Evaluability Assessment and Strengthening of the Country Programme 2016-2020 of UNICEF and the Government of Maldives

FINAL REPORT
November 2019-January 2020

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## CONTENTS

ACKNOWLEDGEMENTS .........................................................................................................................i

CONTENTS ..............................................................................................................................................ii

ACRONYMS .............................................................................................................................................iv

EXECUTIVE SUMMARY ...............................................................................................................................1

1. INTRODUCTION .....................................................................................................................................8

   1.1 Purpose and scope of the evaluability assessment .............................................................................8

2. EVALUABILITY ASSESSMENT METHODOLOGY ...............................................................................9

   2.1 Approach to the EA ...........................................................................................................................9

   2.2 Analytic framework ..........................................................................................................................10

   2.3 EA Questions ..................................................................................................................................10

   2.4 Data collection ................................................................................................................................10

   2.5 Analysis process ...............................................................................................................................11

   2.6 Ethical considerations ......................................................................................................................11

   2.7 Limitations of the study ....................................................................................................................11

3. THE COUNTRY PROGRAMME DOCUMENT (CPD) 2016-2020 ............................................................12

   3.1 Status of implementation ................................................................................................................12

4. KEY FINDINGS .....................................................................................................................................15

   4.1 The results framework .......................................................................................................................15

      4.1.1 Programme Design, Theory of Change and overall Clarity of Logic ........................................16

      4.1.2 Results, activities, and indicators and targets ...........................................................................18

      4.1.3 Cross cutting priorities: gender, disability, DRR, and equity ....................................................23

   4.2 Planning, monitoring and evaluation systems ..................................................................................26

      4.2.1 Monitoring ..................................................................................................................................26

      4.2.1 Evaluation ..................................................................................................................................29

   4.3 Human and financial resources ........................................................................................................31

      4.3.1 Human resources for planning, monitoring and evaluation ....................................................31

5. CONCLUSIONS ....................................................................................................................................34

   5.1 Conclusions for evaluability .............................................................................................................34

      5.1.1 CPE evaluation timeliness .........................................................................................................35

   5.2 Areas for strengthening ...................................................................................................................35

      5.2.1 For the development of the next Results Framework ................................................................35

      5.2.2 For the monitoring and evaluation system .................................................................................36

      5.2.3 Human resources for monitoring and evaluation .....................................................................37

6. RECOMMENDATIONS ...........................................................................................................................37

   6.1 Recommendations for evaluation .....................................................................................................37

   6.2. Recommendations for strengthening the next results framework .................................................37
6.3 Recommendations for strengthening the monitoring and evaluation system ............................................... 38
6.4 Recommendations for strengthening human resources for M&E ............................................................ 39
Annex A: Documents Consulted ......................................................................................................................... 40
Annex B: List of stakeholders consulted .......................................................................................................... 42
Annex C: Research and studies 2019 - Analysis ............................................................................................... 44
Annex D: Evaluability Assessment Questions .................................................................................................... 46
Annex E: Possible approach to data collection for Outcome indicator 1: ......................................................... 48
Annex F: Results Framework as stated in 2016-20 CPD .................................................................................. 49
Annex G: IRRF Analysis ..................................................................................................................................... 52
Annex H: Analysis of monitoring documents .................................................................................................... 56
Annex I: Quarterly monitoring synthesis report, suggested template ............................................................... 58
Annex J: UNDAF and CPD mapping .................................................................................................................. 60
Annex K: Terms of Reference for the Evaluability Assessment assignment .................................................... 71
Annex L: Consultant biodata ............................................................................................................................... 76
## ACRONYMS

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
</tr>
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<tbody>
<tr>
<td>AWP</td>
<td>Annual Work Plan</td>
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<tr>
<td>BMI</td>
<td>Body Mass Index</td>
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<td>C4D</td>
<td>Communication For Development</td>
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<td>CEP</td>
<td>Costed Evaluation Plan</td>
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<td>CPD</td>
<td>Country Programme Document</td>
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<td>CSO</td>
<td>Civil Society Organisation</td>
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<td>DHS</td>
<td>Demographic and Health Survey</td>
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<td>DRR/CC</td>
<td>Disaster Risk Reduction/ Climate Change</td>
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<td>EA</td>
<td>Evaluability Assessment</td>
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<td>FACE</td>
<td>Funding Authorization and Certificate of Expenditures</td>
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<td>IRRF</td>
<td>Integrated Results and Resources Framework</td>
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<td>KM</td>
<td>knowledge Management</td>
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<td>M&amp;E</td>
<td>Monitoring and Evaluation</td>
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<td>MCO</td>
<td>UNICEF Maldives Country Office</td>
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<td>MDGs</td>
<td>Millennium Development Goals</td>
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<td>MEMIS</td>
<td>Maldives Education Management Information System</td>
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<td>MTR</td>
<td>Mid-Term Review</td>
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<td>OOSC</td>
<td>Out of School Children</td>
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<td>RAM</td>
<td>Results Assessment Module</td>
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<td>RBM</td>
<td>Results Based Management</td>
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<td>ROSA</td>
<td>UNICEF Regional Office for South Asia</td>
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<td>SDGs</td>
<td>Sustainable Development Goals</td>
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<td>SEN</td>
<td>Special Educational Needs</td>
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<td>SIDS</td>
<td>Small Island Developing States</td>
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<td>SMART</td>
<td>Specific Measurable Achievable Reliable Timebound</td>
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<td>SMQ</td>
<td>Strategic Monitoring Question</td>
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<td>ToC</td>
<td>Theory of Change</td>
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<td>UNDAF</td>
<td>United Nations Development Assistance Framework</td>
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<td>UNSDCF</td>
<td>UN Sustainable Development Coordination Framework</td>
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<td>VAC</td>
<td>Violence Against Children</td>
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EXECUTIVE SUMMARY

Purpose, scope and methodology

This document reports the process, findings, and conclusion of an Evaluability Assessment (EA) of the UNICEF-Government of Maldives Country Programme 2016 – 2020. The EA was commissioned by Maldives Country Office (MCO) in late 2019, at the time when it was initiating the planning process for the next Country Programme Document (CPD) in 2020 and the new programming cycle from 2021 to 2025. The current country programme may be evaluated during 2020. The same period will also see the development of the UN Sustainable Development Cooperation Framework (UNSDCF), replacing the UN Development Assistance Framework (UNDAF) as the central coordinating framework document across UN agencies and with government partners.

The Country Programme Document (CPD 2015) was approved in June 2015 by the Executive Board. The overall goal of the programme was to “support the Government of Maldives to reduce inequities and disparities and achieve the progressive realization of the rights of all children, especially the most vulnerable”, and set out outputs in education, health/nutrition, child protection, evidence generation, social protection and disaster risk reduction in order to achieve this goal. It is currently on its fourth year of program implementation with an allotted budget totalling US $8,320,799.

The purpose of the EA was to determine the extent to which progress towards the objectives set out in the CPD can be readily and reliably measured and evaluated, and to strengthen evaluability where possible. In order to inform the upcoming decision-making processes, it also aimed to provide evidence-based recommendations on how best to strengthen the results framework and monitoring systems for the next Country Programme.

Specifically, the objectives of the EA were to:

- **Objective 1:** Assess the adequacy and validity of the results, activities and indicators in the CPD results framework to measure progress against set targets.

- **Objective 2:** Assess the current Country Office planning, monitoring and evaluation systems and tools, particularly data collection and analysis systems, and whether the processes and systems in place are sufficient to enable the CO to adequately monitor and report on attained results.

- **Objective 3:** Assess the extent to which the staffing structure/profile matches the skills demanded by the programme and the adequacy of financial resources aligned to meet the expected results.

- **Objective 4:** Provide key recommendations on changes and amendments to the Country Office systems to the monitoring and reporting of the country programme progress with a view to measure results for children.

The EA took place over a three-month period during November 2019 to January 2020 and was carried out by an independent consultant. The EA was guided by an analytic framework centred on the twin ideas of ‘evaluability in principle’ and ‘evaluability in practice’. Assessing ‘evaluability in principle’ required major attention to documentation, cross checked by consultation regarding
intention and subsequent experience of implementing the programme. Assessing ‘evaluability in practice’ required a stronger focus on monitoring systems and practices, mainly mined through consultation, and cross-checked through the analysis of documents that are products of this system. Thus, different types of evidence from documentary sources and the perspectives of a variety of stakeholders were sought. Discussion of the ‘in practice’ measurability of indicators articulated in the CPD document was used as an entry point for surfacing and investigating broader questions of programme coherence, data availability and monitoring practices. The principles of triangulation and internal coherence of different perspectives were employed during analysis in order to build responses to the EA questions, make assessments and identify areas for strengthening.

The overall approach was iterative and collaborative, with preliminary document analysis interspersed with initial interviews in the planning stage, followed by a 12-day in-country period which interspersed interviews/consultations with further document analysis. Opportunities for collaboration and validation were built into the process through scoping discussions, validation of preliminary findings, and gathering commentary on the draft deliverables. In total, 27 stakeholders were consulted including the MCO staff, staff of the Regional Office for South Asia (ROSA), UN sister agencies, government stakeholders and CSO stakeholders.

The EA was conducted in accordance with the UNICEF Procedure for Ethical Standards in Research, Evaluation, Data Collection and Analysis and with United Nations Evaluation Group (UNEG) Norms and Standards. Care was taken to deploy the practices of integrity, independence and impartiality.

Limitations of the exercise is associated with the consultant not having direct access to monitoring databases. The evidence grounding the analysis would have been stronger if this had been facilitated. It was also at times a challenge, at this relatively late stage in the programme, to guide consultations away from evaluation-oriented issues of achievements and challenges to evaluability-related questions of data and systems for monitoring.

**The Country Programme Document and Results Framework**

The CPD is by design a relatively brief document presenting high level objectives: a narrative programme rationale and description of programme areas and risks, and an accompanying costed evaluation plan (CEP). The results framework presents two overall outcomes with indicators and targets, and 10 outputs, one of which is conceived as cross-cutting. The situation analysis in the CPD identifies inequality as a major challenge in a middle-income country, and the overall goal for the programme centralises this. Figure 1 represents these outcomes and outputs as they are presented in the results framework as a visual Theory of Change.
A number of adjustments have been made to the framework in the course of implementation of the programme. Output indicators were added and adjusted a number of times. Sub-outputs, along with indicators, were also articulated for some workstreams in annual workplans. Some sub-outputs were subsequently withdrawn while some targets were adjusted.

**Findings of the Evaluability Assessment**

The EA presents 13 findings related to the EA specific objectives concerning the results framework, the planning, monitoring and evaluation system, and human and financial resources for monitoring and evaluation.

**The results framework**

**Finding 1:** Programme design is strong and well-founded for addressing critical areas for children (Outcome 1), but weak in articulating how the most marginalised might be reached within these areas (Outcome 2). The logical coherence of the overall Integrated Results and Resources Framework (IRRF) is challenged by causal reversal evident in the structure of Outcome 2, and in its relation to Outcome 1. This conflates different roles of evidence and confuses the strategies (causal pathways) to be put in place to make it effective. This represents a clear challenge to evaluability.

**Finding 2:** The results framework is not fully comprehensive because output results are insufficient to achieve outcomes, which are very broadly stated. In addition, (some substantial) activities are not measured and their contribution to outcome achievements cannot be tracked. Both situations represent evaluability challenges.

**Finding 3:** Measurability is weak for several outputs because target locations or sectors are not specified. For some indicators, agreed standards defining their achievement are missing. Some
others have weak results orientation since these indicators measure work done rather than the results of the work.

**Finding 4:** Measurability of indicators across the IRRF is low or partial due to: some poorly identified data sources which are therefore not aligned with the work established through the CP; lack of sufficient progress in establishing information systems; and changing government priorities.

**Finding 5:** There is indicative – but triangulated – evidence of important progress towards outcomes found in key steps across parts of the programme. However, these are currently mostly taking place at a ‘sub-output’ level not captured by the IRRF indicators, and in some cases only specified as sub-outputs for monitoring.

**Finding 6:** The whole programme focuses on reducing inequalities; some outputs focus specifically on disability, or vulnerability; and care has often been taken to specify the targeting of girls and boys. However, there is little visibility of these themes in indicators and targets. Progress is also not measured in most cases, as most targets are not disaggregated.

**Finding 7:** The roles of ‘evidence’ in a) identifying marginalised groups and understanding the marginalisation; b) building policy, and c) policy monitoring in order to continually improve policy planning - are conflated in the programme. This conflation weakens the logic with which social inclusion is addressed in the programme.

**The monitoring and evaluation system**

**Finding 8:** Routine partner activity reporting and monitoring is observed, but the emphasis of partner reporting is towards financial management. Available opportunities in the monitoring visit templates to analyse the completed activities’ degree of progress towards outputs / outcomes are not exploited.

**Finding 9:** There is ‘missing layer’ of M&E process between routine partner reporting and monitoring visits and annual reporting. Missing elements include synthesis of routine information monitoring; regular synthesis of programme progress aside from in the annual report; regular review of progress against indicators and targets; and a process for synthesising CPD workstream workplans.

**Finding 10:** There is room for more active, routinized ‘critical’ analysis in reporting practices, and for more active efforts to orient reporting towards the results framework so that progress can be understood relative to objectives (including targets and indicators).

**Finding 11:** A strategy for using evaluation to support learning has not been clearly articulated in MCO. This hampers critical reflection on the programme as a whole, and limits opportunities for generating knowledge to support national and international advocacy for increasing investments in children.

**Finding 12:** While there is a growing emphasis on evaluation and research, and how to use these to inform planning, there is currently no defined knowledge management plan or system to enhance the links between studies/research and programmes.

**Human resources for M&E**

**Finding 13:** Due to multiple roles played by most staff, particularly the M&E officer, combined with a programme of work that remains broad-based, the ‘middle level’ M&E function – including routine synthesis of programme monitoring information and routine tracking of progress towards targets – is currently not addressed.
Conclusions

Weaknesses in the coherence and comprehensiveness of the results framework, alongside a number of in principle and in practice indicator measurability challenges and a monitoring system which is not optimised for evaluation indicates that a summative evaluation approach focused on the results framework cannot be recommended. A formative evaluation approach, based in a team-wide exercise to articulate a full theory of change could in principle generate valuable learning, but would need to be complete by May 2020 in order to actually use that learning as a basis for the new CPD.

Articulating a stronger results framework for the new CPD will involve unpacking and rethinking the roles of evidence and how these can be activated in the programme. It will also involve integrating cross cutting priorities more deeply into the workstreams and ensuring that this integration is visible through systematic disaggregation of indicators and targets by gender and where feasible by disability. Strengthening the integration of gender would include taking a more assertive approach to contribute in taking actions to prevent the disadvantages women face as adults by addressing how girls and boys are differently socialised as children. Sharpening the precision of indicators would also strengthen the framework.

The monitoring and evaluation system is not currently optimised to support decision making or to take advantage of reporting processes. A number of steps could be taken, most importantly taking steps to routinely synthesise available information, aligning reports with progress against the results framework, and strengthening the evaluation function in the context of a broader rationale and plan for knowledge management.

Facilitating the establishment of stronger monitoring and evaluation processes will mean addressing the constraints of staff caused by their multiple roles, emphasising the role of M&E as core to effective programme delivery; and supporting staff with responsibilities for this to achieve full focus. Strategically narrowing the programme and full integration of cross-cutting issues so that they do not need to be addressed ‘separately’ will be key to achieving this.

Recommendations

For evaluation

Recommendation 1: A summative CP evaluation, for which tools and data are not in place, is not recommended. A formative evaluation is recommended only in the case that it can be completed, using a collaborative, learning process, by May 2020.

If an evaluation is to push through within this timeline to support learning for the next CPD, there is a need to factor in the development of a programme-level Theory of Change through a process that centrally engages the programme team and draws on their understanding of the causal processes that have been working, and on the key strategies and interventions they have used. This would be a key analytic tool in an assessment of effectiveness which can generate learning, and is not fully dependent on the IRRF. Also factor in resources for ‘extra’ administrative data collection to substitute absence of data for some indicators.
For strengthening the next results framework

Recommendation 2: Ensure that the next CPD takes a very focused approach. Use the forthcoming situation analysis to identify priority target areas, target populations, and very specific objectives for change (desired outcomes). Focus the selection and design of activities clearly on this specific desired change. Use any forthcoming evaluation findings to design a strategy that works. Develop a theory of change articulating all the causal steps expected to achieve this change, and the strategies anticipated to be effective in taking these steps. Next, sense-check whether all these causal steps can realistically be activated within the framework of the next CPD.

Recommendation 3: Unpack the intended roles of evidence generation to support results for children. Position evidence generation as a strategy, deployed through different ways and processes to a) strengthen the identification of and understanding of priority target groups (e.g. those marginalised by multiple processes) and b) strengthen processes for policy monitoring and c) strengthen the use of monitoring and research evidence as the basis for policy and planning.

Recommendation 4: Take a more assertive approach to the integration of cross-cutting issues including gender inequality (a gender transformative approach), inequality based on disability and DRR by specifying the approach taken to tackle them in each intervention/programme. For gender, this means tackling the socialisation of girls and boys which will result in placing them in structurally unequal positions as adults, with material consequences. Ensure that these cross-cutting priorities are made systematically visible and measurable in the next results framework by consistently disaggregating targets by gender and disability. Consider operationalising/continuously operationalising a commitment to use the Gender Toolkit to develop a response to this issue.

Recommendation 5: Improve measurability in general by consistently identifying intervention targets by number (of people, islands, policies, departments) and location (which people, which islands, which policies etc.). Provide clear benchmarks on any indicator which require agreed standards to assess achievement or where the target group might be ambiguous. Orient all indicators towards the results of work done, rather than the work done itself.

For strengthening the monitoring and evaluation system

Recommendation 6: To strengthen the analytic content of partner reporting, consider including information which categorize reported activities according to the strategy used, the method to deploy the strategy, and the steps in the ToC targeted. Also consider including for each activity the statement of UNICEF contribution to the activity (e.g. funds, technical support in design, technical support in implementation etc.) and others contributing to the activity. Consider also including information such as the percentage of output budget delivered for the activity; and percentage of target the activity is designed to reach.

