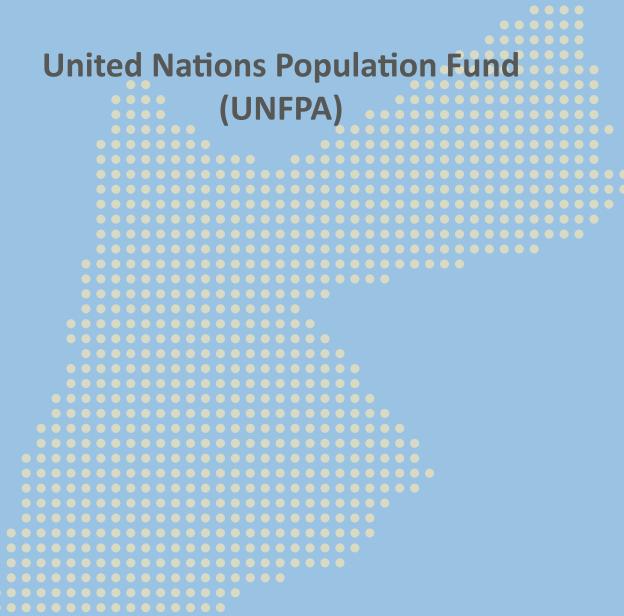




EVALUATION

OF JORDAN COUNTRY PROGRAM (2018-2022)



THE PURPOSE AND SCOPE OF THE EVALUATION

The purpose of this Country Programme Evaluation (CPE) was to demonstrate accountability to stakeholders on the performance in achieving development results and on invested resources; support evidence-based decisionmaking for the design of the next UNFPA programme cycle; and contribute key lessons learned to the knowledge base of the organization. The target audience is the UNFPA CO in Jordan (JCO), national stakeholders (relevant government agencies, national partners), the UNFPA Arab States Regional Office (ASRO). UNFPA Headquarters and the Executive Board, development partners including the donors and UN agencies in the country. The objectives were to (i) provide an independent assessment of UNFPA support and progress towards the expected outputs and outcomes set forth in the results framework of the 9th CP, (ii) assess the role played by the UNFPA JCO in the coordination of the UNCT towards collective contribution to national development results, and (iii) draw lessons from past and current cooperation and provide recommendations for the next programme cycle. The scope of the CPE covered the UNFPA's implemented interventions under the 9th CP within the period between 2018 and 2022, inclusive of those in camps and facilities of host communities. Thematically, the evaluation covered the

areas of sexual and reproductive health, gender equality and the empowerment of women and girls and population and development. In addition, the evaluation covered crosscutting issues such as youth empowerment, human rights, disability, coordination, M&E, innovation and partnerships.

APPROACH AND METHODOLOGY

The evaluation assessed the CP using four OECD/DAC criteria (relevance, effectiveness, efficiency and sustainability) and three UNFPA criteria (coordination, coverage and connectedness). The CPE adopted a participatory and mixedmethod approach, qualitative and quantitative data sourced from document reviews and status reports including CO monitoring framework and SIS My Results. The qualitative data was collected through document review, key informant interviews (KIIs) and focus group discussions (FGDs) Data collection was based on a set of 10 evaluation questions corresponding to the criteria, 70 people were interviewed in total. The evaluation was conducted in accordance with the UNFPA Evaluation Policy, UN Evaluation Ethical Guidelines, UNEG Evaluation Code of Conduct and UN Evaluation Norms and Standards.

CONCLUSIONS

Conclusion 1: The UNFPA Jordan 9th CP was well aligned to national priorities and strategies, UNSDF, ICPD and SDGs, with well-articulated coordination mechanisms and a focus on gender and human-rights approaches and leaving no one behind.

Conclusion 2: The Intervention logic and the results framework of the CP was robust and clear, feeding into the UNFPA strategic plan 2018-2021. These CP results were overachieved confirming a realistic Theory of Change. However, the evaluation finds that a stand-alone pillar on Young People would reflect a more logical chain of inputs and outputs to achieve the results.

