



# **Final Evaluation Report**

# Prevention of COVID-19 Infections Among Women and Girls Displaced into IDP and Refugee Camps under LEAP II in Uganda (March 2022 - February 2023)



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	IDP and refugee camps in ESAR			
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UN Women Strategic Areas:	UN Women -SP 0.4.d: Number of women accessing information, good			
	resources and/or services through UNW supported platforms and			
	programs in humanitarian and development settings			

# List of Acronyms

CRRF	Comprehensive Refugee Response Framework
DHOs	District Health Officers
DRC	Democratic Republic of Congo
EFA	English For Adults
FGDs	Focus Group Discussions
ICT	Information and Communications Technology
IDPs	Internally Displaced Persons
IEC	Information, Education and Communication
LEAP	Leadership, Access, Empowerment and Protection
LGDPs	Local Government Development Plans
NPA	National Planning Authority
O-Level	Ordinary Level of Education
OPM	Office of the Prime Minister
PPE	Personnel Protective Equipment
PWDs	Persons with Disabilities
RDCs	Resident District Commissioners
RLP	Refugee Law Project
RWCs	Refugee Welfare Committees
SOPs	Standard Operating Procedures
ТРО	Transcultural and Psychosocial Organization
UN Women	United Nations Entity for Gender Equality and the Empowerment of Women
UNDP	United Nations Development Program
UNHCR	United Nations High Commission for Refugees
VHTs	Village Health Teams
VSLA	Village Savings and Loans Associations
WHO	World Health Organization
WRO	Women Rights Organizations

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#### **Executive Summary**

This report presents the main findings, lessons learned, conclusions and recommendations of the final evaluation of the one -year project "Prevention of COVID-19 infections among women and girls displaced into IDP and refugee camps in ESAR" which was implemented by UN Women in Uganda and Somalia. This report covers interventions that were implemented in Uganda.

#### **Project Background**

In April 2021, Uganda experienced an increase in protection and socio-economic vulnerabilities in the refugee settlements, due to the COVID-19 pandemic. The country battled the second wave of viral infections, at a time when the lockdown measures were severe amidst a decline in funding for humanitarian assistance. COVID-19 restrictions affected business activity and led to closure of places of employment nationally including in refugee camps. The disruption of the way of life lead to increase in income-poverty, reduction in food-security and a general slump in economic activity. Workers were laid off as a consequence of a slump in private incomes earned from wages and profits. The more the communities were confined in the households so were the incidences of rights abuses witnessed in rise in cases of domestic gender-based violence including sexual exploitation of women and girls. The pandemic disproportionately affected women and girls more than men and widened the already existing gender disparities.

#### **Project description**

In March 2022, UN Women received funding from the Government of Japan to implement a one-year Leadership, Access, Empowerment and Protection (LEAP) project that aimed at strengthening the protection, leadership and empowerment of over 6,360 vulnerable women, men and youth affected by COVID-19 and forcibly displaced into Internally Displaced People (IDP) and refugee camps in Uganda.

The strategic purpose was to prevent COVID-19 infections among women and girls displaced into IDP and refugee camps in ESAR while strengthening the protection, leadership, and empowerment of vulnerable women, men, and youth affected by COVID-19 and forcibly displaced into IDP and refugee camps and their host communities.

#### **Evaluation Purpose**

The LEAP Japan project in Uganda came to an end in March 2023. In line with the program requirements and the UN Women evaluation policy, an end of Programme evaluation was conducted to assess the performance of the Programme, provide accountability and enhance learning. The purpose of this independent end-term evaluation was to assess the project's achievements against the set objectives, identify and document lessons learnt (including design issues, lessons and best practices that can be upscaled or replicated), and assess how the program contributed to gender equality and economic empowerment of refugee women.

#### **Evaluation Methodology**

The evaluation was conducted in accordance with UN Women evaluation policy, the Global Evaluation Reports Assessment and Analysis System (GERAAS evaluation report quality checklist), and adopted gender responsive methodology. The evaluation adopted a mixed-methods approach where a combination of qualitative and quantitative methods was used to ensure that there is a descriptive analysis of data – an explanation of the story behind the figures. The evaluation was informed by both qualitative and quantitative data obtain from desk review, survey, consultative meetings and focus group discussions. A total of 455 beneficiaries in refugee camps and host communities were surveyed and 15 key informant interviews held with UN Women staff, district leaders and representatives of implementing partners. There were in addition 18 (12 female and 6 male) participants in two Focus Group Discussions held in Kyegegwa and Adjumani.

#### **Evaluation Findings**

#### Relevance

96% of the respondents affirmed that the project was relevant and addressed their needs. The project design and the choice of interventions was appropriate to address the identified needs of women and girls in refugee settlements and their host communities and complemented Local Government Development Plans in the targeted location.

#### Coherence

UN Women leveraged its mandate to advance the rights of women and girls – through dedicated women leadership training, supporting local women rights organizations, use of women champions in amplifying COVID-19 messages and rising up against gender-based violence – in ways that other UN agencies could not deliver. The program adopted a holistic model that put consortium partners into a well-coordinated focus each with specific roles but roles that were complementary.

#### Effectiveness

The project was effective and achieved the planned outputs within the project period even though it experienced a delayed start. All activities were fully implemented by end of March 2023 in accordance with the project end date. However, Project implementation commenced at a time when the COVID-19 second wave was coming to an end. More so, at the time when funds were availed to implementing partners, COVID-19 had significantly reduced in the same way as the demand for PCR tests whose demand had been envisaged to be high. 79.1 percent of respondents noted that the program promoted positive gender norms; 93.4 indicated that the project enhanced access to COVID-19 awareness and sensitization measures; 90.3 percent accesses affective safety and protection services. Only 35.4 percent mentioned that the project resulted into increased access to ICT skills and services.

Furthermore, there was collaboration networking and information sharing among implementing partners which ensured that duplication of resources and capacities was avoided. Most implementing partners had a previous working partnership with UN agencies including UN Women and had the requisite capacity to

implement a program of this nature and in an emergency response context. UN Women was praised by local partners for working through competent and locally based implementing partners.

# Efficiency

Overall, the program delivered value for money as all the targeted program activities were successfully implemented—and the targets were achieved. The funds were allocated to the planned activities and executed in line with the approved work plans. UN Women conducted timely coordination meetings with OPM and held monitoring activities with Implementing partners. In as much as time was limited, the rigor in the reporting systems (using templates that were provided) contributed greatly to program's efficiency. Collaborations with other UN agencies also enhanced efficiency. For instance, UNHCR put in place a toll-free line where callers would report potential cases of COVID-19 and incidences of crime within the settlement and the host communities.

It is important to note that there was a delay in disbursement of funds to implementing partners. By the time funds were availed, cases of COVID-19 had significantly reduced which impacted on the need for PCR tests. However, due to other emerging epidemics like Ebola, the district local governments purchased and distributed assorted medical items that enabled health workers to safely offer services to the communities.

#### Sustainability

Implementing partners worked hand-in-hand with the district departments which enhanced opportunities for integration and sustainability of project interventions, although this could have been well elaborated in a clearly spelt out exit strategy for the program. The program implementation was district led—and this enthused a sense of accountability by all the implementing partners. Implementing partners worked hand-in-hand with the district departments specifically the Office of the RDC and District Health Teams who will remain responsible to vaccination and provision of PPEs even after the program has come to an end. However, this could have been well elaborated in a clearly spelt out and implemented exit strategy.

#### **Gender and Equity**

Gender and human rights considerations were integrated into the Programme design and in implementation. The project emphasised promotion of gender equality and equity through various training sessions that implementing partners conducted for beneficiaries. As this capacity was built so was the exhibition of women and girls' involvement of in leadership roles. Women leaders were also instrumental in increasing awareness and demand of Covid-19 vaccination and its uptake among fellow women and girls (who had been more hesitant than their male counterparts). As result of the leadership training, some women who received this training went on to become champions for change within their communities. They mobilized refugees to embrace the vaccination campaign and report cases of genderbased violence.

Disability Inclusion was adhered to. Implementing partners had criteria for ensuring that beneficiaries were selected in ways that allow equal participation of everyone including persons with disabilities. For example, Transcultural Psychosocial Organization (TPO) had forms that would obtain feedback on all

beneficiaries indicating various forms of disability. In the conduct of interviews, the evaluation purposed to obtain views from Persons with Disabilities.

### Conclusions

Overall, the project was designed as an emergency response to address the challenges occasioned by the COVID-19 pandemic. It was therefore appropriate to the needs of women and girls in the refugee settlement and host communities. The design was also aligned to the national COVID-19 response and included district and community leadership among the stakeholders. The program design considered lessons learned from previous LEAP projects leveraged on the competence of locally based Implementing partners who had the expertise in implementing in humanitarian settings. Despite the delayed start, the project leveraged on the experience of the implementing partners and strong coordination and managed to achieve the targets within the project period.

#### Recommendations

**Recommendation 1:** Ensure timely disbursement of funds to implementing partners to enhance efficiency in and time appropriateness in delivery of results more so in an emergency setting.

**Recommendation 2:** Continue to leverage on implementing partners with experience in implementing interventions in humanitarian settings. Such partners already have existing data that can be used as proxy for baseline values to support project design, understand the context and are able to deliver on a short time span project. Additionally, because they are already conversant with the local context, they are able to work coherently and swiftly with community leaders.

**Recommendation 3:** Documentation and implementation of an exit strategy should commence at the design and start of implementation. The strategy should spell out the roles of key stakeholders and synergies should be built from the onset.

**Recommendation 4:** A consortium delivery model is highly recommended and worked well under this program and suited an emergency response scenario. Each partner in this case should have designated roles that they play (aligned to areas of expertise) so that it creates efficiency in delivery and avoids duplication.

**Recommendation 5.** For interventions such as skills training, it is highly recommended that there is provision of start-up kits. Ultimately, these kits are the ones that make a difference in helping beneficiaries start businesses and improve their livelihoods. Skills formation as necessary as it is – may not be sufficient considering the low levels of incomes of refugees.

#### 1. BACKGROUND AND CONTEXT

#### 1.1 Country Context

In December 2019, the world was faced with the COVID-19 pandemic. Uganda registered its first case of COVID-19 on 21<sup>st</sup> March 2020. According to the Ministry of Health, Uganda officially recorded a total of 170,775 cases of coronavirus infection and 3,632 deaths since the start of the pandemic in 2020. While the Government of Uganda responded swiftly to implementing Standard Operating Procedures (SOPs) to limit the spread of COVID -19 and implemented measures that included travel restrictions, nonetheless Ugandans and refugees inclusive experienced the impact of COVID-19. This impact of COVID-19 in Uganda has mainly been two-fold: disruption in the way of life and in the supply chains and an increase in protection related risks. COVID-19 restrictions affected business activities and led to closure of places of employment. This led to laying off of workers and consequently a slump in private incomes earned from wages and profits. The pandemic disrupted trade, travel and commerce as a result of canceled commercial flights and reduced shipping and cargo services. The disruption of the way of life and supply chains lead increase in income poverty, reduction in food security and a general slump in economic activity.

According to a study carried out by the International Growth Center (IGC) on the gender disparities in the impact of COVID-19, 75% of female business owners had to increase the time they spent caring for household members compared to the corresponding rate of 68% for males. The other aspects of this study as shown in the figure below, COVID-19 disproportionately affected women more than men. Women who reported the negative impacts of reduced number of meals, reduced quality of food consumed (due to inability to afford higher quality meals as a result of reduced incomes), reduced incomes were all at rates higher than those of men.





Source: IGC Study 2021: The impact of COVID-19 on Ugandan firms: Evidence from recent surveys and policy action for supporting private sector recovery, Kampala Uganda

Hosting about 1.5 million refugees, Uganda is largest refugee hosting country in Africa. Most of these refugees are from South Sudan, the Democratic Republic of Congo, Burundi and Somalia. Between October 2020 and March 2021, there were two Uganda Refugee High Frequency Phone Surveys (URHFPS)

conducted by UNHCR, the World Bank and the Uganda Bureau of Statistics. These surveys showed that COVID-19 pandemic had disproportionately and negatively affected refugees compared to Uganda nationals. The poverty rate among refugees was projected to be around 55% higher than the pre-covid level of 44%. Employment rates fell among refugee respondents from 43% in October 2020 to 32% in March in 2021. This (as shown in the figure below) compares lowly to the rates for Ugandan nationals whose employment rates fell from 86% to 50% during the first lockdown to only 44% in the second lockdown.



Fig. 2 Rates of employment for refugees and nationals pre-COVID and during COVID-19 periods

Source: Uganda Refugee High Frequency Phone Surveys (URHFPS) conducted by UNHCR, the World Bank and the Uganda Bureau of Statistics (2021)

In refugee settlements, due to the consequences of COVID-19, women and girls were exposed to new risks – including sexual exploitation and early pregnancy, as well as limited or no access to education when schools where were closed, and a rise in cases of mental ill-health. As the pandemic raged on so were the incidences of domestic gender-based violence – mostly adversely affecting women and girls more in relation to their male counterparts.

