference group meeting²⁹.

3) Data collection phase

43. During this phase, the evaluation team will:

- Conduct an in-depth document review;
- 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 6 country field studies;
- Carry out 9 country desk reviews (including remote interviews with select informants);
- Conduct 2 thematic workshops³⁰ respectively covering the 2 topics identified at inception stage and develop 2 related issue papers.

44. The outputs of this phase are:

- **6 country briefing notes** and/or **6 evidence tables** compiling the data and information collected through the country field studies; **9 evidence tables** corresponding to the data collected through the 9 desk reviews.
- **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 meeting³¹.

4) Reporting phase

45. The reporting phase will open with a 3-day analysis workshop³² 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**.

²⁹ The inception ERG meeting will be virtual.

³⁰ The thematic workshops will be virtual.

³¹ The end-of-data collection ERG meeting will be virtual.

³² The analysis workshop will take place in Europe (Brussels, TBC).

46. 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.
47. The **second draft final report**, and in particular the tentative conclusions and recommendations, will be presented by the evaluation team during a stakeholder workshop³³ (attended by the ERG as well as other relevant stakeholders) and circulated to UNFPA Executive Committee members.
48. 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”).
49. 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.
50. The final report will follow the structure set out in **Annex 4**.

5) Dissemination phase

51. 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**.
52. The evaluation report, along with the management response (by UNFPA management), will be published on the UNFPA evaluation webpage.

G. Management and governance

53. The responsibility for the management and supervision of the evaluation will rest with the Independent Evaluation Office.
54. **The evaluation manager**. Hicham Daoudi, Evaluation Adviser and Lead, Humanitarian Evaluation Team, has been appointed as 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 the evaluation (in line with UNEG Norms, Standards and Ethical Guidelines and UNFPA evaluation standards and 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;

³³ The stakeholder workshop will take place at the UNFPA Geneva office, in a hybrid format.

- 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;
- participate in selected steps of the data collection process (conduct interviews, facilitate group discussions and focus groups) both at inception and data collection phases including in selected field missions;
- 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;
- recommend the approval of the final evaluation report to the IEO Director;
- disseminate the evaluation results and contribute to learning and knowledge sharing at UNFPA

55. 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.

Please see the list of ERG members enclosed in Annex 8.

H. Evaluation team

56. The core evaluation team will be composed of four (4) external consultants, as follows:

- 1 experienced **team leader**, with at least 15 years of experience working in the humanitarian sector, including previous experience leading major evaluations of humanitarian assistance.
- 2 **thematic experts**, with at least 10 years of experience working in the humanitarian sector, as well as significant evaluation experience. They should also have thematic expertise in at least one of the thematic areas of UNFPA humanitarian action: SRHRiE, GBViE, young people in humanitarian contexts, and humanitarian data.
- 1 **young and emerging evaluator**, capable of organizing and analyzing large sets of data in support of the rest of the evaluation team.

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

- Extensive evaluation experience of humanitarian policies, strategies and programmes and of complex conflict situations, internal displacement, refugee programmes and transition settings;
- Experience with and institutional knowledge of humanitarian UN actors, the inter-agency mechanisms, such as OCHA and CERF funding, and the IASC;
- Familiarity with the Transformative Agenda (Leadership, Coordination, Accountability to Affected Populations);
- Familiarity with the 2016 World Humanitarian Summit, UNFPA's commitments and other WHS-related processes (New Way of Working, Grand-Bargain...)
- Familiarity with the Sendai Framework for Disaster Risk Reduction (DRR), Capacity for Disaster Reduction Initiative (CADRI);
- Extensive knowledge of humanitarian law and principles, and experience with using human rights and gender analysis in evaluations;
- Good understanding of UNFPA mandate and processes;
- Technical expertise in (i) sexual and reproductive health in emergencies; (ii) gender equality; (iii) gender-based violence in emergencies, (iv) population dynamics; (iv) emergency preparedness, anticipatory action and response; (v) youth in humanitarian action; (vi) humanitarian data.
- 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.

