

Title of evaluation report: GOK/UNFPA 7th Country Programme Evaluation

OVERALL QUALITY RATING: Poor with 60 points

Summary: The Kenya CPE report meets many UNFPA quality standards according to the criteria specified below. However, the evaluation team failed to clearly specify the methodology, data collection and validation tools and techniques, which undermined the quality of the report. Furthermore, the analysis section of the evaluation is principally “activity-focused” rather than results (chain) focused. The conclusions and recommendations appear reasonable based upon the narrative presented in the report; however, due to the weaknesses outlined in the methodology and findings/analysis, the logic chain of results has been interrupted in such a way where it is not possible to say whether the conclusions are based on credible findings and whether recommendations reflect the evaluators own judgement or an unbiased interpretation of the results.

Quality Assessment criteria	Assessment Levels			
	Very good	Good	Poor	Unsatisfactory
<p>1. Structure and Clarity of Reporting <i>To ensure report is user-friendly, comprehensive, logically structured and drafted in accordance with international standards.</i> Checklist of minimum content and sequence required for structure:</p> <ul style="list-style-type: none"> i) Acronyms; ii) Exec Summary; iii) Introduction; iv) Methodology including Approach and Limitations; v) Context; vi) Findings/Analysis; vii) Conclusions; viii) Recommendations; ix) Transferable Lessons Learned (where applicable) Minimum requirements for Annexes: ToRs; Bibliography; List of interviewees; Methodological instruments used. 	<p>Good Minimum content and sequencing required for the structure, and defined in the criteria, are met. The report also includes a foreword co-signed by the host country government and in-country UNFPA officials. The report includes a separate chapter for ‘Country Context’ (Chapter 2.0) and another for ‘UNFPA Strategic Response and Programme’ (Chapter 3.0). These chapters might be better suited as one combined ‘Context’ chapter since the context leads to the response.</p> <p>Additional sections include a chapter on ‘Strategic Positioning’ (Chapter 5.0) and ‘Transversal Aspect: Monitoring and Evaluation’ (Chapter 6.0). The content of these sections include both findings and de-facto conclusions, thereby confusing the structure and clarity of reporting. These chapters would be better divided into the Findings/Analysis and Conclusions sections. Furthermore,</p>			

	<p>the language used in the report is informal and colloquial at time, which has potential to obstruct the report’s clarity for readers.</p> <p>In addition, the report contains both an annex and an appendix. The annex does not include the minimum requirements specified in the criteria as methodological instruments are not provided. Furthermore, the appendix directly follows the annexed ToR, which makes it appear as the appendix to the ToR. Data provided in the appendix should be simply included as additional annexes.</p>
<p>2. Executive Summary <i>To provide an overview of the evaluation, written as a stand-alone section and presenting main results of the evaluation.</i> Structure (paragraph equates to half page max):</p> <ul style="list-style-type: none"> • i) Purpose, including intended audience(s); ii) Objectives and Brief description of intervention (1 para); iii) Methodology (1 para); iv) Main Conclusions (1 para); v) Recommendations (1 para). Maximum length 3-4 page. 	<p>Good The specific criteria for the executive summary are mostly met. The section clearly identifies the purpose of the report, including the intended audience, and the methodology. The identification of the objectives could be made clearer; moreover, a brief description of the intervention is not provided. Additionally, the executive summary was 6 pages long; this far exceeded the maximum length specified in the criteria. Notably, the main conclusions and recommendations content surpassed suggested guidelines (paragraph equates to half page max).</p>
<p>3. Design and Methodology <i>To provide a clear explanation of the following elements/tools</i> Minimum content and sequence:</p> <ul style="list-style-type: none"> • Explanation of methodological choice, including constraints and limitations; • Techniques and Tools for data collection provided in a detailed manner; • Triangulation systematically applied throughout the evaluation; • Details of participatory stakeholders’ consultation process are provided; • Details on how cross-cutting issues (vulnerable groups, youth, gender, equality) were addressed in the design and the conduct of the evaluation. 	<p>Poor The design and methodology content of the report was incorporated into the introduction rather than being presented as a standalone section, as specified in the criteria. The elaboration and explanation of methodological choice was minimal; although the content identified that the CPE evaluation was ‘participatory’, little detail was provided on how stakeholders were involved in the process. Similarly, though the content specifies that triangulation was systematically applied throughout the evaluation process, little detail was provided as to what this meant in</p>

	<p>practice. From the information that is presented, it seems that triangulation was used to mitigate some of the limitations of the methodology; this should be elaborated upon further in the discussion of 'methods of data validation and analysis'.</p> <p>Techniques and tools for data collection were presented, but accompanied with a low level of detail. Details regarding the participatory stakeholder consultation process are not provided, though the benefits of this process are later referenced. The introduction mentions participation of project managers and implementers, service providers at health facilities and beneficiaries, but does not explain the process. The way in which cross-cutting issues were addressed by the methodology are also not presented explicitly; however, the reader can infer from the body of the report and the list of those interviewed provided in the annex that vulnerable groups, youth, and women were consulted in the data collection process of the evaluation.</p>
<p>4. Reliability of Data <i>To clarify data collection processes and data quality</i></p> <ul style="list-style-type: none"> • Sources of qualitative and quantitative data have been identified; • Credibility of primary (e.g. interviews and focus groups) and secondary (e.g. reports) data established and limitations made explicit; • Disaggregated data by gender has been utilized where necessary. 	<p>Poor</p> <p>Data collection included document review, individual interviews, focus group discussions, and case studies or narratives, however the details of the data collection were largely missing. The sources of qualitative and quantitative data were identified in the annex and in the 'Transversal Impacts: Monitoring and Evaluation' section; however, the credibility of data sources is not discussed or made explicit. Not having detailed clarification of the data collection process and data quality jeopardizes the integrity of the Chapter 4 analysis.</p> <p>The report does disaggregate data by gender where necessary.</p>

