Independent Evaluation of
UNICEF Strategies in Addressing issues Affecting Women and Children in the Maldives

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EXECUTIVE SUMMARY

Overview of Evaluation Object

This is an evaluation of the strategies used by the UNICEF Maldives 2011 – 2015 Country Programme (CP) to support the government in the progressive and equitable realization of the rights of children and women. The programme was designed to respond to the graduation of the country to middle-income status in 2011 and the necessary shift in UNICEF engagement towards more upstream policy support, alongside the development of strategic partnerships for children. It aimed at achieving six high level results spanning a diverse portfolio of focus areas including child rights, child participation, drug abuse, education, environment, health, HIV/AIDS, and protection. The CP has a 4 year budget of USD 7,230,000, a staff team of 12, and partnerships with some 18 national agencies, 8 NGOs, and 9 international development partners.

Evaluation Objectives

The terms of reference (Annex 7) required the evaluation to assess whether the programme strategies – advocacy, capacity development, communication for development, strategic partnerships, and knowledge management - have facilitated the achievement of the expected results of the CP. The evaluation was also required to consider the cross-cutting issues of human rights, gender equality and humanitarian action. The purpose of the evaluation is to feed into the new country programme 2016-2020 by taking a formative look at the potential of programme strategies to achieve results in the future. The timeframe under review was the three and a half years of implementation from June 2011 to the evaluation start in December 2014. The OECD assessment criteria of relevance, effectiveness, efficiency and sustainability were used which were broken down into 21 evaluation questions (Annex 6).

Evaluation Methodology

The evaluation was carried out by one external consultant using qualitative methods comprising of desk review (Annex 2) and a two week field visit (Annex 4) to the Maldives for meetings with key informants (Annex 1). The evaluation involved 12 stakeholder meetings and 12 interviews (including 7 staff) conducted on a confidential basis to safeguard the evaluation’s independence. The evaluator’s ability to obtain an in-depth understanding of the programme was seriously impaired by the cancellation of nearly all meetings in the first week of the visit due to a local crisis; as well as a lack of opportunity to input into the plan for the evaluation in advance. It required intensive efforts after the visit to make up for the resulting gaps in first-hand knowledge.

Key Findings

Relevance: It was a challenge for the programme to find its optimum relevance in an ever-changing external environment consisting of political and economic changes. All its work is accordant with the context in a broad sense but a sharpened focus on priority issues affecting the most disadvantaged only began to come about at the mid-stage of the programme. The programme should be further narrowed to ensure that its limited resources are put to maximum effect.
Effectiveness: The CP has been prolific in achieving a number of outputs in the form of training events, studies, guidelines etc. across a wide range of focus areas. Some of these have led to higher level results in terms of changes in the knowledge, attitudes and behaviour of beneficiaries, or the adoption and scale up of initiatives nationwide by government counterparts. However, the programme, has not always been successful in turning its extensive activities into outcomes, partly due to external constraints but also because the programme’s planning and monitoring framework did not facilitate or capture such results.

The ‘capacity development’ and ‘knowledge management’ strategies resulted in high numbers of outputs but immediate outcomes in terms of effects on participants from interventions were not systematically captured by the CP’s M&E system. Planning was also an issue, with interventions carried out in a piecemeal manner and without sufficient regard to feasibility or sustainability. ‘Advocacy’ was challenging in an unstable political environment but might have had more success with an advocacy plan in place. ‘Communication for Development’ was delayed for internal and external reasons. The twin-track approach to ‘Strategic Partnerships’, working with government and civil society simultaneously, and seeking through the latter to reach communities, families and children was a constructive approach.

This programme aligns with human rights based approaches by building the capacity of duty bearers in government but simultaneously strengthening rights-holders through engagement with civil society. Gender mainstreaming involved the disaggregation of data along gender lines. The programme also had a number of specific initiatives (e.g. child rights bill, or gender-based and domestic violence programmes). These concerns were also integrated into other initiatives to some extent, more so in the protection field, and less evident in other focus areas such as health and education.

Efficiency: The efficiency of the programme has been undermined by a mismatch from the outset between the resources available, the administrative and staffing structure and the outcomes expected by a wide and unrealistic results framework.

Sustainability: There have been some notable successes in the institutionalisation of key initiatives. Despite this, the durability of measures has been affected by external instability as well as insufficient consideration of sustainability in the planning and design of interventions.

Key Conclusions

The programme has been very active and led to multiple visible outputs in the areas of child protection, education and health. In some cases, this has meant higher level results, for instance, in the scaling up of programmes in life skills education, family and child investigations, and child friendly schools. The programme may have had more immediate outcomes than it is able to prove. It was let down by not having a systematic monitoring system which captured results adequately. Whether these immediate effects would necessarily have led to higher level outcomes is another matter since this depends on external factors. However, the programme would have been better placed to achieve higher level outcomes had it given more consideration to feasibility and sustainability when designing interventions. While there were external constraints, it is unclear if there were any initiatives, demonstrated by the programme to be viable for national scale up, that fell by the wayside - informative training courses aren’t in themselves necessarily suitable or cost-effective for national expansion.
Even though the external environment was challenging and characterised by political change, social unrest and uncertainty among national partner agencies, the programme itself was not well braced for dealing with such difficulties. A recurring theme across all evaluation findings points to questions over internal organisation. The programme was overly ambitious to start with given the correspondingly limited resources and capacities available to the Maldives Country Office (MCO). This was further compounded an office structure that hindered effective coordination and a results framework lacking in logical measurable targets. MCO staff were inevitably over-stretched chasing to keep up with a diffuse and unrealistic plan without the time for proper consolidation, reflection, and coordination. The common finding across all programme strategies is one of piecemeal interventions whose results fell through the cracks of the programme’s monitoring system. Little of this will come as a surprise; the office has engaged in much self-reflection over the past couple of years since the start of the MTR and arrived at similar conclusions. In recognition of this, some adjustments have been made to the office structure and the results framework of the country programme.

It is difficult for the evaluation to say why this situation came about and why it has taken so long to resolve. There was no shortage of planning meetings before the start of and during the country programme. The answer may partly lie in the transition from a from a large well-funded tsunami programme, with the resources and the mindset to cover everything, to a more nuanced role in a middle-income country based around upstream policy support. The programme is still finding its niche but there is increasing understanding since the MTR of the need for MCO to capitalise on the strengths of UNICEF as a rights-based organisation and with a particular focus on issues concerning equity and disadvantaged groups. UNICEF Maldives is a separate entity from the government and its role accordingly should be discretely and selectively defined; it is not responsible for all areas of public policy (unlike the government) and nor can it leave the monitoring of its activities in government hands. It has its own mission to deliver and structures of accountability to answer to.

**Key Recommendations**

Recommendations are directed to the MCO for consideration in developing the next country programme. It is inappropriate within the context of an ongoing country programme development exercise and given the constraints faced by the evaluation itself, for the evaluator to make very directive recommendations. Instead the evaluation makes a number of over-arching recommendations which can help put the new country programme on a better footing. The recommendations listed below are supplemented by commentaries in the final section of this report which give further explanations and ideas on how the recommendations can be implemented.

1. Narrow the CP to a reduced number of outcomes, focus areas and topics
2. Ensure the results matrix is logical with SMART indicators
3. Set up a systematic process for monitoring the immediate outcomes of capacity development and knowledge management activities
4. Improve systems for the planning and testing of proposed interventions
5. Ensure the office structure facilitates coordination and oversight
Figure 1 – Map of the Maldives
A. INTRODUCTION

1. Background to evaluation

1. This is an evaluation of the strategies used by the UNICEF Maldives 2011 – 2015 Country Programme (CP) to support the government in the progressive and equitable realization of the rights of children and women. The 4 year programme runs from mid 2011 to end 2015. MCO is in the process of developing the new CPD for 2016 – 2020 by examining the overall country context, priorities and programme areas, as well as the 2014 – 2017 UNICEF global medium-term strategic plan (MTSP) (2014-2017).

2. This evaluation is commissioned as part of the new CP development process. Other exercises running concurrently and also contributing to the new CP include follow-up to the 2013 mid-term review (MTR), strategic reflection workshops for the new CP, situation and bottleneck analyses on various issues, a final evaluation of the Maldives United Nations Development Assistance Framework (UNDAF), as well as annual planning and reporting exercises.

2. Country context:

3. Geography: The Maldives (Figure 1) is made up of 1,190 coral islands spread over 859,000 sq km out of which about 190 are currently inhabited. For administrative purposes the islands are divided into 20 atolls. 99 per cent of its territory is ocean; the total area of land is 298 sq. km; and the total area of the coastline is 644 km. The capital Male’ is situated in the North-Central region on Male’ atoll. The Maldives is the lowest-lying country in the world, with its highest natural ground height being only 2.4 meters and 80 per cent of its landmass at one meter or less above sea level. It faces a significant threat from climate change and the rising of the sea-level.

4. Population: The Population and Housing Census of Maldives 2006 indicated that the population of Maldives was 298,968 with an annual average population growth rate (2008–2010) of 1.6 per cent (excluding expatriate workers). The Census 2014 (Preliminary results) states that the population size is 341,256.

5. Governance: The island nation was colonized by the Dutch and the Portuguese from the 16th century onwards. It became a British Protectorate in 1887 gaining full independence in 1965. The Republic of the Maldives was largely governed by one leader until 2005 when multi-party democracy was introduced for the first time following anti-government protests. A new constitution embodying democratic principles was ratified in 2008, followed by the country’s first free elections. The democratic reform process led to the separation of powers, the election of a new President and Parliament; and the establishment of an independent judiciary and other independent institutions.

6. Recent years have witnessed continuing political turmoil and social unrest as the democratisation process continues. There have been three changes of government since the CP started in 2011: Mohamed Nasheed

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1 All facts and figures in this section are from the UNDAF 2011-2015 Final Evaluation (2014) unless otherwise stated.
was in power from October 2008 until his resignation in February 2012, Mohamed Waheed Hussain, the vice-president was then sworn in until presidential elections took place in autumn 2013; Abdulla Yameen was voted in as president in November 2013 and remains so until the present time.

7. Development Status: Maldives graduated to middle-income country (MIC) status in January 2011, and its Human Development Index (HDI) rose to 0.77 making it the highest ranking country in South Asia. It also achieved five of the eight Millennium Development Goals (MDGs) ahead of schedule becoming South Asia’s only “MDG4” country with the highest per capita income in the sub-region. MDGs 1-5 (relating to poverty eradication; universal primary education; gender equality; child mortality; and maternal health) are met and MDGs 6-9 (relating to HIV/AIDS, malaria and other diseases; environmental sustainability; and global partnership for development) remain outstanding.

8. Despite the devastating impact of the 2004 tsunami and the 2009 global recession, the rapid expansion of tourism and related sectors spurred high economic growth; the average growth rate for GDP was almost 6 per cent between 2000 and 2009 - one of the highest in Asia. This yielded revenues for social sector expenditures which averaged nearly 50 per cent of the national budget in the years preceding the start of the CP.

9. Status of Children3: Children (0-17 years of age) represent almost 40 per cent of the population according to the 2006 national census. They are unevenly distributed among the geographic regions with the highest number concentrated in the capital Male’ and the smallest number in the Central region. Economic inequalities are significant and an estimated 61,000 children are thought to be in poverty according to the 2013 Situation Analysis. There are income disparities, especially in Male’ rather than the atolls, with the top 10 per cent of households in Male’ alone accounting for almost half (48.6%) of total income in 2009/10.

- Poor households have to spend proportionately more on food than higher income families and the quality of food intake is a concern. Although the nutrition of young children has improved over the past decade; under-nourishment is an issue and stunting levels in children under five years of age is unacceptably high at 18.9 per cent.
- The country has made good progress with the enrolment of young children, 3 - 4 years of age, in different forms of early childhood education: from 51.2 per cent in 2001 to 70.7 per cent in 2009. Enrolment of both boys and girls is close to universal at primary level and has increased substantially at secondary level over the period 2001-2011.
- Increasing numbers of children are in conflict with the law, although very few children have been convicted of serious crimes. The most common offence committed by boys is theft, and the majority of girls, subject to police investigation, end up being charged with sexual offences. Drug addiction is cited as a significant contributing factor to juvenile offending. The Violence against Children Study (2010, unpublished) reported that 11.6 per cent of Maldivian children (aged 4- late teens) experience violence in a range of settings including in the family, communities, schools and educational settings, in care and justice systems.

These three key areas of child rights: health, education and child protection; form the bedrock of the CP.

3. Country programme description

10. The CP was designed to respond to the graduation of the country to MIC status in 2011 and the necessary shift in UNICEF engagement towards more upstream policy support, and the development of strategic partnerships for children. Priorities were established in line with the National Strategic Action Plan\(^\text{4}\), the UNDAF 2011-2015, UNICEF’s MTSP (2006-2013); and unmet MDG targets. The programme is organised under two major programme components (PC): (1) Policy, advocacy and research\(^\text{5}\), and (2) Strategic partnerships for capacity development\(^\text{6}\). These are in effect the programme ‘strategies’, broadly speaking, the object of the evaluation.

11. These programme components were intended to lead to the following six Programme Component Results (PCRs):

1. Children enjoying the benefits of improved child rights legislation, policies, regulations and plans and contribute to legislative processes;
2. Disaggregated data and information that contribute to the realization of child rights are accessible, analysed and used;
3. Families enjoy quality health care, and practise improved nutrition and hygiene behaviours and are equipped with the knowledge and skills to prevent drug abuse and HIV/AIDS;
4. Children enjoy learning in an inclusive child-friendly environment and are aware of sustainable environmental practices;
5. Women and children benefit from a preventive and responsive protection system, and children benefit from a specialized juvenile justice system;
6. Child rights awareness is enhanced through active monitoring and reporting by civil society groups and media.

12. These results relate to the following focus areas:

- Child protection/Child rights/Child Participation (Results 1, 5, 6);
- Health/Nutrition/WASH (also known as Young Child Survival and Development cluster – YCSD); HIV/AIDS; Drugs (Result 2);
- Education (Result 3);
- Emergencies (Result 4);
- Environment (Result 4)

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\(^{4}\) See later discussion under ‘Relevance’ concerning programme’s fit with national priorities.

\(^{5}\) This comprises: supporting development of a national social protection act and towards the establishment of a minimum social protection floor; providing policy support to drafting of child rights bills and legislation; promoting participation of children and caregivers in contributing to the formulation of relevant legislation and policies; strengthening use and analysis of disaggregated data and information for planning and decision-making will be strengthened; strengthening sector information management systems.

\(^{6}\) This comprises: consolidating achievements in child and maternal health and ensure a continuum of care for children; promoting behaviour change communication and monitoring in the areas of nutrition, good hygiene and safe drinking water and sanitation practices and environmental challenges; advocacy and monitoring of child friendly learning and compliance with child friendly standards in schools; capacity building in education for early years and special education needs; scaling up of life-skills based education with greater emphasis on drug abuse, sexual and gender-based violence and HIV/AIDS prevention among children in and out of school and most-at-risk adolescents; capacity building of the Government and civil society to provide decentralized child and family protection services; supporting the development of rights-based informal mechanisms and community-based options for crime prevention, rehabilitation and reintegration of child offenders; capacity building of media and civil society to advocate for and monitor child rights, including reporting to international treaty-based bodies.
13. The CP’s summary results framework (Annex 8) is grouped by programme component and shows PC (1) linking to results 1 - 2; and PC (2) linking to results 4-6. Each result is broken down into intermediate results; key progress indicators, baselines, targets and means of verification. The CP is implemented in partnership with some 18 national agencies, 8 NGOs/civil society, and 9 international development partners (Annex 3). The CP was designed with a budget of USD 7,230,000 over five years broken down into USD 3,750,000 Regular Resources (core budget) and USD 3,480,000 (Other Resources) to be raised through bilateral donor assistance. The office structure comprises 12 staff headed by a Representative overseeing two sections corresponding to the two PC areas:

- Policy, Advocacy and Research (PAR) section was intended to be headed by a national officer, Social Policy Specialist, plus one officer for Knowledge Management/M&E (result 2) and another for C4D/Emergencies/DDR/Climate Change Adaptation/Environmental Sustainability (result 4).
- The Strategic Partnership and Capacity Development (SPCD) section was to be headed by a national level Senior Programme Specialist overseeing two programme specialists, one covering Child Rights/Child Protection/Child Participation (Results 1, 5, 6) and the other responsible for YCSD (Health, Nutrition, WASH)/HIV-AIDS/Drugs/Education (results 3, 4), plus a Programme Assistant.

14. Adaptations to the CP structure and focus were recommended in the 2013 MTR; an extensive participatory exercise consisting of a situation analysis and performance assessment covering several islands and a wide range of stakeholders. It concluded that external factors (political instability, the country’s tenuous transition to MIC status, the global fiscal crisis) were constraining implementation; in such circumstances the CP had focused too quickly on absolute upstream policy work. It recommended some adjustments to the CP namely: to mix upstream work with selected downstream work; address inequity and disparity; pay more attention to emergencies especially natural disasters; increase the focus on adolescents and young people; promote community level monitoring; modify the results framework and the office structure. At the time of the evaluation, a year after the MTR, these adaptations were still in process and are discussed in section C ‘Findings’, as appropriate.

B. EVALUATION DESIGN AND IMPLEMENTATION

1. Evaluation purpose, objectives and scope

15. The purpose of the evaluation is to feed into the development of the new CP by assessing whether strategies have facilitated the achievement of the expected results of the CPD, how they have contributed to wider development results at the national level and whether lessons can be derived for future strategic positioning. It is a formative evaluation looking at process issues, what is working well, what is not working well and which factors, both internal and external, affect programme implementation. The timeframe under review is the three and a half years of implementation from programme commencement in June 2011 to the evaluation start in December 2014. The geographic scope covers priority islands and MCO’s immediate relationships with central government and capital-based stakeholders, including civil society partners.
evaluation was carried out by one external consultant contracted for 35 days\(^7\) and comprised a desk review and a two week field visit to the Maldives. Logistics and planning were managed by MCO.

16. The scope of the evaluation was not fully apparent at the outset and was clarified as the evaluation proceeded, including during and after the evaluation visit. This was partly because the expectations of the evaluation were supplemented by the requirements of the GEROS system which was not mentioned in the TOR (see paragraphs 18 and 32). In addition, the TOR required a focus on ‘strategies’ but the CPD did not explicitly name strategies; the 2 programme components are in effect the ‘strategies’; moreover, ‘strategies’ are designated differently in other programme documents. As such MCO decided at the start of the evaluation visit that the following main strategies taken from UNICEF’s annual reporting template should be used as the evaluation’s analytical framework:
- advocacy;
- capacity development;
- communication for development (e.g. behaviour change);
- strategic partnerships (e.g. media, civil society);
- knowledge management (including monitoring and evaluation).

The evaluation was also required to consider the cross-cutting issues in UNICEF’s current MTSP 2014-2017 of human rights, gender equality and humanitarian action.

17. The evaluation’s analytical framework is therefore different to the CP’s results framework e.g. the evaluation separates out ‘capacity development’ and ‘strategic partnerships’ into two strategies whereas the CP results framework combines these elements into one programme component known as ‘strategic partnerships for capacity development’. Assessing the CP using a different analytical framework post-facto inevitably leads to some imprecision but this is not considered significant given that the purpose of the evaluation is learning rather than accountability. As ‘strategies’ are not defined in the CPD, a common-sense approach was taken; interviewees responded as they saw fit and, in order to ensure consistency, the evaluator opened a discussion on definitions if there appeared to be a difference in understanding. In fact there was little difference in interpretation of these terms among stakeholders except in the case of ‘advocacy’ and C4D’ where the CP sees the former as influencing decision-makers and the later as mass/public communication whereas some interviewees conflated the two.

18. The evaluation was not required to focus on outcomes; according to the TOR it would be premature to do so given the limited time frame since the MTR and adjustments made thereafter. Effectiveness of strategies was to be considered from the perspective of their potential to achieve results in the future. In practice, it is difficult to isolate the results of a programme from understanding why it worked or didn’t work, especially in a case like this when an evaluation takes place near the end of a programme. MCO agreed at the start of the evaluation visit that it would be unfeasible to separate the two and results should be considered from the perspective of understanding how and why results were/were not achieved taking into account various factors such as the quality of initiatives, resources, constraints etc, rather than an end in themselves. This focus was intensified by GEROS requirements to review results in detail from the perspective of both the outputs and outcomes.

