



Terms of Reference

United Nations Population Fund (UNFPA) Viet Nam 10th Country Programme (2022 - 2026)

Country Programme Evaluation

March 2025

Contents

1. Introduction	1
2. Country Context	3
3. UNFPA Country Programme	5
4. Evaluation Purpose, Objectives and Scope	10
4.1. Purpose	10
4.2. Objectives	10
4.3. Scope	11
5. Evaluation Criteria and Preliminary Evaluation Questions	11
5.1. Evaluation Criteria	12
5.2. Preliminary Evaluation Questions	13
6. Approach and Methodology	16
6.1. Evaluation Approach	16
6.2. Methodology	17
7. Evaluation Process	21
8. Expected Deliverables	24
9. Quality Assurance and Assessment	25
10. Indicative Timeframe and Work Plan	27
11. Management of the Evaluation	30
12. Composition of the Evaluation Team	32
12.1. Roles and Responsibilities of the Evaluation Team	33
12.2. Qualifications and Experience of the Evaluation Team	35
13. Budget and Payment Modalities	40
14. Bibliography and Resources	42
15. Annexes	43

Acronym

APRO	UNFPA Asia Pacific Regional Office
AWP	Annual Workplan
CO	Country Office
CP	Country Programme
CP10	UNFPA's 10th Country Programme
CPAP	Country Programme Action Plan
CPD	Country Programme document
CPE	Country Programme Evaluation
CSAGA	Center for Studies and Applied Sciences in Gender - Family - Women and Adolescents
CSO	Civil Society Organization
DaO	Delivering as One (UN)
DVP	Domestic violence prevention
FP	Family planning
GBV	Gender-based violence
GBV	Gender-based Violence
GDP	Gross Domestic Product
GNI	Gross National Income
GSO	General Statistics Office
GoVN	Government of Viet Nam
HAIV	HelpAge International Viet Nam
HDI	Human Development Index
HIV	Human immunodeficiency virus
ICPD	International Conference on Population and Development
JWP	Joint Workplan
M&E	Monitoring and Evaluation
MIC	Middle income country
MNH	Maternal and newborn health
MOCST	Ministry of culture, sports and tourism
MoH	Ministry of Health
MOHA	Ministry of Home Affairs
MOLISA	Ministry of Labour, Invalids and Social Affairs
MPI	Ministry of Planning and Investment
MTR	Mid-Term Review
NGO	Non-governmental organisation
NIP	National implementing partner
ODA	Official Development Assistance

PCSA	Parliamentary Committee for Social Affairs
PD	Population and Development
PO	Programme Officer
PPP	Purchasing power parity
RBM	Results-based management
RFF	Results and Resources Framework
RH	Reproductive health
SEDP	Socio-Economic Development Strategy
SDG	Sustainable Development Goals
SDGCW	Sustainable Development Goals for Children and Women Survey
SRB	Sex ratio at birth
SRH	Sexual and reproductive health
SRHR	Sexual and reproductive health and rights
TOR	Terms of Reference
UNCT	United Nations Country Team
UNDAF	United Nations Development Assistance Framework
UNEG	United Nations Evaluation Group
UNFPA	United Nations Population Fund
UNSDCF	United Nations Sustainable Development Cooperation Framework
UNFPA SP	UNFPA Strategic Plan
UNSDCF/CF	United Nations Sustainable Development Cooperation Framework
VFU	Viet Nam Farmers' Union
VYU	Viet Nam Youth Union
YEE	Young and emerging evaluator

1. Introduction

The United Nations Population Fund (UNFPA) is the lead United Nations agency for delivering a world where every pregnancy is wanted, every childbirth is safe and every young person's potential is fulfilled. The strategic goal of UNFPA is to “achieve universal access to sexual and reproductive health, realize reproductive rights, and accelerate progress on the implementation of the Programme of Action of the International Conference on Population and Development (ICPD). With this call to action, UNFPA contributes directly to the 2030 Agenda for Sustainable Development, in line with the Decade of Action to achieve the Sustainable Development Goals”.¹

In pursuit of this goal, UNFPA works towards three transformative and people-centered results: (i) end preventable maternal deaths; (ii) end unmet need for family planning; and (iii) end gender-based violence (GBV) and all harmful practices, including female genital mutilation and child, early and forced marriage. These transformative results contribute to the achievement of all the 17 Sustainable Development Goals (SDGs), but directly contribute to the following: (a) ensure healthy lives and promote well-being for all at ages (Goal 3); (b) achieve gender equality and empower all women and girls (Goal 5); (c) reduce inequality within and among countries (Goal 10); take urgent action to combat climate change and its impacts (Goal 13); promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels (Goal 16); and strengthen the means of implementation and revitalize the Global Partnership for Sustainable Development (Goal 17). In line with the vision of the 2030 Agenda for Sustainable Development, UNFPA seeks to ensure increasing focus on “leaving no one behind”, and emphasizing “reaching those furthest behind first”.

UNFPA has been operating in Viet Nam since 1977. The support that the UNFPA Viet Nam Country Office (CO) provides to the Government of Viet Nam under the framework of the 10th Country Programme (CP) (2022-2026) builds on national development needs and priorities articulated in the National Plan of Action for the Viet Nam Sustainable Goals (VNSGs) for the Decade of Action, the new Socio-Economic Development Plan (SEDP) 2021-2026 under the Socio-Economic Development Strategy (SEDS) 2021-2030, the Common Country Analysis (CCA) and the Situation Analysis for the 10th UNFPA Viet Nam Country Programme 2022-2026, and the United Nations Sustainable Development Cooperation Framework (UNSDCF).

The 2024 UNFPA Evaluation Policy encourages CO to carry out CPEs every programme cycle, and as a minimum every two cycles.² The CPE was not conducted in the 9th CP cycle, thus the current CP evaluation is mandatory. The country programme evaluation (CPE) will provide an independent assessment of the performance of the UNFPA 10th country programme(2022-2026) in Viet Nam, and offer an analysis of various facilitating and constraining factors influencing programme delivery and the achievement of intended results. The CPE will also draw conclusions and provide a set of actionable recommendations for the next programme cycle.

