



**Joint Evaluation of the UNFPA-UNICEF
Joint Programme
on Female Genital Mutilation/Cutting:
Accelerating Change (2008-2012)**

Volume II
Annexes to the Final Inception Report

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**Joint Evaluation of the UNFPA-UNICEF Joint Programme on Female Genital
Mutilation / Cutting (FGM/C): Accelerating Change (2008 - 2012)**

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Annex 1. Terms of Reference of the Evaluation



Evaluation of the UNFPA-UNICEF Joint Programme on Female Genital Mutilation/Cutting (FGM/C): Accelerating Change

TERMS OF REFERENCE

May 2012

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1. Introduction

Female genital mutilation/cutting (FGM/C) refers to all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs for cultural or other non-medical reasons. It is estimated that approximately 100 to 140 million girls and women have undergone some form of FGM/C, and at least 3 million girls are at risk of undergoing the practice every year. The age at which FGM/C is performed varies. In some areas it is carried out during infancy, in others during childhood, at the time of marriage, during a woman's first pregnancy or after the birth of her first child. The most typical age is 7 - 10 years or just before puberty, although reports suggest that the age is dropping in some areas.¹ FGM/C has both immediate and long-term consequences to the health and well-being of girls and women, negatively impacts maternal and neonatal outcomes, and also increases the risk of HIV/AIDS transmission. The practice is prevalent in 28 countries in Africa and in some countries in Asia and the Middle East. Girls' and women's health, their empowerment, and the realization of their rights are negatively affected by FGM/C as well as the achievement of the Millennium Development Goals related to reducing child mortality, improving maternal health and combating HIV/Aids.²

In 2007, UNFPA and UNICEF launched a joint programme entitled "Female Genital Mutilation/Cutting (FGM/C): Accelerating Change" with the objective of contributing to a forty per cent reduction of the practice among girls aged 0-15 years, with at least one country declared free of FGM/C by 2012. As part of an innovative strategic approach, two UN agencies work in synergy with the leadership of national governments, supporting community-based and national activities that have been identified as leading to positive social change. The main orientation of the programme is to support and accelerate the efforts already being undertaken at country and regional level through on-going programmes and not to be a stand-alone initiative.³

In 2012, on its fifth year of implementation, an evaluation of the UNFPA-UNICEF joint programme on FGM/C will be undertaken in line with the increasing need and demand from donors to strengthen UN cohesion through jointly delivering results. Furthermore, the evaluation will complement the Report of the Secretary-General on ending female genital mutilation⁴ (2012) and provide further evidence of progress towards ending this practice.

This evaluation will be undertaken jointly by the Evaluation Branch/DOS of UNFPA and the Evaluation Office of UNICEF to ensure that an independent and credible exercise is conducted that will inform global and national efforts to promote the abandonment of the practice.

2. Background

The UNFPA-UNICEF joint programme was established as the main UN instrument to promote acceleration in the abandonment of FGM/C. The joint programme aims to build on the successes of past experiences undertaken at country level, to generate additional understanding on the approach for the abandonment of the practice, and to provide additional coordination and support to country offices. Evaluations of past efforts supported by the UN⁵ have provided the basis for a holistic, human rights-based model that applies an understanding of FGM/C as a social norm, while simultaneously providing support to interventions with multiple stakeholders on multiple levels (local, national, and global).

¹ UNFPA and the Report of the Secretary-General on Ending female genital mutilation (E/CN.6/2012/8)

² UNFPA/UNICEF Joint Programme on Female Genital Mutilation-Cutting, Annual Report 2009

³ UNFPA/UNICEF Joint Programme on Female Genital Mutilation-Cutting, Annual Report 2010

⁴ Report of the Secretary-General: ending female genital mutilation E/CN.6/2012/8

⁵ As documented in the Coordinated Strategy to Abandon FGM/C and the Long-Term Evaluation of the Tostan Programme, available here: http://www.childinfo.org/fgmc_resources.html

The programmatic approach is informed by the 2008 Interagency Statement: Eliminating Female Genital Mutilation, signed by 10 UN agencies. It embraces and supports a process for positive change in which a core group in a community enlists others as a way of changing social norms and improving marriage prospects of girls who have not been cut. When the group is large enough to protect the social status of its members, the abandonment of the practice becomes self-sustainable and once it reaches a 'tipping' point, change is expected to be rapid and universal.

The joint programme strategy for FGM/C abandonment is guided by the following principles⁶:

- FGM/C is a significant sexual and reproductive health concern;
- Empowered communities making collective choices;
- Public declarations are a powerful means to persuade others;
- Engaging traditional and religious leaders as agents of change;
- The importance of banning the medicalization of FGM/C;
- Effective media campaigns shape attitudes; and
- A human rights based legal framework accelerates abandonment.

In 2008, eight countries were involved in the joint programme, which increased to 12 countries in 2009. In 2011, three additional countries joined, bringing the total to 15 countries of the 17 originally envisioned in the funding proposal (2007):

Country entry date in the FGM/C joint programme		
2008	2009	2011
1 - Djibouti	9 - Burkina Faso	13 - Eritrea
2 - Egypt	10 - Gambia	14 - Mali
3 - Ethiopia	11 - Uganda	15 - Mauritania
4 - Guinea	12 - Somalia	
5 - Guinea Bissau		
6 - Kenya		
7 - Senegal		
8 - Sudan		

The original estimated budget for the joint programme on FGM/C as per the funding proposal (2007) was 44 million dollars, but funding received did not reach the original estimates. Therefore the **present estimated budget for the six-year period is 32 million dollars**. As of April 2012, approximately 20.6 million dollars have been implemented by both agencies.

⁶ Logical Framework: Operational Guidance

Table 1: Joint Programme on FGM/C: Utilization Rates by country offices, INGOs and HQ 2008-2011

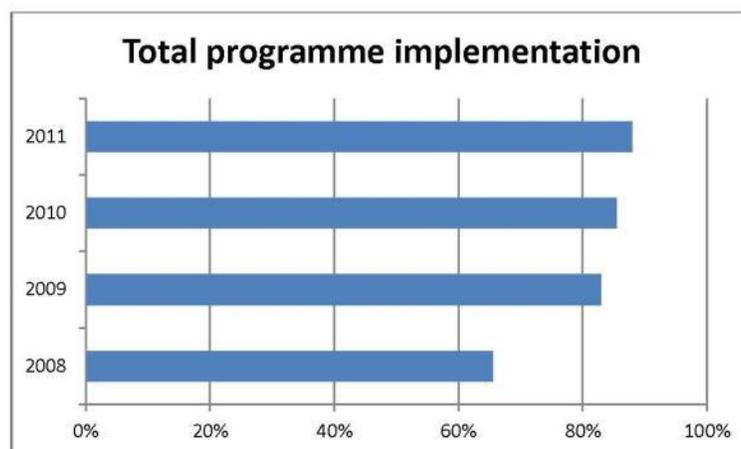
UNFPA & UNICEF Country Offices	2008 ²	2009	2010	2011
Burkina Faso	n/a	82%	46%*	88%
Djibouti	100%	90%	76%*	85%
Egypt	100%	100%	90%*	98%
Eritrea	n/a	n/a	n/a	99%
Ethiopia	26%	89%	90%	87%
The Gambia	n/a	60%	94%*	90%
Guinea	13%	74%	91%	93%
Guinea-Bissau	81%	94%	84%	92%
Kenya	38%	99%	98%*	93%
Mali	n/a	n/a	n/a	89%
Mauritania	n/a	n/a	n/a	95%
Senegal	64%	78%	86%*	89%
Somalia	100%	73%	85%*	98%
Sudan	100%	98%	85%	87%
Uganda	n/a	71%	95%	45%
INGOs & HQ	33.6%	72%	92%	77%
Total	65.5%	83%	85.5%	88%

Source: UNFPA-UNICEF Joint Programme Financial Reports with ATLAS (UNFPA) and SAP (UNICEF) Financial Data Accessed at the time of the writing of the annual report for the referenced year

² Most countries received funds late in 2008 due to administrative delays

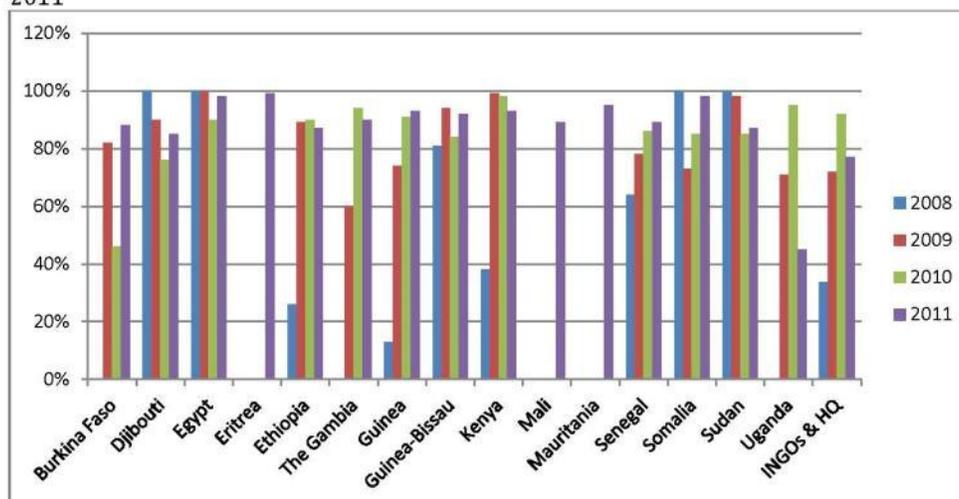
*Received additional allocations on top of yearly amount, but in late November 2010. These funds were carried over to 2011.

Graph 1: Total joint programme implementation 2008-2011



* Includes total implementation by country offices, INGOs and HQ

Graph 2: Joint Programme on FGM/C: Utilization Rates by Country Offices, INGOs and HQ 2008-2011



The original programme logical framework was revised in July 2011 to incorporate indicators and monitoring and evaluation tools that reflect a human rights and culturally sensitive approach. Under the new logical framework some outputs have been edited slightly for clarity, some outputs re-ordered, while other outputs have been added. As a supplementary document to support the activities of the joint programme and use of the logical framework an Operational Guidance was developed. The primary purpose of the Operational Guidance is to provide UNFPA and UNICEF country staff and key stakeholders, who are involved in FGM/C abandonment activities, with information on collecting, measuring, analyzing and reporting on the selected indicators to measure effectiveness of the programmatic response to the presence of FGM/C within the country. These indicators are intended to assist countries in assessing the current state of their national efforts, while also contributing to the global response to end FGM/C.

Programme Structure and Key Stakeholders

The joint programme has been structured with activities at multiple levels and has fostered partnerships with numerous stakeholders. At the global level, UNFPA has acted as the coordinating agency, with UNICEF providing support and guidance to the global level and country level work. Programme coordination and decisions have been made jointly at the global level, including review and approval of joint annual work plans, annual funding allocations, and reports. At the country level, UNFPA and UNICEF offices conduct joint annual work planning, joint and separate implementation of activities, and joint reporting. Several countries have strong national and local government involvement and implementing capacity within ministries. In many countries, the programme has also worked with national and international NGOs to implement, in particular, community-based empowerment programmes, media work, and lobbying for legal reforms. At the country level, the joint programme has worked closely with government authorities both at decentralized and national levels, with community-based organizations, religious authorities and local religious leaders, NGOs, networks, associations, academic institutions and the media.

Within the UN system, the programme has provided technical inputs to the Commission on the Status of Women and treaty bodies such as the CEDAW Committee and the Committee on the Rights of the Child, while collaborating with ongoing policy and programmatic development at agencies such as WHO and UN

Women (formerly UNIFEM). Finally, the joint programme has worked closely with the Donors' Working Group on FGM/C which has brought together, since 2001, major international development agencies of donor countries as well as private foundations that fund programmes on FGM/C.

3. Evaluation purpose, objectives and scope

3.1 Purpose

The purpose of the evaluation is to assess the extent to which and under what circumstances (country context) the UNFPA-UNICEF joint programme has accelerated the abandonment of FGM/C in programme countries over the last four years (2008-2012). The evaluation comes as an opportunity to ensure accountability to donors and other stakeholders and is also conceived as a useful learning exercise. Furthermore, the evaluation will provide UNICEF and UNFPA with insights into the successes and challenges in conducting joint programming and delivering jointly.

3.2 Objectives

The objectives of the evaluation are:

1. To assess the relevance, effectiveness, efficiency, and sustainability of the holistic approach adopted by the UNFPA- UNICEF joint programme for the acceleration of the abandonment of FGM/C.
2. To assess the adequacy and quality of the inter-agency coordination mechanisms that have been established at the global, regional and country levels to maximize the effectiveness of interventions.
3. To provide recommendations, identify lessons learned, capture good practices, and generate knowledge to inform the refinement of the joint programme model and approach at the global, regional and country level as well as to inform the shape of future programming on FGM/C and related programme initiatives.

3.3 Scope

The evaluation will cover the implementation and the results of the UNFPA-UNICEF joint programme during the period 2008-2012

Apart from an assessment of the overall programme detailed country case studies will be conducted in four countries where the joint programme has been implemented.

It is intended that as much as possible the evaluation will provide a comprehensive assessment of the joint programme covering all four levels of the programme scope and their interconnections:

- **Community level** - assessing how the joint programme initiatives, particularly by implementing partners on the ground, have created favourable community-level conditions and led to abandonment of the practice. The central focus is on the effectiveness of the core strategy of changing social norms by empowering community leaders and groups.
- **National level** - analysing achievements over the last 4 years, specifically what have been the successes, missed opportunities, and constraints (covering all 15 programme countries).
- **Regional level** - assessing, the role of the regional component, and the role played by and contributions of regional partners, such as INTACT, AWEPA, IAC, AIDOS, NPWJ; and
- **Global level** - analysing, how UNFPA and UNICEF collaborated in the joint initiative in terms of shared costs, technical support and guidance, communication and global advocacy strategies in order to achieve results set by the joint programme.

4. Evaluation methodology and approach

The evaluation will examine the expected outcomes and outputs outlined in the original and revised logical frameworks, as follows, and review, *inter alia*, the overall coherence of the set of interventions implemented:

Original logical framework

Outcomes
A change in the social convention within the community towards the abandonment of FGM/C. Positive community and national efforts towards social transformation are expanded within and across countries.
Outputs
1. Effective enactment and enforcement of legislation against FGM/C.
2. Knowledge dissemination of socio-cultural dynamics of FGM/C practice.
3. Collaboration with key global development partners on a common framework for the abandonment of FGM/C.
4. Evidence-based data for programming and policies.
5. Consolidation of existing partnerships and forging of new partnerships.
6. Media campaigns emphasizing FGM/C abandonment process in Sub-Saharan Africa, Sudan and Egypt.
7. Better integration of the implications of FGM/C practice into reproductive health strategies.
8. Building donor support to pool resources for a global movement towards abandonment of FGM/C.

Revised logical framework

Outcome 1
Change in the social norm towards the abandonment of FGM/C at the national and community levels
Outputs
1. Effective enactment, enforcement and use of national policy and legal instruments to promote the abandonment of FGM/C.
2. Local level commitment to FGM/C abandonment.
3. Media campaigns and other forms of communication dissemination are organized and implemented to support and publicize FGM/C abandonment.
4. Use of new and existing data for implementation of evidence-based programming and policies , and for evaluation.
5. FGM/C abandonment integrated and expanded into reproductive health policies , planning and programming.
6. Partnerships with religious groups and other organizations and institutions are consolidated and new partnerships are identified and fostered.
7. Tracking of programme benchmarks and achievements to maximize accountability of programme partners.
8. Strengthened regional dynamics for the abandonment of FGM/C.
Outcome 2
Strengthened global movement towards abandonment of FGM/C in one generation.
Outputs
1. Strengthened collaboration with key development partners on the abandonment of FGM/C.
2. Existing theories on the functioning of harmful social norms are further developed and refined with a view to making them applicable to the specific realities of FGM/C.

4.1 Evaluation questions

The joint evaluation management group (EMG) in consultation with the joint evaluation reference group (ERG) developed indicative evaluation questions. The questions are based on five evaluation criteria and are focused on expected outputs from the original and revised logical frameworks (only outputs that have been formulated as such have been considered). The evaluation questions have taken into consideration key cross-cutting issues (including gender equality, and cultural sensitivity and human rights perspective).

***Relevance:** The extent to which the objectives of the joint programme are consistent with national needs (in particular vulnerable group needs) and are aligned with programme country government priorities as well as with UNFPA/UNICEF policies and strategies.*

1. How appropriate are the strategies promoted and used by the joint programme at each level (national, regional, country, community) in support of FGM/C abandonment?
2. To what extent have the strategies and interventions been contextualized at the national level through local-level consultation, national needs (including country government priorities) consideration and capacity assessments?

***Effectiveness:** The degree of achievement of the outputs and the extent to which outputs have contributed or are likely to contribute to the achievement of the outcomes of the joint programme.*

3. To what extent has the programme contributed to the creation of favourable conditions and changes in social norms leading to the abandonment of FGM/C?
4. To what extent have global advocacy interventions, national media campaigns and other forms of communication dissemination as well as partnerships contributed to the acceleration of the abandonment of FGM/C at the country, regional and global level?
5. To what extent has the programme contributed to the enactment and enforcement of national intersectoral plans of action and legislation against FGM/C at the national and decentralized levels in programme countries?
6. To what extent has the programme positioned FGM/C on the national political agendas? To what extent has the programme contributed to the use of evidence-based data on FGM/C for programming and policies in programme countries?

***Efficiency:** The extent to which the outputs of the joint programme have been achieved or are likely to be achieved with the appropriate amount of resources/inputs (funds, expertise, time, administrative costs, etc).*

7. To what extent were the resources available adequate to achieve the expected outputs?
8. To what extent has the mix of strategies and activities implemented in diverse country contexts, including high or low prevalence of FGM/C, differed in terms of efficiency?
9. To what extent has the programme been able to complement implementation at country level with related interventions, initiatives and resources at regional and global levels to maximize its contribution to the abandonment of FGM/C?

10. To what extent have programme benchmarks and achievements been monitored? To what extent has the programme supported and strengthened the M&E system of implementing partners?

Sustainability: The extent to which the benefits from the joint programme are likely to continue, after it has been completed.

11. To what extent has the programme strengthened national ownership, capacity and leadership (at the national and decentralized level) through the participation and inclusion of governments and civil society groups in the joint programming and implementation process in programme countries?
12. To what extent do the strategies used by the programme lend themselves to wider scalability and programme expansion, overall and in specific contexts? To what extent the joint programme has been integrated into other national initiatives aiming at addressing the issue of FGM-C?
13. To what extent have partnerships (governments, UN system, donors, NGOs, civil society organizations, religious leaders, the media) been established to foster sustainability of effects?

Coordination between UNFPA and UNICEF

14. How efficient was programme coordination between UNFPA and UNICEF including clarity of roles and accountabilities; use of data/evidence for decision making; monitoring and reporting; reduction of transaction costs and potential added value?
15. How adequate and responsive was global/regional support in providing necessary guidance and tools, technical support, and capacity development to country offices and global partners?

The evaluation questions and rationale will be further consolidated and refined -- in the evaluation matrix (see annex 6 – evaluation matrix) or in other similar tool -- during the inception phase (when the evaluation team will have a clearer understanding of data availability and methodological feasibility).

4.2 Data collection and analysis tools

The evaluation will follow a mixed methods approach utilizing both quantitative and qualitative data collection and analytical methods. Measures will be taken to ensure data quality, validity and credibility of both primary and secondary data gathered and used in the evaluation. Specific data collection methods will include:

Review of documents and secondary data: A list of relevant documents together with electronic copies of key documents will be shared with the evaluation team by the joint EMG/ERG during the inception phase. The set of documents will include global/regional-level resources that are already available in headquarters such as annual reports, mid-term review reports, strategy papers and related studies and evaluation reports. In addition, each programme country office will be responsible for responding to requests from the EMG/ERG for information (both qualitative and quantitative) on FGM/C programme evolution in the country based on secondary data and information that are readily available. The information shared will be reviewed and analysed during the inception phase to determine the need for additional information and finalisation of the detailed evaluation methodology.

Key informant interviews: Interviews will be conducted at several levels and in phases by the evaluation team. A few key staff from programme countries and global/regional advisors/experts will be

interviewed during the inception phase. In the field phase, interviews will be conducted with additional experts and staff including local level personnel involved in managing and supporting the joint programme. Additional interviews will be conducted with policy makers and programme coordinators in the programme countries, including sub-national level staff, UNFPA and UNICEF Representatives and/or deputies, programme managers and technical advisors at various levels and with beneficiaries. Interviews will also be held with staff of other agencies that contribute to and partner in the programme at global and/or national levels.

Interviews and focus group discussions: with selected UNICEF and UNFPA staff, programme participants/beneficiaries, service providers, and decision/policy makers/NGOs. The specific plans for focus group discussions will be developed during the inception phase. When organising focus group discussions and interviews, attention will be given to ensure gender balance, geographic distribution, cultural sensitivity, representation of population groups and representation of the stakeholders/duty bearers at all levels (policy/service providers/parents/community).

Surveys: An internet based survey to assess programme achievements, adequacy of guidance and technical support, challenges and needs, etc. may be considered to generate additional information for the evaluation. The justification, scope and timing of such a survey will be provided in the inception report.

Country case study approach: the evaluation team will conduct four country case studies. A desk review will inform the selection of case studies. This will involve a consideration of specific country programme contexts including differences in programme commencement date, implementation maturity (programme implementation rate) and any other relevant aspects including geographical and cultural diversity.

The evaluation will utilize a **theory of change approach** for the overall programme as well as a country specific design. It will attempt to assess outcome level changes provided that data are available. Where outcome-level data are lacking, an attempt will be made to assess the extent to which the joint programme is yielding results as planned. The evaluation will consider the use of **outcome and output mapping** and an appropriate **contribution analysis approach** to draw conclusions for the role of the joint programme at various levels.

The evaluation will follow UNEG Norms and Standards for Evaluation in the UN system and abide by the UNEG Ethical Guidelines and Code of Conduct and other relevant ethical codes. Ethical considerations (of respondents and data collectors) will be of utmost priority in determining the most appropriate methods and their implementation, and will be documented and included in all reports. To access the UNEG web page please visit: <http://www.uneval.org/index.jsp>

4.3 Evaluation process

The main elements of the evaluation are as follows: (i) a comprehensive inception and desk review phase which includes a pilot country visit to one programme country; (ii) country visits to 3 programme countries and (iii) report preparation resulting in 4 country case study reports and a final evaluation (synthesis) report presenting findings, conclusions and recommendations.

The evaluation will consist of a total of 5 phases in the course of which several methodological stages will be developed, namely:

1 - Preparation phase

During this phase the joint EMG with contributions from the joint ERG will prepare the terms of reference for the evaluation and select the evaluation team via a tender process.

2 - Design and desk review phase

The evaluation team will conduct a desk review (covering all 15 programme countries) collecting and analysing all relevant information and data obtained from headquarters, regional offices and country offices. The purpose of the review is to ensure the efficient use of completed and on-going studies and evaluations, to identify knowledge gaps, to identify key issues and finalize the evaluation questions for the evaluation. The desk review together with the pilot country visit will inform the inception report.

The team leader will present a **first draft inception report** to the joint ERG.

The report will:

- ✓ Present the final set of evaluation questions and rationale (with the respective explanatory comments).
- ✓ Specify the methodological tools that will be used in the field and reporting phases to respond to the evaluation questions;
- ✓ Detail the framework for synthesizing and analyzing data collected;
- ✓ Confirm the selection of countries (proposed in this ToR) for in-depth review and field visits and a precise specification of the scope and design (including data collection methods and analysis) for the country case studies;
- ✓ Present a detailed work plan, specifying the organization and time schedule for the evaluation process and country visits;
- ✓ Present the approach to ensure quality assurance throughout the evaluation including the country case study reports.

The joint ERG will provide substantive comments and feedback to the draft inception report.

The evaluation team and one member of the joint EMG will then conduct a 15 day pilot mission (scoping/case study) to one programme country – tentatively **Burkina Faso or Uganda** -- to test and validate core features such as the evaluation approach, evaluation questions, methodology tools, and identify necessary documentation needed to conduct the evaluation, including the country case studies. The pilot mission will increase the quality and usefulness of the evaluation design and raise the likelihood of formulating well-targeted and useful evaluation questions.

Following the pilot mission, the evaluation team will submit the **second draft inception report** to the joint ERG. The evaluation team will present this draft during a reference group meeting in New York.

The pilot will also constitute one of the four country case studies.

The joint EMG in consultation with the joint ERG will provide substantive comments and feedback to the second draft final inception report. The evaluation team will address these comments and submit a **final inception report** for approval by the joint EMG in consultation with the joint ERG. Annex 1 provides guidance on the structure of the inception report.

3 - Data collection and field phase

Following the satisfactory completion of the design and desk review phase, the evaluation team will proceed to the country visits (two weeks per country).

Tentatively selected countries for the 3 country visits are: **Kenya, Senegal and Sudan**⁷.

Prior to completion of each country visit the evaluation team will conduct a debriefing session with the country offices presenting the main findings of the field mission, seeking to validate the information gathered.

For each country visited (4 countries) and following completion of the field mission, the evaluation team will submit a country case study report presenting main country specific findings, conclusions, recommendations to the joint EMG. These country case study reports will be stand-alone documents, inform the final evaluation report and will be approved by the joint EMG in consultation with the ERG.

Annex 1 provides guidance on the structure of the country case study reports.

4 - Reporting Phase

The synthesis report will present an overall synthesis of global and country level findings, conclusions, and forward looking recommendations.

The overall length of the final evaluation report should not be greater than 60 pages (including the executive summary but excluding annexes). Additional information on overall context, programme or aspects of methodology and analysis should be confined to the annexes. The Annexes should include the list of people met, documentation reviewed, terms of reference, and any other information which contains factual basis used in the evaluation.

The conclusions and recommendations must be ranked and prioritized according to their relevance to the evaluation and their importance; conclusions should be cross-referenced back to recommendations. In general, the recommendations will be: (i) linked to the conclusions; (ii) prioritized and targeted at specific addressees; (iii) useful and operational.

The draft and final versions of the evaluation report will be quality assessed by the management group (see Annex 5 – Evaluation Quality Assessment Grid). The aim is to ensure that the evaluation report complies with professional standards while meeting the information needs of their intended users. Once completed the EQA grid will be published together with the final evaluation report.

The final report will be formally approved by the joint EMG in consultation with the ERG.

Annex 1 provides guidance on the structure of the final report.

5 - Dissemination and Follow-up Phase

The emphasis of this evaluation is on lesson learning. Hence, it is important that the evaluation is designed in a way that allows maximum feedback to the concerned actors throughout the evaluation process. The organization of a meeting during the reporting phase is a key element of the dissemination and feedback strategy. The evaluation should also be designed and organized to ensure that learning

⁷ Members of the joint EMG will participate in the country visits as appropriate.

opportunities such as workshops in partner countries are exploited as far as possible. Suggestions for communication strategies and feedback to stakeholders should be included in the tender documents.

UNFPA and UNICEF will organize a dissemination event following the completion of the evaluation. The purpose is to disseminate the findings, conclusions of the evaluation and discuss the lessons and recommendations and the management response.

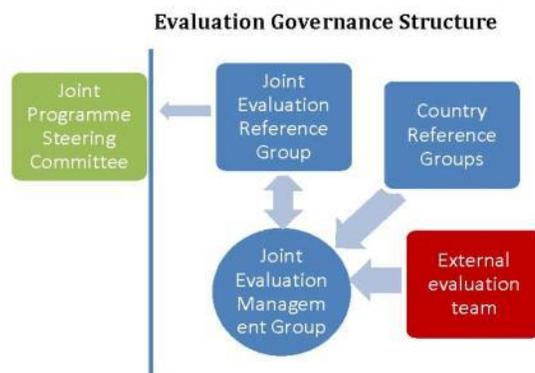
The evaluation team may be requested to assist in dissemination and follow-up activities, participating in, for instance, webinars and conference presentations on the findings and conclusions of the evaluation.

In the dissemination and follow-up phase, relevant units will jointly prepare a management response to the recommendations in the final report which will be received by the joint EMG.

5. Users

As the first comprehensive evaluation of its kind, the evaluation will generate important findings, lessons and recommendations that will be of use to a variety of stakeholders. The main users of the evaluation include the two agencies managing the program (at the global, regional and country level), contributing and interested donors, implementing government departments and NGOs, other stakeholders and partners in each country where the programme is implemented including civil society, and other agencies in the UN system implementing joint programmes or managing programmes on female genital mutilation/cutting and related to addressing social norms that result in violations of human rights, including gender inequality.

6. Governance and management of the evaluation



The evaluation will be conducted jointly by UNFPA and UNICEF. A **joint evaluation management group (EMG)** will be the main decision-making body for the evaluation and have overall responsibility for management of the evaluation process including hiring and managing the team of external consultants. The joint EMG is responsible for ensuring the quality and independence of the evaluation and to guarantee its alignment with UNEG Norms and Standards and Ethical Guidelines.

Key roles and responsibilities of the joint EMG include:

- To prepare the terms of reference for the joint evaluation in coordination with the joint ERG
- To lead the hiring of the team of external consultants with inputs from the joint ERG, reviewing proposals and approving the selection of the evaluation team
- To supervise and guide the evaluation team in each step of the evaluation process
- To review, provide substantive comments and approve the inception report, including the work plan, analytical framework, methodology, and selection of countries for in-depth case studies
- To review and provide substantive feedback on the country reports and the draft and final evaluation reports, for quality assurance purposes
- To approve the final evaluation report in coordination with the joint ERG
- To contribute to learning, knowledge sharing, the dissemination of the evaluation findings and follow-up on the management response
- To liaise with the joint ERG and convene review meetings with the evaluation team
- To identify and ensure the participation of relevant stakeholders in coordination with the joint ERG throughout the evaluation process

The joint evaluation management group includes:

Alexandra Chambel	Chair of the joint EMG, Evaluation Adviser, Evaluation Branch, DOS, UNFPA
Krishna Belbase	Senior Evaluation Specialist, Evaluation Office, UNICEF
Olivia Roberts	Assisting the management group, Evaluation Analyst, Evaluation Branch, UNFPA

A **joint evaluation reference group** (ERG) will be established to support the evaluation at key moments and ensure broad participation in the conceptualization of the exercise, access to information, high technical quality of the evaluation products as well as learning and knowledge generation. The joint ERG will be consulted by the EMG on key aspects of the evaluation process. Technical staff from relevant divisions in the two agencies will be represented in the joint ERG and will provide substantive technical inputs during the evaluation process as well as feedback on the evaluation results. The joint ERG will consist of staff from headquarters, the regional offices and external organizations (names to be confirmed) and will have a balance of expertise in evaluation and FGM/C and other related areas as deemed relevant.