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\(^7\) In practice it took considerably longer due to some of the limitations faced by the evaluation. Also note that the TOR does refers to 45 days.
19. In any case, as a formative independent evaluation taking a strategic perspective, the evaluation did not need to restrict itself to measuring performance against the existing results matrix and indicators. As is commonplace, results frameworks do not always capture the essence of a programme or allow for unexpected consequences, both positive and negative. This was recognised by the MTR which found the CP results framework to be too general, difficult to monitor and measure, and in need of revision.

20. The CP’s results framework (Annex 8) was not therefore used as the basis for assessment but the evaluability of the CP, whether it was adequately defined and its results verifiable, remained a constraint for the evaluation. It was not clear until partway through the evaluation visit, which document constituted the latest results framework; and systematic data on progress made against the results framework, was not provided by MCO until finalisation stage of the evaluation report. Furthermore, the theory of change underpinning the programme is not explicitly articulated but has to be inferred from the CPD and the results matrix. The results matrix is further discussed in the section C ‘Findings’ but the key point for now is that the evaluation is not framed around the results matrix because it comes from a different perspective (looking at strategies) and due to weaknesses in the framework itself. Nonetheless, the report summarises achievements in relation to the results framework (see section C.2 ‘Effectiveness’), and also critiques it as a monitoring tool (see section C.3 ‘Efficiency’). In summary, the evaluation uses the five main programme strategies as the entry point for discussions on what has worked well, and what can be improved. These are assessed in relation to each focus area, constraining/facilitating factors, results and reference with UNICEF’s cross-cutting issues.

2. Evaluation criteria and questions

21. The TOR required the OECD/DAC evaluation criteria of relevance, effectiveness, efficiency and sustainability to be used and defined these as follows:

Relevance is understood as the alignment of UNICEF’s programmes to government and corporate priorities, taking into account UNICEF’s comparative advantages; and importance or significance of UNICEF programmatic interventions and approaches in addressing key developmental challenges.

Effectiveness is understood as UNICEF’s contribution to the achievement of desired developmental change at the outcome level. The primary concern of this formative evaluation will be to establish the extent to which UNICEF has set itself up in a way that is likely to contribute to the achievement of such change.

Efficiency is understood as the way in which UNICEF manages its resources, including partnerships, with a view operationalizing its strategies, implementing activities and delivering outputs. [This evaluation was not required to do a cost analysis]

Sustainability is understood as the extent to which measures have been, or expect to be, put in place with a view to ensuring the medium to long-term ownership of rights holders and commitment by duty-bearers and their national and international development partners.
22. Impact, which is normally understood in evaluation terms to mean the positive and negative changes produced by a development intervention, was not part of this evaluation due to the limited implementation period under review. The use of the OECD/DAC evaluation criteria as the main frame of assessment for this evaluation of CP strategies made sense and the evaluator saw no need to change them. The evaluation also took account of the human rights-based approach to development, to ensure human rights, equity and gender equality considerations were integrated into each evaluation criteria and programme strategy under review (see section C ‘Findings’). These issues are expressly covered by evaluation questions (Annex 6). Given the small number of stakeholder meetings, largely high level, there were no specific human rights, equity or gender equality concerns to consider when planning the evaluation itself. The evaluation also considers causality and contribution/attribution in relation to higher level results achieved and sustained by taking account of the role of other actors, and different phases of UNICEF’s own CP.

23. The TOR listed 21 evaluation questions which were reviewed at the start of the evaluation to group similar questions together, and to add a few new questions. It was noted that some questions were imprecise and difficult to answer but all were retained given their interest to the CP on the understanding that it was unrealistic for the evaluation to respond to all the questions in equal depth, it had to remain responsive to issues as they arose on the ground, and identify new issues which merited attention. The table in Annex 6 sets out the evaluation questions and shows where the response to each question can be found in the report.

2. Evaluation Methodology

2.1. Data collection and sampling

24. The evaluation took a qualitative approach with the aim of facilitating a deep and rounded insight into the functioning of the programme. Research was carried out using the following methods:

**Desk review:** review of existing documentation, including descriptive information about the programme, its outputs and outcomes, documentation from technical support activities, donor and internal reports, and other evidence (Annex 2).

**Key informant interviews/meetings:** these were semi-structured face-to-face interviews or small group meetings with UNICEF staff; government officials, local civil society representatives; and other international organisations. The evaluation had little interaction with lower level participants (i.e. recipients of training, technical advice, capacity building) and none at all with ultimate beneficiaries (women and children) (Annex 1).

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8 Defined by UNICEF to mean: (1) The ultimate aim of all UNICEF-supported activities is the realization of the rights of children and women, as laid down in the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women; (2) Human rights and child rights principles guide our work in all sectors – and at each stage of the process. These principles include: universality, non-discrimination, the best interests of the child, the right to survival and development, the indivisibility and interdependence of human rights, accountability and respect for the voice of the child.; (3) UNICEF programmes of cooperation support those who have obligations to respect, protect and fulfil rights, by helping them develop their capacities to do so. And UNICEF helps those with rights to develop their capacity to claim their rights. [http://www.unicef.org/rightsresults/](http://www.unicef.org/rightsresults/)
**Visit to Maafushi island:** this involved individual meetings with a handful of administrative and civil society representatives (Annex 1).

25. The primary data sources were programme stakeholders. The CP arranged seven meetings with national stakeholders; and two with NGOs. In addition, four meetings were arranged with UN partners and seven with MCO programme staff at the evaluator’s request on arrival. MCO selected the sample, presumably on the basis that they are the main stakeholders at the present time. The evaluation achieved a fair coverage in the time available (evaluation meetings with 7 out of 18 national partners; 2 out of 8 NGOs; and 4 out of 9 international development partners). Maafushi island was selected by MCO as a location which had benefitted from the convergence approach, multiple interventions being carried out in health, life skills training and environment; and also because of its accessibility to the capital. In total, the evaluation held 12 stakeholder meetings and 12 interviews (including 7 staff) encompassing 38 persons altogether. Other data sources constituted various programme documents (Annex 2). The evaluation was not designed to collect new quantitative data given time constraints, nor did it receive any existing comprehensive quantitative data from the CP or from external sources which illumined the evaluation criteria and questions during the analytical phase of the evaluation.

26. An evaluation questionnaire was used (Annex 5) which followed a semi-structured format and asked open questions to avoid leading interviewees. Specific TOR evaluation questions were not explicitly included since the wording was often ambiguous and imprecise (Annex 6). The approach so adopted was appropriate for meetings with high level stakeholders (comprised of ministers, senior managers etc.) with limited time availability of an hour or so, and who would likely wish to prioritise their own responses rather than be asked highly structured questions. The scope also had to be kept broad as all the TOR evaluation criteria/questions were relevant to all the stakeholders (except for questions of ‘Efficiency’ which were more on an internal matter for MCO). It was not necessary to develop more than one questionnaire since there were relatively few evaluation meetings mostly consisting of high level stakeholders. Questions were adapted as necessary, for instance in interviews with Maafushi islanders. The instrument worked well and delivered answers on most evaluation questions (Annex 6).

2.2. Data analysis

27. The analytical approach involved reviewing responses against evaluation TOR criteria and questions and triangulating information across different sources to verify findings. As an independent evaluation, the aim was to derive findings from original data obtained from evaluation meetings; programme documents such as the MTR, annual reports etc. were used for confirmation purposes rather than reproducing existing findings. A detailed evaluation matrix was not therefore developed at the outset since the perspectives of all stakeholders were relevant to most evaluation questions. Nor were the TOR questions (Annex 6) amenable to the use of benchmarks, especially for an evaluation using a qualitative methodology. All findings in the report are confirmed by more than one stakeholder, and usually by a wider range of stakeholders. This is indicated in the report by showing the strength of views or divergence of responses from different stakeholder groups – government; international organisations; staff.

2.3. Evaluation principles
28. The evaluation sought to adhere to the UNEG norms and standards particularly the following ethical principles:
- Integrity
- Confidentiality
- Cultural sensitivity
- Respect for core human rights standards
- Do no harm/Best interests of the child (The evaluator planned ahead for potential meetings with vulnerable groups with these principles in mind but in the end no such meetings took place)

29. The TOR did not specify if the evaluation was to be independent or participatory. Consultation with stakeholders was a given, participation here refers to the degree to which staff and key stakeholders carry out evaluation activities themselves. The UNEG principles emphasise the importance of objectivity and independence; as MCO had not undergone an independent evaluation for at least the past five years, it was agreed during the evaluation visit that an independent approach should be taken in order to bring a fresh perspective and give respondents the opportunity to speak their minds without inhibition.

30. The main implication of this was that all meetings were carried out on a confidential and non-attributable manner. UNICEF staff did not participate in evaluation meetings, except for two meetings in Maafushi island where translation support was required. However, given the small number of evaluation meetings, stakeholders (including staff) were made aware that anonymity might not be fully guaranteed despite the best efforts of the evaluation to anonymise the evaluation report since it might be easy to guess where contributions came from. In terms of stakeholder participation, aside from being sources of information, the CP did not plan for stakeholders to be involved in planning and managing the evaluation, presumably because the other CP development processes are highly participatory.

2.4. Limitations

31. The evaluation faced a number of challenges:

- The evaluation visit coincided with a water crisis in the capital, Male. The government responded by announcing a national holiday, and all meetings with government counterparts, scheduled for the first week of a two week visit, were cancelled. Programme staff were also unavailable for interview as they were attending a training course and other meetings during the first week. It was possible to re-arrange all meetings as the original schedule had spare capacity but the disruption was significant and prevented the evaluator from obtaining an in-depth understanding of the programme in a timely way.
- There was a lack of opportunity for consultation between the evaluator and MCO in advance of the visit, the inception report was drafted based on a paper review and finalised on arrival following an initial discussion with MCO on evaluation requirements. The evaluator did not input in the plan for the visit, the choice of stakeholders and types of meetings. The evaluation consequently began without a basic understanding of many essential elements e.g. which document constituted the current results framework, who the CP stakeholders were, what were the strategies to be evaluated, how the programme was organised etc.
Meetings with national stakeholders were at a high level comprising a mix of political level appointees with technical experts and beneficiaries of the programme’s ToTs and technical advice. These meetings involved several people at once and it was not possible to tease out different experiences of the CP in hour long meetings with multiple participants. Interaction with lower level participants (recipients of grassroots training) was limited to the short visit to Maafushi island. The choice of conducting the evaluation through high level group meetings (rather than a series of individual interviews) and limiting lower level participation was made by MCO, presumably because the evaluation was seen as operating at a high strategic level. However, even in strategic evaluations, individual interviews and grassroots interaction can provide a diversity of perspectives and yield insights relevant at the strategic level. The CP may also have considered the time frame for the evaluation visit too short for more meetings; though normally a two week mission can accommodate a fuller agenda (annex 4).

The breadth of the programme, the interlinkages between different programme elements and the multiple variable relationships between strategies, outcomes, focus areas, evaluation criteria made it problematic to develop a suitable conceptual framework.

The time of evaluation was at the end of the year when the country office was also undertaking a review of its programme, hence the evaluation did not receive comprehensive data relating to the CP’s output/outcome indicators showing overall progress made.

This information was provided to the evaluation during the finalisation of the report and is referenced later in this report.

The various intensive review processes already underway meant that stakeholders already had preconceived ideas about the CP; it was a challenge for the evaluation to rise above existing judgements and biases.

Overall the data collected under such circumstances suffered from serious limitations. Principally, the evaluation visit ended with much data that was disparate and superficial. The type of in-depth understanding normally required in a qualitative study which comes from immersion in the subject and by receiving information in a timely way and examining issues from different perspectives and levels was missing. Since the evaluator did not acquire much vertical understanding of programme activities (from policy through to implementation), the analysis required the complex triangulation of information horizontally across different focus areas and interventions. Some gaps in information were taken up afterwards with staff. Overcoming these limitations in first-hand information took much intensive effort after the evaluation visit in order to piece together the programme and arrive at verifiable findings. Difficulties were compounded by having to meet the requirements of the GEROS process which were not part of the planning process for the evaluation.

C. FINDINGS

1. RELEVANCE

Relevance is understood as the alignment of UNICEF’s programmes to government and corporate priorities, taking into account UNICEF’s comparative advantages; and importance or significance of UNICEF programmatic interventions and approaches in addressing key developmental challenges.
33. **Key finding:** It has been difficult for the programme to find its optimum relevance in an ever-changing external environment consisting of political and economic changes. All its work is accordant with the context in a broad sense but a sharpened focus on priority issues affecting the most disadvantaged only started to come about at the mid-stage of the programme. The programme should be further narrowed to ensure that its limited resources are put to maximum effect.

1.1. Development challenges

34. The country has reached the important development milestones of graduation to MIC status and five out of eight MDGs but pockets of disadvantage remain. The 2011 CPD spotlighted various vulnerabilities namely, increasing youth unemployment and the consequent risks of drug use and HIV/AIDS; under-nutrition among children under five; sanitation facilities in the atolls; quality of secondary education; gender inequality; and violence against children. A more recent analysis\(^9\) notes major progress in education, health and economic opportunities e.g. universal immunization and primary schooling, as well as moves towards democratization. At the same time it points to inequalities in various human development dimensions, most apparent in income and education and the marginalisation of specific groups affected by emerging social issues such as drug use, gangs, gender-based violence and broken families. The flogging sentence handed to a 15 year old rape victim in 2013 by a juvenile court highlights the gaps between local practice and international norms. UN agencies say more efforts are needed to embed MDG progress\(^10\) and consolidate economic and social gains across the population. Notably, these various situation analyses make a case for widespread development challenges well beyond the limited resources of the MCO; thus highlighting the need for it to be selective in focus.

35. Despite acquiring MIC status, the country does not have enough resources and institutional capacity to engage with the remaining development challenges by itself. Its geographical make-up, with numerous and widely dispersed islands presents a significant challenge to the efficient administration of public services. The political and social upheaval of recent years; successive changes in government, structural reform, redundancy programmes, decentralisation policies and so on further stymie its capacity, particularly in areas like health, to manage the delivery of public policy. The Maldives falls into what is known as the ‘Middle-income country paradox’ where its economic ranking belies population disparities and the lack of administrative capacity.

36. MCO struggled to define its role in this fluid environment. It sought to align with global UN/UNICEF policies which emphasise upstream policy level work in MICs but along with other UN partners, grappled with giving this effect in the Maldivian context. The 2011 CPD committed to upstream policy work and captured the essence of it in two programme components: (a) policy, advocacy and research; (b) strategic partnerships for capacity development. However, staff, government partners, and UN peers all commented on the difficulty of arriving at a workable understanding of this (see Box 1). MCO says that it will still provide some downstream support in terms of demonstration projects with a clear focus on vulnerable groups targeting specific vulnerabilities and disparities. The aim of these is not to carry out piecemeal interventions but to pilot innovations for scale up by government as part of a wider strategic approach.

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\(^9\) 2014 Maldives Human Development Report
\(^10\) UNDAF 2011-2015 Final Evaluation
1.2. Government priorities

37. There is no long-term national development plan and each of the three governments in this phase of the CP have brought with them new directions, ideas, policies, political interests, people, and structures. The 2011 CPD was informed by the Strategic Action Plan of the previous government. Then in November 2013, with the change in government, the Party Manifesto of the ruling Progressive party of the Maldives became the official planning document\(^1\). MCO’s education programme best aligns with this political agenda which commits to high quality education for all children; health fits less well as the emphasis is on a curative model (health insurance schemes and access to health care) whereas MCO works on prevention; and child protection is not mentioned at all. Work continues in all areas and the CP has government approval, being a joint UNICEF/Government of the Maldives programme. Technical/administrative staff continue to see the CP as relevant. The divide comes at a political level in terms of ensuring alignment with the key interests of policy-makers and fluctuating political priorities. Government stakeholders recognise this is a challenge for development partners and stress the responsibility of ministries in setting national priorities.

38. In any case, the relevance of the CP cannot be judged by its fit with political agendas alone since these may represent short-term interests and ideological pressures. A number of government interviewees themselves called for more evidence based policy-making. In such a context, UNICEF’s mandate requires it to try and set the agenda, particularly to ensure adherence to international standards on the promotion and protection of human rights, rather than simply align itself with what is there.

\(^1\)http://www.presidencymaldives.gov.mv/Index.aspx?lid=20
1.3. UNICEF’s comparative advantages

39. UNICEF’s comparative advantage in the Maldives balancing its own expertise and resources with the role and capacity of other actors is as follows:

- Only international organisation in the Maldives specialising in issues affecting children;
- Wide-ranging expertise - UNICEF’s MTSP, 2014-2017, sets out a mandate covering seven outcomes (health; HIV/AIDS; WASH; nutrition; education; child protection; and social inclusion) and three cross-cutting issues (humanitarian action; gender equality; and human rights). UNICEF has other internationally agreed roles such as designated lead agency under the Inter-Agency Standing Committee (IASC) Cluster approach for Emergency WASH responses; global leader in vaccine procurement etc. However, this global expertise cannot necessarily be easily delivered to each context, for instance, the social policy specialist post has only recently been filled as it was not possible to find a local incumbent due to gaps in national capacity in this field.
Human-rights based approach to development based on the UN Convention on the Rights of the Child and other international human rights instruments. The CP falls under two UNICEF strategic plans (2006 to 2013 and 2014 to 2017) and despite some changes in formulation, the main thrust remains the same in terms of an equity focus on the most disadvantaged children and families. The CP is also guided by UNICEF’s global policy on MICs which emphasises an “upstream” approach aimed at strengthening the capacities of and influencing the decisions of key duty-bearers through monitoring, building capacity, advocacy, partnerships, knowledge exchange and attention to major issues of disparities, exclusion and discrimination.\(^{12}\)

40. MCO’s resources are limited. With the Maldives being an MIC, the MCO receives minimum Regular Resource and Support Budget allocation from HQ. The CP was planned around a four year budget of USD 7,230,000 and 12 staff. There are relatively few international players on the scene due to Maldives’ status as an MIC: 16 UN agencies (12 non-resident), multilateral banks (e.g. World Bank); and a few bilateral donors (e.g. AUSAID). There are no international NGOs and active local civil society groups are still relatively few in number. Government capacity varies considerably from ministry to ministry.

41. Table 1 begins to sketch out which organisations are working in the same technical areas as UNICEF. This information is non-exhaustive: the list of UN actors is taken from the UNDAF results framework; the information on other international organisations is ad hoc; and the capacity of key government agencies refers only to those met during the evaluation.

### Table 1 Organisations by Technical Area

<table>
<thead>
<tr>
<th>MCO’s technical areas</th>
<th>Organisations</th>
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<tbody>
<tr>
<td>Child protection/rights/participation</td>
<td>- UNICEF, UNFPA, UN Women, ILO, OHCHR</td>
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<tr>
<td></td>
<td>- Broader democratic governance and gender equality issues addressed by UNDP, UNESCO, UNODC, UNOPS, UNV, WHO</td>
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<tr>
<td></td>
<td>- Ministry of Law and Gender (capacity gaps); Maldives Police Service;</td>
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<tr>
<td></td>
<td>Juvenile Justice Unit</td>
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<tr>
<td>Education</td>
<td>* - UNICEF, UNFPA, WHO, ILO, UNESCO</td>
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<td></td>
<td>- World Bank</td>
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<td></td>
<td>- Ministry of Education</td>
</tr>
<tr>
<td>Environment (including Climate change adaption,</td>
<td>* - UNDP, UNEP, WHO, ISDR, ESCAP, UNOPS, UNICEF, UNESCO, UNFPA, UNIDO</td>
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<tr>
<td>disaster-risk reduction, emergencies)</td>
<td>- World Bank</td>
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<tr>
<td></td>
<td>- National Disaster Management Centre</td>
</tr>
<tr>
<td>Health (including nutrition and vaccines)</td>
<td>* - WHO, UNICEF, UNFPA, UNOPS</td>
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<td></td>
<td>- World Bank</td>
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<td></td>
<td>- Ministry of Health (capacity gaps)</td>
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<td></td>
<td>- Ministry of Health (capacity gaps)</td>
</tr>
<tr>
<td></td>
<td>- Ministry of Health (capacity gaps)</td>
</tr>
<tr>
<td>Social Security and Protection</td>
<td>* - UNICEF, UNFPA, UNESCO, WHO, ILO</td>
</tr>
<tr>
<td></td>
<td>- No evaluation meetings with Ministry responsible for this area</td>
</tr>
<tr>
<td>Knowledge Management</td>
<td>- UNICEF, UNDP</td>
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<td></td>
<td>- AUSAID</td>
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<td></td>
<td>- National Statistics Bureau</td>
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<tr>
<td>Communication for Development</td>
<td>- UNICEF, UNOPS, UNESCO</td>
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<td></td>
<td>- World Bank</td>
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\(^{12}\) UNICEF’s approach to Middle Income Countries, May 2010
1.4. MCO Response

42. The key question is whether MCO has best aligned what it has to offer with the priority needs in the context. Relevance has changed over the course of the programme as MCO’s own understanding of the situation has increased. The original programme had a very broad and dispersed design covering a wide variety of focus areas, geographical locations and population groups. Stakeholders from the UN and government commented on the need for UNICEF to be more selective. MCO recognised this during the 2013 MTR process and began making adaptations, particularly to give force to UNICEF’s equity focus.