#### **1.2.** Programme Description

In March 2022, UN Women received funding from the Government of Japan to implement a one-year LEAP program that aimed at strengthening the protection, leadership and empowerment of over 6,360 vulnerable women, men and youth affected by COVID-19 and forcibly displaced into IDP and refugee camps in Uganda. This programme was designed to contribute to the immediate lifesaving and emergency needs of 6,360 (30 percent hosts) as direct beneficiaries in Kyegegwa, Yumbe and Adjumani refugee hosting districts. The project was to indirectly benefit with 10,000 (5,000 female and 5,000 male) refugee and host community women, men, girls and boys. The project aimed at ensuring that refugee women and girls are protected from the impacts of the emergency refugee crisis, and COVID-19 through the provision of gender-responsive COVID-19 services, protection and, enhancing women's leadership, capacity development and peaceful co-existence for better recovery and resilience.

The project aimed at achieving the following Outcomes:

<u>OUTCOME 1:</u> 4,530 vulnerable women, men and youth lead and participate in COVID-19 prevention, response and recovery interventions in Uganda.

Output 1.1: 3,000 Refugee and host community women have increased capacities & skills to participate and lead in the management of COVID-19 interventions within refugee and IDP camps in Uganda

Output 1.3: 1,530 women and men benefit from initiatives promoting positive gender norms in support of women's leadership and protection from violence and access to COVID-19 awareness and sensitization measures in Uganda.

<u>OUTCOME 2:</u> Positive coping mechanisms improved for 1,830 vulnerable refugees, IDPs and host communities' women and girls most affected by COVID- 19 crisis in Uganda

Output 2.1: 500 women in refugee and host communities most affected by COVID- 19 have increased access to ICT skills and services through existing women empowerment centers in Uganda

Output 2.2: 1,330 refugee women and girls affected by COVID- 19 have increased access to effective safety and protection services at the PCR testing and vaccination sites in Uganda.

The project in Uganda was implemented in three refugee hosting districts of Kyegegwa, Yumbe and Adjumani with a total budget of USD 1,000,620 as detailed in the table below:

#### Table 1: Project Financial Breakdown per Output

Outputs and outcomes areas of Description of activities the Project	Amount (US\$)
1.1 Output 1.1: 3,000 Refugee and host community women have increased capacities & skills	310,000
to participate and lead in the management of COVID-19 interventions within refugee and IDP camps in Uganda	
Output 1.3: 1,530 benefited from initiatives promoting positive gender norms in support of women's leadership and protection from violence and access to COVID-19 awareness and sensitization measures in Uganda	25,000
Total Outcome 1	335,000
Output 2.1: Increased access to ICT skills and service, through existing women empowerment centers in Uganda	150,000
Output 2.2: 1,330 refugee women and girls affected by COVID-19 have increased access to effective safety &	225,000
Total Outcome 2	375,000
Support Costs	290,620
Total Project Costs	1,000,620

Source: Approved Project Document " Prevention of COVID-19 infections among women and girls displaced into IDP and refugee camps in ESAR

#### 1.3. Evaluation Purpose, Objectives and Scope

The LEAP Japan project in Uganda whose implementation commenced in April 2022 came to an end in March 2023. In line with the program requirements and the UN Women evaluation policy, an end of

Programme evaluation has been conducted to assess the performance of the Programme, provide accountability and enhance learning. The purpose of this independent end-term evaluation was to assess the project's achievements against the set objectives, identify and document lessons learnt (including design issues, lessons and best practices that can be up-scaled or replicated). This independent evaluation report provides a reference on how the program contributed to gender equality and economic empowerment of refugee women in Kyegegwa, Yumbe and Adjumani districts in order to inform similar UN Women interventions in the future.

The specific objectives of the evaluation are as follows:

- A. Assess the **relevance** of LEAP II COVID-19 response intervention in addressing the needs of refugee women and how gender equality principles were integrated in the program
- B.Assess the **effectiveness and efficiency** of UN Women's approach for achievement of results, as defined in the logical framework
- C.Identify **lessons learned and p**rovide **actionable recommendations** with respect to the strategy, and overall approach to UN Women's programming in humanitarian settings

The evaluation was guided by the following key evaluation questions:

- 1. Was the Program design appropriate to address the identified needs of women, girls, boys and men?
- 2. Was the choice of interventions most relevant to the situation in the target thematic areas?
- 3. To what extent has UN Women achieved planned outputs and contributed to expected outcomes? Were the planned outputs achieved on time and on budget?
- 4. To what extent did the UN Women management structure support efficiency for implementation and delivery of required results (including Risk and Financial Management)?
- 5. What were the main program enabling and hindering factors to achieving planned outcomes and what actions need to be taken to overcome any barriers that limit required progress?
- 6. Did the Implementing partners have the necessary skills, knowledge and capacities needed to deliver the program?
- 7. Unintended outcomes that either hindered or supported the interventions (not initially envisaged
- 8. What was UN Women's comparative advantage in implementing this type of project compared with other UN entities?
- 9. Has the project been implemented according to gender, human rights and disability inclusion, development effectiveness principles

The evaluation covered all project activities implemented the districts of Yumbe, Adjumani and Kyegegwa between March 2022 – February 2023 funded by the Government of Japan.

#### 1.4 Stakeholder Analysis

The evaluation engaged key project stakeholders in the evaluation process. UN Women Uganda partnered with CSOs and District Local Governments (DLGs) to implement the Program. All the implementing Partners were engaged in the evaluation process. These include: Coalition for Action on 1325: a women rights organization that implemented the social mobilization, community engagement, and awareness creation; Refuge Law Project (RLP) as the prime in a consortium with Peace Winds Japan (PWJ) and Transcultural Psychosocial Organization (TPO) implemented interventions on positive coping mechanisms while the three (3) district local government entities of Kyegegwa, Yumbe, and Adjumani implemented the COVID-19 awareness and vaccination.

The Project identified local women rights organizations (CBOs and CSOs) that were engaged in social mobilization and community engagement. RIDE AFRICA in Kyegegwa, Yumbe GBV Prevention Network (YUGNET) in Yumbe, and Overcomers Women Activists in Adjumani were selected to implement the project in the target districts.

The table below shows the key stakeholders of the program and their respective roles.

#### Table 2 Project Stakeholders

Institution	Role(s) on the Program
Office of the Prime Minister	Overall oversight over responses in refugee settings and member of the National COVID-19 Taskforce. Issued clearance for all activities.
UN Women	Grant recipient and oversaw the overall LEAP Japan Project implementation
Government of Japan	Provided the grant for the implementation of the LEAP Japan Program
Other United Nations Agencies:	During the COVID-19 pandemic UNHCR continued to provide shelter, food, water and medical care for refugees in a manner that helped them observe
United Nations High Commission for Refugees (UNHCR)	SOPs
World Food Program (WFP)	Helped with sustained provision of critical food assistance as well as food supplements to refugees with a purpose to ensure a proper diet and health, especially in a time of lockdown restrictions
Peace Winds Japan	Implementing partner that supported the ICT Skilling aspect of the intervention
TPO	Implementing partner in the provision of services for mental health and psychosocial support including those that come as a result of COVID -19 as well as anti GBV initiatives in refugee settlements and host communities
Refugee Law Project	Implementing Partner that supported the provision of legal aid services including counselling and legal representation in court for GBV survivors
COACT	Implementing partner that supported interventions in rights awareness and protection and sensitization campaigns
RIDE AFRICA in Kyegegwa	Local WRO that worked with women and girls in the fight against Gender based violence in Kyegegwa
Yumbe GBV Prevention Network (YUGNET)	Local WRO that worked with women and girls in the fight against Gender based violence in Yumbe
Overcomers Women Activists in Adjumani	Local WRO that supported interventions in rights awareness and protection in Adjumani
Kyegegwa District Local Government	Overall oversight over implementation in Kyegegwa district working with UN Women and the implementing partners
Adjumani District Local Government	Overall oversight over implementation in Adjumani district working with UN Women and the implementing partners
Yumbe District Local Government	Overall oversight over implementation in Yumbe district working with UN Women and the implementing partners
Beneficiaries	Recipients of program products and services and were expected to be responsive to COVID-19 vaccination and participate in various program activities.

#### 1.5 Users of the Evaluation

This end of project evaluation will be used to actively support the achievement of gender equality and women's empowerment, with emphasis on UN Women key areas central to supporting women and girls' empowerment in humanitarian action in Uganda. Primarily this evaluation report will be useful for:

- i. Provision of information on the program's effectiveness that could be used to inform decision making for the scale up of successor LEAP;
- ii. Generation of feedback as part of accountability to targeted communities; and
- iii. Accountability for the development effectiveness of the LEAP to the donors and other stakeholders.
- iv. Capacity development and mobilization of national stakeholders to advance gender equality and the empowerment of women.

The primary intended users of this evaluation are:

- i. UN Women which will utilize recommendations and lessons learned to improve the implementation of similar projects in the future;
- ii. Relevant staff in target ministries, local government and targeted government institutions, and participating CSOs;
- iii. Relevant staff in participating including for UN-agencies, NGOs, CSOs and other development partners; as well as;
- iv. Members of community leadership structures and targeted beneficiary communities/groups.

# 2. METHODOLOGY

# 2.1 Evaluability assessment

The project was evaluated against its results framework as detailed in the Project Document. During the inception phase an evaluability assessment was conducted which noted the evaluation to be feasible and meet its intended purpose. UN Women Uganda Country office provided guidance, background information and contacts of various stakeholders to inform this process. These have included:

- i. Clear Terms of Reference
- ii. A list of key stakeholders and personalities to be met
- iii. Documentation including the Program Document, the progress reports from implementing partners.
- iv. Cover letter and consent forms that supported support data collection at all sites
- v. Grant request document to the Government of Japan

The evaluability assessment matrix is attached as annex 2.

#### 2.2 Methodological approach

The methodology that was devised to undertake the evaluation was broken down in the following subsections:

- i. Adoption of a Theory-based Evaluation Methodology. The evaluation design used a theory of change that recalibrated pathways along the intervention logic and traced how the outputs delivered translated into intermediate and potentially longer-term outcomes and overall intended result. This was done with reference to the project results matrix purposed to make the evaluative and evidence-based case.
- ii. **Use of the OECD-DAC evaluation criteria:** The evaluation adopted the OECD-DAC<sup>1</sup> criteria as a conceptual approach. For a one-year project the impact and sustainability themes of the criteria were not of emphasis. The evaluation therefore focused more on the themes of relevance, efficiency and effectiveness, as well as coherence.
- iii. **Use of a Mixed Methods Approach** The evaluation adopted a mixed methods approach where a combination of qualitative and quantitative methods were fused to ensure that there is a descriptive analysis of data an explanation of the story behind the figures.
- iv. **Ensuring that the methodology is Gender Responsive.** Fundamental to this evaluation was if there was evidence of gender inclusivity. The evaluation ensured gender data disaggregation Participation/empowerment; disability Inclusion/non-discrimination and enhancement of the rights of women and girls as well as their economic empowerment and protection.
- v. **Methods for inclusivity:** The methodology was designed to ensure optimal contribution of various actors/stakeholders in design and implementation. These include: the beneficiaries in the refugee and host communities in Yumbe, Adjumani and Kyegegwa; implementing partners including District Local Governments and sister UN Agencies: UNFPA, UNDP and UNHCR and other non-state actors including media houses that hosted talk-shows to disseminate information of COVID-19 and Gender Based Violence information and awareness.

<sup>&</sup>lt;sup>1</sup> Organization for Economic Cooperation and Development – Development Assistance Committee

vi. **Minimization of threats to validity, credibility and reliability** in order to ensure validity of the findings, the evaluation underwent a validity assessment. The inception report provided a detailed evaluation design matrix that covered all the key aspects of the evaluation. Secondly the fact-finding mission generated data that complemented and confirmed record of performance reporting of various implementation partners. Lastly this report and draft versions before it underwent quality assurance by the Evaluation Reference Group. All these were to ensure reliability and credibility of the evaluation.

#### 2.3 Data collection methods and sources

The evaluation utilized a mixture of quantitative and qualitative methods to respond to the evaluation questions. A mixed-methods approach that included: a review of secondary data from Project report and Quarterly partner reports and collection of primary data. The main tools used for primary data collection were key informant interview guides, focus group discussion (FGD) guides and semi-structured questionnaires.