Key roles and responsibilities of joint ERG members include:

- To contribute to the conceptualization, preparation, and design of the evaluation including providing feedback on the terms of reference, participating in the selection of the evaluation team as required, participating in the selection of countries for case studies, and providing feedback and comments on the inception report and on the technical quality of the work of the consultants
- To provide comments and substantive feedback to ensure the quality – from a technical point of view - of the draft and final evaluation reports
- To act as a source of knowledge for the evaluation and coordinate feedback from other UNFPA and UNICEF services from headquarters, the regions and from the field, in particular to facilitate access to information and documentation
- To assist in identifying external stakeholders to be consulted during the process
- To participate in review meetings of the joint EMG and with the evaluation team as required

- To play a key role in learning and knowledge sharing from the evaluation results, contributing to disseminating the findings of the evaluation and follow-up on the implementation of the management response

The members of the joint evaluation reference group include:

Alexandra Chambel	Co- chair of the RG, Evaluation Adviser, Evaluation Branch, DOS, UNFPA
Krishna Belbase	Co- chair of the RG, Senior Evaluation Specialist, Evaluation Office, UNICEF
Nafissatou Diop	Coordinator, UNFPA-UNICEF joint programme on FGM/C, UNFPA
Idrissa Ouedraogo	Gender Adviser, Sub regional Office for West And Central Africa, UNFPA
Luis Mora	Chief, Gender Human Rights and Culture Branch, UNFPA Gender Adviser, Sub regional Office for West and Central Africa, UNFPA
Elsa Kuntziger	Junior Professional Officer, Gender, Human Rights and Cultural Branch, UNFPA
Francesca Moneti	Senior Child Protection Specialist, Child Protection, Programme Division, UNICEF
Cody Donahue	Child Protection Specialist, Social Norms & Harmful Practices, Programme Division, UNICEF
Judith Diers	Chief Adolescent development and Participation Section, Gender Rights and Civil Engagement Section, Programme Division, UNICEF
Ian Askew	Director, Reproductive Health Services and Research,, Population Council

National reference groups shall be established in countries where field visits will take place; the options for arranging these groups should be discussed and agreed with UNFPA and UNICEF staff in the country offices who will in turn consult with national partners (it is important that broad participation is sought, including civil society).

7. Indicative time schedule

	Deliverables	Dates	Meetings
Design and desk review	Submission of draft inception report (first draft)	October 5, 2012	
	Deadline for Management Group comments	October 11, 2012	
	Submission of draft inception report (second draft)	October 18, 2012	
	Pilot mission to Kenya	November 12 - 23, 2012	Confirmed by both Agencies
	Submission of draft final inception report	November 30, 2012	
	Evaluation Reference Group meeting	December 10, 2012	Meeting with evaluation team to discuss the final draft inception report, in NY
	Submission of final inception report	December 12, 2012	
	Submission of Kenya pilot country case study report (first draft)	Early January, 2013	
	Comments from ERG + COs on draft Kenya pilot country case study report (first draft)	End of January, 2013	
	Submission of final Kenya pilot country case study report	February 28, 2013	
Data collection and field visits	3 field missions to country case studies: Senegal Sudan Burkina Faso	January 21 to Feb 1, 2013 January 21 to Feb 1, 2013 Feb 4 - 15, 2013	
	Submission of Senegal and Sudan country case study reports (first draft)	February 25, 2013	
	Submission of Burkina Faso country case study report (first draft)	March 4, 2013	
	Comments from ERG + COs on 3 draft country case study reports (first draft)	March 13, 2013	
	Submission of 3 draft country case study reports (second draft)	March 22, 2013	
	Evaluation Reference Group meeting	March 27, 2013	Meeting with evaluation team - field phase debriefing, in NY
		March 28 - 29, 2013	Internal team validation workshop + EMG, in NY.
	Submission of 3 final country case study reports	9 April, 2013	
	Submission of the draft final evaluation report (first draft)	29 April, 2013	
	Comments from ERG to draft final evaluation report (first draft)	10 May, 2013	
	Submission of the draft final evaluation report (second draft)	24 May, 2013	
	Evaluation Reference Group meeting	5 June, 2013	Meeting with evaluation team - presentation of draft final evaluation report, in NY.
	Submission of the final evaluation report	19 June, 2013	
Dissemination and follow-up	Management response	September, 2013	
	Dissemination activities and stakeholder workshop	Dates to be confirmed	Stakeholder workshop (including evaluation team)

8. The evaluation team

This evaluation will be carried out by a highly qualified evaluation team with advanced knowledge and experience in development cooperation.

Necessary competencies of the evaluation team include:

- Extensive previous experience in conducting evaluations and specifically programme and joint evaluations for international organizations or development agencies.
- Demonstrated experience in conducting programme evaluations in the field
- Expertise in thematic areas such as FGM/C, gender equality and women's empowerment, human rights, behaviour and social change and community empowerment.
- Previous experience of conducting evaluations for the UN will be considered an asset.
- Fluency in English is required as well as working knowledge of French, especially for the field phase.
- Fluency in French is required either for the team leader or for the gender expert*.
- Excellent analytical, communication and writing skills (in English) and the ability to interact with a wide range of stakeholders.
- Balanced in terms of gender and geographical representation, wherein the inclusion of evaluators/experts from developing countries will be considered an asset.

The team leader must have a proven experience in evaluation methodology. Consultants should possess appropriate training and documented experience in conducting evaluations as well as applying evaluation methods in field situations. In addition, each country team should be led by the team leader or by an experienced member of the team (senior gender expert).

National consultant(s) will participate in each country case study (at least one national consultant per country case study). These consultants will be identified by the bidder and approved by the joint EMG in consultation with the joint ERG.

Preferred composition of the evaluation team:

1. Team leader:

- Extensive previous experience in leading evaluations and specifically programme and joint evaluations for international organizations or development agencies. Previous experience of conducting evaluations for the UN, and specifically for UNFPA and UNICEF, will be considered an asset.
- Demonstrated experience in conducting evaluations in relevant fields, particularly on gender issues and partnerships.
- The team leader shall have considerable experience in conducting evaluations of a similar size and complexity, in particular joint exercises.
- Excellent analytical, communication and writing skills.
- Fluency in English is required as well as and working knowledge of French, especially for the field phase (see necessary competencies on languages of the evaluation team)*.

2. Senior expert in gender issues

- Extensive previous experience in issues of gender and human rights, including FGM/C .
- Fluency in English is required as well as working knowledge of French, especially for the field phase (see necessary competencies on languages of the evaluation team)*.
- Previous experience of conducting evaluations for the UN will be considered an asset.
- Excellent analytical, communication and drafting skills

3. Mid-level expert in knowledge management
 - Extensive previous experience in knowledge management including the implementation of media campaigns, press conferences, activities to stimulate dialogue, and other forms of communication, web dissemination and knowledge management at national and community level.
 - Previous experience on issues of gender and human rights will be considered an asset.
 - Fluency in English is required as well as advanced level of French.
 - Previous experience of conducting evaluations for the UN will be considered an asset.
 - Excellent analytical, communication and drafting skills.
4. Junior/ mid-level expert in research, data collection and analysis
 - Extensive previous experience in research, data collection and analysis
 - Previous experience of conducting evaluations for the UN will be considered an asset.
 - Excellent analytical and communication skills
 - Fluency in English and working knowledge of French.

The agreed team composition may be subsequently adjusted if necessary in the light of the final evaluation questions and countries selected for the field phase once they have been validated by the reference group.

All team members should be knowledgeable of issues pertaining to gender equality, cultural sensitivity and should also be versed on harmful traditional practices and gender based violence.

A declaration of absence of conflict of interest should be signed by each member of the team and annexed to the offer. No team member should have participated at the preparation, programming or implementation phases of the joint programme to be evaluated.

9. Deliverables and cost of the evaluation

The evaluation deliverables are the following:

1. Inception report (including drafts as outlined above)
2. PowerPoint presentation for the field phase debriefing
3. Four country case study reports
4. Final evaluation report
5. PowerPoint presentation for the stakeholder workshop
6. French version of the executive summaries of the final evaluation report and of the four country case study reports

Scheduled meetings and missions

Activity	Purpose
1 Meeting in New York (team leader)	Present the first draft inception report
1 Pilot mission	
2 Meetings in New York (core evaluation team)	Present the second draft inception report
3 Country visits	
1 Meeting in New York (core evaluation team)	Field debriefing
1 Meeting in New York (core evaluation team)	Present the draft final report
1 Workshop (core evaluation team)	Participation in stakeholder workshop in New York

The cost of the evaluation, including the contract of the external consultant team, will be covered by the UNFPA-UNICEF joint programme. The Evaluation Offices of both agencies shall contribute financially to the exercise. Staff time and resources will be provided by both agencies' Evaluation Offices and technical divisions.

No payment will be processed until the deliverables have been fully approved by the joint evaluation management group.

The contract will be awarded to the firm who will provide UNFPA with the most competitive technical and financial proposals. The invoices shall be sent to the Evaluation Branch, Division for Oversight Services, only after the joint EMG confirms in writing the acceptance of the reports.

10. Specification of tender

The bidder should submit a proposal that has two separate components: technical and financial. The proposal will be evaluated by UNFPA-UNICEF joint evaluation management group along with inputs from the joint ERG. The evaluation of the financial proposal will be performed by UNFPA/ PSB (procurement).

The technical proposal should detail the services offered, and respond to all aspects in the Terms of Reference describing at least the following:

- Technical profile of the company **(2 pages)**. Information associated with financial stability should be presented in the annexes.
- The bidder's understanding of the ToR **(2 pages max)**
- The approach and Methodology **(7 pages max)**
 - a. Present the approach and methods for the evaluation
 - b. Present how the country case study approach will be combined with desk studies, questionnaires and/or other methods.
 - c. Comment on any challenges or difficulties which might arise in structuring and conducting the evaluation, suggesting any solutions if applicable.
 - d. Quality assurance to be applied in performing the assignment.
- The proposed composition of the evaluation team **(1 page max)**. Curriculum vitae of each team member should be annexed to the offer.
- A detailed time and work plan for fulfilment of the assignment including a) the roles, functions and responsibilities of the different team members, b) estimates of the time required for the different tasks of the assignment, and c) a staffing schedule that specifies the tasks performed by and the time allocated to each of the team members **(3 pages max)**

Award criteria

The contract will be awarded to the economically most advantageous offer, taking into account the assessment of the content of the technical offer (see Request for Proposals)

Annex 1: Structure of the inception, country case study and final reports

a. Structure of the inception report

The report should follow the sequence and the names of the chapters as shown below; however, the evaluation team is free to add sections and/or sub sections as deemed relevant given the particular context of the evaluation. The report should be no longer than 30 pages excluding annexes.

The layout of the report is as follows:

Abbreviations

Table of contents (the table of contents should include a list of tables, graphs and diagrams) - 1 page

Key facts table (one-page table summarizing key programme factual data) - 1 page

CHAPTER 1: Introduction – 3 pages

1.1 Purpose and objectives of the joint programme evaluation

1.2 Scope of the evaluation

1.3 Purpose and structure of the inception report

CHAPTER 2: Global, regional and country context of FGM/C – 3 pages

2.1 The global response to FGM/C

2.3 UNFPA/UNICEF programmatic response to FGM/C as a component of the global response

CHAPTER 3: UNFPA/UNICEF programme – 5 pages

3.1 UNFPA/UNICEF programmatic response through the joint FGM/C programme

3.2 The programme financial structure

CHAPTER 4: Evaluation methodology and approach – 12 pages

4.1 Evaluation questions and overall approach and rationale for answering the evaluation questions

4.2 Methods for data collection and analysis (country case studies and main report)

4.3 Proposal (including criteria and justification for selection) of countries for 4 field visits

4.4 Data and methodological limitations and risks

CHAPTER 5: Evaluation process – 5 pages

5.1 Process overview

5.2 Team composition and distribution of tasks

5.3 Work Plan

List of Annexes

A numbered list of all the annexes to be included at the end of the report as in the example below:

<i>Annex 1</i>	<i>Terms of reference of the evaluation</i>
<i>Annex 2</i>	<i>Evaluation matrix or evaluation protocol</i>
<i>Annex 3</i>	<i>Portfolio of interventions in all countries</i>
<i>Annex 4</i>	<i>Template for survey</i>
<i>Annex 5</i>	<i>Interview guides</i>
<i>Annex 6</i>	<i>Guide for focus group discussion</i>
<i>Annex 7</i>	<i>Bibliography</i>
<i>Annex 8</i>	<i>List of people consulted</i>
<i>Annex 9</i>	<i>Minutes of the meetings with the ERG</i>

Tables, graphs and diagrams should be numbered and include a title.

b. Structure of the country case study reports

Each country case study should be of a maximum 30-page length (excluding annexes).

The country case studies allow the evaluation team to gather and analyse information on the joint programme interventions aiming at accelerating the abandonment of FGM/C at the country level, which together with the design and desk review phase findings should feed the global assessment reported in the Final Report.

The country case studies will be published as part of the overall evaluation exercise as stand-alone documents. These country case studies should be prepared after the field visits, they should respect the agreed structure and they should go further than the oral and powerpoint presentations (exit meeting debriefings) conducted at the end of the missions in the country office premises.

Indicative structure for country case studies:

1. Introduction (including: purpose of the evaluation; purpose of the country case study; reasons for selecting this country as a case study country).
2. Methodology of the country case study (including its limits and possible constraints)
3. Short description of FGM/C programme interventions in the country
4. Findings by evaluation question
5. Conclusions and recommendations at the country level and those that will be used for the synthesis/ final report
6. Annexes (including: list of people interviewed; list of documents consulted; list of the interventions, specifically considered; all questionnaires and instruments used; acronyms and abbreviations).

c. Structure of the final report

The report should follow the sequence and the names of the chapters as shown below; however, the evaluation team is free to add sections and/or sub sections as deemed relevant given the particular context of the evaluation. The report should be no longer than 60 pages (including the executive summary). Additional information on overall context, programme or aspects of methodology and analysis should be confined to the annexes (which however should be restricted to the important information).

<p>Executive Summary (5 pages maximum)</p> <p>This executive summary must present the following information:</p> <ul style="list-style-type: none">1.1 - Purpose of the evaluation;1.2 - Background to the evaluation;1.3 - Methodology;1.4 -Main conclusions;*1.5 -Main recommendations.* <p>Introduction</p> <ul style="list-style-type: none">1.1 Purpose of the evaluation1.2 Scope2. Methodology and process including limitations and constraints3. FGM/C global, regional and country context4. Findings and analysis5. Conclusions6. Recommendations <p>Annex 1 Terms of reference of the evaluation</p> <p>Annex 2 Evaluation matrix or evaluation protocol</p> <p>Annex 3 Portfolio of interventions in all countries</p> <p>Annex 4 List of people consulted</p> <p>Annex 5 List of documents consulted</p> <p>Annex 6 Methodological instruments used (survey, focus groups, interviews)</p> <p>Annex 7 Minutes of the joint evaluation reference group meeting</p>
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d. Guidelines for the cover for all reports

Structure of the cover for all reports:

UNFPA/UNICEF logos top, one on each side
Title of the evaluation: Evaluation of the UNFPA-UNICEF Joint Programme on Female Genital
Mutilation/Cutting (FGM/C): Accelerating Change (centered)

Title of the report (example Inception Report)

At the bottom of the page:

Evaluation Branch
Division for Oversight Services, UNFPA
Evaluation Office
UNICEF
New York
Date

Information that should appear on the second page of every report:

- Title of the evaluation
- Title of the report
- Names of the evaluation managers
- Names of the members of the reference group
- Names of the evaluation team

A box with the following information at the bottom of the page:

Any enquiries about this Report should be addressed to:
Evaluation Branch, Division for Oversight Services, United Nations Population Fund
E-mail: evb@unfpa.org Phone number: +1 212 297 2620

UNICEF Evaluation Office
3 UN Plaza, New York, NY 10017
Tel: 1 917 265 4620 Fax: 1 212 735 4427

Footer: Title of the evaluation and page number

Note: There should be no logos/ names of companies on any page of the reports except for the names of the evaluation team that should appear on the second page of every report.

Annex 2: Bibliography and references

- Convention on the Elimination of All Forms of Discrimination against Women, 1981
- Economic and Social Council, 'Ending female genital mutilation: report of the secretary general', E/CN.6/2012/8, Commission on the Status of Women, United Nations, New York, 2011.
- Harvard University Program on International Human Rights, 'UNFPA-UNICEF Joint Programme on FGM/C: country context reports, 2010 (unpublished, available upon request)
- Population Council, 'Design considerations for the evaluation of FGM/C initiatives', presentation by Ian Askew, Nairobi, Kenya.
- Protocol to the African Charter on human and people's rights on the rights of women in Africa (Maputo Protocol), Mozambique, 2003
- UNEG, 'Standards for Evaluation in the UN System', <http://www.uneval.org/index.jsp>
- UNEG, 'Norms for Evaluation in the UN System', <http://www.uneval.org/index.jsp>
- UNFPA, 'Cameroon Country Programme Evaluation', Evaluation Branch, DOS, New York, 2012.
- UNFPA/ UNICEF, 'Evaluation of the UNFPA-UNICEF joint programme on female genital mutilation/cutting: accelerating change: concept note', UNFPA, UNICEF, New York, 2012.
- UNFPA Evaluation Branch, DOS, web page: <http://www.unfpa.org/public/home/about/Evaluation>
- UNFPA/ UNICEF, 'Female genital mutilation/cutting: accelerating change: Funding proposal', UNFPA, UNICEF, New York, 2007.
- UNFPA/ UNICEF, 'Female genital mutilation/cutting: accelerating change: 2008 annual report', UNFPA, UNICEF, New York, 2009.
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- UNFPA/ UNICEF, 'Female genital mutilation/cutting: accelerating change: 2011 annual report', UNFPA, UNICEF, New York, 2012.
- UNFPA/ UNICEF, 'Joint programme on female genital mutilation/cutting: accelerating change: annual work plan 2012', UNFPA, UNICEF, New York, 2012.
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- UNFPA, 'Female genital mutilation/cutting (FGM/C)': web page
<http://www.unfpa.org/gender/practices3.html>
- UNFPA, 'Handbook on how to conduct a country programme evaluation at UNFPA', Evaluation Branch, DOS, New York, 2012.
- UNFPA, 'Strategic Plan: 2008-2011', DP/FPA/2007/17, New York, 2007
- UNFPA, 'Thematic evaluation on the UNFPA support to maternal health including the contribution of the Maternal Health Thematic Fund: TOR, inception report, desk report, country case studies', Evaluation Branch, DOS, New York, 2010.
- United Nations, 'UN General Assembly Resolution 56/128 on Traditional or Customary Practices Affecting the Health of Women and Girls', New York, 2002

UNICEF, 'Coordinated strategy to abandon female genital mutilation/cutting in one generation', Technical note, New York, 2007

UNICEF, 'Female genital mutilation/cutting: A statistical exploration', New York, 2005

UNICEF, 'Long-term evaluation of the TOSTAN programme in Senegal: Kolda, Thiès and Fatick regions', United Nations Children's Fund (UNICEF), Section of Statistics and Monitoring, Division of

Policy and Practice, New York, 2008.

UNICEF, 'Statistics for FGM/C', web page located at http://www.childinfo.org/fgmc_prevalence.php

UNICEF, 'Ethiopia: social dynamics of abandonment of harmful practices. Experiences in four locations', Innocenti Working Paper, New York, 2010.

UNICEF, 'The dynamics of social change: Towards the abandonment of female genital mutilation/cutting in five African countries', Innocenti Research Centre, New York, 2010.

WHO, 'An update on WHO's work on female genital mutilation (FGM): Progress report', WHO, 2011

WHO 'Eliminating Female Genital Mutilation: an interagency statement UNAIDS, UNDP, UNECA, UNESCO, UNFPA, UNHCHR, UNHCR, UNICEF, UNIFEM, WHO', 2008

Annex 3: Editing rules for reports

Parts of the report:

The foreword, executive summary, and main report should be treated as stand-alone documents.

Acronyms

Spell out the word(s) in its entirety the first time and include the acronym in parentheses after the word. Acronyms should be spelled out for first-time usage in each section, as the sections are sometimes reviewed independently. Acronyms or abbreviations should be used only if they are used repeatedly throughout the text. Too many acronyms can be confusing to readers. In the case of tables and figures, acronyms may be spelled out in a 'note' section below the table or figure for layout reasons.

Capitalization

- In general, capitalize proper nouns, such as official titles and names. For example, 'Conference for Gender Equity', 'Committee on HIV/AIDS', 'Commission on Regional Development', 'Government of South Africa'.
- Capitalize common nouns when they are used as a shortened title, for example, the 'Conference' (referring to the Conference on Gender Equity) or the 'Committee' (referring to the Committee on HIV/AIDS). However, don't capitalize when used as common nouns. For example, 'there were several regional conferences'.
- Words with acronyms are not necessarily capitalized. For example 'human development index (HDI)' or 'country office (CO)' are not capitalized.

General rules:

- Use lower case for 'headquarters' - 'country office' - country programme - country programme evaluation - headquarters - regional office - programme document - results framework - results-based monitoring framework - monitoring and evaluation system

Numbers

- Number less than 10 should be written out.
- Use % symbol in table and spell it out in the text

Terms

Use *UN organizations* not sister agencies

Do not use possessive for innate objects: do not use UNFPA's, UNDP's, UNICEF's, the Government's, the country's, etc. Such usage does not comply with United Nations editorial guidelines. Instead, use: the UNFPA programme, the government programme, the UNICEF programme, etc.

Presenting references

Government of South Africa, 'Report on HIV/AIDS in Southern Africa', Department of Health, Capetown, South Africa, 2003.

UNDP, 'Evaluation of Gender Mainstreaming in UNDP', UNDP Evaluation Office, New York, NY, 2006.

Presenting the list of people consulted

- This list should include the full name and titles of the people who have been interviewed and the organization to which they belong.
- The list should be ordered in alphabetical order by last name first. (English version)
- The list should be organized by type of organization.

Annex 4 - Ethical code of conduct for UNEG/UNFPA evaluations

Evaluations of UNFPA-supported activities need to be independent, impartial and rigorous. Each evaluation should clearly contribute to learning and accountability. Hence evaluators must have personal and professional integrity and be guided by propriety in the conduct of their business

Evaluation Team /Evaluators:

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

For details on the ethics and independence in evaluation, please see UNEG Ethical Guidelines and Norms for Evaluation in the UN System

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

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

Annex 5 – Evaluation quality assessment grid

OVERALL QUALITY OF REPORT: [Insert overall Assessment Level based on highest score above – see Explanatory Note for further guidance and example]

Overall Assessment: Note that the overall assessment must address, as a minimum, the following issues: *scope of the evaluation; methodological design; findings and analysis; credibility of data; recommendations; conclusion; executive summary.*

Quality Assessment criteria	Assessment Levels			
	Very Good	Good	Poor	Unsatisfactory
<p>1. Structure and Clarity of Reporting <i>To ensure report is user-friendly, comprehensive, logically structured and drafted in accordance with international standards.</i> Checklist of minimum content and sequence required for structure:</p> <ul style="list-style-type: none"> • i) Acronyms; ii) Exec Summary; iii) Introduction; iv) Methodology including Approach and Limitations; v) Context; vi) Findings/Analysis; vii) Conclusions; viii) Recommendations; ix) Transferable Lessons Learned (where applicable) • Minimum requirements for Annexes: ToRs; Bibliography List of interviewees; Methodological instruments used. 	Please insert <u>assessment level</u> followed by your main <u>comments</u> .			
<p>2. Executive Summary <i>To provide an overview of the evaluation, written as a stand-alone section and presenting main results of the evaluation.</i> Structure (paragraph equates to half page max):</p> <ul style="list-style-type: none"> • i) Purpose, including intended audience(s); ii) Objectives and Brief description of intervention (1 para); iii) Methodology (1 para); iv) Main Conclusions (1 para); v) Recommendations (1 para). Maximum length 3-4 page 				
<p>3. Design and Methodology <i>To provide a clear explanation of the following elements/tools</i> Minimum content and sequence:</p> <ul style="list-style-type: none"> • Explanation of methodological choice, including constraints and limitations; • Techniques and Tools for data collection provided in a detailed manner; 				

<ul style="list-style-type: none"> • Triangulation systematically applied throughout the evaluation; • Details of participatory stakeholders' consultation process are provided. • Whenever relevant, specific attention to cross-cutting issues (vulnerable groups, youth, gender equality) in the design of the evaluation 	
<p>4. Reliability of Data <i>To clarify data collection processes and data quality</i></p> <ul style="list-style-type: none"> • Sources of qualitative and quantitative data have been identified; • Credibility of primary (e.g. interviews and focus groups) and secondary (e.g. reports) data established and limitations made explicit. 	
<p>5. Findings and Analysis <i>To ensure sound analysis and credible findings</i></p> <p>Findings</p> <ul style="list-style-type: none"> • Findings stem from rigorous data analysis; • Findings are substantiated by evidence; • Findings are presented in a clear manner <p>Analysis</p> <ul style="list-style-type: none"> • Interpretations are based on carefully described assumptions; • Contextual factors are identified. • Cause and effect links between an intervention and its end results (including unintended results) are explained. 	
<p>6. Conclusions <i>To assess the validity of conclusions</i></p> <ul style="list-style-type: none"> • Conclusions are based on credible findings; • Conclusions are organized in priority order; • Conclusions must convey evaluators' unbiased judgment of the intervention. 	
<p>7. Recommendations <i>To assess the usefulness and clarity of recommendations</i></p> <ul style="list-style-type: none"> • Recommendations flow logically from conclusions; • Recommendations must be strategic, targeted and operationally-feasible; • Recommendations must take into account stakeholders' consultations whilst remaining impartial; • Recommendations should be presented in priority order 	
<p>8. Meeting Needs <i>To ensure that Evaluation Report responds to requirements (scope & evaluation questions/issues/DAC criteria)</i></p>	

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

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

Annex 6 – Evaluation matrix template

The evaluation matrix summarises the core aspects of the evaluation exercise by specifying what will be evaluated and how. The evaluation matrix is organised on the basis of the evaluation criteria.

Criteria	Evaluation question	What to check	Data sources	Data collection methods
Relevance				
Effectiveness				
Efficiency				
Sustainability				
Coordination				

Evaluation questions
This column will include the evaluation questions.
What to check
This column is an interface between the evaluation question and the data sources. It narrows the evaluation question further by specifying what evaluators should focus upon and what they should check precisely when attempting to answer the question.
Data sources
This column specifies the documents and informants that will provide the data and information that the evaluators will analyze in order to answer the questions.
Data collection methods
This column indicates the tools that will be used to collect data from the sources. The methods usually used are the study of documentation, surveys, individual interviews, group discussions and focus groups.

Annex 2. List of People Consulted during the Design Phase

Name	Position	Organisation	Type of Interview
Nafissatou J Diop	Coordinator, UNFPA-UNICEF joint programme on FGM/C, HQ	UNFPA	In person
Luis Mora	Chief, Gender Human Rights Branch, HQ	UNFPA	In person
Louis Charpentier	Chief, Evaluation Branch, HQ	UNFPA	In person
Alexandra Chambel	Evaluation Advisor, HQ	UNFPA	In person
Valeria Carou Jones	Evaluation Specialist, HQ	UNFPA	In person
Janet Jensen	Media and Communications Branch, HQ	UNFPA	In person
Philippe Grandet	Resource Mobilisation Branch, HQ	UNFPA	In person
Salma Hamid	Senior External Relations Adviser, External Relations, Executive Board	UNFPA	In person
Seynabou Tall	Gender Technical Advisor, UNFPA Eastern and Southern Africa sub regional office, and Africa regional office (Johannesburg)	UNFPA	By Skype
Idrissa OUEDRAOGO	Gender Technical Advisor, UNFPA West Africa Sub-regional Office	UNFPA	By email
Francesca Moneti	Senior Child Protection Specialist, Social Norms and Gender Equality Programmes, HQ	UNICEF	In person
Cody Donahue	Child Protection Specialist, Child Protection Section, Programme Division, HQ	UNICEF	In person
Susan Bissell	Associate Director, Child Protection section	UNICEF	In person
Karin Heissler	Child Protection Specialist, Child Protection section	UNICEF	In person
Colin Kirk	Head, Evaluation Office, HQ	UNICEF	In person
Krishna Belbase	Senior Evaluation Specialist, HQ	UNICEF	In person
Ian Askew	Director, Reproductive Health Services and Research.	Population Council	By phone

List of people consulted during the Kenya Pilot country visit

Name	Position / Title and Organization
National Level	
Government	
Ambassador Franklin Espila	Acting Permanent Secretary, Ministry of Gender, Children and Social Development (MoGCSD)
Mary Kabaru	Chief Gender, MoGCSD
Ramla Sharif	Social Development officer, MoGCSD
Pamela Godia	Head Division of Reproductive Health, Ministry of Public Health & Sanitation
Civil Society/Other Partners	
Hon. Linah Kolimo	Chairperson, Kenya Women Parliamentarians Association (KEWOPA)
Maureen Gitonga	Gender Advisor, KEWOPA
Jared Onsongo	Communications Adviser , KEWOPA
Njoki Karuyoa	Coordinator, Kenya Media Network on Population and Development (KEMEP)
Grace Mbugua	Organizational Director, Women Empowerment Link (WEL)
Faith Makome	Board member, Women Empowerment Link (WEL)
Melanie Hilton	Action Aid placement inspirator programme, WEL
Grace Kimani-Maingi	Executive Director, Federation of Women Lawyers (FIDA KENYA)
Jane Sarwanya	Deputy Executive Director, Federation of Women Lawyers (FIDA KENYA)
Alice Kirambi	National Executive Secretary, Maendeleo Ya Wanawake Organization (MYWO)
Elizabeth N. Mayieka	Assistant National Secretary, MYWO
Hellen Makone	Executive Director, MYWO
Musyomi Wasye	Norwegian Church Aid
Karin Christoffersen	Gender officer, Norwegian Church Aid
Dr. Guyo Jaldesa	Lecturer/Consultant, University of Nairobi
Marceline Nyambala	Programme Coordinator, AMWIK
Agnes Lenai	Programme Coordinator, Illmarak Community Concern
Alba Jimenez	Programme officer, ADRA Kenya
Irene Kizito	Ag. National General Secretary, YWCA
Thomas Okoth	Programme Officer, YWCA
Religious Organizations	
Abdullatif A. Sheikh	Programme Coordinator, Council of Imams and Ulamaas of Kenya

Name	Position / Title and Organization
Ibrahim Lethome Asmani	Member, Council of Imams and Ulamaas of Kenya
Abdinasir Haji Hassan	Member, Council of Imams and Ulamaas of Kenya
Fatuma Ali Saman	Principal, Nairobi Muslim Academy
Fatuma Molid Dakit	Scholar, Wigaya Women Charitable Organization
UN Agencies	
Lister Chepata	Program Analyst, UNFPA Kenya
Alexander Ilyin	Officer in Charge, UNFPA Kenya
Florence Gachanaja	JP Focal Point, UNFPA Kenya
Zipporah Gathiti	M&E Officer, UNFPA Kenya
Cecilia Kimemia	Assistant Representative, UNFPA Kenya
Robert Ndugwa	M&E Officer, UNICEF Kenya
Chrstine Ochieng	Former national coordinator for the GoK/UNICEF/UNFPA joint programme, UNFPA Kenya
Zeinab Ahmed	JP Focal Point, UNICEF Kenya
Marcel Rudasingwa	Country Representative, UNICEF Kenya
Janneke Kukler	Coordinator, GE and WE Programme, UN Women Kenya
Rogaia Abuelgasim Abdelrahim	Deputy representative, UNFPA (Somalia CO)
Sheema Sen Gupta	Chief, Child Protection Programme, UNICEF Somalia Country Office
Charity Koronya	Somalia JP Focal Point, UNICEF Somalia Country Office
Donors	
Geir Arne Schei	First Secretary, Norwegian Embassy
Skoldvor Fjerdvær	Immigration officer, Norwegian Embassy
Josephine Mwangi	Programme Coordinator, Swedish Embassy
Communities/CBOs	
10 Ernest M Mugambi Stephen Imathiu John Kirimi M'Murungi Silas M'Ikiao Rungai Phares Rutere Frances Kinoti Stephen Mworia Julius Muthamia Benjamin Mugambi Geoffrey Kamakia	Meru Council of Elders
25 (11 Women, 11 men, 3 girls) Evangeline Kiome Irenens Nyami Alfred Mutwiri Mbijiwe Francis Kinyua	Mujwa community members, including members of the Catholic Women's Association, teachers, former circumciser, girls having graduated from ARP

