

## Costed Evaluation Plan East and Southern Africa Regional Office

Programme cycle	United Nations Population Fund (UNFPA) East and Southern Africa Regional Programme (2026-2029)
Indicative budget	US\$ 61.6 million (Regular resources: 21.6 million; Other resources: 40.0 million)
Regional programme priority areas	<p><b>Outcome 1:</b> By 2029, accelerate the reduction of preventable maternal deaths.</p> <p><b>Outcome 2:</b> By 2029, accelerate the reduction of unmet need for family planning.</p> <p><b>Outcome 3:</b> By 2029, accelerate the reduction of all forms of gender-based violence and harmful practices.</p> <p><b>Outcome 4:</b> By 2029, adaptation to demographic change has strengthened the resilience of societies for current and future generations, while upholding individual rights and choices.</p>
Previous regional programme evaluation	<p><b>Period covered:</b> Regional Programme (2022-2025)</p> <p><b>Year of completion:</b> 2024</p> <p><b>Evaluation quality assessment rating:</b> Satisfactory</p>
Gap mapping/analysis of relevant evaluative evidence and knowledge gaps that are strategically important to inform the design and implementation of the upcoming country programme	<p>The costed evaluation plan for the East and Southern Africa Regional Programme (2026-2029) is based on a comprehensive analysis of the following centralized and decentralized evaluations:</p> <ul style="list-style-type: none"> <li>• Formative Evaluation of the UNFPA East and Southern Africa Regional Programme 2022-2025</li> <li>• UNFPA East and Southern Africa Regional Programme Mid-Term Review (2022-2023)</li> <li>• Independent Evaluation of the UNFPA Strategic Plan 2022-2025</li> <li>• A Synthesis of UN System Evaluations of SDG 5 (2024)</li> <li>• Joint Evaluation of Phase II (2020–2023) of the UNFPA-UNICEF Global Programme to Accelerate Action to End Child Marriage</li> <li>• Joint Evaluation of the UNFPA-UNICEF Joint Programme on the Elimination of Female Genital Mutilation: Accelerating Change Phase III (2018-2021)</li> <li>• Formative Evaluation of UNFPA Support to Adolescents and Youth (2015-2022)</li> <li>• Evaluation of UNFPA Support to Population Dynamics and Data (2014-2022)</li> <li>• Mid-term Evaluation of the Maternal and Newborn Health Thematic Fund – Phase III 2018-2022</li> <li>• Recent country programme evaluations with programme cycles partially overlapping with the Regional Programme 2022-2025 (Angola, DRC, Rwanda, Uganda, Ethiopia, South Africa, Eswatini, Eritrea and Zimbabwe)</li> <li>• Evaluation of UNFPA Support to Gender Equality and Women's Empowerment (2012-2020)</li> <li>• Independent Evaluation of UNFPA Support to the Integration of the Principles of 'Leave No One Behind' and 'Reaching the Furthest Behind' (2024)</li> <li>• Inter-Agency Humanitarian Evaluation on Gender Equality and the Empowerment of Women and Girls</li> <li>• Evaluation of UNFPA Capacity in Humanitarian Action (2012-2019)</li> <li>• Final Evaluation of Hacklabs 2021-2023</li> <li>• Evaluation of the UNFPA Support to the HIV Response (2016-2019)</li> </ul>

- Mid-Term Evaluation of the UNFPA Supplies Partnership (2021-2030)

**Outcome 1: By 2029, accelerate the reduction of preventable maternal deaths**

There has been significant progress in reducing preventable maternal deaths in the region over the past two decades. Evaluations confirm the importance and effectiveness of core maternal health strategies, including support for midwives, comprehensive emergency obstetric and newborn care, maternal and perinatal death surveillance and response, and the minimum initial service package in humanitarian settings. However, significant gaps persist in evaluative evidence regarding the effectiveness of these interventions across diverse contexts. It is crucial to understand the conditions driving success or failure and the resources required for sustainable, scalable impact.

The Regional Programme Evaluation (RPE) (2026-2029) will seek to identify sustainable, effective, and efficient solutions to reduce maternal mortality which have proven to be effective across both development and humanitarian settings and have high potential for scale-up. Special attention will be given to determining the most effective and cost-efficient models for reaching marginalized groups, especially adolescents with disabilities, and to building resilient maternal health systems in fragile settings and protracted crises. The evaluation of the joint regional programme "2gether 4 SRHR Phase II" will provide complementary evidence on the effectiveness of integrated care models in reducing maternal mortality, particularly for marginalized women. By assessing how the program's strategies improve access to and utilization of quality maternal health services for vulnerable groups, and by examining the resilience of these systems during crises, the evaluation will help to identify effective interventions for preventing preventable maternal deaths in diverse contexts.