Conclusion 3: Achievement and over-achievement of results in the 9th CP was bolstered by strong programme personnel in place. However, the size of the workforce compared to the size and nature of the programme was not adequate.

Conclusion 4: Financial allocations made for implementing partners were modest, especially on the investments made by their capacity strengthening programmatically and technologically.

Conclusions 5: Monitoring plans were developed in a participatory manner by UNFPA with the IPs, who were responsible for capturing data and reporting. Attempts to develop digital monitoring tools were modest against the magnitude of the UNFPA CP.

Conclusion 6: Providing humanitarian assistance to refugees is a national priority, expecting the refugee crisis to last for at least the next three years. This would have a toll on Jordan's already strained economy and infrastructure, aggravated by the COVID-19 crisis and the Ukrainian war.

Conclusion 7: UNFPA was an active agency on the UNCT level and sub-working groups in Jordan, providing strategic leadership for integrated programming and policy advocacy on all three outcome areas of SRHR, GBV and PD, with a focus on gender.

Conclusion 8: The CP tapped on the opportunity to utilize technology and digital solutions, catalysed by the COVID-19 measures, and supported the development of electronic data and case management systems at the national level.

Conclusion 9: UNFPA was well recognized by national stakeholders, implementing partners and beneficiaries to have been able to respond effectively and rapidly to the repercussions of the COVID-19 pandemic. New remote and online activities were introduced, while supporting implementing partners to adapt to these modalities.

Conclusion 10: The evaluation accounted for the overachievement of the CP's six interlinked outputs with several unintended results and adjustments to adapt to the COVID-19 pandemic. Out of a total of 17 output indicators, seven of them were overachieved, nine were achieved and one was partially achieved. This corroborates the modest development of the expected results and indicator targets during the design phase of the CP, hence the allocated inputs and resources.

Conclusion 11: The evaluation owes overachievement to several factors, including that UNFPA and IPs excelled in performing despite the COVID-19 outbreak, established strategic partnerships, as well as well-operating service facilities and clinics.

Conclusion 12: UNFPA continued to be well positioned as a strategic partner to the Government of Jordan on GBV. Despite the achievements by the CP on GBV, there still is a lot to be done in this area to address the root causes behind inequalities and GBV in Jordan.

Conclusion 13: Prospects for sustainability of the UNFPA's work was built around the engagement of national partners and stakeholders, building national capacities and influencing policies. Yet, sustainability of work on GBV is doubtful because it is still seen as an add-on linked to projects and funding.

Conclusion 14: Focus of UNFPA's interventions was on women, adolescents and girls, as well as refugees and vulnerable Jordanians, and to an extent, people with disabilities and elderly women. However, beneficiary support had not been sufficient to address all the special and increasing needs of 'those furthest behind', such as the elderly, refugees of other nationalities, LGBTQ communities, and migrant workers.



RECOMMENDATIONS

Recommendation 1: In future programming, consider having a stand-alone logical chain on Young People connecting inputs and outputs to the outcome and with clearly defined indicators in the results framework and theory of change.

Recommendation 2: Ensure an adequate allocation of human and financial resources that would guarantee an efficient allocation and utilization of funds, and a careful review of organizational structure.

Recommendation 3: Invest in designing robust M&E tools and systems that would allow for accurate and unified data collection across different outputs and by UNFPA team and consistently by the network of implementing partners.

Recommendation 4: Increase the humanitarian funding allocations, in anticipation that the refugee crisis will last for at least the next three years and in light of the already strained economy and infrastructure in Jordan.

Recommendation 5: UNFPA should continue to align the Country Programme to national and international goals and objectives with greater emphasis on the needs of the communities furthest behind.

Recommendation 6: Strengthen the UNFPA's achievements on digitalization and remote implementation modalities to fill the gap in data availability and support evidence-based information.

Recommendation 7: Ensure realistic setting of targets and outputs during the design of the next programming cycle.

Recommendation 8: Careful consideration to inclusion of community groups who are furthest behind to ensure their unique needs are understood and addressed.

Recommendation 9: Emphasis on addressing the root causes of GBV with effective and carefully designed elements, including partnerships, resources, capacity strengthening, SBCC and advocacy.



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