Name	Position / Title and Organization
Jenaro Fituma M'Imanyara Julius Kiogora Mugambi Cyprian Mariene Josphat Mitugi Marangu Salesco Mwarania Mtwamwari Samson K. Kiambi Jane Mpuria Colleta Paul Jane Nyamu Lucy Kiogura Silvenia John Stellah Kawira Damaris Mwendwa David Munene Christine Kinanu Margaret Ngugi Jacinta Kinoti Zipporah Nkando Maririna Nthiora Teresa Kinyua Fr. Henery Rutwento	
Lucy Kirimo	Meru District Gender Officer MoGCSD
Joyce Muriuki	Meru District Chair Person, Maendeleo Ya Wanawake Organization (MYWO);
Janepher Mbalient	Mt.Elgon District Chair Person, Maendeleo Ya Wanawake Organization (MYWO);
Martin Mutabari	Accountant (Nairobi, visiting Mt. Elgon), MYWO
14 (7 men, 7 women) Geoffrey Baraja Solomon Kikiterie Francis Kabindu Janevasc wandermave Muka Kemci Sharon Keboi Grace Arnoit Jacqueline Sakongi Godwin Kwemoi Moses Bomei Albert Pakalhini Moses Masai Esther Machai Phamice Monoo	District FGM Network. Mount Elgon community members including: Teachers, youth representatives, pastor, chief, elder. All activists, most also trainer of trainers
9 (3 men, 6 women) Jendi Chemla	Mt. Elgon community members, including: 2 pastors, one chairman community policing and clan chairman *(elder), one youth representative, one former circumciser, one female community leader, one chief, two girls who participated in

Name	Position / Title and Organization
Dasiy Chelangat Joyce Sihe Brian Psomukan Fanuel Makan Simon Kuensa Rosemary Ndiema Aknetta Cjenpr Kamet Cjenet	2010 ARP.
Father Mungai	Catholic Diocese of Nakuru (CDN)
Salome Muthengi	Gender officer, Women Empowerment Link
Eliud Njoroge	Field officer, Women Empowerment Link
Total: 65 <u>14 male Elders:</u> Pastor Amos Munche Daniel Keretto Noah Salani Isaya Mereu Peter Rossani Moses Migni John Kibiru Joseph Njoroge Moses Koonyo Philip Kamaamri Daudi Letiwa Josphat Musanga Amos Kararo Joseph Kararo <u>6 girls:</u> Lucy Wanjiru Naomi Wanjiru Elizabeth Wanjo Diana keveto Magdalena Nheci Mercy Mburu <u>7 young men:</u> Nathan Muncha Moses Laina Jeremiah Kasikua Elisa Lenkoyo Simon Kararo Nicholas Esho Danson Nteci <u>1 Gender officer</u> <u>Others (38):</u>	Kongoni community

Name	Position / Title and Organization
Irene Nyarangi Lilian Muniyangi Keziah kemunto Easter Orospeke Jane Kologo Grace Wahbug Tabitha Mjoki Morine Shiveka Leah Chepkemoi Monicah Mjeri Lucy Mjoki Joyce Wanjiru Gladwell Wambui Elushi Kazazo Naenyengune Kazezo Borcas Ndei Miriam Njeri Ann Waithera Mary Kararu Deninah Ndei Evolyin Njoso Jecinta Naemi Jane Lasoi Catherine Githae Elizabeth Nalakiti Maureen Shivekha Leah Chepkemoi Lucy Njoki Grace Nambuia Irene Nyarangi Kejia Kemunto Esther Nanjiru Jane Kedogo Veronicah Kiaric Jane Wangari Beatrice Lumati Frona Oresha David Binama	
Total: 65 <u>10 members of the FGM network:</u> Jeniffer Koipiri Jane Parsalach Mary Kipirich Stanley Lemukus Francis Lekingodia Eric Kipyator	Marigat community

Name	Position / Title and Organization
William Lempakany	
Edward Tamer	
Raphael Tenges	
Lilian Lendapana	
<u>9 girls/youth:</u>	
Isabella Kipirich	
Millicent Tamar	
Lynnex Korir Chepkonga	
Janet Nanigiot Tomer	
Merige Caroline Nasiyan	
Faith Mantaine Lendapana	
Vickline Gichuki	
Peninah Lepeliani	
Mercy S. Chelangat	
<u>21 male elders:</u>	
Rev. Stephen Lepeliani	
Pr. Joseph Isusele	
Headman Johnson Lehesi	
Isaiah Yatich (pastor)	
Joseph R. Lenasieku (chief)	
James K. Komen (pastor)	
Samwel P. Sekeu (chief)	
Paul S. Markoko (chief)	
Rev. Renson Lekikenyi	
Ev. Francis Lekitali (pastor)	
Leonard L. Laanor	
Wilson Leviana	
James Lematashum	
Francis Lengolianga	
Willy Olekibilim	
Moses Sauroki	
Patrick Olekoipiri	
Ezekiel Parteneo	
John Naniyo Letangule	
Francis Olekipirich (prov. Admin.)	
Zephaniah Lekachuma (prov. Admin)	
<u>10 young men (MORAN)</u>	
Wycliffe R. Parkitora	
Duncan Karirayo	
Jackson Lechemel	
Joseph Sampinja	
Dominic Sikamoi	
John Lesepei	
Paul Naremo	
John Lemuntelea	
Nathan Lemuunga	

Name	Position / Title and Organization
Fector Kipirich <u>6 teachers:</u> Sammy Wekantai Oleriman M. Pole Christopher Cheserem Margaret Nabori Joseph K. Kipkurere Lilian Lewatachum <u>9 women:</u> Miriam Sekey (G. treasurer) Nontasimi Leparteneu (midwife) Leah Naremo (midwife) Elima Lekachuma (secretary, Ngustro) Eglal Langat (Christian Ministries) Jane Lelimon (Elder) Lilian Nabori (Elder) Ev. Mary Legruself (pastor) Maryam Lekisemon (CCPD Coordinator)	

Annex 3. List of Documents Reviewed during the Design Phase

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Annex 4. Minutes of the ERG Meetings

FGM/C UNICEF UNFPA Joint Evaluation Reference Group meeting 12 September 2012

Present were:	Alexandra Chambel, UNFPA, Co- Chair of the reference group
	Krishna Belbase, UNICEF, Co- Chair of the reference group
	Valeria Carou-Jones, UNFPA
	Nafi Diop, UNFPA
	Francesca Moneti, UNICEF
	Anne Daher Aden, UNICEF (representing Judith Diers)
	Idrissa Ouedraogo, UNFPA
	Elsa Kuntziger, UNFPA
	Olivia Roberts, UNFPA
	Anette Wenderoth, Team leader (Universalialia)
	Joelle Palmieri, senior gender consultant (Universalialia)
Regrets:	Colin Kirk, UNICEF
	Judith Diers, UNICEF
	Cody Donahue, UNICEF
	Ian Askew, Population Council.

Summary of discussion

The main points of discussion are detailed below. Participants' initials indicate attribution of comments.

1. Joint Evaluation Management Group meeting with Evaluation Team (Universalialia) Alexandra Chambel (AC), chair of the management group, summarised the meeting between the Management Group and the Evaluation Team (Universalialia) that had taken place earlier that day. The calendar for the evaluation had been revised as a result of the delays with finalisation of the contract. The final deadlines will still be maintained, and country case studies may be conducted in parallel to help ensure this. The revised calendar will be circulated to the Reference Group for their information.

AC presented the following points for agreement by the Reference Group.

- i. Selection of pilot and country case studies: Kenya was proposed as the pilot case study. The availability of information, the existence of different approaches and variety of interventions in Kenya made it the primary candidate for the pilot mission. The pilot country would be an opportunity to test the methodology for the case studies but would also be a full-fledged country case study. The other three country case studies proposed were Sudan, Senegal, and Burkina Faso or Uganda.
- ii. The country case study reports for the Francophone countries would be in French.

iii. Members of the Joint Evaluation Management Group would be participating in the country case study visits in an active capacity, for gaining familiarity with the country/programme contexts and for facilitating data collection and quality assurance: Alexandra Chambel (Kenya and Senegal), Krishna Belbase (Sudan) and Valeria Carou-Jones (Uganda or Burkina Faso tbc).

iv. The importance of contacting the case study countries as soon as possible once selected was highlighted. Clarification was needed from the Reference Group on who from the two agencies in-country would assist with organizing the evaluation (whether it would be jointly done or led by one agency).

v. The creation of national Reference Groups in case study countries to involve national partners. The role of the national Reference Groups would be:

- a. to ensure government involvement and national ownership;
- b. to expedite data collection and
- c. to provide comments to the draft country case study reports (but they would not play a management role).

vi. The next Reference Group would be timed to share insights from the pilot case study.

vii. Evaluation plans for each of the country case studies would be developed (though were not a deliverable) to inform the evaluation team, Joint Evaluation Management Group and national stakeholders. Krishna will share an example.

2. Presentation by the Evaluation Team (Universalialia)

Anette Wenderoth (AW), Team leader, made a short presentation (power point presentation enclosed). She reiterated the purpose and objectives of the evaluation. The team was focusing on understanding the theory of change, that is, the key thinking and aims of the programme. Who is going to use this evaluation and for what purpose was raised as a question for the Reference Group. The phases of the evaluation were outlined, as per the ToR, and she raised the issue of further consultation with key stakeholders and that options included telephone interviews and a survey.

The evaluation team would consist of a Team Leader, Senior Gender Expert, 2 x Evaluation and Gender Equality Specialists, Research Assistants and 4 National/Regional Consultants.

Identified challenges included:

- Stakeholder availability – the role of the national consultants would mitigate the effect of this by providing follow-up after the field visit, and they would also play a key role in interviews/focus groups with national stakeholders, implementing agencies, beneficiaries.
- Type, amount and quality of data.
- Sensitivity of FGM/C and the potential impact on data collection at community level.
- Identification of the national consultants.

Discussion

AC raised the issue that the Joint Programme on FGM/C covers 15 countries whereas there were only four country case studies. The role of those four country case studies is to illustrate the programme. The evaluation team would need to gather information and data from the other eleven countries, such as: through documentary review, using a survey, phone interviews and webinars at regional level. The stakeholder mapping would be included in the Inception Report. AC, also raised the need to understand more about the 'jointness' of the Joint Programme on FGM/C, particularly at the regional level, such as how it adds value, does it work well at all levels, what are the differences if any and why do they exist?

Nafi Diop (ND) felt that it was important to clarify what was being examined at each level, for example that the regional level is working with both the global level and country level but in different ways.

Francesca Moneti (FM) clarified that regional level operations were with partners who were working in a number of countries so this would need a different approach. The issue of the sub-national level would also need to be considered. It was clarified by the evaluation team that the evaluation was looking at the mechanism of working as well as the specific content of FGM/C.

The title of the Joint Programme on FGM/C was discussed ('Accelerating Change'). The title was chosen as the programme aimed to accelerate and scale-up the existing trend of decrease and also utilise the observed benefits of a certain mix of activities. The title also aimed to acknowledge that the agencies could only make a contribution to this area.

Selection of country case studies

Kenya was confirmed as the pilot country, and Senegal and Sudan as country case studies. FM raised the challenge of accessibility in Uganda, as well as the similarity of some population groups with Kenya. Burkina Faso was therefore confirmed as the final country case study. The option of programme staff from Uganda visiting during the field missions was raised, and options for coordination with other existing meetings would be explored. It was agreed that the country case study reports for the Francophone country case studies would be in French.

Coordination of field visits/Communication with country offices

ND reported that the level and type of coordination between agencies varied in each programme country. ND recommended that initial contact was made with the programme focal points from both UNFPA and UNICEF about the evaluation, and that they be tasked with assisting in the coordination of the country case studies. ND would send an email on behalf of both agencies to

the relevant focal points informing them of their selection as a country case study, and stating that the Joint Evaluation Management Group would follow-up regarding the organisation process for the field visits. It was stressed that the provisional dates would need to be decided as soon as possible and communicated to the country offices. Provisional dates for pilot country case study were 22 October – 2 November 2012.

The national Reference Groups was discussed. National steering committees (or similar) were already in existence that could be used. Their exact role in the evaluation would need to be made clear, and the Management Group would write a note clarifying the role of the national Reference Groups. Idrissa Ouedraogo (IO) supported the use of these existing mechanisms.

Intended users of the evaluation

FM stated that it was anticipated that the results of the evaluation would be used both within agencies and direct use by partners. Within UNICEF the evaluation would be used for wider child protection/harmful practices-related programming, country programmes (social norms) and lessons for wider areas such as the mid-term strategic plan, post-MDG. ND reported that UNFPA would also use the evaluation to help inform the Strategic Plan and would provide learning for other gender issues. Direct use would be by programme country partners and donor countries as there was a current lack of systematic evaluation on this issue.

The evaluation could also influence the possible continuation of the Joint Programme on FGM/C, which had not been known during the development of the ToR so it is not reflected. The preliminary thoughts about the next phase were that it would operationally be similar in terms of 'jointness' and small global support that also conducts global advocacy. It would cover a similar number of countries, possibly including some of the same countries. It is being considered whether the focus would be FGM/C only or include other harmful practices (e.g. child marriage). FM commented that the issue of whether it is realistic to attempt this kind of global movement could be addressed.

ND commented that understanding the national perspective on the global support would be a useful insight. FM raised the role of countries working together as another issue for exploration e.g. 'peer review' of each other's programmes.

ND raised the issue of staff turnover but suggested that it would be possible to make contact with some key staff who had moved to new positions. Members of the Programme Steering Committee were highlighted as key potential interviewees, particularly as users of the evaluation. Colleagues at UN Women who had written the Secretary-General report on FGM/C were also suggested.

Main agreements

- Kenya was confirmed as the pilot case study country. The other country case studies are Senegal, Sudan and Burkina Faso.
- It was agreed that the country case study reports for the Francophone country case studies would be in French.
- Receipt of draft Inception report: 28 September 2012.
- Provisional dates for pilot country case study: 12 – 23 November 2012.

Next steps

- Joint Evaluation Management Group to circulate revised evaluation calendar;
- Provisional dates for country case studies to be decided asap;
- ND/FM to send email to country case studies notifying them of their selection and introducing the Management Group who would then follow-up;
- Joint Evaluation Management Group (Krishna) to write a note clarifying the role of the national Reference Groups;
- Additional interviewees at the global and regional levels to be provided by ND/FM to the evaluation team;
- Next Joint Evaluation Reference Group meeting November 29, 2012 (tentative date).



**FGM/C UNICEF UNFPA Joint Evaluation
Reference Group meeting
10 December 2012**

Present:	Alexandra Chambel, UNFPA, Co- Chair of the reference group Krishna Belbase, UNICEF, Co- Chair of the reference group Anne Daher Aden, UNICEF (representing Judith Diers) Nafi Diop, UNFPA Cody Donahue, UNICEF Colin Kirk, UNICEF Elsa Kuntziger, UNFPA Francesca Moneti, UNICEF Luis Mora, UNFPA Olivia Roberts, UNFPA Anette Wenderoth, Team leader (Universalia)
Phone:	Ian Askew, Population Council Ellen Gruenbaum, Universalia
Regrets:	Judith Diers, UNICEF; Idrissa Ouedraogo, UNFPA

Summary of discussion

The main points of discussion are detailed below. Participants' initials indicate attribution of comments.

1. Briefing on visit to Kenya (pilot case study) and issues arising from the field visit

Anette Wenderoth (AW) made a short presentation on the pilot case study mission to Kenya that was based on the debriefing presentation made to the National Reference Group and key national stakeholders in Nairobi on 23 November 2012 [the Kenya debriefing presentation is available at <http://www.unfpa.org/public/home/about/Evaluation/EBIER/TE/pid/10103>]. The

presentation included a set of preliminary observations, findings and conclusions deriving from the pilot mission in Kenya.

Francesca Moneti (FM) commented that 'assumptions' was not an appropriate term [slide 21] as the design of the joint programme was informed by theories based on social science research, and therefore an alternative term might be appropriate for use in the inception report.

Alexandra Chambel (AC) highlighted that the issue of 'clarifying and further strengthen linkages with other issues' [slide 23] referred to the question of whether FGM/C extended across programme areas within UN agencies (for example, for UNFPA does FGM/C link to reproductive health and rights and population data on GBV). This would need to be tested during the 3 remaining country case studies. FM commented that child protection is an inter-sectoral issue at UNICEF so it may be more useful to look at the social change/norms perspective of the joint programme.

In terms of experiences from the Kenya pilot case study mission, AC highlighted:

- i. Splitting the evaluation team into two sub-teams to conduct data collection at the community level enabled greater coverage of interviews and a larger portfolio of activities could therefore be assessed. The organisation of the teams had been done to ensure an optimum mix of UN, evaluation and national experience between the teams. Therefore the option of recruiting two national consultants, alongside one Evaluation Management Group (EMG) member and one international evaluation team member was being discussed with the evaluation team;
- ii. The National Reference Group that had been formed for the Kenya pilot case study had been very engaged, and had included representation from a range of key national stakeholders (government, religious leaders, national NGOs). The UNICEF and UNFPA Kenya country offices had played a key role in assisting with the formation and engagement of the National Reference Group;
- iii. Another key issue to be explored further in the three remaining country case studies is whether country offices are monitoring for results and the extent to which is integrated with monitoring for results for the country programme. Furthermore, are the results that they are monitoring for at the appropriate level and if it would be feasible to incorporate these results in to the country programme.

Discussion:

In response to the presentation, Nafy Diop (ND) requested information on the use of interview tools, specifically the focus groups and in-depth interviews with community members included in Volume 2 of the draft final inception report that had been circulated for comment to the Reference Group, and what the quality assurance process was for their use, for example ensuring that national experts had relevant research experience. She also commented that information on the practical experience of conducting focus groups discussions during the Kenya pilot case study mission would be useful.

AC clarified that the national expert will be recruited ensuring that he/she has research skills and/or interpreter assisted with translation during focus groups discussions or that some discussions were conducted in English. The use of two national consultants in the remaining three country case studies will help ensure that the required research and language expertise is available.

ND also highlighted the following points:

- i. Further information would be useful on the focus group discussions about public declarations, such as the added value of these declarations for the communities;
- ii. The design of the joint programme had intentionally respected the areas delineated between UNICEF and UNFPA in respective country programmes. Closer synergy between UNICEF and UNFPA in implementing activities may be evident in countries where both agencies work in the same geographical areas as is the case in some countries. Therefore the learning process between IPs should be better in these examples. ;
- iii. The joint programme does not support rescue centres [slide 17]. FM made the comment that the joint programme shared the evaluation team's concerns about the sustainability of rescue centres. AW clarified that this issue had been included in the briefing on Kenya pilot case study mission as interviewees had made the link between rescue centres and Alternative Rites of Passage but it was appreciated that these were not a joint programme activity;
- iv. The joint programme database was not intended to be integrated into the country programme monitoring and evaluation systems but was designed as a parallel system to aid the accountability processes of the joint programme. The evaluation team should focus their attention on assessing if some FGM/C indicators are integrated within the strategic plan and if country offices are reporting in the country office annual reports;
- v. The issue of medicalization/reproductive health and FGM/C was a key area for the joint programme in Kenya and the country case study report may wish to reflect this depending on the feedback from interviews. One recommendation may be to give more weight to reproductive health aspect of FGM/C, including the medicalization and de-

medicalization of the practice, health providers' skills for the prevention of FGM/C and their skills to manage the complications related to FGM/C including ensuring that women deliver safely.

- vi. The cultural complexity in Kenya should also be reflected and how this impacts on the success of activities. For example why there has been no public declaration so far in the Somali population whereas 3 public declarations were made with Pokot, Meru, Ilshamus communities.

AW clarified that the tools for community discussions were adapted in the field and will be revised for use for the remaining three country case studies. Interview protocols were also shared with interviewees beforehand. In terms of limitations to data collection, community-level focus groups discussions were held with community activists. Therefore, whilst the opposition to anti-FGM/C activities at the community level were reported by these groups they were not directly observed by the evaluation team.

Colin Kirk (CK) raised the issue of measuring results and that the inception report should make clear how areas or issues that have not shown results will be captured by the evaluation. Krishna Belbase (KB) commented that results in terms of identified needs against joint programme targets needs to be reflected more clearly. Issues of efficiency should also be expressed, such as allocation of funds, potential cost-savings.

AC commented that the issue of whether the country case study reports will include concrete and operational recommendations at country level will be decided after the remaining three country case studies, as it was possible to formulate preliminary recommendations for Kenya pilot case study but may vary for the other three.

2. Discussion of the revised inception report

Theory of Change

AW commented that the theory of change presented in the draft final inception report is aiming to clarify key assumptions underlying the joint programme about 'how change happens'. The theory of change is based on explicit and implicit thoughts on the dynamics of change outlined in existing joint programme documents. AW clarified that the suggested theory of change is not describing what the joint programme is doing but instead aims to describe what types of changes the joint programme is trying to achieve.

ND commented that the theory of change did not reflect that the joint programme aims to effect change at multiple levels. Furthermore the direct link between some outcomes (i.e.

outcome one leads to outcome two) is not appropriate as outcome 2 is influencing more. The evaluation should not focus on outcomes but instead focus on the efforts that go into changes at these multiple levels. She felt that it was not appropriate to group some activities together as although they are at similar levels they involve different types of effort, and that capturing the joint programme contribution at the different levels was key.

CK highlighted that the theory of change is intended to provide a much broader and richer approach for the evaluation than would be achieved by only reviewing the joint programme results framework, and is intended to be an analytical tool. The theory of change enables the evaluation team to be critical of the interventions, such as identifying gaps, but should also relate to the results framework.

Cody Donahue (CD) commented that it was helpful that the theory of change reflects the different timescales for different outputs but there are some outputs that have not been identified at the short and medium term. The Reference Group will send comments on the theory of change to help address these issues. While the theory of change is a useful tool for the evaluation it is important to make clear to joint programme country offices that it is not intended to replace the revised results framework. CD felt that it would be useful to know whether the theory of change could be tested as a result of the Kenya pilot case study. He also highlighted that contextual factors were missing and it would be useful to know how these could be captured.

AW clarified that the theory of change was developed based on the joint programme programming documents and aimed to make clear how the joint programme operated differently at different levels. It is an illustrative diagram of 'how change happens', and it was important to keep a certain level of complexity in order to demonstrate causality. While there is a strong theoretical basis for the joint programme there are also areas where it would be useful to examine further why change happens. AW commented that the integration of outputs into the theory of change was not meant to indicate that the joint programme did not carry out activities in certain areas, but to illustrate at what levels the explicit results noted in the joint programme logframe were 'located'. The theory of change had been shared with the National Reference Group for the Kenya pilot case study and positive comments were received about its clarity and logic. The theory of change did not require any adjustments as a consequence of the Kenya pilot case study.

Luis Mora (LM) added that the theory of change aimed to illustrate the added value of the joint programme but that this was not the design of the original proposal so it was difficult to therefore align the theory of change directly with the joint programme design. The theory of

change would be useful for the second phase of the joint programme, and FM agreed that it would be useful for identifying the research agenda for the second phase.

Evaluation questions

AC raised for comment that an additional evaluation question (EQ7) had been incorporated into the draft final inception report: 'to what extent and how has the joint programme integrated cross-cutting issues of gender equality, human rights, cultural sensitivity, equity focus and youth?'. ND commented that youth was a population group and was not appropriate to include in the evaluation question as a cross-cutting issue on the same level as gender equality or human rights. Issues of gender equality and human rights should be assessed for the youth group as it will be for women or other groups. Therefore a recommendation is to introduce the youth target in another evaluation question. CD commented that participation of various population groups may be more appropriate for inclusion in evaluation questions on design (EQ1) or effectiveness (EQ2). The evaluation team agreed to revise the EQ based on these comments. ND clarified that equity was a key issue for UNICEF but UNFPA use gender equality. LM commented that equality was more than a cross-cutting issue and was a core aspect of UNFPA programmes, and therefore needed to be at the centre of the evaluation analysis.

CK raised the issue of counter-factuals and questioned how the evaluation would capture and explain any shortcomings, as the evaluation seemed well-positioned to capture where results had been achieved but that a methodology to identify where results were not achieved, and linked to issues with design or implementation of the joint programme, was also needed. AW responded that it was not possible to visit countries where the joint programme was not operating so it was not possible to have a true counter-factual. However, the country case studies would involve visiting countries where the implementation of similar activities has generated different results. AC added that interviews with key national stakeholders would allow for exploration of what would not have been achieved without the joint programme. ND added the example of Somali communities in Kenya where awareness-raising and education programmes have been implemented for years and the joint programme is also supporting that effort. However there has not been a public declaration yet as in other communities in Kenya. It would therefore be useful for the evaluation to comment on this variation in results within countries, and whether the same theory of change was applicable in these different contexts. Ellen Gruenbaum commented that the different contexts will help understand the areas in the theory of change where it is not fully understood why change happens or does not happen. For example in Sudan, there may be different reasons for intra-country variance than in Kenya. FM added the example that community discussion varies with context, in terms of who leads the discussion, what point it takes place, and so does this still make community discussion a key aspect of theory of change? These are the types of questions about the joint programme that

the theory of change needs to help the evaluation to answer. CD commented that Tanzania and Ghana were examples of countries where anti-FGM/C activities were taking place but were not supported by the joint programme so it may be possible to use existing research from these countries.

ND raised the issue of how the evaluation would assess regional cross-border initiatives and south-south cooperation. Exchanges between countries on their experiences, organised under their own initiative, could be an example of the added value of the joint programme. She added that the joint programme global consultation and dialogue sessions helped this process. AC responded that these issues would be explored via the survey that would be sent to the country offices of the non-visited joint programme countries complemented by group discussions with these country offices and implementing partners, interviews with regional stakeholders, and the remaining three country case studies.

AC clarified that the interview protocols in Volume 2 were adjusted based on the experiences from the Kenya pilot case study.

ND commented that the UNFPA Representative in Senegal was leaving their post this week and that the evaluation team would need to conduct an interview as soon as possible.

CK commented that the inception report was the final point at which the Reference Group could highlight issues for the evaluation to consider or make comments on the methodological approach chosen by the evaluation team.

AC requested comments on the draft final inception report from the Reference Group by 13 December 2012.

Next steps

AC outlined the next stages in the evaluation process:

- Deadline for comments on draft final inception report from the Reference Group and joint Evaluation Management Group - 13 December 2012;
- Draft Kenya country case study report – 19 December 2012;
- The evaluation team to incorporate comments and submit the final inception report - 21 December 2012;
- Payment of 30% to evaluation team on receipt of final inception report;
- Survey to non-visited countries will be conducted in parallel with the three remaining country case studies:

- Senegal: 21 January – 1 February 2013
- Sudan: 21 January – 1 February 2013
- Burkina Faso: 4 – 15 February 2013
- All country case study reports will be finalised at the same time to ensure consistency of content and format.
- The delivery of the final report is expected in mid June 2013.
- The dissemination strategy is still being discussed among the joint Evaluation Management Group but will include a stakeholder workshop in Q3 2013.
- The final report will be presented to the Executive Board in January 2014; a joint presentation by UNICEF and UNFPA was agreed.

Annex 5. Joint Programme Expected Results (Outcomes and Outputs)

The table below shows the revised logframe's outcomes and outputs and aligns them, as far as possible, to the original logframe's outcomes and outputs.

Revised Logframe (2011)	Original logframe (2007)	Alignment
Outcome 1 Change in the social norm towards the abandonment of FGM/C at the national and community levels	Outcome 1 A change in the social convention within the community towards the abandonment of FGM/C.	Good alignment
1. Effective enactment, enforcement and use of national policy and legal instruments to promote the abandonment of FGM/C.	1. Effective enactment and enforcement of legislation against FGM/C.	Good alignment
2. Local level commitment to FGM/C abandonment.	2. Knowledge dissemination of socio-cultural dynamics of FGM/C practice	Both outputs relate to changes at the community level. But they do not fully align.
3. Media campaigns and other forms of communication dissemination are organized and implemented to support and publicize FGM/C abandonment.	6. Media campaigns emphasizing FGM/C abandonment process in Sub-Saharan Africa, Sudan and Egypt.	Good alignment
4. Use of new and existing data for implementation of evidence-based programming and policies, and for evaluation.	4. Evidence-based data for programming and policies.	Good alignment
5. FGM/C abandonment integrated and expanded into reproductive health policies, planning and programming.	7. Better integration of the implications of FGM/C practice into reproductive health strategies.	Both outputs relate to the health sector. However the old output focuses on treatment of FGM/C rather than prevention/abandonment.
6. Partnerships with religious groups and other organizations and institutions are consolidated and new partnerships are identified and fostered.	5. Consolidation of existing partnerships and forging of new partnerships.	Good alignment
7. Tracking of programme benchmarks and achievements to maximize accountability of programme partners.		No matching output
8. Strengthened regional dynamics for the abandonment of FGM/C.	Outcome 2 Positive community and national efforts towards social transformation are expanded within and across countries.	There appears to be some degree of alignment between the new output 8 and the old outcome 2, despite the different level in the result logic.
Outcome 2 Strengthened global movement towards abandonment of FGM/C in one generation.		No explicit alignment at the outcome level. However output 3 and 8 of the original logframe can contribute to this outcome

Revised Logframe (2011)	Original logframe (2007)	Alignment
9. Strengthened collaboration with key development partners on the abandonment of FGM/C.	3. Collaboration with key global development partners on a common framework for the abandonment of FGM/C. 8. Building donor support to pool resources for a global movement towards abandonment of FGM/C	Some degree of alignment
10. Existing theories on the functioning of harmful social norms are further developed and refined with a view to making them applicable to the specific realities of FGM/C.		No alignment

Annex 6. Joint Programme Activities (reconstructed from revised logframe)

In the following list the activities envisaged in the revised logframe are grouped by broad types. The letters in bold following each activity refer to the level at which the activity is expected to take place: C = community; A-C= across communities; N= national; R= regional; G= global.