43. Geographical targeting was very diffuse at the start of the programme and site selection appeared based on various factors such as ease of accessibility from the capital rather than priority needs. For instance, Maafushi island was selected for multiple interventions (health, environment, education) as part of a convergence approach. Following the 2013 MTR, the targeting of more disadvantaged areas improved. Maafushi is no longer a priority site following a situation analysis of the island which did not identify any significant problems. This was confirmed by the evaluation visit to the island when respondents were unable to cite any pressing problems affecting children. The south of the country as now a priority area for the child abuse programme and the north-central region for nutrition work.

44. Government stakeholders still question whether targeting is sufficiently nuanced and based on an in-depth understanding of vulnerabilities. One stakeholder referring to the strategic reflections meetings in 2014, said, “we think their interpretation of data is off...we do not agree with them on the identification of vulnerable populations....for example, Male has vulnerable populations as well....they have not identified disadvantage properly, they need to do more in-depth work with data which is already there”. Existing data e.g. monthly growth monitoring charts (kept by the MOH), height and weight data (kept by the MOE), household income and expenditure surveys etc can be better analysed to identify areas of disadvantage rather than reliance on the now dated 2009 DHS survey. Another stakeholder said that an MCO study done last year on poverty rates led to misleading results due to possible misinterpretation of data. It is not known if these comments take account of recent in-depth analyses such as the ongoing bottleneck analysis on nutritional needs started in autumn 2014.

45. In terms of focus areas, the programme is wide-ranging and covers many topics. While these are pertinent to the context, the relevance of UNICEF’s engagement varies by issue/sector. Evaluation interviews tended to emphasise the validity of MCO’s role in child protection/rights and education; some questioned the prioritisation in health and nutrition; and the degree of involvement in drugs, HIV/AIDS, environment and WASH. As Table 2 shows, UNICEF’s perceived relevance has to do with whether other actors either from the government or the international community are better placed to manage these issues. For instance, whether nutrition is a priority for UNICEF or not (and table 2 discusses various pros and cons), this quote from a government stakeholder is telling in terms of how it advises UNICEF to gauge its role more generally:
“Nutrition is not a top priority, UNICEF should focus on things that we can’t do e.g. tackling sexual abuse, the government can do a nutrition strategy and can ask WHO to help if need be. UNICEF should focus on cutting emerging issues at the root”.

46. UNICEF’s role in the cross-cutting areas of humanitarian action, human rights and gender is not up for discussion and mandated in all contexts by UNICEF’s Executive Board. The country has not suffered a humanitarian crisis in this phase but work has continued on disaster preparedness. The CP has emphasised HRBA programming since the 2013 MTR though this does not appear explicitly in the 2011 CPD. Staff have recently benefitted from training on how to apply HRBA in their work. The CP also emphasises gender mainstreaming. The integration of human rights and gender concerns are discussed in Section C.2. ‘Findings – Effectiveness’.

Table 2  Relevance by Focus Area

<table>
<thead>
<tr>
<th>Focus Area</th>
<th>Comments on Relevance</th>
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<tbody>
<tr>
<td>Child Protection, Rights, Participation</td>
<td>No issues of relevance raised here: UNICEF seen as playing a unique role with a well-targeted programme. Two issues prioritised: (1) Violence against children as the 2009 National Study on Violence against Children highlighted the severity of abuse against children and the lack of a holistic response from government; (2) Juvenile Justice due to the increasing numbers of children in conflict with the law, gang violence, the involvement of children in political violence etc. Government administrators agree with these priorities even though they do not feature explicitly in key political pledges. MCO has sought to work with the government’s agenda too, for instance by carrying out an assessment of state care institutions in 2013. It has researched other issues such as trafficking, CSEC and child labour to verify that they are not priority concerns for UNICEF. Aside from UNFPA/UN Women work on gender-based violence, few overlaps with other players.</td>
</tr>
<tr>
<td>Education</td>
<td>No issues of relevance raised here. The government itself has a comprehensive education programme backed by firm political pledges. This gives UNICEF room to target its efforts more specifically. It has helped kickstart programming in ECD and CFS in this and the former country programme which has now been taken over by government. It has also promoted programming from an equity perspective to ensure more difficult issues are not left off the agenda e.g. life skills initiative in conjunction with UNFPA and UNODC covers issues such as reproductive health, HIV/AIDS, drugs; efforts to promote SEN: new priority going forward is out-of-school children and young people.</td>
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</table>
| Health                              | Questions here about UNICEF’s prioritisation. Challenging area to work in: the MOH has faced much uncertainty, restructuring, lack of human resources/funds, poor capacity, internal coordination issues, and changing policies and plans. Vaccination – Immunization levels are high at 98% and MCO limits itself to vaccine procurement in line with its global role. UN and government stakeholders say immunization has resurfaced as a top priority and deserves deeper attention from UNICEF; gains made in recent years risk being rolled back by mismanagement and a lack of staff capacity at the MOH resulting in serious stock shortages. MCO aware of these issues but faces a dilemma in trying to reconcile the need for intensive downstream activity with upstream policy work. According to the UNDAF 2011-2015 evaluation (page 22) MOH practice has not improved despite inputs from another UN agency. Nutrition/healthy eating - Justification for focusing on this issue appears two-fold; unacceptable levels of stunting (25% higher in certain areas) according to a bottleneck analysis of 2009 DHS data carried out in 2014; and general poor diet/unhealthy eating practices and reliance on processed foods in the population at large. The programme response comprises a mix of activities some targeted in the north-central region (i.e. training of health care workers) where stunting is particularly prevalent, and others to the population at large (i.e. mass media campaign, training/guidelines for mothers, teachers of pre-school children). The programme will start in earnest next year but some precursor activities took place in 2014. Following questions came up in the evaluation: - Whether the prevalence and causes of stunting have been properly analysed. MCO’s work in this area is premised on numerous studies such as a World Bank nutrition analysis (2011), and the Health Protection Agency’s own policies. MCO is also carrying out a bottleneck analysis initiated in October 2014 and ongoing to explore this further. - Whether the intervention is sufficiently targeted to localised stunting problems and relevant to UNICEF’s role, namely those aspects of the intervention which are targeted to the general population (rich and poor alike) e.g. mass media campaign, IEC and training materials for pre-schools; or the cultural relevance of some of the messages e.g. encouragement of whole grains and skimmed milk, items which are not commonly available, nor part of the staple diet. - Discussions with stakeholders highlighted a distinction between issues relevant to the health of the nation, and thus a concern for the MOH, and matters of concern for UNICEF, as one government counterpart put it, “Nutrition is not a top priority, UNICEF should focus on things that we can’t do e.g. tackling sexual abuse, the government can do a nutrition strategy and can ask WHO to help if need be... UNICEF should focus on cutting emerging issues at the root”. On the other
hand, it should also be noted that stunting and malnutrition is a global concern of UNICEF and a legitimate area of intervention given that the issue is not explicitly addressed by WHO. The MOH has expressly requested support in this area and cooperated with CP initiatives in this area. In addition, there may be other good reasons for UNICEF’s involvement in a mass media nutrition campaign, for example, it may make the public more receptive to more sensitive messages later on about child abuse, however, such elements of relevance appear not to be teased out or documented when taking decisions on the design of a programme intervention.

Maternal and child health – Interviewees see this as a UNICEF specialism but suggest the piecemeal trainings on IMCI were ineffective (see next section) and consequently undermined relevance.

Drugs

Ability of UNICEF to play a relevant role is in question. National Drug Use Survey (2011/12) found a sizeable burden of drug use involving alcohol, cannabis, and opioids mainly among 15-19 year olds and called for a multi-layered and multi-pronged response. This has not happened due to lack of capacity at the National Drugs Agency. The main UN agency responsible, UNODC, no longer has the funds to work in the Maldives. MCO’s involvement is limited to preventive work as part of a wider life skills initiative implemented by the NGO, Journey – see ‘Capacity Development’ section. MCO is wise to hold back from further involvement given the scale of the task in hand and may consider defining its involvement even more narrowly, e.g. limiting its work on drugs to life skills interventions instead of keeping it as a standalone focus area.

HIV/AIDS

Maldives has low prevalence rates of HIV/AIDS and is not a focus country for UNAIDS13. As with drugs, MCO may wish to circumscribe its role even more in this area.

Environment

Relevance of UNICEF’s involvement in this area was questioned. One stakeholder said that UNICEF pressed for an involvement in the LECCRed (Low Emission Climate Resilient Development) programme and has subsequently not been an active member. MCO has recently commissioned the Maldivian Red Crescent to implement its programme components. In this area which has multiple other players, UNICEF might have elected to play a more advisory role to ensure the concerns of children were addressed. On the other hand, UNICEF’s global strategy refers to responsibilities in preparing for and responding to humanitarian crises. In addition the impacts on children of climate change and natural disasters may be forgotten if UNICEF is not there to advocate on their behalf.

WASH

Questions asked as to the relevance of UNICEF’s involvement. One government stakeholder said that they received so much money for WASH that they didn’t know what to do with it and were unable to use it for other purposes as it was earmarked. An example was also given of UNICEF ROSA pressing for the submission of a proposal for WASH funds despite the evident lack of need. MCO says the focus on hygiene education arose from a WASH in Schools assessment conducted in 2013 and that the current programme is being carried out in collaboration with MOE. MCO refined its focus after the MTR in order to be more strategic; it previously covered the promotion of hand-washing in schools and the maintenance of sanitation systems; and then changed its focus to hygiene education in schools. It may consider refining its focus even further to WASH in Emergencies only, in keeping with its global role.

1.5. Observations

47. Overall, the external environment intertwined with MCO’s own lack of surety about its role, has affected the ability of the office to achieve optimum relevance. The CPD narrowed UNICEF’s approach in the Maldives to policy upstream work but left the focus areas too broad, committing to six high level results and multiple lower level interventions. This is a problem common to the rest of the UNCT according to the UNDAF 2011-15 Final Evaluation (2014) which concludes that the UN has stretched itself too thin with 15 outcomes, 52 outputs given its corresponding budget of USD 41 million.

48. UNICEF’s MTSP (2014-2017) sets out seven areas of comparative advantage but allows country programmes to select a subset of these based on national plans and priorities, the situation of women and children in the country, the comparative advantage of UNICEF vis-a-vis other development actors, and the availability of financial and human resources14. There is strong consensus among staff that relevance could have been increased by working on a few key areas where change was achievable, “prior to the MTR we were doing small activities….we need to focus on fewer areas where we can see change….having a diluted programmes makes us irrelevant”.


14 UNICEF Strategic Plan, 2014, 2017 (pp. 15)
Staff struggled to identify priorities in evaluation interviews: the difficulty in setting boundaries is exacerbated by UNICEF having a mandate which covers nearly all aspects of human development and by being one of the few resident UN agencies in the Maldives. These are matters for MCO to consider in preparation for the next CP but the evaluation can suggest increasing relevance in two ways.

49. Firstly, by reducing focus areas and topics. This is a suggested list of priorities:

**Higher priority**
- Child rights – integral to work in all other areas and UNICEF’s core mandate; no other organisation is able to take this forward.
- Child protection - pressing needs which do not feature in the political agenda; no other organisation able to take this forward; weak capacity in government.
- Social inclusion/policy – not explicitly covered by this evaluation as work will start in earnest in 2015 (work done so far is addressed under Knowledge Management). UNICEF is the main agency in this area according to UNDAF breakdown of responsibilities and central to addressing inequities which lie at the heart of UNICEF’s mandate.
- Humanitarian Action – UNICEF has a particular global commitment to deliver on WASH in Emergencies. However, with respect to other areas, the question is whether MCO needs to be directly involved or can it serve the global UNICEF MTSP by playing an advisory role to ensure the concerns of children are integrated in work done by others (especially numerous UN players) on environmental/DDR programmes.
- Health – Despite other organisations on the scene, weak capacity in government threatens to derail important health gains and MDG achievements. However, more selectivity in interventions involving the MOH (vaccines, IMCH, nutrition etc.)

**Lesser priority**
- Education – government has good capacity; other major organisations involved i.e. World Bank. MDG is met. At most, limit UNICEF’s role to specific issues of disadvantage and exclusion rather than mainstream services.
- Drugs – Important players are missing from the scene (NDA has weak capacity and UNODC is no longer operating in the country) and UNICEF lacks the capacity to make an effective impact. At most, limit involvement to broader life skills prevention.
- HIV/AIDS – Not an issue for the Maldives and key players (UNAIDS) have withdrawn. Limit involvement to broader life skills prevention work.
- WASH – in general is not a priority.
- Child participation – this should be considered when designing programme interventions in key areas rather than as a standalone subject.

50. Secondly, MCO should consider taking a more flexible approach towards supporting implementation if the needs require. The CP did not do service delivery (except vaccine procurement) so the dilemma of upstream/downstream work only manifested in capacity development initiatives started by UNICEF but which later floundered because of lack of funds from the government to scale up. The CP might have allowed for adjustment to unanticipated external circumstances when these threatened to derail outcomes e.g. the health sector was under severe strain in this phase with decentralisation, restructuring of the ministry, staff redundancies etc., whereas the education sector was relatively stable. If funds allowed, the
CP could have concentrated its resources in bringing fewer initiatives to fruition rather than carrying out multiple ad hoc activities. However, investment in scaling up would have required rigorous demonstration of effectiveness and it is not proven that there were in fact any such initiatives in this phase which missed out on expansion (see section C.2.2. on Capacity Development). The MTR recommended the flexibility for some limited downstream activities but no changes seem to have been made.

51. The UNICEF policy towards MICs does not appear to preclude such an approach; it seeks to reduce downstream interventions in limited geographic locations with no wider impact (which would not be the case with a national training programme). It also allows exemptions in certain circumstances (although there was no humanitarian crisis, the social and political crisis arguably required flexibility).

2. EFFECTIVENESS

Effectiveness is understood as UNICEF’s contribution to the achievement of desired developmental change at the outcome level. The primary concern of this formative evaluation will be to establish the extent to which UNICEF has set itself up in a way that is likely to contribute to the achievement of such change.

Key Finding: The CP has been prolific in the number of outputs achieved across a wide range of focus areas. Some of these have led to higher level results which show evidence of change in knowledge, attitudes and behaviour among beneficiary groups, or the adoption and scale up of initiatives nationwide by government counterparts. On the whole though the programme has not been successful in turning its extensive activities into outcomes, partly due to external constraints but also because the programme’s planning and monitoring framework did not facilitate or capture such results.

52. The five main programme strategies (advocacy; capacity development; communication for development; strategic partnerships and knowledge management) are assessed in terms of what is working well and what can be improved with a view contributing to developmental change in the future. Each section begins with a brief overview of outputs and outcomes\textsuperscript{15}. The CP’s results framework is not a reliable litmus of what the programme has or hasn’t achieved due to flaws in its creation (see section C.3 ‘Efficiency’). The results as per the results framework based on feedback from staff are set out in Annex 8 and show that most targets are unmet. The evaluation therefore makes its own assessment. Table 3 at the end of this section maps out information on outputs and links this to the CP’s over-riding outcomes and the 5 programme strategies. The evaluation recognises outputs but is unable to say if the CP could have done more in the timeframe available. It can also only refer to immediate outcomes arising from the activity in question rather the overriding outcomes of the CP. The evaluation has to take stock of results in order to discuss the strengths and weaknesses in the different strategic approaches.

\textsuperscript{15} As the CPD does not define these terms; here are the definitions used by the evaluation: Outputs are the specific products, goods or services, that an activity is expected to deliver as a result of receiving the inputs. Output measures refer to outputs as far as possible and cover availability and accessibility of services; Outcomes, which generally refer to peoples’ responses to a programme and how they are doing things differently as a result of it. Outcome measures refer to utilization; Impacts, which are the effects of the project/programme on the people and their surroundings. These may be economic, social, organizational, health, environmental, technical or other intended or unintended results of the project or programme. Impacts are long-term effects while outcomes are shorter-term effects relating to objectives. Impact measures to the condition of children and women in the target area; Results can be at output, outcome or impact level. Taken from http://preval.org/documentos/00473.pdf
2.1. Advocacy

53. **Key Finding:** The CP’s advocacy efforts are not seen as particularly effective in this phase. The unstable political and social environment was no doubt a major constraint but the programme might have increased its chances of influencing key decision-makers by taking a more strategic approach.

54. Advocacy efforts in this phase have largely been aimed at influencing decision-makers on new bills and legislation, policies and programme priorities. Key outputs (see Table 3) include draft texts on bills relating to ‘Child rights, Child care and protection’ and ‘Juvenile Justice’; advocacy against corporal punishment; participation in a regional project on Special Educational Needs (SEN); and facilitating government participation in high level nutrition conferences abroad. There was also high level advocacy this year involving the UNICEF Representative and, at times, the UNICEF ROSA Regional Director with Ministers for Education, Health and Home Affairs, the Attorney-General and Speaker of the Parliament on a range of issues, such as international standards pertaining to children in conflict with the law. Advocacy is a central part of a HRBA approach as it entails holding duty-bearers to account. Gender issues appear integrated into technical advice in some areas such as child protection/juvenile justice but not tabled overtly for high level discussions.

55. There appear to be very few outcomes resulting from these efforts. MCO itself reports that a couple of its recommendations for the new curriculum were adopted by the Curriculum Steering Committee, and that nutrition/stunting has higher government priority due to the programme’s efforts. The evaluation was unable to confirm these claims independently. Staff see the lack of progress on the afore-mentioned bills as disappointing especially as this work was started under the last CP.

56. Overall both external stakeholders and staff agree that the CP’s advocacy efforts have not been particularly effective in this phase. Stakeholders say there were more impressive examples from previous UNICEF CPs such as the large scale 2001 First Steps campaign which involved both policy-makers and the public. MCO’s approach is primarily based on evidence-based advocacy towards officials in ministries with the aim of encouraging them to take up issues within government for increased attention and resource allocation. A number of government interviewees felt it was not possible to do much by advocating from within and saw a key role for UNICEF to exert external pressure by engaging directly with top policy-makers and parliamentarians.

57. Government stakeholders from across departments called on UNICEF to strengthen its advocacy in the following ways:

- **Build support in a timely way.** One government interviewee said that UNICEF needed to develop a constituency of support for its priorities first,

  “you can’t advocate for the passing of a bill if it is not a priority, there is no stake or interest in government. UNICEF first needs to show them the value of supporting a policy by aligning it to government needs”.

- **Make links with the political agenda.** The manifesto pledges are broadly couched and it’s partly a matter of translating ideas to make the connections relevant to policy-makers. For instance, while UNICEF’s work on Integrated Management of Childhood Illness (IMCI) does not directly fit, it can potentially link to the government pledge of ‘providing highly quality medical care’.


More advocacy on evidence-based policy making to help foster a more long-term and rational approach to decision-making.

More commentary on the government’s agenda rather than simply advocacy for UNICEF’s programme. One interviewee said,

“UNICEF should help us think more, it should question the policy decisions of government and not just focus on justifying its own programme, for example, the government plans to spend millions on setting up recreation centres with football grounds, games rooms and so on but the need for them depends on the size of the population and the demographics, what use are such facilities on an island of 300 adults. The UN should review political priorities”.

Other ideas include the potential impacts of tax proposals children and the disadvantaged, or the efficiency of the national health insurance scheme.

Advocacy efforts were constrained by various factors:

- Political instability. Progress on bills was impeded by changes in government; constitutional and judicial reform; restructuring of the responsible ministry (Law and Gender) through a series of mergers and de-mergers with other departments; and a lack of priority to issues of concern to MCO. As one stakeholder said,

  “The lack of progress is due to the fact that few stakeholders see the importance [of a juvenile justice bill], the greatest challenge is that it is not seen as a priority, the government is focused on the 5 pledges in the manifesto. Despite the fact that there are critical issues e.g. use of children in political violence....instead the taxation bill is higher on the agenda which pushes back bills of interest [to UNICEF].”