Recommendation 7: Institute a quarterly synthesis of partner and monitoring visit reporting which briefly specifies a) how many reports have been received and are synthesised, b) which outputs they are relevant to, c) key achievements made by output and outcome, d) key learnings and challenges, e) emerging risks that may affect progress towards output/outcome, and f) summary of action required. This should be made quickly available in Briefing format across the programme team. Consider also making this available to partners.

Recommendation 8: Take steps to develop and establish a knowledge management system/plan which links research, evaluation and monitoring information to programmes. This includes a) defining the role and purpose of an evaluation function, b) identifying knowledge gaps for targeted
research and developing an evidence generation plan, c) optimizing data and information sharing across the team to support ongoing decision making, and d) collating workplans into a shared country programme workplan. The new CPD preparation process should include a narrative explaining the evaluation strategy as per CEP guidance.

**For strengthening human resources for M&E**

**Recommendation 9:** Take steps to ensure that M&E human resources are supported in gaining focus to strengthen the monitoring and evaluation function. This means supporting the M&E officer to take leadership and focus on establishing new systems for analysing and synthesising data, and on extending consistent support across the team to strengthen ToC articulation and RBM.

**Recommendation 10:** Reduce the incidence of conflicting staff roles and consequent time pressure by a) integrating cross cutting priorities so these are fully addressed through all programmes and no longer treated as separate work streams; b) strategically narrowing the overall objectives and focus of the next CPD.
1. INTRODUCTION

The UNICEF-Government of Maldives country programme 2016 – 2020 was approved in June 2015 by the executive board with a total budget of US $ 9.2 million comprising of programmes on 1) Health, 2) Nutrition, 3) Education, 4) Child Protection and 5) Social Inclusion. Of this budget, approximately 37% is drawn from Regular Resources, while the remainder is a ceiling total from Other Resources.\(^1\) Planned budget has translated into an actual allotment of $8,320,799 and utilization (as at December 2019) of $7,707,527.\(^2\)

The Country Programme Document (CPD 2015) describing the intended programme was developed using the guidance of the UNICEF global Strategic Plan 2014-17 and by aligning this programme with priorities related to the local Maldives context. The overall goal of the programme, as stated in the CPD document, is to “support the Government of Maldives to reduce inequities and disparities and achieve the progressive realization of the rights of all children, especially the most vulnerable”.

A subsequent global Strategic Plan was developed for 2018-21, which in particular took account of the close of the Millennium Development Goals (MDGs) period and the transition to the Sustainable Development Goals (SDGs). A theory of change was also developed for the global Strategic Plan. The development of the CPD coincided with the development of this new global strategic plan, as well as the development of the UNDAF 2016 to 2020. It has been ensured that there are in principle strong links between these frameworks (see Section 4.2 below).

1.1 Purpose and scope of the evaluability assessment

At the time of this evaluability assessment (EA), the Country Office had just begun initiating the planning process for the next Country Programme Document (CPD) in 2020, in preparation for a new programming cycle from 2021-2025. The current programme may be evaluated during 2020. The same period will also see the development of the UN Sustainable Development Coordination Framework (UNSDCF), replacing the UNDAF as the central coordinating strategy document across UN agencies and with government partners.

This EA was commissioned by Maldives Country Office (MCO) prior to these processes, with the intention of providing information that will feed into them; specifically, to determine the extent to which progress towards the objectives set out in the CPD can be readily and reliably measured and evaluated. The EA also sets out to strengthen evaluability where possible, especially with a view to strengthen the results framework and monitoring systems for the next Country Programme, and to provide recommendations on the basis of evidence collected to this end.

Specifically, the objectives of the EA are to:

**Objective 1:** Assess the adequacy and validity of the results, activities and indicators in the CPD results framework to measure progress against set targets.

**Objective 2:** Assess the current Country Office planning, monitoring and evaluation systems and tools, particularly data collection and analysis systems, and whether the processes and systems in place are sufficient to enable the CO to adequately monitor and report on attained results.

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\(^1\) This proportion, derived from figures provided by the CO, differs somewhat from the planned proportion as stated in the CPD, which forecast 46% from RR and 54% from OR.

\(^2\) Figures provided by CO
Objective 3: Assess the extent to which the staffing structure/profile matches the skills demanded by the programme and the adequacy of financial resources aligned to meet the expected results.

Objective 4: Provide key recommendations on changes and amendments to the Country Office’s systems for monitoring and reporting of country programme progress with a view to measure results for children.

Evaluability refers to ‘the extent to which an activity or project can be evaluated in a reliable and credible fashion’ (OECD DAC definition). It usually includes considering:

- Evaluability in principle, given the nature of the project design,
- Evaluability in practice, given data availability to carry out an evaluation and the systems able to provide it, and
- The likely usefulness of an evaluation.

To this definition, UNICEF EA guidance adds a dimension of analysis linking both ‘in practice’ and ‘in principle’ evaluability: whether the resources allocated to the programme are at a realistic scale for generating the results envisaged.

The EA took place over a three-month period during November 2019 to January 2020 and was carried out by an independent consultant in collaboration with MCO staff. The exercise was not intended to assess Country Programme results or progress so far, but as an exercise to reflect on the original programme design and Theory of Change construct and its validity as implementation has progressed.

This report briefly describes the methodology for carrying out the EA in Section 2; and gives an overview of the 2016-20 Country Programme and its current implementation status in Section 3. Section 4 then sets out 13 key findings of the evaluability assessment relevant to the study’s four objectives. Section 5 draws these findings together to tease out conclusions regarding both the evaluability of the current programme, and some possible approaches to strengthening evaluability while developing the next country programme. Section 6 makes 10 specific recommendations for any evaluation process, and for strengthening the next results framework, the monitoring and evaluation system, and human resources for M&E.

2. EVALUABILITY ASSESSMENT METHODOLOGY

2.1 Approach to the EA

The EA was carried out by an independent consultant responsible for designing and carrying out the exercise, impartially articulating findings on the basis of evidence gathered, and formulating recommendations. In order to carry the EA forward as a learning exercise, however, the overall approach was collaborative, with advice sought at the outset on the context for the EA, perceptions of priority issues; an iterative approach to staff consultation in-country; and a discursive, face-to-face sense-checking exercise to validate preliminary findings.

2.2 Analytic framework

Overall the EA was guided by an analytic framework centred on the twin ideas of ‘evaluability in principle’ and ‘evaluability in practice’, with somewhat different usage of data sources for each. Assessing evaluability in principle requires major attention to documentation, cross checked by consultation regarding intention and subsequent experience of implementing the programme. Assessing ‘evaluability in practice’ requires a stronger focus on monitoring systems and practices, mainly mined through consultation, and cross-checked via analysis of documents that are products of this system.

Alongside this analytic framework, the approach to making judgements drew on a concept of internal and external narrative coherence across different sources (essentially mixed document sources; internal and external consultations/interviews) in order to formulate judgement against the EA questions. This approach combined principles of cross-reference (simple triangulation) across responses and across documentary sources, with a consideration of the internal coherence in information derived from detail around specific issues. This approach seeks a variety of perspectives in order to capture and understand variations in the narrative, as well as to identify where perspectives are consistent.

This approach to analysis incorporated the assumption that in part what was required was a synthesis of data – derived from perspectives alongside documented processes - that have not previously been brought together and analyzed as a unit; in doing so, the development of findings was based on the consistency of information across different sources, building an emerging narrative around each EA question.

2.3 EA Questions

Data collection was guided by a set of 17 Evaluability Assessment questions formulated to respond to each EA objective. These were proposed in the Terms of Reference and adapted during the inception period, essentially to minimize an emphasis on assessing financial issues. The adapted set of questions is presented in Annex D.

2.4 Data collection

With document analysis and stakeholder consultations as the main tools for data gathering, the approach was iterative, with preliminary document analysis interspersed with initial interviews in the planning stage, followed by a 12-day in-country period which interspersed interviews/consultations with further document analysis.

The intention was to achieve a broad consultative process and to build in-depth information using a case study approach focused on the selection of five indicators covering the major workstreams (see inception report). However, consultations could not be limited to these indicators as some were pitched at a level too high to easily relate to ‘in practice’ measurability. In addition, external stakeholders were not necessarily familiar with all indicators. Therefore, a broader approach was taken, covering measurability of all indicators articulated in the CPD document, and using this discussion as an entry point for surfacing and investigating broader questions of programme coherence, data availability, monitoring practices, and, in some cases, indicative progress of actual implementation.
In total, 27 stakeholders were consulted in 20 face to face meetings and 2 skype interviews. These included MCO staff (9); staff of the Regional Office for South Asia (ROSA) (2); UN sister agencies (2); government stakeholders (10); and CSO stakeholders (4).

2.5 Analysis process

The analysis for the development of findings and the consideration of strength of triangulation took place in two phases. The first phase took place during a brief period reserved for in-country work, followed by a presentation of preliminary findings for validation and discussion with the MCO team. The second phase involved processing feedback from this meeting, further scrutiny and deeper analysis of select issues, and development of this draft report.

2.6 Ethical considerations

The EA was conducted in accordance with the UNICEF Procedure for Ethical Standards in Research, Evaluation, Data Collection and Analysis and with United Nations Evaluation Group (UNEG) Norms and Standards. Care was taken to deploy the practices of integrity, independence and impartiality, and there was no conflict of interest for the consultant.

The EA engaged stakeholders through inviting commentary on the draft deliverables (inception report and EA report). Comments and the consultant’s response to these, was explained and recorded in comment trails. All findings were carefully evidenced and triangulated. Where triangulation is weak, this is noted in footnotes in the report. Answering the EA’s question involved applying multiple analytical tools to the data collected. All findings and conclusions were explicitly justified and substantiated, and the recommendations were clearly based on conclusions and findings.

Stakeholders consulted were informed about the purpose of the EA, as well as the difference between the EA and an evaluation. They were also informed of the confidentiality of their responses. To ensure this confidentiality, information has been aggregated such that individual respondents cannot be identified.

No interviews were conducted with children.

2.7 Limitations of the study

The implementation of this study met some challenges:

- Staff time pressure and multiple roles meant that some aspects of pre-country visit planning and scheduling of meetings for the in-country work were less than optimal. Response to the plan articulated in the inception report was received when the in-country work was already 50% complete, hence at that point only few adaptations on approach and further scheduling could be made. No draft schedule was available before the country visit for review/discussion on the basis of the approach offered. These limitations were mitigated to some extent by a flexible consultation technique, and by MCO staff willingness to undertake follow-up consultations.

- Some planned interviews with external stakeholders including the Ministry of Health and the UN Resident Coordinator were unable to take place due to the short time frame for interview scheduling.
• Access to ‘grey literature’ and information housed in the databases was limited, as the consultant did not have direct access and was therefore dependent on what MCO staff were able to spare time to identify and share. This has weakened analysis in some aspects, most directly on the analysis of monitoring and reporting templates and systems; and on how the RAM data base is used. Analysis here is based on a rigorous process applied to the documents made available.

• The timing of this EA late in the programme meant it was a challenge to steer consultations away from results verification and maintain a focus on ‘in principle’ evaluability and systems and practices which might support this. It was also a challenge to complete investigations into ‘in practice’ measurability, which can be highly complex, in consultations scheduled for one hour.

• The consultant came across a reference to UNICEF draft guidance on evaluability assessments in the Sri Lanka EA report, at the analysis and reporting phase of the EA. This guidance is not publicly available online, so had not been identified from the consultant’s initial research. No reference was made to it in the ToR. It was therefore not available to use for guidance in the planning of this assignment during inception, nor for the field work / consultations phase.

3. THE COUNTRY PROGRAMME DOCUMENT (CPD) 2016-2020

The CPD is by design a relatively brief document presenting high level objectives. It includes a narrative programme rationale, a discussion of partnerships, elaboration of three output areas – education, health/nutrition and child protection, and a discussion of social inclusion – and discussion of risks and monitoring and evaluation. A results framework is set out, and there is a separate costed evaluation plan (CEP).

The situation analysis in the CPD identifies inequality as a major challenge in a middle-income country, and the overall goal for the programme centralises this, stated as – “to support the Government of Maldives to reduce inequities and disparities and achieve the progressive realization of the rights of all children, especially the most vulnerable”.

This focus echoes the emphasis in the global Strategic Plan and theory of change – produced later than the CPD – on issues of equity, including gender and disability, which are treated both as cross cutting themes and as a standalone outcome (Goal 5), and states that a focus on equity accelerates progress towards achieving the rights of all children.

The results framework (IRRF) for the CPD identifies two Outcomes describing the intended achievements at the end of the programme. Both of these outcomes identify inclusion as a major focus.
**OUTCOME 1: Inclusive and equitable social services for children and adolescents, especially the disadvantaged and vulnerable groups are improved by 2020**

**OUTCOME 2: Evidence generation available for policy advocacy for inclusion of social services by 2020**

Indicative outputs support the achievement of outcomes. For Outcome 1, work is organised around two outputs for each of the three Health, Education and Child Protection work streams:

1. Comprehensive mechanism for child and adolescent nutrition interventions strengthened, especially in the regions with high malnutrition rates.
2. Policies and strategies for implementation and monitoring of inclusive and equitable child health programmes developed and implemented.
3. Enhanced implementation and monitoring of inclusive, child and gender sensitive education, including learning achievements.
4. Alternative education system for the most vulnerable children established and operational.
5. Child protection system effectively prevents, and responds to VAC, CiCWL, and for prevention of drug abuse, by 2020
6. Effective coordination and monitoring mechanism operational for timely response to VAC and CiCWL at national, selected atolls and islands with high prevalence of child abuse.

For Outcome 2, three outputs are articulated:

1. Systems for generating evidence are strengthened at national and sub national levels for inclusive and equitable policies, plans and services, especially for the most disadvantaged.
2. Social protection systems strengthened for improved targeting of the most vulnerable.
3. Child and gender sensitive disaster resilience and climate change adaptation plans and programmes institutionalized and operational at national and sub-national levels.

Outcomes are supported by a further cross-cutting output:

1. Media and partnerships established and effectively promote child rights with a focus on equity

The IRRF includes indicators and targets at Outcome level, but not at Output level: these were added into workstream-specific workplans, and the rolling UNDAF workplan, as these were developed. No theory of change is articulated in the CPD, but a visual representation of a theory of change as implied by the IRRF presented in the CPD is reconstructed in Figure 1.
Key strategies for the CPD are identified as convening and partnerships; capacity development, integration and cross sectoral linkages; south-south cooperation, and innovation for reaching the marginalised.\(^5\) Evidence generation for advocacy and policy is cited as a strategy twice in the document. This reflects well the continuation of a shift from a ‘downstream’ or service-delivery approach to an ‘upstream’ policy and capacity support emphasis.

Some COs, following the adoption of the CPD by the Executive Board, break this down into CPD specific overall programme Annual Work Plans (AWP). In the context of an aligned timescale between the UNDAF and the CPD in Maldives, MCO uses the rolling UNDAF 2-year workplan for this overall perspective, alongside separate work stream-specific CPD related workplans. Activities, defined indicatively in the CPD document, are articulated and designed during the development of these workplans, alongside the development of output level indicators and targets. These are articulated as two-year output results for the CPD, as for the UNDAF workplan.\(^6\)

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\(^4\) For a critique of the causation suggested by this ToC, see Findings 1 and 2.

\(^5\) These differ somewhat from the strategies defined in the (later) global Strategic Plan

3.1 Status of implementation

At the time of EA, the MCO has completed almost 4 years of the 5 year CPD cycle and has begun preparations for the development of the next CPD. Over the four implementing years, adaptations have taken place at output and output indicator level in programme workplans to reflect changing circumstances and opportunities, as well as a changing relationship to the overall UNDAF.

Adaptations at the times of the development of the 2018 workplan and the later change in the government were the particular focus. These adaptations are as follows:

- The addition and subsequent withdrawal of a WASH output and indicator.
- The addition of an output on skills development education for young people (in response to a UNICEF organisational priority given to adolescence and in particular youth employability was emphasised in the 2018-21 SP).
- An added output indicator on life skills education.
- The adaptation of indicators and targets under the Outcome 2 Evidence Generation workstream so that decisions made on the basis of evidence generated are tracked.
- The ‘freezing’ of some areas of work as a result of changing government priorities in the context of instability and the new government established in late 2018.
- Freezing of a health output on developing a Health Information System, following the UNDAF mid-term review which revealed overlap across UNDAF outputs with a WHO-led information system.
- An increasing emphasis on climate change and climate change adaptation.7

The UNDAF has also undergone some evolution over the period. Notably, following the UNDAF mid-term review, it was agreed to retain focus on five-year indicators and targets, rather than those defined in the two-year rolling workplan system; an agreement which was carried forward for 2017-20.8 A critical review of the UNDAF also noted that the management and coordination system has not functioned as stipulated, and the coordination system has been weak and inconsistent across outcome groups. This weakness in coordination was re-iterated in the UNDAF Evaluation.9 It also noted that coordination is limited at policy level, and information sharing across agencies on similar results needed improvement.10 In this context, there is some evidence that the focus within the MCO has, over the last two years, been more closely focused on the programme as structured by the CPD, rather than that structured by the UNDAF – and these are effectively different frameworks since the ‘mapping’ was imperfect (See Annex J).11 (See also section 5.2 below).

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7 Since there is no central established system for collating adaptations to the CPD framework (see Finding 9 below) it has been difficult to systematically trace the pathways or timelines for these adaptations.
9 Ibid
10 ‘Feedback from the critical review of the UNDAF Results and Resources Framework: Outcome G1, Youth and Children’
11 MCO interviews.
4. KEY FINDINGS

Objective 1: Assess the adequacy and validity of the results, activities and indicators in the CPD results framework to measure progress against set targets.