¹ [UNFPA Strategic Plan 2022-2025](#)

² [UNFPA Evaluation Policy](#) 2024, p. 22.

The evaluation will be implemented in line with the [UNFPA Evaluation Handbook](#). The [Handbook](#) provides practical guidance for managing and conducting CPEs to ensure the production of quality evaluations in line with the United Nations Evaluation Group (UNEG) norms and standards and international good practice for evaluation.³ It offers step-by-step guidance to prepare methodologically robust evaluations and sets out the roles and responsibilities of key stakeholders at all stages of the evaluation process. The [Handbook](#) includes links to a number of tools, resources and templates that provide practical guidance on specific activities and tasks that the evaluators and the CPE manager perform during the different evaluation phases. The evaluators, the CPE manager, CO staff and other engaged stakeholders are required to follow the full guidance of the [Handbook](#) throughout the evaluation process.

The main audience and primary intended users of the evaluation are: (i) The UNFPA Viet Nam CO; (ii) the Government of Viet Nam; (iii) implementing partners of the UNFPA Viet Nam CO; (iv) rights-holders involved in UNFPA interventions and the organizations that represent them (in particular women, adolescents and youth); (v) the United Nations Country Team (UNCT); (vi) UNFPA Asia-Pacific Regional Office (APRO); and (vii) donors. The evaluation results will also be of interest to a wider group of stakeholders, including: (i) UNFPA headquarters divisions, branches and offices; (ii) the UNFPA Executive Board; (iii) academia; and (iv) local civil society organizations and international NGOs. The evaluation results will be disseminated as appropriate, using traditional and digital channels of communication.

The evaluation will be managed by the CPE manager within the UNFPA Viet Nam CO in close consultation with the Government of Viet Nam Ministry of Finance that coordinates the country programme, with guidance and support from the regional monitoring and evaluation (M&E) adviser at the APRO, and in consultation with the evaluation reference group (ERG) throughout the evaluation process. A team of independent external evaluators will conduct the evaluation and prepare an evaluation report in conformity with these terms of reference and the detailed guidance in the Handbook.

2. Country Context

Since the introduction of Doi Moi (“Reform”) policies in 1986, Viet Nam, with a population of over 97 million people (2020), has been transformed from one of the poorest nations into a lower middle income country (MIC) and one of the fastest growing economies in Asia, along with a dynamic, highly open market economy with socialist orientation and one party political system. GDP per capita increased by 2.7 times between 2002 and 2018, and more than 45 million people have been lifted out of absolute poverty. Despite the COVID-19 pandemic, Viet Nam is among the few countries in the world to achieve positive economic growth of 2.9% in 2020.

The Government of Vietnam aims to achieve the Sustainable Development Goals (SDGs) through its new Socio-Economic Development Strategy for 2021-2030 (SEDS). According to the latest Voluntary National

³ UNEG, Norms and Standards for Evaluation (2016). The document is available at <https://www.unevaluation.org/document/detail/1914>

Review (VNR) 2023 Report on implementing SDGs, regardless of the COVID-19 pandemic impacts on the country's economy, the SDG index slightly dropped from 73.8 in 2020 to 72.8 in 2021 and recovered to 73.3 in 2023. Viet Nam has made remarkable progress towards SDG 1, SDG 6, SDG 9, SDG 10, SDG 16, and SDG 17.

Over the past two decades, Viet Nam has achieved good progress in maternal health, reducing maternal mortality by 75% - from 165 deaths per 100,000 live births in 2000 to 46 in 2022. This achievement stands in contrast to the global reduction of 34% over the same period. Furthermore, over 60% of women aged 15-49 now use modern contraceptives, showcasing advancements in family planning and reproductive health.

Although Viet Nam has made substantial progress in improving the sexual and reproductive health status of the general population in the past decades, there exist challenging issues and disparities in sexual and reproductive health and rights (SRHR) that need to be addressed to ensure better SRHR for everyone to contribute to the joint efforts to make sure no one is left behind. The maternal mortality ratio (MMR) still remains as high as 100-150 per 100,000 live births in mountainous and ethnic minority regions, particularly in Northern Midlands and Mountains, and Central Highlands. At the national level, the percentage of women receiving at least 4 antenatal care visits and healthcare facility-based delivery is very good at 88.2% and 96.3%, respectively. In contrast, these percentages are just 10.6% and 37% in Mong ethnic group. The total unmet need for family planning is 10.1% in the national average, but much higher at 17.7% among ethnic minorities in remote mountainous regions (UNFPA, 2021) and even worse at 40.7% among sexually active women who are currently unmarried or not in union. Nationwide, the abortion ratio is 68 per 1,000 live births, but this ratio is 196.9 per 1,000 live births in Ha Noi and 127.5 per 1,000 live births in the Red River Delta region.

There remain inequities and gaps in sexual and reproductive health, and participation in policy development amongst adolescents and young people, particularly among marginalised youth. Barely 18% of young women aged 15-19 made their own informed decisions regarding sexual intercourse and contraceptive use compared with 68% of women aged 35-39 years. And whilst contraceptive use has increased nationally, the unmet need for modern contraceptives among unmarried people is 4 times higher than that of married people. They lack adequate and comprehensive information and services, and the situation is accentuated among ethnic minorities and PWDs.

Cervical cancer has emerged as the second most common cancer affecting SRHR status for women. As reported by UNFPA Vietnam and the Cancer Council New South Wales, Australia in 2021, cervical cancer was the sixth most common cancer in women in Viet Nam with 4,177 new cases (7.1 per 100,000 women) and 2,420 deaths (4.0 per 100,000 women) annually. Unless preventative action is taken, a total of 218,907 Vietnamese women are expected to die from cervical cancer by 2070 and 449,656 by 2120. Regarding cervical cancer prevention measures, only 28.2% of women were screened for cervical cancer and 12.0% vaccinated with HPV vaccines (15.6% in urban and 9.2% in rural areas).