- UN Role. In this turbulent period, there was pressure on UN agencies to remain neutral which also impeded overt lobbying of parliamentarians and different political parties. The One UN approach constrained UNICEF from acting alone.

- Lack of platforms. Government officials themselves recognise the challenge in doing advocacy and the lack of platforms for raising issues. UNICEF and UNFPA have a seat on the Reproductive Health Committee but there are few such forums for raising issues on a consistent basis.

Even in these difficult times, there were examples of advocacy successes driven by other actors. UNFPA/UNDP worked with political actors on the passing of the domestic violence bill in April 2012. The general global outcry, including meetings between the UN Special Rapporteur on Violence against Children and the Chief Justice over the flogging case in 2013 led to a reversal of the sentence against the young rape victim by the High Court. It should be noted that UNICEF coordinated and accompanied these meetings of the Special Rapporteur. The NGO, Journey, received recognition from the government by being given the National Youth Award in 2013 for its work which includes advocacy on legislative reform concerning drug use.

Interviewees, both internal and external, agree that MCO would have been better placed to do advocacy had it had taken a more strategic approach from the outset, with a written document identifying targets, approaches, techniques, and capacities. High level advocacy, as took place in 2014, but not much in evidence before, was also encouraged. With a more strategic approach, MCO could have better reacted to changes and even positioned itself to influence agendas in a fluid environment. MCO staff reflected on their own lack of capacity and political skills to manage this aspect of the work especially in a situation where the role of the office was changing from being a funder to influencer. This problem is not unique to UNICEF;
other UN agencies concede that they too have work to do in unpacking the meaning of advocacy, upstream policy work, power structures and so on in the Maldivian context. The following ideas were suggested for engaging decision-makers: regional workshops and study tours (albeit these are expensive); creation of a child development index as international rankings have traditionally made decision-makers sit up and pay attention; and joint initiatives with other UN agencies. Advocacy is challenging and uncertain in the best of circumstances. While it is uncertain that MCO could have achieved much more in this phase on the advocacy front, a proper plan and more high level engagement from the outset may have helped.

2.2. Capacity development

61. Key Finding: The country programme has carried out numerous capacity development outputs of high quality; some have gone on to have lasting effect but rather more have constituted ad hoc initiatives planned without adequate reference to sustaining them as part of national structures.

62. Capacity development has been the mainstay of the CP’s work either through training courses or the development of guidelines, resources etc. MCO has been very prolific in achieving capacity development outputs (see Table 3) across the range of focus areas in child rights/protection; health; education; nutrition; media; emergency planning and knowledge management. Its support was much appreciated across the board, particularly by departments which lack resources, such as the JJU and the MOH. The capacity development component is befitting of a HRBA as it supports duty bearers to discharge their obligations. Both human rights and gender issues were well considered in protection interventions e.g. training modules on domestic violence and gender-based violence as well as support to the Ministry of Law and Gender on these issues. Staff were less able to show how these aspects are mainstreamed into other areas such as health and education.

63. Data on outputs was systematically collected; both government and NGO partners typically gathered feedback at events or through subsequent reviews. Quality was highly rated by government departments: feedback questionnaires collected in training courses were consistently positive; and support on guidelines, such as the child protection in education settings policy, is also praised. Some courses, such as juvenile justice training, are in high demand by the courts and judiciary. The evaluation was able to test out feedback directly during the visit to Maafushi island where a number of respondents confirmed that the life skills work carried out by NGO, Journey, was informed, fun and creative. Some organisations such as the Maldives Media Council used this information to improve their interventions but it is not known whether other CP counterparts did the same.

64. There are also some positive outcomes. The fact that some programmes have been taken over by the government e.g. criminal investigation course by the Maldives Police Service; education and life skills courses by the MOE, is ultimate testament to their effectiveness (see section C.4. ‘Sustainability’). On the whole however, outcomes were not well captured. Aside from a few isolated examples, such as Journey’s monitoring of its drugs awareness programmes which involved pre and post test data showing the increase in knowledge among course participants, or the Juvenile Justice Unit’s review of the impact of training on magistrates’ sentencing decisions, the programme failed to systematically monitor changes in knowledge.

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attitude and practice resulting from its extensive efforts to build capacity. This is a serious let down for the programme. Evidence of effectiveness was lost and opportunities to improve interventions missed. The National Statistics Bureau, for example, has not carried out a formal assessment of past trainees to properly understand why Maldivinfo is not being used. In other cases, learning came rather slowly. MCO has funded the training of 250 people each year on the Family and Child-centred investigation course since 2009; now that the government is taking over financing, it has decided to ensure that trainees actually occupy investigative roles and can use this knowledge in their jobs, it is also requiring trainees to take an exam at the end of the course to demonstrate improvements in knowledge. This begs the question why UNICEF didn’t introduce these improvements when it was funding the course.

65. UNICEF Maldives did not give enough guidance to implementing partners as to what was required; it is not clear if this was not required by MCO management or if MCO staff did not pass this on to counterparts. In any case staff themselves did not have sufficient time to do field monitoring. Examples of effective monitoring activities, for instance by the Maldives Media Council, came about due to the volition and know-how of individual counterparts. Nor were capacity needs properly assessed in advance. Staff only realised during the MTR that a capacity gap analysis should have been part of the SITAN and began doing them thereafter, starting with the Ministry of Law and Gender. Staff could not really say why monitoring had not happened systematically; they were aware it should be done but a lack of capacity and time appear to have been the barrier. More emphasis has been given to this since the MTR with plans to do level three community-based monitoring in the course of 2015.

66. There were other ways too in which MCO’s capacity development approach was not effective:

➢ Piecemeal interventions carried out without being part of an obvious structured sustainable programme. Respondents at different levels – both central government and island level – commented on the lack of follow-up to trainings. Examples include health worker training in atolls; WASH/Environmental education in schools; results-based management training for ministries etc. As one government stakeholder put it,

“3-4 days of training is not helpful, there would be better outcomes if the focus was on the capacity of institutions on islands, then it can be sustained. Training individuals is no use if there is no environment at the institutional level to use training”.

Interviewees emphasised the need for structured interventions which included a plan for the implementation and rolling out of guidelines, policies and training modules.

➢ Design of interventions was not always based on a proper assessment of feasibility. Training courses typically adopted an intensive five day face to face training model without adequately considering the convenience to potential participants:

- Journey’s life skills training course on Maafushi island, and the Maldives Media Council training for journalists both found it a challenge to find participants willing to commit this time during working hours;
- Masters in Social Policy Course implemented through Maldives National University saw a high drop out from participants based in the Atolls due to the cost and time needed for regular travel to the capital. This has been reviewed and changes made to entry criteria and to offer more online long-distance learning.
The IMCI involved extensive adaptation of an existing WHO package into a 13 module course; the government has not committed to rolling this out across the country given the costs involved; nor is it possible to integrate this into existing national training for doctors and nurses since the subject is already covered in those courses, albeit to a lesser extent. MCO is now considering adapting this to an online course but the cost-efficiency of delivering this information to health workers, many of whom are expatriates, should not have been left as an afterthought. It would also have been helpful to consider in advance: the level of contextualisation necessary, the format, structure, mode of delivery, integration with existing courses, links to national initiatives and priorities etc. As one stakeholder put it, “UNICEF is right to be involved in this, it has produced the modules but implementation is the issue here, UNICEF should focus on the process not just the content, it’s more of a process issue here”.

Targeting may also be an issue (see section C.1.4. ‘Relevance’) according to the limited information available to the evaluation. The evaluation field visit to Maafushi confirmed doubts as to the selection of it as a project site. Stakeholders said there wasn’t a problem with hard drugs; and nor could they agree on whether the past or present usage of soft drugs (alcohol and marijuana) was widespread. Moreover, it seems that most of the life skills course participants were well-balanced adolescents in the first place; those at risk declined to attend, though some may have been assisted by referrals for rehabilitation. MCO says this was part of the design which aimed to build the capacity of peer educators for them to then do outreach activities with at-risk adolescents.

Overall this strategy was not as effective in achieving or demonstrating outcomes as it might have been. External constraints were a factor including the high turnover of staff in all areas; structural changes and a lack of institutional capacity in ministries to manage training programmes; and disruption caused by political and social instability. However, internal issues were a major factor as interventions were not always planned in a strategic way with sustainability in mind and plans for follow-up, monitoring, feedback, improvement etc. This was not unique to UNICEF, other UN agencies were also criticised for doing ad hoc capacity development without insufficient structure and forward planning in the UNDAF 2011–2015 final evaluation.

2.3. Communication for development

Key Finding: The communication for development component has yet to start properly; it has been substantially delayed for internal management reasons. There appears to be good buy-in from government and civil society but adequate monitoring plans need to be set up to capture the potential effectiveness and impact of these social mobilisation activities.

This component involves behaviour change communication on nutrition, child abuse and environmental education (see Table 3). There are some visible outputs on the nutrition side. Maternal child nutrition will be properly rolled out in 2015 in partnership with the MOH and NGO, ARC, but as a precursor, pilot training of health workers took place, alongside training, IEC materials, and a mass media campaign targeting pre-school (mothers and teachers) in 2014. ARC collected positive feedback from children, parents and teachers. The campaign is obviously recognised and was mentioned by a couple of external stakeholders during evaluation interviews. Although not mentioned as a C4D intervention during the evaluation visit, the work with the Family Protection Authority (FPA) to raise public awareness on addressing gender-based and
domestic violence is worth a mention here. FPA records show an increase in the reporting of cases of domestic violence from 19 cases in 2013 to 90 cases in 2014 but it is not known if this can solely be attributed to the CP as many other efforts were underway at this time including the passing of legislation on domestic violence.

70. In terms of other campaigns, the activities on the child abuse prevention campaign are continuing with the aim of launching a national media campaign with the MLG and civil society coupled with demonstration projects in vulnerable areas in the south. The environmental education output appears to be a small-scale intervention which petered out, according to interviewees.

71. It is too early to identify outcomes aside from stating that there appears good buy in from the government for the nutrition programme. The MOH will lead on training health workers on growth monitoring and the MOE has already distributed IEC materials to primary schools. ARC will also be involved; it has good relations with TV channels and other media outlets. It has built up confidence over time with non-contentious subjects (e.g. road safety) and can now consider tackling taboo subjects like child abuse. Lessons learned from ARC’s previous campaigns on messaging include – making messages short and easy to remember, repeating the same messages in multiple ways, using authority figures e.g. policemen to talk about child abuse.

72. The communication for development strategy will not see full implementation till 2015. The nutrition programme was set back two years, it was originally due to be implemented in 2012 and monitored in 2013. The delay was due to problems with a consultant failing to deliver on materials in 2012. It then seemed to take MCO a long time to put the activity back on track. The precursor programmes involving the training of health care workers, teachers and parents were also said to have been carried out at the last minute, with only two weeks for preparation and implementation further impeded by bad weather and transport problems. It should be noted that most evaluation interviewees were unaware of any C4D initiatives. One stakeholder spoke of missed opportunities and said they would have liked to see a campaign on parenting skills.

73. Concerns were expressed as to whether the C4D activities have robust plans for monitoring behaviour change or the type of baseline needed to prove impacts. There is a process monitoring component which will enable healthcare workers to track the behaviour change of mothers and caregivers; and the baseline comprises of the 2010 nutrition analysis. The pilot and precursor initiatives carried out already did not include the systematic pre and post testing of training participants. As ARC was already working on a nutrition campaign prior to UNICEF’s support, albeit with a slightly different target group, further changes cannot be attributed to UNICEF without these baseline records. In terms of links to human rights and gender, these depend on the focus area; these elements are well integrated in child abuse initiatives but less evident in the nutrition and environmental initiatives. C4D by definition will work to empower rights-holders when it takes off properly.

2.4. Strategic partnerships
74. Key Finding: The programme has worked effectively with government stakeholders and maintained a steady relationship with NGO actors. Relations with other UN agencies are positive but improved coordination on all sides is called for. The programme is starting to focus on strengthening the capacity of communities, families and children themselves as rights-holders.

75. Outputs and outcomes in terms of strategic partnerships relate to the afore-mentioned activities carried out in conjunction with government, non-government and inter-governmental partners. Its partnerships with government are viewed very positively, aside from the higher level ambivalence towards the UN described in section C.1.4. on ‘Relevance’, at a working level, relations are good, typically government stakeholders describe MCO as, “really helpful and very grateful for support... very happy, staff very supportive”. MCO’s role in helping foster coordination among government departments was recognised. In a good practice example, MCO convened a multi-sectoral group of MLG, JJJ, MPS, MRC, MOE on child protection in education settings. Each agency brought specialist expertise, for instance, MRC had prior experience of similar programmes in schools settings while the MPS, JJJ and MLG provided guidance on inter-agency referral guidelines. A lesson learned for MCO was that engagement of key agencies from an early stage increases ownership and enables them to capitalize on each others’ strengths, and that coordination helps to bring in a range of lead and subsidiary agencies. In the area of juvenile justice which involves multiple departments and where coordination is not always good, UNICEF was urged to ensure that it facilitates cooperation, for instance, by making this a condition of funding.

76. The office has simultaneously sought to engage with a range of NGOs in the implementation of its programme, thus working both with duty-bearers in government and rights-holders in civil society. These partnerships particularly became important when government capacity was stretched after the civil service redundancy programme in 2010/11. Key partners include the Maldivian Red Crescent on DDR, Journey on the prevention of drug use and HIV/AIDS, and Advocating for the Rights of Children, on child abuse prevention, child participation and child nutrition. Aside from implementing programmes with these agencies through Programme Cooperation Agreements (PCAs), MCO also helped build their capacity e.g. Journey was supported to attend two capacity building events abroad.

77. As an emerging democracy, the Maldives does not have a strong civil society, and part of the strategy, as continued from the last phase, is to give voice to local NGOs and community groups. There are over 1000 registered CBOs/NGOs in the country but only a handful that are active in Male’, the main island. MCO has worked through Journey to help set-up and register fledging NGOs on three islands. These efforts to build civil society are a continuation of work under the previous CP. For example, MCO helped form Journey, from a group of founding individuals in 2005 to a registered organisation, and provided heavy investment to build capacity, including sending Journey staff on training to Indonesia for several months. Journey is now a recognised NGO and has recently won an award from the government. This is a good example of the long-term impact of UNICEF’s earlier CP.

78. Work with civil society and rights-holders also involves strengthening communities and families. This is approached via NGO partners as they were seen as better able to reach out to rights holders in the local community and from vulnerable groups. The programmes mainly involve providing information to increase knowledge and skills e.g. on DDR, drugs, HIV/AIDS, parenting skills. Efforts to empower communities and individuals to assert their rights appear at a relatively early stage e.g. Journey’s registration of NGOs, or the planned implementation in 2015 of ARC’s child participation programme which aims to give voice to
children. A study on child participation was prepared earlier in the programme but it seems to have taken some time for a practical intervention to come about for strengthening the capacity of children as rights-holders themselves. One government stakeholder called for more efforts to strengthen families and communities as institutions for improving child protection (particularly in Atolls where the government has family and children service centres) rather than a reliance on government. MCO recognises this as a valid point and intends to pilot community-based protection mechanisms in the coming year. It says a key lesson learned from the 2014 bottleneck analysis on violence against children was the importance of working with communities from the outset and at their own pace to increase community understanding and acceptance of issues and buy-in for planned interventions.

79. Stakeholders suggested UNICEF could play more of a role as mediator between government and civil society since it can be hard for NGOs to access information and to build those relationships. MCO sought to do this through the nutrition programme which involves both civil society in the form of ARC, as well as the MOH in a combined effort to tackle the problem. It could also facilitate links between civil society groups; MCO does not currently bring together its NGO partners but it may be fruitful to do so as they can benefit from each others’ experience. For instance, ARC has very good relations with the media and a track record in being able to get its messages out whereas Journey, working on more controversial issues related to drugs and HIV/AIDS finds it harder to get air time. Civil society actors are positive about the partnership with UNICEF. Some issues of contracting and internal coordination are raised separately under section C.3. ‘Efficiency’.

80. With regards to other United Nations players in the Maldives, the main issue arising is the need for improved coordination. Overall relations are positive, UN partners feel there is an open relationship and as programmes are small with finite resources, efforts are made to avoid overlap e.g. in an example from the previous programme, both UNDP and UNICEF were working on land management, UNDP dropped its work on water regulations when it realised UNICEF was doing something similar.

81. Nonetheless, the issue of coordination came out strongly in all interviews and was recognised as a responsibility on all sides. For instance, a recent case was cited where UNICEF, WHO and UNFPA were all planning international visits to the same counterparts in the MOH on the same dates. A government stakeholder appeared to place more responsibility at UNICEF’s door saying, “UN agencies have the One UN policy but they need to coordinate and have lot of overlap. If a government agency is working with 3 agencies, it is not able to focus on one work plan....UNICEF itself does not coordinate with other UN”.

Stakeholders gave a couple of specific examples where UNICEF had not coordinated with them as expected.

82. National stakeholders are adversely affected by the lack of coordination among UN agencies. For instance, the NDMC is said to be unhappy about being approached separately by UNDP and UNICEF on capacity building programmes, another example is WHO and UNICEF both approaching the MOH on the master plan and emergency preparedness plan respectively. Multiple agencies going to the government departments which are already overstretched and have limited capacity is clearly unhelpful.

83. The need for stronger coordination is recognised by all and the upcoming UNDAF and country programme planning among all UN Excom agencies offers an opportunity to do this. The thematic working groups are not currently working well. UNICEF appears to be chair/co-chair of three of the four groups. Concerns were
expressed by UNCT members that thematic group meetings rarely take place. The absence of a formal UN Resident Coordinator for considerable stretches has impeded effective coordination; along with the turnover of representatives in different agencies; and now the forced move to different buildings.

84. In terms of widening its partnerships, MCO is partnering with the core agencies that are fundamental to its work but interviewees suggested it might reach out more to other departments such as the Islamic Ministry. The office is already working with quasi-governmental bodies like the Maldives Media Council (which reaches out to journalists with capacity building activities) and the Human Rights Commission. It could reach out more to non-traditional actors such as the private sector, private colleges (e.g. teacher training), parliamentarians etc.

2.5. Knowledge management

85. **Key Finding:** The programme has performed well on the research side, having produced a number of quality analyses on issues affecting children in the Maldives. The use and viability of its studies, databases and other activities has not always been adequately assessed in advance. MCO has been particularly weak in monitoring its own activities; and failed to capture much valuable information about the effects and impacts of its own interventions.

86. This strategy has resulted in numerous outputs in terms of studies/assessments; the setting up and management of national databases; and training courses (Table 3). The consistent challenge in this area was to turn these outputs into outcomes:

➢ MCO’s extensive research on issues affecting children (see Table 3) is well-regarded and considered very beneficial by government stakeholders, the child rights mapping assessment and the education baseline were cited as examples which helped lay the foundation for the government’s work in those areas. Also worth mentioning here is MCO’s work on laying the ground work on social policy advocacy (due to start this year) by budget expenditure analyses with the MOF which highlights inequities in line with a HRBA approach. The main issue, as reported by staff and government stakeholders, is the inconsistent use of these reports by line ministries. Government interviewees say that MCO needs to market its reports better and promote their use in decision-making, pointing, for example, to other UN agencies that seem better able to bring their data to the discussion of annual work plans. Sometimes in the case of sensitive findings, the government itself has been unwilling to publish reports risking non-implementation, for instance, the still unpublished 2009 National study on Violence against Children.

➢ MCO has also been working with the government to develop consolidated databases of national information and data. It began supporting Maldivinfo the government information system under the last programme; in this phase the work has involved integrating further datasets, developing promotional materials, and training. The generation of gender disaggregated data has been emphasised. The consistent feedback from government stakeholders is that the system is not being used; officials still contact the National Statistics Bureau to obtain data instead of going online to seek it themselves. The impacts on decision-making or decision-makers appear negligible. The system is not considered easy to use, and attempts have been made to improve user-friendliness and
accessibility including through e-learning. Due to its lack of use and the difficulties in updating the system, it has not been kept up-to-date, which in turn, further reduces its usefulness.

Government stakeholders are still doubtful that the system will be used despite measures to improve accessibility but say “the penny has not dropped with UNICEF”. Unfortunately trainees/users have not been surveyed to understand why they are not using the system and what would make them do so. The assumption at least on the part of the government is that people are resistant, “afraid of data and not confident enough to do selves”. The plan to expand the system to collect Atoll level data is also proving challenging; according to government interviewees, the atoll trainings were unsuccessful as there are no officials to take up these issues at atoll level – only a few islands have statistical officers. MCO also had an ambition to set up an integrated government-wide information system which gathered data all departments. However, this idea did not move forward as each had their own formats and systems and weren’t interested in adapting and merging their data. Nor has MCO adequately considered the human rights and privacy debates around such government information systems taking place elsewhere in the world and the appropriateness of UNICEF promoting such initiatives.