Primary data from key stakeholders was collected using a key informant guide. Purposive sampling technique used to select respondents the key informants based on the stakeholder analysis that was conducted during the inception phase. Key informant interviews were held with 33 stakeholders (ref. to annex 4) drawn from the three district authorities in Yumbe, Kyegegwa and Adjumani. The Key informants included: Government officials in the 3 targeted districts (including from the Office of the Prime Minister) who hold the mandate over refugees and internally displaced persons in Uganda; District Local Government officials who were also implementing partners. Specifically, interviews were held with the: Chief Administrative Officers, District Health Officers, Community Development Officers and the Resident District Commissioners who were at the fore of the COVID-19 response; Health workers who were trained to support vaccination drives and communicate COVID-19 messages to the public on various channels and Implementing partners namely: Coalition for Action on 1325, TPO Uganda and Peace Winds Japan.

Simple random sampling was used to identify beneficiaries for the survey selected from among the refugees who benefited from the different components of the project. The survey was administered to a total 455 beneficiaries as indicated in table 4 below. The ODK<sup>2</sup> tool was used collect survey data from the beneficiaries.

District	Host			Refugee			Overall
	Female	Male	Total	Female	Male	Total	
Adjumani	31	4	35	111	4	115	150
Kyegegwa	26	18	44	65	44	109	153
Yumbe	29	14	43	85	24	109	152
Total	86	36	122	261	72	333	455

#### Table 3: Sampled Beneficiary Respondents for the Survey

<sup>&</sup>lt;sup>2</sup> Open-source Data Kit is an open-source suite for collecting data unto android mobile devices to an online server.

Overall, 488 respondents were engaged through interviews, focus group discussions and surveys as follows:

- i. There were **455 respondents** to the evaluation survey (108 male and 347 female)
- ii. Held **15 key informant interviews** guided by pre-designed interview schedules five in each of the three intervention areas. These interviews were held with Implementing partners and district authorities as well as with UN Women Team and Office of the Prime Minister officials.
- iii. Conducted two Focus Group Discussions with 18 selected respondents (who constituted only 12 female and 6 male refugees who benefited from the project) in the two districts of Adjumani and Kyegegwa. In Yumbe the Focus Group Discussion was not held as the participants that had been selected were found to have already participated in the evaluation survey.

#### Socio-demographic characteristics

This section discusses the demographic characteristics of the project beneficiaries who participated in the survey, including gender, age, residence status, marital status, education, among others. These are essential determinants of project relevance and effectiveness since they depict how well the project was aligned to the situation and needs of the target beneficiaries. The table below shows the demographic characteristics of the project beneficiaries who participated in the final evaluation survey.

Characteristics	Male		Female		Overall	
	#	%	#	%	#	%
District:						
Kyegegwa	62	57.4	91	26.2	153	33.6
Yumbe	38	35.2	114	32.9	152	33.4
Adjumani	8	7.4	142	40.9	150	33.0
Beneficiary Category:						
Host	36	33.3	86	24.8	122	26.8
Refugee	72	66.7	261	75.2	333	73.2
Age Group:						
Youth (12-24)	34	31.5	146	42.1	180	39.6
Non-Youth (25 years and above)	74	68.5	201	57.9	275	60.4
Disability status:						
PWD	33	30.6	65	18.7	98	21.5
Non PWD	75	69.4	282	81.3	357	78.5
Overall	108	100	347	100.0	455	100

#### Table 4: Background characteristics/social and demographic profile of respondents

#### Secondary Data

**Desk review** of secondary data was conducted throughout the evaluation and this included progress reports of implementing partners, monitoring reports and the annual consolidated report for both Uganda and Somalia at the end of the project.

#### 2.4 Data analysis

Data were analyzed using quantitative and qualitative methods. Quantitative data were analyzed using descriptive statistics to meet the objectives of the evaluation. Thematic coding was used to analyze

qualitative data ensuring that this addresses the key evaluation questions and objectives. Notes from the interviews were transcribed and complemented by synthesized survey data from sample of beneficiaries.

The following were data collection methods and analyses:

- i. Survey questionnaire was responded to by 455 participants who included 261 and 86 female respondents from the refugee settlement respectively as well as 36 and 72 female and male respondents from host communities respectively. This data was collected using the Kobo collect tool where tallying of responses was aggregated for each survey question.
- ii. Key informants (15 in total) who were interviewed had information notes from these meetings transcribed. Using content analysis, the data was presented as it related to the evaluation questions and themes of the evaluation.
- iii. Notes were transcribed from focus group meetings attend by 18 (9 in each of the two districts where they were held) and using content analysis the information was presented in this report as it related to various aspects of the OECD evaluation criteria

#### 2.5 Ethical considerations

The evaluation adhered to the <u>2020 United Nations Evaluation Group (UNEG) Ethical Guidelines</u>. Accordingly, the evaluation observed the principles and ethics at all stages of the evaluation cycle including but not limited to: informed consent from respondents, protection of privacy, confidentiality and anonymity of participants, cultural sensitivity, respecting the autonomy of participants, and the evaluation results have been cautiously presented to ensure no misrepresentation nor harm to participants or their communities.

The evaluation considered safeguard standards that all researchers signed to declare that the evaluation:

Stands to zero tolerance of incidents of violence or abuse against women and children and other people in the communities we shall reach nor to any other staff or others connected to this evaluation. We shall strictly adhere to safeguarding standards and abhor any misuse of power, status, or trusted position for any sexual or other exploitative purposes

The consultant took the following responsibility for safeguarding and ensuring ethics at all stages of the evaluation cycle:

- i. All information was gathered with informed consent included on the interview guides;
- ii. Key attention was put on protecting privacy, confidentiality and anonymity of participants and reporting is not against individual but aggregated responses from content analysis;
- iii. Cultural sensitivity, respecting the autonomy of participants especially in FGDs where female researchers attended to female FGDs and male researchers for male FGDs;
- iv. Fair recruitment of participants (including women and socially excluded groups that included 3 Persons with Disabilities PWDs in FGDs) and

#### 2.6 Limitations

The LEAP II project did not have baseline data report and used information that implementing partners had generated as well as analytical data by UN Women as was contained in their grant request to Government of Japan. This was supplemented by data from reports of the implementing partners very conversant with the problem context. Had a baseline report been elaborated; it could have been useful for endline-result comparisons. The program had a results performance matrix that guided matching of performance against set targets at start of the intervention.

The field mission faced some unforeseen internal delays which slightly lagged the timeline for the submission of the draft report. Finally, the field visits took place as of June without major restrictions in terms of the quantity and quality of interviews carried out in the field. Overall, the evaluation took place – after a slight delay but that did not compromise the quality of this report.

# 2.7 Management of the Evaluation

The evaluation and quality assurance were managed by UN Women Uganda Country Office. The evaluation was conducted in accordance with UN Women evaluation guidelines and UNEG norms and standards. Upon completion of the evaluation, UN Women held the responsibility to prepare a management response that addresses the findings and recommendations to ensure future learning and inform implementation of their relevant programmes, especially LEAP programme. For quality assurance, the evaluation report has been rated against the Global Evaluation Report Assessment & Analysis System (GERAAS).

UN Women established an Evaluation Reference. The ERG provided input at key stages of the evaluation: inception report review and provided input into the data collection tools and processes. As part of the validation process, a draft evaluation report was shared with the ERG.

#### **3** EVALUATION FINDINGS

#### 3.1 Relevance

Finding 1: The project design was appropriate to address the identified needs of women, girls in refugee settlements and their host communities and complemented Local Government Development Plans in the targeted location.

UN Women designed the intervention as an emergence response and used Implementing Partners (IPs) who were already locally-based and highly experienced in operating within an emergency context. This made the project design appropriate to address the identified needs of women, girls in refugee settlements and their host communities. The project was designed to support the implementation of Local Government Development Plans (LGDPs) (as aligned to the third National Development Plans (NDP III) for FY 2020-2025 – which were already in existence). These District plans were still at final draft stages at the time of the COVID-19 pandemic. One of the aspects to the implementation of LGDPs was to make them COVID-19 responsive. LEAP Japan Project came at a point when districts were experiencing the second wave of the pandemic making the intervention relevant to the problem context at the time. The project was coherent with the national emergence response framework- the Comprehensive Refugees (Kyegegwa, Yumbe and Adjumani) for decades and had systems and structures (including those that had prior experience in combating pandemics including Ebola and Hepatitis B). All this is in consonance with the aspirations of the NDP III programs mainly: Human Capital Development; Community mobilization and mindset change as well as regional development.

# Finding 2: The choice of interventions was appropriate to address the needs of women and girls in refugee settlements and their host communities.

The evaluation noted the following in regard to the choice of interventions:

- i. The intervention to offer English for Adults (EFA) training as well as computer literacy with the adage that *'ICT transcends all languages'* was highly relevant in a context where refugees and members of host communities have low levels of literacy. ICT helped in addressing communication challenges especially in a community where various people speak different languages.
- ii. Limitations in travel and other restrictions occasioned by COVID-19 Standard Operating Procedures (SOPs) had led to a slump in business activity. This adversely affected livelihoods of women and girls who were engaged in food vending and merchandizing (moving from goods from one place to another). Those that had shops saw a decline in sales as refugees were restricted to move. The project by supporting women and girls with business skills training equipped them with the business and financial literacy they needed to embark on re-building their small businesses after the pandemic.
- iii. As the COVID-19 took its toll so did the cases of gender-based violence, school drop-out and teenage pregnancies. The rise in gender-based violence created a need to support women to take up leadership roles and speak-out against this vice. The project was relevant to the needs of the time, since its leadership training included aspects of advocacy for women's rights.

iv. In addition, the COVID-19 period registered an increase in cases of gender-based violence. The legal aid services extended to the refugees through this project enabled them to receive legal representation in court and access justice. This made interventions of Refugee Law Project relevant through the provision of mobile courts, actual support to court representation, offer of legal advice and legal counselling services.

Overall, 96% of the respondents affirmed that the project was relevant and addressed their needs as indicated in table 5 below:

Characteristics	Yes (%)	No (%)	Total (%)	No. of People			
<b>Beneficiary Category:</b>							
Kyegegwa	100	0.0	100	153			
Yumbe	95.4	4.6	100	152			
Adjumani	92.7	7.3	100	150			
Gender:							
Male	97.2	2.8	100	108			
Female	95.7	4.3	100	347			
Overall	96.0	4.0	100	455			

#### Table 5: Assessment of Relevance to needs of beneficiaries

COVID-19 disproportionately affected women and girls compared to their male counterparts. Men in both refugee settlements and host communities had relatively higher access to income generating opportunities compared to women and girls. From Focus Group Discussion (FGDs) conducted, most women and girls reported that LEAP II was among the first interventions they ever experienced that offered English for Adults (EFA) training, computer and financial literacy training. ICT literacy supported women to engage in digital marketing - by advertising their produce on the social media platforms. On the other hand, women utilized ICT training and digital skills to adopt designs off the websites to enhance the quality and style their own production of handcrafts cloth designs and hair styes for their clients in saloon.

This skills extension aspect of the program made it relevant to the needs of women and girls and contributed to closing the livelihoods gap with men that was there prior to the intervention. In Adjumani there was an increase in number of Village Savings and Loans Associations (VSLAs) that helped start-ups like food market vending, merchandizing as the result of the financial literacy. The legal component served by Refugee Law Project was highly relevant to the needs of beneficiaries most of whom could ill afford any form of legal advice and representation in times when they would face crimes and could ill-afford a lawyer. For women to assume leadership roles, it was important that they obtained public speaking skills. So imparting skills such as writing, reading, listening and information on human dignity and rights was highly relevant in creating this empowerment.

Overall, LEAP Japan COVID-19 response intervention was highly relevant in addressing the needs of refugee women. Implementing partners ensured that gender equality principles were integrated in the program and adhered to. The choice of interventions – namely vaccinations, livelihoods support as well as women leadership training were relevant to the context where the pandemic threatened lives, business and confidence among women and girls to fend for themselves.

#### 3.2 Coherence

Finding 3: UN Women leveraged its mandate to advance the rights of women and girls – through dedicated women leadership training, supporting local women rights organisations, use of women champions in amplifying COVID-19 messages and rising up against gender-based violence – in ways that other UN agencies could not deliver.

UN Women, at the launch of the project invited all key stakeholders right from national, to district and community levels who attended and supported the intervention. This enhanced project ownership among stakeholders – who appreciated that intervention was not simply one for UN Women – but of their own benefit. The program adopted a holistic model that put consortium partners into a well-coordinated focus each with specific roles but roles that were complementary. Working with Implementing partners who were very conversant with working with refugees and host communities gave UN women a comparative advantage – in relation to other UN entities especially in pin-pointing at interventions that contributed to resilience of women and girls in an emergency context. This was also in line with the aspirations of UN Women Strategic Note 2020-2025.

**Coherence:** UN Women depended on it clout to advance the rights of women and girls – through dedicated women leadership training, use of women champions in amplifying COVID-19 messages and rising up against gender-based violence – in ways that other UN agencies could not deliver.