I. Timeline and deliverables

	Phase	Time
1	Preparatory phase <ul style="list-style-type: none"> • <i>Internal consultations</i> • <i>Drafting of terms of reference</i> • <i>Hiring of evaluation team</i> • <i>Constitution of evaluation reference group</i> 	July-September 2024
2	Inception phase <ul style="list-style-type: none"> • <i>Draft inception report</i> • <i>Inception ERG meeting (virtual)</i> • <i>Pilot country field study / briefing note / evidence table</i> • <i>Final inception report</i> 	October-December 2024 <i>November 2024</i> <i>Mid-November 2024</i> <i>End November 2024</i> <i>End December 2024</i> <i>End December 2024</i>
3	Data collection phase <ul style="list-style-type: none"> • <i>Country field studies</i> • <i>Country briefing notes / evidence tables (x4)</i> • <i>Thematic workshops (x2)</i> • <i>Issue papers (x2)</i> • <i>End of data collection ERG meeting (virtual)</i> • <i>Analysis workshop</i> 	January - April 2025 <i>January-March 2025</i> <i>March 2025</i> <i>March 2025</i> <i>March 2025</i> <i>April 2025</i> <i>End April 2025</i>
4	Reporting and review <ul style="list-style-type: none"> • <i>Draft final report</i> • <i>Stakeholder workshop on recommendations (NYC)</i> • <i>Revised draft final report</i> • <i>Final report (unedited) + Powerpoint + Brief</i> 	May - September 2025 <i>End May 2025</i> <i>June 2025</i> <i>July 2025</i> <i>September 2025</i>
5	Management response and dissemination <ul style="list-style-type: none"> • <i>Dissemination of the report</i> • <i>Development of management response</i> • <i>Presentation to the Executive Board</i> 	October 2025 - January 2026 <i>October 2025</i> <i>October - November 2025</i> <i>TBD</i>

Annexes

Annex 1 – List of reference documents

UNFPA. Multi-year costed evaluation plan, 2024-2027

UNFPA. Evaluation of the UNFPA capacity in humanitarian action (2012-2019)

OCHA. OCHA Annual Report 2023

UNFPA. Humanitarian Action Overview 2020

UNFPA. UNFPA Humanitarian Action Overview 2024

UNFPA. Minimum Initial Standard Package (MISP) for SRHR in Crisis Situations

Inter-Agency Standing Committee. ToR SRH Task Team IASC Health Cluster

UNFPA. Humanitarian Action Overview 2024

UNFPA. The Inter-Agency Minimum Standards for Gender-Based Violence in Emergencies Programming

UNFPA. UNFPA strategy and operational plan scale and strengthen interventions GBV in emergencies 2023-2025

IAWG MISP Calculator website

GBVIMS official website

UNFPA. UNFPA Baseline and evaluability assessment generation provision and utilization data of humanitarian

UNFPA and the Climate Crisis: Strengthening Resilience and Protecting Progress within the Decade of Action (2021)

Inter-Agency Standing Committee. IASC commitment on PSEAH

UNFPA. UNFPA Humanitarian Supplies Strategy, 2021-2025 (2020)

UNFPA. The Humanitarian Health Supplies Advanced Preparedness Operational Guide (2024)

UNFPA. UNFPA Guidelines on Non-Food Items in Humanitarian Response Management Guidelines for Field Offices (2024)

UNFPA. The UNFPA Strategy and Operational Plan to Scale Up and Strengthen Interventions on GBV in Emergencies 2023–2025

Annex 2 – Outline of the Evaluation Matrix

EQ1 : To what extent ...			
Assumptions to be assessed	Indicators	Sources of information	Methods and tools for the data collection
Assumption 1 ...			
Assumption 2			

Annex 3 – Outline of the Inception Report

Table of Contents
List of Acronyms
List of Tables (*)
List of Figures

1 Introduction

Should include: objectives of the evaluation; scope of the evaluation; overview of the evaluation process; purpose of the inception report

2 Background and context

Should include: a description of the context (e.g. key social, political, economic, demographic, and institutional factors) as well as the main programmes and interventions constituting the UNFPA response. Information on any relevant reviews, assessments, audits and/or evaluations previously conducted should be mentioned.

This section should detail strategies or approaches to programming as well as discuss cross-cutting issues, including particularly issues relating to human rights and gender equality.

3 Intervention logic

Should include: an in-depth analysis of the intervention logic, i.e., assumptions, causality links and risks underlying UNFPA interventions.

4 Methodology

Should include: rationale for methodological choices description of the methods and tools for data collection, analysis, as well as validation techniques. Detailed information on the instruments for data collection and analysis such as: interview protocols per type of informant; protocol for focus groups; structure and lines of enquiries for the case studies; etc. Description of how the data should be cross-checked and limitations of the exercise and strategies to mitigate them.