➢ The child protection database has faced similar problems; the initiative began in 2010 under the last programme with the aim of enabling both the Maldives Police Service and Law and Gender Ministry to share data. The idea was a start to finish child protection case management system for the common use of police and social workers. However, a review last year found reluctance in the police to use the system as they already had their own (incompatible) information system which meant they would have to enter the data twice to use the child protection database. In addition, they had concerns about confidentiality. MCO says further training has taken place since then with the police and law and gender ministries. Feedback received by the evaluation suggests there is still uncertainty and a lack of ownership of the system among government stakeholders. Support to databases has been a major plank of MCO’s knowledge management work but these initiatives appear to have been started without a proper assessment of feasibility or needs, or adequate monitoring to understand how and whether the systems are being used or what improvements are needed.

➢ MCO carried out RBM training for different ministries to enable them to monitor and evaluate national programmes but it didn’t follow-up to see if this learning was being applied either to MCO or other programmes. For instance, one ministry said that UNICEF funded them to carry out M&E training in 7 atolls following a training course by AUSAID in 2012 but that it didn’t follow-up to see what difference it had made. M&E materials were translated into the local language but the ministry thinks it unlikely they were used. The relevance of MCO taking on the responsibility for RBM training across government when there might have been better placed agencies to do this is also a question (see section C.1.5 ‘Relevance’). MCO’s good support in setting up the Masters of Social Policy was acknowledged by external stakeholders.

87. Knowledge management also covers the monitoring of MCO’s own programmes and this was widely seen by staff as one of the main weaknesses of the CP. Responsibility for monitoring rests with each programme area and all are agreed that this happened in a haphazard way. MCO staff themselves did not have time to do monitoring, often only managing 2-3 field visits a year, and government and NGO partners appeared to have approached monitoring at different levels according to evaluation interviews. Government
stakeholders also say UNICEF could be more hands-on, accompany when go to field, give monitoring and feedback though recognise they lack manpower. Staff were on a week long training on Programme Management and Monitoring during the evaluation visit. The lack of systematic monitoring of the many capacity building activities is discussed in section 2.2. ‘Capacity Development’.

88. During the finalisation of the evaluation report, information was provided by MCO on results being monitored and reported on the Results Assessment Matrix (RAM) at the start, middle and end of each year. This tracks progress on activities/outputs under each of the outcomes. As this information was not available during the evaluation research, the evaluator prepared a separate summary (annex 8). Also on a monthly basis, the CP monitors and reports on the utilisation of budgets, and does a stock-take of programmatic progress using the traffic light system. These activities indicate monitoring is taking place in different ways but on the other hand as noted above, multiple informants raised doubts about the quality of the CP’s monitoring system. It appears that while monitoring is taking place it is not yielding the type or depth of information considered useful to the programme which may in turn reflect on the adequacy of the results framework and indicators to show meaningful progress.
### Table 3: Mapping Strategies, Outcomes, and Outputs

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<tr>
<th><strong>Outcome 1</strong></th>
<th><strong>Outcome 2</strong></th>
<th><strong>Outcome 3</strong></th>
<th><strong>Outcome 4</strong></th>
<th><strong>Outcome 5</strong></th>
<th><strong>Outcome 6</strong></th>
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<tr>
<td>Children enjoying the benefits of improved child rights legislation, policies, regulations, and plans and contribute to legislative processes;</td>
<td>Disaggregated data and information that contribute to the realization of child rights are accessible, analysed and used;</td>
<td>Families enjoy quality health care, and practise improved nutrition and hygiene behaviours and are equipped with the knowledge and skills to prevent drug abuse and HIV/AIDS;</td>
<td>Children enjoy learning in an inclusive child-friendly environment and are aware of sustainable environmental practices;</td>
<td>Women and children benefit from a preventive and responsive protection system, and children benefit from a specialized juvenile justice system;</td>
<td>Child rights awareness is enhanced through active monitoring and reporting by civil society groups and media;</td>
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**Advocacy**
- Child rights, child care and protection bill and also Juvenile Justice bill both initiated under last CP and not yet passed
- Other initiatives at an early stage – Youth Bill, regulations on persons with disability
- High level meetings with Attorney General, Speaker of the Parliament

- National integrated database
- Evidence-based policy-making

- Nutrition/stunting (Ministers participated at regional meeting and conference in Rome) MCO self-report that this led to nutrition having greater priority in government
- High level meetings with MOH

- Couple of MCO recommendations for new curriculum adopted by Curriculum Steering Committee (according to MCO self-report)
- Special educational needs (government held conference in Maldives; advocacy by office for more comprehensive approach not yet fruitful)
- High level meetings with MOE

**Capacity Development**
- ARC – preparing alternate CRC report
- HRCM – human rights monitoring (not yet started)
- Support sector emergency plans – child protection, health, education, WASH
- Training National Statistics Bureau on Maldiv info
- RBM training with Ministries and support for training in atolls (outcome 2)

- New born care training with MOH (2-3 programmes covering 100 people in 13 atolls)
- Breastfeeding with MOH (2-3 programmes covering 100 people)
- Nutrition with MOH (3 programmes covering 58 people)
- Vaccine management tool to be rolled out
- TOT on integrated management of childhood illness (5 atolls)
- Growth Monitoring Promotion trainings (2)

- Tools to evaluate Child friendly schools (taken over by World Bank)
- Support and training on curriculum development
- Training of subject teachers on new curriculum
- SEN in teacher training college
- SEN peer training and study tours
- Life skills pilot training in 12 schools. LSE rolled out to

- Training police investigating officers with Maldives Police Service (since 2009 trained 250 people)
- Funded 3 persons from Maldives Police Service on study tour of Australia
- Training Maldives Police Service on investigating victims with speech and hearing impairments.
- Training judiciary (outcome 5)
- Training social workers with Maldives National
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<tr>
<th>Communication for Development</th>
<th>- Support to set up Masters social policy</th>
<th>- Infant Young Child Feeding Practices Training</th>
<th>- all schools mostly with government’s own funding. - Support National Disaster Management Committee with local consultant</th>
<th>University and MLG (outcome 5) - Life skills for juvenile offenders and parenting skills with JJU</th>
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<tr>
<td>- Child abuse prevention campaign preparations</td>
<td>- Training health workers on nutrition (pilot in 2 atolls) - Pre-school and teachers/parents awareness-raising (ARC)</td>
<td>- Maternal and child nutrition campaign preparations - Pre-school nutrition media campaign (ARC)</td>
<td>- Environment education in 2 schools (through NGOs)</td>
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<tr>
<td>Knowledge management</td>
<td>- Studies outcome 2 (social protection; - Maldiv-info - Social Policy initiatives – Budget Review with Ministry of Finance; Sitan focusing on disparity and inequity; support to design Masters in Social Policy</td>
<td>- Studies outcome 2 and 3 (decentralisation; bottleneck nutrition) - Guidelines outcome 2 and 3 (IMCI module; Newborn care protocols; Nutrition guides/IEC materials) Growth Monitoring Promotion Assessment - Growth Card Reviews - Desk Reviews of Neonatal and perinatal records and Birth Defects - Health management system (no work on this yet)</td>
<td>- Studies outcome 2 and 4 (baseline on impact of curriculum reforms); - Disability and Education regional report</td>
<td>- Studies outcome 2 and 5 (mapping of child protection system; CSEC study, assessment of institutions - Database for child protection</td>
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<td>- Maldives Media Council</td>
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3. EFFICIENCY

Efficiency is understood as the way in which UNICEF manages its resources, including partnerships, with a view operationalizing its strategies, implementing activities and delivering outputs.

89. Key finding: The efficiency of the programme has been somewhat undermined by a mismatch from the outset between the resources available, the planned administrative and staffing structure and the outcomes expected by a wide and unrealistic results framework.

The following issues were raised with regards to the adequacy of the office structure to meet the needs of the programme:

90. Continuity – The MCO has been under the direction of three different representatives in this phase: first representative from 2010 till June 2011; second representative from June 2011 to December 2013; and the third and current representative from March 2014. While this is in keeping with UNICEF’s rotation policy, the handover and transition between representatives affected continuity especially in an unstable external environment where there was room for interpretation of MCO’s role.

91. Supervision - MCO staff and government interviewees questioned whether the office structure allows for enough supervision, oversight and guidance to staff, particularly in light of the various ad hoc initiatives carried out, seemingly without proper planning. External interviewees mentioned the importance of having technical specialists in charge of programme areas so as to ensure timely and expert inputs. MCO relied much on external consultants and contractors for delivery and problems with managing their work came up. The nutrition activity particularly was set back by two years because the first consultant hired to develop materials failed to deliver. The education ministry also referred to a consultant hired to work on the teachers’ guide who did not perform as expected. MCO staff remarked on the time it took to organise and select consultants, sometimes having to manage more than one person at a time meaning they didn’t always have enough time to engage with or get the most out of the consultancy. One of the programme’s NGO partners also failed to deliver the environmental education programme on Maafushi island. MCO was quick to respond when islanders complained and expressed much regret and embarrassment at letting islanders down.

92. Workload distribution - A number of staff raised concerns about the uneven balance in workload distribution with a particularly heavy workload falling on one programme post assigned to cover Young Child Survival and Development (Health, nutrition, WASH), HIV/AIDS, drugs, education - evidently too wide a programme area for any one person to handle. The evaluation is unable to say what the workload is in practice but table 3 indicates an asymmetry in initiatives carried out in different programme areas. Staff mentioned that the original design was light on permanent staff with the understanding that temporary assistance would be brought in as and when needed. This didn’t materialise in practice since it was not explicitly written down in the CP. In addition the structure appears to have been premised on the idea of programme staff being high level coordinators only. Even for such a role the allocation of resources is underestimated resulting in a mismatch in the CP between the results expected and the staff and other resources needed to achieve those results.
Coordination – Stakeholders feel MCO is too compartmentalised in its way of working. This means uncoordinated demands on them from different programme areas for some, while others find it a challenge to work with UNICEF on cross-cutting approaches such as parenting skills. The cross-cutting specialisms, knowledge management and C4D, in particular, have not effectively integrated with focus areas as seen by the lack of monitoring of interventions and the delays in starting the communication initiatives. There are multiple avenues for sharing information and planning including weekly, monthly, bi-annual and annual meetings. It is unclear if these have always worked well as staff told the evaluation there was a lack of opportunity for internal sharing with monthly meetings tending to focus at a superficial level. The intensive Programme Review process introduced in mid 2014, after the MTR, involves the monthly tracking of results; it uses the traffic light system to mark progress and gives opportunities for intense discussions on programme issues.

These internal structural issues have undermined the efficiency of the programme. The breadth of the programme as discussed in section C.1. ‘Relevance’ section along with the imbalance in workloads, and inadequate supervision and coordination, inevitably meant limited time available for planning and implementing interventions in the optimum way possible, as one interviewee said “One person is not enough, we can’t be present and be relevant, we can’t provide technical input and follow-up, we need more than one person for this”. The need to multi-task in small office is understood but the sheer diversity of programme areas was found to be a drawback, as one person put it “we have been amateurish, trying to cover all areas has been at a cost”.

The underlying problem is the way the office was structured. It was organised around two clusters; the capacity building programme areas (child protection; health; education) and the cross-cutting issues (knowledge management, communication for development). Both these clusters were to be headed by senior national officers, a programme coordinator, and a social policy specialist. However, it proved impossible to hire a social policy specialist due to a lack of national capacity, which resulted in the Representative supervising that cluster and the Programme Coordinator, overseeing the other cluster. This structure has now been revised starting in 2015, a flat structure has been created with the Representative directly overseeing all programme areas; the addition of a new international social policy specialist, and by splitting the YCSD post into two roles. The new structure deals with the workload distribution and offers better prospects for supervision, synergy and continuity.

Box 2 Some problems with the results framework
- Design is illogical, instead of a hierarchical structure which builds up from outputs to outcomes in key focus areas, results are framed around two programme component clusters (or strategies). Nor does the framework make clear what degree of control MCO has to influence results at each level.
- Un-SMART indicators e.g. Unrealistic targets – sometimes too high (e.g. outcome 1- 3 new bills by the end of 2014 including a Youth bill which was only initiated in 2014 but on the other hand doesn’t take account of fact that 2 bills were initiated previously; or under outcome 3, Under 5 underweight prevalence to decrease from 17.3% to 10 %) or sometimes too low e.g. outcome 4 – number of schools progressing with Child Friendly Schools standards. Targets are uneven also, with attempts to introduce new bills put on the same level as amending departmental plans (outcome 1)
- Verification is left to government records for the most part without clear notation on which records and how they would be monitored.
- Imprecise wording which mixes too many ideas e.g. outcome 3 refers to policy planning, a responsibility of the government, and advocacy, an activity by UNICEF; outcome 4 combines education environment with environmental education into one.
- Confusing layout and numbering, and basic inaccuracies e.g. targets set for end of 2015 when the programme ends midway through the year.
96. The results-based management framework (Annex 8) is a flawed document which has not aided the effective management of the programme. Staff admit that they didn’t really understand it and saw it as a task master driving forward unrealistic expectations rather than a living tool intended to help them reflect on and manage their work. The RBM framework sets out a programme that is too broad, with unrealistic outcomes and indicators, and an illogical structure organised under the two programme component areas (also carried through to the organisational structure as described above). External stakeholders from the UN and government departments also comment on the inflexibility of MCO’s approach to programming. One government stakeholder said they didn’t understand what the framework expected of them,

“we don’t know what the country programme is about, it’s very broad, there are no proper indicators, visualisation is not there. The results matrix has broad outcomes but no outcome indicators, just operational indicators so we don’t know if we’re achieving anything, we can’t tell progress. We need to know what should be priority data and have clear targets on disaggregation.”

97. The MTR, carried out internally, was the first opportunity for the office to collectively reflect on how the programme was performing. It led to some key realisations about the need for a stronger equity focus which targeted specific areas with marginalised and deprived populations; a better understanding of the results framework, baseline, and relevance of the programme to the country context and UNICEF’s mandate; and a recognition of the need to change the office structure to better address workload issues. The MTR took place over the course of 2013 finishing in November that year and led to redefining the focus of the office on north-central for stunting and south for child protection; a refocus on issues affecting adolescents (proposed youth bill, and partnership with Ministry of Education on out of school youth) and a restructuring of the office.

98. Despite these changes, some staff feel the MTR did not get to the bottom of the problem as the work of the office was not scaled down. It also seemed to take a long time (since September 2013) to bring about the changes that will happen in January 2015; in the meantime some temporary assistance might have alleviated the situation. The MTR recognised issues with the framework but didn’t dissect the problems enough. As a consequence, the current framework which was revised after the MTR by an external consultant, continues to be problematic. Staff say they were not much consulted in this revision and little was changed except a few indicators, the outcomes stayed the same. Box 2 sets out some issues (non-exhaustive) with the current results framework. Following up on the MTR has also been affected by the change in Representative, 3 office moves, and CP development discussions which began in June 2014.

99. In terms of other issues, on the administrative side, no issues were raised and government stakeholders said they preferred to let UNICEF manage as much of the finances as possible given the delays caused in dispersing funds through the government’s centralised financial system. Staff were generally positive about the support and expertise from the regional office (e.g. social policy support in the absence of a staff member), as well as the opportunity to learn from other country offices in the region e.g. Bangladesh on infant feeding; learning about demonstration projects from other offices. MCO also had internal technical support in the form of short-term assistance of staff from other office in the regions. MCO was particularly helped by a bottleneck analysis on violence carried out by a staff member from Bangladesh which helped staff understand equity issues in child protection and to apply UNICEF’s normative principles in conducting assessments. A lesson learned for MCO is that internal support increases efficiencies as the costs and uncertainty of external recruitment are eliminated. While there were some opportunities for south-to-
south and international exchange for programme partners, there appears a need for more learning on international best practice to avoid reinventing the wheel (e.g. juvenile justice programming) or learning from other countries, outside the region if necessary, facing similar logistical challenges in public service delivery in a dispersed territory.

4. SUSTAINABILITY

Sustainability is understood as the extent to which measures have been, or expect to be, put in place with a view to ensuring the medium to long-term ownership of rights holders and commitment by duty-bearers and their national and international development partners.

100. **Key finding:** The programme has had some notable successes in this phase in terms of the institutionalisation of key initiatives. Despite this, the durability of measures has been undermined by external instability as well as insufficient consideration of sustainability in the planning and design of interventions.

101. MCO’s efforts to foster long-term responsibility among duty-bearers for child rights can be seen at different levels. The work on introducing new legislation on child protection, juvenile justice and in other areas offers the best means of institutionalising such commitments but has yet to bear fruit. While this could have been strengthened by taking a more strategic advocacy approach as noted earlier, given the political turmoil facing the country; it is uncertain whether more success could have been achieved. Some work on lower level policies and guidelines has had more acceptance from the government. For instance, the MOE sees the child protection in education settings policy as a very useful contribution and is considering how to disseminate it across the sector.

102. Much of the programme activity has been taken up in the capacity development of government partners as a way of achieving sustainable and positive change for children. Some initiatives are strongly owned and are on their way to becoming part of the fabric of government policy and programmes. Notable examples include:

- Life skills courses which were initiated under the last programme in collaboration with UNODC and UNFPA were piloted in 12 schools. The Education Ministry has committed to roll this out to all 240 schools in the Maldives with a requirement for schools to integrate this as part of the curriculum. This success can be attributed in part to the previous CP and also other agencies.
- Child Friendly Schools approach, also initiated in the last phase was continued in this phase with further training and evaluation in two atolls. The initial training targets were surpassed and the Education Ministry is now planning to scale up this work with funding from the World Bank, so this success is also partly attributed to others.
- Early Childhood Development ToT was funded by UNICEF and then disseminated by the Ministry of Education to 900 teachers in 240 preschools.
- The Family and Child-Centred investigation course funded by UNICEF since 2009 has now been taken over by the Maldives Police Service and integrated into their national training as a specialised course.
• The Juvenile Justice life skills training for juvenile offenders has also become mandatory following a consultation among key stakeholders from the police, judiciary and juvenile justice units, although government has not committed funds to this as yet.

103. However, many more capacity development initiatives comprised of short-lived, piecemeal interventions with few if any prospects for continuation beyond the programme’s investment. As discussed in the ‘Capacity Development’ C.2.2. section, examples include training on ICMI, Results-based management; environmental education, social worker training.

104. Reflecting on why some initiatives are more sustainable than others leads to an obvious observation that most of the successful projects are in the education sector. This is the only ministry that has remained fully functional and intact over the programme period and which is able to engage with MCO’s upstream policy work in the way intended i.e. by taking on board suggestions for new policy developments, seeing these demonstrated in action and then taken them forward to a national level. The health sector which has faced the most disruption offers little prospect of continuing programme initiatives. Key departments dealing with child protection have also faced much disruption. It is positive that the family and child investigation course has been taken on by the police but this is only after years of funding (since 2009), the demonstrated success of the course and a clear message from UNICEF that it would be unable to continue supporting it. Overall, few government stakeholders had anything to say on the issue of sustainability in evaluation interviews.

105. The external situation was evidently a constraint. MCO says that the interventions, in most cases, were not stand-alone projects but fed into addressing the gaps of the larger government system. It also takes the view that the reason why some initiatives have not yet been rolled out or institutionalized by government is largely due to the change of priorities that comes up with change of governments rather than a lack of progress or monitoring. The evaluation arrives at a different conclusion and finds that the programme did not help itself by giving too little attention to sustainability when planning interventions. MCO could have increased the likelihood of its capacity development work being scaled up through improved design and monitoring. A number of examples were discussed earlier under section C.2.2 ‘Effectiveness’. For instance, the IMCI training is difficult to scale up, it is a lengthy course of five days and 13 modules: it can’t therefore be integrated into existing medical training which already covers the same subjects but in less detail; and the resources and commitment is missing to extend the training across the territory. In any case, the high turnover of doctors and reliance on expatriate staff makes it a challenge to embed and institutionalise this learning. MCO might have better assessed these challenges at the outset and designed a more suitable programme e.g. producing an online course to supplement existing medical training, integrating the course into nursing and health worker training (as is being pursued now by MCO); promoting the idea of an induction course for expat doctors which would match well with political concerns about the quality of services etc. As one government interviewee observed, a key lesson learned is that it is not enough to develop guidelines, there needs to be a plan for implementation and monitoring as well.