<p>5. Findings and Analysis <i>To ensure sound analysis and credible findings</i></p> <p><u>Findings</u></p> <ul style="list-style-type: none">• Findings stem from rigorous data analysis;• Findings are substantiated by evidence;• Findings are presented in a clear manner <p><u>Analysis</u></p> <ul style="list-style-type: none">• Interpretations are based on carefully described assumptions;• Contextual factors are identified.• Cause and effect links between an intervention and its end results (including unintended results) are explained.	<p>Poor</p> <p>Contextual factors are identified in the report. In certain areas, findings are substantiated by evidence; specifically, outputs are described and linked to activities.</p> <p>There is some discussion of outcomes in the main body, however discussion of outcomes is relatively light. There is more discussion of outputs both in the body of the report and the appendix. An example of an outcome being discussed would be the description of government funding for condoms.</p> <p>In particular, cause and effect links between the intervention and some of its outcomes (intended/unintended) are not explained clearly. In these cases, casual or loose reference is made to beneficiary responses to the intervention. For example “Beneficiaries, particularly women appreciated the dignity kits, but the current distribution of one kit per household rather than by the number of individuals and gender in the household was found to be inadequate...” As demonstrated by this case, there is no clear explanation of how beneficiary satisfaction was learned about through data analysis, nor is this ‘satisfaction’ explicitly linked to specific activities. The report asserts that the drop-in centers ‘reduced stigma’ and ‘increased access’, but there is little evidence or analysis presented to support these claims beyond reiteration of the theory of change/programme logic and the achievement of outputs. Similarly, the report claims that capacity is enhanced without evidential or analytic support.</p> <p>Discussion of key outputs and outcomes is often not aligned to the “results chain (activities, outputs, outcomes)” described in the purpose of the evaluation; this can be</p>
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	<p>confusing to the reader as they try to understand the link between activities, outputs, and outcomes (in sequence). For example, Output 1 indicates that 'services are available', but not whether they were used – which would be a more powerful measure of the effect, or outcome of the intervention. Similarly, identification of training as advocates and role models for behavior change with respect to HIV was discussed without presented evidence as to whether these trainings were used.</p> <p>Overall, the analysis section of the evaluation is principally “activity-focused” rather than results (chain) focused.</p>
<p>6. Conclusions <i>To assess the validity of conclusions</i></p> <ul style="list-style-type: none"> • Conclusions are based on credible findings; • Conclusions are organized in priority order; • Conclusions must convey evaluators’ unbiased judgment of the intervention. 	<p>Good Conclusions appear reasonable based upon the narrative presented in the report; however, given the weaknesses outlined in the methodology, there is insufficient basis to support that the conclusions are based on ‘credible’ findings. Conclusions are not organized in priority order, but are ordered in a logical structure (Strategic; Programmatic; Transversal Impacts: Monitoring and Evaluation), which is helpful. Conclusions appear to present unbiased judgment of the evaluation; no clear bias is evident to the reader.</p>
<p>7. Recommendations <i>To assess the usefulness and clarity of recommendations</i></p> <ul style="list-style-type: none"> • Recommendations flow logically from conclusions; • Recommendations must be strategic, targeted and operationally-feasible; • Recommendations must take into account stakeholders’ consultations whilst remaining impartial; • Recommendations should be presented in priority order 	<p>Good Recommendations are logically connected to the conclusions, and their arrangements are aligned (Strategic; Programmatic; Transversal Aspects: Monitoring and Evaluation). Recommendations are not explicitly presented in priority order; however, Annex 1 transcribes the same content as that presented in the recommendations section, and seems to confirm that the recommendations are in fact presented in priority order. This priority ordering should be made clear and explicit in the recommendations section.</p>

	<p>Recommendations are strategic, targeted, and appear operationally-feasible. However, due to the weaknesses outlined in the methodology and findings/analysis, the logic chain of results has been interrupted in such a way where it is not possible to say whether the recommendations reflect the evaluators own judgement or an unbiased interpretation of the results. Moreover, the strategic recommendations may not be consistent with the activity-focused analysis presented in the report.</p>
<p>8. Meeting Needs To ensure that Evaluation Report responds to requirements (scope & evaluation questions/issues/DAC criteria) stated in the ToR (ToR must be annexed to the report).In the event that the ToR do not conform with commonly agreed quality standards, assess if evaluators have highlighted the deficiencies with the ToR.</p>	<p>Poor The evaluation report responds to requirements outlined in the ToR. The ToR is included in the annex of the report, as required by the criteria. However, given the evaluation has only a workplan without an underlying scientific approach, it is questionable as to how well the report responds to the meeting the needs of the reader audience. The evaluators have not highlighted any deficiencies with the ToR.</p>

Quality assessment criteria (and Multiplying factor *)	Assessment Levels (*)			
	Very good	Good	Poor	Unsatisfactory
1. Structure and clarity of reporting (2)		2		
2. Executive summary (2)		2		
3. Design and methodology (5)			5	
4. Reliability of data (5)			5	
5. Findings and analysis (50)			50	
6. Conclusions (12)		12		
7. Recommendations (12)		12		

8. Meeting needs (12)		12		
TOTAL	0	40	60	0

(*) Insert the multiplying factor associated with the criteria in the corresponding column e.g. - if "Finding and Analysis" has been assessed as "good", please enter the number 50 into the "Good" column. The Assessment level scoring the higher number of points will determine the overall quality of the Report