Viet Nam is one of the most rapidly ageing countries in the world. In 2019, people aged 60 and older accounted for 11.9 percent of the total population, and by 2050, this proportion is expected to increase

to more than 25 percent. This demographic change occurs not only because of a reduction in mortality and an increase in life expectancy, but largely due to a sharp decline in fertility over the past few decades, resulting in a rapid ageing process. Life expectancy at birth stands at 73.6 years (71 years for men and 76.3 years for women), and the total fertility rate (TFR) has nearly halved from 3.8 in 1989 to 2.09 in 2019. By 2036, Vietnam is expected to enter the aging population phase, transitioning from an “ageing” to an “aged” society. This rapid pace of aging is generating challenges to the existing social protection and healthcare systems in adequately addressing the needs of the elderly. The poverty rate of older persons is 8.8%, twice as high as the national average, and it is worse among ethnic minorities and elderly women. Currently, 48% of older people are not covered by social protection schemes, and 1.3% of people aged 60 to 79 are supported by the national pension schemes. The incidence of disability also increases with age, and 80% of PWDs are old people aged 60 and above.

Viet Nam is facing gender inequality such as gender-based violence (GBV), gender biased sex selection (GBSS) and vulnerability to harmful social norms. According to the 2019 national study on violence against women, nearly two in three women aged 15–64 have experienced at least one form of physical, sexual, psychological, and/or economic violence in their lifetime. This issue remains deeply hidden in Vietnamese society, with over 90% of women who experience violence not seeking help from public services, and half never disclosing their experiences to anyone. GBV is costing the country 1.81% of GDP, primarily due to productivity loss, absenteeism, damage, and recovery costs. Supporting survivors of gender-based violence is in line with Viet Nam’s National Programme on GBV Prevention and Response 2021-2025 and the amended Law on Domestic Violence Prevention and Control, which was adopted by the National Assembly in November 2022. These legal and policy instruments highlight the need to establish effective models and facilities to prevent domestic violence and to support survivors.

Viet Nam is highly vulnerable to a range of natural disasters, largely due to its geographical location and the impact of climate change. Located in a typhoon-prone region, Viet Nam experiences frequent and severe flooding, particularly in the Mekong and Red River deltas, as well as along its extensive coastline. These storms cause significant damage to infrastructure and coastal communities. Droughts are a significant concern, particularly in the central and southern regions, affecting agriculture and water resources. Saltwater intrusion, especially in the Mekong Delta, is a growing problem due to rising sea levels and reduced river flows. In mountainous areas, heavy rainfall can trigger landslides, posing a threat to lives and property. Climate change is intensifying the frequency and severity of these natural disasters, thereby increasing risks and vulnerabilities. In 2024, natural disasters were devastating and extreme, leaving 514 people dead or missing and causing estimated economic losses of over 88.748 trillion VND (3.48 billion USD) according to estimates of the Ministry of Agriculture and Rural Development.

3. UNFPA Country Programme

The CCA highlights the importance of addressing inequality to achieve SDGs in Viet Nam, and the UNSDCF therefore pays close attention to the needs of the most vulnerable and disadvantaged population groups in its theory of change through four Outcome areas of focus: (a) inclusive social development; (b) climate change, disaster resilience, and environmental sustainability; (c) shared prosperity through economic

transformation; and (d) governance and access to justice. Those left furthest behind include: women and girls, adolescents and youth, the elderly, ethnic minorities, migrant workers, people with disabilities (PWDs), and survivors of gender-based violence.

To achieve the UNFPA transformative results of zero preventable maternal deaths, zero unmet need for family planning and zero GBV and other harmful practices, the 10th Country Programme (2022-2026) was designed in accordance with the UNSDCF, focusing on the following UNSDCF outcome areas:

- Outcome 1: By 2026, people in Viet Nam, especially the poor and those at risk of being left behind, will benefit from inclusive, gender-responsive, disability-sensitive, equitable, affordable and quality social services and social protection systems, will have moved further out of poverty in all its dimensions, and will be empowered to reach their full potential (SDGs 1-4 and 6).
- Outcome 4: By 2026, people in Viet Nam, especially those at risk of being left behind, will have benefited from and have contributed to a more just, safe and inclusive society based on improved governance, more responsive institutions, strengthened rule of law, and the protection of and respect for human rights, gender equality, and freedom from all forms of violence.

The 10th Country Programme was developed following extensive consultations with the Vietnamese government and other national and international stakeholders, supports the implementation of the National Plan of Action for the Viet Nam Sustainable Development Goals for the Decade of Action and the new Socio-Economic Development Plan, 2021-2026, under the Socio-Economic Development Strategy 2021-2030 framework. Through addressing the nation's population dynamics and related challenges, the overall goal/vision of the 10th country programme is to contribute to (a) inclusive social development; and (b) governance and access to justice, under "leaving no one behind" and reduce inequality and vulnerabilities. Rights-based, gender-sensitive, and people-centred approaches are used, and interventions concerning humanitarian preparedness and response are mainstreamed across all intervention areas of the proposed programme.

The UNFPA Viet Nam 10th country programme (2022-2026) has 6 thematic areas of programming and interconnected **outputs**: (i) adolescents and youth (ii) Population ageing and social protection; (iii) Equitable access to sexual and reproductive health and rights; (iv) Data and evidence for policy and programme-making; (v) Gender-based violence and harmful practices; and (vi) Multisectoral response to gender-based violence and other harmful practices. All outputs contribute to the achievement of the Strategic Plan 2022-2025 outcomes, UNSDCF outcomes and national priorities; they have a multidimensional, 'many-to-many' relationship with these outcomes.

Output 1: Adolescents and youth

An enabling environment is created to support comprehensive youth development and participation, including in disaster management policies and programmes and to advance the ICPD Programme of Action.