106. The programme has also worked with local NGOs to facilitate the delivery of its programme and with a view to building civil society capacity. Journey, as stated before aims to sustain its life skills training programme on drugs and HIV/AIDS by setting up community-based organisations to fund-raise and replicate these courses in the future. It is awaiting registration of a local organisation known as RISE set up on Maafushi island as part of the work done for UNICEF. This is at a nascent stage and it remains to be seen
if this can work; interviewees in Maafushi thought it would be challenging to continue this work due to lack of funds, technical skills and also a general lack of willingness to participate, “people are busy with work, it’s hard to engage them, I don’t know if they will make the effort to raise the funds needed to carry on this work”. From the short visit to Maafushi island, questions may also be asked about the convergence approach of carrying out multiple interventions in one location. The interventions were so small and short-lived that there didn’t appear to be any significant change that could be attributed to UNICEF. Apart from UNICEF being known on the island, there appeared no lasting effect of multiplying interventions in this way.

107. Impact is not a part of this evaluation report but it’s worth highlighting the complexity of tracking such changes. For example, in relation to Journey’s life skills/drugs awareness work, most of the young people who participated are now in work but Maafushi islanders said they couldn’t tell if that was due to the course or the fact that increased opportunities for work in the tourism sector came up at the same time. In addition, it seems that most of the youth who participated were well-balanced anyway and likely to end up in jobs with productive lives. In any case interventions that aim to reduce risky behaviour are very difficult to assess and highlight the need for rigorous methodologies. In another example, Maldives Police Force said crime statistics are lower in 2012 than in 2011 but it can’t attribute this change to the UNICEF-funded course as the unit itself was referring a lesser number of cases to prosecutor due to a lack of evidence.

Section D. CONCLUSION AND RECOMMENDATIONS

1. Summary of findings

108. Relevance: It has been difficult for the programme to find its optimum relevance in an ever-changing external environment consisting of political and economic changes. All its work is accordant with the context in a broad sense but a sharpened focus on priority issues affecting the most disadvantaged only began to come about at the mid-stage of the programme. The programme should be further narrowed to ensure that its limited resources are put to maximum effect.

109. Effectiveness: The CP has been prolific in the number of outputs achieved across a wide range of focus areas. Some of these have led to higher level results which show evidence of change in knowledge, attitudes and behaviour among beneficiary groups, or the adoption and scale up of initiatives nationwide by government counterparts. The programme has not always been successful in turning its extensive activities into outcomes, partly due to external constraints but also because the programme’s planning and monitoring framework did not facilitate or capture such results. The findings on each of the programme strategies are as follows:

   Advocacy: The CP’s advocacy efforts are not seen as particularly effective in this phase. The unstable political and social environment was no doubt a major constraint but the programme might have increased its chances of influencing key decision-makers by taking a more strategic approach.

   Capacity development: The CP produced numerous capacity development outputs of high quality; some have gone on to have lasting effect but rather more have constituted ad hoc initiatives planned without adequate reference to sustainability by national structures.
**Communication for development:** The communication for development component has yet to start properly; it has been substantially delayed for internal management reasons. There appears to be good buy-in from government and civil society but adequate monitoring plans are needed to capture the potential effectiveness and impact of these social mobilisation activities.

**Strategic partnerships:** The programme has worked effectively with government stakeholders and maintained a steady relationship with NGO actors. Relations with other UN agencies are positive but improved coordination on all sides is called for. The programme is starting to focus on strengthening the capacity of communities, families and children themselves as rights-holders.

**Knowledge management:** The programme has performed well on the research side, having produced a number of quality analyses on issues affecting children in the Maldives. However, the way in which knowledge products (studies, databases) are used requires more follow-up. The CP has been weak in monitoring its own activities as noted above.

In summary, ‘capacity development’ and ‘knowledge management’ strategies resulted in high numbers of outputs such as training events, studies, guidelines etc. but immediate outcomes were not systematically captured by the CP’s M&E system. Planning was also an issue, with interventions carried out in an ad hoc manner without sufficient regard to feasibility or sustainability. ‘Advocacy’ was challenging in an unstable political environment but might have been more effective with an advocacy plan in place. ‘Communication for Development’ was delayed for internal reasons. The two track approach to ‘Strategic Partnerships’, working with government and civil society simultaneously, and seeking through the latter to reach communities, families and children was effective. Overall, effectiveness could have been increased by better planning coupled with stronger M&E.

110. **Human rights and gender:** The human rights based approach mainly involved intensive efforts to build the capacity of duty-bearers and to a more limited extent, advocacy to hold them to account. Engagement with NGOs was the main route to supporting rights-holders. More community level work is planned in the last year, including child participation activities. Child rights were expressly addressed through work on legislation and incorporated to varying levels in different projects; being well integrated in protection interventions but less explicit in other sectors such as health and education. Gender mainstreaming involved segregating of data by gender in all databases and data collection activities. There were also specific initiatives concerned with gender-based violence and domestic violence. Again, the protection sector addressed gender concerns more explicitly than other focus areas.

111. **Efficiency:** The efficiency of the programme has been undermined by a mismatch from the outset between the resources available, the administrative and staffing structure and the outcomes expected by a wide and unrealistic results framework.

112. **Sustainability:** There have been some notable successes in the institutionalisation of key initiatives. Despite this, the durability of measures was affected by external instability as well as insufficient consideration of sustainability in the planning and design of interventions.
2. Conclusions

113. The programme has been very active and led to multiple visible outputs in the areas of child protection, education and health. In some cases, this has meant higher level results in terms of increasing knowledge among programme beneficiaries, or the scaling up of initiatives by national authorities, for instance, in life skills education, early childhood development, family and child investigations, and child friendly schools.

114. The programme may have had more immediate outcomes than it is able to prove. It was let down by not having a systematic monitoring system which captured results adequately, for instance, pre and post activity questionnaires to capture the change in knowledge, attitude and behaviour of the participants in many of its training activities were not much deployed. Whether these immediate effects would necessarily have led to higher level outcomes is another matter. Integrating new interventions into government policies and programmes depends on external factors. The successful initiatives mentioned above, actually originated under previous country programmes, and also depended on the contribution of other organisations. The passage of legislation can likewise take years as proposals are tested against needs, existing legislation, the legislative agenda, political priorities and so on.

115. While high level outcomes are outside the programme’s control, the likelihood of achieving them can be affected by the design of an intervention. While there were external constraints, it is unclear if there were any initiatives, demonstrated by the programme to be viable for national scale up, that fell by the wayside - informative training courses aren’t in themselves necessarily suitable or cost-effective for national expansion. Indeed, much of the programme’s activity in capacity development and knowledge management appears to have been carried out without sufficient regard to such questions of feasibility or sustainability.

116. While the external environment was challenging and characterised by political change, social unrest and uncertainty among national partner agencies, the programme itself was not well braced for dealing with such difficulties. A recurring theme across all evaluation findings points to questions over internal organisation. The starting point was an overly ambitious intent to work across a wide breadth of child rights and development issues without taking sufficient account of the correspondingly limited resources and capacities available to MCO. This was further compounded an office structure that hindered effective coordination and a results framework lacking in logical measurable targets. MCO staff were inevitably overstretched chasing to keep up with a diffuse and unrealistic plan without the time for proper consolidation, reflection, and coordination. The common finding across all the programme strategies of advocacy, capacity development, communication for development and knowledge management is one of random interventions whose results fell through the cracks of the programme’s monitoring system.

117. Little of this will come as a surprise, the office has engaged in much self-reflection over the past couple of years since the start of the MTR. Staff express disillusionment with this phase and regret at the loss of gains and momentum made in the last cycle. A key lesson learned for the office has been that its resources and capacities were insufficient for meeting the expected results. In recognition of this, some adjustments

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17 Information on programmatic lessons learned and good practices obtained by the evaluation are integrated in the main body of the report (see for example paragraphs 71, 75, 78, 98, 104) as they do not fit with this higher level overview of the programme. Interviewees did not comment much on these aspects and the evaluation itself did not engage deeply enough with the programme to make its own observations.
have been made to the office structure and the results framework as the country programme enters its last year.

118. It is difficult for the evaluation to say why this situation came about and why it has taken so long to resolve. There was no shortage of planning meetings before the start of and during the country programme. The answer may partly lie in the transition from a from a large well-funded tsunami programme, with the resources and the mindset to cover everything, to a more nuanced role in a middle-income country based around upstream policy support. The programme is still finding its niche but there is increasing understanding since the MTR of the need for MCO to capitalise on the strengths of UNICEF as a rights-based organisation and with a particular focus on issues concerning equity and disadvantaged groups. UNICEF Maldives is a separate entity from the government and its role accordingly should be discretely and selectively defined; it is not responsible for all areas of public policy (unlike the government) and nor can it leave the monitoring of its activities in government hands. It has its own mission to deliver and structures of accountability to answer to.

3. Recommendations

119. These recommendations are directed to the MCO for consideration when developing the next country programme. It is difficult for the evaluation to know which level to pitch the recommendations at as many of the issues raised here are very fundamental to the design of the new programme and are not amenable to short and simple recommendations. The evaluator has not participated in country programme planning meetings and the evaluation itself has suffered several constraints. Under the circumstances it would be inappropriate for the evaluation to make very directive recommendations. Instead the evaluation highlights a number of over-arching recommendations which can help put the new country programme on a better footing and then supplements these with commentaries giving further explanations and ideas on how the recommendations can be implemented.

1. Narrow the CP to a reduced number of outcomes, focus areas and topics

The strategic positioning of the CP can best be helped by narrowing the focus to a more limited number of areas which it is able to address in a holistic way. The evaluation gives a suggestion earlier (section C.1.15. on ‘Relevance’) as to how this choice can be made but it is for MCO to find its niche based on an assessment how its own strengths match the needs of the context, taking into account the role of other actors and the division of labour under UNDAF. There is a sharpened focus on inequities/disadvantaged groups since the MTR on sexual abuse in the South of the Country and nutrition/stunting in the North-Central region. It is not clear that this is an exhaustive list since the MTR also calls for ‘more attention to natural disasters’ and ‘more focus on adolescents and young people’. All of this leaves the field wide open unless the office can be very disciplined in what aspects it chooses to work on. The focus on youth/adolescents for example fits well with national priorities and may be the theme for the next UNDAF; if so, the office should resist the temptation to be involved in all focus areas simply because the age group falls under UNICEF’s mandate. Staff expressed hesitancy in evaluation interviews to dropping any focus areas/topics which risks the next CP becoming too broad and unmanageable once again. MCO may find some guidance in the approach of similar sized programmes of UNICEF in other MIC countries or other UN agencies in the Maldives, most of whom are forced to selective.
2. Ensure the results matrix is logical with SMART indicators

The results framework should be logically ordered to progress from activities organised by strategies leading to outputs which then lead to outcomes. The current matrix, also reflected in the office structure, organises the work of the programme by groups of strategies which is confusing and impedes the effective integration of strategies into each focus area/outcome. The office has found it challenging to establish a workable results framework, and even the changes made after the MTR have not helped turn the matrix into a useful planning and management tool. The new CP is being developed through an intensive participatory process which should yield an appropriate framework. However, given the challenges of the past, the evaluation suggests that the draft framework be sent to independent M&E experts for rigorous review before it is adopted. Going forwards, UNICEF HQ may consider developing an independent review process for country programme planning documents, similar to the Global Evaluation Reports Oversight System (GEROS), for evaluation reports, to ensure country programmes are based on a sound foundation.

3. Set up a systematic process for monitoring the immediate outcomes of capacity development and knowledge management activities

It was a loss to the programme that evidence of its outcomes from capacity development was not systematically gathered; it meant the programme could not demonstrate the achievements of its work or ensure a cycle of continual learning and improvement. Standardised tools for pre and post testing the changes in knowledge, attitudes and practice of programme participants should be developed and systematically used. Similar tools can be developed for gathering responses to knowledge management products such as studies and guidelines. It is noted that the office experienced a burden of monitoring and reporting in this phase due to the wide breadth of the programme. A narrower programme in the next phase, will allow the office to monitor a reduced number of interventions in more depth rather than focus at a superficial level on a diverse portfolio. There should be a comprehensive monitoring and evaluation plan to capture the outputs, outcomes and impacts of the next CP.

4. Improve systems for the planning and testing of proposed interventions

Clearly a number of initiatives would have benefitted from more forethought at the design stage. The evaluation does not know why this didn’t happen given the many opportunities that exist in the office for such discussions ranging from weekly meetings to annual reviews. It may be that these systems have not worked so well over the life of the programme or that as with monitoring, the office was overwhelmed with tasks and didn’t have enough time for in-depth reflections when the initiatives were started. The office may wish to reflect on how to improve these internal planning meetings to better support all its strategies. One specific suggestion is for MCO to set up an internal system for assessing proposed interventions in a standardised way to test for feasibility, viability and sustainability before they are given the go ahead. Linked to this it may also consider developing plans for specific sectors/approaches e.g. advocacy plan.

5. Ensure the office structure facilitates coordination and oversight
Despite being a small office, the office structure impeded proper coordination, supervision, continuity and division of labour. The organisation of the office into two clusters which separated out focus areas from key strategies was unhelpful in facilitating integration. Communication for development and knowledge management needed to be part of the approach to achieving outcomes in all focus areas. MCO recognises this and has instituted a new flat structure which enables the Representative to supervise all areas more closely. This recommendation is therefore more of a reminder that the office structure for the new CP should not repeat the mistakes of the past. MCO may wish to consider further integration, for example, by making knowledge management and C4D part of every programme area responsibility. In designing the new office staffing structure, the role of staff merits re-consideration. The current CP appeared based on the premise that staff would be coordinators/administrators bringing in technical specialism as needed through a series of consultants. This has not worked so well in practice. Stakeholders reiterate the need for staff to be technical specialists and say this made a difference to their work. In addition, much administrative time was taken up in hiring and supervising consultants with lengthy delays caused to the programme when consultants failed to deliver. MCO should consider going a structure under a reduced number of outcomes where staff are technical specialists carrying out the substance of the work themselves.
ANNEXES
Annex 1 List of Contributors

All persons listed here contributed to the evaluation through a face-to-face interview during the evaluation visit. Names marked with an asterisk (*) provided additional information by email and skype/telephone.

UNICEF

Ms. Shadiya Adam, Communication for Development Officer
Ms. Shahula Ahmed, Programme Specialist, Young Child Survival and Development - YCSD, HIV, Drug Abuse, Inclusive Education
Dr. Alice Akunga, Country Representative*
Ms. Mazeena Jameel, Senior Programme Specialist*
Mr. Mohamed Latheef, Project Assistant
Mr. Mohamed Naeem, Child Protection/Child Rights Programme Manager
Mr. Ibrahim Naseem, Monitoring and Evaluation Officer

International organisations

Ms. Huda Adam, Head of Resident Coordinator’s Office/ Coordination Specialist, UN Maldives
Dr. Igor Pokanevych, Medical Officer, WHO
Mr. Mohammed Inaz, Assistant Resident Representative, UNDP
Mr. Rune Dige Brandup, International Programme Coordinator, UNFPA

National agencies

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Ms. Fathimath Azza, Director General
Ms. Niumath Shafeeg, Education Development Officer, Head of Research and Innovation

Health Ministry
Ms. Nashiya Abdul Ghafoor, Public Health Programme Officer, Expanded Programme on Immunization
Ms. Nazeera Najeeb, Public Health Programme Coordinator, Reproductive Health Unit
Ms. Aishath Shazla, Senior Public Health Programme Officer, Nutrition Programme

Juvenile Justice Unit
Ms. Fathimath Roona, Director

Law and Gender Ministry
Mr. Mohamed Zahid, Deputy Minister
Ms. Fathimath Shafeega, Permanent Secretary
Ms. Mariyam Sidheem, Director
Mr. Mohamed Shakeeb, Child Rights Officer
Mr. Abdullah Ashraf, Child Rights Officer
Ms Unaiza Habeeb, Policy Planning Officer

Maldives Police Service
Chief Inspector. Hassan Shifau, former Head of Family and Child Protection Department

National Bureau of Statistics
Mr. Mohammed Zuhair, Deputy Minister
Ms. Aishath Shahuda, Executive Director

Maldives Media Council (Quasi governmental organisation)
Mr. Mohamed Farshath, Secretary General
Mr. Ahmed Jailam, Administrative Officer

NGOs
Advocating Rights of Children (Civil society organisation)
Ms. Zenysha Shaheed Zaki, Executive Director
Ms. Fathina Ahmed Khaleel, Senior Project Officer

Journey (Civil society organisation)
Mr. Ali Adyb, Member
Mr. Ahmed Nazim, Member

Maafushi Island (Administrative and Civil Society Representatives)
Ms. Shaina Ali, Health Centre
Mr. Sofwan Hussain, RISE community organisation
Ms. Badhurunisa Ibrahim, President Women’s Development Committee
Ms. Maryam Nasha, RISE community organisation for Drug Use Prevention in Maafushi
Mr. Ali Nasheed, Head of Administration, Maafushi Council
Mr. Abdul Nasir, Principal, Maafushi School
Annex 2  List of Documents

Levy Economics Institute, Expanding Social Protection in Developing Countries: A Gender Perspective, Working paper 757, March 2013
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Ministry of Health and Gender, Maldives health Profile 2014, March 2014
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UNDP, Maldives Human Development Report 2014, June 2014
UN, The UNICEF Strategic Plan, 2014-2017: Realizing the rights of every child, especially the most disadvantaged, 11 July 2013
UNICEF, Adolescent Deprivation Assessment Maldives, March 2014
UNICEF, Programme Components Visioning: Adolescents presentation, undated
UNICEF, Assessment of State Alternative Care Institutions for Children In Maldives, December 2013
UNICEF, Bottleneck Analysis of Violence Against Children, Maldives, December 2014
UNICEF, Child participation in the Maldives, December 2011
UNICEF, Child Protection in Education Settings, March 2014
UNICEF, Country Office Annual Report, Maldives, ROSA, 8 April 2014
UNICEF, Education and adolescents (proposal to ROSA), undated
UNICEF, Growth Monitoring – Final Health Record Book, 2014
UNICEF, IMCI training for first-level health workers power point presentation, July 2012
UNICEF, Reach: Community-based corrective programme for adolescents – Maldives, 2014 (Funding Proposal)
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UNICEF, Study on the Decentralization Process in the Maldives with reference to the impact on services to children, May 2013
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UNICEF, Support to Nutrition, Child Health and Education in the Maldives (Japan Natcom report), July 2014
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UNICEF HQ, UNICEF’s Approach in Middle Income Countries – Six Core Strategic Roles: Discussion Note, May 2010
UNICEF ROSA, Out of School Adolescents in the Maldives (power point presentation), 13 October 2014
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World Bank, Maldives – Nutrition at a Glance, April 2011
World Bank, Youth in the Maldives, Shaping a New Future for Young Women and Men Through Engagement and Empowerment, October 2014
### Annex 3  UNICEF Maldives Stakeholders

<table>
<thead>
<tr>
<th>National Agencies*</th>
<th>NGOs/Civil Society</th>
<th>International Development Agencies</th>
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* National agencies have undergone restructuring during the life of the CP. Names have changed in some cases. This is based on the latest information available from UNICEF Maldives website.

http://www.unicef.org/maldives/partners.html
### Annex 4  Final Evaluation Schedule

<table>
<thead>
<tr>
<th>Mon 8 Dec</th>
<th>Tues 9 Dec</th>
<th>Weds 10 Dec</th>
<th>Thurs 11 Dec</th>
<th>Sat 13 Dec</th>
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<tr>
<td>9.00 – Arrive at UNICEF</td>
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<td>8.00 - depart Maafushi island visit</td>
<td>10.00 - Mohamed Naeem, UNICEF</td>
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<td>9.00 – Council administration</td>
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<td>10.00 - Women’s development committee</td>
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<td>11.00 – Security briefing by UNDP</td>
<td>11.30 - Alice Akunga, UNICEF Representative - Review evaluation scope</td>
<td>11.30 - Maafushi school</td>
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<td>13.00 – Journey, NGO</td>
<td>14.00 - Mohamed Inaz, UNDP</td>
<td>13.30 - Health centre</td>
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<td>14.00 – ARC, NGO</td>
<td>15.00 - Huda Adam, UNRC Office</td>
<td>15.00 - ‘RISE’</td>
<td>15.00 – Shahula Ahmed, UNICEF</td>
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<td>16.00 – Ibrahim Naseem, UNICEF</td>
<td>16.00 – Shahula Ahmed, UNICEF</td>
<td>16.00 - return to Male</td>
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<td>7.30 – Dr Igor, WHO</td>
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<td>9:00 – Shadiya Adam, UNICEF</td>
<td>11.00 - Ministry of Education 11:00 @ MoE (ESQID and</td>
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<td>10.00 – Hassan Shifau, Former Head of the Family and Child Protection Department, Maldives Police Services @ UNICEF offices</td>
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<td>11.00 - Fathmath Runa, Juvenile Justice Unit</td>
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<td>11.30 – Mariyam Sidheem, Director, Ministry of Law and Gender @ Ministry of</td>
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<td>14.00</td>
<td>Aishath Shahuda, Executive Director and Mr. Zuhair, Deputy Minister, National Bureau of Statistics @ NBC (Ministry of Finance Building.)</td>
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<td>13.30</td>
<td>Farshath, Secretary General Maldives Media Council @ UNICEF</td>
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<td>Health Protection Agency @ Min of Health</td>
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<td>13.00</td>
<td>Debriefing with Alice Akunga and Mazeena Jameel, UNICEF</td>
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<td>Mazeena Jameel, UNICEF</td>
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Annex 5 Evaluation Instrument

Evaluation of UNICEF Maldives Country Programme 2011-14

Questionnaire 1: Key informant interviews

Background information

This is an evaluation of the UNICEF/Government Country Programme for 2011–2015 which aims to support the Government of The Maldives in the progressive and equitable realization of the rights of children and women with a focus on their survival, development, protection and participation.