#### 3.3 Effectiveness

Finding 4: The project was effective and achieved the planned outputs within the project period even though it experienced a delayed start.

All activities were fully implemented by end of March 2023 in accordance with the project end date. However, Project Implementation commenced at a *time when the* COVID-19 second wave was coming to an end. More so, the time funds were availed to implementing partners, COVID-19 had significantly reduced in the same way as the demand for PCR tests whose demand had been envisaged to be high.

Progress on goal achievement, outcomes and outputs is discussed below (detailed presented per the project results framework included under Annex 1:

The overall programme goal of strengthening the protection, leadership and empowerment of vulnerable women, men and youth affected by COVID- 19 in IDP and refugee camps and host communities was exceeded. A total of 7,574 beneficiaries were reached ahead of the targeted 6,360. This target was exceeded because in Yumbe mobile courts were established that enabled more people to receive legal representation in courts of law. In addition, more women received leadership training due to inclusion of women leaders on top of the vulnerable women and girls.

Outcome 1: 4,530 vulnerable women, men and youth lead and participate in COVID-19 prevention, response and recovery interventions in Uganda.

The outcome was fully achieved. A total of 4,715 beneficiaries were reached against a target of 4,530 denoting a 104% achievement.

Output 1.1: 3,000 Refugee and host community women have increased capacities & skills to participate and lead in the management of COVID-19 interventions within refugee and IDP camps in Uganda.

The output was partially achieved because at the time of implementation the COVID-19 pandemic had receded.

Output 1.3: 1,530 benefits from initiatives promoting positive gender norms in support of women's leadership and protection from violence and access to COVID-19 awareness and sensitization measures in Uganda

The target was surpassed. This is attributed to the collaboration with the 3 women led organization and the district local governments which expanded the reach on awareness creation. Also, use of media such as radio helped.

Outcome 2: Positive coping mechanisms improved for 1,830 vulnerable refugees, IDPs and host communities' women and girls most affected by COVID-19 crisis in Uganda

Target was surpassed due to the provision of mobile legal aid clinics. 1,450 women and girls received legal aid services against a target of 500.

Output 2.1: 500 women in refugee & host communities most affected by COVID- 19 have increased access to ICT skills and services through existing women empowerment centers Target was achieved. 501 women and girls were trained in ICT against a target of 500.

Output 2.2: 1,330 refugee women and girls affected by COVID- 19 have increased access to effective safety and protection services at the PCR testing & vaccination sites in Uganda

Target was achieved at 95%. 477 SGBV women & girls' survivors were provided with mental health and psychosocial support (MHPSS) services against a target of 500.

From the survey data, 79.1% of respondents noted that the program promoted positive gender norms. However only 35.4% mentioned that the project resulted into increased access to ICT skills and services. This was mainly because training was extremely limited (some taking just 1 week) to make an immediate impact.

	Host (n=122)	Refugee (n=333)	Male (n=108)	Female (n=347)	Overall (n=455)
Promoted positive gender norms in support of women's leadership and protection from violence	79.5	79.0	73.1	81.0	79.1
Enhanced access to COVID-19 awareness and sensitization measures	91.8	94.0	96.3	92.5	93.4
Increased access to ICT skills and services	47.5	30.9	32.4	36.3	35.4
Increased access to effective safety and protection services at the PCR testing and vaccination sites	91.8	89.8	88.9	90.8	90.3

#### Table 6: Ranking of Project Benefits by beneficiaries

Finding 5: The project was designed in a way that provided clarity on what each implementing partner was mandated to do. In addition, UN Women held meeting with implementing partners which strengthened collaboration networking and information sharing. In doing so implementing partners ensured that duplication of resources and capacities was avoided.

Most implementing partners had a previous working partnership with UN agencies including UN Women and had the requisite capacity to implement a program of this nature and in an emergency response context. UN Women was praised by local partners for working through competent and locally based implementing partners.

# 3.4 Efficiency

# Finding 6: Overall, the program delivered value for money as all the targeted program activities were successfully implemented—and the targets were achieved.

The funds were allocated to the planned activities and executed in line with the approved work plans. Below are aspects and illustrative examples on the efficiency of the project.

- i. The use of VHTs enhanced responsive efficiency in managing COVID-19 by contract-tracing, case identification, making referrals for testing and treatment at various health centers. They also acted as health agents in the community to sensitize masses about COVID-19 and adherence to SOPs and vaccination campaigns.
- ii. The demand for the services were much higher than the resources that were availed. This put pressure on implementing partners and service providers to meet this need with some complaints that men and boys were disproportionally excluded.
- iii. The program was implemented at a time of a fuel crisis in the country caused by the length clearance of fuel tracks at the Uganda Kenya border. Prices of fuel and especially for diesel (in some places) rose from UGX 4,995 for UGX 6,900 between November 2022 and April 2023. Innovatively, implementing partners used solar power options to mitigate electricity shortages especially since most vaccines had to be maintained under refrigeration.
- iv. Some Implementing Partners faced transport and logistical challenges (and could have done more with more vehicles and motorcycles to cover longer distances). Fuel prices went higher than had been initially envisaged. Others did not have enough vehicles to conduct activities as swiftly and as comprehensively as they would have desired. In Kyegegwa, the program sites (training and vaccination centers) were distant from the settlement which posed a challenge of access for some beneficiaries. Others had lean staff for instance Refugee Law Project that had just 2 staff in Adjumani in light of the overwhelming demand for legal services. Aware of time constraints, staff of implementing partners worked extra hours, utilized community contacts and structures<sup>3</sup> to deliver and meet the targets on time.

The table below details spending levels against the activities undertaken as well the administration and other costs.

<sup>&</sup>lt;sup>3</sup> The community structures included: refugee welfare committees, community volunteers, Village Health Teams (VHTs) interpreters and paralegals

Table 7: Project spending per Output and activity				
Outputs and outcomes areas of	Description of activities	Amount (US\$)		
the Project				
Output 1.1: 3,000 Refugee and	<b>1.1.1:</b> Support to 3 District Local Government COVID-19	95,000		
host community women have	task force teams (Adjumani, Kyegegwa and Yumbe LGs)			
increased capacities & skills to	<b>1.1.2:</b> Support to 3 local women organizations to support	80,000		
participate and lead in the	the awareness creation and mobilization of women			
management of COVID-19 interventions within refugee	<b>1.1.3:</b> Equipment and facilitation of 500 health workers and Village health team members	15,000		
and IDP camps in Uganda	<b>1.1.4</b> : Training provided on transformative leadership skills trainings including virtual classes.	80,000		
	<b>1.1.5:</b> Provide Solar lanterns to 500 women learners and refugee leaders, as well as SGBV survivors.	25,000		
	<b>1.1.6:</b> COVID-19 safety and security study in refugee settlements	15,000		
Subtotal Output 1.1		310,000		
Output 1.3: 1,530 benefited from initiatives promoting positive gender norms in	<b>1.3.1:</b> Civic Education on COVID- 19 conducted in communities targeting 500 women and 500 men in the targeted districts	10,000		
support of women's leadership and protection from violence	<b>1.3.2:</b> Distribution of COVID-19 knowledge and information materials	5,000		
and access to COVID-19				
awareness and sensitization	<b>1.3.3:</b> Awareness raising through community-based	10,000		
measures in Uganda	dialogues on teen pregnancy, child marriage and SGBV.			
Sub total output 1.3		25,000		
Total Outcome 1		335,000		
Output 2.1: Increased access to ICT skills and service, through existing women empowerment	2.1.1: ICT equipment, including computers, and internet services in partnership with NEC Africa (Pty) Ltd provided to COVID-19 affected women and youth	120,000		
centers in Uganda	<b>2.1.2:</b> 500 women trained in the use of ICT skills	30,000		
Sub-totals 2.1		150,000		
Output 2.2: 1,330 refugee women and girls affected by		100,000		
COVID-19 have increased access	<b>2.2.2</b> : Provision of legal aid services	100,000		
to effective safety & protection	<b>2.2.3:</b> Provision of capacity building in gender and	5,000		
services at the PCR testing and	human rights responsive GBV and SRH services.	3,000		
vaccinations sites in Uganda.	<b>2.2.4:</b> Provide smart phones, airtime and bicycles to 30 women support groups,	20,000		
Subtotal output 2.2		225,000		
Total Outcome 2		375,000		
Total Project Costs		290,620		

#### Table 7: Project spending per Output and activity

Finding 7: UN Women conducted timely coordination meetings with OPM and the UN Women focal point officers<sup>4</sup> based in Kyegegwa, Yumbe and Adjumani held monitoring activities with Implementing partners.

In as much as time was limited, the rigor in the reporting systems (using templates that were provided) contributed greatly to program's efficiency. Collaborations with other UN agencies also enhanced efficiency. For instance, UNHCR put in place a toll-free line where callers would report potential cases of COVID-19 and incidences of crime within the settlement and the host communities.

# 3.5 Sustainability

Finding 8: Implementing partners worked hand-in-hand with the District Health Officers (DHOs) who were in the technical leadership under the District COVID-19 Task-forces. This working partnership enhanced opportunities for integration and sustainability of project interventions, although this could have been well elaborated in a clearly spelt out exit strategy for the project.

At the inception meeting of the project, implementing partners signed MoUs with the district leadership, OPM and UN Women as well as UNHCR. These meetings provided guidance on specific locations where the interventions would be made. The project implementation was district led—and this enthused a sense of accountability by all the implementing partners. The district led programming also ensured that program activities were implemented smoothly, created program activities sustainability mechanisms – by mainstreaming the program activities within the District Development Plan—and other partners like AMREF has taken over the program activities. In addition, through routine immunization activities, Covid 19 vaccination will be sustained beyond the life of the program as well as using this as reference for other responses to other pandemics like Ebola and Hepatitis-B outbreaks.

# 3.6 Gender and Human Rights

# Finding 9: gender and human rights considerations were integrated into the Programme design and in implementation.

The project emphasised promotion of gender equality and equity through various training sessions that implementing partners conducted for beneficiaries. As this capacity was built so was the exhibition of women and girls' involvement of in leadership roles. For example, in Adjumani, the district decided that out of the seven (7) meetings that were held by the district Covid-19 Task force; three (3) where to be chaired by a woman leader and 4 were chaired by the Resident District Commissioner.

Women leaders were also instrumental in increasing awareness and demand of Covid-19 vaccination and its uptake among fellow women and girls (who had been more hesitant than their male counterparts). Women leaders as a result of the leadership training, they received became champions of community mobilization, awareness creation and agents of change.

<sup>&</sup>lt;sup>4</sup> These were: **Carol Apio** for Yumbe and Adjumani and **Agnes Birungi** in Kwegegwa

The interventions along the process brought about enhanced co-existence between sections of refugee settlements and the people in the host communities during the COVID-19 period. COVID-19 was seen as a common enemy by the host and the refugee communities, hence they united together to fight the common enemy. This was previously not the case when the two communities were involved in squabbles, causing disharmony and threating violence. The program was inclusive and it benefitted both communities. This is mentioned in the text box below:

The conditions in which most refugees find themselves make most believe that they have no rights to claim. It is important that rights of children, rights to reproductive health services, right to peace and freedom are emphasized. This could go a long way in helping these communities avert adverse effects of early marriages, gender-based violence and inter-community conflicts – that have for long characterized such communities. To obtain information on whether as a result of the program, beneficiaries feel free to express themselves, 82.4% of refugees agreed compared to 79% of respondents in host communities.

Characteristics	Yes (%)	Neutral (%)	No (%)	Total (%)	No. of People
District					
Kyegegwa	77.1	22.9	0.0	100	153
Yumbe	73.7	19.7	6.6	100	152
Adjumani	96.7	0.7	2.7	100	150
Overall	82.4	14.5	3.1	100	455

#### Table 8: Ranking of the freedom of expression by beneficiaries

#### 3.7 Disability Inclusion

# Finding 10: Implementing partners had criteria for ensuring that beneficiaries were selected in ways that allow equal participation of everyone including persons with disabilities.

For example, TPO had forms that would obtain feedback on all beneficiaries indicating various forms of disability. In the conduct of interviews, the evaluation purposed to obtain views from PWDs. As show below, among the beneficiaries, findings indicate that 21.5% of the respondents reported having at least one form of disability. Among them, the majority, accounting for 43.8% (79.6% refugees, 20.4% hosts), reported having a physical disability, while 26.8% (80% refugees, 20% hosts) reported having a sight-related disability.

Forms of Disability	Host		Settlen	Settlement		Overall	
	#	%	#	%	#	%	
Physical disability	10	20.4	39	79.6	49	43.8	
Sight (Eyes) disability	6	20.0	24	80.0	30	26.8	
Auditory (Hearing) disability	2	18.2	9	81.8	11	9.8	
Mental disability	4	18.2	18	81.8	22	19.6	

#### Table 9: Forms of Disability

From the table above, the overall percentage of respondents reporting a mental disability was 19.6% (22 individuals), while only 9.8% (11 individuals) reported having an auditory (hearing) disability.