4.1 The results framework

4.1.1 Programme Design, Theory of Change and overall clarity of logic

The programme is founded on a situation analysis which emphasises the significant inequalities which are potentially obscured by Maldives’ middle-income status since 2011. The main dimensions of these inequalities are identified as geographic, income, education and age-related inequalities, in the context of the country’s Small Island Developing States (SIDS) profile, geographic dispersion of islands, and susceptibility to climate change. Within these dimensions, malnutrition; transitions to higher secondary education; and violence against children were clearly articulated as critical issues affecting children.

The programme is in principle fully focused on addressing inequality in order to be able to support the rights for all children, including those marginalised in the identified dimensions. The design of the Outcome 1 is also rationally built on the basis of these identified critical issues. However, the ways in which the identified dimensions of inequality might articulate with these critical issues are not fully explored in the relatively short CPD statement and are also not strongly visible in the results framework (See also Findings 6 and 7 below).

The CPD does not articulate an explicit Theory of Change, which was not a requirement at the time the CPD was developed. Some statements of causality are implicit in the text logic, which moves from situation analysis to programme intervention, but these are not strong. There is no Strategic Note, which might detail implementation plans and logic, as the requirement for these took effect shortly after the finalisation of the CPD. Implicit causality in the CPD includes that in order to achieve the rights of all children, those of vulnerable and disadvantaged children must explicitly be addressed; and that evidence generation contributes causally to improved advocacy and (eventually) policy.

Perhaps as a result of the under-articulated causal logic in the CPD narrative, the two Outcome statements are not equally well connected to the overall goal. This is because Outcome 2 on evidence generation is conceived as a stand-alone result, although it is in fact likely to be a necessary contributor to the achievement of Outcome 1 on achieving inclusive and equitable social services for children.

Within this, the overall output to outcome to objective logic of Outcome 1 is coherent. This encompasses the Health and Nutrition, Education, and Social Protection work themes, as components of the equitable social services to be achieved at outcome level.

However, the coherence of Outcome 2 from output to outcome is challenged by causal reversal (See analysis in Annex G). While in the CPD narrative ‘Evidence generation’ is identified as a strategy (to cause objectives), in the framework it is placed as an Outcome, with the Outputs contributing to achieving (or causing) it being sector-based work to enhance inclusion in DRR and Social Protection, alongside the work of building systems for evidence generation. While this rationale is explained further in a longer narrative on this ‘Social Inclusion’ outcome, this also positions evidence...

12 MCO interviews
generation as the outcome, envisaged as resulting from outputs in the sector-based work. It is more likely that the conception of evidence generation in the narrative CPD text - i.e. evidence generation to support improved (more inclusive) advocacy and policy, (see section 4) - is the causally correct one. In other words, Evidence Generation is an Output that can support causation of better inclusion in DRR and Social Protection systems (rather than the reverse).

In addition, the notion of evidence in the IRRF includes (conflates) different types of or uses of evidence, thus obscuring how each might be differently causally achieved:

- Monitoring systems for established policy and data for assessing and adapting policy
- New research data for issues beyond what is/will be monitored for policy

It also (therefore?) conflates levels of results:

- Monitoring system established (activity/output)
- Research data established (activity/output)
- Monitoring and research data used for enhancing a) child responsive and/or b) inclusive policy (outcome).

In other words, while the role of evidence is clearly conceived as a strategy – and a key one – in the CPD narrative, it is positioned in the results framework as an Outcome – presumably in order to emphasise the importance of this work stream.

However, evidence by itself does not contribute to the overall objective unless it is used for developing policy. Evidence on vulnerability in particular is key to targeting – both for social protection generally, and for UNICEF to fulfil the objective of reaching the most vulnerable. It functions therefore more like an output – or, here, considering the central role it must play in reaching the vulnerable – as a cross-cutting, supportive theme relevant to all intervention areas.

This coherence challenge represents a challenge to evaluability because intended causation is not clear, and therefore cannot be reliably tested through evaluation.

Stronger causal statements / Theories of Change as narrative statements have been developed for under Outcome 1 for the three Output work steams in Health/Nutrition, Education and Child Protection (a partial ToC for VAC, not yet including Juvenile Justice or the work on Drug Prevention). These causal statements/ToC identify the rationale for interventions, target areas of intervention, strategies, and in the case of Education, which includes a visual representation of Critical Strategies, work stream objectives, and relevant activities. Developed on a learning basis, the causal ToC represent good progress in RBM for it has supported the overall coherence in the Outcome; and has been reported by staff as having been helpful in orientating work and reviewing progress. However, the ToCs for Health/Nutrition and Child Protection and the Evidence workstream (Outcome 2) are incomplete, and none were formally used in a process of critique or review as the programme developed. The absence of any programme level ToC together with the absence of any formal / documented team-wide ToC review process means that opportunities for identifying synergies across workstreams or relating targeted activities to other sectors have not been taken.

13 ‘CPD Social Inclusion narrative 11 February 2015’
15 MCO interviews
**FINDING 1**: Programme design is strong and well-founded for addressing critical areas for children (Outcome 1), but weak in articulating how the most marginalised might be reached within these areas (Outcome 2). The logical coherence of the overall IRRF is challenged by causal reversal evident in the structure of Outcome 2, and in its relation to Outcome 1. This conflates different roles of evidence and confuses the strategies (causal pathways) to be put in place to make it effective. This represents a clear challenge to evaluability.

### 4.1.2 Results, activities, and indicators and targets

Outputs and activities are generally well aligned with intended results under Outcome 1 (See Annex G, Column 1) and Outputs are well selected for contributing to the Outcome. Indicators at both levels are well selected in most cases for focusing on critical areas, although some adjustments could be made (see below). Some adjustments have been made in response to challenges resulting from changing government priorities/policy, – for example, education policy no longer has an emphasis on alternative education systems, making the outcome indicator on students accessing alternative education systems no longer – in practice – relevant to the Outcome. Similarly, in the Health work stream, the priority for IMCI services was changed by the Ministry of Health, making the Output indicator as stated no longer fully relevant. Nevertheless, full achievement of the outcome will, at some point, require strengthened services in these areas also.

Under Outcome 2 on evidence generation, there has been slippage between the levels at which outputs and indicators are aligned, related in part to the challenge of coherence identified above. For example, the indicator for work on integrating child and gender sensitive perspectives into Disaster Management plans is in the CPD IRRF expressed in an outcome level indicator; but in subsequent workplans is expressed as an output with the same indicator and targets, as well as with a somewhat more detailed output with two indicators – one similar one but with lower targets; and one additional indicator.

The unclear fundamental causal logic from output to outcome also makes it difficult to assess in what sense outcome indicators are critical to the outcome; or how output statements and their indicators might be critical to the desired outcome.

There is consistent agreement among the programme team that output statements and their indicators are also in some cases not comprehensive – both in the sense of comprehensively measuring the activities undertaken (comprehensive in practice), and in the sense of representing a comprehensive range of results that will lead to the outcome (comprehensive in principle).

For example:

- The health work stream is measured at outcome level using a single composite indicator on nutrition, although there are two output activities, the second relating to policy support with specific intervention on essential new-born care. The indicator thus measures only one of two work areas, and is also not a full indication of what the outcome – inclusive and equitable social services (in the health sector) - would amount to.

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16 Interviews: MCO and MoE
17 MCO interview; triangulated in document review.
18 Document review: CPD; programme workplans 2018; UNDAF workplan.
19 MCO interviews
• Child-centred disaster management is conceived as an output under Outcome 2 (and also presented as an outcome indicator) and is pitched at the level of plans and strategies. This does not measure an important evolving focus in the programme on climate change more broadly, nor the strategies for awareness raising with child advocates on climate change have been undertaken.

• Further areas in which comprehensiveness of the IRRF is not optimal include:
  o Some work under the Child Protection work stream (e.g. analysis of VAC cases; advocacy, convening and coordination work on child rights generally; work with the judiciary e.g. symposium); influencing work that is often the precursor to policy modifications or training initiatives to strengthen implementation).
  o New pilot work on youth employability under UNICEF’s more recent emphasis on Generation Unlimited.
  o The role of Communication 4 Development (C4D), which became a staff position while the CPD implementation was underway in 2017, in cross-cutting support to programmes is not visible. This work may be contributing to achievements under programme outputs but is not measured and therefore cannot be formally tracked.

There is a good level of triangulation across respondents and documentary sources to suggest that this squeeze on formal comprehensiveness is a result of the drive to ‘focus’ the programme in order to better channel efforts as well as manage the transition (actually sometime before the previous CPD) from a much larger office with a substantial post-tsunami recovery programme, to a smaller programme with a focus on equity in a middle income country. In formal terms, the response has been to limit the programme to two – nevertheless very broadly stated – outcomes; but this is not adequately matched by a reduction in focus in terms of types of activities and outputs. Output level ToCs, where they exist, and workplans indicate ambitious levels and breadth of activity. While the logical pathways of these activities to results has clearly been considered in developing these, there still remain some gaps where further activities may well be anticipated in order to achieve the outcomes.

These examples of lack of comprehensiveness constitute a risk to evaluability in two ways:
• Activities not measured by the results framework may be causing or contributing to unexpected outcomes.
• They may represent important causal steps towards outcomes which are never formally identified in the absence of a programme level theory of change.

**FINDING 2:** The results framework is not fully comprehensive because output results are insufficient to achieve outcomes, which are very broadly stated. In addition, (some substantial) activities taking place are not measured and their contribution to outcome achievements cannot be tracked. Both situations represent evaluability challenges.

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20 MCO interviews consistent with commentary on the mid-term review of the previous CPD presented in the current CPD
21 Programme ToCs; UNDAF 2 year CPD workplans.
Several indicators are *in principle measurable*, although adjustments for clearer definition and benchmarking would strengthen others.

**Necessary adjustments** for measurability include at outcome level (See Annex G):

- Standards for ‘functional’ need to be defined and agreed for 2 indicators.

Measurement of – and therefore an agreed definition of - a set of ‘vulnerable children’ independent of those reached by social protection schemes is necessary if achievement in this is to be measured as a % of these children.

In the education work stream, benchmarking of quality standards has been carried as part of activities, so no adjustment is needed.

At output level, measurability would be improved by **clearer and precise specification of target location and group** in all cases where selected areas or selected sectors (or multi-sectors) are cited without identifying which ones or how many (5 indicators). In a number of cases, targeting is evident in subsequent activity design and implementation, but this is not retrospectively reflected in the indicator.

Similarly, quantitative indicators are mainly measured in terms of percentage. A clearer sense of scope and targeting would be achieved if % **targets were accompanied by numerator and denominator figures**, and, where relevant, the **geographical location** of these.

For example: “% of procedures and services for children in conflict with law applied and delivered in line with Juvenile Justice Act and/or international standards B=0 T=75”. More sense of scope and targeted activities could be achieved by identifying how many procedures and services are targeted. Similarly: “Percentage of health facilities implementing standardized essential new-born care and IMCI services B=2% (proxy data from trained staff) T=60% of the hospitals”. Clearer scope would be achieved if the number of hospitals constituting 60% was specified.

This same indicator also **measures input rather than output**, using the number of people trained as a proxy for implementation of training. Measurability of the output is in fact dependent on monitoring for the implementation or use of knowledge gained in training.

Some other indicators are similarly weak in results-orientation, measuring inputs or immediate outputs rather than the change these are expected to achieve. The indicator for cross sectoral work measures simply the number of events carried out, rather than any downstream effects of these events. One ‘evidence generation’ indicator measures the number of analytical reports – rather than any results of these – although in the 2018 workplan an indicator adding the number of policy/decisions based on data from these reports was added.

One indicator at output level needs further definition for *in principle* measurability: the “% of children accessing SEN programs”. Like ‘vulnerability’ this requires a further benchmarking of what

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22 This is likely to be mainly a case of documentation. The Ministry of Gender, Family and Social Services, for example, has a working definition of ‘functioning’ to apply to CSGs (interviews).

23 Document review and MoE interview

24 It is appreciated that numbers, where they refer to population groups, are usually small in Maldives, and specifying these may be strategically undesirable in a context in which there are institutional drivers for scale and high-number results. Technically, however, the point is valid.
an ‘ideal’ percent might be in a population, or – more likely – a clear denominator specifying how many in fact require SEN.  

Interview data suggests that progress has been made in the design of this CPD in terms of working towards fully SMART indicators and orienting the programme to a results focus, and a number of measurable indicators are testament to this. Nevertheless there is still scope for strengthening definition and SMART orientation for the next CPD.

**FINDING 3: Measurability is weak for several outputs because target locations or sectors are not specified. For some indicators, agreed standards defining their achievement are missing, and some others have weak results orientation, measuring work done rather than the results of this work.**

Measurability in practice will, in the case of evaluation, meet a number of challenges related in some cases to data sources, and in some cases to the relevance of measurability given actual implementation status (See Annex G and F). While there is ample evidence across data sources that progress has been made towards programme objectives, a range of challenges mean that the IRRF is ill equipped to measure this progress. An additional challenge is that since annual outcome targets were not included, there has been no direct reporting against these in the programme cycle.

First, data sources which would reflect the CPD period and which would be available in a timely manner were not always strategically identified. Under the health work stream, the baselines for the outcome and two output indicators (all under nutrition) were taken as nutrition levels in the 2009 DHS survey (which was published in 2014). End line data was expected to be taken from the subsequent DHS. While results of this have recently been published in 2019, data collection took place in 2016 to 2017, therefore including only at best the first year of implementation of the CPD, implying that any changes would be only extremely sketchily attributable to a UNICEF contribution, if at all. DHS data covering the major part of the CPD period will not be available for several years. This means that achievements on this workstream cannot currently be effectively measured, at least using the methods identified in the IRRF.

There are other possible approaches to measuring the results of work under this workstream (see Annex F). One of which is the relevant indicative data that could be derived from MoH administrative data, but the investment to achieve this would be relatively high. An envisaged set of activities to establish a health Management Information System which would include these indices was discontinued in order to avoid overlap, as it emerged during the UNDAF mid-term review that WHO was supporting the development of a similar MIS under the UNDAF Outcome 3 (Governance). Therefore, at present the relevant data on nutrition at island and atoll levels is maintained on paper and would need synthesis. A further possibility of deriving proxy data on BMI

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25 Noted that this indicator was adjusted and developed in 2018 workplans.
26 MCO interviews
27 Annual reports 2016, 2017, 2018; MCO interviews; government interviews.
28 MCO communication
29 MCO and NBS interviews
30 That this only came to light during the mid-term review suggests that the UNDAF framework has not altogether served its purpose of coordinating UN agencies’ engagement with government.
31 MCO and WHO interviews.
from the education management information system – MEMIS – which includes a module for recording regular height/weight measurement was discussed and could be further explored. The MoE reports that this module of MEMIS is not yet being regularly used for data input, but may be progressed during 2020.\(^{32}\)

Second, **actual implementation** delays and constraints weakens the relevance of measurability in some cases. This includes two outcome indicators in Outcome 1, and 5 output indicators in the education and social protection work streams.

In Education, the government’s re-focus away from provision of alternative education means the outcome indicator “% of out-of-school adolescents (girls and boys) completing alternative education programme” is in practice not measurable, because no (explicit) system was put in place to do so, as was intended through outputs. It also makes the indicator partially irrelevant – although at output level, a proxy measurement could be derived from MEMIS tracking of school absenteeism\(^{33}\) - because actual implementation was considerably delayed, and in the event took the form of a small pilot in alternative education provision through CSOs.\(^{34}\)

In Child Protection, some indicators have become partially irrelevant because the standards fundamental to their definition have not yet been set and coordination not achieved. It had been assumed at the design stage of the CPD that the Child Rights Protection Act and Juvenile Justice Bills, which specify these standards and conditions, would be passed relatively soon, but political disruption meant that they were in fact passed in November 2019 (during the in-country work for this EA). Therefore, in practice, measuring against these indicators as they are currently formulated would be fruitless.

**FINDING 4:** Measurability of indicators across the IRRF is low or partial due to: some poorly identified data sources which are therefore not aligned with the work established through the CPD; lack of sufficient progress in establishing information systems; and changing government priorities. This presents a clear challenge to evaluability.

These challenges are related to why a number of the targets embedded in indicators are not in practice looking achievable.\(^{35}\) At outcome level, only two of eight targets are perceived as currently achieved or achievable over the course of 2020. At output level, three of 20 targets are perceived by programme specialists as currently achieved or achievable through 2020 (two were not assessed).

It is apparent that some targets were highly ambitious and therefore unrealistic. For example, the programme was set to achieve 94 disaster management plans at island level, whereas only 13 have at present been achieved. In nutrition, a target of 100% coverage of malnourished children ‘in high prevalence communities’ was envisaged for malnutrition intervention, but in the event, 12 islands have at present been reached.\(^{36}\) Output statements are also mostly very broad, encompassing vast and complex areas of work, and requiring a number of significant achievements across sectors,

\(^{32}\) MCO and MoE interviews  
\(^{33}\) MEMIS now alerts school staff when students are absent and sets in motion a follow up and home visit system when absence is longer than 2 weeks.  
\(^{34}\) MCO and MoE interviews  
\(^{35}\) This analysis combines programme lead’s judgements on progress and indicative perspective on target achievability with information on how in practice targets were changed or how implementation has been partial.  
\(^{36}\) MCO interviews
locations and modalities in order to achieve them. These ambitions are unrealistic in part because of the complexity and scope of the work across communities and government; but importantly also because MCO operates with a relatively small country programme budget and concomitantly limited set of human resources.

At the same time, it is clear that critical steps have been taken and achievements made but are not being measured by the IRRF. The effects of a number of activities (e.g. Maldives Child Protection Database; Juvenile Justice; climate change) is also not measured since it was pitched at a high level. Some work streams added a sub-layer of outputs in the course of the CPD so that by work plan development for 2018, a new layer of results was in principle being tracked (Education; Social Protection). Other outputs were adapted, but not synthesized into programme level overview, so the implications of these adaptations are not fully clear (See below Findings 9 and 10 on monitoring systems).