**Outcome 2: By 2029, accelerate the reduction of unmet need for family planning**

While existing evaluations and available data confirm progress in reducing unmet family planning needs in the region, the pace is too slow to achieve global targets by 2030. A critical and increasingly prominent challenge is that the remaining unmet need is concentrated among marginalized populations, including adolescents, unmarried women, and those residing in rural or humanitarian settings. There is a lack of robust evidence on which strategies are most effective in increasing uptake and sustained use of family planning methods among these highly diverse and often hard-to-reach groups. Furthermore, there is a clear gap in understanding successful approaches for advocating and ensuring the full implementation of supportive family planning policies, particularly in contexts where social norms, political sensitivities, or resource constraints create barriers to access and choice. This includes a need for greater understanding of how to overcome policy-to-practice gaps, ensuring that policies translate into tangible improvements in service delivery and access for those most in need.

The RPE (2026-2029) is designed to provide critical evidence to fill these gaps. It will conduct an in-depth assessment of support for family planning to identify context-specific, effective, and sustainable strategies for reaching and serving marginalized populations, rigorously analyzing what drives successful outcomes and overcoming policy-to-practice gaps. It will also evaluate the effectiveness of various service delivery models, particularly digital health interventions, in increasing contraceptive uptake and continuation. By focusing on these areas, the RPE will generate actionable evidence to accelerate progress towards family planning targets, especially for those left behind. The evaluation of the joint regional programme "2gether 4 SRHR Phase II" will also provide evidence to address the knowledge gaps by assessing what family planning strategies are effective in increasing uptake and sustained use among marginalized populations, particularly adolescent girls. In addition, the evaluation of the "Safeguard Young People" regional programme will provide insights on the relevance, effectiveness, coherence and sustainability of UNFPA's regional efforts to improve access to family planning information and services for adolescents and youth. However, this evaluation is not reflected in this costed evaluation plan as it will be commissioned and managed by the programme's donor.

**Outcome 3: By 2029, accelerate the reduction of all forms of gender-based violence and harmful practices**

Despite advancements in policy and legal frameworks, gender-based violence (GBV) and harmful practices rates remain high, suggesting that interventions require more evidence to be successful. A primary gap lies in understanding the relevance, effectiveness and scalability of community-

based interventions that seek to transform deep-rooted social and gender norms. There is a lack of robust evidence on what truly shifts attitudes and behaviors in the diverse, often resistant, cultural contexts across the region, including how to sustain these changes. Another critical gap concerns the coherence and effectiveness of multi-sectoral GBV response services. Evaluations often reveal inconsistencies in coordination and survivor-centered care across health, justice, and social welfare sectors. More evidence is needed on building resilient and accessible multi-sectoral GBV services, particularly for marginalized groups in humanitarian settings. Similarly, as climate change intensifies, understanding the effectiveness of GBV risk mitigation strategies integrated into climate adaptation initiatives is urgently needed.

The RPE (2026-2029) will address these gaps in the evaluative evidence base. It will provide evidence on programmatic approaches that empower women and girls, promote positive masculinities, and utilize comprehensive sexuality education, thereby clarifying what works, what does not, and why in changing social and gender norms that perpetuate GBV and harmful practices. Furthermore, by assessing multi-sectoral GBV services and GBV risk mitigation in climate adaptation, the RPE will provide crucial insights for building more cohesive and resilient response mechanisms across the region. The evaluation of the "Safeguard Young People" regional programme will provide complementary evidence, especially on youth-related interventions to prevent and respond to GBV and harmful practices, especially comprehensive sexuality education. However, this evaluation is not reflected in this costed evaluation plan as it will be commissioned and managed by the programme's donor.

**Outcome 4: By 2029, adaptation to demographic change has strengthened the resilience of societies for current and future generations, while upholding individual rights and choices**

While evaluations report significant progress in advancing the evidence base for population dynamics and data across the region, a critical evaluative evidence gap persists concerning the long-term impact and sustainability of interventions to enhance demographic resilience. Despite programmatic successes, evaluations provide limited information on the extent to which UNFPA has successfully influenced policy options, addressed sensitive issues, navigated pushbacks on human rights, and promoted the use of population data in government planning and resource allocation, pointing to a need for deeper understanding of the complex factors that build demographic resilience. Furthermore, there is a distinct shortage of evidence on the linkages between climate change and UNFPA's mandate areas, and specifically on how UNFPA's strategies can effectively integrate climate action into its programming.

To address these gaps, the RPE (2026-2029) will provide an assessment to strengthen the link between programmatic interventions and progress towards demographic resilience. Specifically, while there is a strong focus on supporting countries to harness the demographic dividend – such as investments in education, health, and job creation – the evaluation will be designed to show whether programmatic approaches successfully translate into investments that result in sustained economic growth. Generating evidence on effectiveness of integrating SRH and GBV into climate change and disaster risk reduction policies and plans will also be crucial to inform humanitarian preparedness and response efforts.