#### 3.8 Evaluative Design of the Program Theory of Change

The evaluation made a re-modelling of the project theory of change. At the end is a desired state where women and girls exhibit leadership in COVID-19 response. This was achieved through reduction in genderbased crimes and enhanced livelihoods for women and girls. In the immediate term LEAP II was able to support women and girls through skilling, legal service support and other training. Some as a result were able to exemplary leadership in promotion of positive gender norms and managing the COVID-19 response as well as coping mechanisms to threats of GBV. All these as seen on the left-hand side are brought about by ensuring that there is built capacity of community women and girls to participate and lead in the management of COVID-19 interventions as well as promotion of positive gender norms and protection from violence and access to COVID-19 vaccination and related services. The theory of change is presented on the next page.

#### **Re-Constructed Theory of Change**



#### 4. CONCLUSIONS

**Conclusion 1:** Overall, the project designed as an emergency response to address the challenges occasioned by the COVID-19 pandemic. It was therefore appropriate to the needs of women and girls in the refugee settlement and host communities. The design was also aligned to the national COVID-19 response and included district and community leadership among the stakeholders. The program design considered lessons learned from previous LEAP projects and leveraged on the competence of locally based Implementing partners who had the expertise in implementing in humanitarian settings.

**Conclusion 2**: The focus on working in the COVID-19 within a lens of women and girls' empowerment gave UN women a comparative advantage in relation to other UN and other agencies who were working in the similar recovery context. More so, LEAP sought to sustain work with already existing implementing partners – whose work was in line with the focus of UN Women in emergency women empowerment programing.

**Conclusion 3:** Despite the delayed start, the project leveraged on the experience of the implementing partners and strong coordination and managed to achieve the targets within the project period. Delays occasioned by late disbursement of funds impact on effectiveness of project delivery. Trainings like ICT skills that need to be sequenced over a period of time get impacted as they are implemented in a short time.

**Conclusion 4:** An exit strategy was required to guide on how the terminate the intervention and handover the program to the Local Government or other partners. Sustainability of women supported interventions requires a strong aspect of male involvement. Men right from a young age, should be more involved, trained and educated to appreciate the importance of upholding the rights of women and girls

**Conclusion 5:** Guidance UN Women offered to IPs was key in embedment of gender, human rights and disability inclusion in the project interventions. Leadership training based on rights-based approach created a cohort of women champions whose voices alternated hitherto negative myths about COVID-19 and inspired more vaccinations. It was critical to embed gender and human rights right from design of the project, among reporting requirements in the formats sent out to implementing partners. In so doing the program ensured inclusivity of disability and gender in programming

#### **5. LESSONS LEARNT**

At the time of the pandemic women and girls had been disproportionately affected compared to men and boys as most lacked access to productive assets and faced gender-based violation of their rights. A key lesson learnt was that training and skills formation was able to achieve dual results of vaccine acceptance as well as women rights empowerment. By emphasizing leadership training, women and girls were able to know and appreciate their rights and some took up leadership positions on Refugee Welfare Committees. Aligned to the OECD-DAC evaluation criteria, the following are the key lessons learnt that could inform future project's implementation.

Implementation of interventions in humanitarian settings using partners on the ground with long-standing expertise makes it easy for to implement the project. Use of already existing capacity helps in both needs articulation (which is important at design stage) more so in a context where there is no baseline study and later during implementation. Moreover, implementing in a consortium approach (where each partner has a specified role basing on their areas of specialization, competences and comparative advantage enhances critical elimination of overlaps or duplication of effort.

#### 6. RECOMMENDATIONS

This chapter presents the recommendations made by the evaluation based on findings, conclusions and lessons learned in the previous sections. These recommendations are presented in the formats that show: the recommendation, to who the recommendation is targeted as well as the level of priority and how earnestly (in terms of urgency, impact and low). While there wasn't a workshop to validate these recommendations, they were arrived at basing on evaluation findings, conclusions and lessons learned.

Recommendation 1: Ensure timely disbursement of funds to implementing partners to enhance efficiency in and time appropriateness in delivery of results more so in an emergency setting. The program was designed to respond to an emergency situation – a midst of a pandemic. Expedited provision of the necessary support and funds for the Implementing Partners to carry out activities is prudent.

prudent.						
How to do	Fast track processes so that funds are disbursed timely to partners					
Responsible actor(s)	UN Women					
What if it's not done	Delays implementation and the impact of the interventions on beneficiaries					
Urgency	Immediate					
Impact	High					
Difficulty	Low					
Link to conclusions	Aligned to findings 4, 6 and conclusion 3.					
<b>Recommendation 2: Con</b>	ntinue to leverage on implementing partners with experience in implementing					
interventions in human	itarian settings. Such partners already have existing data that can be used as					
proxy for baseline value	s to support project design, understand the context and are able to deliver on					
a short time span proje	ct. Additionally, because they are already conversant with the local context,					
they are able to work co	pherently and swiftly with community leaders.					
How to do	Identity the partners at project design and inception stages and involve them					
	where possible in project formulation					
Responsible actor(s)	UN Women					
What if it's not done	Contributes to delays and timely implementation					
Urgency	Medium					
Impact	High					
Difficulty	Low					
Link to conclusions	Aligned to findings 3, 7 and conclusion 1 and 5.					
<b>Recommendation 3: Do</b>	cumentation and implementation of an exit strategy should commence at the					
design and start of imp	lementation. the strategy should spell out the roles of key stakeholders and					
synergies should be bui	It from the onset.					
How to do	Involve key stakeholders whose role is key at exit in the formulation and implementation of the sustainability plan					
	At the end of the project formally handover key aspects of the project to the local government					
Responsible actor(s)	UN Women & Implementing Partners					
What if it's not done	Minimizes chances of continuity of interventions					
	There is possibility of causing harm to beneficiaries who may still be requiring					
	services and support					
Urgency	High					
Impact	High					
	· · · · · · · · · · · · · · · · · · ·					

Difficulty	Low					
Link to conclusions	Aligned to finding 7, 8 and conclusion 4.					
Recommendation 4: A c	consortium delivery model is highly recommended and worked well under this					
program and suited an	emergency response scenario. Each partner in this case has designated roles					
that they play (aligned	to areas of expertise) and hence creating efficiency in delivery and avoids					
duplication						
How to do	Map partners in the target areas based on expertise and comparative					
	advantage during the design stage					
Responsible actor(s)	UN Women and Implementing Partners					
What if it's not done	Duplication of efforts					
	Working with partners who don't understand the context hence ineffective					
	to deliver the project					
Urgency	Medium					
Impact	High					
Difficulty	Low					
Link to conclusions	Aligned to findings 4 and conclusion 3.					
<b>Recommendation 5: Fo</b>	r interventions such as skills training, it is highly recommended that there is					
	its. Ultimately, these kits are the ones that make a difference in helping					
beneficiaries start busin	esses and improve their livelihoods. Skills formation as necessary as it is – may					
not be sufficient conside	ering the low levels of incomes of refugees.					
How to do	Include this in the project design and budget					
Responsible actor(s)	UN Women					
What if it's not done	Limited ability of the beneficiaries to immediately start utilizing the skills					
	gained and be productive					
Urgency	High					
Impact	High					
Difficulty	Low					
Link to conclusions	Aligned to findings 1 and 2 and conclusion 2.					

#### ANNEXES

Annex 1: Results Framework Matrix

Result level	Indicator	Baseline		Actual	% of End of	Reasons for deviation +/-10%
			End of Project Target	Performance to date	Project Target achieved	of the expected Performance
Goal: To strengthen the protection, leadership and empowerment of over 6,360 vulnerable women, men and youth affected by COVID- 19 in IDP and refugee camps in of Uganda	Number of community members (vulnerable women, men and youth affected by COVID-19 and forcibly displaced into IDP and refugee camps) participating in project's protection, leadership and empowerment activities	N/A	6,360	7,574	Uganda=119%	The overall goal was met. In Uganda it was exceeded because mobile courts that were established in Yumbe led to more people getting legal representation. In addition, there were more women receiving leadership training in Uganda due to inclusion of women leaders on top of the vulnerable women and girls.
Outcome 1: 13,330(Uganda 4,530)vulnerable women,men and youth leadand participate inCOVID-19prevention,response andrecoveryinterventions inUganda and Somalia	Number of vulnerable women, men and youth leading and participating in COVID-19 prevention, response and recovery interventions	N/A	Total=13,330 Uganda= 4,530	Total=11,270 Uganda=4,710	Total=85% Uganda=104%	Mass campaigns on sensitization and awareness creation mobilized women to participate in COVID-19 prevention, response and prevention
Output 1.1: 3,000 Refugee and host community women have increased capacities & skills to	<b>1.1.1</b> Number of Refugee and host community women provided with adequate capacities & skills to participate and lead in the management of	N/A	Total=3,000 Uganda= 3,000	Total=1,639 Uganda=1,639	Total=55% Uganda= 55%	The underperformance is because none of the 1,500 women and girls targeted for vaccination against COVID-19

Result level	Indicator	Baseline	End of Project Target	Actual Performance to date	% of End of Project Target achieved	Reasons for deviation +/-10% of the expected Performance
participate and lead in the management of COVID-19 interventions within refugee and IDP camps in Uganda	COVID-19 interventions within refugee and IDP camps in Uganda					was reached because the pandemic had receded.
	<b>1.2.2</b> Number of women and girls vaccinated against COVID-19 in Uganda	N/A	Total=1,500 Female=1,500 Uganda= 1,500	Total=0 Female=0 Uganda= 0	Total=0% Female=0% Uganda= 0%	The project was implemented when cases of COVID-19 had significantly reduced which impacted on the need for PCR tests. However, due to other emerging epidemics like Ebola, the district local governments purchased and distributed assorted medical items that enabled health workers to safely offer services to the community.
	<b>1.2.3</b> Number of health workers & Village Health Team members equipped (with PPEs and other COVID-19 preventive materials including MHPSS services) and facilitated to enable them effectively work with women during PCR tests or COVID-19 vaccination exercises in UG	N/A	Total= 500 Uganda= 500	Total=550 Uganda=550	Total=110% Uganda=110%	Assorted PPEs and other COVID-19 preventive materials were distributed to health workers and VHTs including 550 gum boots. The people of people benefiting is based on the number of pairs of gum boots.
	<b>1.2.4</b> Number of refugee and host community women provided with literacy, numeracy and transformative leadership skills (through virtual training	N/A	Total=500 Female=500 Uganda= 500	Total=588 Female=588 Uganda= 588	Total= 118% Female=118% Uganda= 118%	The over achievement is a result of the combined mobilization strategies and the role of women led organizations in demystifying
Result level	Indicator	Baseline	End of Project Target	Actual Performance to date	% of End of Project Target achieved	Reasons for deviation +/-10% of the expected Performance
---	---	----------	--	---	---	---
	sessions) to enable them participate in the COVID-19 response in UG					the myths around COVID-19 vaccination which enabled more women to understand and accept vaccination
	<b>1.2.5</b> Number of women learners and refugee leaders, as well as SGBV survivors provided with Solar lanterns to increase their access to COVID-19 prevention services in Uganda	N/A	Total=500 Female=500 Uganda= 500	Total=501 Female=501 Uganda= 501	Total=100% Female=100% Uganda= 100%	Target was achieved
Output 1.3: 1,530 benefits from initiatives promoting positive gender norms in support of women's leadership	<b>1.3.1</b> Number of community members reached with Civic Education to promote women's leadership rights and access to COVID -19 interventions in targeted districts UG	N/A	Total=1,530 Male=1030 Female=500 Uganda= 1,530	Total=3,071 Male=1,314 Female=1,757 Uganda= 3,071	Total=201% Male=128% Female=351% Uganda=201%	Collaboration with the 3 women led organization and the district local governments expanded the reach on awareness creation. Also, use of media such as radio helped
and protection from violence and access to COVID-19 awareness and sensitization measures in Uganda.	<b>1.3.2</b> Number of women and girls with awareness and information on COVID19 interventions/services	N/A	Total=500 Female=500 Uganda= 500	Total=1,757 Female=1,757 Uganda=1,757	Total=351% Female=351% Uganda=351%	Collaboration with the 3 women led organization and the district local governments expanded the reach on awareness creation. Also, use of media such as radio helped
	<b>1.3.3</b> Number of men/boys champions (traditional, religious, Refugee Welfare Council members, and local leaders) provided with COVID-19 knowledge and information materials through training and routine project activities in UG	N/A	Total=30 Male=30 Uganda= 30	Total=25 Male=25 Uganda=25	Total=83% Male=83% Uganda=83%	Only 25 men and boys were available for the intervention