**FINDING 5:** There is indicative – but triangulated – evidence of important progress towards outcomes in key steps across parts of the programme, but these are currently mostly taking place at a ‘sub-output’ level not captured by the IRRF indicators and only specified as sub-outputs for monitoring in some cases.

4.1.3 Cross cutting priorities: gender, disability, DRR, and equity

The whole programme is focused on the objective of reducing inequalities and reaching the most vulnerable, providing a potentially strong framework for integration of cross-cutting issues. Although developed before the current UNICEF Strategic Plan 2018-21, this focus fits well with the latter’s emphasis on ‘every child’ in each goal area. The CPD narrative, however, identifies disparities in outcomes for children as having several dimensions including geographic, income, education and age (but does not include gender or disability in this list). It goes on to identify the main driver of

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37 As one example of several, Child Protection output statements are articulated at a high level: “% of cases of VAC that received response and successfully closed as defined by standardized operational procedures, and by trained professionals B=0 T=75%’/ “% of procedures and services for children in conflict with law applied and delivered in line with Juvenile Justice Act and/or international standards B=0 T=75%”/ “System for provision of life skills and drug education programme to out of school and/or vulnerable children establish B= Not in Place T=in place at island level in selected atolls”. Behind each of these achievements, a myriad of prior achievements are necessary, including, for example (for VAC), raising awareness, establishing community competence in identification and first response to abuse, police training, information management, and cross-sectoral coordination (MPS and MCO interviews).

38 The programme team note that outputs in the IRRF were originally conceived as outcomes. During the development of the CPD, and in response to review of the previous CPD, the drive to focus the programme was managed by reducing the number of Outcomes. This was achieved in effect by raising the breadth of the new Outcome Statements, so that the outputs (originally outcomes) could all still coherently sit beneath them. Thus the IRRF ‘looked’ narrower but still encompassed all work areas (interviews).

39 For example, this database has been established and integrated into MPS, and is also used by the MoGFSS, though it is not yet fully integrated into the practice of all relevant sectors. There is (at present untriangulated) evidence that this has nevertheless significantly improved the ability of the Maldives Police Service to manage cases. At the same time, the Hotline number for reporting child abuse is functioning, and efforts being made to promote its use. These are significant steps in establishing a ‘Child protection system that effectively prevents, and responds to VAC’ but they remain invisible as achievements in the IFFR targets as the work to establish a full cycle of response to VAC – and the monitoring of this – is incomplete. (MPS and MCO interviews).
inequality and vulnerability as the population’s geographical dispersion and emphasises DRR as an important issue in the Maldives context.

Cross-cutting priorities of gender, disability and DRR are dealt with in different ways across the programme, and therefore have varied levels of ‘visibility’ and measurability in the IRRF, as well as pertinence in the programme.

1. **Disability** is present as an issue in a) the output on SEN under Education; and b) in the social protection output – but it is not disaggregated in indicators or targets, thus making it only partially visible, and progress towards reducing this basis of inequality is only indirectly measurable through the SEN indicator/output.

2. **DRR** is treated as a separate output/output and therefore progress is measured in clear indicator and targets at the planning level. However, as a cross-cutting theme integrated into other work streams it is invisible in measurements, although some integrated activities (on climate change) have taken place. Its status as a separate outcome/output also signals a particular approach to the integration of cross-cutting themes, detailed below.

**Gender** is, generally, treated as a cross-cutting issue in principle – in that girls and boys and gender equality are included in some output statements and in activity descriptions. The Child Protection narrative statement ToC also includes an awareness of the different positioning of girls and boys in relation to sexual abuse, and there is evidence of this awareness in partnerships also.

However, an opportunity is lost to track gender-related inequalities, or inequalities of other sorts, in the absence of disaggregation – by gender (which would probably be straightforward) or disability (which may be more challenging to cross-tabulate from data sources) – in indicators and targets (except for out-of-school adolescents, which has a target disaggregated by gender).

Interviews with National Bureau of Statistics and Ministry of Education suggest that there is scope for gender disaggregation which is not exploited by the IRRF targets, and that national level data can in principle be cut by gender at different levels to give insight into intersectional issues (such as location to atoll level, age group). Data on disability is available through the DHS, although the extent to which this can be cut for age group and location was not discussed due to time constraints.

Apart from through the VAC component of Child Protection, it is not really clear how the programme sets out to tackle gender inequality (although gender sensitivity is identified as a contributing factor for quality education standards). This is likely related to the relative absence of evidence from situation analysis of any strong or clear structures of inequality among boys and girls, at least relative to the region.

A more assertive, transformative gender approach (or ‘gender responsive’ approach) could be enhanced in particular through the growing focus on adolescence, and by an acknowledgement that girls and young women (globally) are socially ‘in training’ to become adult women in socialised

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40 MCO interviews
41 Below atoll level, small population numbers mean that statistical significance of the sample is lost for health data collected through the DHS.
42 Discussed but not verified.
gender roles, in which inequality is more apparent (such as in care work responsibilities, gender segregation in the labour market, and gender pay gaps). For example, youth skills activities (Generation Unlimited) could specifically (work towards) offer skilling opportunities to young women and men that counter gender segregation in labour markets. Similarly, the OOSC alternative education programme should have disaggregated results and could have specific objectives to enhance equality in labour markets and livelihoods.

**FINDING 6:** The whole programme focuses on reducing inequalities; some outputs focus specifically on disability, or vulnerability; and care has often been taken to specify the targeting of girls and boys. However, there is little visibility of these themes in indicators and targets and progress is not measured in most cases, as most targets are not disaggregated.

**Social inclusion**

The issue of cross-cutting priorities is particularly pertinent in Outcome 2, which, in sense, set out to ‘house’ these – rather than integrate them into all work streams as actually cross-cutting. Indeed, in the CPD narrative, the whole Outcome comes under the title ‘Social Inclusion’ although it proceeds with a focus on evidence generation. An outcome statement related to social inclusion would lend more coherence across the outputs (Evidence generation + DRR+ Social protection) than is currently the case.

However, **two types of social inclusion are being sought**, requiring different strategies, but grouped here into one idea (and handled under ‘evidence’ with a confused causal logic, see above).

1) Inclusion of all children, or children in general, as a category in policy which otherwise does/would otherwise not explicitly include children, and therefore not recognise or be sensitive to their situation as distinct from adults’. This is, broadly, the meaning of inclusion as it relates to DRR, for example, and might be termed an effort towards ‘mainstreaming children’.

2) (Better targeting for) inclusion of marginalised children in policy which specifically targets the marginalised (such as social protection) and in child-specific policy (such as policy targeted in nutrition/health and education outputs under Outcome 1 for which the CPD’s particular objective is to ensure ‘including / targeting marginalised children’.

The logic of placing the issue of social inclusion as intermingled with evidence generation in the overall IRRF is presumably that specific evidence is often needed in order to successfully advocate for inclusion of marginalised children. In this, the distinct types of inclusion sought are, obscured. A clearer focus for activities would be achieved by recognising this distinction. ‘Mainstreaming children’ requires an awareness of child-specific vulnerabilities and a response to these in policy

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43 E.g. Maldives 2014 census data shows that more women than men are own-account workers in every category, but in the age range 18-24 no (or too small a number to show on the graph) women are employers or ‘owners’, contrasting with a small proportion of young men. Segmentation is quite high, especially in the atolls, with women concentrated in government offices and work at home, and men concentrated in working for companies. Sector wise, women are concentrated in retail, public administration and education; while men are concentrated in accommodation, public administration and fishing and aquaculture. Data for average earnings – and therefore the implication of this segmentation for any gender pay gap – is not given. (Thematic Analysis on Youth in the Maldives, based on 2014 Population and Housing Census data’ UNFPA 2017)

44 Or child-specific opportunities as in advocacy around climate change, for example.
and how it is implemented. Including marginalised children requires a sector-specific identification of who marginalised children are (for targeting) and how they are marginalised, and a response in policy to include them, as well as to respond to the ways in which they are marginalised.

**FINDING 7:** The roles of ‘evidence’ in a) identifying marginalised groups and understanding the marginalisation; b) building policy, and then c) monitoring policy systems in order to continually improve policy planning - are conflated in the programme. This conflation weakens the logic with which social inclusion is addressed in the programme.

### 4.2 Planning, monitoring and evaluation systems

**Objective 2:** Assess the current Country Office planning, monitoring and evaluation systems and tools, particularly data collection and analysis systems, and whether the processes and systems in place are sufficient to enable the CO to adequately monitor and report on attained results.

#### 4.2.1 Monitoring

**4.2.1.1. Partner monitoring and reporting**

Routine monitoring and reporting is taking place with an emphasis on financial accountability and reporting on activities against activity indicators as set out in the workplan. **Partner reporting** uses the Funding authorization and certificate of expenditures (FACE) **system** as specified by the Harmonised Approach to Cash Transfer (HACT)\(^\text{45}\) framework, which is in place. Reporting templates also organise information under Outcome and Output headings corresponding to the Annual Work Plan (UNDAF) and can include information relevant to assessing progress towards output, such as pre and post knowledge surveys for training exercises. It also includes sections for (brief) reporting on challenges and lessons learned, and for recommendation for future work.

Programme specialists/leads are responsible for reviewing reporting quality assuring these reports. According to one informant, use in practice of these templates, demonstrates a missed opportunity in mining partner experience and perspectives on how activities and outputs might be contributing to programme outcome objectives, and what the limitations of these activities and outputs are.\(^\text{46}\) Analysis of sample reporting documents provided to this EA for 2018 and 2019 is consistent with this view: while expenditure information is detailed and activity description is generally adequate or good, commentary on challenges, lessons learned and recommendations is varied, and is minimal or missing in the majority of cases.\(^\text{47}\)

**Monitoring visits** for verification of activity and progress are also undertaken by Programme Specialists alongside government counterparts. The frequency of visits is determined by the HACT system, and this is linked to the scale of funds associated with activities / outputs. Monitoring visits

\(^{45}\) UNDG 2014, Harmonised Approach to Cash Transfers

\(^{46}\) CSO interview, not triangulated.

\(^{47}\) This analysis is weakened because the sample provided – initially requested to cover each work area – was small. Subsequent attempts to access a bigger sample for more systematic analysis – all documents for 2019 – did not succeed.
are reported using HACT monitoring templates under listed workplan activities. The templates include requirements to include analysis of progress towards results, major findings and bottlenecks, required areas for follow up, and recommendations. Analysis of 17 sample documents provided to this EA, show that reporting in these categories is varied, suggesting that an important mechanism for assessing progress against output (or even outcome) objectives is not systematically exploited. Of 17 monitoring visit reports analysed, 8 have good activity reporting, 5 have good reporting of challenges; three have good reporting of lessons; and nine have good and/or detailed consideration of follow up recommendation / actions. Significant gaps include that the reports do not explicitly comment on how (far) the activities have contributed to objectives at the next level up (either output or outcome). More detailed reports do enable some inference of the contribution being made to output or outcome, but nowhere is this explicitly stated as a proportion of contribution being made / what is left to do to achieve the output/outcome (See Annex H).

There is currently no system of synthesising the information available in these reports into a format which could inform continued reviews of the design, technical and management aspects of the programme.

**FINDING 8:** Routine partner activity reporting and monitoring is observed, but the emphasis of partner reporting is weighted towards financial management; opportunities available in the monitoring visit templates for analysis of what activity completion means for degree of progress towards outputs / outcomes are not exploited.

### 4.2.1.2 Institutional reporting

The CO reports on its progress through the global RAM system, which requires six monthly reporting against Outputs, but it is not clear to what extent this system provides an overall picture of progress of the programme (e.g. towards targets). It is also not clear to what extent the programme team use the RAM information as a resource to inform ongoing work. In the RAM system, outcome indicators do not have annual targets. This means that targets are not reported against on any regular basis, making it difficult to routinely measure progress against outcomes.

The RAM system does elicit analytic reporting against outputs and outcomes. However, a review of the samples of RAM reporting included in the 2017 Annual Report lists achievements in the categories of the outputs and observe that strengthening steps have been taken. Analysis of how far these achievements represent achievement of the outcome is missing – i.e. statements related to further progress required or necessary steps still pending for achievement of the output. An additional sample from 2018 provided to the EA shows similar type of analysis and, with reference to progress but not in the context of indicators, targets or the overall programme. There is therefore an absence of insight offered into what these achievements mean for progress against the output as a whole, or the programme as a whole.

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48 This analysis would have been strengthened by provision as requested of further samples of different types and periods of RAM information as requested, or direct access to the system.
RAM data is used as a reference for writing Annual Reports, but Annual reports do not systematically / routinely report against outcomes and outputs and are not intended to provide this detail. Therefore, while Annual Reports provide important information on progress, they cannot easily be used to assess progress nor to relate this to stated goals (as in outputs and outcomes), nor to identify challenges in reaching an outcome. In line with their purpose as presenting a discussion of key achievements, challenges, and potential changes in the implementation context, there is no reference to indicators or targets in Annual Reports.

4.2.1.3 Synthesis of monitoring information

Beyond the RAM system, there is no clear monitoring framework in relation to the programme, that might keep track of – and share – key ongoing information on results, partnerships, risks and challenges. There are poor systems for synthesising monitoring information across the programme as a routine exercise, aside from RAM reporting. This includes the following:

- The office team uses a shared drive to store working material; and programme updates are given orally in monthly team meetings. Although these represent opportunities for review of the programme’s design and technical monitoring dimensions, this EA did not find evidence that they are used by staff with M&E responsibilities to do this in any systematic way, or to synthesise information as a programme.

- Systematised follow up on insights from monitoring visits regarding challenges, action points and recommendations are missing, although this may happen at the discretion of programme managers. At the same time, no routine synthesis of these reports is made, such that potential learning derived from them is not shared, and opportunities for synergising work are not exploited.

FINDING 9: There is ‘missing layer’ of M&E process between routine partner reporting and monitoring visits and annual reporting. Missing elements include synthesis of routine monitoring information; regular synthesis of programme progress aside from in the annual report; regular

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49 Final evaluation report of the UNDAF 2016-2020 for Republic of Maldives.

50 Information is, however, shared in periodic programme and agenda meetings and CMT meetings.
review of progress against indicators and targets; and a process for synthesising CPD workstream workplans.

**FINDING 10:** There is room for more active, routinized ‘critical’ analysis in reporting practices, and for more active efforts to orient reporting towards the results framework so that progress can be understood relative to objectives (including targets and indicators).

### 4.2.1 Evaluation

A culture of evaluation for knowledge generation on the progress of the programme – on how and to what extent elements of the programme have been working - is not strong in the MCO, although there is currently more attention being drawn to how evaluation processes might support programme strengthening.

A mid-term review was not conducted for this CPD. During the period of this CPD, mid-term reviews were made optional in UNICEF. Since the MCO is a small office, limited staff time means that optional processes are often not conducted. The MTR for the previous CPD, on the other hand, was clearly used to support prioritization for the current CPD. However, no new situation analysis was prepared during this process.

A costed evaluation plan (CEP) is included in the CPD, budgeted at 1.6% of the whole programme – slightly more than the 1% suggested in guidance. This CEP specifies four evaluations including the Country Programme Evaluation. The CEP does not provide any narrative as the basis for the selection of evaluations, and there is no clearly defined, integrated monitoring and evaluation plan which might explain linkages to the programme.\(^{51}\)

Broadly, two evaluations were planned under Outcome 1, for part of the education work stream, and for VAC under Child Protection. Under Outcome 2, an evaluation was planned on how far social protection schemes address child vulnerabilities. To date, one evaluation has been carried out (education), while one is in progress (social protection), and another is planned for 2020 (child protection). Adjustments have been made to the focus of the two evaluations conducted or partly conducted, such that they cover smaller proportions of the work stream than initially envisaged. An ambitious plan to assess the impact of the revised national education curriculum on children’s learning achievement was scaled down in scope and focused on the integration of Life Skills into the curriculum; while the social protection evaluation has been focused on the government’s single parent and foster care schemes. Whether the CPD will go ahead or not is currently unclear. Nevertheless, with these caveats, the evaluation plan has progressed and on target to be at least 75% (3 of 4) completed by 2020 representing perhaps 1.3% of overall budget.\(^{52}\)

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\(^{51}\) Regional interview

\(^{52}\) An indicative % based on budget projection for evaluations, not expenditure.
FINDING 11: A strategy for using evaluation to support learning has not been clearly articulated in MCO. This hampers critical reflection on the programme as a whole, and limits opportunities for generating knowledge to support advocacy at national and international levels for investments in children.

Generating evidence to support the development of policy and advocacy (broadly under Outcome 2), on the other hand, had a stronger focus. A list of 20 planned and completed studies bringing together surveys supporting programme design was brought together in October 2019. Of these, 6 have a regional scope with Maldives-specific components; 3 aim at cross-programme support primarily as a basis for the preparation of the next CPD; and 4 are planned for implementation in 2020. In terms of sector focus, 7 support the health and nutrition work stream; 4 support education; 4 child protection; 2 support social protection (including the evaluation) and 3 will provide information relevant across the CPD.53

Studies are designed to fill knowledge gaps and a number will contribute to the evidence basis of future programme design. While it is clear that information is currently being generated and consolidated to inform the future programme, it is less clear that earlier studies have been consistently been used on a working basis to inform the ongoing programme, as no formal knowledge management plan is in process. The relatively new role of C4D – established in 2017 - has initiated strengthened links between research and evidence-based advocacy (for example using results of the study on infant feeding practices to inform the approach and materials for the community engagement campaign54). Issues of linking evidence generated to inform policy, advocacy and targeting are clearly hampered by weakness in the coherence of the causal process in the IRRF as is currently formulated, and the absence of a programme level Theory of Change which might explicitly expresses these links, as discussed under Finding 1.

FINDING 12: While there is a growing emphasis on evaluation and research, and how to use these to inform planning, there is currently no defined knowledge management (KM) plan or system to enhance the links between studies/research and programmes.