Creating, coordinating, maintaining networks and partnerships

- Creating and supporting a coordination body/mechanism at national and decentralized levels **N**
- Linking health professionals to the community education activities. **C, A-C**
- Strengthening collaboration with faith based networks, council of traditional leaders and institutions. **N, C, A-C**
- Strengthening collaboration with other civil society networks (parliamentarians, youth and women's organizations, professional organizations) and development cooperation partners. **N**
- Supporting regional exchange and south-south cooperation among community members, religious leaders, NGOs, parliamentarians, government officials and members of professional organizations to accelerate abandonment across borders **A-C and R**

Advocacy, policy dialogue, resource mobilization

- Policy dialogue for: international treaty ratification and reporting under CEDAW, Convention of the Rights of the Child and other international human rights treaties as relevant to FGM/C. **G and N**; national legislation drafts and bills against FGM/C; the formulation of national policy documents and legislation related to FGM/C abandonment. **N**
- Promoting the adoption of guidelines against the medicalized practice of FGM/C and reinfibulation by medical professional associations. **G and N**
- Promotion and advocacy of FGM/C abandonment by the medical professionals association. **N**
- Increasing and consolidating support for the Joint Programme by expanding knowledge of its approach and of the evidence it is based on and the programme achievements. (Evidence-based advocacy, Visibility) **G**
- Contributing to maintain the human rights of girls and women and FGM/C high on the UN agenda in its relevant bodies (UNGA, CSW). **G**
- Fundraising activities. **G**

Capacity strengthening (training, technical support, system building)

- Capacity building of key stakeholders to develop and implement social norm change interventions (training of UN country office staff, country GOs local NGOS and facilitators) **G and C**
- Technical support for: international treaty ratification and reporting under CEDAW, Convention of the Rights of the Child and other international human rights treaties as relevant to FGM/C.; national legislation drafts and bills against FGM/C; the formulation of national policy documents and legislation related to FGM/C abandonment. **N**

- Strengthening the capacities of law enforcement agents to enforce legislation on abandonment of FGM/C. **N**
- Establishing community surveillance **systems** to support FGM/C abandonment initiatives. **C and A-C, R (when communities collaborate across borders)**
- Strengthening the capacity of the media to provide appropriate and effective coverage of FGM/C abandonment **N**
- Developing capacity of health care system, particularly reproductive health care services. **N**
- Training midwives regarding the complications of FGM/C. **N and C**
- Strengthening capacity of health personnel to increase awareness among youth and women on health risk related to FGM/C and managing the complications related to FGM/C. **N and C**
- Strengthening the capacity of GOs and NGOs in M&E. **N**

Support to communication, sensitization and awareness raising

- Conducting educational campaigns linked to enforcement of legislation to the abandonment of FGM/C. **N, C, A-C**
- Facilitating press conferences and other media activities related to FGM/C abandonment activities. **N**
- Dissemination of information in the form of flyers and/or pamphlets about the abandonment of FGM/C. **N**
- Conducting specific activities to stimulate national and community dialogue on FGM/C. **N and C**
- Developing activities against the medicalization of FGM/C. (sensitization? Information?) **N**
- Encouraging regional communication activities **R**

Support to community education, dialogue and community-led initiatives

- Adapting and utilizing appropriate learning tools and processes for education and community-led interventions promoting the abandonment of FGM/C **C**
- Supporting and engaging community-level leaders and stakeholders using the social norms perspective in support of FGM/C abandonment. **C**
- Facilitating dialogue for communities to explore the option of abandoning FGM/C. **C**
- Supporting inter-communities meetings to disseminate positive social change experiences. **C and A-C**
- Supporting religious and traditional leaders to promote the abandonment of FGM/C. (how??) **C and N**

Data and knowledge generation, and circulation (including M&E)

- Creation of relevant M&E framework and, tools. M&E Data collection, information gathering and analysis. **ALL**
- Ensuring analysis and use of DHS and MICS data on FGM/C. **N**
- Conducting in-country qualitative surveys to guide programming. **N**
- Organization of meetings to present and review new findings **N**

- Developing studies in collaboration with academic partners that enhance understanding of the social dynamics of FGM/C **N, R, G**
- Further developing Existing theories on the functioning and implications of relevant harmful social norms. **G**
- Collection and analysis of data. **N, R, G**
- Review the process of using human rights concepts and methods in FGM/C abandonment activities.
- Data dissemination resulting from lessons learned. **N, R, G**
- Supporting INTACT for dissemination of knowledge generated by the programme **G**

Annex 7. Modified Indicator Quality Assessment Tool

Joint UNFPA/UNICEF Programme: Abandonment of Female Genital Mutilation/Cutting: Accelerating Change										
Country:										
Years:										
Indicator	Baseline	Target	Progress towards achieving outputs	QUALITY ASSESSMENT CRITERIA						
				Relevant	Specific	Operational				Values collected and reported
Baseline Available	Endline available	Target Available	Means of Verification							
Outcome 1: Change in the social norm towards the abandonment of FGM/C at the national and community levels										
Output 1: Effective enactment, enforcement and use of national policy and legal instruments to promote the abandonment of FGM/C										
Output 2: Local level commitment to FGM/C abandonment										
Output 3: Media campaigns and other forms of communication dissemination are organized and implemented to supports and publicize FGM/C abandonment										
Output 4: Use of new and existing data for implementation of evidence-based programming and policies, and for evaluation										
Output 5: FGM/C abandonment integrated and expanded into reproductive health policies, planning and programming										
Output 6: Partnerships with religious groups and other organizations and institutions are consolidated and new partnerships are identified and fostered										
Output 7: Tracking of programme benchmarks and achievements to maximize accountability of programme partners										
Output 8: Strengthened regional dynamics for the abandonment of FGM/C										

		QUALITY ASSESSMENT CRITERIA						
		Relevant	Specific	Operational				Values collected and
				Baseline Available	Endline available	Target Available	Means of Verification	
#	# of yes (1)	0	0	0	0	0	0	0
	# of no (0)	0	0	0	0	0	0	0
	Total	0	0	0	0	0	0	0
%	% of yes (1)							
	% of no (0)							
	Total							

Annex 8. Evaluation Matrix

Evaluation Questions and Sub-questions	What to check (indicators)	Data sources	Methods of data collection
EQ1: How relevant and responsive has the joint programme been to national and community needs, priorities and commitments as well as to the global and regional priorities and commitments of UNFPA, UNICEF and key international stakeholders?			
<i>Evaluation criteria: relevance (including programme design)</i>			
<p>1.1. To what extent are the objectives of the joint programme consistent with the needs in the targeted communities?</p> <p>1.2. To what extent are the objectives of the joint programme aligned with programme country government priorities and commitments?</p> <p>1.3. To what extent are the objectives of the joint programme aligned with UNFPA/UNICEF policies and strategies at the global, regional and country levels?</p> <p>1.4. To what extent are the objectives of the joint programme aligned with priorities and commitments of development partners at the global and regional levels?</p> <p>1.5. How appropriate are the overall joint programme design and the approach and strategies promoted and used by the joint programme at each level (global, regional, national and community) in view of achieving expected results? What are their strengths and weaknesses?</p> <p>1.6. To what extent and how have strategies and interventions been contextualized at the national and community level?</p>	<p>a) Evidence of alignment of the objectives of the joint programme with identified needs in the targeted communities.</p> <p>b) Evidence of alignment of the objectives of the joint programme with programme country government priorities and commitments.</p> <p>c) Evidence of alignment of the objectives of the joint programme with UNFPA/UNICEF policies and strategies at the global, regional and country levels.</p> <p>d) Evidence of alignment of the objectives of the joint programme with development partners' priorities and commitments at the global and regional levels.</p> <p>e) Evidence of the validity of the theory/theories of change.</p> <p>f) Key stakeholders' views on strengths and weaknesses of the overall programme design, approach and strategies (including on the validity of the theory/theories of change in various contexts)</p> <p>g) Evidence of contextualization of strategies and interventions (including through local-level consultation, national needs and national government priorities consideration and capacity assessments)</p>	<p><u>Documents:</u></p> <p>Joint programme documents: joint programme proposal and preparation and background documents; updated proposal; revised joint programme logframe; country and global annual reports and updates; annual workplans.</p> <p>Relevant studies at the community and country levels: KAP studies, baseline studies, community and country level situation analysis, capacity and needs assessments.</p> <p>National and global consultation reports.</p> <p>Programme countries government policies and strategy and planning documents.</p> <p>UNFPA/UNICEF policy and strategy documents (global, regional and country levels).</p> <p>Strategy and policy documents from select development partners.</p> <p>Relevant literature on FGM/C and approaches to its abandonment.</p> <p><u>Stakeholders:</u></p> <p>Programme staff at HQ, regional and country levels, other relevant UNFPA</p>	<p>Document review</p> <p>Key informant interviews</p> <p>Community level focus groups</p>

Evaluation Questions and Sub-questions	What to check (indicators)	Data sources	Methods of data collection
		and UNICEF staff. Programme partners at global, regional and country levels. Government officials and civil society representatives in case study countries (including selected participants in local consultations). Community representatives and members in case study countries. Donor representatives (including Steering Committee members). Experts on FGM/C at global and country levels.	
EQ2: To what extent has the programme contributed to the creation of sustainable favourable conditions and changes in social norms leading to the abandonment of FGM/C at the national and community levels (Outcome 1), and to strengthening the global movement towards abandonment of FGM/C in one generation (Outcome 2)?			
<i>Evaluation criteria: effectiveness and sustainability</i>			
<p>2.1. To what extent have outputs been achieved and contributed to, or are likely to contribute to, the achievement of the planned outcomes of the joint programme? In particular:</p> <p>2.1.1 To what extent has the joint programme contributed to creating a more conducive national environment for the abandonment of FGM/C in programme countries? (Outputs 1, 2, 3,4,5,6)</p> <p>2.1.2 To what extent has the joint programme contributed to fostering local level commitment to abandon FGM/C in programme countries? (Output 2)</p> <p>2.1.3 To what extent has the joint programme contributed to strengthening regional dynamics and the global movement for the abandonment of FGM/C? (Outputs 8, 9 and 10).</p>	<p>a) Evidence of progress towards output and outcome level indicators as per revised logframe.</p> <p>b) Evidence of joint programme contribution towards anticipated changes (using contribution analysis).</p> <p>c) Stakeholder views on key achievements, missed opportunities and factors supporting or hindering the joint programme's success.</p> <p>d) Evidence (type and nature) of contextual changes/trends and related opportunities or challenges for the joint programme at global, regional, national and community levels.</p>	<p><u>Documents:</u></p> <p>Joint programme documents: country and global annual reports, mid-year reports and updates, monitoring documents, annual consultation reports, Steering Committee meeting minutes, communication materials.</p> <p>Activity level/partners' reports (only for case studies).</p> <p>Joint programme country-specific databases.</p> <p>Relevant DHS and MICS data.</p> <p>KAP studies and other relevant studies at the community and country levels.</p> <p>Relevant publications on the FGM/C abandonment context at the global and regional level.</p> <p>Relevant evaluations.</p>	<p>Document review</p> <p>Key informant interviews</p> <p>Community level focus groups and observation</p> <p>Survey</p> <p>Virtual focus groups</p>

Evaluation Questions and Sub-questions	What to check (indicators)	Data sources	Methods of data collection
<p>2.2 What factors (including both internal factors and environmental factors such as opportunities and challenges in the global, regional, country and community contexts) have supported or hindered the achievement of (or contributions to) results?</p>		<p><u>Stakeholders:</u> Joint programme staff at HQ, regional and country level; other relevant UNICEF and UNFPA staff. Donor representatives (including Steering Committee members). Partners and other stakeholders (at all four levels). Members of targeted communities. <u>Observation</u>, in particular at the community level</p>	
<p>EQ3: To what extent have the outputs of the joint programme been achieved or are likely to be achieved with the appropriate amount of resources/inputs (e.g., funds, expertise, time, procedures, rules and regulations, administrative costs, etc.)?</p>			
<p><i>Evaluation criteria: efficiency</i></p>			
<p>3.1. To what extent were the available resources adequate to achieve the expected outputs? 3.2 To what extent has the mix of strategies and activities implemented in diverse country contexts differed in terms of their efficiency? 3.3 To what extent has the joint programme been able to complement implementation at country level with related interventions, initiatives and resources at global and regional levels to maximize its contribution to the abandonment of FGM/C?</p>	<p>a) Extent to which programme outputs were achieved within planned budgets. b) Utilization rates per country per year. c) Expenditures per output per country. d) Extent to which joint programme budgets were supplemented with resources from other initiatives. e) Evidence of synergies between country and regional/global interventions, initiatives and resources. f) Joint programme staff and partner views on the adequacy of the available resources. g) Joint programme staff views and on the comparative efficiency of the mix of strategies and activities implemented in diverse countries.</p>	<p><u>Documents</u> Joint programme documents: country annual reports (narrative and financial), annual workplans, allocation memos, other joint programme financial documents (at the global and country levels), Steering Committee meeting minutes. <u>Stakeholders</u> Programme staff (at HQ, regional and country levels), other relevant UNICEF and UNFPA staff, programme partners (at all levels).</p>	<p>Document review Key informant interviews</p>

Evaluation Questions and Sub-questions	What to check (indicators)	Data sources	Methods of data collection
EQ4: To what extent are the benefits and achievements of the joint programme likely to continue after the programme has ended due to factors such as national ownership, scalability and use of partnerships for sustainability?			
<i>Evaluation criteria: Sustainability</i>			
<p>4.1. To what extent and how has the joint programme strengthened national ownership, capacity and leadership (at national and decentralized levels) in programme countries?</p> <p>4.2. To what extent do the strategies used by the joint programme lend themselves to wider scalability and programme expansion, overall and in specific contexts?</p> <p>4.3. To what extent have the joint programme approach, strategies and initiatives been integrated into other national initiatives aiming at addressing the issue of FGM/C?</p> <p>4.4 To what extent have partnerships (with governments, UN system, donors, NGOs, civil society organizations, religious leaders, the media) been established to foster sustainability of effects?</p>	<p>a) Evidence of strengthened national ownership, capacity and leadership for national counterparts and partners.</p> <p>b) Stakeholders' views on the scalability of strategies used under the joint programme.</p> <p>c) Examples of scaling up or expansion.</p> <p>d) Evidence of the joint programme having been integrated into other national initiatives aiming at addressing the issue of FGM/C.</p> <p>e) Evidence of broadened or strengthened partnerships with relevant actors.</p>	<p><u>Documents</u></p> <p>Joint programme documents: country annual reports, country annual workplans, annual consultation reports. Joint programme partners' reports to UNFPA/UNICEF (on programme supported activities).</p> <p>National planning and policy documents (including budgets), and capacity building plans related to the abandonment of FGM/C in programme countries.</p> <p><u>Stakeholders</u></p> <p>Joint programme staff (at HQ and country levels), national counterparts, implementing partners.</p>	<p>Document review</p> <p>Key informant interviews</p> <p>Virtual focus groups</p>
EQ 5: How efficient and effective was the coordination between UNFPA and UNICEF at the global and country levels in view of achieving joint programme results?			
<i>Evaluation criteria: effectiveness, efficiency and coordination between UNFPA and UNICEF (including programme management)</i>			
<p>5.1. How appropriate, clear and efficient was the coordination between UNFPA and UNICEF in relation to:</p> <ul style="list-style-type: none"> - dividing roles and accountabilities? - planning? - decision-making? - implementation of activities? - production, circulation and use of data? - monitoring, reporting and evaluation? - cost sharing/reduction of transaction costs? 	<p>a) Evidence of clarity and quality of coordination between UNFPA and UNICEF in relation to: roles and accountabilities; planning; decision-making; implementation of activities; production, circulation and use of data; monitoring, reporting and evaluation; cost-sharing/reduction of transaction costs.</p> <p>b) Evidence of issues/problems/gaps and areas for improvement in coordination mechanisms.</p> <p>c) Evidence (examples) of added value of the joint structure (e.g. in terms of cost savings, enhanced capacity, synergies and reach)</p>	<p><u>Documents</u></p> <p>Joint programme documents: joint programme proposal and other programme "set up" documents; TORs for coordination roles and mechanisms; annual reports (including financial); Steering Committee meeting minutes; annual consultation reports.</p> <p>UN, and more specifically UNICEF and UNFPA, strategies and guidance documents on joint programmes and coordination among agencies.</p>	<p>Document review</p> <p>Key informant interviews</p> <p>Survey</p> <p>Virtual focus groups</p> <p>Records of observations</p>

Evaluation Questions and Sub-questions	What to check (indicators)	Data sources	Methods of data collection
5.2. What was the added value of the joint structure of the programme?		<u>Stakeholders</u> Programme staff and other relevant UNICEF/UNFPA staff at HQ, regional and country level; programme partners at global, regional and country level. <u>Observation</u> during site visits (both at HQ and in the four countries)	
EQ 6: How efficient and effective was the management of the joint programme at global, regional and country levels?			
Evaluation criteria: effectiveness, efficiency and programme management			
6.1. What have been key strengths and weaknesses of the management of the joint programme at the global, regional and country levels, and their interactions? 6.2. How adequate were the implementation mechanisms (financing instruments, administrative regulatory framework, staff, timing and procedures) in view of achieving results? 6.3. To what extent have joint programme benchmarks and achievements been monitored? 6.5. How adequate and responsive was global/regional support in providing necessary guidance and tools, technical support, and capacity development to country offices and global partners?	a) Staff and key partners' perceptions of the efficiency and effectiveness of programme management at the global, regional and country levels. b) Staff and implementing partners' views on strengths and weakness of the implementation mechanisms. c) Evidence of issues/problems/gaps and areas for improvement in these mechanisms. d) Degree of appropriateness and utilization of monitoring tools and mechanisms. e) Country offices and global partners' views on the adequacy and responsiveness of the support and guidance received from the programme (from HQ and regional offices).	<u>Documents</u> Joint programme documents: joint programme proposal and other programme "set up" documents; workplans and other planning documents; annual reports, existing tools (M&E, technical guidance, etc.), Steering Committee meeting minutes, annual consultation reports, M&E workshop reports. Corporate (UNICEF and UNFPA) documents describing established processes and systems. <u>Stakeholders:</u> Joint programme staff and other relevant UNICEF/UNFPA staff at HQ, regional and country levels; programme partners at global, regional and country levels. <u>Observation</u> during visits to HQ and four programming countries.	Document review Key informant interviews Survey Virtual focus groups Records of observations
EQ 7: To what extent and how has the joint programme integrated gender equality, human rights, cultural sensitivity, and equity in design, implementation, monitoring, and evaluation? To what extent is youth targeted as key population?			
Evaluation criteria: relevance, effectiveness and programme management			
7.1 To what extent and how have cross-cutting issues of gender equality, human	a) Evidence of integration of cross-cutting issues of gender equality, human rights, cultural	<u>Documents</u>	Document review

Evaluation Questions and Sub-questions	What to check (indicators)	Data sources	Methods of data collection
<p>rights, cultural sensitivity, equity focus, and youth been integrated into the design of the joint programme?</p> <p>7.2 To what extent and how have cross-cutting issues of gender equality, human rights, cultural sensitivity, equity focus and youth been integrated into the implementation of the joint programme?</p> <p>7.3 To what extent and how have cross-cutting issues of gender equality, human rights, cultural sensitivity, equity focus and youth been integrated into the reporting, monitoring and evaluation tools and mechanisms of the joint programme?</p>	<p>sensitivity and equity focus in programme design documents; workplans and other planning documents.</p> <p>b) Evidence of integration of cross-cutting issues in the implementation of programme activities (in particular at the country and community levels).</p> <p>c) Joint programme staff members' and other internal programme stakeholders' perceptions regarding the degree of integration of cross cutting issues in the programme.</p> <p>e) Evidence of integration of cross-cutting issues in the joint programme reporting, monitoring and evaluation tools and mechanisms.</p>	<p>Joint programme documents: joint programme proposal and preparation and background documents; updated proposal; revised joint programme logframe; annual workplans. and other planning documents; country and global annual reports and updates; existing tools (M&E, technical guidance, etc.), Steering Committee meeting minutes, annual consultation reports, M&E workshop reports.</p> <p><u>Stakeholders:</u></p> <p>Joint programme staff and other relevant UNICEF/UNFPA staff at HQ, regional and country levels.</p>	<p>Key informant interviews</p>

Annex 9. Indicative List of Documents to be Reviewed

This annex presents a list of the types of documents that will be reviewed. It will be completed and refined during the evaluation. An exhaustive list of documents reviewed will be included in the Final Evaluation Report.

Programme Documents

Original Proposal

- Letters of contribution/agreement
- Standard Administrative Arrangement
- Global Consultation Technical Report
- Funding Proposals
- Financing Agreements
- Memoranda of Understanding
- Declarations of Intent
- ToRs for coordination roles and mechanisms

Steering Committee

- Steering Committee meetings minutes
- Meetings agendas
- Talking points

Funding & Allocations

- Allocation memos
- Additional funds requests
- Money transfers
- Donor contribution charts
- Sources of funding and country office expenditures

Resource Mobilization

- Results report
- Updated proposals

Baseline and Situation Analysis

- Country profiles
- Available baseline and situation analysis studies
- KAP studies
- Local consultations documents and reports
- Capacities and needs assessments

Annual Workplans

- Country annual work plans
- Global annual work plans
- Regional work plans

Annual Consultations

- Annual consultations reports
- Consultation meetings agendas
- Consultation meetings minutes
- Consultation meetings presentations
- Country briefs
- Lists of participants

Reports

- Expenditure reports
- Results tables
- Narrative country reports and updates
- Quarterly monitoring reporting tools
- Global annual reports
- Midyear reports
- Resource mobilization overviews
- Activity level/partners' reports

M&E

- Discussion points of Monitoring and Evaluation workshops
- Workshop agendas
- Letters of invitation to workshops
- Workshop presentations
- Reports on baseline information/research
- Revised Joint Programme Logical Framework and operational guide
- Relevant evaluations
- Corporate (UNICEF and UNFPA) documents describing established processes and systems;
- Existing tools (M&E, technical guidance, etc.),

Databases

- Joint programme country-specific databases
- Relevant DHS and MICS data

Technical Documents

- Consultation Summary Reports (Consultation on Medicalization of FGM/C)
- Reports on Legislative Reform
- Reports and articles on Lessons Learned and Best Practices
- Case studies
- UN, and more specifically UNICEF and UNFPA, strategies and guidance documents on joint programmes and coordination among agencies.

INGO Partnerships

- Annual work plans
- Progress reports
- Project summaries
- Memoranda of Understanding/ Letters of intent
- Newsletters

Communications Materials

- Brochures/fact sheets
- Press Releases
- Interviews and video clips

Country Specific Submissions

- Baseline research surveys and questionnaires
- Educational resources
- Critical analyses of projects/comparative studies
- Monitoring tools
- Statements from religious leaders/Fatwas
- Training manuals
- Community and country level situational assessments
- Capacity and needs assessments
- Audit reports
- Programme countries' government strategies
- Programme countries' planning documents

Other Documents

Context/Background

- MDG progress reports
- Country context reports
- Regional analyses on information and monitoring systems
- Donor Working group documents
- Other relevant UN documents

External Evaluations and Research

- Country-specific action plan/project evaluations
- Conference programme and communiqués
- Journal articles and working papers/studies
- Briefing papers
- Process evaluation reports
- Surveys on community dialogue
- Relevant studies and literature on FGM/C
- KAP studies
- Relevant literature on FGM/C and approaches to its abandonment

Law and Policy Documents

- Resolutions adopted by the UN General Assembly
- Proclamations
- Decisions, Declarations and Resolutions
- Act Reviews
- Legal studies
- FGM/C National Action Plans
- National plans of action
- UNFPA/UNICEF policy and strategy documents (country, regional, global levels)
- Strategy and policy documents from select development partners

Annex 10. Draft List of Stakeholders to be Consulted

This is an indicative list. It will be completed and refined throughout the evaluation.

Groups/Organization	Role/Function/Country	Name(s)	Title(s)
Global			
UNFPA HQ	Joint programme staff (coordination)	Nafissatou J Diop	Coordinator, UNFPA-UNICEF joint programme on FGM/C
	Gender, Human Rights and Culture Branch	Luis Mora	Chief, Gender, Human Rights Branch
		Aminata Toure	Former Head Gender Branch
		Alfonso Barragues	Thematic Advisor Human Rights
	Resource Mobilization	Heimo Laakkonen	Chief, Resource Mobilization Branch
		Giulia Vallese	Resource Mobilization Officer
	Media and Communication	Janet Jensen	Media and Communications Branch
	Evaluation	Louis Charpentier	Chief, Evaluation Branch
		Alexandra Chambel	Evaluation Advisor
		Valeria Carou Jones	Evaluation Specialist
	EBERB	Salma Hamid	External Relations, Executive Board
RO	Werner Haug	Former Head Technical Division	
Sexual and Reproductive Health Branch	Yves Bergevin	Coordinator of Maternal Health Thematic Fund	
UNICEF HQ	Joint programme staff (coordination)	Francesca Moneti	Senior Child Protection Specialist, Social Norms and Gender Equality Programmes
		Cody Donahue	Child Protection Specialist, Child Protection Section, Programme Division

Groups/Organization		Role/Function/Country	Name(s)	Title(s)
		Child protection	Susan Bissell	Associate Director, Child Protection section
			Karin Heissler	Child Protection Specialist
			Mendy Marsh	Child Protection in Emergencies Specialist, working on social norms
		Social Norms and Prevention of Violence against Children	Theresa Kilbane	Senior Advisor, Social Norms and Prevention of Violence against Children
		Adolescent Development and Participation/Gender Rights and Civil Engagement	Judith Diers	Chief Adolescent Development and Participation Section/Gender Rights and Civil Engagement Section, Programme Division
			Anju Malhotra	Principal Advisor, Gender and Rights
		Evaluation	Colin Kirk	Head, Evaluation Office,
			Krishna Belbase	Senior Evaluation Specialist UNICEF Evaluation Office
		Others	Claudia Cappa	Specialist, Statistics and Monitoring Section (knowledgeable on how UNICEF generates and uses disaggregated data)
			Lila Pieters	Senior Advisor, UNICEF Brussels HQ, child protection focal point
Donors	Joint programme donors (Steering Committee members)	Italy	Loredana Magni	Development Cooperation Adviser Multilateral Coordination Office, Italy
			Filippo Cinti	First Secretary to the Mission of Italy to the United Nations
		Ireland	Patrick Duffy	First Secretary to the Mission of Ireland to the United Nations
		Luxembourg	Marc de Bourcy	Secrétaire de Légation, Government of Luxembourg
	Norway	Merete Dyrud	Counselor, Ministry of Foreign Affairs, Norway	
	Members of the donor	USAID	Sandra Jordan	Senior Communication Advisor

Groups/Organization		Role/Function/Country	Name(s)	Title(s)
	working group on FGM/C	DFID	Jane Miller	MDG 2 Team Leader/Africa Team
Others	UN Women	Worked on the Secretary-General's Report on FGM/C for the Commission on the Status of Women	Melissa Alvarado Kalliope Mingeirou	Violence Against Women Africa section, UN Women
	WHO	Women's Reproductive Health Division	Elise Johansen, PhD	Technical Officer
	Global NGOs	Girls Not Brides	Lakshmi Sundaram	Global Coordinator
	Research institutions, INGOs, FGM/C experts and/or global champions	University of Washington	Bettina Shell-Duncan, PhD	Professor, Anthropology
		University of California, San Diego	Gerry Mackie, PhD	Professor, Political Science, Co-Director, Center of Global Justice
		University of Pennsylvania	Cristina Bicchieri	Professor and Director of Politics, Philosophy and Economics Program
		University of Nairobi	Guyo Jaldesa Isaac K. Nyamongo	Professor OB/GYN Department Professor Gender and African Studies Department
	Regional			
UNFPA	Regional/sub-regional offices	Seynabou Tall	Gender Technical Advisor, UNFPA Eastern and Southern Africa Sub regional Office, and Africa regional office (Johannesburg)	
		Kaori Ishikawa	Gender Technical Advisor, Arab States Regional Office	
		Idrissa OUEDRAOGO	Gender Technical Advisor, UNFPA West Africa Sub-regional Office	
UNICEF	West and Central Africa Office	Joachim Thies	Child Protection Regional Advisor	
	Eastern and Southern Africa Office	Cornelius Williams	Child Protection Regional Advisor	
	Middle East and North Africa Office	Jean-Nicolas Beuze	Child Protection Regional Advisor	

Groups/Organization		Role/Function/Country	Name(s)	Title(s)
		UNICEF representative at the African Union	Akila Aggoune Belembaogo	Head, UNICEF Liaison Office, Representative to the African Union (AU) and UN Economic Commission for Africa (UNECA)
Regional Partners/NGOs		Inter African Committee on Traditional Practices affecting Women and children health	Dr Morissanda Kouyate	Director
		AIDOS (Italian Association for Women in Development)	Daniela Colombo	President
		No Peace without Justice	Alvilda Jablonko	Programme coordinator
		AWEPA – Union of European Parliamentarians for Africa	Liselot Bloemen AWEPA	Programme Manager
		INTACT Population Council	ntawab@popcouncil.org	Director Egypt Office
		TOSTAN	Gannon Gillespie	Director for US Relations
			Molly Melching	Executive Director
		Population Council	Ian Askew	Director, Reproductive Health Services and Research
Kenya (see Annex 2)				
Burkina Faso				
UNFPA	Programme focal point		Lacina Zerbo	Focal point FGM/C
	Representative		Mamadou Kante	
	Other staff		Edith ouedraogo	Gender Officer
UNICEF	Programme focal point		Desire Yameogo	Child Protection Officer
	Representative		Aboubacry Tall	
	Outgoing Programme Focal Point		Gunther Lanier	Technical Assistant, Child Protection
	Other staff		Sylvana Nzirorera	Deputy Representative
Partners and stakeholders	Government			
	National NGOs			

Groups/Organization		Role/Function/Country	Name(s)	Title(s)
	International NGOs			
	Other UN agencies in country			
	Parliaments, Parliamentarians and affiliate organizations			
	Media and affiliate organizations			
	Academia and experts			
	Judges and law professionals			
	Religious organizations and leaders			
	Local governing bodies			
	Others			
Senegal				
UNFPA	Programme focal point		Gallo Kebe	
	Representative		Rose Gakuba	
	Other staff		Aminata Toure Sagna	Communication expert
UNICEF	Programme focal point		Daniela Luciani	Child Protection Specialist
	Representative		Giovanna Barberis	
	Other staff		Jean Lieby	Chief, Child Protection
	Other staff		Marie Sabara	Consultant to FGM/C programme since 2004
Partners and stakeholders	Government			
	National NGOs			
	International NGOs			

Groups/Organization		Role/Function/Country	Name(s)	Title(s)
	Other UN agencies in country			
	Parliaments, Parliamentarians and affiliate organizations			
	Media and affiliate organizations			
	Academia and experts			
	Judges and law professionals			
	Religious organizations and leaders			
	Local governing bodies			
	Others			
Sudan				
UNFPA		Programme focal point	Lamya Badri	
		Representative	Pamela Delargy	
UNICEF		Programme focal point	Samira Ahmed	Child Protection Specialist
		Representative	Geert Cappelaere	
		Other staff	Stephen Blight	Chief, Child Protection
Partners and stakeholders	Government			
	National NGOs			
	International NGOs			
	Other UN agencies in country			
	Parliaments, Parliamentarians and affiliate organizations			
	Media and affiliate organizations			

Groups/Organization		Role/Function/Country	Name(s)	Title(s)
	Academia and experts			
	Judges and law professionals			
	Religious organizations and leaders			
	Local governing bodies			
	Others			

Annex 11. Stakeholder Mappings

KENYA 2008-2010

Outputs	Implementing Partners										
	Government	NGOs		UN Agencies	Parliaments, Parliamentarians and affiliate organizations	Media and affiliate organizations	Academia	Judges and Justice Professionals	Religious Organizations and Leaders	Local Governing Bodies	Other
		National	International								
1. Effective enactment and enforcement of legislation against FGM/C	Ministry of Gender, Children and Social Development (MoGCSD), Gender Commission	Childrens' Legal Action Network (CLAN)- network of governmental and NGOs	Population Council		Kenya Women Parliamentarians Association (KEWOPA) Kenya National Assembly	Kenya Media Network on Population and Development (KEMEP)		Association of Women Judges Federation of Women Lawyers (FIDA KENYA)			
2. Knowledge dissemination of social-cultural dynamics of FGM/C practice	MoGCSD, Ministry of Youth Affairs and Sports (MOYA)	Maendeleo Ya Wanawake Organization (MYWO); SAIDIA; Womankind Kenya	Population Council; Adventist Development and Relief Agency (ADRA)					Catholic Diocese of Nakuru (CDN) Council of Imams and Preachers of Kenya (CIPK)			
3. Collaboration with key global development partners on a common framework towards abandonment of FGM/C											