The country programme document identifies specific results to be achieved during the 2011–2015 period in terms of: child rights legislation; data and information; health care (nutrition, hygiene, drug abuse, HIV); child friendly environments in schools; child protection and juvenile justice systems; child rights awareness through engagement of civil society and media. UNICEF Maldives uses the following strategies to achieve these results:

(1) effective advocacy;
(2) capacity development;
(3) communication for development (e.g. behaviour change);
(4) strategic partnerships (e.g. media, civil society);
(5) knowledge management (including monitoring and evaluation);
(6) service delivery (this is very limited under the current country programme).

The aim of this evaluation is to assess each of these programme strategies to consider what has worked well, what can be improved, lessons learned and best practices, with a view to informing the design of the next country programme from 2016 to 2020.

The evaluation is being carried out by an independent consultant, Asmita Naik, who may be contacted at asmitanaik.consultancy@gmail.com or asmita99@yahoo.co.uk

Evaluation Questions

1. What is your role and involvement in the programme? (Briefly describe)

2. What progress has the programme made? What has it achieved? What is your opinion of the usefulness and quality of the work carried out by the programme?
   Please consider the different programme strategies - advocacy; capacity development; communication for development (e.g. behaviour change); strategic partnerships (e.g. NGOs, media); knowledge management (including monitoring and evaluation); service delivery.

4. Is there any way in which it has not met expectations? What has the programme not achieved?

5. Have there been any unintended consequences of the programme (both positive and negative)?

18 Individual and small group meetings with UNICEF; government, international organisations, civil society
6. Have you received support from the programme e.g. training, technical support, briefings, research? (Briefly describe) If so, what did you think of the support you received? Were you satisfied or could it be improved in any way? What lasting difference has this support made to you? E.g. improved knowledge, skills etc. As a result of this support, did you take any actions yourself e.g. did you pass on the information you had learned to others? Did you change your approach? Did you take any new action?

7. What factors have helped or hindered the programme in its implementation?
   Please consider, for example, Maldives context - policy, politics, socio-economic issues; partnerships and relationships with external organisations; the experience and role of other organisations working on similar issues; internal issues such as management, resources, relationships, programme design/planning, monitoring and evaluation, etc.

8. Is the programme relevant?
   Please consider, for example, the needs of the context (socio-economic, cultural, situation of children and young people etc.); alignment with government priorities; fit with international standards (equity and gender equality), UNICEF’s comparative advantage and positioning vis-a-vis other development actors etc.

9. Is the programme efficient?
   Please consider, for example, operational bottlenecks, external partnerships; monitoring and evaluation frameworks.

10. Are the achievements of the programme sustainable?
    Please consider, for example, sustainability in terms of improvements to governmental systems, mechanisms and policies; ongoing commitment to innovations by UNICEF; changes in social norms; whether strategies adopted are contributing to sustainability.

11. Do you have any recommendations for the future?
### Annex 6  Evaluation Question Response Matrix

<table>
<thead>
<tr>
<th>Evaluation Question</th>
<th>Response in Evaluation Report</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Relevance</strong></td>
<td></td>
</tr>
<tr>
<td>1. To what extent are UNICEF’s strategies/sectors aligned with the priorities of</td>
<td>C.1.2</td>
</tr>
<tr>
<td>the Government of Maldives?</td>
<td></td>
</tr>
<tr>
<td>2. How appropriate is UNICEF’s approach to the country’s socio-economic context?</td>
<td>C.1.1, C.1.4</td>
</tr>
<tr>
<td>3. How relevant is MCO’s approach to addressing the challenges of equity and</td>
<td>C.1.3, C.2., D.1.</td>
</tr>
<tr>
<td>gender equality?</td>
<td></td>
</tr>
<tr>
<td>4. What is UNICEF’s comparative advantage taking into account its technical and</td>
<td>C.1.3</td>
</tr>
<tr>
<td>operational strengths and weaknesses? To what extent are the strategies adopted</td>
<td></td>
</tr>
<tr>
<td>following the MTR in line with UNICEF’s comparative advantage in the country and</td>
<td></td>
</tr>
<tr>
<td>globally?</td>
<td></td>
</tr>
<tr>
<td>5. What is UNICEF’s added value and positioning vis-a-vis other development actors?</td>
<td>C.1.3., C.1.4., C.1.5.</td>
</tr>
<tr>
<td>To what extent has UNICEF, through the adoption of its strategies, positioned</td>
<td></td>
</tr>
<tr>
<td>itself to contribute optimally to the contribution of the United Nations to the</td>
<td></td>
</tr>
<tr>
<td>development of Maldives, taking into account the mandate and strengths of other</td>
<td></td>
</tr>
<tr>
<td>development partners.</td>
<td></td>
</tr>
<tr>
<td><strong>Effectiveness</strong></td>
<td></td>
</tr>
<tr>
<td>6. To what extent were the strategies appropriate for achieving these results?</td>
<td>C.2.</td>
</tr>
<tr>
<td>What results were not achieved and why?</td>
<td></td>
</tr>
<tr>
<td>7. Were the strategies adequately planned, implemented and monitored?</td>
<td>C.2.2., C.4.</td>
</tr>
<tr>
<td>8. To what extent is there preliminary evidence of improved performance at the</td>
<td>C.1.3., C.1.4. (answered to</td>
</tr>
<tr>
<td>institutional/organizational level?</td>
<td>some extent)</td>
</tr>
<tr>
<td>9. To what extent has MCO’s programme addressed regional/Atoll/Island variations</td>
<td></td>
</tr>
<tr>
<td>in the situation of children and women, and their different needs?</td>
<td></td>
</tr>
<tr>
<td>10. To what extent are there indications that the adopted approaches are</td>
<td>C.1.3., C.1.4 – unable to answer, this would be speculative as the approach is not yet implemented.</td>
</tr>
<tr>
<td>addressing UNICEF’s equity-related concerns? To what extent is there evidence</td>
<td></td>
</tr>
<tr>
<td>that MCO’s equity-based programmatic approach has a strong potential to reach the</td>
<td></td>
</tr>
<tr>
<td>most deprived children and women?</td>
<td></td>
</tr>
<tr>
<td>11. Are MCO’s interventions contributing to the realisation of international</td>
<td>C.1.4., C.2.1, C.2.5., D.1.</td>
</tr>
<tr>
<td>human rights and gender equality norms and agreements (CRC, CEDAW, UDHR) as well</td>
<td></td>
</tr>
<tr>
<td>as to national and local strategies to advance human rights and gender equality?</td>
<td></td>
</tr>
<tr>
<td>12. To what extent are MCO’s strategies relevant and sufficient to address</td>
<td>C.2.</td>
</tr>
<tr>
<td>related institutional, organizational and individual capacity gaps in the country?</td>
<td></td>
</tr>
<tr>
<td>13. What indications are there that MCO’s humanitarian interventions will</td>
<td>No information</td>
</tr>
<tr>
<td>contribute to improving the resilience of communities/stakeholders which face</td>
<td></td>
</tr>
<tr>
<td>disasters and to strengthening their coping mechanism?</td>
<td></td>
</tr>
<tr>
<td>14. To what extent to the adopted strategies promise to contribute to</td>
<td>C.2.4., C.1.3</td>
</tr>
<tr>
<td>positioning MCO as a key player in the national development agenda for children</td>
<td></td>
</tr>
<tr>
<td>and women in Maldives? To what extent has MCO’s programmatic approach been</td>
<td></td>
</tr>
<tr>
<td>coherent with other partners’ intervention/programmatic approach to achieve</td>
<td></td>
</tr>
<tr>
<td>GoIRA’s development objective in a coherent and synergetic manner?</td>
<td></td>
</tr>
<tr>
<td><strong>Efficiency</strong></td>
<td></td>
</tr>
</tbody>
</table>

64
<table>
<thead>
<tr>
<th></th>
<th>Question</th>
<th>Section</th>
</tr>
</thead>
<tbody>
<tr>
<td>15.</td>
<td>To what extent has UNICEF established partnerships with a wide range of stakeholders, including government, civil society, NGOs and other national development partners, in support of its strategic approaches?</td>
<td>C.2.4.</td>
</tr>
<tr>
<td>16.</td>
<td>To what extent are there operational bottlenecks relating to UNICEF’s strategic approaches that impede, or threaten to impede, the delivery of UNICEF’s work?</td>
<td>C.3.</td>
</tr>
<tr>
<td>17.</td>
<td>To what extent are the results frameworks applied by UNICEF under the new strategies, and as reflected in the CP and CPAP, clearly defined, with clear indicators and means of verification? To what extent were the strategies, as reflected in the CP and CPAP, evaluable, taking into account the establishment – or expectation of the establishment – of baselines, and efficient monitoring and reporting systems?</td>
<td>C.3.</td>
</tr>
<tr>
<td>18.</td>
<td>To what extent are the strategies contributing or likely to contribute to overall programme sustainability? What are the contributing or constraining factors to make a durable change?</td>
<td>C.4., C.2.</td>
</tr>
<tr>
<td>19.</td>
<td>Have the strategies contributed to improving existing governmental systems, mechanisms, and policies?</td>
<td>C.4.</td>
</tr>
<tr>
<td>20.</td>
<td>To what extent has the government created, or indicated its commitment towards creating, an enabling environment for the replication of innovations implemented by the UNICEF-supported interventions?</td>
<td>C.4.</td>
</tr>
<tr>
<td>21.</td>
<td>To what extent do strategies, such as the C4D approach, equity focused approach, promise to change social norms, and what indications are there that such changes will be sustainable?</td>
<td>Limited information in C.2.3.</td>
</tr>
</tbody>
</table>
Annex 7 Evaluation Terms of Reference

Terms of Reference for Individual Contract

International Consultant to carry an evaluation of UNICEF Maldives strategies in addressing issues affecting women and children

TOR Reference Number: TOR/2014/19

Programme Information

Programme Component: Policy, Advocacy and Research
Output 2.1: By 2015, government monitoring and evaluation mechanisms established to track progress towards achievement of MDGs
Activity 2.1.3: Development of the New Country Programme, situation analysis and evaluation of the current CPD carried out through technical support

1. Purpose of assignment (attach background documents if any)

Background:

The Maldives is made up of 1,190 coral islands out of which 194 are currently inhabited. For administrative purposes the islands are divided into twenty atolls. The total area of land is 298 sq. km and the total area of the coastline is 644 km. Current population is estimated to be 341,848 with a sex ratio of 103 males for 100 females. Despite the global economic crisis and the severe devastation caused by a tsunami in 2004, Maldives attained average economic growth of 6 percent between 2000 and 2009. Current GDP per capita stands at US $ 6,485.00, with an inflation rate of 19.8 percent. Tourism contributes about 28 percent to the country’s Gross Domestic Product (GDP) and more than 60 percent of foreign exchange receipts. Over 90 percent of government tax revenue come from import duties and tourism-related taxes, while also receipts from the tourism sector played a significant role in employment, income and addressing the food import bills. Maldives faced significant challenges due to uncertainty in the political sphere since the country’s first-ever openly contested elections in 2008. The development of effective and inclusive governance institutions and processes, consolidation of the rule of law, and the evolution of an informed civil society and an independent, professional media were in their formative stages. Lack of consensus between the executive and legislative branches, and within the parliament, often slowed implementation of the new constitution and inhibited progress of the democratization process, including inability of parliament to pass laws. It is in this context that United National Development Assistance Framework (UNDAF) was developed with agency specific outcome outlined in its Country Programme Document (CPD).

UNICEF is currently implementing the UNICEF/Government Country Programme for 2011-201, which focuses on upstream policy level work with selected downstream work to support policy level initiatives, along with inter-agency collaboration under the UNDAF. The overall goal of the Country Programme is to support the Government of The Maldives in the progressive and equitable realization of the rights of children and women with a focus on their survival, development, protection and participation. The country was classified as a middle income country effective January 2011.

The CPD identified specific outcomes and outputs that are expected to be achieved for the period 2011 – 2015. These outcomes would be achieved through various strategies, including: (1) generation of evidence through monitoring and research; (2) strengthening of legal and policy framework; (3) capacity building of sector partners and (4) evidence-based advocacy; (5) behavior change communication and (6) engagement with the media and civil society. Despite the achievements recorded in the country through the MTR conducted in 2013, many challenges still remain such as the high

malnutrition among children, increased reported cases of child abuse cases, and poverty, vulnerability and deprivation issues of children, adolescents and women.

UNICEF Maldives is currently working on the development of the new Country Programme Document (CPD) for 2016 - 2020. The overall country context and programme areas, Maldives country priorities, as well as the new UNICEF MTSP (2014-2017) results will be examined to inform the programme priorities for the new CPD. This may result in a combination of re-affirming the need to continue in some current priority areas with sharpened focus, and the need to continue striving for the achievement of existing priorities and the identification of new priorities and strategies, especially reflecting a more explicit equity focused approach within an evolving programme environment.

An evaluation therefore is required of strategies applied, results achieved, lessons learnt and best practices which should be continued, and new approaches and strategies that need to be introduced to accelerate progress, especially for disadvantaged children.

It is against this backdrop that UNICEF Maldives is seeking the support of a consultant to assist with conducting an evaluation of UNICEF strategies applied in addressing issues affecting women and children in the Maldives during the current country programme, with a view to drawing key lessons learned and to inform the next country programme 2016 – 2020.

The findings of this evaluation will be taken into account when developing the new UNICEF CPD - 2016 – 2020, and also feed into the UNDAF evaluation.

2. What is the basic project objective to which the consultancy is related

Purpose and objectives of the evaluation

The purpose is to carry out an evaluation of UNICEF strategies in addressing issues affecting women and children in the Maldives. More specifically, the evaluation intends to address whether or not MCO’s previously mentioned strategies have facilitated the achievement of expected results of the CPD, have supported the contribution to wider development results at the national level and whether lessons could be derived for future strategic positioning and inform its programming. MCO will also assess the extent to which the commitment to reduce disparities in the social development outcomes that form the core of UNICEF’s mandate—health, nutrition, water and sanitation, education, child protection, HIV and emergencies—has been effectively mainstreamed across these programme areas and, particularly, in the state level contextualized programmes.

The evaluation will provide information on the strategies applied during the programme implementation, ascertain their relevance, effectiveness and sustainability in achieving target results, identify areas of improvement including remaining challenges and draw lessons learned to inform the next country programme 2016 - 2020. The evaluation will further provide a body of knowledge to inform policy and strategic interventions for improved results for children and women in the Maldives.

3. Scope of the evaluation

The evaluation will focus primarily on the three and half years of its programme implementation, while taking into account the context of the current CP cycle (2011-2015) and the changes introduced during the MTR. As a formative evaluation that is expected to shape the CPD and UNICEF’s future strategic approaches and positioning in Maldives, the focus is primarily on establishing UNICEF’s potential for achieving expected development results and adding value in line with its comparative advantages, both within the country and globally.

The evaluation will be based primarily on the OECD/DAC evaluation criteria of relevance, efficiency, and sustainability. It is grounded in the assumption that there has been minor changes following the introduction of new strategic approaches subsequent to the MTR, it will be difficult to determine contribution to outcomes, and impossible to determine impacts. Therefore, rather than seek to ascertain the actual effectiveness of the new strategic direction, the evaluation will seek to establish the potential for effectiveness by assessing approaches, structures and partnerships that have been put in place. An important focus of the evaluation will be on the medium to long-term evaluability of MCO’s strategic approaches, and the extent to which the new CPD and CPAP are being established in a way that will ensure their evaluability. The evaluation

22In line with the Government of India’s national 5-year plan covering 2008-2012 and the UNDAF covering the same period, which all iterate commitment to addressing the same concerns of social exclusion and disparities reduction.
questions have been formulated in line with key evaluation criteria. The evaluation will be undertaken through the lens of equity, human rights and gender equality.

In geographic terms, the evaluation will focus on UNICEF’s MCO and its immediate relationships with the central Government and capital-based stakeholders, including civil society partners. In line with the strategic priorities emanating from the MTR, the evaluation will concentrate on UNICEF’s engagement in the priority islands. The evaluation will assess how well the MCO has applied new approaches defined in MTR, and how the current MCO’s strategies could contribute to expected outcomes of the next CP in terms of relevance, effectiveness, efficiency, sustainability.

Evaluation questions:
The evaluation will specifically address the following categories of questions23 with respect to UNICEF’s CP contribution. The following evaluation questions are not exhaustive and are expected to be further refined during the inception phase, ensuring aforementioned lens.

Relevance is understood as the alignment of UNICEF’s programmes to government and corporate priorities, taking into account UNICEF’s comparative advantages; and importance or significance of UNICEF programmatic interventions and approaches in addressing key developmental challenges.

- To what extent are UNICEF’s strategies aligned with the priorities of the Government of Maldives, taking into account UNICEF’s technical and operational strengths and weaknesses?
- To what extent were the strategies appropriate for achieving results?
- Were the strategies adequately planned, implemented and monitored?
- To what extent are MCO’s strategies relevant and sufficient to address related institutional, organizational and individual capacity gaps in the country?
- Are MCO’s interventions contributing to the realisation of international human rights and gender equality norms and agreements (CRC, CEDAW, UDHR) as well as to national and local strategies to advance human rights and gender equality?
- How relevant is MCO’s strategic approach to address the challenges of equity and gender equality?
- To what extent are MCO’s strategies relevant and sufficient to address related institutional, organizational and individual capacity gaps in the country?
- Are MCO’s interventions contributing to the realisation of international human rights and gender equality norms and agreements (CRC, CEDAW, UDHR) as well as to national and local strategies to advance human rights and gender equality?
- How relevant is MCO’s strategic approach to address the challenges of equity and gender equality?
- To what extent are the strategies adopted following the MTR in line with UNICEF’s comparative advantage in the country and globally?
- To what extent has UNICEF, through the adoption of its strategies, positioned itself to contribute optimally to the contribution of the United Nations to the development of Maldives, taking into account the mandate and strengths of other development partners.

Effectiveness is understood as UNICEF’s contribution to the achievement of desired developmental change at the outcome level. The primary concern of this formative evaluation will be to establish the extent to which UNICEF has set itself up in a way that is likely to contribute to the achievement of such change.

- To what extent to the adopted strategies promise to contribute to positioning MCO as a key player in the national development agenda for children and women in Maldives?
- To what extent is there preliminary evidence of improved performance at the institutional/organizational level?
- To what extent are there indications that the adopted approaches are addressing UNICEF’s equity-related concerns?
- To what extent is there evidence that MCO’s equity-based programmatic approach has a strong potential to reach the most deprived children and women?
- To what extent has MCO’s programme addressed regional/Atoll/Island variations in the situation of children and women, and their different needs?
- What indications are there that MCO’s humanitarian interventions will contribute to improving the resilience of communities/stakeholders which face disasters and to strengthening their coping mechanism?
- To what extent has MCO’s programmatic approach been coherent with other partners’ intervention/programmatic approach to achieve GoIRA’s development objective in a coherent and synergetic manner?

Efficiency is understood as the way in which UNICEF manages its resources, including partnerships, with a view operationalizing its strategies, implementing activities and delivering outputs.