This has been delivered through: (a) expanding mechanisms/platforms for dialogue between policy/decision-makers and young people, particularly vulnerable youth, including ethnic minorities, migrant workers, and young people with disabilities; (b) capacitating young people on their effective participation in dialogue sessions at national and subnational levels; (c) partnering with youth-led

organizations, especially those led by vulnerable youth, in the implementation and management of the Youth Law as well as its national and provincial implementation plans and for humanitarian action; (d) promoting and advocating for young people in decision-making positions; and (e) monitoring youth development through data generation and the use of national youth development indicators, which are regularly compared with other ASEAN countries.

Output 2: Population ageing and social protection

The integrated and coherent social protection system is enhanced, applying life-cycle and gender-transformative approaches for ageing and meeting the individual needs of the most vulnerable groups.

This has been delivered through: (a) developing the legal and policy framework, adopting life-cycle and gender transformative approaches for the protection of the rights of individuals into old age and their empowerment and social inclusion in development and humanitarian settings, particularly concerning access to high-quality health care, prevention and response to domestic violence, employment opportunities and financial security; (b) developing a comprehensive care system, including institutional and community care, focusing particularly on vulnerable groups, such as ethnic minorities, people with disabilities, and survivors of domestic violence; (c) supporting evidence-based policymaking on ageing and care as well as communication to the public on ageing, taking life-cycle and gender-transformative approaches; and (d) facilitating private-sector investment in the provision of care for older persons and the application of digital technology in elderly care.

Output 3: Equitable access to sexual and reproductive health and rights

Vulnerable groups, including ethnic minorities, adolescents and youth, people with disabilities and migrant workers, have increased equitable access to comprehensive and gender-transformative SRHR information and services, including in the humanitarian-development nexus.

This has been delivered through: (a) data generation, analysis and transformation for policies, guidelines and tools that address the special needs of vulnerable populations; (b) elaboration of innovative financing mechanisms, including private-sector financing and subnational public financing, particularly to address emerging SRHR issues such as cervical cancer screening and human papillomavirus vaccinations; (c) application of digital technologies such as “telehealth” to cover hard-to-reach remote and ethnic minority locations; (d) enhancing the health information management information system; (e) strengthening mechanisms for humanitarian preparedness and response to ensure the protection of vulnerable populations; and (f) supporting a multisectoral approach to SRHR for young people and a nation-wide roll-out of comprehensive sexuality education and life-skill education, including HIV prevention, including through e-learning for in-school and out-of-school youth as well as young people with disabilities.

Output 4: Data and evidence for policy and programme-making

Evidence-based and rights-based policy and programme-making, budgeting and monitoring are strengthened based on data production, analysis and use.

This has been delivered through: innovating data technologies and communication platforms to speed up the data generation process and minimize human errors by (a) improving the capacity of data producers to collect, analyse and disseminate disaggregated data on population and sexual and reproductive health issues to fully achieve the demographic dividend potential; (b) equipping policymakers with knowledge and skills on application of new data sources; (c) exploring new data sets (new surveys, big data, sectoral

and intersectoral administrative data) and data communication and management (data dashboards) to support evidence-based population policy development, which can also be used for disaster management and climate action; (d) developing capacities for data utilization to support evidence-based advocacy and policy development; and (e) preparing investment cases for SRHR, particularly to strengthen public financial management systems at subnational levels for ensuring adequate budget allocation and expenditures for SRHR..

Output 5: Gender-based violence and harmful practices

Harmful attitudes that accept violence and perpetuate gender inequality, especially those of young people, are transformed to reduce GBV and other harmful practices, including in the humanitarian-development nexus.

This has been delivered through: (a) evidence-based advocacy and technical advice for the revision of the Law on Domestic Violence Prevention and Control and other related laws and policies, in line with international best practices, where appropriate; (b) evidence-based community mobilization initiatives in the context of digital transformation, targeting particularly young people and adolescents, with the participation of men and boys, to prevent GBV and harmful practices, focusing on vulnerable groups; and (c) pilot and innovative evidence-based male engagement strategies to address toxic masculinity and help to develop healthy relationships.

Output 6: Multisectoral response to gender-based violence and other harmful practices

A multisectoral response is strengthened to address gender-based violence and other harmful practices at national and subnational levels.

This has been delivered through: (a) expansion and institutionalization of one-stop service centres by State agencies, which provide, in line with the United Nations Essential Service Package guidelines, integrated services, including health and psychological care, social services, police protection and legal advice; (b) development of national guidelines for a multisectoral coordinated GBV response, clarifying roles and responsibilities of each sector and establishing a referral mechanism for survivor-centred service provision, including to people with disabilities, ethnic minorities and migrant workers; (c) strengthened governance for multisectoral coordination at national and subnational levels, applicable across the humanitarian-development nexus; and (d) strengthened GBV administrative data systems to ensure survivor-centred data collection, to enhance GBV programming.

The UNFPA Vietnam CO delivers its country programme through the various modes of engagement: (i) advocacy and policy dialogue, (ii) capacity development, (iii) knowledge management, (iv) partnerships and coordination, and (v) service delivery. In line with the Government's priorities, attention was also given to digital transformation and the data revolution, as well as the effective utilisation of information and communication technology, particularly to reach those furthest behind.

By the end of 2024, all identified CP10 interventions have been implemented by the CO. Due to changes in institutional frameworks and policies affecting the management of official development aid (ODA), which have caused delays in the approval of projects by partner ministries and agencies during the initial phases of the Country programme, UNFPA has opted for a direct implementation approach and has collaborated with new partners to ensure that programme objectives are met. In addition, UNFPA has

been involved in shaping the new draft Law on Population, creating research and advocating for policies to enhance public understanding of the aging population issue. The recent legislation, along with the planning of a National Targeting Programme on Population and Development for 2026-2035, which is scheduled to be submitted to the National Assembly for approval in 2025, is paving the way for UNFPA to contribute to the country's agenda on population and development. In addition to enabling robust population data for effective policy making, other strategic interventions have also gathered encouraging achievement such as partnering with government Ministries, Departments and other stakeholders to develop plans to roll-out HPV vaccinations, scale up the One Stop Service Centres (Ngoi nha Anh Duong) and National Hotline to support survivors of GBV, support life skills and comprehensive sexuality education for young people.