A KM plan could help ensure that studies are optimally targeted at knowledge gaps; that information arising from them is routinely shared and available across the team and to partners; and is therefore routinely used to inform ongoing programming and regular decision making. Establishing a stronger culture of evaluation for learning would be one element of this KM system.

53 ‘Research, Studies and evaluations – Maldives CO – 2019’
54 Interviews, Annual Report 2018
4.3 Human and financial resources

4.3.1 Human resources for planning, monitoring and evaluation

Objective 3: Assess the extent to which the staffing structure/profile matches the skills demanded by the programme.

MCO has 15 staff members including support staff. The Planning, Monitoring and Evaluation team consists of an M&E Officer position; a newly created role for a Deputy Representative (now 3 months in position) who covers overall responsibility in planning; and three Programme Specialists (Education, Health, Child Protection) who have key roles in monitoring and planning. An additional Programme Specialist role in Social Protection was discontinued in 2017. The Programme Associate also has responsibilities in M&E. Table 1 sets out specific responsibilities in Planning and M&E according to Job Descriptions, as well as key tasks identified in interviews.

4.3.1.1 Multiple roles and programme activates

As a small office which has limited manpower to cover all aspects of a broad programme, most team members assume multiple roles. There is therefore limited scope for substitution or ‘cover’ across roles in the case of official or other kinds of absence, or in the case of priority activity in competing roles. This means that job descriptions do not consistently describe all the types of responsibilities that staff members assume.\(^{55}\)

As a result, the integration of cross cutting themes are only partially taken in the conception of the CPD, hence DRR and social inclusion are, in effect, treated as discrete work themes, with consequent allocation of responsibilities. Thus, the C4D officer, who has responsibility for the DRR/CC area of work, also has a smaller role in programme-related monitoring for this theme, alongside monitoring of (the effectiveness of) C4D contributions in supporting programmes.

The M&E Officer in practice assumes multiple roles in addition to key M&E responsibilities. Currently these include responsibility for managing programme work around the Evidence Strengthening work under Outcome 2; and (temporarily) for the social protection work theme. At the same time, the role, according to the job description, demands considerable leadership in the M&E function, including for capacity building in M&E in the CO and among partners, and in developing an M&E strategy/plan which will provide the relevant and strategic information to manage the programme, including tracking and assessing UNICEF’s distinct contribution.

Since outcome level objectives are stated very broadly, programmes contributing to them remain broadly conceived. As a result, demands for monitoring across them are complex and stretch human and financial resources. In some areas, there are direct trade-offs between allocating financial (and

\(^{55}\) Based on analysis of 5 job descriptions relevant to M&E processes.)
human) resources to monitoring or supporting other activities, that is, the allocation of financial resources to partner monitoring (monitoring visits) from within programme budgets means that these visits are sometimes experienced as preventing the funding / implementation of other activities.56

Staff responsibilities for multiple roles and objectives have contributed to some gaps in fulfilling an M&E function as outlined in Findings 9 and 10 including, for example, gaps in synthesizing knowledge generated from monitoring visits; regular synthesis of programme progress; regular review of progress against indicators and targets; and gaps in the process of synthesising CPD workstream workplans.

Analysis of key job descriptions which include M&E responsibilities is combined in Table 1 with information in interviews indicating details of these roles and other roles taken on by staff.57

| Table 1: Division of responsibilities for planning, monitoring and evaluation, and other roles assumed by staff. |
|---|---|---|---|
| **P, M&E team member** | **Fund source** | **Responsibilities in Planning, Monitoring & Evaluation** | **Other roles** |
| Deputy Representative | SB | • Programme planning and development (main) | • Support to Representative in CO management |
| | | • Monitoring workplan progress/ evaluate overall programme progress, identify problems | |
| | | • Setting priorities, targets | |
| | | • Establishing performance measurements | |
| **M&E Officer** | RR | Key roles in | |
| | | • Preparing IMEP and technical support to operationalise IMEP in CO and partners | |
| | | • Situation monitoring and analysis | |
| | | • Programme performance monitoring and data for key indicators analysed and available to CO | |
| | | • Technical support for management of evaluation | |
| | | • Capacity building for M&E in CO and national partners | |
| | | Role also involves e.g. | |
| | | • Supplying data into RAM and other databases | |
| | | • Overseeing budget reallocations | |
| | | • Collation of annual report information | |
| | | • As below, programme specialist duties in Outcome 2 (Evidence generation) including Social Protection | |
| **Evaluation Manager (temporary position)** | Consultant 60 days | • Overseeing evaluation and research processes planned for 2020. | |
| | | • Supporting next costed evaluation plan | |
| | | • Strengthening the evaluation function in UNICEF and government. 58 | |
| **Programme Specialist – Education** | OR | • Leading process of planning and monitoring programme components | Programme management |
| | | • Monitoring progress against established baselines | |

56 Interviews
57 5 relevant job descriptions were analysed. The information on ‘other roles’ is likely to be incomplete. The temporary Evaluation Manager was not interviewed.
58 Information from interviews
FINDING 13: Due to multiple roles played by most staff, particularly the M&E officer, combined with a programme of work that remains broad-based, the ‘middle level’ M&E function – including routine synthesis of programme monitoring information and routine tracking of progress towards targets – is currently not addressed.

As noted above, the Costed Evaluation Plan is budgeted at 1.6% of the total budget, somewhat more than the recommended minimum of 1%. Budget for M&E more widely, however, is included in programme budgets, in budget lines for monitoring visits etc. It has not been possible for the MCO to collate this data. Guidance for budget allocation to partner monitoring visits and spot check exercises is understood to be 2% of the programme, but this has not been verified with budget information.\(^{59}\) There is no systematic collation of resources allocated to M&E, making it difficult to assess the adequacy of resources to carry out the necessary M&E activities.

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\(^{59}\) MCO interviews, not triangulated
5. CONCLUSIONS

5.1 Conclusions for evaluability

The CPD results framework represents good progress in results-based programming but embodies some serious challenges for evaluability. These include fairly substantial lack of coherence in Outcome 2, meaning that, as the framework stands, the causal process from output to outcome cannot sensibly be tracked [Finding 1, Finding 7]. Although Theories of Change have been developed at programme level for some programme areas, there has been no overall theory of change or statement of expected causal process which might clarify this lack of coherence – thus presenting a challenge for a theory-based evaluation which could otherwise pre-empt the challenges of the IRRF [Finding 1].

Additional challenges include that the IRRF is not fully comprehensive; thus, documented monitoring information available would not be easily available for some activities and understanding how all activities were intended to relate to outputs would need clarifying [Finding 2]. Outcome ambitions are also very broadly stated, such that outputs contributing to them are also varied and broad, but nevertheless unlikely to fully achieve the outcome. Although progress has been made towards establishing SMART indicators, there are a number of ‘in principle’ and ‘in practice’ challenges presented for their measurement. These include that standards would – for the purposes of evaluation at least – need setting for some imprecise terms such as ‘functional’ (systems).

Measurability is also challenged by lack of data for some indicators, although the main indicative or partial data is either available, or could be collected as part of the evaluation process through other methods [Findings 3 and 4] (for an example of a possible approach to one indicator, see Annex F). While it seems likely that most targets will not have been fully achieved by the end of the CPD, there is some evidence (not strongly verified by this EA process) that key steps of progress have been taken: some of these remain at sub-output level, offering learning for the causal process and for reconstructing a Theory of Change, but only assessable against targets where sub-output targets were specified [Finding 5]. Together these challenges mean that the IRRF is neither fully adequate nor fully valid as a framework for measuring progress made by the programme.

The monitoring system is not optimised for evaluation, in that the main/only formal system in use for synthesising progress information is the annual reporting process, in which little emphasis is currently given to overall progress against indicators and targets. While a number of adjustments have been made to these, changes are difficult to map because synthesis related to the IRRF is missing. An overall CPD workplan is also not collated in a central system, so work streams against the CPD would need to be derived from UNDAF workplans, which do not map easily onto the CPD framework.

These challenges mean that the tools and data are not in place to support a summative evaluation approach. However, UNICEF’s evaluation policy (revised 2018) aims to position evaluation to support better performance, continuous improvement and strengthened accountability ⁶⁰ - in other words,

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the purpose of evaluation is also formative as well as for accountability purposes. If an evaluation were to take place with a strong emphasis on a formative purpose, learning could in principle be made available in the form of evidence-based insights into the causal process put in motion; the factors which have supported effectiveness; and thus, on UNICEF’s comparative advantage to support strategic positioning. The opportunity to extract learning from the experience of this CPD is perhaps all the greater because no MTR took place.

5.1.1 CPE evaluation timeliness

However, a formative evaluation approach would meet a serious challenge in successfully producing findings which could be used in the formulation of the new CPD – in other words, it will be difficult to make this learning available in time so that in practice it can be used. This CP is due to end in December 2020. Planning for the new CPD has begun. Procedures for approval by the Executive Board require that a draft document be put before the board for review 4 months before the Board’s session. The CO aims to seek a 6-month extension for the CPD (and the UNDAF through the RCO), and therefore plans to submit the new CPD in October 2020 for approval by February 2021.61

The ROSA South Asia Evaluation Strategy (draft) 62 posits timeliness as a priority criterion for going ahead with evaluation. In this case, to seriously influence the strategic thinking underpinning the design of the next CPD, the timeline is very tight: it will be necessary to consolidate findings and recommendations from an evaluation by May/June 2020 to have a realistic objective of guiding the CPD development. A minimum six month time frame is recommended for the conduct of a CP evaluation.63

In summary, this EA does not recommend a summative evaluation, for which tools and data are not in place. A formative evaluation is recommended only in the case that it can be completed, using a collaborative, learning process, by May 2020.

5.2 Areas for strengthening

5.2.1 For the development of the next Results Framework

5.2.1.1 The role of evidence

Different roles of and positioning of evidence are currently conflated in the programme [Finding 7]. Rethinking and unpacking these roles and specifying the (different) causal processes through which evidence is expected to support or contribute to achieving results for children would strengthen the conceptual foundations of the new programme, as well as activate linkages between new evidence and programming for enhancing results. This might include considering the different processes for generating evidence and the roles of a) new evidence on the situation and interests of children marginalised in multiple ways and how this can be used to influence policy, b) building systems for the continuous generation of evidence through strengthening partner monitoring and data synthesis

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61 MCO interviews and communication, not triangulated
62 ROSA 2019 (draft), UNICEF SOUTH ASIA REGIONAL EVALUATION STRATEGY 2019-2021
63 Ibid
systems and c) advocating for systematic evidence to be habitually used in the review of policy and generating new planning. Treating these roles separately would support better integration of evidence generation as a strategy for supporting targeting of marginalised children in other work areas, as well as targeting new evidence generation to provide enhanced support to, and be used by, programmes. In other words, Social inclusion would be better supported by treating these roles as distinct; requiring separate causal strategies; with different types of institutional engagement.

5.2.1.2 Cross cutting priorities

Cross cutting priorities are both insufficiently integrated into the current programme, and also insufficiently visible in the framework for measuring results – thus any changes the programme is contributing to gender equality, disability, and equity in general are very difficult to track [Finding 6]. Insufficient integration as a cross-cutting concern has also contributed to treating some (DRR and Social Protection) as separate work streams, rather than thinking through the linkages between these and other work streams, and locating interventions there. Treating these as work streams has also contributed to over-stretching (human) resource in some respects [Finding 13].

Aiming to systematically disaggregate all person-related targets by gender, and where feasible by disability, is a key tool for at least making visible any differentiation in results across these groups. Beyond this, a more assertive approach to gender would aim to be gender transformative rather than simply gender aware, hence designing interventions which contribute to precluding the disadvantages women face as adults, by addressing how girls and boys are differently socialised as children.

5.2.1.3 Measurability in general

Although key steps were taken to articulate SMART indicators for the current IRRF, there are still areas where strengthening is possible for the next process. In particular, specifying geographical target locations, and specifying numbers as well as percentage of children / islands / atolls targeted would enhance subsequent measurability [Finding 3]. This would also help to focus on where and how far children with multiple layers of marginalisation are being addressed.

5.2.2 For the monitoring and evaluation system

Findings indicate a number of key processes which could strengthen the M&E function:

- Enhancing the consistency of analytic content of partner reporting and ensuring these contribute directly to commenting on / assessing how progress is being made towards outputs / outcomes, and to what extent. [Finding 8]
- Ensure that monitoring visit reporting includes explicit commentary on how far the activities observed contribute towards output/outcomes; what steps remain to achieve the output; and what other organisations have contributed to the activity.
- Ensuring that information offered in reporting is systematically synthesised and made available across the team to support programming decision making as well as high level priority setting. [Finding 9]
- Strengthening the evaluation function, for both accountability and learning purposes, and calibrating this with a knowledge management plan [findings 10 and 11]. A KM plan
could help ensure that studies are optimally targeted at knowledge gaps; that information arising from them is routinely shared and available across the team and to partners; and is therefore routinely used to inform ongoing programming and regular decision making. Establishing a stronger culture of evaluation for learning would be one element of this KM system.

5.2.3 Human resources for monitoring and evaluation

Human resources for M&E have been constrained by competing priorities and multiple roles [Finding 13]. This has been exacerbated by what remains in effect a broad-based programme and a sector-based conception of the roles required to be filled [Finding 2]. An increasing emphasis on the evaluation function as a system for generating programming learning, alongside the continued demand for strengthened RBM and knowledge management [Findings 11 and 12] means that M&E is increasingly understood as core to effective programme delivery, requiring leadership and focus.

6. RECOMMENDATIONS

Objective 4: Provide key recommendations on changes and amendments to the Country Office systems to the monitoring and reporting of the country programme progress with a view to measure results for children.

6.1 Recommendations for evaluation

Recommendation 1: A summative CP evaluation, for which tools and data are not in place, is not recommended. A formative evaluation is recommended only in the case that it can be completed, using a collaborative, learning process, by May 2020.

If an evaluation is to push through within this timeline to support learning for the next CPD, there is a need to factor in the development of a programme-level Theory of Change through a process that centrally engages the programme team and draws on their understanding of the causal processes that have been working, and on the key strategies and interventions they have used. This would be a key analytic tool in an assessment of effectiveness which can generate learning, and is not fully dependent on the IRRF. Also factor in resources for ‘extra’ administrative data collection to substitute absence of data for some indicators (see Annex F).

6.2. Recommendations for strengthening the next results framework

Recommendation 2: Ensure that the next CPD takes a very focused approach, and use the forthcoming situation analysis to identify priority target areas, target populations, and very specific objectives for change (desired outcomes). Focus the selection and design of activities clearly on this specific desired change. Use any forthcoming evaluation findings to design a strategy that works. Develop a theory of change articulating all the causal steps expected to achieve this change, and the strategies anticipated to be effective in taking these, and sense-check whether all these causal steps can realistically be activated within the framework of the next CPD.
**Recommendation 3:** Unpack the intended roles of evidence generation to support results for children. Position evidence generation as a *strategy,* deployed through different ways and processes to strengthen the a) the identification of and understanding of priority target groups (e.g. those marginalised by multiple processes) and b) the processes for the monitoring policy and c) the use of monitoring and research evidence as the basis for policy and planning.

**Recommendation 4:** Take a more assertive approach to the integration of cross-cutting issues including gender inequality (a gender transformative approach), inequality based on disability and DRR by specifying the approach taken to tackle them in each intervention/programme. For gender, this means tackling the socialisation of girls and boys which will result in placing them in structurally unequal positions as adults, with material consequences. Ensure that these cross-cutting priorities are made systematically visible and measurable in the next results framework by consistently disaggregating targets by gender and disability. Consider operationalising a commitment to use the Gender Toolkit to develop a response to this issue.

**Recommendation 5:** Improve measurability in general by consistently identifying intervention targets by number (of people, islands, policies, departments) and location (which people, which islands, which policies etc.). Provide clear benchmark on any indicator which require agreed standards to assess achievement or where the target group might be ambiguous. Orient all indicators towards the *results* of work done, rather than the work done itself.

**6.3 Recommendations for strengthening the monitoring and evaluation system**

**Recommendation 6:** To strengthen the analytic content of partner reporting, consider including information categorising reported activities according to the strategy used, the method to deploy the strategy, and the step in the ToC targeted. Also consider including for each activity: statement of UNICEF contribution to the activity (e.g. funds, technical support in design, technical support in implementation etc.) and others contributing to the activity. Consider also including information such as percentage of output budget delivered for the activity; and percentage of target the activity is designed to reach.

**Recommendation 7:** Institute a quarterly synthesis of partner and monitoring visit reporting which briefly specifies a) how many reports have been received and are synthesised, b) which outputs they are relevant, c) key achievements made by output and outcome, d) key learnings and challenges e) emerging risks to further progress against the output/outcome, and f) summary of action required. This should be made quickly available in Briefing format across the programme team. Consider also making this available to partners. (See Annex I for suggested format).

**Recommendation 8:** Take steps to develop and establish a knowledge management system/plan which links research, evaluation and monitoring information to programmes. This includes a) defining the role and purpose of an evaluation function, b) identifying knowledge gaps for targeted research and developing an evidence generation plan, c) optimizing data and information sharing across the team to support ongoing decision making, and d) collating workplans into a shared

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64 Or humanitarian action, as expressed in the 2018-21 global Strategic Plan.
country programme workplan. The new CPD preparation process should include a narrative explaining the evaluation strategy as per CEP guidance.

6.4 Recommendations for strengthening human resources for M&E

**Recommendation 9:** Take steps to ensure that M&E human resources are supported in gaining focus to strengthen the monitoring and evaluation function. This means supporting the M&E officer to take leadership in and focus on establishing new systems for analysing and synthesising data, and on extending consistent support across the team to strengthen ToC articulation and RBM.