23 OECD-DAC evaluation criteria and evaluation questions
To what extent has UNICEF established partnerships with a wide range of stakeholders, including government, civil society, NGOs and other national development partners, in support of its strategic approaches?

To what extent are there operational bottlenecks relating to UNICEF’s strategic approaches that impede, or threaten to impede, the delivery of UNICEF’s work?

To what extent are the results frameworks applied by UNICEF under the new strategies, and as reflected in the CP and CPAP, clearly defined, with clear indicators and means of verification?

To what extent were the strategies, as reflected in the CP and CPAP, evaluable, taking into account the establishment – or expectation of the establishment – of baselines, and efficient monitoring and reporting systems?

Sustainability is understood as the extent to which measures have been, or expect to be, put in place with a view to ensuring the medium to long-term ownership of rights holders and commitment by duty-bearers and their national and international development partners.

To what extent are the strategies contributing or likely to contribute to overall programme sustainability?

What are the contributing or constraining factors to make a durable change?

Have the strategies contributed to improving existing governmental systems, mechanisms, and policies?

To what extent has the government created, or indicated its commitment towards creating, an enabling environment for the replication of innovations implemented by the UNICEF-supported interventions?

To what extent do strategies, such as the C4D approach, equity focused approach, promise to change social norms, and what indications are there that such changes will be sustainable?

4. Approach and recommended methodology:

As a formative evaluation, looking at the early stages of programme implementation before the MTR, and the reflection of resulting strategic priorities in the CPD and UNDAF action plan, much of the data will be qualitative. The evaluation requires analysis across various programmes. Analytical work will be conducted through a desk review of the secondary data and complemented by key informants’ interviews and focus group discussions. Data should be reviewed in terms of disaggregation by age, sex and locality. Secondary data mentioned are reliable information from: 1. Censuses 2. Demographic Health Survey 3. Household Income and Expenditure Survey, 4. Sectoral and National Statistical Year Books (Administrative data) and 5. other data from published documents.

All relevant interaction relating to data collection and stakeholder discussion should follow UNEG ethical guidelines.

Ethical considerations must be of utmost priority in all stages of the evaluation process including methodology design, interviewing of respondents, managing data collectors and documentation. The UNEG ethical guideline for evaluation (UNEG/FN/CoC[2008]) must adhered to during the evaluation.

Based on the proposed purpose and scope of the evaluation described in this TOR, the bidders are expected to submit a proposal for methodologies and evaluation questions.

Data collection method:

- **Desk Review**
  Key resources to be referred for desk review:
  - CPD 2011-2015, results framework
  - Updated situation analysis of women and children in the Maldives 2013
  - Updated SITAN Report (2014)
  - Other relevant reports

- **Interviews**
  Potential interviewees suggested:
  - Direct rights holders: Communities, Children, Youth, Women (including the most vulnerable and deprived where possible)
  - Key implementing partners of the government: Ministry of Finance and Treasury, (MOFT), Ministry of Education (MOE), Ministry of Health (MOH), Ministry of Law and Gender (MOLG), Ministry of Home Affairs
(MOHA), Juvenile Justice Unit (JJU), Maldives Police Services (MPS), National Bureau of Statistics (NBS), Maldives Media Council (MMC), National Disaster Management Centre (NDMC)

- Key Implementing Partners of NGOs: Journey, ARC, Society for Health Education (SHE)
- Other UN agencies: UNDP, UNFPA, UNODC, UN Women, WHO

Governance body of the evaluation function:
- Evaluation Management Team (EMT)
  Suggesting composition: Representative (Chair), Senior Programme Specialist, M&E, and Communication.
- Evaluation Reference Group (ERG)
  Suggesting composition: Senior Programme Specialist (Chair), M&E Officer, Programme Specialist Education and Health, Programme Specialist CP and Gender and Officer in-charge for Office of Project and Programme (OPP), Head of National Bureau of Statistics, M&E of UNDP and UN Women.

This exercise will follow UNEG norms and standard during the process of the evaluation.

5. Duty station:
UNICEF Maldives Country Office, Male’, Maldives (2 Weeks Home based)

6. Supervisor
Ms. Mazeena Jameel, Senior Programme Specialist and Mr. Ibrahim Naseem, Monitoring and Evaluation Officer, UNICEF Maldives Country Office

7. End product (e.g. final report, article, document, etc.)

The assessment consultant will deliver the following products:
1. An inception report outlining the methodological approach, including types of data and information to be reviewed, the report outline and timeframe for completing the assessment based on this TOR (Annex 1)
2. Draft evaluation report to be submitted to the UNICEF programme team for review and comments
3. Presentation of key findings and recommendations for comments from ERG

8. Estimated duration of contract and deadline for submission of end-product

The estimated duration of this consultancy is 45 working days starting immediately (01 October 2014) from the date of signing the contract

<table>
<thead>
<tr>
<th>Task</th>
<th>Deliverables</th>
<th>Time frame</th>
</tr>
</thead>
<tbody>
<tr>
<td>Desk review and draft inception report</td>
<td>Inception Report</td>
<td>2 weeks (10 days)</td>
</tr>
<tr>
<td></td>
<td>(Annex 1: Suggesting table of contents for Inception Report)</td>
<td></td>
</tr>
<tr>
<td>Data collection and analysis</td>
<td>Interim report</td>
<td>4 weeks (20 days)</td>
</tr>
<tr>
<td>Presentation of key findings and</td>
<td>Presentation</td>
<td>2 weeks (10 days)</td>
</tr>
<tr>
<td>recommendations for comments from ERG</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Submission of Final evaluation report</td>
<td>Final Evaluation Report</td>
<td>1 weeks (5 days)</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>45 days</td>
</tr>
</tbody>
</table>

9. Official travel involved (itinerary and duration)

Travel to Maldives and local islands if needed

10. Amount budgeted in the AWP for this activity
Budgeted under Outcome 2/Output 2.1/Activity 2.1.3

11. Estimated cost of contract

<table>
<thead>
<tr>
<th>Deliverables</th>
<th>Payment in USD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inception report</td>
<td></td>
</tr>
</tbody>
</table>
Consultancy fees @ P4 level – (Payments will be linked to deliverables as stated in No. 11)
Air ticket (Home-Male’-Home) on actual basis
DSA per day for Male’ – 56 days

12. Qualifications or specialized knowledge and/or experience required

Given the complexity of the assignment, it is anticipated that this evaluation is conducted by a highly-experienced consultant.

- At least ten years of professional experience in evaluations with strong evidence of understanding global standards, theories, models and methods
- Proven experience in designing, leading and conducting evaluations of similar scope, which involve critical analysis of organizational strategies and strategic positioning
- Understanding of UNICEF programme policies, strategies and approaches as asset.
- Knowledge of current trends, issues, programme modality, policies of the Government of India related to UNICEF’s work. Good knowledge and understanding of conditions and structures (economic, social and political) at national, state, and district levels.
- Latest programme monitoring and evaluation theory, methodology, technology and tools.
- Understanding of UN Mission and system, current key UN topics; and International Code of Conduct.
- Fluency in English mandatory

Deadline for application is 24 September 2014.

Interested candidates should submit an Expression of Interest along with;

(i) An updated CV with proof of similar work previously undertaken,
(ii) A proposal on how the applicant will undertake this assignment with methodology, and
(iii) Proposed fee (in USD) as separate attachment.

To: Muaz Ahmed muahmed@unicef.org with a copy to asmohamed@unicef.org OR, forwarded under confidential cover to: “Operations Officer, UNICEF, Mookai Suites – 9th Floor, 904-905, Male’, Maldives’ on or before the deadline. ONLY SHORT-LISTED APPLICANTS WILL BE CONTACTED.

Annex 1: Sample Table of Contents for an Inception Report

CONTENTS

1. INTRODUCTION*
1.1. Objective of the evaluation
1.2. Background and context
1.3. Scope of the evaluation

2. METHODOLOGY*
2.1. Evaluation criteria and questions
2.2. Conceptual framework
2.3. Evaluability
2.4. Data collection methods
2.5. Analytical approaches
2.6. Risks and potential shortcomings

3. PROGRAMME OF WORK*
3.1. Phases of work
3.2. Team composition and responsibilities
3.3. Management and logistic support
3.4. Calendar of work

ANNEXES
1. Terms of reference of the evaluation*
2. Evaluation matrix*
3. Stakeholder map*
4. Tentative outline of the main report*
5. Interview checklists/protocols*
6. Theory of change / outcome model*
7. Detailed responsibilities of evaluation team members
8. Reference documents
9. Document map
10. Project list
11. Project mapping
12. Detailed work plan

*The structure of inception reports may be adjusted depending on the scope of the evaluation. Chapters and sections with an asterisk should be included by default.
### Programme Component/Results/Intermediate Results

<table>
<thead>
<tr>
<th>Programme Component</th>
<th>Programme Component Results/Intermediate Results</th>
<th>Key Progress Indicators Baselines and Targets</th>
<th>Means of Verification</th>
<th>Major Partners</th>
<th>Expected Key Results in this Focus Area will contribute to:</th>
</tr>
</thead>
</table>
| 1. Policy Advocacy and Research (FAs 1, 2, 3, 4, & 5) | 1. By 2015, new or revised child-focused legislations, policies, guidelines and regulations are enacted to protect the most vulnerable boys, girls and women in Maldives. | • Number of child-rights-focused legislations (Acts) ratified by end of 2015  
  Baseline: 3 bills have been drafted  
  Target: 3 bills ratified: Child Rights, Child Care and Protection Bill; Juvenile Justice Bill; and Youth Bill.  
  Unmet: Legislation not enacted. Juvenile Justice bill closest to being passed as with Attorney-General’s office. | Annual Reports from the Parliament, MoH, MoE, MoGFHR, MHRYS  
  Government Gazette | MoE, MoH, MoGFHR, NDMC, MHRYS | MDGs: All UNDAF Outcomes:1-5, 8-15 |
|                     | 1.1 By 2015, legislation, regulations, guidelines and policies for enhancement of children’s rights are strengthened. | • Youth Bill developed  
  Baseline: non existent  
  Target: Draft available and submitted to Parliament for ratification by end 2014  
  Unmet: Initial stages of drafting as started in 2014 after the MTR. | | MHRYS annual reports | |
|                     | • Child Rights, Child Care and Protection Bill developed  
  Baseline: non-existent  
  Target: Draft available and submitted to Parliament for ratification by end 2014  
  Unmet: Still in the drafting process with the Ministry | | MoGFHR annual reports | |
|                     | 1.2 Child and gender sensitive emergency and response plans reviewed and updated by 2015 | • Number of EPRP plans updated  
  Baseline: drafts for Education and Health available  
  Target: 4 EPRPs updated by end 2015  
  Met: 3 out of 4 plans updated | Sectoral Ministries reports | | |
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<th>Programme Component/ Results/ Intermediate Results</th>
<th>Key Progress Indicators Baselines and Targets</th>
<th>Means of Verification</th>
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| 2. By 2015, disaggregated data and information that inform policies and programmes for the realisation of child’s rights is available, accessible, analysed and used. | • National Integrated Information System developed  
Baseline: No Information System in place  
Target: A National Integrated Information System developed and implemented by end 2015  
*Unmet: Government stakeholders are unwilling to go for an integrated system*  
• *MaldivInfo* updated regularly  
Baseline: *MaldivInfo* available  
Target: *MaldivInfo* updated annually with data at sub-national level  
*Partially met; not currently updated*  | Annual Reports from DNP, UNICEF  
MaldivInfo website | DNP, MoE, MoH, MoFT, MEE, MoGFHR | MDGs: All UNDAF Outcomes: 1-5, 8-15 |
| 2.1 By 2015, government monitoring and evaluation capacity established to track progress towards achievement of MDGs (FA5, KRA 1, and OT1). | • M&E Training module developed as part of Civil Servants capacity building  
Baseline: draft available  
Target: M&E Training module institutionalised by Civil Servants Commission by end 2015  
*Met*  
• Number of Government personnel trained at national and sub-national levels  
Baseline: 36 in 2012  
Target: 400 personnel trained by end 2015  
*Met* | Civil Servants Commission reports | | |
| 2.2 Policy planning and advocacy are informed by high quality research and analysis generated from established information systems for children, adolescents | • Number of analytical papers on disparities and other social issues relevant to children developed and disseminated  
Baseline: 0  
Target: 4(two on disparities, KAP on drug abuse, National budget review) | Analytical reports | | |
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<td>and women by 2015 (FA5, KRA 2, OT5).</td>
<td><em>Met – target exceeded</em></td>
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| 2. Strategic Partnerships for Capacity Development (FAs 1, 2, 3, 4 & 5) | 3. By 2015, families enjoy quality health care, and practice improved nutrition, hygienic behaviors and are aware of the effects of drug abuse and HIV | **US Underweight Prevalence**  
Baseline: 17.3%  
Target: 10% by end 2015  
*Unmet*  
**Percentage of children less than 6 months who are exclusively breastfed**  
Baseline: 47.8%  
Target: 65% by end 2015  
*Unmet* | Annual Reports from MoH, | MoH, WHO, NGOs | MDGs: 1, 4, 5, 6, 7  
UNDAF Outcomes: 1, 5, 8 |
| 3.1. Pregnant women, parents and caregivers of children U5 are knowledgeable of improved nutrition by 2015 (FA1, KRA 1, OT1). | **Number of selected islands with health workers trained on comprehensive child nutrition**  
Baseline: 0  
Target: 6 islands by end 2015  
*Likely to be met as training to be rolled out to 24 islands in spring 2015* | HPA records/UNICEF records | | |
| 3.2. National and sub-national capacity enhanced for improved quality of health care services for new born and U5 children by 2015 (FA1, KRA 2, OT7). | **Improved health care services training modules developed**  
Baseline: modules non-existent  
Target: 2 modules developed by end 2014  
*Met: 3 modules developed*  
**Number of selected islands of intervention with health workers trained in new-born care and Integrated management of Childhood Illnesses (IMCI)**  
Baseline: 0  
Target: 6 by end 2015  
*Met: 5 islands covered by end 2014* | MOH reports, Training modules | | |
|  | **Number of schools with hygiene education programme**  
Baseline: basic programme initiated in 22 schools  
Target: programme expanded in 30 schools by end 2015 | UNICEF records MOE records | | |
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<th>3.3. By 2015, National capacity enhanced to manage water and sanitation systems including in emergencies, complemented by increased capacities of schools to promote hygiene behaviour.</th>
<th><strong>Partially met; covered 22 by end of 2014</strong></th>
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| | • No. of schools with hygiene education programmes by 2015  
Baseline: basic programme initiated in 22 schools  
Target: programme expanded in the same 22 schools  
Unknown; evaluation lacks information on whether this was done |  |
| 3.4. By 2015 most-at-risk adolescents are aware of safe behaviour against the effects of HIV. (FA3, KRA 3, OT6). | Pre- and post-training assessments |  |
| | • Percentage of adolescents (girls and boys) in selected islands with correct knowledge of HIV  
Baseline: 21.5% at national level, 15-19 years in 2009  
Target: 35% in selected islands of intervention by end 2015  
Partially met: islands with interventions show improvements but national level unknown until DHS 2015 is done |  |
| 4. By 2015, children enjoy learning in an inclusive child friendly environment and are aware of sustainable environmental practices. | MoE records  
MOE, FE, NIE  
UNESCO, UNFPA  
MDGs: 2, 3, 6, 7  
UNDAF Outcomes: 2, 5, 8, 15 |  |
| 4.1. By 2015, national and sub-national capacity enhanced to improve quality of education in line with CFS standards (FA2, KRA 3, OT7). | MoE records |  |
| | • Number of schools that meet standards for CFS “progressing” level  
Baseline: 11 at emerging level  
Target: 11 at progressive level by end 2015  
Met: (indicator appears to set low target) |  |
| 4.2. By 2015, institutional capacity for teacher development in special education needs and early years education (foundation stage) strengthened and special education needs services available. | NIE Records |  |
| | • Number of schools in which foundation stage curriculum is applied  
Baseline: 0 (curriculum being drafted)  
Target: 5 schools by end 2015  
Met: impacts to be followed up next year |  |
4.3. By 2015, school children participate in life skills based education programmes and have appropriate knowledge and skills on sustainable environmental practices (FA2, KRA 3, OT8).

- **Percentage of schools offering life skills education programmes for boys and girls**
  - Baseline: 5%
  - Target: 20% by end 2015
  - Met: target likely exceeded as policy to roll out to all schools.

- **Number of schools in selected islands with functional environmental clubs**
  - Baseline: 1
  - Target: 6 clubs by end 2015
  - Unmet: planning to launch in 2015

5. By 2015, women and children benefit from a responsive protection system and juvenile justice mechanisms

- **Prevalence rate of child sexual abuse**
  - Baseline: 15% (F=20%, M=11%)
  - Target: Reduced by 20% by 2015
  - Unmet

- **Percentage of children in conflict with the law receiving alternative justice options (as defined in the regulation)**
  - Baseline: 0
  - Target: 25% by end 2015
  - Unmet: guidelines developed but no data to measure if target met

5.1. Government and community capacity enhanced for reduction, prevention and response to child abuse and gender-based violence by 2015 (FA 4, KRA2, OT5)

- **Percentage of Social Workers working in FCSCs and MoGFHR with a minimum training to appropriately respond to child abuse and gender-based violence**
  - Baseline: 50%
  - Target: 100% by end 2015
  - Unmet

- **Number of functioning rapid response teams at selected FCSCs and Male**
  - Baseline: 0
  - Target: 5 by end 2015
  - Unmet: trainings are done but functioning teams not yet in place

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<td>Met: target likely exceeded as policy to roll out to all schools.</td>
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<td><strong>Number of schools in selected islands with functional environmental clubs</strong></td>
<td>Baseline: 1</td>
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MoE records | Annual reports of MoGFHR, MPS, JJU, and the MCPD | MoE, UNFPA, MoGFHR, MPS, JJU, Juvenile Court, MoH, FHS | MDGs: 2, 3, 6, 7 UNDAF Outcomes: 2, 5, 8, 15 |
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<th>5.2 Community based programs are made available for juvenile crime prevention, diversion, rehabilitation and reintegration of juvenile offenders, by 2015 (FA 4, KRA1, OT2)</th>
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| **Number of selected islands of intervention with on-going community-based child abuse prevention activities**  
*Baseline:* 0  
*Target:* 5 by 2015  
*Unmet: planned for 2015* |
| UNICEF records |

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| **Number of selected islands of intervention with community based crime prevention program**  
*Baseline:* 0  
*Target:* 4 by end 2015  
*Unmet: planned for 2015* |
| UNICEF records, JIU |

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<th>5.2 Community based programs are made available for juvenile crime prevention, diversion, rehabilitation and reintegration of juvenile offenders, by 2015 (FA 4, KRA1, OT2)</th>
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| **Community reintegration programme established at JIU**  
*Baseline:* non existent  
*Target:* developed by end 2014  
*Unmet* |
| JIU |

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<th>6. By 2015, child rights awareness enhanced through child participation and reporting by media.</th>
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| **Demonstration of child participation in Male and selected islands**  
*Baseline:* 1 islands  
*Target:* 5 islands by end 2015  
*Partially met: activities carried out, but impact assessment in 2015* |
| MoE, HRCM reports |

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<th>6. By 2015, child rights awareness enhanced through child participation and reporting by media.</th>
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| **Number of media agencies actively engaged in monitoring compliance with CRC**  
*Baseline:* 0  
*Target:* 4 media agencies by end 2015  
*Partially met: training carried out and monitoring tool developed but monitoring yet to be done* |
| Media survey |

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| **Number of media personnel with improved capacity for ethical reporting of children in the media**  
*Baseline:* 60  
*Target:* 120 by end 2015  
*Partially met: trainings carried out but improvements to capacity not measured yet* |
| MMC records |

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| **Number of media personnel with improved capacity for ethical reporting of children in the media**  
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<th>6.2 By 2015, child participation is enhanced to promote and advocate children’s rights (FA 5, KRA 1, OT 4)</th>
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| **No. of advocacy activities initiated by the media on promoting child rights by 2015**  
Baseline: 0  
Target: 4 by end 2015  
*Partially met: 1 advocacy initiative covering 5 islands (722 community members), 3 remain* |
| MMC and UNICEF records |
| **Number of schools with functioning child rights and media clubs within Male’ and selected islands**  
Baseline: 0  
Target: 20 by end 2015  
*Partially met: 5 to 10 schools have functioning media clubs (unclear information)* |
| MOE records |
| **Number of advocacy events by schools to promote child participation**  
Baseline: 0  
Target: 4 by end 2015  
*Partially met: 3 events out of 4 so far* |
| MOE records |