Regarding humanitarian response, in 2024, UNFPA donated dignity kits and cash assistance to GBV survivors and women at risk, pregnant women, and female older persons in provinces affected by Typhoon Yagi, including adolescents and youth. It is estimated that 5,650 women in affected provinces have benefited from life-saving interventions supported by UNFPA as part of this humanitarian mission.

The UNFPA Viet Nam CO also engages in activities of UNCT's working groups, with the objective to ensure inter-agency coordination and the efficient and effective delivery of tangible results in support of the national development agenda and the SDGs. UNFPA co-chairs the Results Group for Outcome 4 (Governance and Access to Justice). Beyond the UNCT, the UNFPA Viet Nam CO participates in the Humanitarian Country Team (HCT) to ensure that inter-agency humanitarian action is well-coordinated, timely, principled and effective, to alleviate human suffering and protect the lives, livelihoods and dignity of people affected by humanitarian crisis. When Typhoon Yagi struck Vietnam in September 2024, UNFPA actively contributed to the establishment of the first-ever Vietnam UN Pooled Fund to support Typhoon Yagi recovery efforts, thereby strengthening partnerships and an efficient mechanism across donors to address emerging humanitarian needs swiftly.

The central tenet of the CPE is the country programme theory of change and the analysis of its logic and internal coherence. The theory of change describes how and why the set of activities planned under the country programme are expected to contribute to a sequence of results that culminates in the strategic goal of UNFPA is presented in Annex A. The theory of change will be an essential building block of the evaluation methodology. The country programme theory of change explains how the activities undertaken contribute to a chain of results that lead to the intended or observed outcomes. At the design phase, the evaluators will perform an in-depth analysis of the country programme theory of change and its intervention logic. This will help them refine the evaluation questions (see preliminary questions in section 5.2), identify key indicators for the evaluation, plan data collection (and identify potential gaps in available data), and provide a structure for data collection, analysis and reporting. The evaluators' review of the theory of change (its validity and comprehensiveness) is also crucial with a view to informing the preparation of the next country programme's theory of change.

The UNFPA Viet Nam 10th country programme (2022-2026) is based on the results framework presented in Annex E. The design report will include a table for "Country Programme Intervention Areas" with (1) activities that were initially planned and implemented; (2) activities that were not initially planned, yet

were implemented (for example in response to a humanitarian emergency); and (3) activities that were initially planned but were not implemented.

4. Evaluation Purpose, Objectives and Scope

4.1. Purpose

The CPE will serve the following four main purposes, as outlined in the 2024 UNFPA Evaluation Policy: (i) enhance oversight and accountability to stakeholders by assessing progress towards results and resource use; (ii) support evidence-based decision-making to inform development, humanitarian response and peace-responsive programming; (iii) promote organisational learning by identifying what works, what does not, for whom, under what circumstances, and why; and (iv) empower community, national and regional stakeholders.

4.2. Objectives

The **objectives** of this CPE are:

- i. To provide the UNFPA Viet Nam CO, national stakeholders and rights-holders, the UNFPA APRO, UNFPA Headquarters, and a wider audience with an independent assessment of the UNFPA Viet Nam 10th country programme (2022-2026).
- ii. To broaden the evidence base to inform the design of the next programme cycle.

The **specific objectives** of this CPE are:

- i. To provide an independent assessment of the relevance, coherence, effectiveness, efficiency and sustainability of UNFPA support.
- ii. To provide an assessment of the role played by the UNFPA Viet Nam CO in the coordination mechanisms of the UNCT, with a view to enhancing the United Nations collective contribution to national development results.
- iii. To draw key conclusions from past and current cooperation and provide a set of clear, forward-looking and actionable recommendations for the next programme cycle.

4.3. Scope

Geographic Scope

The evaluation process will not restrict itself to the 36 provinces and cities where UNFPA has conducted its interventions, but will also consider additional areas within the 63 provinces and cities where national level interventions were implemented. The specific provinces/cities included in the field phases will be identified in the design report in accordance with the respective methodology and sampling strategy.

Thematic Scope

The evaluation will cover all of the following thematic areas of the 10th CP: (i) Adolescents and youth, (ii) Population ageing and social protection, (iii) Equitable access to sexual and reproductive health and rights, (iv) Data and evidence for policy and programme-making, (v) Gender-based violence and harmful

practices (vi) Multisectoral response to gender-based violence and other harmful practices. In addition, the evaluation will cover cross-cutting issues, such as human rights; gender equality; disability inclusion, etc., and transversal functions, such as coordination; monitoring and evaluation (M&E); innovation; resource mobilization; strategic partnerships, etc.

The following two assessments, conducted during the CP cycle under evaluation, will also inform the CPE:

- The mid-term review of the 10th country programme was conducted in late 2024 and completed in Q1 2025, aiming to document lessons learned and best practices, as well as provide recommendations on the implementation of the CPI0 for the remaining period until 2026, toward achieving the expected results. This MTR also provides key inputs for the Country Programme Evaluation (CPE) and the design of the Eleventh Country Programme for the period 2027-2031.
- Viet Nam has been selected as a desk-based case study for the global evaluation of UNFPA support to the 2020 round of population and housing censuses to provide evidence to support the development and implementation of the UNFPA strategy for the 2030 census round. The evaluation aims to assess: a) UNFPA's strategic positioning for census support; b) the effectiveness of UNFPA support to conduct, analyze, disseminate and use censuses, and c) the technical capacity and partnerships of UNFPA to provide effective census support.

Temporal Scope

The evaluation will cover interventions planned and/or implemented within the time period of the current CP until the evaluation: January 2022 mid-2025.

5. Evaluation Criteria and Preliminary Evaluation Questions

5.1. Evaluation Criteria

In accordance with the methodology for CPEs outlined in section 6 (below) and in the [UNFPA Evaluation Handbook](#), the evaluation will examine the following five OECD/DAC evaluation criteria: relevance, coherence, effectiveness, efficiency and sustainability.⁴ Furthermore, the evaluation will use the humanitarian-specific evaluation criteria of coverage: to what extent UNFPA has been able to provide life-saving services to affected populations that are hard-to-reach.