Result level	Indicator	Baseline	End of Project Target	Actual Performance to date	% of End of Project Target achieved	Reasons for deviation +/-10% of the expected Performance
	<b>1.3.4</b> Number of, men, boys, engaged as male champions in COVID -19 interventions	N/A	Total=500 Male=500 Uganda=500	Total=502 Male=502 Uganda=502	Total=100% Male=100% Uganda=100%	Target was achieved
	<b>1.3.5</b> Number of men and boys' champions participating in community-based dialogues focusing on increasing knowledge on prevention and response to COVID-19, and to address negative gender norms that contribute to increased teen pregnancy, child marriage and SGBV for refugee and host community women and girls	N/A	Total=500 Male=500 Uganda=500	Total=787 Male=787 Uganda=787	Total=157% Male=157% Uganda=157%	The high number of men in Kyegegwa is because the event was being held for the first time and communities were eager to attend.
Output 1.4 Evidence and knowledge products generated to support COVID 19 mitigation and	<b>1.4.1</b> Evidence-based knowledge management documentary on gender integration in COVID-19 mitigation, response strategies and plans in ESA is in place?	N/A	YES	YES	100%	The documentary featuring Uganda, Somalia, Kenya and South Sudan was developed
response interventions in ESA	<b>1.4.2</b> Number of women & women led organizations and youths whose capacity, on leadership and participation in COVID-19 mitigation and response measures, has been built in ESA	N/A	20	24	120%	Training was conducted for 24 participants drawn from Somalia, Ethiopia, Kenya, Zimbabwe, Uganda, Malawi, Sudan, South Sudan and Burundi representing an equal number of women and youth led organizations.
Outcome 2: Positive coping mechanisms	Number of vulnerable refugees, IDPs and host communities'	N/A	Total=1,830 Female=1,830	Total=2,647 Female=2,647	Total=145% Female=145%	High achieved numbers on Legal representation because

Result level	Indicator	Baseline	End of Project Target	Actual Performance to date	% of End of Project Target achieved	Reasons for deviation +/-10% of the expected Performance
improved for 1,830 vulnerable refugees, IDPs and host communities' women and girls most affected by COVID-19 crisis in Uganda	women and girls most affected by COVID-19 crisis with improved coping mechanism as a result of the project in Uganda		Uganda= 1,830	Uganda= 2,647	Uganda=145%	of the mobile court sessions in Yumbe which made it easy to handle matters expeditiously. – Is it possible to use different words so that it's not a copy and paste from above?
Output2.1:500women in refugee &hostcommunitiesmostaffectedbyCOVID-19haveincreasedaccesstoICTskillsandservicesthroughexistingwomenempowermentcenters	<b>2.1.1</b> Number of women trained in use of ICT skills such as zoom and online business marketing to enable their continued access to SRHR, SGBV, online literacy/numeracy classes, & COVID-19 related information & services in UG	N/A	Total=500 Female=500 Uganda=500	Total=501 Female=501 Uganda=501	Total=100% Female=100% Uganda=100%	Target was achieved
Output 2.2: 1,330 refugee women and girls affected by COVID- 19 have increased access to effective safety and protection services at the PCR testing & vaccination sites in	<b>2.2.1</b> Number of SGBV women & girls' survivors provided with mental health and psychosocial support (MHPSS) services (incl telephonic and virtual psychosocial counselling) to mitigate the impacts of COVID-19 on refugee and host communities	N/A	Total=500 Female=500 Uganda= 500	Total=477 Female=477 Uganda= 477	Total=95% Female=95% Uganda=95%	Target was achieved
Uganda	<b>2.2.3</b> Number of women and girl GBV survivors affected by	N/A	Total=500 Female=500	Total=1,450 Female=1,450	Total=290% Female=290%	High achievement because of the mobile court sessions in

Result level	Indicator	Baseline	End of Project Target	Actual Performance to date	% of End of Project Target achieved	Reasons for deviation +/-10% of the expected Performance
	COVID-19 provided with legal aid services		Uganda= 500	Uganda= 1,450	Uganda= 290%	Yumbe which made it easy to handle matters expeditiously
	<b>2.2.3</b> Number of peers and health workers trained/mentored in gender and human rights responsive GBV and SRH services specifically targeting adolescent girls and young women 15-24yrs at the risk of teen pregnancy, child marriage & sexual GBV during COVID-19 containment measures in Uganda.		Total=30 Female=30 Uganda= 30	Total=57 Female=57 Uganda=57	Total=190% Female=190% Uganda= 190%	There were more available health workers for training
	<b>2.2.4</b> Number of COVID-19 affected women and girls, and SGBV survivors provided with quality services and referrals (MPHSS, legal aid, PSEA and SRH services) as a result of project's logistical and communication support to women support groups, paralegals, volunteer psychosocial counsellors	,	Total=300 Female=300 Uganda= 300	Total=162 Female=162 Uganda=162	Total=54% Female=54% Uganda= 54%	Limited time to follow up on the trainers regarding rollout of the training

Annex 2	Evaluability Assessment Matrix				
Focus		Assessment Question	Finding	Remarks	
Theory change/logic model	of	a) Does the programme clearly identify the problem and target population (context analysis)?	Yes	The project followed the 70:30 criterion for targeting refugees and persons in host communities and focused on population most affected by COVID-19	
		b) Are gender inequality factors and women's needs clearly and explicitly identified?	Yes	The focus was broads more on women and girls than boy and men – as was the purpose to reduce vulnerability to the COVID-19 shocks	
		c) Does the programme have a clear strategic intent and a theory of change?	No	No descriptive Theory of Change was provided and hence one designed in the evaluation report	
		d) Does the programme have clear goals, objectives and results?	Yes	The programme had a results matrix with goals objectives, intervention areas and expected results quantified	
		e) Does the programme articulate levels of activities, financial resources, results and strategies?	Yes	However, still the financial report at end of the program is yet to be provided showing the funds spent and balances	
Quality of performance	the	a) Did the programme have a results framework with indicators	Yes	The programme had a results matrix with indicators well stated	
indicators		b) Did each result area (outcome and output) have an indicator against them?	Yes	The programme had a results matrix with goals objectives, intervention areas and expected results quantified	
		c) Were the indicators SMART Specific, Measurable, Attainable, Realistic and Time bound	Yes	The design shown numbers targeted, indicator per intervention quantified	
Existence availability relevant	and of	a) Does the programme have enough information on the intervention and the context?	Yes	Information provide on intervention and context was sufficient	
information.		b) Does the programme have baseline information?	No	No baseline report was provided since a baseline survey was not carried out	
		c) Does the programme have a monitoring system to gather and systematize information with defined responsibilities, resources and periodicity?	No	No evidence of a system. However, UN Women country office had track of all performance by reviews of quarterly reports submitted by implementing partners	
		d) What kind of information on women's rights is accessible and how is it or will it be collected	Difficult to ascertain	At final evaluation stage, what was possible was to obtain performance data on training on rights provided by	

Focus	Assessment Question	Finding	Remarks
			Implementing partners. Samples of material passed on during the training was shared.
Conduciveness of the context	a) What is the level of stakeholders' involvement and their perspectives towards the programme?	High	All key pertinent stakeholders were brought on board and these included OPM, District leaders, civil society, NGOs including UN Agencies and beneficiaries.
	b) Does the programme have resources and capacities to undertake the evaluation (bud get, time, technical knowledge)?	Yes	Resources were availed though late
	c) How is the adequacy of the institutional and socio-political context (evaluation culture, groups of interest that could influence the independence of the evaluation, etc.)?	High	The program was designed with keenness to include district leadership and OPM structures of administration. These duty bearers were made aware that an independent evaluation would take place at end of the intervention – and hence support this process
Accountability	a) Does the programme have a clear management structure?	Yes	UN Women and her development partners had an elaborate management structure to implement and report
	b) Do partners have responsibilities, accountabilities and ownership of the programme?	Yes	All partners knew their responsibilities under a consortium approach. Ownership aspect however remains to be seen if district structures can sustain aspects like management of ICT training labs and equipment
	c) Does the programme have a transparent performance monitoring and reporting system?	Yes	UN Women has an elaborate monitoring and reporting system that received performance reports quarterly with an elaborate template for implement partners to follow.
Gender equality and human rights considerations	<ul> <li>a) Was there gender equality and/or human rights analyses and disaggregated data (e.g., sex, class, or ethnicity) are available and attention was given to these in the programme theory and design</li> </ul>	Yes	Guiding forms were provided to Implementing partners on reporting that included sex, gender, age, location. LEAP II itself had a component of training on women rights and this was inculcated in the design and program theory

### Annex 3: Documents reviewed

- 1. Coalition for Action on 1325 LEAP II Program Report January to March 2023
- 2. Adjumani District Local Government: integrated COVID-19/hepatitis B response to girls, and women including other population at risk activities implemented across the district
- 3. Prevention of COVID-19 infections among women and girls displaced into IDP and refugee camps: UN Women Annual Report No2 Kampala Uganda
- 4. UN Women Project Document: Prevention of COVID-19 infections among women and girls displaced into IDP and refugee camps in ESAR
- 5. Office of the Prime Minister (2020) Comprehensive Refugee Response Framework Report Kampala Uganda
- 6. UN Women (2023) ESARO Final Report

## Annex 4: List of Agencies and Partners Interviewed

Institution	Contact			
Peace Winds Japan	Emmanuel Logiel (Project Officer / Arua office): , <u>emmanuel.pwjuganda@gmail.com</u> James Otieno Ouma (Programme Officer / Kyegegwa office <u>james_ouma@peace-winds.or.ke</u>			
ТРО	Adjumani: Munduku Richard Yumbe: Awor Harriet Kyegegwa: Nakito Joweria			
Kyegegwa district local government	Agnes Birungi			
Refugee Law Project	Kyegegwa: Namuyaga Enid Adjumani: Esther Atim / Mercy Yumbe: Sandra 8			
Adjumani DLG	Maxwel Abidrabo			
Yumbe DLG	Abassi Mansour			
COACT	Kyegegwa (Ride Africa): Ihunde Faridah Yumbe (Yugnet): Jackline Ewudopia			
	Adjumani (Over Comers): Olga Lidrio			
UN Women	Kyegegwa: Juliet Odoi			
	Yumbe / Adjumani:			

	Carol Apio

## IMPLEMENTING PARTNERS KYEGEGWA

ORGANIZATION	NAME	DESIGNATION
CO-ACT/RIDE AFRICA	Alindwamukama Elijah	Assistant Project Officer
CO-ACT/RIDE AFRICA	Kansiime Syliva	Project Officer
REFUGEE LAW PROJECT	Bwambale Asiimwe	Legal Assistant
	Micheal	
REFUGEE LAW PROJECT	Muhiira Cathrine	Project Assistant (Acting Office
		Coordination)
PEACE WINDS	Timothy Kayondo	Project Officer
PEACE WINDS	Denis Nyeko Amoti	Engineer
PEACE WINDS	James Otieno Oma	Program Officer
ТРО	Nakito Juweria	Social Worker

# DISTRICT OFFICIALS KYEGEGWA

Name	Entity	Designation
Mukenyi David	OPM	SETTLEMENT COMMANDANT KYAKA II
Kandole Tedson	KYEGEGWA DLG	D.H.O
Muhumuza Edward	KYEGEGWA DLG	BIO STAT
Nyesiga Rauben	KYEGEGWA DLG	D.H.I
Sande Emmanuel	KYEGEGWA DLG	Acting District Heath Educater
Namusoke Daphne	KYEGEGWA DLG	Nursing Officers, EPI Focal Person
Thomas Safari	КҮАКА	RWC II
Kakiine Ndayambaje	BYABAKORA ZONE	RWC II
Janet Nyirahabimana	MUKONDO ZONE	RWC II
Etiennne Runyambo	BUKERA B	VHT
Eli Kasereka	BUKERA B	VHT
Katabuka Isaac	BUKERA OUTPOST	VHT

# Respondents in Yumbe

Name	Organization/location	Position
Maturu Irene	YUMBE GLG	Ag. ADHO-MCHIN
Abassi Mansoor	YDLG	DHE
Buga Morris	YDLG	DSFP/EDIFP
Priscila Lou Langetio	YUGNET	HRA
Nabugere Micheal	OPM-YUMBE	SETTLEMENT COMMANDANT
Joel		
Bugonzi Maria	RLP	LEGAL ASSISTANT
Shaka Keneth	ОРМ	ASSISTANT SETTLEMENT COMMANDANT
Oyom Sandra	RLP	PROJECT OFFICER
Olivier Irakoze	YUMBE TPO PC	PROJECT COORDINATOR
Harriet Awor	YUMBE TPO	SOCIAL WORKER
Barbra Monica	BIDIBIDI SETTLEMENT	RWC 3

Key informant Interview respondents in Adjumani

- 1. Bongomine Emmauel Legal Assistant Refuge Law Project
- 2. Amalma Masta Vicent OPM Representative
- 3. Mr. Turban Peter Resident District Commissioner Ajumani
- 4. Apio Janet Gender Focal Person for Overcomers

### Focus Group Discussion Women - Adjumani

i. Apiu Chol Akuot Peace Winds Japan ii. Elizabeth Yuol Bech **Overcomers** iii. Yar Garang Deng Peace Winds Japan iv. Awak Elizabeth Garang **Overcomers** v. Achol Aguer Raith Overcomers vi. Boi Makuei TPO vii. Kuiv Ajang TPO viii. ALAKIIR Dau Bior **Overcomers** ix. Cholpiu Dau TPO

## Annex 5: Data collection Instruments

## A1: Key Informant Interview Tool (Implementing Partners)

Name of Respondent:

Designation..... Entity.....