Outputs	Implementing Partners										
	Government	NGOs		UN Agencies	Parliaments, Parliamentarians and affiliate organizations	Media and affiliate organizations	Academia	Judges and Justice Professionals	Religious Organizations and Leaders	Local Governing Bodies	Other
		National	International								
4. Evidence-based data for programming and policies	MoGCSD; National Commission on Gender and Development (NCGD)	CLAN; network of governmental and NGOs				KEMEP		FIDA			
5. Consolidation of existing partnerships and forging of new partnerships									CDN; CIPK; Catholic Secretariat; Supreme Council of Kenya Muslims (SUPKEM)		
6. Media campaign emphasizing FGM/C abandonment process in Sub-Saharan Africa, Sudan and Egypt	MoGCA; MoGCSD				KEWOPA	KEMEP; Association of Media Women in Kenya (AMWIK); BBC; Star FM; Communication Apex					
7. Better integration of implications of FGM/C practice into reproductive health strategies	MoH; MoGCSD; NCGD; MoYA; MOGSCSS;	MYWO						FIDA			

Outputs	Implementing Partners										
	Government	NGOs		UN Agencies	Parliaments, Parliamentarians and affiliate organizations	Media and affiliate organizations	Academia	Judges and Justice Professionals	Religious Organizations and Leaders	Local Governing Bodies	Other
		National	International								
8. Building donors support to pool resources for a global movement towards abandonment of FGM/C in one generation											

KENYA 2011-2012

Outputs	Implementing Partners										
	Government	NGOs		UN Agencies	Parliaments, Parliamentarians and affiliate organizations	Media and affiliate organizations	Academia	Judges and Justice Professionals	Religious Organizations and Leaders	Local Governing Bodies	Other
		National	International								
1: Effective enactment, enforcement and use of national policy and legal instruments to promote the abandonment of FGM/C	MoGCSD; Ministry of Public Health and Sanitation (MoPHS)	Coalition on Violence against Women (COVAW); Girl Child Network (GCN)	The Population Council		KEWOPA; Kenya National Assembly			FIDA ; Kenya Women Judges Association (KWJA)			
2: Local level commitment to FGM/C abandonment	Ministry of Education (MoE); MoGCSD	MYWO; COVAW; Womankind Kenya; Tasaru Girls Rescue Centre; Women Empowerment Link (WEL)	ADRA; The Population Council			KEMEP		FIDA KENYA	CDN; CIPK; Kenya Council of Imams and Ulamaa (KCIU); Young Women's Christian Association (YWCA); Pokot Outreach Ministries	Meru Council of Elders	
3: Media campaigns and other forms of communication dissemination are organized and implemented to support and publicize FGM/C abandonment	MoGCSD		Equality Now			AMWIK; Star Frontier FM; KEMEP; Communication Section UNICEF; Communication Apex					

Outputs	Implementing Partners										
	Government	NGOs		UN Agencies	Parliaments, Parliamentarians and affiliate organizations	Media and affiliate organizations	Academia	Judges and Justice Professionals	Religious Organizations and Leaders	Local Governing Bodies	Other
		National	International								
4: Use of new and existing data for implementation of evidence-based programming and policies and for evaluation	MoGCSD; MoE, Kenya Institute of Education (KIE)										
5: FGM/C abandonment integrated and expanded into reproductive health policies, planning and programming	MoGCSD; Ministry of Foreign Affairs (MFA); MoPHS, MoMs					KEMEP			CDN; Church of the Seventh Day Adventist (SDA); Presbyterian Church of East Africa (PCEA); Anglican Church of Kenya (ACK); YWCA; KCIU;		Kenya Obstetric and Gynecology Society
6: Partnerships with religious groups and other organizations and institutions are consolidated and new partnerships are identified and fostered	Ministry of Gender, Sports, Culture and Social Services (MoGSCSS); MoGSCD	MYWO; WEL;			KEWOPA	British Broadcasting Corporation; AMWIK; Star/Frontier FM; KEMEP; Communication Apex			CDN;		

Outputs	Implementing Partners										
	Government	NGOs		UN Agencies	Parliaments, Parliamentarians and affiliate organizations	Media and affiliate organizations	Academia	Judges and Justice Professionals	Religious Organizations and Leaders	Local Governing Bodies	Other
		National	International								
7: Tracking of programme benchmarks and achievements to maximize accountability of programme partners	MoGCSD; MoPHS; Ministry of Medical Services (MOMS); Ministry of Gender, Sports, Culture and Social Services (MoGSCSS); MoYA;	MYWO; GCN, COVAW; WEL,	The Population Council					FIDA KENYA; KWJA	YWCA, Pokot Ministries; CDN;		
8: Strengthened regional dynamics of abandonment of FGM/C		MYWO						FIDA KENYA			

BURKINA FASO 2009-2010

Outputs	Implementing Partners										
	Government	NGOs		UN Agencies	Parliaments, Parliamentarians and affiliate organizations	Media and affiliate organizations	Academia	Judges and Justice Professionals	Religious Organizations and Leaders	Local Governing Bodies	Other
		National	International								
1. Effective enactment and enforcement of legislation against FGM/C	Ministry of Justice, Ministry of Defence; Comité National de lutte contre la Pratique de l'Excision (SP/CNLPE);		Réseau des ONG et Associations œuvrant pour la promotion de l'élimination des MGF; Réseau droits humains		Parlement						
2. Knowledge dissemination of social-cultural dynamics of FGM/C practice	SP-CNLPE	Mwangaza Action; Le Groupe d'appui en santé, communication et développement (GASCODE); Voix de Femmes ;				Local radio stations					
3. Collaboration with key global development partners on a common framework towards abandonment of FGM/C											

Outputs	Implementing Partners										
	Government	NGOs		UN Agencies	Parliaments, Parliamentarians and affiliate organizations	Media and affiliate organizations	Academia	Judges and Justice Professionals	Religious Organizations and Leaders	Local Governing Bodies	Other
		National	International								
4. Evidence-based data for programming and policies	SP-CNLPE, Ministry of Health, Institut National de la Statistique et de la Démographie (INSD);						Institut Supérieur des Sciences de la Population (ISSP)				Fonds Commun Genre (FCG)
5. Consolidation of existing partnerships and forging of new partnerships	SP-CNLPE	Association Burkinabé pour le Bien-être Familial (ABBEF)			Burkinabe parliamentarians' Network on Population and Development				Réseau burkinabé des organisations islamiques en population et développement (RBOIPD); Réseau des leaders coutumiers et religieux (RELECORE)		Le projet <i>Capitalisation et vulgarisation de « bonnes approches » pour la promotion de l'abandon des mutilations génitales féminines (CAP-MGF)</i>
6. Media campaign emphasizing FGM/C abandonment process in Sub-Saharan Africa, Sudan and Egypt	SP-CNLPE					RMO FM, Radio Ave Maria, Radio Femina, Association des Professionnelles Africaines de la Communication (APAC); Integrated Regional Information Network (IRIN); Réseau des journalistes de lutte contre la pratique de l'excision (RJLPE)					

Outputs	Implementing Partners										
	Government	NGOs		UN Agencies	Parliaments, Parliamentarians and affiliate organizations	Media and affiliate organizations	Academia	Judges and Justice Professionals	Religious Organizations and Leaders	Local Governing Bodies	Other
		National	International								
7. Better integration of implications of FGM/C practice into reproductive health strategies											
8. Building donors support to pool resources for a global movement towards abandonment of FGM/C in one generation											

BURKINA FASO 2011-2012

Outputs	Implementing Partners										
	Government	NGOs		UN Agencies	Parliaments, Parliamentarians and affiliate organizations	Media and affiliate organizations	Academia	Judges and Justice Professionals	Religious Organizations and Leaders	Local Governing Bodies	Other
		National	International								
1: Effective enactment, enforcement and use of national policy and legal instruments to promote the abandonment of FGM/C	SP-CNLPE; Ministère de la Justice; Ministère de la Défense; Ministère de la Sécurité; Ministère des Enseignements Secondaire et Supérieur (MESS); La Direction provinciale de l'action sociale et de la solidarité nationale (DPASSN)	Associations de Jeunes			Barreau du Burkina Faso;		Universités publiques du Burkina Faso; École Nationale d'Administration et de Magistrature (ENAM)				
2: Local level commitment to FGM/C abandonment	SP-CNLPE; DPASSN;	Mwangaza Action; GASCODE ; Réseau des Associations et ONG pour la promotion de l'élimination de la pratique de l'excision au Burkina Faso (RAOPE-BF)				Radios communautaires			RBOIDP; RELECORE;		

Outputs	Implementing Partners										
	Government	NGOs		UN Agencies	Parliaments, Parliamentarians and affiliate organizations	Media and affiliate organizations	Academia	Judges and Justice Professionals	Religious Organizations and Leaders	Local Governing Bodies	Other
		National	International								
3: Media campaigns and other forms of communication dissemination are organized and implemented to support and publicize FGM/C abandonment	SP-CNLPE					RJLPE;					
4: Use of new and existing data for implementation of evidence-based programming and policies and for evaluation	SP-CNLPE										
5: FGM/C abandonment integrated and expanded into reproductive health policies, planning and programming	SP-CNLPE; Ministère de la Santé; Conseil provincial de lutte contre la pratique de l'excision (CPLPE); Le Ministère des Affaires Sociales et de la Solidarité Nationale (MASSN)	RAOPE-BF; Société de Gynécologues et Obstétriciens du Burkina Faso (SOGOB); Association Burkinabè des Sages Femmes et Maïeuticiens d'État (ABSFM).									

Outputs	Implementing Partners										
	Government	NGOs		UN Agencies	Parliaments, Parliamentarians and affiliate organizations	Media and affiliate organizations	Academia	Judges and Justice Professionals	Religious Organizations and Leaders	Local Governing Bodies	Other
		National	International								
6: Partnerships with religious groups and other organizations and institutions are consolidated and new partnerships are identified and fostered	SP-CNLPE;	RAOPE-BF							RELECORE; RBOIPD		Réseau CAP-MGF
7: Tracking of programme benchmarks and achievements to maximize accountability of programme partners	SP-CNLPE; CPLPE; DPASSN	Partenaires Techniques et Financiers (PTF)									
8: Strengthened regional dynamics of abandonment of FGM/C	SP-CNLPE										

SENEGAL 2008-2010

Outputs	Implementing Partners										
	Government	NGOs		UN Agencies	Parliaments, Parliamentarians and affiliate organizations	Media and affiliate organizations	Academia	Judges and Justice Professionals	Religious Organizations and Leaders	Local Governing Bodies	Other
		National	International								
1. Effective enactment and enforcement of legislation against FGM/C					Réseau des parlementaires						
2. Knowledge dissemination of social-cultural dynamics of FGM/C practice	Ministère de la Famille, de l'Entreprenariat Féminin et de la Microfinance (MFEFMF); Régions Médicales; Direction de la Famille		Tostan		Réseau des Parlementaires						
3. Collaboration with key global development partners on a common framework towards abandonment of FGM/C	MFEFMF										
4. Evidence-based data for programming and policies	MFEFMF; Agence Nationale de la Statistique et de la Démographie (ANSD)						Centre de Formation et de Recherche en Santé de la Reproduction (CEFOREP)				

Outputs	Implementing Partners										
	Government	NGOs		UN Agencies	Parliaments, Parliamentarians and affiliate organizations	Media and affiliate organizations	Academia	Judges and Justice Professionals	Religious Organizations and Leaders	Local Governing Bodies	Other
		National	International								
5. Consolidation of existing partnerships and forging of new partnerships	MFEFMM, Direction de la Famille,				Parlements de la Gambie, la Guinée, le Mali, la Guinée-Bissau et la Mauritanie				Réseau des religieux		
6. Media campaign emphasizing FGM/C abandonment process in Sub-Saharan Africa, Sudan and Egypt	MFEFMM; Direction de la Famille		Tostan								
7. Better integration of implications of FGM/C practice into reproductive health strategies	Ministère de la Santé; Direction de la Famille; Direction de la Santé et de la Reproduction (DSR)										
8. Building donors support to pool resources for a global movement towards abandonment of FGM/C in one generation											

SENEGAL 2011-2012

Outputs	Implementing Partners										
	Government	NGOs		UN Agencies	Parliaments, Parliamentarians and affiliate organizations	Media and affiliate organizations	Academia	Judges and Justice Professionals	Religious Organizations and Leaders	Local Governing Bodies	Other
		National	International								
1: Effective enactment, enforcement and use of national policy and legal instruments to promote the abandonment of FGM/C	Direction de la Famille; RPP (?)										
2: Local level commitment to FGM/C abandonment	Direction de la Famille		Tostan								
3: Media campaigns and other forms of communication are organized and implemented to support and publicize FGM/C abandonment	Direction de la Famille	Comité Sénégalais sur les Pratiques Traditionnelles Ayant Effet sur la Santé de la Mère et de l'Enfant (COSEPRAT); Association Sénégalaise pour le Bien-être Familial (ASBEF)	Tostan								
4: Use of new and existing data for implementation of	Direction de la Statistique; Ministère de la Santé; DF(?)		Tostan								

Outputs	Implementing Partners										
	Government	NGOs		UN Agencies	Parliaments, Parliamentarians and affiliate organizations	Media and affiliate organizations	Academia	Judges and Justice Professionals	Religious Organizations and Leaders	Local Governing Bodies	Other
		National	International								
evidence-based programming and policies and for evaluation											
5: FGM/C abandonment integrated and expanded into reproductive health policies, planning and programming	Ministère de la Santé; AFJ(?); DSR	Groupe pour l'Étude et l'Enseignement de la Population (GEEP)									
6: Partnerships with religious groups and other organizations and institutions are consolidated and new partnerships are identified and fostered	Direction de la Jeunesse et de la Vie Associative (DJVA); Direction de la Famille	GEEP						Association des Femmes Juristes	Réseau des religieux		Sister FA (musician and activist)
7: Tracking of programme benchmarks and achievements to maximize accountability of programme partners											Saint-Louis Compil (institut culturel français)

Outputs	Implementing Partners										
	Government	NGOs		UN Agencies	Parliaments, Parliamentarians and affiliate organizations	Media and affiliate organizations	Academia	Judges and Justice Professionals	Religious Organizations and Leaders	Local Governing Bodies	Other
		National	International								
8: Strengthened regional dynamics of abandonment of FGM/C	Direction de la Famille	Groupe d'Action pour le Développement Communautaire (GADEC); Forum pour un Développement Durable et Endogène (FODDE)									

SUDAN 2008-2010

Outputs	Implementing Partners										
	Government	NGOs		UN Agencies	Parliaments, Parliamentarians and affiliate organizations	Media and affiliate organizations	Academia	Judges and Justice Professionals	Religious Organizations and Leaders	Local Governing Bodies	Other
		National	International								
1. Effective enactment and enforcement of legislation against FGM/C	National Council for Child Welfare (NCCW); Sennar Council of Child Welfare (SCCW); Council for Strategic Planning, Police and Justice;				National and state parliaments						
2. Knowledge dissemination of social-cultural dynamics of FGM/C practice	Sudan National Committee on Traditional Practices (SNCTP); NCCW		Child-Friendly Community Initiative (CFCI)-funded by UNICEF;			community radio					
3. Collaboration with key global development partners on a common framework towards abandonment of FGM/C	NCCW		International Working Group on FGM/C and UN gender task force								
4. Evidence-based data for programming and policies	NCCW; SCCW		The Child Protection Working Group (CPWG)								

Outputs	Implementing Partners										
	Government	NGOs		UN Agencies	Parliaments, Parliamentarians and affiliate organizations	Media and affiliate organizations	Academia	Judges and Justice Professionals	Religious Organizations and Leaders	Local Governing Bodies	Other
		National	International								
5. Consolidation of existing partnerships and forging of new partnerships	NCCW; SCCW; Federal Ministry of Health (FMoH); SNCTP	Rapid Operational Care and Scientific Services (ROCSS); Babiker Badri Scientific Association for Women's Studies (BBSAWS); Community Animation Friend Association (CAFA)				Entishar Newspaper;	Ahfad University for Women (AUW)				
6. Media campaign emphasizing FGM/C abandonment process in Sub-Saharan Africa, Sudan and Egypt	FMoH; media institutions; Khartoum State MOH, NCCW, SCCW	Obs/Gynea association, BBSAWs				National TV & Radio channels, Teeba Press					
7. Better integration of implications of FGM/C practice into reproductive health strategies	FMoH/State MOH										

Outputs	Implementing Partners										
	Government	NGOs		UN Agencies	Parliaments, Parliamentarians and affiliate organizations	Media and affiliate organizations	Academia	Judges and Justice Professionals	Religious Organizations and Leaders	Local Governing Bodies	Other
		National	International								
8. Building donors support to pool resources for a global movement towards abandonment of FGM/C in one generation											

SUDAN 2011-2012

Outputs	Implementing Partners										
	Government	NGOs		UN Agencies	Parliaments, Parliamentarians and affiliate organizations	Media and affiliate organizations	Academia	Judges and Justice Professionals	Religious Organizations and Leaders	Local Governing Bodies	Other
		National	International								
1: Effective enactment, enforcement and use of national policy and legal instruments to promote the abandonment of FGM/C	NCCW, Violence Against Women (VAW) unit; SCCW	Women Center For Human Rights (WCHR); Rapid Operational Care and Scientific Services (ROCSS); Babiker Badri Scientific Association for Women's Studies (BBSAWS)			Parliament						
2: Local level commitment to FGM/C abandonment	NCCW, SCCW	Community Animation Friend Association (CAFA); BBSAWs; ROCSS					AUW, Gedarif University, Kassala University				
3: Media campaigns and other forms of communication are organized and implemented to support and publicize FGM/C abandonment	NCCW;	CAFA				TEEBa press; C4D and RN radio	AUW				

Outputs	Implementing Partners										
	Government	NGOs		UN Agencies	Parliaments, Parliamentarians and affiliate organizations	Media and affiliate organizations	Academia	Judges and Justice Professionals	Religious Organizations and Leaders	Local Governing Bodies	Other
		National	International								
t											
4: Use of new and existing data for implementation of evidence-based programming and policies and for evaluation	Ministry of Social Welfare; NCCW; SCCW; FMOH, MoH,		Help Age International (HAI)								
5: FGM/C abandonment integrated and expanded into reproductive health policies, planning and programming	FMOH; KMOH; State Ministries of Health;						AUW, Al Zaiem Al Azhari University				
6: Partnerships with religious groups and other organizations and institutions are consolidated and new partnerships are identified and fostered	Ministry of General Education (MOGE); SCCW,							Religious Networks			

Outputs	Implementing Partners										
	Government	NGOs		UN Agencies	Parliaments, Parliamentarians and affiliate organizations	Media and affiliate organizations	Academia	Judges and Justice Professionals	Religious Organizations and Leaders	Local Governing Bodies	Other
		National	International								
7: Tracking of programme benchmarks and achievements to maximize accountability of programme partners	NCCW, MoH		Population Council								
8: Strengthened regional dynamics of abandonment of FGM/C	SCCW		INTACT				Gedarif, Kassala, Fashir, Nayla, AUW		Religious Leader Platform and Universities		

Annex 12. Document Review Matrix

Evaluation Questions and Sub-questions	What to check (indicators)	Evidence	Source	Level (Community, National, Regional, Global)
EQ1: How relevant and responsive has the joint programme been to national and community needs, priorities and commitments as well as to the global and regional priorities and commitments of UNFPA, UNICEF and key international stakeholders?				
<i>Evaluation criteria: relevance (including programme design)</i>				
1.1. To what extent are the objectives of the joint programme consistent with the needs in the targeted communities?	a) Evidence of alignment of the objectives of the joint programme with identified needs in the targeted communities.			
1.2. To what extent are the objectives of the joint programme aligned with programme country government priorities and commitments?	b) Evidence of alignment of the objectives of the joint programme with programme country government priorities and commitments.			
1.3. To what extent are the objectives of the joint programme aligned with UNFPA/UNICEF policies and strategies at the global, regional and country levels?	c) Evidence of alignment of the objectives of the joint programme with UNFPA/UNICEF policies and strategies at the global, regional and country levels.			
1.4. To what extent are the objectives of the joint programme aligned with priorities and commitments of development partners at the global and regional levels?	d) Evidence of alignment of the objectives of the joint programme with development partners' priorities and commitments at the global and regional levels.			
1.5. How appropriate are the overall joint programme design and the approach and strategies promoted and used by the joint programme at each level (global, regional, national and community) in view of achieving expected results? What are their strengths and weaknesses?	e) Evidence of the validity of the theory/theories of change.			

Evaluation Questions and Sub-questions	What to check (indicators)	Evidence	Source	Level (Community, National, Regional, Global)
1.6. To what extent and how have strategies and interventions been contextualized at the national and community level?	g) Evidence of contextualization of strategies and interventions (including through local-level consultation, national needs and national government priorities consideration and capacity assessments)			
EQ2: To what extent has the joint programme contributed to: the creation of sustainable favourable conditions and changes in social norms leading to the abandonment of FGM/C at the national and community levels (Outcome 1) and to strengthening the global movement towards abandonment of FGM/C in one generation (Outcome 2)?				
<i>Evaluation criteria: effectiveness and sustainability</i>				
2.1. To what extent have outputs been achieved and contributed to, or are likely to contribute to, the achievement of the planned outcomes of the joint programme? In particular: 2.1.1 To what extent has the joint programme contributed to creating a more conducive national environment for the abandonment of FGM/C in programme countries? (Outputs 1, 2, 3,4,5,6)	a) Evidence of progress towards output and outcome level indicators as per revised logframe. b) Evidence of joint programme contribution towards anticipated changes (using contribution analysis).			
2.1.2 To what extent has the joint programme contributed to fostering local level commitment to abandon FGM/C in programme countries? (Output 2)	a) Evidence of progress towards output and outcome level indicators as per revised logframe. b) Evidence of joint programme contribution towards anticipated changes (using contribution analysis).			
2.1.3 To what extent has the joint programme contributed to strengthening regional dynamics and the global movement for the abandonment of FGM/C? (Outputs 8, 9 and 10).	a) Evidence of progress towards output and outcome level indicators as per revised logframe. b) Evidence of joint programme contribution towards anticipated changes (using contribution analysis).			

Evaluation Questions and Sub-questions	What to check (indicators)	Evidence	Source	Level (Community, National, Regional, Global)
2.2 What factors (including both internal factors and environmental factors such as opportunities and challenges in the global, regional, country and community contexts) have supported or hindered the achievement of (or contributions to) results?	d) Evidence (type and nature) of contextual changes/trends and related opportunities or challenges for the joint programme at global, regional, national and community levels.			
EQ3: To what extent have the outputs of the joint programme been achieved or are they likely to be achieved with the appropriate amount of resources/inputs (funds, expertise, time, procedures, rules and regulations, administrative costs, etc.)?				
<i>Evaluation criteria: efficiency</i>				
3.1. To what extent were the available resources adequate to achieve the expected outputs?	a) Extent to which programme outputs were achieved within planned budgets. b) Utilization rates per country per year.			
3.2 To what extent has the mix of strategies and activities implemented in diverse country contexts differed in terms of their efficiency?	b) Utilization rates per country per year. c) Expenditures per output per country.			
3.3 To what extent has the joint programme been able to complement implementation at country level with related interventions, initiatives and resources at global and regional levels to maximize its contribution to the abandonment of FGM/C?	d) Extent to which joint programme budgets were supplemented with resources from other initiatives. e) Evidence of synergies between country and regional/global interventions, initiatives and resources.			

Evaluation Questions and Sub-questions	What to check (indicators)	Evidence	Source	Level (Community, National, Regional, Global)
EQ4: To what extent are the benefits and achievements of the joint programme likely to continue after the programme has ended due to factors such as national ownership, scalability and use of partnerships for sustainability?				
<i>Evaluation criteria: Sustainability</i>				
4.1. To what extent and how has the joint programme strengthened national ownership, capacity and leadership (at national and decentralized levels) in programme countries?	a) Evidence of strengthened national ownership, capacity and leadership for national counterparts and partners.			
4.2. To what extent do the strategies used by the joint programme lend themselves to wider scalability and programme expansion, overall and in specific contexts?	c) Examples of scaling up or expansion.			
4.3. To what extent have the joint programme approach, strategies and initiatives been integrated into other national initiatives aiming at addressing the issue of FGM/C?	d) Evidence of the joint programme having been integrated into other national initiatives aiming at addressing the issue of FGM/C.			
4.4 To what extent have partnerships (with governments, UN system, donors, NGOs, civil society organizations, religious leaders, the media) been established to foster sustainability of effects?	e) Evidence of broadened or strengthened partnerships with relevant actors.			
EQ 5: How efficient and effective was the coordination between UNFPA and UNICEF within the joint programme at the global and country levels in view of achieving the joint programme's results?				
<i>Evaluation criteria: effectiveness, efficiency and coordination between UNFPA and UNICEF (including programme management)</i>				

Evaluation Questions and Sub-questions	What to check (indicators)	Evidence	Source	Level (Community, National, Regional, Global)
5.1. How appropriate, clear and efficient was the coordination between UNFPA and UNICEF in relation to: <ul style="list-style-type: none"> - dividing roles and accountabilities? - planning? - decision-making? - implementation of activities? - production, circulation and use of data? - monitoring, reporting and evaluation? - cost sharing/reduction of transaction costs? 	a) Evidence of clarity and quality of coordination between UNFPA and UNICEF in relation to: roles and accountabilities; planning; decision-making; implementation of activities; production, circulation and use of data; monitoring, reporting and evaluation; cost-sharing/reduction of transaction costs. b) Evidence of issues/problems/gaps and areas for improvement in coordination mechanisms.			
5.2. What was the added value of the joint structure of the programme?	c) Evidence (examples) of added value of the joint structure (e.g. in terms of cost savings, enhanced capacity, synergies and reach)			
EQ 6: How efficient and effective was the management of the joint programme at global, regional and country levels?				
Evaluation criteria: effectiveness, efficiency and programme management				
6.1. What have been key strengths and weaknesses of the management of the joint programme at the global, regional and country levels, and their interactions?	a) Staff and key partners' perceptions of the efficiency and effectiveness of programme management at the global, regional and country levels.			
6.2. How adequate were the implementation mechanisms (financing instruments, administrative regulatory framework, staff, timing and procedures) in view of achieving results?	b) Evidence of strengths and weaknesses of the implementation mechanisms c) Evidence of strengths/issues/problems/gaps and areas for improvement in these mechanisms.			

Evaluation Questions and Sub-questions	What to check (indicators)	Evidence	Source	Level (Community, National, Regional, Global)
6.3. To what extent have joint programme benchmarks and achievements been monitored?	d) Degree of appropriateness and utilization of monitoring tools and mechanisms.			
6.4. How adequate and responsive was global/regional support in providing necessary guidance and tools, technical support, and capacity development to country offices and global partners?	f) Evidence of adequacy and responsiveness of the support and guidance received by country offices and global partners from the programme (from HQ and regional offices)			
EQ 7: To what extent and how has the joint programme integrated gender equality, human rights, cultural sensitivity and equity in design, implementation, monitoring and evaluation? To what extent is youth targeted has key population?				
Evaluation criteria: relevance, effectiveness and programme management				
7.1 To what extent and how have cross-cutting issues of gender equality, human rights, cultural sensitivity, equity focus, and youth been integrated into the design of the joint programme?	a) Evidence of integration of cross-cutting issues of gender equality, human rights, cultural sensitivity and equity focus in programme design documents; workplans and other planning documents.			
7.2 To what extent and how have cross-cutting issues of gender equality, human rights, cultural sensitivity, equity focus and youth been integrated into the implementation of the joint programme?	b) Evidence of integration of cross-cutting issues in the implementation of programme activities (in particular at the country and community levels).			
7.3 To what extent and how have cross-cutting issues of gender equality, human rights, cultural sensitivity, equity focus and youth been integrated into the reporting, monitoring and evaluation tools and mechanisms of the joint programme?	e) Evidence of integration of cross-cutting issues in the joint programme reporting, monitoring and evaluation tools and mechanisms.			

Annex 13. Interview Protocols

Global and regional stakeholders

INTERVIEW PROTOCOL

International experts on FGM/C

Please note: this is an internal document for the interviewers' use. It is not to be distributed to the interviewees. Prompts and other instructions in *italic* are for the interviewers' use only. They will not be shared with the interviewees.

1. INTRODUCTION

Evaluation team members to introduce themselves, evaluation background & interview purpose.

- 1.1 Can you please briefly describe your role and your work in relation to FGM/C? Have you been involved with the UNFPA-UNICEF Joint Programme on FGM/C? If so how?

Prompt: try to ascertain through these questions how knowledgeable the interviewee is about the joint programme. Tailor the following questions accordingly.

2. RELEVANCE AND DESIGN

- 2.1 *If sufficiently informed about the JP:* To your knowledge, what have been key strengths and weaknesses of the joint programme design, approach and strategies?

Prompts:

- To what extent does it reflect latest thinking and lessons learned on what works and what doesn't work in relation to accelerating the abandonment of FGM/C?*
- What if anything is special/unique/innovative about the joint programme?*

- 2.2 *If sufficiently informed about the JP:* How does the joint programme compare and relate to other programming on FGM/C that you are aware of?

Prompt: are there alternative approaches to the one used by the joint programme? What are their comparative strengths and weaknesses?

- 2.3 *If sufficiently informed about the JP:* To your knowledge, how relevant and responsive has the joint programme been to needs and priorities in relation to the issue of FGM/C at the country, regional and global levels?

- 2.4 *If not sufficiently informed about the JP:* To your knowledge, what types of programming approaches/strategies have been the most and least successful in accelerating the abandonment of FGM/C?

3. EFFECTIVENESS

- 3.1 Since 2008, what, if any, changes in social norms/attitudes towards FGM/C have occurred in the countries where FGM/C is practiced? *If sufficiently informed about the JP:* To your knowledge, to what extent and how has the joint programme contributed to them?

- 3.2 Since 2008, what, if any, changes in the global movement towards the abandonment of FGM/C have occurred? *If sufficiently informed about the JP:* To your knowledge, to what extent and how has the joint programme contributed to them?
- 3.3 *If sufficiently informed about the JP:* To your knowledge, what have been the joint programme key achievements at the global level? At the country level?

Prompts: Use the following table to map types of achievements and capture examples. With this group of respondents, focus on medium term results.

Possible types of achievements			Examples
Level	Medium term	Short term	
At the community level	Contributions to changes to the social norm towards the abandonment of FGM/C in the targeted communities	Strengthened community education, dialogue, decision making Increased number of public declarations Increased engagement of leaders	
Across-communities	Contributions to spreading changes to social norm across communities, within and across borders.	Accelerated organized diffusion Strengthened sub-regional dialogue and exchange	
At the national level	Contributions to the creation of favourable national conditions for the abandonment of FGM/C) including a legal framework against FGM/C; evidence based policies, plans and programmes; a national movement for the abandonment of FGM/C and a supportive public opinion.	Legal and policy reform Strengthened capacities Effective media campaigns Accurate data Partnerships	
At the regional and global levels	Contribution to the strengthening of regional and global movements for the abandonment of FGM/C (including adequate political commitment, resources, and knowledge)	Increased regional and global awareness and buy in. Strengthened knowledge production and circulation on the issue of FGM/C.	

- 3.4 *If sufficiently informed about the JP:* How would you explain the joint programme's successes and missed opportunities? What has worked well? What hasn't?

Prompt: this can refer to overall approach, programming strategies, stakeholders involved, types of activities, resources, selection of target population, management, context etc.

If not sufficiently informed about the JP: To your knowledge, what are the key factors positively or negatively influencing the success of efforts towards the abandonment of FGM/C?

4. SUSTAINABILITY

- 4.1 *If sufficiently informed about the JP:* What factors (positive or negative) are likely to support or hinder the sustainability of the programme's achievements? To what extent are the achievements and changes that the joint programme has contributed to likely to last?

If not sufficiently informed about the JP: What are the key factors affecting the sustainability of results in FGM/C programming?

5. INTERAGENCY COORDINATION

- 5.1 What is the added value of the jointness of the programme/of the cooperation between UNFPA and UNICEF? *If sufficiently informed about the JP:* What has worked well and what could be improved in this respect?