**Recommendation 10:** Reduce the incidence of conflicting staff roles and consequent time pressure by a) fully integrating cross cutting priorities so these are fully addressed through all programmes and no longer treated as separate work streams, and b) strategically narrowing the overall objectives and focus of the next CPD.
Annex A: Documents Consulted


Government of Maldives, Strategic Action Plan 2019-2023

Maldives Country Office Organogram 2019-20

Ministry of Education and UNICEF Maldives 2015, Assessment of the Situation of Students who Migrate to Male for Education and Strategies to Address Vulnerabilities

Ministry of Education and UNICEF Maldives Assessment of the Situation of Students who Migrate to Malé for Education and Strategies to Address Vulnerabilities, August 2015,

ROSA 2019 (draft), UNICEF SOUTH ASIA REGIONAL EVALUATION STRATEGY 2019-2021


UN in Maldives, 2018, ‘Annual UN Country Results Report 2017’, May 2018


UNDP 2014, Harmonised Approach to Cash Transfers

UNFPA 2017 Thematic Analysis on Youth in the Maldives based on 2014 Population and Housing Census data


UNICEF Maldives Country Office Annual Report 2017

UNICEF Maldives Country Office Annual Report 2018


UNICEF 2014-17 Strategic Plan


UNICEF 2015, Review of the life skills education programme: Maldives

UNICEF 2017 Theory of Change Paper, UNICEF Strategic Plan 2018-2021, Realizing the rights of every child, especially the most disadvantaged.


UNICEF Maldives 2013 ‘Social Protection in Maldives – A Mapping Assessment

UNICEF Maldives Costed Evaluation Plan – Country programme of cooperation 2016-20

UNICEF Maldives Country Programme 2016-20: Gender Programmatic Review, UNICEF ROSA

UNICEF Maldives, Situation of Children in the Republic of Maldives: Secondary analysis of existing information from an equity perspective, July 2013

UNICEF Procedure for Country and Regional Office CSO Implementing Partnerships


UNICEF Strategic Plan 2018-2021, Executive Summary

Workplasns and office documents

- Rolling Joint Workplan, UNDAF Outcome 1 – Youth and Children (Jan 17-Dec 18)
- Rolling Joint Workplan, UNDAF Outcome 1- Youth and Children (Jan 19-Dec 20)
- Rolling Joint Workplan, UNDAF Outcome 3 – Governance (Jan 19-Dec20)
• Work plan 2019 Education
• Mapping of Indicators for selection of RAM indicators
• Outcome 1 Planning Logic for UNDAF JWP 2016-2017 consolidated 2016
• UNDAF JWP and UNICEF CPD AWP2016 consolidated – Health and Nutrition
• ‘CPD Social Inclusion narrative 11 February 2015’
• ‘Critical pathway and ToC for Education CPD 2016’;
• ‘Narrative for CPD Health Nutrition HIV AIDS MCO CPD 2016’;
• ‘Prevention and Responding to Child Sexual Abuse in the Maldives – A Theory of Change’
• Research, Studies and evaluations – Maldives CO – 2019’
• UNDAF 2016-20; Outcome G1 Feedback from the critical review of the UNDAF Results and Resources Framework; Strategic Priority Area 1: Youth and Children (PPT)
• ‘Results for 2016 and 2017: Youth and Children (PPT)
• ‘Investment Case for Children in the Maldives’ Consultancy to conduct an Investment case for children in Maldives, April 2017

**Job Descriptions:**
- Deputy Representative Level 4
- M&E Officer NOB
- Communication for Development Officer
- Programme Assistant
- Programme Specialist – Child Protection
## Annex B: List of stakeholders consulted

<table>
<thead>
<tr>
<th>Organisation</th>
<th>Participants</th>
<th>Mode</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. UNICEF Maldives</td>
<td>Country Representative</td>
<td>Skype</td>
</tr>
<tr>
<td></td>
<td>Deputy Representative</td>
<td></td>
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<tr>
<td></td>
<td>M&amp;E Officer</td>
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</tr>
<tr>
<td>2. UNICEF ROSA</td>
<td>Regional Evaluation Advisor</td>
<td>Skype</td>
</tr>
<tr>
<td>3. UNICEF Maldives</td>
<td>Country Representative</td>
<td>In person</td>
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<tr>
<td></td>
<td>Deputy Representative</td>
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<tr>
<td>4. UNICEF Maldives</td>
<td>Operations Officer</td>
<td>In person</td>
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<tr>
<td></td>
<td>Programme Associate</td>
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<tr>
<td>5. UNICEF Maldives</td>
<td>Education Programme Specialist</td>
<td>In person</td>
</tr>
<tr>
<td>6. UNICEF Maldives</td>
<td>Monitoring and Evaluation Officer</td>
<td>In person</td>
</tr>
<tr>
<td>7. UNICEF ROSA</td>
<td>Regional Chief of Programme and Planning</td>
<td>In person</td>
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<tr>
<td>UNICEF Maldives</td>
<td>Country Representative</td>
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<td></td>
<td>Deputy Representative</td>
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<tr>
<td>8. UNICEF Maldives</td>
<td>Health Programme Specialist</td>
<td>In person</td>
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<tr>
<td>9. UNICEF Maldives</td>
<td>C4D Officer (DRR Programme Specialist)</td>
<td>In person</td>
</tr>
<tr>
<td>10. Ministry of Gender, Family and Social Services</td>
<td>Director</td>
<td>In person</td>
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<tr>
<td></td>
<td>Director, Policy and Planning Department</td>
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<tr>
<td>11. UNICEF Maldives</td>
<td>Monitoring and Evaluation Officer</td>
<td>In person</td>
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<tr>
<td>12. National Bureau of Statistics</td>
<td>Deputy Statistician</td>
<td>In person</td>
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<tr>
<td></td>
<td>Senior Statistician</td>
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<tr>
<td>13. Advocating the Rights of Children (ARC)</td>
<td>Managing Director</td>
<td>In person</td>
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<tr>
<td></td>
<td>Programme Officer</td>
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<tr>
<td>14. Society for Health Education (SHE)</td>
<td>Chief Executive Officer</td>
<td>In person</td>
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<tr>
<td>15.</td>
<td>Programme Officer</td>
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<tr>
<td>16. UNICEF Maldives</td>
<td>Child Protection Programme Specialist</td>
<td>In person</td>
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<tr>
<td>17. WHO</td>
<td>Medical Officer – Public Health</td>
<td>In person</td>
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<td></td>
<td>Medical Programme Officer – Health systems</td>
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<tr>
<td>18. Ministry of Education</td>
<td>Minister of State for Education</td>
<td>In person</td>
</tr>
<tr>
<td></td>
<td>Education Officer, Policy, Planning and Research Division</td>
<td></td>
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<tr>
<td></td>
<td>Statistical Officer</td>
<td></td>
</tr>
<tr>
<td>19. Maldives Police Service</td>
<td>Superintendent of Police, Family and Child Protection Department</td>
<td>In person</td>
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<td></td>
<td>Head of Information Systems Development Unit</td>
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<td></td>
<td>Head of Child Abuse Investigation Unit</td>
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<tr>
<td>20.</td>
<td>UNICEF Maldives Health Programme Specialist In person</td>
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<tr>
<td>21.</td>
<td>UNICEF Maldives Education Programme Specialist In person</td>
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<tr>
<td>22.</td>
<td>UNICEF Maldives Deputy Representative In person</td>
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<tr>
<td>23.</td>
<td>UNICEF Maldives C4D Officer In person</td>
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</tr>
</tbody>
</table>
### Annex C: Research and studies 2019 - Analysis

#### Pink = ongoing

#### Orange = moved to 2020

<table>
<thead>
<tr>
<th>No.</th>
<th>Title</th>
<th>Category</th>
<th>Rationale</th>
<th>Primary Sector</th>
<th>Regional</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Multidimensional Poverty Estimate for Maldives</td>
<td>Study</td>
<td>To help estimate child poverty and multidimensional poverty</td>
<td>SP</td>
<td>✓</td>
</tr>
<tr>
<td>2.</td>
<td>Evaluation of Single parent and foster care schemes of the Social Protection Programme of Maldives</td>
<td>Evaluation</td>
<td>To identify future scope of areas for technical support for SP</td>
<td>SP</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>Study on Child Marriage in the Maldives</td>
<td>Study</td>
<td>To assess the prevalence of and factors associated to child marriages in the Maldives</td>
<td>CP</td>
<td>✓</td>
</tr>
<tr>
<td>4.</td>
<td>Review of vaccine management system and cold chain in the Maldives</td>
<td>Assessment</td>
<td>To review the vaccine management system including cold chain, and understand the changing vaccine coverage rate</td>
<td>HN</td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>Rapid assessment of Infant feeding practices</td>
<td>Assessment</td>
<td>To inform programming</td>
<td>HN</td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>Youth and skills Regional study</td>
<td>Study</td>
<td>To understand the trends in youth, skills development and employment identify sustainable and scalable skills development models in the country.</td>
<td>E</td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>Survey on internet usage patterns of children and adolescents</td>
<td>Survey</td>
<td>To understand internet usage and patterns of children and adolescents</td>
<td>CP</td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td>Gender Programmatic Review</td>
<td>Review</td>
<td>UNICEF MCO will be undertaking a situation analysis in 2019 as part of initiating its work on the Country Programme. The proposed GPR will assist in identifying the gaps in the current country programme interventions, to further strengthen the gender equality focus in the new CPD</td>
<td>CPD</td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td>Assessment of national juvenile justice system</td>
<td>Review</td>
<td>To understand the causes leading children to commit crimes, profiles of offenders, responses and the effectiveness of the responses. It will also inform the proposed situation analysis</td>
<td>CP</td>
<td></td>
</tr>
<tr>
<td>10.</td>
<td>Evaluability Assessment of the CPD 2016 - 2020</td>
<td>Evaluation</td>
<td>To understand if current CPD is evaluable</td>
<td>CPD</td>
<td></td>
</tr>
<tr>
<td>11.</td>
<td>Situation Analysis of children and women (SitAN)</td>
<td>Study</td>
<td>To update the situation of children and women in the Maldives</td>
<td>CPD</td>
<td></td>
</tr>
<tr>
<td>12.</td>
<td>DHS 2016/17</td>
<td>Study</td>
<td></td>
<td>GOV</td>
<td></td>
</tr>
<tr>
<td>13.</td>
<td>Study on Non-academic factors affecting Education outcomes</td>
<td>Study</td>
<td>To understand non-academic factors affecting education outcomes</td>
<td>E</td>
<td></td>
</tr>
<tr>
<td>14.</td>
<td>Study on Anaemia</td>
<td>Study</td>
<td>To understand the situation of Anaemia among children and women</td>
<td>HN</td>
<td></td>
</tr>
<tr>
<td>15.</td>
<td>Study on family functioning, divorce and negative impact on children</td>
<td>Study</td>
<td></td>
<td>CP</td>
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<tr>
<td>No.</td>
<td>Title</td>
<td>Category</td>
<td>Rationale</td>
<td>Primary Sector</td>
<td>Regional</td>
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<tr>
<td>16.</td>
<td>Regional study on Community Health Workers (CHWs)</td>
<td>Study</td>
<td>An analysis of current CHW policies and systems supports and of the readiness of national CHW related policies and systems to support the development of country-specific evidence-informed transition management plans in support of potentially expanding roles and responsibilities of current CHW cadres. 1. What are the current profiles, roles and responsibilities, policies and system support in relation to each CHW cadre? 2. How could the profiles and roles and responsibilities potentially be adapted to best meet countries’ Post-Astana aspirations for delivery of RMNCAH services 3. What prioritized measures can be taken by government and partners to strengthen health policy and system supports to optimize the contribution that each CHW cadre is able to make to PHC?</td>
<td>HN</td>
<td></td>
</tr>
<tr>
<td>17.</td>
<td>Regional study on role of private sector in education</td>
<td>Study</td>
<td>To support cross-national learning on non-state actor engagement in education service delivery at the pre-primary, primary and secondary levels</td>
<td>E</td>
<td>✓</td>
</tr>
<tr>
<td>18.</td>
<td>Evaluation of education Management and Monitoring systems at School and subnational levels</td>
<td>study</td>
<td>To determine the key strengths and limitations of two such systems in the region, including its impact on school efficiency</td>
<td>E</td>
<td></td>
</tr>
<tr>
<td>20.</td>
<td>Iodine nutrition and USI status in Maldives</td>
<td>Study</td>
<td>This effort is part of the broader Regional Initiatives for Sustained Improvements in Nutrition and Growth (RISING) partnership with BMGF. The collaborative effort with IGN has three main programme areas of work; 1. A landscape review of the status of policy and programme action on USI in the region. 2. Technical review of regional trade standards pertaining to processed foods (in which iodized salt is used) and iodized salt. 3. Sharing of knowledge and programme experiences on iodine nutrition and salt iodization in South Asia (regional meeting on iodine nutrition and salt iodization in 2020).</td>
<td>HN</td>
<td>✓</td>
</tr>
</tbody>
</table>
Annex D: Evaluability Assessment Questions

Objective 1: Assess the adequacy and validity of the results, activities and indicators in the CPD results framework to measure progress against set targets.

1.1 Is the Theory of Change (ToC) for programme components adequately described and is there clarity of logic across the results levels?

1.2 To what extent are results, indicators and activities measurable and are they leading to the desired changes?

1.3 Are the results, activities, and indicators the critical ones that need to be acted on/evidenced according to the TOC and in line with the management needs?

1.4 To what extent are cross-cutting priorities (namely: Gender, Disability and DRR and equity) measurable against clear targets?

1.5 Are SMART indicators in place that enable adequate monitoring and reporting? Have the indicators been defined (e.g. numerators and denominators) with clearly understood standards? Has a target value for the indicator been provided at Outcome and Output levels, including for any necessary stratification?

Objective 2: Assess the current Country Office planning, monitoring and evaluation systems and tools, particularly data collection and analysis systems, and whether the processes and systems in place are sufficient to enable the CO to adequately monitor and report on attained results.

2.1 Are the current Country Office planning, monitoring and evaluation systems and tools, particularly data collection and analysis systems, adequately structured to enable the CO and stakeholders to monitor and report against planned results?

2.2 Are the processes and systems in place sufficient and reliable for decision making and for programme improvements?

2.3 Is there a database in place to collate all available programme and evaluation data and information?

2.4 Are there adequate work flows in place to ensure information and monitoring data from programme teams is shared with the M&E team in order to inform continued reviews of the design, technical and management aspects of the programme?

2.5 Are there adequate means of verification systems in place to generate information at reasonable intervals to help monitor change and progress over time?

Objective 3: Assess the extent to which the staffing structure/profile matches the skills demanded by the programme and the adequacy of financial resources aligned to meet the expected results.

3.1 Is the P, M&E team adequately staffed to enable effective monitoring and reporting systems across the various programme areas within the Country Office?

3.2 Does the current Job Description of the P, M&E team fit the purpose and expected outcomes to support the CO in monitoring and reporting on results attained?

3.3 Are the data and systems in place to allow UNICEF to assess the adequacy of resources to achieve intended results?

3.4 Are there adequate human and technical resources to carry out monitoring and evaluation activities?
Objective 4: Provide key recommendations on changes and amendments to the Country Office systems to the monitoring and reporting of the country programme progress with a view to measure results for children.

4.1 What changes to the current planning, monitoring, evaluation and reporting systems are required to enable the Country Office to adequately monitor and report on progress against the country programme targets?

4.2 What possible changes in the Theory of Changes (TOCs), and in the alignment of the programme activities and objectives and indicators would be required to enhance the evaluability of the Country Programme?

4.3 What human and technical resources are required to enable the recommended changes and enhancements?
Annex E: Possible approach to data collection for Outcome indicator 1:

There are a number of difficulties with obtaining robust and directly comparable outcome level data on some indicators, including the indicator on nutrition. This is due essentially to the lack of calibration of the programme with the cycle for producing nationally representative data through e.g. DHS and census.

Other approaches to arriving at indicative data consistent with the kind of change aimed at by parts of the programme are possible, and through these it may be possible to arrive at a position where an assessment of UNICEF’s contribution of these (or at least that there was or was not a contribution, made through output modalities) can be made (if not the scale of contribution).

For example:

**For outcome indicators on nutrition:**

Baseline data is taken from the 2009 DHS survey; which is six years earlier than the start of the CPD. It was planned that endline data would be taken from the 2016/7 DHS, whose results are now becoming available in 2019, but this brings together data collected during the first and early 2nd year of the current 4 year CPD, and will thus give only weak evidence for UNICEF contribution to any positive change detected.

Less clear-cut indications of change may be derived through other sources. Either, or a combination of:

1. A random sample, not attempting to achieve formal representativeness, of administrative data on growth (height, weight, arm circumference) from atolls where there has been tangible UNICEF supported intervention.
2. A random sample of height/weight (BMI) information derived from the MEMIS database on school going children who were 3, 4 and 5 at the time of the DHS; and who would therefore be 6, 7 and 8 now, in selected atolls where there has been tangible UNICEF supported intervention (as a longitudinal cross reference)

Suggestions derived from this data of positive or negative change could then be used in a contribution analysis, based in the strong tracking of UNICEF activity in outcome areas as evidenced through the RAM database, and some evidencing through primary data collection of the ‘secondary’ output of these activities.