Acceptance to be interviewed Yes...No...If No. Terminate Interview.....

- 1. Briefly explain to us the role you played in the LEAP Program
  - Was there a prior needs assessment that informed the interventions under this program?
- 2. Were the beneficiaries consulted prior to the intervention and what were the results of these consultations (if they were held)?
- 3. For the interventions that were implemented by your organization, how relevant were they to the situation in the context of the covid pandemic?
- 4. To what extent do you think the program achieved the planned outputs and expected outcomes?
- 5. Were the planned outputs achieved on time and on budget?
- 6. To what extent did the program benefit UN Women management and delivery structure?
- 7. What were the main program enabling and hindering factors to achieving planned outcomes and what actions need to be taken to overcome any barriers that limit required progress?
- 8. In your assessment, did IDPs have access to the necessary skills, knowledge the program envisioned?
- 9. Did you as an implementing partner have the capacities needed to deliver the program?
- 10. Do let us know if there were some exemplary cases of good performance that stood out or some unexpected outcomes that arose during the program's implementation.

- 11. What do you view UN Women's comparative advantage in implementing this type of project compared with other UN entities?
- 12. In your view has this program been implemented according to human rights and development effectiveness principles: (**PROBE** for: Gender and sex disaggregation of data, Participation/empowerment; disability Inclusion/non-discrimination; National accountability / transparency exposure to GBV and PSEA)
- 13. What is there a Program exit strategy?

# LEAP PROGRAM EVALUATION FOR UN WOMEN BENEFICIARY TOOL

# SECTION I: IDENTIFICATION VARIABLES

NO.	Identification		<u>Code</u>
Q101	District:	Kyegegwa	1
		Yumbe	2
		Adjumani	3
Q102	Settlement	Kyaka	1
		Omugo zone	2
		Bidibidi	3
		Adjumani	4
		Other fill name	5
Q103	Sub County/Town council		
Q104	Parish:		
Q105	Name of Village /Zone		
Q106	Research Assistant's Name and Number		
Q107	Date of interview	DD MMYY:	
Q108	Category of the respondent	Refugee Community	1
		Host Community	2

# SECTION 2: RESPONDENT'S BACKGROUND

NO.	Questions And Filters	Coding Categories	Code	Skip To
Q201	Sex of respondent (Please observe)	Male	1	
		Female	2	
Q202	How old are you? (Age in complete years)			
Q203	What is your highest level of education?	No formal education.	1	
		Incomplete primary	2	
		Complete Primary.	3	
		Incomplete O-Level	4	
		Complete O- Level	5	
		Incomplete A- Level		
		Complete A- Level	7	
		Vocational training	8	
		University.	9	
		Other (specify)		
Q204	Your marital status	Single/Never married/	1	
		Never lived together.	2	
		Married or living together	3	
		Separated/Divorced		
		Widowed	3	
			4	

NO.	Questions And Filters	Coding Categories	<u>Code</u>	<u>Skip To</u>
Q205	Do you live with any form of disability (use	Yes	1	If no in
	observation before asking)	No	2	205 skips
				to Q207
Q206	If yes, what kind of disability?	Physical Handicap	1	
	(By observation)	Visual Impairment	2	
		Auditory Impairment.	3	
		Mental Impairment	4	
		Other: Specify	5	
Q207	How many people live in your household?			

## 1. Briefly explain to us the process that led you to be selected to be part of the LEAP Program

.....

2. Do you feel that the program focused on aspects that were most relevant to address your needs at the time of the COVID-19 pandemic? (Illustrate with some examples)

Yes Neutral No

3. Explain how you benefited under these main areas of the program. Under each of the following items what precisely did you learn during the training and how have you applied the skills you obtained?

Main Area of Intervention	Explanation of benefit to the respondent
1. Promoted positive gender norms in	Yes
support of women's leadership and	Neutral
protection from violence	No
	Reason
2. Enhanced access to COVID-19 awareness	Yes
and sensitization measures	Neutral
	No
	Reason
3. Increased access to ICT skills and services	Yes
	Neutral
	No
	Reason
4. Increased access to effective safety and	Yes
protection services at the PCR testing and	Neutral
vaccination sites.	No
	Reason

5. What is the biggest change you have noted as result of the program?

6. In implementing this program did you feel free to express yourself freely and did you feel that your contribution and voice was heard?
 Yes
 Neutral
 No

Reason

7. In your view how best can this programme be sustained to keep benefitting this community?

.....

## Focus group discussions (Men and Women)

- 1. What is the capacity of women, men, and youth in your community to participate and lead in the management of COVID-19? Please compare the situation before 2021 and today. (Please probe to determine who they attribute the change to)
- 2. What is the situation in terms of Sexual Gender-based violence in the community (Both Host and refugee)? (Probe if it has increased/reduced and why)?
- 3. What factors do you consider to be the drivers of sexual gender-based violence in this community?
- 4. In the last two years, what has been done to protect women and girls from SGBV?
- 5. Have you heard about UN women? In what ways have they supported women and girls in your community
- 6. How have duty bearers (police, health workers, RWC, block leaders) been supportive in responding to cases of SGBV in the community?
- 7. Have you been sensitized about violence against women and girls (forms), where to report, and how to help victims)? How about women's participation in leadership?
- 8. If yes, who sensitized you and when?
- 9. What would you do to prevent SGBV from happening to you or any other person in your community?

## Local Leaders (District/Sub County/ RWC/ Blocker leaders

- 1. In your view, how relevant was this Project to the refugee communities and the host communities?
- 2. What would you say have been the major achievements of this Project, especially in the areas of?
  - Gender-responsive protection and SGBV services among the refugees; Gender norms transformation
  - Improving access to ICT skills and services
  - Capacity building of Refugee and host community women through skills formation
- 3. Have both the refugees and host communities benefited from this Project?

- 4. What was your level of participation and involvement in the design, implementation, and Monitoring of this Project? Are there things you would have done differently about the Project given a chance?
- 5. What challenges did you note with the implementation of this Project?
- 6. If a similar project is to be implemented in future, what recommendations do you give for improvement in terms of design, implementation, and coordination?

# A1: Key Informant Interview Tool (District and other Government Officials)

Name of Respondent..... Designation..... Entity..... Acceptance to be interviewed Yes...No... If No. Terminate Interview....

- 1. Briefly explain to us the role you played in the LEAP Program and the process that got you participate in its implementation.
- 2. Overall, how relevant was the program in terms of its design, purpose and results and in the context/circumstances in which it was executed?
- 3. Have you received any feedback from beneficiaries to explain to us what their views are of the program?
- 4. Were the planned outputs achieved on time and on budget?
- 5. To what extent did the program benefit UN Women management and delivery structure?
- 6. Did the program partners (in your assessment) demonstrate needed capacities to deliver the program?
- 7. What were the main program enabling and hindering factors to achieving planned outcomes and what actions need to be taken to overcome any barriers that limit required progress?
- 8. Do let us know if there were some exemplary cases of good performance that stood out or some unexpected outcomes that arose during the program's implementation.
- 9. What do you view UN Women's comparative advantage in implementing this type of project compared with other UN entities?
- 10. What lessons and recommendations can you suggest for a better similar intervention in this locality?

## Thank you

#### Annex 6: Evaluation Terms of Reference

# End of Program Evaluation: Prevention of COVID-19 infections among women and girls displaced into IDP and refugee camps in ESAR

### **UN Women Organizational Context**

The United Nations Entity for Gender Equality and the Empowerment of Women (UN Women), grounded in the vision of equality enshrined in the Charter of the United Nations, works for the elimination of discrimination against women and girls; the empowerment of women; and the achievement of equality between women and men as partners and beneficiaries of development, human rights, humanitarian action and peace and security. UN Women provides support to Member States' efforts and priorities in meeting their gender equality goals and for building effective partnerships with civil society and other relevant actors.

In March 2022, UN Women received funding from the Government of Japan to implement a one-year LEAP program that aimed at strengthening the protection, leadership and empowerment of over **6,360** vulnerable women, men and youth affected by COVID-19 and forcibly displaced into IDP and refugee camps in Uganda. This programme was designed to contribute to the immediate lifesaving and emergency needs of 6,360 (30 percent hosts) as direct beneficiaries in Kyegegwa, Yumbe and Adjumani refugee hosting districts. The project was to indirectly benefit with 10,000 (5,000 female and 5,000 male) refugee and host community women, men, girls and boys. The project aimed is to ensure that refugee women and girls are protected from the impacts of the emergency refugee crisis, and COVID-19 through the provision of gender-responsive COVID-19 services, protection and, enhancing women's leadership, capacity development and peaceful co-existence for better recovery and resilience.

## **Program Overview / Results**

Since April 2021, Uganda experienced an increase in protection and socio-economic vulnerability in the refugee crisis, due to the COVID-19 pandemic, as the country battled a second wave of viral infections, the lockdown measures and severe underfunding for humanitarian assistance. This proposed project sought to support women and girls affected by the COVID-19 crises and displaced into refugee and IDP camps in Uganda. It sought to facilitate a responsive environment, conducive for gender equality and that supports the needs of refugee and host women and girls, in conformity with human rights standards and international best practice.

#### **Overall Goal:**

To strengthen the protection, leadership and empowerment of over 15,760 vulnerable women, men and youth affected by COVID- 19 in IDP and refugee camp of Uganda and Somalia.

The program aimed at achieving the following Outcomes:

# <u>OUTCOME 1:</u> 4,530 vulnerable women, men and youth lead and participate in COVID-19 prevention, response and recovery interventions in Uganda.

**Output 1.1**: 3,000 Refugee and host community women have increased capacities & skills to participate and lead in the management of COVID-19 interventions within refugee and IDP camps in Uganda

**Output 1.3**: 1,530 women and men benefit from initiatives promoting positive gender norms in support of women's leadership and protection from violence and access to COVID-19 awareness and sensitization measures in Uganda.

# <u>OUTCOME 2:</u> Positive coping mechanisms improved for 1,830 vulnerable refugees, IDPs and host communities' women and girls most affected by COVID- 19 crisis in Uganda

**Output 2.1:** 500 women in refugee and host communities most affected by COVID- 19 have increased access to ICT skills and services through existing women empowerment centers in Uganda **Output 2.2:** 1,330 refugee women and girls affected by COVID- 19 have increased access to effective safety and protection services at the PCR testing and vaccination sites in Uganda.

## Purpose of the Evaluation

The <u>UN Women Evaluation Policy</u> is the main guiding document that sets forth the principles and organizational framework for evaluation planning, conduct and follow-up in UN Women. These principles are aligned with the <u>United Nations Evaluation Group (UNEG) Norms and Standards for Evaluation in the UN System</u>. The key principles for gender-responsive evaluation at UN Women are: 1) National ownership and leadership; 2) UN system coordination and coherence with regard to gender equality and the empowerment of women; 3) Innovation; 4) Fair power relations and empowerment; 5) Participation and inclusion; 6) Independence and impartiality; 7) Transparency; 8) Quality and credibility; 9) Intentionality and use of evaluation; and 10) Ethics.

The one-year COVID -19 response project funded by the Government of Japan whose implementation commenced in April 2022 will come to an end in March 2023. In line with the program requirements and the UN Women evaluation policy, an end of Programme evaluation is to be conducted to assess the performance of the Programme, provide accountability and enhance learning. The purpose of this independent end term evaluation is to assess the project's achievements against the set objectives, identify and document lessons learnt (including design issues, lessons and best practices that can be upscaled or replicated), and assess how the program contributed to gender equality and economic empowerment of refugee women in Kyegegwa, Yumbe and Adjumani districts.

It is a priority for UN Women that this end line program evaluation will be gender-responsive and will actively support the achievement of gender equality and women's empowerment, with emphasis on UN Women key areas central to supporting women and girls' empowerment in humanitarian action: Leadership and participation, Protection and safety, and Economic well-being.