Prompt: in terms of cost savings, synergies, enhanced capacities, reach and coverage.

6. GOOD PRACTICES AND FUTURE DIRECTIONS

- 6.1 *If sufficiently informed about the JP:* What To your knowledge, what, if any, types of innovative /good practices for the abandonment of FGM/C have been introduced or supported by the joint programme?
- 6.2 *If sufficiently informed about the JP:* What What have been the key lessons learned?
- 6.3 *If not sufficiently informed about the JP:* What have been the main lessons learned of programming on FGM/C in recent years? How should these influence future programming?

7. OTHER COMMENTS

- 7.1 Do you have any other comments or suggestions or concerns about the programme and/or the evaluation that you would like to share with us? Do you have any questions?

Thank you for your collaboration.

INTERVIEW PROTOCOL

Joint Programme Donors

Please note: this is an internal document for the interviewers' use. It is not to be distributed to the interviewees. Prompts and other instructions in *italic* are for the interviewers' use only. They will not be shared with the interviewees.

1. INTRODUCTION

Evaluation team members to introduce themselves, evaluation background & interview purpose.

- 1.1 Can you please briefly describe your role, and your government/agency's work in relation to FGM/C? Have you participated in the Joint Programme Steering Committee? Is so for how long?

Prompt: try to ascertain through these questions how knowledgeable the interviewee is about the joint programme. Tailor the following questions accordingly.

2. RELEVANCE AND DESIGN

- 2.1 To your knowledge, what have been key strengths and weaknesses of the joint programme design, approach and strategies?
- 2.2 To what extent are the objectives of the joint programme aligned with your government's priorities and commitments at the global, regional and country levels?

Prompt: why did your government decided to fund the programme in the first place? Why did your government decided to continue/stop funding the programme?

- 2.3 To what extent and how does the joint programme relate to other programming on FGM/C that you know of/support? Are there synergies and/or overlaps?

3. EFFECTIVENESS

- 3.1 Since 2008, what, if any, changes in social norms/attitudes towards FGM/C have occurred in the countries where FGM/C is practiced? *If sufficiently knowledgeable about JP:* To what extent and how has the joint programme contributed to them?
- 3.2 Since 2008, what, if any, changes in the global movement towards the abandonment of FGM/C have occurred? *If sufficiently knowledgeable about JP:* To what extent and how has the joint programme contributed to them?
- 3.3 *If sufficiently knowledgeable about JP:* To your knowledge, what have been the joint programme key achievements at the global level? At the country level? At the regional level?

Prompts: Use the following table to map types of achievements and capture examples. With this group of respondents, focus on medium term result.

Possible types of achievements			Examples
Level	Medium term	Short term	
At the community level	Contributions to changes to the social norm towards the abandonment of FGM/C in the targeted communities	Strengthened community education, dialogue, decision making Increased number of public declarations Increased engagement of leaders	
Across-communities	Contributions to spreading changes to social norm across communities, within and across borders.	Accelerated organized diffusion Strengthened sub-regional dialogue and exchange	
At the national level	Contributions to the creation of favourable national conditions for the abandonment of FGM/C) including a legal framework against FGM/C; evidence based policies, plans and programmes; a national movement for the abandonment of FGM/C and a supportive public opinion.	Legal and policy reform Strengthened capacities Effective media campaigns Accurate data Partnerships	
At the regional and global levels	Contribution to the strengthening of regional and global movements for the abandonment of FGM/C (including adequate political commitment, resources, and knowledge)	Increased regional and global awareness and buy in. Strengthened knowledge production and circulation on the issue of FGM/C.	

3.4 *If sufficiently knowledgeable about JP:* How would you explain the joint programme's successes and missed opportunities? What has worked well? What hasn't? Which of your expectations for the joint programme have not been met?

Prompt: this can refer to overall approach, programming strategies, stakeholders involved, types of activities, resources, selection of target population, management, context, etc.

4. SUSTAINABILITY

- 4.1 *If sufficiently knowledgeable about JP:* To what extent are the achievements and changes that the joint programme has contributed to likely to last? How likely are they to be scaled up/expanded? What factors (positive or negative) are likely to support or hinder the sustainability of the programme's achievements?

Prompts:

- *To what extent do the strategies used by the programme lend themselves to wider scalability and programme expansion, overall and in specific contexts?*
- *To what extent has the joint programme been integrated into other initiatives aiming at addressing the issue of FGM-C?*
- *To what extent have partnerships (governments, UN system, donors, NGOs, civil society organizations, religious leaders, the media) been established to foster sustainability of effects?*

5. INTERAGENCY COORDINATION AND JOINT PROGRAMME MANAGEMENT

- 5.1 What has been in your opinion the added value of the joint structure of the programme?

Prompt: in terms of cost savings, synergies, enhanced capacities, reach and coverage, visibility.

- 5.2 *If sufficiently knowledgeable about JP:* What have been the strengths and weaknesses of the coordination between UNFPA and UNICEF in relation to the joint programme? What has worked well? What could be improved?

Prompt: Consider the following aspects: dividing roles and accountabilities; planning; decision making; implementation of activities; production, circulation and use of data; monitoring, reporting and evaluation; cost sharing/reduction of transaction costs.

- 5.3 *If sufficiently knowledgeable about JP:* To your knowledge, what have been key strengths and weaknesses of the joint programme management and implementation? What has worked well? What could be improved?

Prompts:

- *Donor involvement/ Managing donor relationships.*
- *Leadership/strategic direction*
- *Governance mechanisms*
- *Implementation mechanisms (financing instruments, administrative regulatory framework, timing and procedures, reporting requirements and tools);*
- *M&E and reporting*

6. CONTEXT

Ask this question if time allows

- 6.1 Since 2008, what contextual and environmental factors have affected or influenced your work in relation to FGM/C?

Prompt: What have been key opportunities and challenges at the global, regional, national levels for achieving progress on abandoning FGM/C?

7. GOOD PRACTICES AND FUTURE DIRECTIONS

- 7.1 To your knowledge, what, if any, types of innovative /good practices for the abandonment of FGM/C have been introduced or supported by the joint programme?
- 7.2 What have been key lessons learned?
- 7.3 What is your expected level of involvement (in the JP and in FGM/C) in the future? What factors will determine it?

8. OTHER COMMENTS

- 8.1 Do you have any other comments or suggestions or concerns about the programme and/or the evaluation that you would like to share with us? Do you have any questions?

Thank you for your collaboration.

INTERVIEW PROTOCOL

UNFPA-UNICEF JOINT PROGRAMME STAFF (Coordination)

1. RELEVANCE

- 1.1 To what extent are the objectives of the joint programme aligned with UNFPA/UNICEF policies and strategies at the global, regional and country levels?
- 1.2 How relevant and responsive has the joint programme been to country-level needs and priorities in relation to the issue of FGM/C? How relevant and responsive has the joint programme been to the needs of the targeted communities?

2. DESIGN

- 2.1 What are the key characteristics of the joint programme approach? Have they changed over time?

Prompt: What if anything is special/unique/innovative about the joint programme?

- 2.2 In your opinion what have been key strengths and weaknesses of the joint programme design, approach and strategies?

Prompts:

- *To what extent and how does it reflect latest thinking and lessons learned on what works and what doesn't work in relation to accelerating the abandonment of FGM/C?*
- *To what extent and how have cross-cutting issues of gender equality, human rights, cultural sensitivity and the focus on equity been integrated in the design of the joint programme?*

- 2.3 How does the joint programme compare and relate to other UN programming on FGM/C?

Prompt: are there alternative approaches to the one used by the Joint programme? What are their comparative strengths and weaknesses?

3. EFFECTIVENESS

- 3.1 Since the joint programme has started, what, if any, changes in social norms/attitudes towards FGM/C have occurred in the joint programme countries (at national level; at community level)?. To what extent and how has the joint programme contributed to them?
- 3.2 Since the joint programme has started, what, if any, changes in the global movement towards the abandonment of FGM/C have occurred? To what extent and how has the joint programme contributed to them?
- 3.3 From your point of view, what have been the key achievements of the joint programme at the global, regional country and community levels?

Prompts: Use the following table to map types of achievements and capture examples.

Possible types of achievements			Examples
Level	Medium term	Short term	
At the community level	Contributions to changes to the social norm towards the abandonment of FGM/C in the targeted communities	Strengthened community education, dialogue, decision making Increased number of public declarations Increased engagement of leaders	
Across-communities	Contributions to spreading changes to social norm across communities, within and across borders.	Accelerated organized diffusion Strengthened sub-regional dialogue and exchange	
At the national level	Contributions to the creation of favourable national conditions for the abandonment of FGM/C) including a legal framework against FGM/C; evidence based policies, plans and programmes; a national movement for the abandonment of FGM/C and a supportive public opinion.	Legal and policy reform Strengthened capacities (including coordination) Effective media campaigns Accurate data Partnerships	
At the regional and global levels	Contribution to the strengthening of regional and global movements for the abandonment of FGM/C (including adequate political commitment, resources, and knowledge)	Increased regional and global awareness and buy in. Strengthened knowledge production and circulation on the issue of FGM/C.	

3.4 How would you explain the programme's successes and missed opportunities? What has worked well? What hasn't? What factors have supported and/or hindered its performance?

Prompt: This can refer to overall approach, programming strategies, stakeholders involved, types of activities, resources, selection of target population, management, context etc.

3.5 To what extent has the joint programme been able to complement implementation at country level with related interventions, initiatives and resources at regional and global levels to maximize its contribution to the abandonment of FGM/C?

4. EFFICIENCY

4.1 To what extent were the available resources adequate to achieve the expected results?

Prompt: Resources can be financial, human and technical (e.g. existing tools and material).

- *How have you dealt with the resource gap that the joint programme has experienced? How has it affected the programme evolution over time and its implementation?*

- 4.2 What have been key challenges and opportunities in relation to resource mobilization?
- 4.3 In what ways, if any, could the joint programme have been more efficient (i.e. achieved similar results using fewer resources)?

Prompt (follow up question): What are examples (if any) of particularly efficient use of resources by the joint programme?

- 4.4 To what extent has the mix of strategies and activities implemented in diverse country contexts differed in terms of their efficiency?

5. SUSTAINABILITY

- 5.1 To what extent are the achievements and changes that the joint programme has contributed to likely to last? How likely are they to be scaled up/expanded? What factors (positive or negative) are likely to support or hinder the sustainability of the programme's achievements?

Prompts:

- *To what extent and how has the programme strengthened national ownership, capacity and leadership (at national and decentralized levels) in programme countries?*
- *To what extent do the strategies used by the programme lend themselves to wider scalability and programme expansion, overall and in specific contexts?*
- *To what extent have the initiatives supported by the joint programme been integrated into other national, regional and global initiatives aiming at addressing the issue of FGM/C?*
- *To what extent have partnerships (with governments, UN system, donors, NGOs, civil society organizations, religious leaders, the media) been established to foster sustainability of effects?*

6. INTERAGENCY COORDINATION AND JOINT PROGRAMME MANAGEMENT

- 6.1 What have been the strengths and weaknesses of UNFPA and UNICEF coordination in the joint programme? What has worked well? What could be improved?

Prompt: Consider the following aspects: dividing roles and accountabilities; planning; decision making; implementation of activities; production, circulation and use of data; monitoring, reporting and evaluation; cost sharing/reduction of transaction costs.

- 6.2 In your opinion, what has been the added value of the joint structure of the programme?

Prompt: In terms of cost savings, synergies, enhanced capacities, reach and coverage.

- 6.3 What have been key strengths and weaknesses of the programme management and implementation at the global, regional and country levels? What has worked well? What could be improved?

Prompts:

- *Coordination and interaction among different levels (HQ, regional offices, country offices)*
- *Governance mechanisms*
- *Implementation mechanisms (financing instruments, administrative regulatory framework, staff, timing and procedures, reporting requirements and tools);*
- *Technical guidance and support to the country offices.*
- *Data collection, knowledge management and circulation of information*
- *M&E and reporting*

- *Managing donor relations*

6.4 To what extent and how have cross cutting issues of gender equality, human rights, cultural sensitivity and equity, and youth been integrated in programme implementation, monitoring and evaluation? Can you please provide examples?

7. GOOD PRACTICES, LESSONS LEARNED, AND FUTURE DIRECTIONS

7.1 What, if any, types of innovative /good practices for the abandonment of FGM/C have been introduced or supported by the Joint Programme?

7.2 What have been the key lessons learned?

Prompt: In relation to the validity of the overall joint programme approach/TOC; its implementation; management and coordination.

7.3 In what ways can or should the joint programme inform future UNFPA and UNICEF programming in relation to FGM/C? In what ways can or should the joint programme inform future UNFPA and UNICEF programming in relation to other areas (e.g. other harmful practices)?

8. OTHER COMMENTS

8.1 Do you have any other comments or suggestions or concerns about the programme and/or the evaluation that you would like to share with us? Do you have any questions?

Thank you for your collaboration.

INTERVIEW PROTOCOL

UNFPA/UNICEF OTHER STAFF (Resource Mobilization HQ)

1. INTRODUCTION

- 1.1 Please describe how long you have been with UNFPA/UNICEF, and in what capacities. Can you please describe your involvement with the UNFPA-UNICEF joint programme?

2. DESIGN

- 2.1 In your opinion what have been key strengths and weaknesses of the joint programme design, approach and strategies? How did these affect resource mobilization?
- 2.2 What role did donor expectations/priorities or requests play in the process of programme design? What were the initial key 'selling points'/reasons for donor interest?
- 2.3 What are the advantages and disadvantages of the selected funding mechanism (pass-through)?

3. EFFECTIVENESS and EFFICIENCY

- 3.1 To what extent has the effectiveness of the programme affected donors' interest in funding it? What do you see as the joint programme main achievements?
- 3.2 What other factors have influenced donors (continued) willingness and ability to fund the joint programme? What, if any, were challenges in view of ensuring continued donor commitment and/or ensuring that donors lived up to their envisaged contributions?
- 3.3 To what extent were the joint programme resources adequate to achieve the expected results? In terms of available resources, how does the joint programme on FGM/C compare to other UNFPA (or joint) programmes?
- 3.4 How/in what ways has the joint FGM/C programme been linked to other UNFPA programmes and areas of work, e.g. in population, HIV/AIDS etc.? Has this helped or hindered resource mobilization?

4. INTERAGENCY COORDINATION AND JOINT PROGRAMME MANAGEMENT

- 4.1 In your opinion, what has been the added value of the joint structure of the programme in terms of resource mobilization?
- 4.2 What have been the strengths and weaknesses of UNFPA and UNICEF coordination in the joint programme, as regards resource mobilization? What has worked well? What could be improved?

5. GOOD PRACTICES, LESSONS LEARNED, AND FUTURE DIRECTIONS

- 5.1 What, if any, types of innovative /good practices have been introduced or supported by the Joint Programme in terms of resource mobilization?
- 5.2 What have been the key lessons learned?

6. OTHER COMMENTS

- 6.1 Do you have any other comments or suggestions or concerns about the programme and/or the evaluation that you would like to share with us? Do you have any questions?

Thank you for your collaboration.

INTERVIEW PROTOCOL

OTHER UN AGENCIES (HQ)

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1. INTRODUCTION

Evaluation team members to introduce themselves, evaluation background & interview purpose.

- 1.1 Can you please briefly describe your role, and your agency's role, in particular in relation to FGM/C? Have you been involved with the UNFPA-UNICEF joint programme on FGM/C? If so how?

Prompt: try to ascertain through these questions how knowledgeable the interviewee is about the joint programme. Tailor the following questions accordingly.

2. RELEVANCE AND DESIGN

- 2.1 To what extent are the objectives of the joint programme aligned with UN priorities and strategies in relation to FGM/C at the global and regional levels?
- 2.2 To what extent and how does the joint programme relate to other UN programming on FGM/C? Are there synergies and/or overlaps?
- 2.3 To your knowledge, what have been key strengths and weaknesses of the joint programme design, approach and strategies?

3. EFFECTIVENESS

- 3.1 Since 2008, what, if any, changes in social norms/attitudes towards FGM/C have occurred in the countries where FGM/C is practiced? To what extent and how has the joint programme contributed to them?

Prompt: Can joint programme results be clearly distinguished from other actors'?

- 3.2 Since 2008, what, if any, changes in the global movement towards the abandonment of FGM/C have occurred? To what extent and how has the joint programme contributed to them?
- 3.3 To your knowledge, what have been the joint programme key achievements?

Prompts: Use the following table to map types of achievements and capture examples. With this group of respondents, focus on medium term results, in particular at the global level.

Possible types of achievements			Examples
Level	Medium term	Short term	
At the community level	Contributions to changes to the social norm towards the abandonment of FGM/C in the targeted communities	Strengthened community education, dialogue, decision making Increased number of public declarations Increased engagement of leaders	
Across-communities	Contributions to spreading changes to social norm across communities, within and across borders.	Accelerated organized diffusion Strengthened sub-regional dialogue and exchange	
At the national level	Contributions to the creation of favourable national conditions for the abandonment of FGM/C) including a legal framework against FGM/C; evidence based policies, plans and programmes; a national movement for the abandonment of FGM/C and a supportive public opinion.	Legal and policy reform Strengthened capacities Effective media campaigns Accurate data Partnerships	
At the regional and global levels	Contribution to the strengthening of regional and global movements for the abandonment of FGM/C (including adequate political commitment, resources, and knowledge)	Increased regional and global awareness and buy in. Strengthened knowledge production and circulation on the issue of FGM/C.	

3.4 How would you explain the joint programme's successes and missed opportunities? What has worked well? What hasn't? How does this relate to the experience of your own agency?

Prompt: this can refer to overall approach, programming strategies, stakeholders involved, types of activities, resources, selection of target population, management, etc.

4. SUSTAINABILITY

4.1 To what extent are the achievements and changes that the joint programme has contributed to likely to last? How likely are they to be scaled up/expanded? What factors (positive or negative) are likely to support or hinder the sustainability of the programme's achievements? How does this relate to the experience of your own agency?

If not sufficiently knowledgeable about the JP: What are the key factors affecting the sustainability of results in relation to the abandonment of FGM/C?

5. INTERAGENCY COORDINATION AND JOINT PROGRAMME MANAGEMENT

- 5.1 What have been the strengths and weaknesses of the coordination between UNFPA and UNICEF in relation to the joint programme? What has been its added value? What has worked well? What could be improved? Is this something that your own agency would consider?

Prompt: Consider the following aspects: dividing roles and accountabilities; planning; decision making; implementation of activities; production, circulation and use of data; monitoring, reporting and evaluation; cost sharing/reduction of transaction costs.

- 5.2 To your knowledge, how does the joint programme compare with other examples of joint UN programming?
- 5.3 *If not sufficiently knowledgeable about the JP:* What is in your opinion the added value of joint programming in relation to FGM/C? Can you share any good examples?

Prompt: in terms of cost savings, synergies, enhanced capacities, reach and coverage.

6. GOOD PRACTICES AND FUTURE DIRECTIONS

- 6.1 To your knowledge, what, if any, types of innovative /good practices for the abandonment of FGM/C have been introduced or supported by the joint programme? By your agency?
- 6.2 In what ways can or should the joint programme inform future programming in relation to FGM/C? What have been the key lessons learned?

If not sufficiently knowledgeable about the JP: Based on your agency's experience, what are your recommendations to UNFPA and UNICEF for future programming on FGM/C?

7. OTHER COMMENTS

- 7.1 Do you have any other comments or suggestions or concerns about the programme and/or the evaluation that you would like to share with us? Do you have any questions?

Thank you for your collaboration.

INTERVIEW PROTOCOL

Joint programme regional partners

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1. INTRODUCTION

Evaluation team members to introduce themselves, evaluation background & interview purpose.

- 1.1 Can you please briefly describe your role, and your organization's role, in particular in relation to FGM/C? What has been your involvement with the UNFPA-UNICEF joint programme on FGM/C? Do you work with other UN agencies and/or development partners on the issue of FGM/C?

Prompt: try to ascertain through these questions how knowledgeable the interviewee is about the joint programme. Tailor the following questions accordingly

- 1.2 Can you please briefly describe the initiatives for which your organization has received funding from the joint programme?

2. RELEVANCE AND DESIGN

- 2.1 *If sufficiently knowledgeable about the JP:* In your opinion what have been key strengths and weaknesses of the joint programme design, approach and strategies?

Prompt: How does your initiative fits into this broader picture?

If not sufficiently informed about the JP: To your knowledge, what types of programming approaches/strategies have been the most and least successful in accelerating the abandonment of FGM/C?

- 2.2 *If sufficiently knowledgeable about the JP:* Based on your knowledge of the JP, how relevant and responsive has the joint programme been to needs and priorities in relation to the issue of FGM/C in this region? In the countries you work in?

If not sufficiently informed about the JP: Based on your experience, what are the main needs and priorities in relation to FGM/C abandonment in the region/countries you work in?

3. EFFECTIVENESS

- 3.1 Since 2008, what, if any, changes in social norms/attitudes towards FGM/C have occurred in this region? *If sufficiently knowledgeable about the JP:* To what extent and how has the joint programme contributed to them? To what extent and how has your organization contributed to them?

- 3.2 Since 2008, what, if any, changes in the regional dynamics for the abandonment of FGM/C have occurred in the region(s) you work in? *If sufficiently knowledgeable about the JP:* To what extent and how has the joint programme contributed to them? To what extent and how has your organization contributed to them?

- 3.3 *If sufficiently knowledgeable about the JP:* From your point of view, what have been the joint programme key achievements in this region? What has been its added value of the joint programme?

- 3.4 What have been the key achievements of your initiative (joint-programme supported)? Have there been any missed opportunities? What has worked well? What hasn't?

Prompts: Use the following table to map types of achievements and capture examples. With this group of stakeholders focus on results across-communities and at the regional level.

Possible types of achievements			Examples
Level	Medium term	Short term	
<i>At the community level</i>	<i>Contributions to changes to the social norm towards the abandonment of FGM/C in the targeted communities</i>	<i>Strengthened community education, dialogue, decision making</i> <i>Increased number of public declarations</i> <i>Increased engagement of leaders</i>	
<i>Across-communities</i>	<i>Contributions to spreading changes to social norm across communities, within and across borders.</i>	<i>Accelerated organized diffusion</i> <i>Strengthened sub-regional dialogue and exchange</i>	
<i>At the national level</i>	<i>Contributions to the creation of favourable national conditions for the abandonment of FGM/C) including a legal framework against FGM/C; evidence based policies, plans and programmes; a national movement for the abandonment of FGM/C and a supportive public opinion.</i>	<i>Legal and policy reform</i> <i>Strengthened capacities</i> <i>Effective media campaigns</i> <i>Accurate data</i> <i>Partnerships</i>	
<i>At the regional and global levels</i>	<i>Contribution to the strengthening of regional and global movements for the abandonment of FGM/C (including adequate political commitment, resources, and knowledge)</i>	<i>Increased regional and global awareness and buy in.</i> <i>Strengthened knowledge production and circulation on the issue of FGM/C.</i>	

- 3.5 *If sufficiently knowledgeable about the JP:* How would you explain the programme's successes and missed opportunities? What has worked well? What hasn't?

Prompt: this can refer to overall approach, programming strategies, stakeholders involved, types of activities, resources, selection of target population, management, context, etc.

Prompt: specifically ask about the regional dimension of the Joint programme.

- 3.6 In your experience, what types of (programme supported) activities/initiatives have been the most and least useful/successful at the regional level? At the country level? Why?

Prompt: Types of activities include: Support to community-led and cross-community initiatives; Capacity strengthening (training, technical support, system building); Advocacy, policy dialogue, resource mobilization; Creating, coordinating, maintaining networks and partnerships; Data and knowledge generation, and circulation (including M&E); Communication, sensitization and awareness raising

4. SUSTAINABILITY

- 4.1 *If sufficiently knowledgeable about the JP:* To what extent are the achievements and changes that the joint programme has contributed to likely to last? How likely are they to be scaled up/expanded? What factors (positive or negative) are likely to support or hinder the sustainability of the programme's achievements?

Prompts:

- *To what extent and how has the programme strengthened national/regional ownership, capacity and leadership for the abandonment of FGM/C?*
- *To what extent have joint programme initiatives been integrated into other initiatives aiming at addressing the issue of FGM-C in this region?*

If not sufficiently knowledgeable about the JP: What factors are likely to support or hinder the sustainability of achievements towards the abandonment of FGM/C in this region?

5. INTERAGENCY COORDINATION AND JOINT PROGRAMME MANAGEMENT

- 5.1 In your opinion, what has been the added value of the joint UNFPA-UNICEF structure of the programme?

Prompt: in terms of synergies, enhanced capacities, reach and coverage, savings achieved by inter-agency coordination.

- 5.2 Have you been involved in any other UN joint programme that has a regional dimension? If so, how does this one compare to them? What are its strengths? What could be improved?

- 5.3 What have been key strengths and weaknesses of the joint programme management and implementation? What has worked well? What could be improved?

Prompts:

- *Quality and clarity of partnership*
- *Funding mechanisms*
- *Implementation mechanisms (financing instruments, administrative regulatory framework, timing and procedures, reporting requirements and tools);*
- *Technical guidance and support from UNFPA/UNICEF*

- *M&E requirements, tools and guidance*

5.4 To what extent were the joint programme resources adequate to achieve the expected results? Did the joint programme resources complement other resources that you already had to work on the issue of FGM/C? Were you able to mobilize additional resources after participating in the joint programme?

Prompt: resources can be financial, human and technical (e.g. existing tools and materials); they can come from both UNICEF and UNFPA.

6. GOOD PRACTICES, LESSONS LEARNED, AND FUTURE DIRECTIONS

6.1 What, if any, types of innovative /good practices have been introduced or supported by the joint programme for the abandonment of FGM/C in this region?

6.2 What have been the key lessons learned?

7. OTHER COMMENTS

7.1 Do you have any other comments or suggestions or concerns about the programme and/or the evaluation that you would like to share with us? Do you have any questions?

Thank you for your collaboration.

INTERVIEW PROTOCOL

UNFPA/UNICEF OTHER STAFF (HQ)

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1. INTRODUCTION

Evaluation team members to introduce themselves, evaluation background & interview purpose.

- 1.1 Please describe how long you have been with UNFPA/UNICEF, and in what capacities. Can you please describe your involvement with the UNFPA-UNICEF joint programme?

Prompt: try to ascertain through these questions how knowledgeable the interviewee is about the joint programme. Tailor the following questions accordingly.

2. RELEVANCE and DESIGN

- 2.1 In your opinion what have been key strengths and weaknesses of the joint programme design, approach and strategies?

Prompts: To what extent and how does it reflect latest thinking and lessons learned on what works and what doesn't work in relation to accelerating the abandonment of FGM/C?

- 2.2 To your knowledge, to what extent are the objectives of the joint programme aligned with UNFPA/UNICEF policies and strategies at the global, regional and country levels, in particular in relation to your area of work?
- 2.3 To what extent and how does the joint programme relate to other programming on FGM/C that you know of/support? Are there synergies and/or overlaps?

3. EFFECTIVENESS

- 3.1 Since 2008, what, if any, changes in social norms/attitudes towards FGM/C have occurred in the countries where FGM/C is practiced? *If sufficiently knowledgeable about JP:* To what extent and how has the joint programme contributed to them?
- 3.2 Since 2008, what, if any, changes in the global movement towards the abandonment of FGM/C have occurred? *If sufficiently knowledgeable about JP:* To what extent and how has the joint programme contributed to them?
- 3.3 *If sufficiently knowledgeable about JP:* From your point of view, what have been the joint programme key achievements at the global, regional country and community levels?

Prompts: Use the following table to map types of achievements and capture examples.

Possible types of achievements			Examples
Level	Medium term	Short term	
<i>At the community level</i>	<i>Contributions to changes to the social norm towards the abandonment of FGM/C in the targeted communities</i>	<i>Strengthened community education, dialogue, decision making</i> <i>Increased number of public declarations</i> <i>Increased engagement of leaders</i>	
<i>Across-communities</i>	<i>Contributions to spreading changes to social norm across communities, within and across borders.</i>	<i>Accelerated organized diffusion</i> <i>Strengthened sub-regional dialogue and exchange</i>	
<i>At the national level</i>	<i>Contributions to the creation of favourable national conditions for the abandonment of FGM/C) including a legal framework against FGM/C; evidence based policies, plans and programmes; a national movement for the abandonment of FGM/C and a supportive public opinion.</i>	<i>Legal and policy reform</i> <i>Strengthened capacities</i> <i>Effective media campaigns</i> <i>Accurate data</i> <i>Partnerships</i>	
<i>At the regional and global levels</i>	<i>Contribution to the strengthening of regional and global movements for the abandonment of FGM/C (including adequate political commitment, resources, and knowledge)</i>	<i>Increased regional and global awareness and buy in.</i> <i>Strengthened knowledge production and circulation on the issue of FGM/C.</i>	

3.4 *If sufficiently knowledgeable about JP:* How would you explain the joint programme's successes and missed opportunities? What has worked well? What hasn't?

Prompt: This can refer to overall approach, programming strategies, stakeholders involved, types of activities, resources, selection of target population, management, etc.

4. SUSTAINABILITY

- 4.1 *If sufficiently knowledgeable about JP:* To what extent are the achievements and changes that the joint programme has contributed to likely to last? How likely are they to be scaled up/expanded? What factors (positive or negative) are likely to support or hinder the sustainability of the programme's achievements?

Prompts:

- *To what extent and how has the programme strengthened national ownership, capacity and leadership (at national and decentralized levels) in programme countries?*
- *To what extent do the strategies used by the programme lend themselves to wider scalability and programme expansion, overall and in specific contexts?*
- *To what extent has the joint programme been integrated into other national, regional and global initiatives aiming at addressing the issue of FGM/C?*
- *To what extent have partnerships (with governments, UN system, donors, NGOs, civil society organizations, religious leaders, the media) been established to foster sustainability of effects?*

If not sufficiently knowledgeable about the JP: What are the key factors affecting the sustainability of results in relation to the abandonment of FGM/C?

5. INTERAGENCY COORDINATION AND JOINT PROGRAMME MANAGEMENT

- 5.1 In your opinion, what has been the added value of the joint structure of the programme?

Prompt: In terms of cost savings, synergies, enhanced capacities, reach and coverage.

- 5.2 *If sufficiently knowledgeable about JP:* What have been the strengths and weaknesses of UNFPA and UNICEF coordination in the joint programme? What has worked well? What could be improved?

Prompt: Consider the following aspects: dividing roles and accountabilities; planning; decision making; implementation of activities; production, circulation and use of data; monitoring, reporting and evaluation; cost sharing/reduction of transaction costs.

- 5.3 *If sufficiently knowledgeable about JP:* To your knowledge, what have been key strengths and weaknesses of the programme management and implementation at the global, regional and country levels? What has worked well? What could be improved?

Prompts (NB focus on relevant aspects depending on interviewee's role):

- *Strategic direction and leadership*
- *Coordination and interaction among different levels (HQ, regional offices, country offices)*
- *Governance mechanisms*
- *Implementation mechanisms (financing instruments, administrative regulatory framework, staff, timing and procedures, reporting requirements and tools);*
- *Technical guidance and support to the country offices.*
- *Data collection, knowledge management and circulation of information*
- *M&E and reporting*
- *Managing donor relations*
- *Resource mobilization*

5.4 To what extent were the joint programme resources adequate to achieve the expected results?

Prompt: resources can be financial, human and technical (e.g. existing tools and materials).

6. GOOD PRACTICES, LESSONS LEARNED, AND FUTURE DIRECTIONS

6.1 What, if any, types of innovative /good practices for the abandonment of FGM/C have been introduced or supported by the Joint Programme?