5 Proposed Evaluation Questions

Should include: a set of evaluation questions with explanatory comments (rationale; coverage of the issues raised in the ToR); detailed approach to answering the evaluation questions (including assumptions to be assessed, indicators, sources of information and associated data collection methods and tools) in the form of an evaluation matrix (cf. annex 2)

6 Next Steps

Should include: a detailed work plan for the next phases/stages of the evaluation, including detailed plans for the field visits, including the list of interventions for in-depth analysis in the field (explanation of the value added for the visits); team composition for the cases studies including distribution of tasks; logistics for the field phase; the contractor's approach to ensure quality assurance of all evaluation deliverables.

8 Annexes

Should include: portfolio of relevant interventions; evaluation matrix; stakeholder map; interview and focus group protocols; detailed structure of the country field study briefing notes and evidence tables; bibliography; list of persons met; terms of reference

() Tables, graphs and diagrams should be numbered and have a title.*

Annex 4 – Outline of the Final Report

Number of pages: 50-70 pages without the annexes

Table of Contents

List of Acronyms

List of Tables (*)

List of Figures

Executive Summary: 3-5 pages: objectives, short summary of the methodology and key conclusions and recommendations

1 Introduction

Should include: purpose of the evaluation; mandate and strategy of UNFPA in the response to the COVID-19 pandemic

2 Methodology

Should include: overview of the evaluation process; methods and tools used for data collection and analysis; evaluation questions and assumptions to be assessed; limitations to data collection; approach to triangulation and validation

3 Findings

Should include for each response to evaluation question: evaluation criteria covered; summary of the response; detailed response

4 Conclusions

Should include for each conclusion: summary; origin (which evaluation question(s) the conclusion is based on); detailed conclusion

5 Recommendations

Should include for each recommendation: summary; priority level (very high/high/medium); target (business unit(s) to which the recommendation is addressed); origin (which conclusion(s) the recommendation is based on); operational implications. Recommendations must be: linked to the conclusions; clustered, prioritized; accompanied by timing for implementation; useful and operational

Annexes shall be confined to a separate volume

Should include: case study briefing notes; evidence tables; evaluation matrix; portfolio of interventions; methodological instruments used (survey, focus groups, interviews etc.); bibliography; list of people interviewed; terms of reference.

(*) *Tables, Graphs, diagrams, maps etc. presented in the final evaluation report must also be provided to the Evaluation Office in their original version (in Excel, PowerPoint or word files, etc.).*

The final version of the evaluation report shall be presented in a way that enables publication (professionally designed and copy edited) without need for any further editing (see section below). Please note that, for the final report, the company should share the files in Adobe Indesign CC software, with text presented in two columns with no hyphenation. Further details on design will be provided by UNFPA Evaluation Office in due course.

Annex 5 – Code of conduct and norms for evaluation in the UN system

Evaluations of UNFPA-supported activities need to be independent, impartial and rigorous and evaluators must demonstrate personal and professional integrity. In particular:

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

A **declaration of absence of conflict of interest must be signed by each member of the team and shall be annexed to the offer**. No team member should have participated in the preparation, programming or implementation of UNFPA interventions during the period under evaluation.

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

See **Code of conduct for evaluation in the United Nations System** at:

<http://www.unevaluation.org/search/index.jsp?q=UNEG+Ethical+Guidelines>

See **Norms for evaluation in the United Nations System** at:

http://www.unevaluation.org/papersandpubs/documentdetail.jsp?doc_id=21

Annex 6 – Evaluation quality assessment grid

Annex 7 - Humanitarian Evaluation Criteria

Criterion	Definition of criterion
Relevance / Appropriateness	The extent to which humanitarian activities are tailored to local needs, increasing ownership, accountability and cost-effectiveness accordingly. (Replaces the relevance criterion used in development evaluations.)
Effectiveness	The extent to which an activity achieves its purpose, or whether this can be expected to happen on the basis of the outputs.
Efficiency	The outputs – qualitative and quantitative – achieved as a result of inputs.
Connectedness	The extent to which activities of a short-term emergency nature are carried out in a context that takes longer-term and interconnected problems into account. Replaces the sustainability criterion used in development evaluations.
Coverage	The extent to which major population groups facing life-threatening suffering were reached by humanitarian action.
Coherence	The extent to which security, developmental, trade, and military policies as well as humanitarian policies, are consistent and take into account humanitarian and human rights considerations. (More focused on donor policy, but can also be applied to individual agencies on their own policy coherence.)

Source: Adapted from Buchanan-Smith, M., Cosgrave, J. and Warner, A. (2016) Evaluation of Humanitarian Action Guide. ALNAP. Pp.113-114.

Annex 8 - ERG members

Evaluation of the UNFPA capacity in humanitarian action (2019-2024) Reference Group

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Driving evidence-based actions
Ensuring rights and choices for all

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