**e.g.**

| Combination of activities towards output as evidence in RAM e.g. nutrition BCC | Primary data on output level results e.g. survey / FGDs on nutrition knowledge | To assess whether it is reasonable to conclude UNICEF’s work contributed to change | Change suggested by sample admin data on stunting / wasting in relevant atolls | Changes suggested by sample BMI data of 6-8 year olds from MEMIS |
# Annex F: Results Framework as stated in 2016-20 CPD

## Results and resources framework

### Maldives – UNICEF country programme of cooperation, 2016–2020 Convention on the Rights of the Child:

- Millennium Development Goals: 1, 2, 3, 4, 5 and 7
- Global/Regional Partnerships: A Promise Renewed (child survival); Every Newborn action plan; Rome Declaration on Nutrition;
- South Asian Association for Regional Cooperation (SAARC): South Asia Call for Action on Ending Violence against Children; SAARC Social Charter
- National priorities: Government of Maldives Manifesto 2013

### Related UNICEF Strategic Plan outcome(s):

- Strategic Plan 2014–2017

## OUTCOME 1:

**Inclusive equitable and quality social services for children (and adolescents), especially the disadvantaged and vulnerable are improved by 2020**

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Means of verification</th>
<th>Indicative country programme outputs</th>
<th>Major partners, partnership frameworks</th>
<th>Indicative resources by CP outcome (in thousands of US dollars)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. % of children under five who are malnourished in selected regions with high prevalence of malnutrition.</td>
<td>Monthly Reports; Health Management Information System; Demographic and Health Surveys</td>
<td>Comprehensive mechanism for child and adolescent nutrition interventions strengthened, especially in the regions with high malnutrition rates. Policies and strategies for implementation and monitoring of inclusive and equitable child health programmes developed and implemented.</td>
<td>NGOs/community-based organizations (CBOs) for behaviour change communication in maternal and child nutrition; WHO on newborn care and immunization</td>
<td>2 780 3 882 6 662</td>
</tr>
<tr>
<td>i. Stunted: U5. B= 18.90%, T= &lt;15%.</td>
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<tr>
<td>ii. Wasted U5: B= 10%, T= &lt;5%</td>
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<tr>
<td>iii. Overweight /obese U5: B= 7%, T= &lt;5%.</td>
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<tr>
<td>iv. Overweight/obese adolescent girls aged 15–19 years: B= 23.5%, T= &lt; 15% (National prevalence used as proxies)</td>
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<tr>
<td>3. % of schools meeting quality standards consistent with child-friendly, inclusive gender-sensitive quality education.</td>
<td>MOE/School Annual reports</td>
<td>Strengthen implementation and monitoring of inclusive, and gender-sensitive education.</td>
<td>MOE and Ministry of Environment and Energy on WASH; World Bank and MOE on quality education; UNESCO and MOYS on alternative education for out-of-school children</td>
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<tr>
<td>OUTCOME 2: Evidence generated for policy advocacy for inclusion in social services by 2020</td>
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<tr>
<td><strong>4.</strong> % of out-of-school adolescents (girls and boys) completing alternative education programme.</td>
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</tr>
<tr>
<td><strong>B=</strong> Girls: 0%, Boys: 0%, <strong>T=</strong> Girls: 50%, Boys: 50%</td>
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<tr>
<td><strong>5.</strong> Percentage of atolls with functional child protection system.</td>
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<tr>
<td><strong>B=</strong> 0%, <strong>T=</strong> 50%</td>
<td></td>
<td></td>
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<tr>
<td><strong>6.</strong> Number of sectors with fully functional child-sensitive monitoring and data systems</td>
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<tr>
<td><strong>B=</strong> 2 (2015); <strong>T=</strong> 9</td>
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<tr>
<td><strong>7.</strong> Percentage of vulnerable children and adolescents benefiting from social protection schemes.</td>
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<tr>
<td>**B=0%, T=40%</td>
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<tr>
<td><strong>8.</strong> Number and proportion of islands with child-centred disaster management (DM) plans.</td>
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<tr>
<td><strong>Sector agency reports/publications</strong></td>
<td></td>
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<tr>
<td><strong>Child- and gender-sensitive disaster-resilient and climate change adaptation plans institutionalized and</strong></td>
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<tr>
<td><strong>LGA, NDMC, NGOs, relevant sectors, Atoll and Island Councils</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
B = 12 (6%) (2015)  
T = 94 (50%)

<table>
<thead>
<tr>
<th>Cross-sectoral</th>
<th>Annual reports</th>
<th>Media and partnerships established and effectively promote child rights with a focus on equity.</th>
<th>Media, private sector, NGOs, ministries and communities</th>
<th>B</th>
<th>T</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of child-centred cross sectoral events</td>
<td>B=3; T= 10</td>
<td>Media and partnerships established and effectively promote child rights with a focus on equity.</td>
<td>Media, private sector, NGOs, ministries and communities</td>
<td>525</td>
<td>252</td>
<td>777</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td></td>
<td>4249</td>
<td>5023</td>
<td>9272</td>
</tr>
</tbody>
</table>
## Annex G: IRRF Analysis

### Outcome level results – analysis

|-------------------------------------------------------------------------------|---------------------------------------|-------------|-----------------------------------------|----------------------------------------------------------|-----------------------------|-----------------------------|----------------|
| **OUTCOME 1: Inclusive and equitable social services for children and adolescents, especially the disadvantaged and vulnerable groups are improved by 2020** | 1 % of children who are malnourished in the selected high-prevalence regions (National prevalence used as proxies)  
i. Stunted under-five (US): Baseline (B)= 18.9%, Target (T)= <15%  
ii. Wasted US: B= 10% US, T= <5%  
iii. Overweight/obese US: B= 7%, T= <5%.  
iv. Overweight/obese adolescents girls aged 15–19 years: B= 23.5%, T= < 15% | ✓ | No | iv almost same as output | ✓ | No – at best partially | No for adolescent obesity |
| 2. % increase of schools meeting quality standards consistent with child-friendly inclusive gender sensitive quality education B= 5%, T= 40% | | ✓ | ✓ | No explicit targeting of vulnerable groups | ✓ if standards agreed | ✓ using established standards | ✓ |
| 3 % of out-of-school adolescents (girls and boys) completing alternative education programme. B= Girls: 0%, Boys: 0%, T= Girls: 50% Boys: 50% | | | | Not in practice | Does not measure actual focus | OK | No | No |
| 4. Percentage of atolls with functional child protection system. B= 0% T= 50% | | ✓ | No (JJ and drug abuse) | OK | ✓ | No | No | No but verifiable progress |
| **OUTCOME 2: Evidence generation available for policy advocacy for inclusion of Social services by 2020** | 5. Number of sectors with fully functional child-sensitive monitoring and data systems B= 2 (2015); T= 9 | ✓ | ? | Used as both outcome and output indicator | ✓ if standards for fully functional agreed | ✓ | S never targeted but 3 of targeted 4 achieved/able |
| 6. Percentage of vulnerable children and adolescents benefiting from social protection schemes. B=0%, T=40% | | X | ✓ | No | ✓ with agreed definition of vulnerability | ? | ? | |
| 7. Number and proportion of islands with child-centred disaster management (DM) plans. B= 12 (6%) (2015) T = 94 (50%) | | X | No | Used as both outcome and output indicator | ✓ | ✓ | No but verifiable progress |
| **Cross-Sectoral** | 8. Number of child-centred cross sectoral events B=3; T= 10 | ? | No | Used as both outcome and output indicator | ✓ | ✓ | ✓ |
## Output result

### Indicators, Baseline, Targets (2020)

|------------------|-------------|--------------------------------------------------|----------------------------------------------------------|-----------------------------|----------------------------|------------------------|

### Outcome 1

1. Comprehensive mechanism for child and adolescent nutrition interventions strengthened, especially in the regions with high malnutrition rates.

- **% of adolescents in the normal BMI range**:
  - Baseline (B): 52%
  - Target (T): 70%
  - ✔️

- **% of identified malnourished children who receive appropriate interventions by a health care provider in high prevalence communities**:
  - Baseline (B): 0%
  - Target (T): 100%
  - ✔️

2. Policies and strategies for implementation and monitoring of inclusive and equitable child health programmes developed and implemented.

- **Operational and monitoring framework for child health policies in the Health Master Plan implemented**:
  - Baseline (B): Health Master Plan developed (2015)
  - Target (T): Child health policies implemented (in 2 regions with low child health indicators)
  - ✔️

- **Percentage of health facilities implementing standardized essential new-born care and IMCI services**:
  - Baseline (B): 2%
  - Target (T): 60% of the hospitals
  - IMCI dropped
  - No training
  - Subset of other indicators?
  - ✔️

3. Enhanced Implementation and monitoring of inclusive, child and gender sensitive education, including learning achievements.

- **A functioning inter-sectoral mechanism for assessment of quality standards established**:
  - Baseline (B): not established
  - Target (T): established
  - ✔️

- **% of children accessing SEN programs**:
  - Baseline (B): not in place
  - Target (T): Functional
  - ✔️

4. Alternative education system for the most

- **Functional data system in place to track out-of-school children and adolescents**:
  - Baseline (B): not in place
  - Target (T): Functional
  - ✔️
<table>
<thead>
<tr>
<th>Maldives Country Office Evaluability Assessment and Strengthening – Final Report</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Outcome 2</strong></td>
</tr>
<tr>
<td>1. Systems for generating evidence are strengthened at national and sub national levels for inclusive and equitable policies, plans and services, especially for the most disadvantaged.</td>
</tr>
<tr>
<td>2.2.3 % of vulnerable children and adolescents benefiting from social protection schemes B=0 T=40%</td>
</tr>
<tr>
<td>3. Number of islands with child cantered Disaster Management (DM)/ plans B=12 T=94</td>
</tr>
<tr>
<td>1. # of periodic analytical reports on key indicators and disparities B=0 T=3 2018: # of policies / decision made using evidence based data generated on inclusion B=0, T=5 2018: By 2020, programme are monitored and evaluated through a functioning monitoring and evaluation framework.</td>
</tr>
<tr>
<td>---</td>
</tr>
<tr>
<td>Functioning social protection system in place providing services to most disadvantaged children (Index: 1. coordination, 2. targeting 3. monitoring and all three must work). B=0 T=3</td>
</tr>
<tr>
<td># of sectors that have child and gender sensitive DM and resilience integrated into relevant sector plans/strategies B=0 T=7 2018: # of sectors and island development councils that have integrated and implement DRR and resilience plans and/or strategies B=0; T=7</td>
</tr>
<tr>
<td>Number of child-centred cross sectoral events B=3; T= 10</td>
</tr>
</tbody>
</table>
## Annex H: Analysis of monitoring documents

<table>
<thead>
<tr>
<th>Document type</th>
<th>Partner</th>
<th>Financial data</th>
<th>Analytical data</th>
<th>Activity description</th>
<th>Progress towards outcome</th>
<th>Challenges</th>
<th>Lesson</th>
<th>Recommendations / follow up</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 programme monitoring</td>
<td>MOE/Q AD</td>
<td>NA</td>
<td></td>
<td>Y - minimal</td>
<td>Y minimal</td>
<td>NA</td>
<td>NA</td>
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<tr>
<td>2 programme monitoring</td>
<td>NIE</td>
<td>NA</td>
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<td>Y - good</td>
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<td>NA</td>
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<tr>
<td>3 DCT Monitoring</td>
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<td>Y - detailed</td>
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<td>No</td>
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<td>4 DCT Monitoring</td>
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<td>Y - good</td>
<td>Y - good</td>
<td>Y - good</td>
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<td>5 DCT Monitoring</td>
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<td>Y - good</td>
<td>Y - minimal</td>
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<td>Y minimal</td>
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<td>6 Fund utilization</td>
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<td>Y - good</td>
<td>Y - adequate</td>
<td>Y - minimal</td>
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<td>No</td>
<td>Y relevant</td>
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<td>Y detailed</td>
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<td>Y adequate</td>
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<td>22</td>
<td>Monitoring visit report</td>
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<td>NA</td>
<td>Y good</td>
<td>No</td>
<td>Y adequate</td>
<td>Y minima l</td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Monitoring visit report</td>
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</tbody>
</table>
### Highlights of monitoring synthesis:

1. 
2. 
3. 
4. 

### Reports Synthesised

<table>
<thead>
<tr>
<th>Type</th>
<th>Number</th>
<th>Output</th>
<th>Outcome</th>
<th>Workstream</th>
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</thead>
<tbody>
<tr>
<td>Programme Monitoring Visit reports</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Activity Reports</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
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</table>

### Key achievements reported

#### Outcome 1

<table>
<thead>
<tr>
<th>Output indicator + target</th>
<th>Achievement</th>
<th>Contribution to target</th>
<th>% of output budget on this achievement</th>
</tr>
</thead>
<tbody>
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<td></td>
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</tbody>
</table>

#### Outcome 2

<table>
<thead>
<tr>
<th>Output indicator + target</th>
<th>Achievement</th>
<th>Contribution to target (e.g. people trained; atolls reached)</th>
<th>% of output budget on this achievement</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>
Key learnings and challenges raised

1.
2.
3.

Emerging risks to further progress

1.
2.
3.

Suggested Action Points

1.
2.
3.
## Annex J: UNDAF and CPD mapping

<table>
<thead>
<tr>
<th>Outcome 1: By 2020, Youth and Children access equitable, inclusive and quality social services &amp; have increased opportunities for skills</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>GOAL 1: Every child survive and thrive</strong></td>
</tr>
<tr>
<td><strong>CPD goals - 2018-21 SP</strong></td>
</tr>
<tr>
<td>% of children who are malnourished in the selected high-prevalence regions (National prevalence used as proxies) i. Stunted under-five (U5): Baseline (B) = 18.9%, Target (T) = &lt;15% ii. Wasted U5: B = 10% U5, T = &lt;5% iii. Overweight/obese U5: B = 7%, T = &lt;5% iv. Overweight/obese adolescents girls aged 15–19 years: B = 23.5%, T = &lt;15% Neonatal mortality rate: B = 6 deaths per 1,000 live births, T = 2 deaths per 1,000 live births</td>
</tr>
<tr>
<td>Establish and strengthen adolescent and youth health services</td>
</tr>
<tr>
<td>---</td>
</tr>
<tr>
<td>Evidence generation and policy advocacy for nutrition</td>
</tr>
<tr>
<td>1.1.3 Health Information System with real time data developed and functioning (B= Not in place, T= Functioning in 30% of public health facilities)</td>
</tr>
<tr>
<td>Improve quality of maternal and child health services</td>
</tr>
<tr>
<td>1.1.4 % of facilities delivering comprehensive essential newborn care and care of special/sick newborn as per facility standard package of services (B= 2% T= 40%)</td>
</tr>
<tr>
<td>Improve quality of maternal and child health services</td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>
9. Review and strengthen IMCI, IMNCI and specific diseases

**Response**

1. Conduct advocacy and communication on ECD
2. Develop policy on ECD and strengthen coordination among sectors providing ECD interventions
3. Generate and disseminate knowledge, evidence and data on ECD
4. Develop and support ECD and parenting programmes on nurturing care
5. Capacity building on ECD and behaviour change communication

### % children fully immunized for vaccine-preventable diseases mandated by the national immunization schedule: B= 93%, T= 98%.

**Strengthen immunization programme, vaccine management and surveillance**

1. Support the introduction of HPV and other vaccines
2. Support to develop capacity building on vaccine and immunization management (in specialized areas)
3. Improve vaccine communication and combat hesitancy
4. Assist vaccine monitoring, assessment, EVM study
5. Support for vaccine forecasting and procurement
6. Improvement of immunization supply chain and cold chain.
Support to strengthen HIV Prevention, evidence and develop capacity to deliver quality HIV services to young people

1. Strengthen HIV, SRH and health education for adolescents and young people
2. Strengthen HIV prevention programmes for young drug users and young key affected populations
4. Establish HIV prevention in health settings and community system strengthening
5. Strengthen the HIV testing programmes
6. Support to strengthen PMTCT programme

<p>| GOAL 2: Every child learns | % of students passing five or more subjects in their secondary school completion examinations: B= 48% (2013), T= 60% (2020) | Output 1.2: By 2020, national and subnational systems have enhanced capacity to deliver quality inclusive education, including enhanced coordination and efficient monitoring mechanisms for adherence to quality standards | 1.2.1 % of students (girls and boys) with SEN in mainstream schools having Individual Education Plans (B= IEP in SEN Units 100%; IEP In mainstream schools 0; T= 100%) |</p>
<table>
<thead>
<tr>
<th>% of schools meeting quality standards consistent with child-friendly, inclusive gender-sensitive quality education. B= 5%, T= 40%</th>
<th>MOE/School Annual reports</th>
<th>1.2.2% of schools meeting the minimum Child Friendly Schools standards (B= 6% (proxy indicator of schools trained on CFBS in 2014), T= 20% increase from baseline)</th>
<th>Implementation and monitoring of the National Curriculum</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>1. review of foundation stage and KS2 of nat. curriculum 2. Capacity development of NIE on leading nat. curriculum 3. implementation of the National Early Literacy and Mathematics Strategy et finalization of policy documents, training on emergent literacy and mathematics, launching of the literacy program in schools.... 4. Establishment of feedback mechanism to monitor non-academic part of schooling 5. Strengthening teacher resource centres for curriculum implementation and monitoring 6. Build capacity of teachers to deliver reproductive health education</td>
<td>Strengthen education sector planning</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1. Stakeholder consultations on ESP in 2 regions Consultations on the ESP with school leaders 3. National consultation on the curriculum 4. Logistical support to revise the draft ESP 5. Tech support for the ESP on Mand E 6. Support to strengthen EMIS functionality in schools and MOE</td>
<td>Operationalization of the implementation of the school improvement Quality assurance and Accountability Framework</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1. Development of a plan to support 50 most disadvantaged schools 2. Capacity development of QAD on strengthening national assessments 3. Monitoring of school self evaluation and development of SIPs in EMIS</td>
<td></td>
</tr>
<tr>
<td>SP GOAL 3: Every child is protected from violence and exploitation</td>
<td>Percentage of atolls with functional child protection system. B= 0% T= 50%</td>
<td>Sectoral Annual reports; Review reports</td>
<td>Output 1.3: By 2020, institutions and communities have enhanced capacities and well-coordinated systems to prevent, protect and respond to violence against children, adolescents, and children in conflict with the law</td>
</tr>
<tr>
<td>1.3.2 Diversion options and alternate sentencing systems and mechanisms in place at national and atoll level (B= Not in place, T= Established and operational)</td>
<td>Enhancing capacity of judiciary and justice sector to respond to VAC, juvenile crimes, and GBV</td>
<td>1. Review and revise in service programmes for magistrates and judges and Judicial Academy 2. Orientation of magistrates and judges on child friendly best practices including restorative justice, diversion and alternate sentencing 3. Review and expand prosecutors training 4. Training of case workers to respond to juvenile crimes</td>
<td></td>
</tr>
<tr>
<td>1.3.3 Monitoring mechanisms including functional data systems available at national and atoll level (B1 = National - no mechanism in place, T1= National - In place; B2= Atoll level: not in place T2= Atoll level: in place)</td>
<td>Strengthen and expansion of Child Protection Database</td>
<td>1. Review MCPD usage and areas for improvement 2. Strengthen and streamline MCPD 3. Development of MCPD user guide 4. Training of MCPD users</td>
<td></td>
</tr>
<tr>
<td>1.3.4 Number of regulations for the new child protection act drafted (B= 0, T= 10)</td>
<td>Evidence generation and support to strengthen legislation and policies</td>
<td>1. Review of scale juvenile crimes, justice system and practices 2. Strengthen child rights and juvenile justice legislations 3. Support to judicial symposium on child rights and family justice and implement recommendations 4. Orientation of stakeholders on new child rights legislation</td>
<td></td>
</tr>
<tr>
<td>% of cases of sexual violence against children responded and successfully closed as defined by standardized operational procedures and by trained professionals (B= 0%, T= 75%)</td>
<td>Strengthening capacity of social service workforce for prevention and responding to VAC inc GBV</td>
<td>1. Strengthening capacity of social workers 2. Strengthening capacity of policies investigating officers 3. Sensitization of first responders attending cases 4. Training of community engagement officers 5. Strengthen capacity at children's homes to adopt minimum standards for institutional care</td>
<td></td>
</tr>
<tr>
<td>Output 1.4: By 2020, enhanced systems are in place to deliver services for prevention of substance abuse and to provide rehabilitation, reintegration and after-care for youth and children</td>
<td>1.4.1 % of girls and boys with knowledge and skills on substance abuse prevention and safe behavior (B= To be established, T= Increase of 20%)</td>
<td>Enhancing capacity of CSGs for prevention, protection and responding to VAC and GBV</td>
<td>1. Design parenting programme 2. Deliver parenting programme 3. Establish CSGs in 8 atolls 4. Strengthen capacity in 4 atolls, Establish CSGs in 8 further locations (listed) 4. Monitoring and assessment of CSG performance</td>
</tr>
</tbody>
</table>
| Output 1.5: By 2020, increased opportunities for skills development to prepare young people for the labour market and for sport and recreation are in place. | 1.5.2 Number of young people (Male and Female) enrolled in skills development education training programme (B= 15 enrolments in internship program, 30 in skills development, T= 150 enrolments) | Development of nonformal education for out of school children | 1. Implementation of nonformal learning and skills development for out of school children and adolescents in Addu City 2. Development of concept paper on provision of nonformal education of OOSC and young people 3. National stakeholder consultation on nonformal education in Maldives of OOSC
## GOAL 4: Every child lives in a safe and clean environment