The primary intended users of this evaluation are:

- Relevant staff in target ministries, local government and targeted government institutions, and participating CSOs
- Target beneficiary communities/groups
- Members of community leadership structures
- Relevant staff in participating UN-agencies.
- Staff of implementing partners
- Sector leads in the participating UN-agencies and refugee response coordination. UN Agencies technical working groups UNACs
- Development partners

Primary intended uses of this evaluation are:

- a. Information on the program's effectiveness will be used to inform decision making for the scale up of LEAP;
- b. Feedback, participation and accountability to affected communities
- c. Accountability for the development effectiveness of the LEAP to the donors and other stakeholders.
- d. Capacity development and mobilization of national stakeholders to advance gender equality and the empowerment of women.

### **Evaluation criteria and key questions**

The objectives of the evaluation are to:

- 1. Assess the **relevance** of LEAP COVID-19 response intervention in addressing the needs of refugee women and how gender equality principles were integrated in the program
- 2. Assess the **effectiveness and efficiency** of UN Women's approach for achievement of results, as defined in the logical framework
- 3. Identify **lessons learned and p**rovide **actionable recommendations** with respect to the strategy, and overall approach to UN Women's programming in humanitarian settings.

The evaluation will apply four UN Evaluation Group (UNEG) evaluation criteria (relevance, effectiveness, efficiency and coherence), as well as standards based on Human Rights and Gender Equality. The evaluation will seek to answer the following key evaluation questions and sub-questions:

Criterion	Questions				
Relevance	Was the Programme design appropriate to address the identified needs of beneficiaries?				
	Were the choice of interventions most relevant to the situation in the target thematic areas?				
Effectiveness & Efficiency	To what extent has UN Women achieved planned outputs and contributed to expected outcomes? Were the planned outputs achieved on time and on budget?				
To what extent did the UN Women management structure support efficient implementation and delivery of required results (including Risk and Fin Management)?					
	outcomes and what actions need to be taken to overcome any barriers that I required progress?				
	Did the IPs have access to the necessary skills, knowledge and capacities needed to deliver the program?				
Coherence	What was the UN Women's comparative advantage in implementing this type of project compared with other UN entities?				
Human Rights and Gender	Has the project been implemented according to human rights and development effectiveness principles: Participation/empowerment; Inclusion/non-discrimination;				
Equality	National accountability / transparency				

## Scope of the evaluation

The evaluation is an end of project evaluation and will cover all project activities implemented since March 2022 – February 2023. The evaluation will cover project beneficiaries i.e., refugees in Yumbe, Adjumani and Kyegegwa districts and the respective host communities.

The evaluation team is expected to undertake a rapid evaluability assessment in the Inception. This should include the following:

- 1. An assessment of the relevance, appropriateness and coherence of the implicit or explicit theory of change, strengthening or reconstructing it where necessary through a stakeholder workshop;
- 2. An assessment of the quality of performance indicators in the program, and the accessibility and adequacy of relevant documents and secondary data;
- 3. A review of the conduciveness of the context for the evaluation;
- 4. Ensuring familiarity with accountability and management structures for the evaluation.

## **Evaluation Approach and methodology**

The evaluation will be an external, independent and participatory exercise, which should be completed within a timeframe of 20 days spread over a period of 3 months beginning on 13<sup>th</sup> February 2023. The final evaluation methodology will document and analyze the distinct achievements of each programmatic pillar, while also assessing the ways in which efforts contributed to national implementation and program-level work influenced country advocacy and policy. The evaluation shall provide evidence-based information that is credible, reliable and useful and will be based on gender and human rights principles, as defined in the UN Women Evaluation Policy and adhere to the United Nations norms and standards for evaluation.

The evaluation methodology will employ mixed methods and an innovative approach for capturing results, while ensuring that the views of the most excluded groups of women are represented in the evaluation. An initial desk review and brief discussions with key stakeholders will support the refinement and finalization of the methodology and analytical framework. An important component of this evaluation will be the assessment of the results framework to assess whether the program remained on track to achieve expected outcomes.

The evaluation is expected to follow a collaborative and participatory approach ensuring close engagement with Programme beneficiaries, implementing partners, district local government leadership, Humanitarian actors, Office of the Prime minister and other key stakeholders as will be informed by the stakeholder mapping process. The analysis of the application of human rights and gender equality principles in LEAP interventions will be an integral part of the evaluation. Integration of human rights and gender equality issues into the evaluation requires adherence to three main principles – inclusion, participation, and fair power relations.

The main recommended phases of the evaluation methodology are:

## a) Inception Phase:

- Conduct an initial desk review of available documents, gather and analyze programme data, conceptualize the evaluation approach and develop an evaluation matrix, consult internally on the approach, develop data collection tools, stakeholder mapping, sampling strategy, engage reference group.
- Conduct inception interviews with key stakeholders to refine the evaluation scope and methodology.
- Draft an Inception Report that will be reviewed by the Evaluation Reference Group.
- Refine the evaluation methodology/question matrix based on Evaluation Reference Group's feedback and integrate proposed changes (as appropriate) into the final evaluation report.

### b) Data collection Phase

- Collect survey data from beneficiaries and key stakeholders as informed by the stakeholder analysis
   Conduct in-depth interviews with national UN Women staff, partner organizations, donor
  - representatives, and others as necessary.
- Deliver PowerPoint presentation of preliminary field key findings.

### c) Analysis and Report Writing Phase:

- Review and analyses all available data including staff, partner and stakeholder survey(s) and interpret findings.
- Prepare first draft of the evaluation report and submit to Evaluation Reference Group for comments and possible endorsement.
- Revise report based on the feedback from Evaluation Management Group and debriefing session (as appropriate).
- Compile final report.

### **Management of the Evaluation**

The evaluation and quality assurance will be managed by UN Women Uganda Country Office. The Consultant will be accountable to UN Women on behalf of the team and report to the Uganda CO Planning, Monitoring and Evaluation Specialist. The evaluation will be conducted in accordance with UN Women evaluation guidelines and UNEG norms and standards. Upon completion of the evaluation, UN Women has the responsibility to prepare a management response that addresses the findings and recommendations to ensure future learning and inform implementation of their relevant programmes, especially the Women Economic Empowerment and Women's Leadership programmes. For quality assurance, the evaluation report will be rated against the Global Evaluation Report Assessment & Analysis System (GERAAS).

Annex 7.	<b>Evaluation Matrix</b>			
Evaluation Criteria	Evaluation Questions	What to Look out for	Data Sources	Data collection Method (s)
Relevance	Was the Program design appropriate to address the identified needs of women, girls, boys and men?	<ul> <li>Program design based on needs assessment/baseline</li> <li>Contribution or influence of partners or funding agencies in determination/selection of interventions</li> <li>The extent to which arrival of design was participatory and beneficiary-sensitive</li> </ul>	<ul> <li>UN Women reporting (pre-entry design, baseline or contextualization at proposal stage)</li> <li>Implementing Partner reports</li> <li>Government and Local Governments in the program areas</li> </ul>	<ul> <li>Key informant interviews</li> <li>Literature review lead by the Program approved proposal and Program Document</li> <li>Analysis of data from interviews with beneficiaries and implementing partners</li> </ul>
	Were the choice of interventions most relevant to the situation in the target thematic areas?	<ul> <li>Extent to which the intended beneficiaries' concerns/needs informed the design</li> <li>Extent to which the programme met other potential needs beyond what was targeted</li> <li>Nesting of the program within the broader UN Women agenda under UN SDGs, Uganda's National programs as led by the NDP IIII and Vision 2040 and planning in district local governments</li> </ul>	<ul> <li>Program Documents</li> <li>Implementing Partners</li> <li>Government and Local Governments in the program areas</li> </ul>	<ul> <li>Key informant interviews</li> <li>Literature review lead by the Program approved proposal and Program Document</li> <li>Analysis of data from interviews with beneficiaries and implementing partners</li> </ul>
Effectiveness and Efficiency	To what extent has UN Women achieved planned outputs and contributed to expected outcomes? Were the planned outputs achieved on time and on budget?	<ul> <li>Performance of the interventions against the targets spelt out in the program document to date. The reference will be to the following specific questions:</li> <li><u>Level of</u> increased capacities &amp; skills to participate and lead in the management of COVID-19 interventions</li> <li>No. of women and men who benefited from <u>initiatives promoting positive gender norms in support of women's leadership and protection from</u></li> </ul>	<ul> <li>UN Women Program reporting</li> <li>Reporting from implementing partners in Yumbe, Adjumani and Kyegegwa</li> </ul>	<ul> <li>Performance reports</li> <li>Analysis of data from interviews with the various implementing partners and beneficiaries</li> <li>Case Studies</li> </ul>

Evaluation Criteria	Evaluation Questions	What to Look out for	Data Sources	Data collection Method (s)
	To what extent did the UN Women management structure support efficiency for implementation and delivery of required results (including Risk and Financial Management)?	<ul> <li><u>violence</u> and access to COVID-19 awareness and sensitization measures</li> <li>✓ <u>No. of</u> women that accessed ICT skills and services through existing women empowerment canters in Uganda</li> <li>✓ No. of refugee women and girls affected by COVID- 19 increased access to effective safety and protection services at the PCR testing and vaccination sites.</li> <li>✓ Timeliness delivery of program activities, commodities and services as well as in reporting and accountability</li> <li>Structure of financing of the program per tranche and objective against the program memorandum as approved</li> <li>Risk analysis and mitigation strategies</li> <li>Assessment on whether expenditure was fitfor-purpose, sufficient, timeliness (in release of funds and sufficient time to implement the project) timely</li> <li>Any adjustments to ensure efficiency in spending that could have been made as innovations</li> <li>How did the program address the human resource management aspects (probe for deployment of the right implementation partners and capacities thereof their remuneration and delivery in terms of time and efficiency?</li> </ul>	<ul> <li>Financial reports</li> <li>Audited accounts</li> </ul>	<ul> <li>UN Women reporting</li> <li>Reporting from the key implementing partners</li> <li>Financial analysis (looking at expenditure assignments and audit reports if available)</li> </ul>

Evaluation Criteria	Evaluation Questions	What to Look out for	Data Sources	Data collection Method (s)
		<ul> <li>Did the implementing partners deliver and report on time in adherence to the monitoring and appraisal plan?</li> </ul>		
	What were the main program enabling and hindering factors to achieving planned outcomes and what actions need to be taken to overcome any barriers that limit required progress?	<ul> <li>Factors that contributed to success or the lack thereof</li> <li>Political, social, technological economic, environmental or legal aspects that contributed to performance as it has become</li> </ul>	<ul> <li>UN Women reporting from Yumbe, Adjumani and Kyegegwa</li> </ul>	<ul> <li>Interviews with program officials on site and in Kampala</li> <li>Review of literature on similar time and context interventions by implementing partners e.g., UNHCR, OPM and other intervening partners during the COVID-19 pandemic</li> </ul>
	Did the Implementing partners have the necessary skills, knowledge and capacities needed to deliver the program?	<ul> <li>Review of the profile past expertise and competence scan of the IPs and the expertise of the staff deployed to work with UN Women and beneficiaries especially in the field, at oversight and at delivery levels.</li> </ul>	<ul> <li>Reports produced (assessment of quality thereof)</li> <li>Interviews and commentaries about IPs performance</li> </ul>	<ul> <li>Investigative inquiry technique and</li> <li>Report content analysis</li> </ul>
	Unintended outcomes that either hindered or supported the interventions (not initially envisaged	<ul> <li>Positive or negative aspects as a result of the intervention but not in the project logic or design</li> </ul>	<ul> <li>Interviews Notes</li> </ul>	<ul> <li>Investigative inquiry technique and</li> <li>Report content analysis</li> </ul>
Coherence	What was the UN Women's comparative advantage in implementing this type of project compared with other UN entities?	<ul> <li>What unique attributes made UN Women better placed/positioned at in implementing this program (thereby giving it a comparative advantage) in comparison to other agencies</li> </ul>	<ul> <li>Illustrational text exemplary UN Women approaches during implementation</li> </ul>	<ul> <li>Interview of implementing partners</li> </ul>

<b>Evaluation Criteria</b>	Evaluation Questions	What to Look out for	Data Sources	Data collection Method (s)
Human Rights and	Has the project been	In the implementation of the project did you	Case Studies (3) of	<ul> <li>Interview of selected</li> </ul>
Gender Equality	implemented according	observe the rights of the beneficiaries?	demonstrable change of	beneficiaries that feel their
	to gender, human rights	Were these beneficiaries feel that their rights	behavior pattern for	human rights were respected
	and disability inclusion,	were upheld?	instance empowerment	during project
	development	<ul> <li>Were aspects of gender equality</li> </ul>	to overcome gender-	implementation
	effectiveness principles?	emphasized? Also probe for: sex and gender	based violence under	
		data disaggregation	the COVID-19 pandemic	
		Participation/empowerment; disability		
		Inclusion/non-discrimination; exposure to		
		GBV and PSEA		