6.2 What have been the key lessons learned?

6.3 In what ways can or should the joint programme inform future UNFPA and UNICEF programming in relation to FGM/C? In what ways can or should the joint programme inform future UNFPA and UNICEF programming in relation to other areas (e.g. other harmful practices)?

7. OTHER COMMENTS

7.1 Do you have any other comments or suggestions or concerns about the programme and/or the evaluation that you would like to share with us? Do you have any questions?

Thank you for your collaboration.

INTERVIEW PROTOCOL

UNFPA/UNICEF regional staff

Please note: this is an internal document for the interviewers' use. It is not to be distributed to the interviewees. Prompts and other instructions in *italic* are for the interviewers' use only. They will not be shared with the interviewees.

1. INTRODUCTION

Evaluation team members to introduce themselves, evaluation background & interview purpose.

- 1.1 Please describe how long you have been with UNFPA/UNICEF, and in what capacities. Can you please describe your involvement with the UNFPA-UNICEF joint programme?

Prompt: try to ascertain through these questions how knowledgeable the interviewee is about the joint programme. Tailor the following questions accordingly.

2. RELEVANCE AND DESIGN

- 2.1 To what extent are the objectives of the joint programme aligned with UNFPA/UNICEF policies and strategies at the regional level?
- 2.2 How relevant and responsive has the joint programme been to needs and priorities in relation to the issue of FGM/C in this region?
- 2.3 In your opinion what have been key strengths and weaknesses of the joint programme design, approach and strategies?

Prompt: how relevant and appropriate has the regional component been in view of achieving the joint programme objectives?

3. EFFECTIVENESS

- 3.1 Since 2008, what, if any, changes in social norms/attitudes towards FGM/C have occurred in this region? *If sufficiently knowledgeable about JP:* To what extent and how has the joint programme contributed to them?
- 3.2 Since 2008, what, if any, changes in the regional dynamics for the abandonment of FGM/C have occurred in this region? *If sufficiently knowledgeable about JP:* To what extent and how has the joint programme contributed to them?
- 3.3 Since 2008, what contextual and environmental factors have affected or influenced the work of UNFPA/UNICEF on FGM/C in this region?
- 3.4 *If sufficiently knowledgeable about JP:* From your point of view, what have been the joint programme key achievements in this region?

Prompt: Use the following table to map types of achievements and capture examples. With this group of stakeholders focus on results at the regional and national levels.

Possible types of achievements			Examples
Level	Medium term	Short term	
<i>At the community level</i>	<i>Contributions to changes to the social norm towards the abandonment of FGM/C in the targeted communities</i>	<i>Strengthened community education, dialogue, decision making Increased number of public declarations Increased engagement of leaders</i>	
<i>Across-communities</i>	<i>Contributions to spreading changes to social norm across communities, within and across borders.</i>	<i>Accelerated organized diffusion Strengthened sub-regional dialogue and exchange</i>	
<i>At the national level</i>	<i>Contributions to the creation of favourable national conditions for the abandonment of FGM/C) including a legal framework against FGM/C; evidence based policies, plans and programmes; a national movement for the abandonment of FGM/C and a supportive public opinion.</i>	<i>Legal and policy reform Strengthened capacities Effective media campaigns Accurate data Partnerships</i>	
<i>At the regional and global levels</i>	<i>Contribution to the strengthening of regional and global movements for the abandonment of FGM/C (including adequate political commitment, resources, and knowledge)</i>	<i>Increased regional and global awareness and buy in. Strengthened knowledge production and circulation on the issue of FGM/C.</i>	

3.5 *If sufficiently knowledgeable about JP: How would you explain the joint programme's successes and missed opportunities? What has worked well? What hasn't?*

Prompt: this can refer to overall approach, programming strategies, stakeholders involved, types of activities, resources, selection of target population, management, etc.

4. SUSTAINABILITY

- 4.1 *If sufficiently knowledgeable about JP:* To what extent are the achievements and changes that the joint programme has contributed to likely to last? How likely are they to be scaled up/expanded? What factors (positive or negative) are likely to support or hinder the sustainability of the programme's achievements?

Prompts:

- *To what extent and how has the programme strengthened regional/national ownership, capacity and leadership for the abandonment of FGM/C?*
- *To what extent have joint programme initiatives been integrated into other initiatives aiming at addressing the issue of FGM-C in this region?*
- *To what extent do the strategies used by the joint programme lend themselves to wider scalability and programme expansion?*

If not sufficiently knowledgeable about the JP: What factors are likely to support or hinder the sustainability of achievements towards the abandonment of FGM/C in this region?

5. INTERAGENCY COORDINATION AND JOINT PROGRAMME MANAGEMENT

- 5.1 In your opinion, what has been the added value of joint structure of the programme?

Prompt: in terms of synergies, enhanced capacities, reach and coverage, savings achieved by inter-agency coordination.

- 5.2 *If sufficiently knowledgeable about the JP:* What have been the strengths and weaknesses of UNFPA and UNICEF coordination in the joint programme? What has worked well? What could be improved?

Prompt: Consider the following aspects: dividing roles and accountabilities; planning; decision making; implementation of activities; production, circulation and use of data; monitoring, reporting and evaluation; cost sharing/reduction of transaction costs.

- 5.3 To your knowledge, what have been key strengths and weaknesses of the programme management and implementation? What has worked well? What could be improved?

Prompts:

- *Programme leadership and direction at global and country level;*
- *Coordination and interaction among different levels (HQ, regional offices, country offices)*
- *Level of involvement of the regional offices/staff*
- *Implementation mechanisms (financing instruments, administrative regulatory framework, timing and procedures, reporting requirements and tools);*
- *Technical guidance and support from UNFPA/UNICEF HQ*

- 5.4 To what extent were the joint programme resources adequate to achieve the expected results?

Prompt: resources can be financial, human and technical (e.g. existing tools and materials); they can come from both UNICEF and UNFPA.

6. GOOD PRACTICES, LESSONS LEARNED, AND FUTURE DIRECTIONS

- 6.1 What, if any, types of innovative /good practices have been introduced or supported by the joint programme for the abandonment of FGM/C in this region?

6.2 What have been the key lessons learned?

Prompt: In relation to the validity of the overall joint programme approach; its implementation; management and coordination

6.3 In what ways can or should the joint programme inform future programming in relation to FGM/C in this region? In what ways can or should the joint programme inform future programming in relation to other areas (e.g. other harmful practices)?

7. OTHER COMMENTS

7.1 Do you have any other comments or suggestions or concerns about the programme and/or the evaluation that you would like to share with us? Do you have any questions?

Thank you for your collaboration.

Country and community level stakeholders

INTERVIEW PROTOCOL

GOVERNMENT REPRESENTATIVES

Please note: this is an internal document for the interviewers' use. It is not to be distributed to the interviewees.

1. INTRODUCTION

Evaluation team members to introduce themselves, evaluation background & interview purpose.

- 1.1 Can you please briefly describe your role, in particular in relation to FGM/C? What has been your involvement with the UNFPA/UNICEF joint programme on FGM/C? Do you work with other UN agencies, development partners on the issue of FGM/C?

2. RELEVANCE AND DESIGN

- 2.1 How relevant and responsive has the joint programme been to existing government priorities and strategies in relation to FGM/C abandonment (including the national plan of action if it exists)? To country-level needs? To the needs of the targeted communities?

Prompt: To what extent have the joint programme strategies been contextualized to meet national and community level needs and priorities? Can you please provide examples?

- 2.2 In your opinion what have been key strengths and weaknesses of the joint programme design, approach and strategies?

3. EFFECTIVENESS

- 3.1 Since 2008, what, if any, changes in social norms/attitudes towards FGM/C have occurred in this country? In specific communities? To what extent and how has the joint programme contributed to them?
- 3.2 From your point of view, what have been the joint programme's key achievements in this country?

Prompts: Use the following table to map types of achievements and capture examples. For this stakeholder group, focus particularly on the national level.

Possible types of achievements			Examples
Level	Medium term	Short term	
At the community level	Contributions to changes in the social norm towards the abandonment of FGM/C in the targeted communities	<ul style="list-style-type: none"> • Strengthened community education, dialogue, decision making • Increased number of public declarations • Increased engagement of leaders 	
Across-communities	Contributions to spreading changes in social norm across communities, within and across borders.	<ul style="list-style-type: none"> • Accelerated organized diffusion • Strengthened sub-regional dialogue and exchange 	
At the national level	Contributions to the creation of favourable national conditions for the abandonment of FGM/C) including a legal framework against FGM/C; evidence based policies, plans and programmes; a national movement for the abandonment of FGM/C and a supportive public opinion.	<ul style="list-style-type: none"> • Legal and policy reform • Strengthened capacities (including coordination) • Effective media campaigns • Accurate data • Partnerships 	

3.3 How would you explain the programme's successes and missed opportunities? What has worked well? What hasn't? What have been the key factors that have supported or hindered success?

Prompt: This can refer to overall approach, programming strategies, stakeholders involved, types of activities, resources, selection of target population, management, context etc.

3.4 Have you/your department been directly involved in any activities/initiatives supported by the joint programme as an implementing partner or as a beneficiary? If so, which ones have been the most and least useful/successful? Why?

Prompt: Types of activities include: Creating, coordinating, maintaining networks and partnerships; Advocacy, policy dialogue, resource mobilization; Capacity strengthening (training, technical support, system building); Support to communication, sensitization and awareness raising; Support to community education, dialogue and community-led initiatives; Data and knowledge generation, and circulation (including M&E).

4. SUSTAINABILITY

4.1 To what extent are the achievements and changes that the joint programme has contributed to likely to last? How likely are they to be scaled up/expanded? What factors (positive or negative) are likely to support or hinder (i.e. bottlenecks) the sustainability of joint programme achievements?

Prompts:

- *To what extent and how has the programme strengthened national ownership, capacity and leadership (at national and decentralized levels) for addressing the issue of FGM/C to the abandonment of FGM/C?*
- *To what extent are the initiatives supported by the joint programme integrated into other national initiatives aiming at addressing the issue of FGM-C?*

5. INTERAGENCY COORDINATION AND JOINT PROGRAMME MANAGEMENT

5.1 In your opinion, what has been the added value of UNFPA and UNICEF working jointly for the abandonment of FGM/C? (specifically in this programme)

Prompt: In terms of synergies, enhanced capacities, reach and coverage, savings.

5.2 Have you been involved in any other UN joint programme? If so, how does this one compare to them? What are its strengths? What could be improved?

NB Ask the following questions only to implementing partners

5.3 What have been key strengths and weaknesses of the programme management and implementation? What has worked well? What could be improved?

Prompts:

- *Quality and clarity of partnership*
- *Implementation mechanisms (financing instruments, administrative regulatory framework, timing and procedures, reporting requirements and tools);*
- *Technical guidance and support from UNFPA/UNICEF*
- *M&E requirements, tools and guidance*

5.4 To what extent were the joint programme resources adequate to achieve the expected results? Did the joint programme resources complement other resources that you already had to work on the issue of FGM/C? Were you able to mobilize additional resources after participating in the joint programme?

Prompt: Resources can be financial, human and technical (e.g. existing tools and materials); they can come from both UNICEF and UNFPA.

6. GOOD PRACTICES, LESSONS LEARNED, AND FUTURE DIRECTIONS

6.1 What, if any, innovative /good practices have been introduced or supported by the joint programme for the abandonment of FGM/C in this country?

6.2 What have been the key lessons learned?

6.3 In what ways can or should the joint programme inform future programming in relation to FGM/C in this country? In what ways can or should the joint programme inform future programming in relation to other areas (e.g. other harmful practices)?

7. OTHER COMMENTS

7.1 Do you have any other comments or suggestions or concerns about the joint programme and/or the evaluation that you would like to share with us? Do you have any questions?

Thank you for your collaboration.

INTERVIEW PROTOCOL

IMPLEMENTING PARTNERS AT THE COMMUNITY LEVEL

Please note: this is an internal document for the interviewers' use. It is not to be distributed to the interviewees.

1. INTRODUCTION

Evaluation team members to introduce themselves, evaluation background & interview purpose.

- 1.1 Can you please briefly describe your role, and your organization's role, in particular in relation to FGM/C? Are you aware of the joint UNFPA/UNICEF programme on FGM/C? If yes, what has been your involvement with joint programme? Do you work with other UN agencies and/or development partners on the issue of FGM/C?

Note to interviewer: clarify in advance whether the Implementing Partner is likely to be aware of the Joint Programme, or whether the organization's main point of contact has been with another larger NGO or government partner. Adjust question accordingly if/as required.

2. EFFECTIVENESS

- 2.1 Since 2008, what, if any, changes in social norms/attitudes towards FGM/C have occurred in this country? In specific communities? In your view, what are the main reasons that have caused or contributed to these changes?

Prompt: Explore whether and to what extent the Joint Programme (e.g. through its implementing partners) has contributed to the noted changes.

- 2.2 What do you consider key achievements towards the abandonment of FGM/C in the targeted communities? Across communities?

Prompts: Use the following table to map types of achievements and capture examples. For this stakeholder group, focus particularly on community and cross-community levels.

Possible types of achievements			Examples
Level	Medium term	Short term	
At the community level	Contributions to changes to the social norm towards the abandonment of FGM/C in the targeted communities	<ul style="list-style-type: none"> • Strengthened community education, dialogue, decision making • Increased number of public declarations • Increased engagement of leaders 	
Across-communities	Contributions to spreading changes in social norm across communities, within and across borders.	<ul style="list-style-type: none"> • Accelerated organized diffusion • Strengthened sub-regional dialogue and exchange 	
At the national level (if applicable)	Contributions to the creation of favourable national conditions for the abandonment of FGM/C) including a legal framework against FGM/C; evidence based policies, plans and programmes; a national movement for the abandonment of FGM/C and a supportive public opinion.	<ul style="list-style-type: none"> • Legal and policy reform • Strengthened capacities (including coordination) • Effective media campaigns • Accurate data • Partnerships 	

2.3 How would you explain successes and missed opportunities of your organization's work? What has worked well? What hasn't? What have been key factors supporting or hindering successes?

Prompt: this can refer to overall approach, programming strategies, stakeholders involved, types of activities, resources, selection of target population, management, context etc.

2.4 What types of activities/initiatives have you implemented/have you been involved with? Which ones have been the most and least useful/successful? Why? To what extent have activities been tailored to the specific needs of the targeted communities?

Prompt: Types of activities include: Creating, coordinating, maintaining networks and partnerships; Advocacy, policy dialogue, resource mobilization; Capacity strengthening (training, technical support, system building); Support to communication, sensitization and awareness raising; Support to community education, dialogue and community-led initiatives; Data and knowledge generation, and circulation (including M&E).

3. SUSTAINABILITY

3.1 To what extent are the achievements and changes that have occurred at the community level likely to last? How likely are they to be scaled up/expanded? What factors (positive or negative) are likely to support or hinder the sustainability of these achievements?

Prompts:

- *To what extent and how have community level ownership, capacity and leadership for the abandonment of FGM/C been strengthened?*

- *To what extent do the strategies that have been used lend themselves to wider scalability and expansion, overall and in specific contexts?*
- *To what extent have your organization's initiatives been integrated into other initiatives aiming at addressing the issue of FGM-C in this community?*

4. INTERAGENCY COORDINATION AND JOINT PROGRAMME MANAGEMENT

4.1 *If applicable:* In your opinion, what has been the added value of the joint structure of the programme? OR: What has been the value added of working with UNICEF/UNFPA

Prompt: In terms of synergies, enhanced capacities, reach and coverage, savings achieved by inter-agency coordination.

4.2 Have you been involved in any other UN joint programme? If so, how does this one compare to them? What are its strengths? What could be improved?

5. GOOD PRACTICES, LESSONS LEARNED, AND FUTURE DIRECTIONS

5.1 What, if any, types of innovative /good practices have been introduced or supported by your recent work on FGM/C?

5.2 What have been the key lessons learned?

6. OTHER COMMENTS

6.1 Do you have any other comments or suggestions or concerns that you would like to share with us? Do you have any questions?

Thank you for your collaboration.

INTERVIEW PROTOCOL

OTHER NATIONAL STAKEHOLDERS

Please note: this is an internal document for the interviewers' use. It is not to be distributed to the interviewees.

This protocol will be used for the following groups: NGOs, media, academia, law professions, religious leaders and organizations, members of parliament. It is a generic protocol that will be tailored depending on the type of interviewee.

1. INTRODUCTION

Evaluation team members to introduce themselves, evaluation background & interview purpose.

- 1.1 Can you please briefly describe your role, and your organization's role, in particular in relation to FGM/C?
- 1.2 Are you aware of the UNFPA-UNICEF joint programme on FGM/C? If yes, what has been your involvement in the programme? Do you work with other UN agencies and/or development partners on the issue of FGM/C?

2. RELEVANCE AND DESIGN

- 2.1 *Only if respondent is aware of the joint programme:*

In your opinion what have been key strengths and weaknesses of the joint programme design, approaches and strategies?

3. EFFECTIVENESS

- 3.1 Since 2008, what, if any, changes in social norms/attitudes towards FGM/C have occurred in this country? In specific communities? To what extent and how has the joint programme contributed to them?

Prompt: If respondent is not aware of the joint programme, replace latter question with: In your view, what are the main reasons that have caused or contributed to these changes?

- 3.2 From your point of view, what have been the joint programme key achievements in this country? At the national level? At the community level (if relevant)?

Prompts: Use the following table to map types of achievements and capture examples. Depending on the stakeholder, focus on the appropriate results.

Possible types of achievements			Examples
Level	Medium term	Short term	
At the community level	Contributions to changes to the social norm towards the abandonment of FGM/C in the targeted communities	<ul style="list-style-type: none"> • Strengthened community education, dialogue, decision making • Increased number of public declarations • Increased engagement of leaders 	
Across-communities	Contributions to spreading changes to social norm across communities, within and across borders.	<ul style="list-style-type: none"> • Accelerated organized diffusion • Strengthened sub-regional dialogue and exchange 	
At the national level	Contributions to the creation of favourable national conditions for the abandonment of FGM/C) including a legal framework against FGM/C; evidence based policies, plans and programmes; a national movement for the abandonment of FGM/C and a supportive public opinion.	<ul style="list-style-type: none"> • Legal and policy reform • Strengthened capacities (including coordination) • Effective media campaigns • Accurate data • Partnerships 	

3.3 How would you explain the programme's successes and missed opportunities? What has worked well? What hasn't?

Prompt: This can refer to overall approach, programming strategies, stakeholders involved, types of activities, resources, selection of target population, management, context etc. Note: If respondent is not aware of the joint programme, ask generic question about successes and missed opportunities of overall efforts to abandon FGM/C in the respective country.

3.4 *If applicable:* Have you/your organizations been directly involved in any joint programme activities/initiatives as an implementing partner or as a beneficiary? If so, which ones have been the most and least useful/successful? Why?

Prompt: Types of activities include: Creating, coordinating, maintaining networks and partnerships; Advocacy, policy dialogue, resource mobilization; Capacity strengthening (training, technical support, system building); Support to communication, sensitization and awareness raising; Support to community education, dialogue and community-led initiatives; Data and knowledge generation, and circulation (including M&E).

4. SUSTAINABILITY

4.1 To what extent are the achievements and changes (*if applicable:* that the joint programme has contributed to) likely to last? How likely are they to be scaled up/expanded? What factors (positive or negative) are likely to support or hinder the sustainability of achievements?

Prompts:

- *To what extent and how has the programme/have different actors strengthened national ownership, capacity and leadership for the abandonment of FGM/C?*
- *To what extent have joint programme initiatives been integrated into other initiatives aiming at addressing the issue of FGM-C in this country and/or in relevant communities?*

5. INTERAGENCY COORDINATION AND JOINT PROGRAMME MANAGEMENT

5.1 *If applicable:* In your opinion, what has been the added value of joint structure of the programme?

Prompt: In terms of synergies, enhanced capacities, reach and coverage, savings achieved by inter-agency coordination.

5.2 Have you been involved in or are you aware of any other UN joint programme? If so, how does this one compare to them? What are its strengths? What could be improved?

NB Ask the following questions only to implementing partners

5.3 What have been key strengths and weaknesses of the programme management and implementation? What has worked well? What could be improved?

Prompts:

- *Quality and clarity of partnership, e.g. roles and responsibilities vis-a-vis IPs*
- *Implementation mechanisms (financing instruments, administrative regulatory framework, timing and procedures, reporting requirements and tools);*
- *Technical guidance and support from UNFPA/UNICEF*
- *M&E requirements, tools and guidance*

5.4 To what extent were the joint programme resources adequate to achieve the expected results? Did the joint programme resources complement other resources that you already had to work on the issue of FGM/C? Were you able to mobilize additional resources after participating in the joint programme?

Prompt: Resources can be financial, human and technical (e.g. existing tools and materials); they can come from both UNICEF and UNFPA, e.g. through core funding.

6. GOOD PRACTICES, LESSONS LEARNED, AND FUTURE DIRECTIONS

6.1 What, if any, types of innovative /good practices have been introduced or supported by the joint programme for the abandonment of FGM/C in this country/in targeted communities?

6.2 What have been the key lessons learned?

6.3 In what ways can or should the joint programme inform future programming in relation to FGM/C in this country? In what ways can or should the joint programme inform future programming in relation to other areas (e.g. other harmful practices)?

7. OTHER COMMENTS

7.1 Do you have any other comments or suggestions or concerns (about the programme and/or the evaluation) that you would like to share with us? Do you have any questions?

Thank you for your collaboration.

INTERVIEW PROTOCOL

OTHER UN AGENCIES AND DEVELOPMENT PARTNERS

Please note: this is an internal document for the interviewers' use. It is not to be distributed to the interviewees.

1. INTRODUCTION

Evaluation team members to introduce themselves, evaluation background & interview purpose.

- 1.1 Can you please briefly describe your role, and your agency's role, in particular in relation to FGM/C in this country? Have you been involved with the UNFPA/UNICEF joint programme on FGM/C? If so how?

2. RELEVANCE AND DESIGN

- 2.1 To your knowledge, how relevant and responsive has the joint programme been to country-level needs and priorities in relation to the issue of FGM/C? How relevant and responsive has the joint programme been to the needs of the targeted communities?
- 2.2 To what extent are the objectives of the joint programme aligned with UN/development partners' priorities and strategies in this country?
- 2.3 To what extent and how does the joint programme relate to other UN/development partners programming on FGM/C in this country? Are there synergies and/or overlaps?
- 2.4 To your knowledge, what have been key strengths and weaknesses of the joint programme design, approach and strategies?

3. EFFECTIVENESS

- 3.1 Since 2008, what, if any, changes in social norms/attitudes towards FGM/C have occurred in this country? In specific communities? To what extent and how has the joint programme contributed to them?
- 3.2 To your knowledge, what have been the joint programme key achievements in this country?

Prompts: Use the following table to map types of achievements and capture examples. With this group of respondents, focus on medium term results.

Possible types of achievements			Examples
Level	Medium term	Short term	
At the community level	Contributions to changes to the social norm towards the abandonment of FGM/C in the targeted communities	<ul style="list-style-type: none"> Strengthened community education, dialogue, decision making Increased number of public declarations Increased engagement of leaders 	
Across-communities	Contributions to spreading changes in social norm across communities, within and across borders.	<ul style="list-style-type: none"> Accelerated organized diffusion Strengthened sub-regional dialogue and exchange 	
At the national level	Contributions to the creation of favourable national conditions for the abandonment of FGM/C) including a legal framework against FGM/C; evidence based policies, plans and programmes; a national movement for the abandonment of FGM/C and a supportive public opinion.	<ul style="list-style-type: none"> Legal and policy reform Strengthened capacities (including coordination) Effective media campaigns Accurate data Partnerships 	

3.3 How would you explain the programme's successes and missed opportunities? What has worked well? What hasn't? What have been key factors supporting or hindering the achievement of results?

Prompt: This can refer to overall approach, programming strategies, stakeholders involved, types of activities, resources, selection of target population, management, context etc.

4. SUSTAINABILITY

4.1 To what extent are the achievements and changes that the joint programme has contributed to likely to last? How likely are they to be scaled up/expanded? What factors (positive or negative) are likely to support or hinder the sustainability of the programme's achievements?

Prompts:

- To what extent and how has the programme strengthened national ownership, capacity and leadership (at national and decentralized levels) in this country?*
- To what extent do the strategies used by the programme lend themselves to wider scalability and programme expansion, overall and in specific contexts?*
- To what extent has the joint programme been integrated into other national initiatives aiming at addressing the issue of FGM-C?*

5. INTERAGENCY COORDINATION AND JOINT PROGRAMME MANAGEMENT

- 5.1 What have been the strengths and weaknesses of the coordination between UNFPA and UNICEF in relation to the joint programme in this country? What has worked well? What could be improved?

Prompt: Consider the following aspects: dividing roles and accountabilities; planning; decision making; implementation of activities; production, circulation and use of data; monitoring, reporting and evaluation; cost sharing/reduction of transaction costs.

- 5.2 What has been in your opinion the added value of the joint structure of the programme?

Prompt: In terms of cost savings, synergies, enhanced capacities, reach and coverage.

- 5.3 How does the joint programme compare with other examples of joint UN programming in this country?

6. GOOD PRACTICES AND FUTURE DIRECTIONS

- 6.1 To your knowledge, what, if any, types of innovative /good practices for the abandonment of FGM/C have been introduced or supported by the joint programme in this country?

What if any types of innovative/good practices have been introduced or supported by your agency that could inform future UNFPA/UNICEF programming on FGM/C in this country?

- 6.2 In what ways can or should the joint programme inform future programming in relation to FGM/C in this country? In what ways can or should the joint programme inform future programming in relation to other areas (e.g. other harmful practices)?

7. OTHER COMMENTS

- 7.1 Do you have any other comments or suggestions or concerns about the programme and/or the evaluation that you would like to share with us? Do you have any questions?

Thank you for your collaboration.

INTERVIEW PROTOCOL

UNFPA/UNICEF COUNTRY OFFICE STAFF

Please note: this is an internal document for the interviewers' use. It is not to be distributed to the interviewees.

1. INTRODUCTION

Evaluation team members to introduce themselves, evaluation background & interview purpose.

- 1.1 Please describe how long you have been with UNFPA/UNICEF, and in what capacities. Can you please describe your involvement with the UNFPA/UNICEF joint programme?

2. RELEVANCE AND DESIGN

- 2.1 To what extent are the objectives of the joint programme aligned with UNFPA/UNICEF policies and strategies at the country level?
- 2.2 From your perspective, to what extent are the objectives of the joint programme aligned with government priorities? To country-level needs in relation to the abandonment of FGM/C? to the needs of the targeted communities?

Prompt: To what extent and how have the joint programme approach and strategies been contextualized to meet national and community level needs and priorities? Can you please provide examples?

- 2.3 In your opinion what have been key strengths and weaknesses of the joint programme design, approach and strategies in this country?
- 2.4 To what extent does the attached theory of change accurately reflect the joint programme approach? Would you change anything in it to make it more relevant to the work you do in this country?

Prompt: Discuss, validate and/or critique TOC.

NB: the appropriateness of this question for this group of respondents will be tested during the pilot field visit

3. EFFECTIVENESS

- 3.1 Since the Programme has started, have there been any changes in the social norms/attitudes towards FGM/C in this country? In the targeted communities? If so, to what extent and how has the joint programme contributed to them?
- 3.2 From your point of view, what have been the joint programme key achievements in this country at the community level? At the national level? Have there been any achievements at the regional/global level to which this country office has directly contributed?

Prompts: Use the following table to map types of achievements and capture examples.

Possible types of achievements			Examples
Level	Medium term	Short term	
<i>At the community level</i>	<i>Contributions to changes in the social norm towards the abandonment of FGM/C in the targeted communities.</i>	<ul style="list-style-type: none"> • <i>Strengthened community education, dialogue, decision making</i> • <i>Increased number of public declarations</i> • <i>Increased engagement of leaders</i> 	
<i>Across-communities</i>	<i>Contributions to spreading changes to social norm across communities, within and across borders.</i>	<ul style="list-style-type: none"> • <i>Accelerated organized diffusion</i> • <i>Strengthened sub-regional dialogue and exchange</i> 	
<i>At the national level</i>	<i>Contributions to the creation of favourable national conditions for the abandonment of FGM/C) including a legal framework against FGM/C; evidence based policies, plans and programmes; a national movement for the abandonment of FGM/C and a supportive public opinion.</i>	<ul style="list-style-type: none"> • <i>Legal and policy reform</i> • <i>Strengthened capacities (including coordination)</i> • <i>Effective media campaigns</i> • <i>Accurate data</i> • <i>Partnerships</i> 	
<i>At the regional level (and global if relevant)</i>	<i>Contributions to the creation of favourable regional (and global) conditions for the abandonment of FGM/, including adequate political commitment, resources and knowledge.</i>	<ul style="list-style-type: none"> • <i>Increase dialogue and awareness</i> • <i>Strengthened knowledge production and circulation</i> 	

3.3 How would you explain the programme's successes and missed opportunities? What has worked well? What hasn't? What have been key factors supporting or hindering the achievement of results?

Prompt: This can refer to overall approach, programming strategies, stakeholders involved, types of activities, resources, selection of target population, management, context etc.

4. EFFICIENCY

4.1 To what extent were the available resources adequate to achieve the expected results?

Prompt: Resources can be financial, human and technical (e.g. existing tools and materials); they can come from both UNICEF and UNFPA.

4.2 To your knowledge, has the country office been able to leverage additional/complementary resources for its work on FGM/C beyond the joint programme ones?

4.3 In what ways, if any, could the joint programme have been more efficient (i.e. achieved similar results using fewer resources)?

Prompt: What are examples (if any) of particularly efficient use of resources by the joint programme in this country?

5. SUSTAINABILITY

5.1 To what extent are the achievements and changes that the joint programme has contributed to likely to last? How likely are they to be scaled up/expanded? What factors (positive or negative) are likely to support or hinder the sustainability of the programme's achievements?

Prompts:

- *To what extent and how has the programme strengthened national ownership, capacity and leadership (at national and decentralized levels) in this country?*
- *To what extent do the strategies used by the programme lend themselves to wider scalability and programme expansion, overall and in specific contexts?*
- *To what extent has the joint programme been integrated into other national initiatives aiming at addressing the issue of FGM-C?*

6. INTERAGENCY COORDINATION AND JOINT PROGRAMME MANAGEMENT

6.1 What have been the strengths and weaknesses of UNFPA and UNICEF coordination in the joint programme? What has worked well? What could be improved?

Prompt: Consider the following aspects: dividing roles and accountabilities; planning; decision making; implementation of activities; production, circulation and use of data; monitoring, reporting and evaluation; cost sharing/reduction of transaction costs.

6.2 In your country, what has been the added value of the joint structure of the programme?

Prompt: In terms of cost savings, synergies, enhanced capacities, reach and coverage.

6.3 In your opinion, what has been the added value of having a global programme supporting country programming on FGM/C?

6.4 What have been key strengths and weaknesses of the programme management and implementation at the global, regional and country levels? What has worked well? What could be improved?

Prompts (expand on relevant aspects depending on the interviewee's role) :

- *Programme leadership and direction at global and country level;*
- *Implementation mechanisms (financing instruments, administrative regulatory framework, staff, timing and procedures, reporting requirements and tools);*
- *Technical guidance and support from the global and regional level to the country office.*
- *M&E (For M&E staff only: To what extent and how have joint programme benchmarks*

and achievements been monitored?)

- 6.5 How/to what extent have cross cutting issues of gender equality, human rights, cultural sensitivity and equity been integrated in programme design, implementation, monitoring and evaluation? Can you please provide examples?

Prompt: Focus on relevant aspects depending on the role of the interviewee.