Criterion	Definition
Relevance	The extent to which the intervention objectives and design respond to rights-holders, country, and partner/institution needs, policies, and priorities, and continue to do so if circumstances change.

⁴ The full set of OECD/DAC evaluation criteria, their definitions and principles of use are available at: <https://www.oecd.org/dac/evaluation/revised-evaluation-criteria-dec-2019.pdf>. Note that OECD/DAC criteria impact, but this is beyond the scope of the CPE.

Coherence	The compatibility of the intervention with other interventions in the country, sector or institution. The search for coherence applies to other interventions under different thematic areas of the UNFPA mandate which the CO implements (e.g. linkages between SRHR and GBV programming) and to UNFPA projects and projects implemented by other UN agencies, INGOs and development partners in the country.
Effectiveness	The extent to which the intervention achieved, or is expected to achieve, its objectives and results, including any differential results across groups.
Efficiency	The extent to which the intervention delivers, or is likely to deliver, results in an economic and timely way. Could the same results have been achieved with fewer financial or technical resources, for instance?
Sustainability	The extent to which the net rights-holders of the intervention continue, or are likely to continue (even if, or when, the intervention ends).

Humanitarian-specific criterion	Definition
Coverage	The extent to which major population groups facing life-threatening conditions were reached by humanitarian action.

5.2. Preliminary Evaluation Questions

The evaluation of the country programme will provide answers to the evaluation questions (related to the above-mentioned criteria). Reflecting on the country programme theory of change, the country office has generated a set of preliminary evaluation questions that focus the CPE on the most relevant and meaningful aspects of the country programme.

In 2024, the Mid-term review (MTR) of the CP10 outlined six review questions across four criteria: Relevance, Effectiveness, Efficiency, and Coherence. In addition to measuring the extent to which the CP10 achieved its results and targets, including financial targets and resource mobilisation, the review also focused on gender equality and human rights aspects, as well as attention to left-behind populations in the development, planning, and implementation of the country programme. Consultation workshops were conducted with participation from a wide range of implementing partners at national and subnational levels, as well as interviews with UNFPA programme teams, to gather their feedback on the relevance and coherence of the programme interventions. At the reference group meeting for the MTR report in February 2025, participants analysed the MTR’s gaps in measuring the effectiveness and efficiency and agreed on the initial evaluation questions for the CPE, focusing on these specific criteria.

At the design phase (see [Handbook](#), Chapter 2), the evaluators are expected to further refine the evaluation questions (in consultation with the CPE manager at the UNFPA Viet Nam CO and the ERG). In particular, they will ensure that each evaluation question is accompanied by a number of “assumptions for verification”. Thus, for each evaluation question, and based upon their understanding of the theory of change (the different pathways in the results chain and the theory’s internal logic), the evaluators are expected to formulate assumptions that, in fact, constitute the hypotheses they will be testing through data collection and analysis in order to formulate their responses to the evaluation questions. As they document the assumptions, the evaluators will be able to explain why and the extent to which the interventions did (or did not) lead towards the expected outcomes, identify what are the critical elements to success, and pinpoint other external factors that have influenced the programme and contributed to change.

Relevance

1. To what extent UNFPA’s support was relevant and adaptable to the needs of the CP10 beneficiaries, especially of the most left behind population groups, including ethnic minorities, adolescents and youth, people with disabilities and migrant workers?

Coherence

2. To what extent is UNFPA’s support compatible with other interventions in the country, provided by other stakeholders, including UN and other development partners, government and non-government organisations and CSOs?

Effectiveness

3. To what extent have the interventions supported by UNFPA delivered outputs and contributed to the achievement of the outcomes of the country programme, in particular (i) increased access to and use of integrated sexual and reproductive health services; (ii) empowerment of adolescents and youth to access sexual and reproductive health services and exercise their sexual and reproductive rights; (iii) advancement of gender equality and the empowerment of all women and girls; and (iv) increased use of population data in the development of evidence-based national development plans, policies and programmes?
4. How effectively has UNFPA leveraged, developed and diversified strategic partnerships to achieve the CP results in policy and advocacy and evidence-based policymaking that are human rights-based, gender-responsive and disability inclusive, and developing national capacities to implement relevant policies?

Efficiency

5. To what extent has UNFPA supported piloting, assessing and scaling up innovative interventions in development and humanitarian contexts for increased programme efficiency to achieve the CP results? ?

Sustainability

6. To what extent has UNFPA strengthened the capacities and performance of the stakeholders and bearers, as well as institutional frameworks and standards practice, to ensure the sustainability of Country Programme results?

Coverage

7. To what extent have UNFPA humanitarian interventions systematically reached all geographic areas in which affected populations (women, adolescents and youth) reside?

The final evaluation questions and the evaluation matrix will be presented in the design report, with explanations if there were changes to EQs and if yes, the rationale for such changes.

6. Approach and Methodology

6.1. Evaluation Approach

Theory-based approach

The CPE will adopt a theory-based approach that relies on an explicit theory of change, which depicts how the interventions supported by the UNFPA Viet Nam CO are expected to contribute to a series of results (outputs and outcomes) that contribute to the overall goal of UNFPA. The theory of change also identifies the causal links between the results, as well as critical assumptions and contextual factors that support or hinder the achievement of desired changes. A theory-based approach is fundamental for generating insights about what works, what does not and why. It focuses on the analysis of causal links between changes at different levels of the results chain that the theory of change describes, by exploring how the assumptions behind these causal links and contextual factors affect the achievement of intended results.