### Outcome 4: By 2020, growth and development are inclusive and sustainable, increase resilience to climate change and disasters, and contribute to enhanced food, energy and water security and natural resource management

<table>
<thead>
<tr>
<th>Number of sectors that have DRR (disaster risk reduction), climate change adaptation and resilience integrated into relevant sectoral plans and/or strategies: B= 0, T= 7</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sector agency reviews / reports</td>
</tr>
</tbody>
</table>

### Number and proportion of islands with child-centred disaster management (DM) plans. B= 12 (6%) (2015) T = 94 (50%)

### EVIDENCE

| Number of sectors with fully functional child-sensitive monitoring and data systems B= 2 (2015); T= 9 |
| Sector agency reviews / reports |

### Support to skilling and empowering young people for gainful employment

1. Skills and youth regional study
2. Private sector internship programme for YP
3. Inter atoll YP exchange programme
   Establishment of youth councils

### Formal learning and skills development programs for children in conflict with the law

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**Note:** This outcome is under not accessed.
| GOAL 5: Every child has an equitable chance in life | Number and proportion of islands with child-centred disaster management (DM) plans: B= 12 (6%) (2015) T = 94 (50%) | Sector agency reviews / reports | By 2020, institutional capacities strengthened for implementation of legislative reform, oversight and local and national level evidenced based inclusive equitable and sustainable policies and planning. | 3.3.4b Functioning social protection system in place providing services to most disadvantaged children (Index: 1. coordination, 2. targeting, 3. monitoring and all three must work)(B=0, T=3) |

| Outcome 3: By 2020, citizen expectations for voice, sustainable development, the rule of law and accountability are met by stronger systems of democratic governance. | % increase in budget allocated for children by sectors: B= 0, T= 10% Number of sectors with functional child-sensitive monitoring data systems: B=2, T=9 | By 2020, institutional capacities strengthened for implementation of legislative reform, oversight and local and national level evidenced based inclusive equitable and sustainable policies and planning. | 3.1.6 Key sector indicators required for equitable policies are established and incorporated into monitoring systems for timely use (B=0, T=4) | By 2020, Management Information System of 3 sectors are made functional to report on child indicators. |

| By 2020, programme is monitored and evaluated through a functioning monitoring and evaluation framework. | 1. Strengthen CRVS system 2. Develop and finalise NCMP for Maldives 3. Support the development National Strategic Plan and Island Development plans 4. Support to SDG and SDG child indicators |


<p>| By 2020, evidence is generated through research/Studies to address vulnerabilities and disparities. | 1. Support in the Analysis of Child Disability Analysis 2. Support in the VAC research - tools testing 3. Support the dissemination of DHS |</p>
<table>
<thead>
<tr>
<th>Percentage of vulnerable children and adolescents benefiting from social protection schemes. B=0%, T=40%</th>
<th>Survey reports Sector reports/publications</th>
<th>By 2020, mechanisms and frameworks developed to promote inclusive and sustainable growth, economic diversification, social protection and improves employment conditions for vulnerable groups.</th>
<th>3.3.4b Functioning social protection system in place providing services to most disadvantaged children (Index: 1. coordination, 2. targeting 3. monitoring and all three must work) (B=0, T=3)</th>
<th>Development of monitoring framework and Support intersectoral coordination/ development of Policy on graduation</th>
</tr>
</thead>
</table>
Annex K: Terms of Reference for the Evaluability Assessment assignment

Terms of Reference for Individual Contract for an

International Consultant to Assess and Strengthen the Evaluability of the UNICEF & Government of Maldives Country Programme 2016 – 2020
TOR Reference Number: TOR/2019/25

1. Programme Information

The overall goal of the UNICEF and Government of Maldives country programme is to support the Government of Maldives to reduce inequities and disparities and achieve the progressive realization of the rights of all children, especially the most vulnerable. In line with the national development priorities of the country, UNICEF contributes to the United Nations Development Assistance Framework (UNDAF) 2016–2020, particularly Outcome 1: Children and youth access and use equitable, inclusive and quality social services, and have increased opportunities for skills development. In line with the UNICEF Strategic Plan, the program aimed at leveraging the organization’s convening role to build partnerships with key social sectors and partners at all levels. The programme design adopts an evidence-based, policy advocacy and institutional strengthening approach in addressing the barriers that affect the most disadvantaged children living in the Maldives.


2. Linkages to UNICEF Country Programme and UNDAF

- UNDAF Outcome 3: By 2020, institutional capacities strengthened for implementation of legislative reform, oversight and local and national level evidenced based inclusive equitable and sustainable policies and planning
- CPD Output 2.1 Systems for generating evidence are strengthened at national and sub-national levels for inclusive and equitable policies, plans and services, especially for the most disadvantaged.
- RWP 2019-2020 Activity: Strengthening the developed Monitoring framework, including tools.

3. Justification for the Assessment

Evaluability and taking stock of how the Country Office is doing in terms of being able to adequately monitor, report and evaluate the country programme is critical to ensure that results are effectively recorded and analysed on a regular basis, and particularly with a view to the final country programme evaluation.

Considering the many changes in UNICEF’s approach to the Country Programme planning, monitoring, reporting and evaluation frameworks, guidelines, and processes in recent years, the Country Office management has deemed it necessary to assess to what extent the Maldives Country Office has the adequate systems and processes in place to effectively capture the required data and information to demonstrate achievement of planned results and targets. As part of this assessment, it will also be key to better understand to what extent the available resources in the Planning, Monitoring and Evaluation (PM&E) team (technical, financial, human and other) are sufficient to provide the required monitoring and reporting support to the Country Office at large. The findings and recommendations of this evaluation will enable the CO to embark the new country programme development process with a better understanding of required enhancements in its PM&E systems and processes.

4. Scope of Work

Purpose and objectives

The purpose of this evaluability assessment of the Maldives Country Programme is to assess and strengthen the evaluability of the UNICEF and Government of Maldives programme of cooperation. The consultancy is expected to determine whether
The current Maldives Country Office (MCO) monitoring system and databases are adequate for monitoring and reporting progress towards the achievement of the set CPD targets and results.

The objectives of the evaluability assessment are:

**Objective 1:** Assess the adequacy and validity of the results, activities and indicators in the CPD results framework to measure progress against set targets.

**Objective 2:** Assess the current Country Office planning, monitoring and evaluation systems and tools, particularly data collection and analysis systems, and whether the processes and systems in place are sufficient to enable the CO to adequately monitor and report on attained results.

**Objective 3:** Assess the extent to which the staffing structure/profile matches the skills demanded by the programme and the adequacy of financial resources aligned to meet the expected results.

**Objective 4:** Provide key recommendations on changes and amendments to the Country Office systems to the monitoring and reporting of the country programme progress with a view to measure results for children.

5. **Scope and Process**

The assessment will involve three phases: Inception, Data Analysis and Validation/Reporting.

1. **The inception phase** will involve a briefing from UNICEF Country Office in the Maldives (either in-person or via video conference). This phase will also involve an initial desk review to review relevant background documents, and the further refining of the initial list of evaluability questions. During this phase the consultants will produce an inception report (of around 15 pages) that presents the initial outline and plan of the assessment. A detailed work plan that outlines the expected work outputs and planned timing for each element should be presented to the Country Office at the end of the inception phase.

2. **The second phase** of the evaluability assessment will involve an extensive desk review, interviews with key staff members (key informants) at various levels (country - regional, and HQ). For the country office consultations, the consultant will review the design, technical and management aspects of the program, the M&E and reporting systems in place at the country level and assess the constraints, opportunities, contextual and substantive issues in operationalizing the program and the monitoring and evaluation work.

During this phase the consultant will produce a draft assessment report that includes a detailed analysis of the documentation and processes reviewed, as well as conclusions and recommendations for an informed management response. The report should be between 20 – 30 pages maximum (excl. Annexes).

3. **A final validation meeting** will be held with UNICEF country office staff (either in-person or via video conference) to validate the findings and key recommendations of the draft evaluability assessment report. The meeting will discuss and comment on the assessment itself, checking for factual errors or errors of interpretation, and feedback on the recommendations. The exercise will culminate with the completion of the evaluability assessment report that includes detailed findings and clear recommendations on how to further improve the Country Office’s Planning, Monitoring and Evaluation systems and processes by considering the four key
Maldives Country Office Evaluability Assessment and Strengthening – Final Report

objectives of this assessment as mentioned above. The report should not exceed 30 pages including the executive summary but excluding annexes.

A list evaluability assessment questions (to be finalised during the inception phase).

Objective 1: Assess the adequacy and validity of the results, activities and indicators in the CPD results framework to measure progress against set targets.

1. Is the Theory of Change (ToC) for programme components adequately described and is there clarity of logic across the results levels?
2. To what extent are results, indicators and activities measurable and are they leading to the desired changes?
3. Are the results, activities, and indicators the critical ones that need to be acted on/evidenced according to the ToC and in line with the management needs?
4. To what extend are cross-cutting priorities (namely: Gender, Disability and DRR and equity) measurable against clear targets?
5. Are SMART indicators in place that enable adequate monitoring and reporting? Have the indicators been defined (e.g. numerators and denominators) with clearly understood standards? Has a target value for the indicator been provided at Outcome and Output levels, including for any necessary stratification?

Objective 2: Assess the current Country Office planning, monitoring and evaluation systems and tools, particularly data collection and analysis systems, and whether the processes and systems in place are sufficient to enable the CO to adequately monitor and report on attained results.

1. Are the current Country Office planning, monitoring and evaluation systems and tools, particularly data collection and analysis systems, adequately structured to enable the CO and stakeholders to monitor and report against planned results?
2. Are the processes and systems in place sufficient and reliable for decision making and for programme improvements?
3. Is there a database in place to collate all available programme and evaluation data and information?
4. Are there adequate work flows in place to ensure information and monitoring data from programme teams is shared with the M&E team in order to inform continued reviews of the design, technical and management aspects of the programme?
5. Are there adequate means of verification systems in place to generate information at reasonable intervals to help monitor change and progress over time?

Objective 3: Assess the extent to which the staffing structure/profile matches the skills demanded by the programme and the adequacy of financial resources aligned to meet the expected results.

1. Is the P, M&E team adequately staffed to enable effective monitoring and reporting systems across the various programme areas within the Country Office?
2. Does the current Job Description of the P, M&E team fit the purpose and expected outcomes to support the CO in monitoring and reporting on results attained?
3. Are the data and systems in place to allow UNICEF to assess the adequacy of resources to achieve intended results?
4. Are there adequate financial resources to carry out monitoring and evaluation activities (human, technical, and financial resources)?
Objective 4: Provide key recommendations on changes and amendments to the Country Office systems to the monitoring and reporting of the country programme progress with a view to measure results for children.

1. What changes to the current planning, monitoring, evaluation and reporting systems are required to enable the Country Office to adequately monitor and report on progress against the country programme targets?
2. What possible changes in the Theory of Changes (TOCs), and in the alignment of the programme activities and objectives and indicators would be required to enhance the evaluability of the Country Programme?
3. What resources (human, technical, and financial resources) are required to enable the recommended changes and enhancements?

1. **Duty station:**
   Home-based and Male’, Maldives (for initial briefings and key informant discussions)

2. **Outputs/Deliverables**

The list below outlines the breakdown of the expected deliverables of the evaluability assessment:

**Phase -1 Inception Phase: A draft and final Inception report (approx. 5-10 pages)**

- Scope and methods
- Finalized list of questions
- Work plan/timeline/schedule to conduct interviews/discussions
- Chapter plan/report template for the final evaluability assessment report

**Phase 2- Preliminary Analysis of findings (approx. 15 - 20 pages)**

- Presentation of the preliminary findings and recommendations (approx. 15-20 pages)
- 1 power point presentation with key summary of initial findings

**Phase 3 - Validation Meeting and Final Report**

- A draft evaluability assessment report (max 30 pages including the executive summary and excluding annexes) to be discussed and validated by the Country Office team
- A final evaluability assessment report based on comments and feedback received on the draft report during the validation phase.
- A PowerPoint Presentation (10 to 15 slides): A summary of key findings and conclusions prepared towards the end of the evaluability assessment and submitted before the final validation meeting with the Country Office.

**Management and evaluation approach:**
Work relationships: this evaluability assessment will be managed by the UNICEF’s Country Office P, M&E section guided by the Deputy Representative, reporting to the Representative with key technical inputs from the Regional Evaluation Advisor. It will be conducted in close collaboration with UNICEF country office programme staff.

Proposed Timeline:

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Duration</th>
<th>Timeline/Deadline</th>
<th>Schedule of Payment</th>
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<tbody>
<tr>
<td><strong>Phase 1 - Inception Phase</strong></td>
<td>10 working days</td>
<td>03 – 14 Nov 2019</td>
<td>20%</td>
</tr>
<tr>
<td>• Initial desk review</td>
<td></td>
<td></td>
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<tr>
<td>• Draft Inception Report</td>
<td></td>
<td></td>
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<tr>
<td>• Final Inception Report</td>
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<tr>
<td><strong>Phase 2 - Data Collection &amp; Analysis</strong></td>
<td>10 working days</td>
<td>17 – 28 Nov 2019</td>
<td>40%</td>
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<td>• Analysis and presentation of the preliminary findings and recommendations</td>
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<tr>
<td><strong>Validation and Reporting</strong></td>
<td>10 working days</td>
<td>01 – 12 Dec 2019</td>
<td>40%</td>
</tr>
<tr>
<td>• Draft evaluability assessment report</td>
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<tr>
<td>• PowerPoint Presentation (10 to 15 slides): A summary of key findings and conclusions</td>
<td></td>
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<tr>
<td>• Final evaluability assessment report (max. 30 pages).</td>
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All payments are made upon satisfactory completion of deliverables duly authorized by the Supervisor of contract.

All editable versions (word document soft copy) should be provided to UNICEF.

3. Estimated duration of contract.

30 working days between October - December 2019

4. Supervisor

Ms. Yosi Echeverry Burckhardt, Deputy Representative will be the main supervisor the consultant, with strategic guidance from the MCO Representative and Regional Evaluation Advisor.

5. Official travel involved (itinerary and duration)

The consultant will make one trip to the country.
Annex L: Consultant biodata

Kirsty Milward is an independent consultant specializing in gender responsive evaluation and research, with particular experience in issues of social exclusion, education, women’s economic empowerment, eliminating violence against women, citizenship and rights. Over the last 10 years she has increasingly focused on designing and implementing mixed method and qualitative evaluations using collaborative and participatory approaches. She has carried out evaluations and evaluability assessments for a range of clients including UN Women, UNICEF, DFAT, DFID and Plan International. Prior to this, she focused on research, writing and editing for academics and activists in gender and development. Publications include “Organising Women Workers in the Informal Economy” with co-editors Naila Kabeer and Ratna Sudarshan; “Promising Pathways: Innovation and Best Practice in CLTS at Scale in Madagascar” and “Gender Mainstreaming Critiques: Signposts or Dead Ends?” with Franz Wong and Maitrayee Mukhopadhyay.

Kirsty lived for 20 years in rural West Bengal, India, where she founded and continues to co-manage Suchana, an education resource centre working with the indigenous adivasi community. She recently relocated back to UK. She completed an MA in Gender and Development at IDS, Sussex in 1994.

milward.bose@gmail.com