7. GOOD PRACTICES, LESSONS LEARNED, AND FUTURE DIRECTIONS

- 7.1 What, if any, types of innovative /good practices have been introduced by the Joint Programme for the abandonment of FGM/C in this country?

- 7.2 What have been the key lessons learned?

Prompt: In relation to the validity of the overall joint programme approach/TOC; its implementation; management and coordination

- 7.3 In what ways can or should the joint programme inform future UNFPA and UNICEF programming in relation to FGM/C in this country? Elsewhere/globally? In what ways can or should the Joint Programme inform future UNFPA and UNICEF programming in relation to other areas (e.g. other harmful practices)?

8. OTHER COMMENTS

- 8.1 Do you have any other comments or suggestions or concerns about the programme and/or the evaluation that you would like to share with us? Do you have any questions?

Thank you for your collaboration.

INTERVIEW PROTOCOL

UNFPA/UNICEF COUNTRY REPRESENTATIVES

Please note: this is an internal document for the interviewers' use. It is not to be distributed to the interviewees.

1. INTRODUCTION

Evaluation team members to introduce themselves, evaluation background & interview purpose.

- 1.1 Please describe how long you have been with UNFPA/UNICEF, and in what capacities. How long have you been the country representative for?
- 1.2 How familiar are you with the UNFPA/UNICEF joint programme on FGM/C?

2. RELEVANCE AND DESIGN

- 2.1 To what extent are the objectives of the joint programme aligned with the overall UNFPA/UNICEF (*select relevant agency*) country programme?

Prompt: Is FGM/C explicitly mentioned in your current country programme results framework? If so, under which area? Are there synergies and/or overlaps with other work that you conduct in this country? Is FGM/C an issue addressed by the UNDAF?

3. EFFECTIVENESS

- 3.1 From your point of view, what have been the joint programme's key achievements in this country?

Prompts: Use the following table to map types of achievements and capture examples. With this group of respondents, focus on medium term achievements

Possible types of achievements			Examples
Level	Medium term	Short term	
At the community level	Contributions to changes in the social norm towards the abandonment of FGM/C in the targeted communities	<ul style="list-style-type: none"> • Strengthened community education, dialogue, decision making • Increased number of public declarations • Increased engagement of leaders 	
Across-communities	Contributions to spreading changes in social norm across communities, within and across borders.	<ul style="list-style-type: none"> • Accelerated organized diffusion • Strengthened sub-regional dialogue and exchange 	
At the national level	Contributions to the creation of favourable national conditions for the abandonment of FGM/C including a legal framework against FGM/C; evidence based policies, plans and programmes; a national movement for the abandonment of FGM/C and a supportive public opinion.	<ul style="list-style-type: none"> • Legal and policy reform • Strengthened capacities (including coordination) • Effective media campaigns • Accurate data • Partnerships 	

4. INTERAGENCY COORDINATION AND JOINT PROGRAMME MANAGEMENT

NB Expand on coordination questions

- 4.1 What have been the strengths and weaknesses of the coordination between UNFPA and UNICEF in relation to the joint programme in this country? What has worked well? What could be improved?

Prompt: How does the joint programme compare with other examples of joint UN programming in this country?

5. GOOD PRACTICES, LESSONS LEARNED, AND FUTURE DIRECTIONS

- 5.1 What, if any, types of innovative /good practices have been introduced by the joint programme for the abandonment of FGM/C in this country?
- 5.2 In what ways can or should/could the joint programme inform future UNFPA and UNICEF programming in relation to FGM/C in this country? In what ways can or should the joint programme inform future UNFPA and UNICEF programming in relation to other areas (e.g. other harmful practices)?

6. OTHER COMMENTS

- 6.1 Do you have any other comments or suggestions or concerns about the programme and/or the evaluation that you would like to share with us? Do you have any questions?

Thank you for your collaboration.

INTERVIEW PROTOCOL

UNFPA/UNICEF JOINT PROGRAMME FOCAL POINTS

Please note: this is an internal document for the interviewers' use. It is not to be distributed to the interviewees.

1. INTRODUCTION

Evaluation team members to introduce themselves, evaluation background & interview purpose.

- 1.1 Please describe how long you have been with UNFPA/UNICEF, and in what capacities. How long have you been the Programme Focal Point for? What does this role entail?

2. RELEVANCE AND DESIGN

- 2.1 To what extent are the objectives of the joint programme aligned with UNFPA/UNICEF policies and strategies at the country level?
- 2.2 From your perspective, to what extent are the objectives of the joint programme aligned with government priorities? To country-level needs in relation to the abandonment of FGM/C?
- 2.3 In your opinion how relevant and responsive has the programme been to the needs of the targeted communities?

Prompt: To what extent and how have the joint programme approach and strategies been contextualized to meet national and community level needs and priorities? Can you please provide examples?

- 2.4 In your opinion what have been key strengths and weaknesses of the joint programme design, approach and strategies in this country?

3. EFFECTIVENESS

- 3.1 Since the Programme has started, what, if any, changes in social norms/attitudes towards FGM/C have occurred in this country? In specific communities? To what extent and how has the joint programme contributed to them?
- 3.2 From your point of view, what have been the joint programme key achievements in this country at the community level? At the national level? Have there been any achievements at the regional/global level to which this country office has directly contributed to?

Prompts: Use the following table to map types of achievements and capture examples.

Possible types of achievements			Examples
Level	Medium term	Short term	
At the community level	Contributions to changes in the social norm towards the abandonment of FGM/C in the targeted communities	<ul style="list-style-type: none"> • Strengthened community education, dialogue, decision making • Increased number of public declarations • Increased engagement of leaders 	
Across-communities	Contributions to spreading changes in social norm across communities, within and across borders.	<ul style="list-style-type: none"> • Accelerated organized diffusion • Strengthened sub-regional dialogue and exchange 	
At the national level	Contributions to the creation of favourable national conditions for the abandonment of FGM/C) including a legal framework against FGM/C; evidence based policies, plans and programmes; a national movement for the abandonment of FGM/C and a supportive public opinion.	<ul style="list-style-type: none"> • Legal and policy reform • Strengthened capacities (including coordination) • Effective media campaigns • Accurate data • Partnerships 	
At the regional level (and global if relevant)	Contributions to the creation of favourable regional (and global) conditions for the abandonment of FGM/, including adequate political commitment, resources and knowledge.	<ul style="list-style-type: none"> • Increase dialogue and awareness • Strengthened knowledge production and circulation 	

3.3 How would you explain the programme's successes and missed opportunities? What has worked well? What hasn't? What have been key factors supporting or hindering success?

Prompt: This can refer to overall approach, programming strategies, stakeholders involved, types of activities, resources, selection of target population, management, context, etc.

3.4 What types of programming strategies and activities has the joint programme used in this country? Which ones have been the most and least successful?

Prompt: Types of activities include: Support to community-led initiatives; Capacity strengthening (training, technical support, system building); Advocacy, policy dialogue, resource mobilization; Creating, coordinating, maintaining networks and partnerships; Data and knowledge generation, and circulation (including M&E); Communication, sensitization and awareness raising

4. EFFICIENCY

4.1 To what extent were the available resources adequate to achieve the expected results?

Prompt: Resources can be financial, human and technical (e.g. existing tools and materials); they can come from both UNICEF and UNFPA.

4.2 To what extent have you been able to leverage additional/complementary resources for your work on FGM/C beyond the Joint Programme ones?

4.3 In what ways, if any, could the joint programme have been more efficient (i.e. achieved similar results using fewer resources)?

Prompt (follow up question):

What are examples (if any) of particularly efficient use of resources by the joint programme in this country?

What kinds of data are you using to base your answer on? What kinds of data do you think you are missing to inform your responses to these questions?

5. SUSTAINABILITY

5.1 To what extent are the achievements and changes that the joint programme has contributed to likely to last? How likely are they to be scaled up/expanded? What factors (positive or negative) are likely to support or hinder the sustainability of the programme's achievements?

Prompts:

- To what extent and how has the programme strengthened national ownership, capacity and leadership (at national and decentralized levels) in this country?*
- To what extent do the strategies used by the programme lend themselves to wider scalability and programme expansion, overall and in specific contexts?*
- To what extent has the joint programme been integrated into other national initiatives aiming at addressing the issue of FGM-C?*

6. INTERAGENCY COORDINATION AND JOINT PROGRAMME MANAGEMENT

6.1 What have been the strengths and weaknesses of UNFPA and UNICEF coordination in the joint programme? What has worked well? What could be improved? In your opinion, what has been the added value of the joint structure of the programme?

Prompt: Consider the following aspects: dividing roles and accountabilities; planning; decision making; implementation of activities; production, circulation and use of data; monitoring, reporting and evaluation; cost sharing/reduction of transaction costs.

6.2 What have been key strengths and weaknesses of the programme management and implementation at the global, regional and country levels? What has worked well? What could be improved?

Prompts:

- Programme leadership and direction at global and country level;*
- Implementation mechanisms (financing instruments, administrative regulatory framework, staff, timing and procedures, reporting requirements and tools);*
- Technical guidance and support from the global and regional level to the country office.*
- M&E – who has been responsible for monitoring progress against results? For reporting?*

What types of data have been used to monitor progress? To what extent has monitoring and reporting been based on specific indicators? How useful has the programme logframe been to guide planning, monitoring and reporting? What have been key challenges in view of M&E?

- 6.3 To what extent and how have cross cutting issues of gender equality, human rights, cultural sensitivity and equity, and youth been integrated in programme design, implementation, monitoring and evaluation? Can you please provide examples?

7. GOOD PRACTICES, LESSONS LEARNED, AND FUTURE DIRECTIONS

- 7.1 What, if any, types of innovative /good practices have been introduced by the Joint Programme for the abandonment of FGM/C in this country?

- 7.2 What have been the key lessons learned?

Prompt: In relation to the validity of the overall joint programme approach/TOC; its implementation; management and coordination.

- 7.3 In what ways can or should the joint programme inform future UNFPA and UNICEF programming in relation to FGM/C in this country? Elsewhere/globally? In what ways can or should the joint programme inform future UNFPA and UNICEF programming in relation to other areas (e.g. other harmful practices)?

8. OTHER COMMENTS

- 8.1 Do you have any other comments or suggestions or concerns about the programme and/or the evaluation that you would like to share with us? Do you have any questions?

Thank you for your collaboration.

Annex 14. Interview Logbook

INTERVIEW DATA

Name(s) of the interviewee(s):	Position:	Institution/organisation:
Interview date:	Stakeholder type:	Output (if relevant):
Interviewer:		

INTERVIEW CONTENT

Background information:

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Specific Issues to be addressed by this interview:

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Summary of Contents

Relevance and Design:
Effectiveness:
Efficiency:

Sustainability:

Coordination/Management

Good practices/Lessons learned

Future directions

Emerging observations/conclusions

Follow-up / Next steps

Annex 15. Methods of Data Collection at Community Level

In contrast to quantitative survey techniques, ethnographic methods tend to produce qualitative data and more in depth insights. Standard ethnography utilizes techniques of participant observation to include direct experience of many types of social events and behaviours, interviews, and socially-occurring group discussions. To be able to gather ethnographic data in a short period of time, as will be required given the evaluation timeframe, suggests using techniques derived from **rapid ethnography**. This method allows several people to collect qualitative data and make brief direct observations of social behaviours and events. It relies on participatory methods such as informal group discussions (or formal focus groups if feasible) as well as interviews, as well as on naturally occurring conversations.

As part of this evaluation, we suggest that each selected community will be visited by a sub-set of the evaluation team, composed of at least one team leader (the international or national consultant) and one research assistant. All assistants will receive some training in the use of the methods, practice questions, and recording of notes.

As feasible the evaluation team will consult with: opinion leaders (religious leaders, ethnic group leaders, village council members, etc.); people knowledgeable about trends in the community (teachers tend to be very good observers of what's going on in the community); government workers familiar with the communities (e.g. administrators, health service providers); traditional birth attendants/midwives; and ordinary community members of categories relevant to the evaluation (school-age children of both sexes (if feasible), unmarried young men and young women, married men, married women, parents, elders). How many and which groups and representatives thereof will be available in each case is likely to vary. Overall, the evaluation team will seek the advice of the respective UNFPA/UNICEF joint programme focal points in each country for guidance on which community members to consult with.

As feasible, data will be collected using the following methods:

- 1) open-ended interviews with men and women leaders and other individuals (e.g. young girls, parents);
- 2) participant observation consisting of home visits and/or informal conversations when possible;
- 3) group discussions with relevant groups;
- 4) visits to specific places or events (school classes, clinic session, religious observance or site, etc.);

Limitations and mitigating strategy

Rapid methods have specific limitations. They must often rely on descriptions of practices rather than direct observations. This introduces some distortion and the possibility that people may not give complete or accurate accounts of what they actually do. Also, because there is less time to establish rapport and cooperative relationships of trust, it is sometimes difficult to judge individuals' honesty or probe into delicate topics. Further, in a short time frame events will be missed and important groups or individuals may be away or unavailable.

To overcome these limitations, the research team must rely on the facilitated introduction to key individuals in the communities by people who have already been working in the community in question, preferably people who are not perceived as having a vested interest in a particular type of answer to any question.

The purpose of the visits to targeted communities is to investigate the appropriateness and effectiveness of the efforts supported by the joint programme to change the social norms that impact the continued practice of FGM/C. As related changes are embedded in larger issues affecting the lives of women and girls, data collection will include issues related to the social situation of women and girls in their families and larger communities.

Entry points for data gathering will be broad questions about “the life of women and girls and how it is changing”, which can then be used to address issues around FGM specifically.

Notes will be recorded promptly and discussed with the team leader.

Photographs are valuable for recording observations and can be used for communication of visual data, and the evaluation team may make use of this medium. However, if taking pictures is disruptive to the activities or felt to be inappropriate, it will be avoided.

All interviews and discussions will be conducted in a language appropriate to the individuals involved, though notes will have to be recorded or translated into English/French (depending on the country). If necessary, members of the respective group who are comfortable in English/French will be asked to translate into/from local languages. When feasible, tape recordings can be made to check for accuracy of quotes, but a full transcription of all interviews and discussions is not feasible in the context of the available time and resources for this evaluation.

Annex 16. Guide for individual and group interviews at the community level

NB: At the community level, information will be collected in very diverse contexts, from diverse types of stakeholders, through varying degrees of formal/informal conversations, and in various languages. Interview and focus group questions therefore need to be, on the one hand, sufficiently broad to allow for adapting them to the respective contexts, while, on the other hand, being sufficiently specific to ensure consistency and coherence of data collected in different communities and different countries. For this reason, rather than developing specific interview and group discussion guides for each group of respondents, we present here a list of broad topics and questions that will be adapted to the circumstances of each interview/ group conversation.

Background information to collect about each community

The following list outlines a number of topics on which researchers should collect background information prior to visiting the communities in order to provide proper context to interviews/focus groups/conversations.

- Name of community, location, brief history, main features of the community, etc.
- Natural and social environment
- Estimates of population and demographic patterns (e.g. ethnicities, occupations, etc.)
- What services are available? (e.g. schools, health and social services, water sources, sanitation, electricity, market, roads, transport)
- Community organization: Leadership? Councils? Special programs or projects, etc. Media access—e.g. is there radio reception? Do some/most community members have access to televisions? Who watches and/or listens?
- Relevant DHS/MICS indicators
- What organizations have worked in this community on the issue of FGM/C?
- How has the joint programme operated in this community? Who were the key implementing partner/s? What were the main initiatives/activities carried out? Over what period of time?

Topics and questions for interviews and group discussions at the community level

Introductory remarks

Each interview/ conversation should begin with a brief and understandable explanation of the evaluation purpose, a request for the participants' collaboration; an assurance that their participation is voluntary and that they can decline to answer any question or discontinue at any time, and that we will not use their names in our report.

Background information on participants

As far as possible, the following information should be recorded for all participants.

Sex: ___M ___F Ages: ____ (or approximate ages)
Religion: Christian___ Muslim___ Traditional ___ Other___
Occupations or other significant role? _____

Questions on the situation of girls

These questions will be adapted for the following groups: community leaders, health providers, teachers, religious leaders, married and unmarried men, mothers, older women. Questions will be changed if used with girls and boys.

- In general, how do you think girls today are doing in your community, in comparison with (a generation ago /their mother’s generation/when you were a girl? What things are better for them? Is anything worse?

Prompts: Allow the person to give his or her own ideas first, then ask about any of the issues below. Change the focus of the question depending on the type of interviewee. E.g. focus on health issues for health workers and on education for teacher.

– *Have there been any changes in any of the following broad areas*

- *Important events in a woman’s life*
- *Marriage (age; who makes the decision; how is it celebrated; what makes a girl “marriageable”; what makes a boy “marriageable”, cost)*
- *School/education (How many girls go to school? Perceived importance and purpose of girls’ education. Do most of them finish basic education? Why or why not?)*
- *Work responsibilities*
- *Health*
- *Perspectives and aspirations for the future*
- *Role/Participation in family and community*

– *When did these changes occur (a long time ago, in the last few years)? What is causing the changes?*

- What are the key problems that girls are facing in your community today? And women?
- Overall, what do you think are the most pressing issues/needs in your community?

Questions on FGM/C

These questions can be adapted for the following groups: community leaders, health providers, teachers, religious leaders, married and unmarried men, mothers, older women. They need to be further adapted if used with girls and boys.

- Have there been any changes concerning FGM/C in this community over the last 5 years?

Prompt: Changes may refer to:

- *Perceived prevalence in the community- (please indicate if you agree/don’t know/do not agree: : Five years ago most families in the community cut their daughters. Today, most families in the community cut their daughters.)*

- *Age*
- *Type*
- *Who makes the decision*
- *Who performs it*
- *Where*
- *How (public, private, secret) and when*
- *Reasons why girls are cut/why parents want their daughters cut*
- *Reasons why girls are not cut (if any)/why parents would prefer not to have their daughters cut*
- *Consequences (both positive and negative) of cutting for the girls and her family (including health, status, marriageability etc)*
- *Consequences of not cutting for girls and their families and communities (Are there any girls who are not cut? Why not? What are some problems they might face?)*
- *Please indicate which of the following statements you agree with:
Five years ago, all/most/some/few/no girls who were not cut and their families would experience negative sanctions from other community members.
Today, all/most/some/few/no girls who are not cut and their families experience negative sanctions from other community members*

To whom do you think the practice is the most important in your community? Has this changed over the years?

- What is causing these changes?
- What do the government and key institutions (including schools, clinics, local government representatives) say/do in relation to FGM/C? Have you heard of any laws against FGM/C? How does this affect your community/family?

Questions about the joint programme/specific initiatives supported by the joint programme

NB These questions can be adapted for all groups

We know that the organization xx/initiative xx (*insert here the name of the organization and or initiative supported by the joint programme*) has worked in this community.

- What do you know about their work? (*Prompts: what were they doing? why?*)
- What do you think about it? (*Prompts: Was it useful/appropriate in your community? what did you like, what you didn't like?*)
- Have you been involved in any of their activities? If so, Please tell us about your experience. (*Prompts: what did you do, what did you like, didn't like*)
- Has anything changed following these activities? What? Can you give us some examples? (*Prompts: changes can refer to knowledge, attitudes, behaviours/practices. Ask about individual, family and community levels*)
- Do you think that the changes their work has contributed to (if any) will last? Accelerate? Slow down? Disappear in the future? Why?

Concluding remarks

- Would you like to add anything?
- Would you like to ask us any questions?

Thank you very much for your help.

Suggestions for opening conversations with, for example, girls or (former) circumcisers

During the pilot country site visit to Kenya, the evaluation team had the opportunity to have small group discussions with girls who had undergone Alternative Rite of Passage (ARP) ceremonies, as well as individual interviews with former circumcisers. For both groups, the following introductory questions were perceived to be helpful to enter the conversation and establish a non-threatening environment. While the specific issue of ARPs may not apply in each context, the following questions can provide some ideas for how to enter and structure similar conversations.

Girls: How old are you? Are you still in school? If yes, which grade? Which subjects do you like best? What would you like to do when you have finished school. If not in school anymore, what are you doing now? Do you have brothers and sisters? How many? What do your parents do? We heard that you recently took part in the ARP ceremony – can you tell us a bit more about that? For example: how did you learn about the ARP? What made you take part in it? What did your parents/siblings/friends think about you attending the ARP? What did you like about the experience? Was there anything that you did not like?

Former circumcisers: How old are you? Have you lived in this community all your life? Do you have children? How many? Do they live in this community? We were told that you have played an important role in the community – can you tell us a bit about since when/for how long you have performed circumcisions? How did you learn to perform circumcisions? Has the way how you performed them changed over time? Have there been any changes in the role that circumcision of girls plays in the community? If so, which? etc.

Annex 17. Survey Questionnaire

Joint Evaluation of the UNFPA-UNICEF Joint Programme on FGM/C: Accelerating Change Revised Draft Survey Questionnaire

Introduction

The evaluation of the UNFPA-UNICEF Joint Programme on FGM/C conducted jointly by the Evaluation Branch (DOS) at UNFPA and the Evaluation Office at UNICEF is currently in progress and will be finalized in June 2013.

The purpose of the evaluation is to assess the extent to which and under what circumstances (country context) the UNFPA-UNICEF joint programme has accelerated the abandonment of FGM/C in programme countries over the last four years (2008-2012).

Universal Management Group, a Canadian consulting firm, has been engaged to undertake the evaluation of the UNFPA-UNICEF Joint Programme on FGM/C.

The evaluation includes country case studies in four countries (Kenya, Senegal, Sudan, Burkina Faso) and an overview of the work conducted in the other 11 joint programme countries. The purpose of the overview is to identify common trends and differences across programming countries in relation to the joint programme relevance, effectiveness, efficiency, sustainability and coordination/management. This survey is meant to provide key information for this overview, based on the country offices' self assessment. It will be followed by virtual focus groups (via telephone or Skype) with the joint programme teams and their key partners in each of the 11 countries to elicit more in depths information on selected issues.

We would be grateful if you could complete and submit the questionnaire online by **xxx**. In each country we would like to obtain one response from UNICEF and a separate response from UNFPA. Therefore please complete the questionnaire from the perspective of your agency only. We would suggest that the joint programme focal point in each office complete the survey, either alone or with the help of other colleagues who have been involved in the joint programme.

Your answers are confidential. Please be assured that the information that you provide in this questionnaire will only be used by the evaluation team and reported in aggregated form, and will not be identifiable to your country office.

You can contact **Silvia Grandi** at sgrandi@universalia.com should you need any clarification regarding this survey. Detailed information and terms of reference for the evaluation can be found at the evaluation web page: <http://www.unfpa.org/public/home/about/Evaluation/EBIER/TE/pid/10103>

Thank you very much for your cooperation!

General Information

1. Agency :

- UNFPA
- UNICEF

2. Country office:

- Djibouti
- Egypt
- Eritrea
- Ethiopia
- Gambia
- Guinea
- Guinea-Bissau
- Mali
- Mauritania
- Somalia
- Uganda

3. How many people in your country office are regularly involved in implementing and/or managing the UNFPA-UNICEF joint programme? _____

4. How many staff work full-time on the joint programme? _____

5. This questionnaire was completed by:

- Joint programme focal point
- Joint programme focal point and other staff
- Other staff

Comments

The joint programme approach

6. The design of the joint programme was based on a number of **programming principles**. Based on your experience, to what extent have these principles informed the joint programme in your country? In the table below please rate to what extent you agree with the provided statements, from 1= strongly disagree to 4= strongly agree.

The approach of the joint programme in this country has been:	1	2	3	4	Don't Know	Comments
Strategic and catalytic: the main aim of the joint programme is to support and accelerate the efforts already being undertaken at country and regional levels through existing programmes, and not to be a stand-alone initiative.						
Holistic: the joint programme supports interventions at different levels (community, national, regional and global) and focuses on the different interconnected aspects of the processes that are assumed to lead to the abandonment of FGM/C. In order to do so, the joint programme builds partnerships with multiple stakeholders.						
Human-rights based and culturally-sensitive: The joint programme is based on the understanding that FGM/C is a violation of the human rights of women and girls and therefore the joint programme pursues its abandonment. However, the joint programme also recognizes that since FGM/C has a strong cultural value in many contexts, it is important to frame the dialogue with communities with a view to preserve positive cultural values, while eliminating harmful practices.						
Based on a theoretical understanding of FGM/C as a social convention/norm: The joint programme approach is based on the recognition of the collective nature of the practice of FGM/C and explains why it is essential to focus on collective, rather than individual, social change to successfully achieve abandonment that is sustainable						
Sub-regional (based on country-segmentation): To accelerate the abandonment of FGM/C, the joint programme aims to extend across countries and address sub-regional groups with common characteristics.						

Joint programme implementation and achievements

7. **Contribution to medium term results:** to what extent has the work of the joint programme in your country contributed to the following changes? Please rate on a scale from 1= no contribution to 4 = significant contribution and provide relevant examples if possible.

To what extent has the work of the joint programme in your country contributed to:	1	2	3	4	N/A	Please provide examples of specific contributions if/as possible.
Changes in social norms towards the abandonment of FGM/C in the targeted communities						
Spreading changes in social norms across communities, within and across national borders						
Creating favourable <u>national</u> conditions for the abandonment of FGM/C e.g. legal frameworks; evidence based policies, plans and programmes; a national movement for the abandonment of FGM/C; or a supportive public opinion.						

To what extent has the work of the joint programme in your country contributed to:	1	2	3	4	N/A	Please provide examples of specific contributions if/as possible.
Creating favourable <u>regional</u> conditions for the abandonment of FGM/, including political commitment, resources and knowledge-sharing.						
Creating favourable <u>global</u> conditions for the abandonment of FGM/, including political commitment, resources and knowledge.						

Comments

8. Achievement of short term results: in your country, what progress has been made by the joint programme towards achieving its expected short term results (*outputs*)? Please rate on a scale from 1= no progress to 4= significant progress and provide relevant examples if possible.

Outputs (from revised logframe)	1	2	3	4	N/A	Please provide examples of specific achievements if/as possible
1. Effective enactment, enforcement and use of national policy and legal instruments to promote the abandonment of FGM/C.						
2. Local level commitment to FGM/C abandonment.						
3. Media campaigns and other forms of communication dissemination are organized and implemented to support and publicize FGM/C abandonment.						
4. Use of new and existing data for implementation of evidence-based programming and policies, and for evaluation.						
5. FGM/C abandonment integrated and expanded into reproductive health policies, planning and programming.						
6. Partnerships with religious groups and other organizations and institutions are consolidated and new partnerships are identified and fostered.						
7. Tracking of programme benchmarks and achievements to maximize accountability of programme partners.						
8. Strengthened regional dynamics for the abandonment of FGM/C.						

Comments

9. On a scale from 1= not at all to 4=extremely, please rate how successful (i.e. appropriate and effective) the following **programming strategies** have been for implementing the joint programme in your country. Please select N/A if the joint programme has not used the respective strategy in this country.

Programming strategies	1	2	3	4	N/A	Examples and comments
Creating, coordinating, maintaining networks and partnerships						
Advocacy, policy dialogue						
Resource mobilization						
Capacity strengthening (training, technical support, system building);						
Communication, public sensitization and awareness raising						
Support for community education, dialogue and community-led initiatives						
Data and knowledge generation and circulation						
Others (please specify)						

10. Has the joint programme introduced or supported any **innovative programming strategies/approaches** in this country? Yes No

If yes, please explain which ones:

11. What **factors** have supported or hindered the achievement of the joint programme results in this country? On a scale from 1 = very hindering to 4= very supportive please rate how each of the following factors has influenced the performance of the joint programme. Please select N/A if a certain factor has not influenced the joint programme in your country.

Factors	1	2	3	4	N/A	Comments
Legal and policy framework						
Political context (including political commitment)						
Economic context						
Socio-cultural context						
Resource availability and predictability						
Integration of the joint programme into UNICEF and UNFPA respective country programmes						
Staff capacities and availability						
Implementing partners capacities and resources						
Other development partners' work on FGM/C						
Others (please specify)						

Joint programme management and coordination

12. What have been key strengths and weaknesses of the **programme management** at the global, regional and country levels? Based on your experience, please rate the following dimensions of the joint programme management. 1= very weak 4=very strong.

Dimensions	1	2	3	4	Don't know/ N/A	Comments
Strategic leadership and direction for the joint programme's work in your country						
Technical guidance and support from the global level (UNICEF and UNFPA HQ) to the country office						
Technical guidance and support from the regional level (UNICEF and UNFPA regional and sub-regional offices) to the country office						
Planning process (AWP/budget process)						
Timeliness of funding						
Adequacy of funding						
Reporting requirements and tools						
Monitoring and Evaluation (requirements, systems, tools, support)						
Internal capacity development for staff working on the joint programme (training, feedback)						
Internal communication and information exchange (ad-hoc and systematic), including across countries						

Dimensions	1	2	3	4	Don't know/ N/A	Comments
Technical guidance and support to the joint programme implementing partners						
Communication and information exchange with programme stakeholders/partners (email, events)						
Other (please specify)						

13. What have been the strengths and weaknesses of the **UNFPA and UNICEF coordination** under the joint programme in your country? Based on your experience, please rate the following dimensions of the interagency coordination in relation to the joint programme in your country on a scale from 1= very weak to 4=very strong.

Dimensions	1	2	3	4	Don't know/ N/A	Comments
Clear division of roles and accountability lines between the two agencies						
Planning processes						
Decision making processes						
Implementation of activities (please indicate any specific issue about how activities are implemented i.e geographical distribution)						
Interagency communication						
Production, circulation and use of data						
Monitoring, reporting and evaluation;						
Cost sharing/reduction of transaction costs						
Other (please specify)						

14. In your opinion, what has been the **added value** of the joint nature of the programme, compared to single-agency programming? For each of the following dimensions, please provide your assessment on a scale from 1=none to 4=very significant.

What has been the added value of the joint nature of the programme in terms of:	1	2	3	4	Don't know	Comments
Cost savings						
Synergies						
Technical capacities and areas of expertise						

What has been the added value of the joint nature of the programme in terms of:	1	2	3	4	Don't know	Comments
Geographical reach and coverage						
Status/visibility of the joint programme activities and results						
Other (specify)						

Other comments

15. Please share any further comments or information that you consider to be relevant for the evaluation.

16. If you like, please indicate any problems you have experienced answering the questionnaire in terms of the questions that have been asked.

Thank you!

Annex 18. Outline of the Country Case Study Reports

1. Introduction

- 1.1 Purpose of the evaluation
- 1.2 Purpose of the country case study
- 1.3 Scope of the country case study
- 1.4 Reasons for selecting this country as a case study country
- 1.5 Purpose and Structure of the Inception Report

2. Methodology of the country case study

- 2.1 Case study design
- 2.2 Case study questions
- 2.3 Methods of data collection and analysis at the national and community levels
- 2.4 Limits and mitigation strategies

3. The context of FGM/C in country XX (name of the country)

- 3.1. The practice of FGM/C in country xx (Prevalence, distribution, common characteristics of the practice, common causes and consequences).
- 3.2 Legal and policy framework for the abandonment of FGM/C
- 3.3 Key actors involved
- 3.4 Key challenges and opportunities for the abandonment of FGM/C.

4. The UNFPA/UNICEF Joint Programme in country XX (name of the country)

- 4.1 Short description of FGM/C programme interventions in the country (including duration, overall approach, specific interventions, key stakeholders, and geographic areas)
- 4.2 Financial overview

5. Findings by evaluation question

6. Conclusions and recommendations

- 6.1 Conclusions and recommendations at the country level.
- 6.2 Emerging elements of conclusions and recommendation at the overarching programme level.

7. Annexes

(including: list of people interviewed; list of documents consulted; revised stakeholder mapping; list of the interventions specifically considered; country visit agenda; all questionnaires and instruments used; acronyms and abbreviations).