The theory of change will play a central role throughout the evaluation process, from the design and data collection to the analysis and identification of findings, as well as the articulation of conclusions and recommendations. The evaluation team will be required to verify the theory of change underpinning the UNFPA Viet Nam 10th country programme (2022-2026) (see Annex A) and use this theory of change to determine whether changes at output and outcome levels occurred (or not) and whether assumptions about change hold true. The analysis of the theory of change will serve as the basis for the evaluators to assess how relevant, coherent, effective, efficient and sustainable has the support provided by the UNFPA Viet Nam CO been during the period of the 10th country programme. Where applicable, the humanitarian context needs to be considered in analyzing the theory of change.

As part of the theory-based approach, the evaluators shall use a contribution analysis to explore whether evidence to support key assumptions exists, examine if evidence on observed results confirms the chain of expected results in the theory of change, and seek out evidence on the influence that other factors may have had in achieving desired results. This will enable the evaluation team to make a reasonable case about the difference that the UNFPA Viet Nam 10th country programme (2022-2026) made.

Participatory approach

The CPE will be based on an inclusive, transparent and participatory approach, involving a broad range of partners and stakeholders at the national and sub-national levels. The UNFPA Viet Nam CO has developed an initial stakeholder map (see Annex B) to identify stakeholders who have been involved in the preparation and implementation of the country programme, and those partners who do not work directly with UNFPA, yet play a key role in a relevant outcome or thematic area in the national context. These stakeholders include government representatives, civil society organizations, implementing partners, the private sector, academia, other United Nations organizations, donors and, most importantly, rights-holders (notably ethnic minorities, adolescents and youth, people with disabilities and migrant workers). They can provide information and data that the evaluators should use to assess the contribution of UNFPA support to changes in each thematic area of the country programme. Particular attention will be paid to ensuring the participation of women, adolescents and young people, especially those from vulnerable and marginalized groups (e.g., young people and women with disabilities, etc.).

The CPE manager in the UNFPA Viet Nam CO has established an ERG comprised of key stakeholders of the country programme, including: governmental and non-governmental counterparts at national level, including organizations representing women, ageing groups, persons with disabilities, the regional M&E adviser in UNFPA APRO – See [Handbook](#): section 1.5. The ERG will provide inputs at different stages in the evaluation process.

Mixed-method approach

The evaluation will primarily use qualitative methods for data collection, including document review, interviews, group discussions and observations during field visits, where appropriate. The qualitative data will be complemented with quantitative data to minimize bias and strengthen the validity of findings. Quantitative data will be compiled through desk review of documents, websites, online databases and, potentially surveys, to obtain relevant financial data and data on key indicators that measure change at output and outcome levels. The use of innovative and context-adapted evaluation tools (including ICT) is encouraged.

These complementary approaches described above will be used to ensure that the evaluation: (i) responds to the information needs of users and the intended use of the evaluation results; (ii) upholds human rights and principles throughout the evaluation process, including through participation and consultation of key stakeholders (rights holders and duty bearers); and (iii) provides credible information about the benefits for duty bearers and rights-holders (women, adolescents and youth) of UNFPA support through triangulation of collected data.

6.2. Methodology

The evaluation team shall develop the evaluation methodology in line with the evaluation approach and guidance provided in the UNFPA Evaluation [Handbook](#). This will help the evaluators develop a methodology that meets good quality standards for evaluation at UNFPA and the professional evaluation standards of UNEG. It is essential that, once contracted by the UNFPA Viet Nam CO, the evaluators acquire

a solid knowledge of the [UNFPA methodological framework](#), which includes, in particular, the [Evaluation Handbook](#) and the evaluation quality assurance and assessment principles.

The CPE will be conducted in accordance with the *UNEG Norms and Standards for Evaluation*,⁵ *Ethical Guidelines for Evaluation*,⁶ *Code of Conduct for Evaluation in the UN System*⁷, and *Guidance on Integrating Human Rights and Gender Equality in Evaluations*.⁸ When contracted by the UNFPA Viet Nam CO, the evaluators will be requested to sign the *UNEG Code of Conduct*⁹ prior to starting their work.

The methodology that the evaluation team will develop builds the foundation for providing valid and evidence-based answers to the evaluation questions and for offering a robust and credible assessment of UNFPA support in Viet Nam. The methodological design of the evaluation shall include in particular: (i) a critical review of the country programme theory of change; (ii) an evaluation matrix ; (iii) a strategy and tools for collecting and analyzing data; and (iv) a detailed evaluation work plan and fieldwork agenda.

The evaluation matrix

The evaluation matrix is the backbone of the methodological design of the evaluation. It contains the core elements of the evaluation. It outlines (i) *what will be evaluated*: evaluation questions with assumptions for verification; and (ii) *how it will be evaluated*: data collection methods and tools and sources of information for each evaluation question and associated assumptions. The evaluation matrix plays a crucial role before, during and after data collection. The design and use of the evaluation matrix is described in Chapter 2, section 2.2.2.2 of the [Handbook](#).

- In the design phase, the evaluators should use the evaluation matrix to develop a detailed agenda for data collection and analysis and to prepare the structure of interviews, group discussions and site visits. At the design phase, the evaluation team must enter, in the matrix, the data and information resulting from their desk (documentary review) in a clear and orderly manner.
- During the field phase, the evaluation matrix serves as a working document to ensure that the data and information are systematically collected (for each evaluation question) and are presented in an organized manner. Throughout the field phase, the evaluators must enter, in the matrix, all data and information collected. The CPE manager will ensure that the matrix is placed in a Google drive and will check the evaluation matrix on a daily basis to ensure that data and information is properly compiled. S/he will alert the evaluation team in the event of gaps that require additional data collection or if the data/information entered in the matrix is insufficiently clear/precise.
- In the reporting phase, the evaluators should use the data and information presented in the evaluation matrix to build their analysis (or findings) for each evaluation question. The fully completed matrix is an indispensable annex to the report and the CPE manager will verify that sufficient evidence has been collected to answer all evaluation questions in a credible manner.

⁵ Document available at: <http://www.unevaluation.org/document/detail/1914>.

⁶ Document available at: <http://www.unevaluation.org/document/detail/102>.

⁷ Document available at: <http://www.unevaluation.org/document/detail/100>.