**Cross-cutting areas**

*Financing.* Although the strategic shift from funding to financing, including domestic resource mobilization and innovative financing, is increasingly operationalized at the country level, evaluations observe that these efforts have not kept pace with increasing needs. A significant evaluative evidence gap exists regarding the effectiveness of strategies to boost domestic investment in sexual and reproductive health and rights (SRHR). There is a notable absence of dedicated evaluations on the regional programme's successes and challenges in supporting countries to leverage domestic resources or explore innovative financing mechanisms for population and development initiatives. There is a lack of evaluative evidence on what approaches yield tangible increases in national funding and sustainable financial models for sexual and reproductive health (SRH), including how to overcome political and economic barriers.

To address these gaps, the RPE (2026-2029) will assess the effectiveness of implemented strategies aimed at increasing domestic resource allocation, strengthening financing mechanisms, and improving the efficient utilization of funds for SRHR, including adolescent SRHR and GBV, within the broader

frameworks of primary health care and universal health coverage. Furthermore, the RPE will provide crucial evidence on the key financial risks and opportunities facing the regional programme,, and how effectively these are being managed to ensure long-term sustainability and impact.

*Humanitarian preparedness and response.* While the regional office has expanded its humanitarian response capacity, effectively integrating life-saving SRH services, including the Minimum Initial Service Package, into humanitarian responses and advocating for their inclusion in policy frameworks, gaps remain in the evaluative evidence base. There is a critical lack of knowledge regarding how strategic efforts translate into consistent, scaled, and sustainable impact, especially for young people and other marginalized groups in humanitarian contexts. Specifically, robust evidence on the practical pathways and optimal conditions for effectively integrating SRH services into broader regional and national disaster preparedness and response plans within bodies like the Southern African Development Community (SADC) and the East African Community (EAC). In addition, a significant gap exists in demonstrating how capacity development of women and youth-led organizations and networks drives the integration of SRH and GBV in humanitarian, development and peace-responsive efforts. Evidence on how these critical local actors are truly empowered and contribute to improved access to SRHR in humanitarian contexts is limited.

The RPE (2026-2029) will assess the effectiveness of the integration of SRH services into regional and national systems, including disaster preparedness and response plans. Crucially, the RPE will also provide evidence on how the engagement and capacity of women and youth-led organizations and networks contribute to enhancing humanitarian, peacebuilding, and climate actions, thereby illuminating pathways for more sustainable and inclusive impact.

## Evaluations

Evaluation title	Intended use of evaluation findings	Type of evaluation	Humanitarian evaluation (yes; partially; no)	Joint evaluation (yes; no), including partners where applicable	Programme/ project budget in US\$	Evaluation estimated budget and source of funding (regular resources (RR); other resources (OR)) in US\$	Timeframe (month and year)	Evaluation manager
Regional Programme Evaluation (2026-2029)	Inform the design of the new regional programme; include interventions of a catalytic nature contributing to country-level results in the new regional programme; determine the discontinuation of	Regional programme evaluation (RPE)	Partially	No	61.6 million	120,000 (RR)	Preparation phase: October - December 2027  Implementation	ESARO Planning, Monitoring and

	interventions under the new regional programme; inform decision-making and the strategic positioning of UNFPA in the region; enhance accountability towards UNFPA country offices, national governments, donors, and rights holders						phase: January - September 2028	Evaluation Advisor
Final evaluation of the joint regional programme "2gether 4 SRHR Phase II (April 2023-March 2027)"	Inform the design of a potential new regional programme; inform interventions under the potential new regional programme; support decision-making and the strategic positioning of the four participating UN agencies in the region; enhance accountability towards the national governments, donors, rights holders, and UNFPA country offices	Project/ programme evaluation	Partially	Yes  UNAIDS, UNICEF and WHO; UNFPA is the lead agency	42.6 million	100,000 (OR)	March - December 2026	Joint evaluation management group representing all participating UN agencies (chaired by UNFPA ESARO Programme Specialist, Monitoring, Evaluation & Learning)

Evaluation Capacity Development						
Evaluation capacity development activity	Objectives of evaluation capacity development activity	Category of evaluation capacity development (internal; national)	Type of evaluation capacity development (individual; institutional; enabling environment)	Targeted stakeholders	Estimated budget and source of funding (regular resources (RR); other	Timeframe (month and year)

					resources (OR) in US\$	
Participation in IEO-led cross-regional evaluation capacity building workshop	Develop the knowledge and skills of regional planning, monitoring and evaluation staff to provide capacity development, technical assistance and quality assurance for country-level evaluations, in particular country programme evaluations	Internal	Individual	ESARO Planning, Monitoring and Evaluation Advisor	3,200 (RR)	June 2026