⁸ Document available at: <http://www.unevaluation.org/document/detail/980>.

⁹ UNEG Code of conduct: <http://www.unevaluation.org/document/detail/100>.

The matrix will enable users of the report to access the supporting evidence for the evaluation results. Confidentiality of respondents must be assured in how their feedback is presented in the evaluation matrix.

Finalization of the evaluation questions and related assumptions

Based on the preliminary questions presented in the present terms of reference (section 5.2) and the theory of change underlying the country programme (see Annex A), the evaluators are required to refine the evaluation questions. In their final form, the questions should reflect the evaluation criteria (section 5.1) and clearly define the key areas of inquiry of the CPE. The final evaluation questions will structure the evaluation matrix and shall be presented in the design report.

The evaluation questions must be complemented by a set of assumptions for verification that capture key aspects of how and why change is expected to occur, based on the theory of change of the country programme. This will allow the evaluators to assess whether the conditions for the achievement of outputs and the contribution of UNFPA to higher-level results, in particular at outcome level, are met. The data collection for each of the evaluation questions (and related assumptions for verification) will be guided by clearly formulated quantitative and qualitative indicators, which need to be specified in the evaluation matrix.

Sampling strategy

The UNFPA Viet Nam CO will provide an initial overview of the interventions supported by UNFPA, the locations where these interventions have taken place, and the stakeholders involved in these interventions. As part of this process, the UNFPA Viet Nam CO has produced an initial stakeholder map to identify the range of stakeholders that are directly or indirectly involved in the implementation, or affected by the implementation of the CP (see Annex B).

Building on the initial stakeholder map and based on information gathered through document review and discussions with CO staff, the evaluators will develop the final stakeholder map. From this final stakeholder map, the evaluation team will select a sample of stakeholders at national and sub-national level who will be consulted through interviews and/or group discussions during the data collection phase. These stakeholders must be selected through clearly defined criteria and the sampling approach outlined in the design report (for guidance on how to select a sample of stakeholders see [Handbook](#), section 2.3). In the design report, the evaluators should also make explicit which groups of stakeholders were not included and why. The evaluators should aim to select a sample of stakeholders that is as representative as possible, recognizing that it will not be possible to obtain a statistically representative sample.

The evaluation team shall also select a sample of sites that will be visited for data collection, and provide the rationale for the selection of the sites in the design report. The UNFPA Viet Nam CO will provide the evaluators with necessary information to access the selected locations, including logistical requirements and security risks, if applicable. The sample of sites selected for visits should reflect the variety of interventions supported by UNFPA, both in terms of thematic focus and context.

The final sample of stakeholders and sites will be determined in consultation with the CPE manager, based on the review of the design report.

Data collection

The evaluation will consider primary and secondary sources of information. For detailed guidance on the different data collection methods typically employed in CPEs, see [Handbook](#), section 2.2.3.1.

Primary data will be collected through interviews with a wide range of key informants at national and sub-national levels (e.g., government officials, representatives of implementing partners, civil society organizations, other United Nations organizations, donors, and other stakeholders), as well as focus and group discussions (e.g., with service providers and rights-holders, notably women, adolescents and youth) and direct observation during visits to selected sites. Other sources of primary data collection, e.g. surveys, case studies and others, can be used as deemed necessary. Secondary data will be collected through extensive document review, notably, but not limited to the resources assembled by the CO in a Document repository. The evaluation team will ensure that data collected is disaggregated by sex, age, location and other relevant dimensions, such as disability status, to the extent possible.

The evaluation team is expected to dedicate a total of 6 weeks for data collection in the field. The data collection tools that the evaluation team will develop (e.g, interview guides for each stakeholder categories, themes for and composition of focus groups, survey questionnaires, checklists for on-site observation) shall be presented in the design report.

Data analysis

The evaluators must enter the qualitative and quantitative data in the evaluation matrix for each evaluation question and related assumption for verification. Once the evaluation matrix is completed, the evaluators should identify common themes and patterns that will help them formulate evidence-based answers to the evaluation questions. The evaluators shall also identify aspects that should be further explored and for which complementary data should be collected, to fully answer all the evaluation questions and thus cover the whole scope of the evaluation (see [Handbook](#), Chapter 4).

Validation mechanisms

All findings of the evaluation need to be firmly grounded in evidence. The evaluation team will use a variety of mechanisms to ensure the validity of collected data and information as highlighted in the Handbook (chapter 3). Data validation is a continuous process throughout the different evaluation phases, and the proposed validation mechanisms will be presented in the design report. In particular, there must be systematic triangulation of data sources and data collection methods, internal evaluation team meetings to corroborate and analyze data, and regular exchanges with the CPE manager. During a debriefing meeting with the CO and the ERG, at the end of the field phase, the evaluation team will present the emerging findings.

Use of Artificial Intelligence (AI) in CPEs

AI technologies cannot be used in the management and conduct of the CPE unless a prior written agreement is obtained from the CPE manager. Upon this prior agreement, the consultant is obligated to disclose the utilization of AI tools in evaluation and commits to upholding ethical standards and accuracy in the application of AI tools.

- **Prior approval for utilization of AI tools:** The use of AI tools must be explicitly agreed upon and approved in writing by the CPE manager
- **Declaration of the utilization of AI tools:** If the use of AI tools in evaluation is agreed upon with the CPE manager, the evaluator must be transparent and declare the use of AI tools in evaluation work and other work-related tasks, specifying the nature of AI usage. The AI tools utilized in work-related tasks must include only those tools that are vetted by EO
- **Verification of accuracy:** The evaluator commits to diligently checking the accuracy of AI-generated results and assumes full responsibility for its reliability and validity
- **Ethical and responsible use:** The evaluator is obligated to uphold ethical principles in the use of AI in work-related tasks, as well as relevant regulations that govern the use of AI in the UN system. This includes the [Digital and Technology Network Guidance on the Use of Generative AI Tools in the UN System](#), [Principles for the Ethical Use of Artificial Intelligence in the United Nations System](#), and [UNFPA Information Security Policy](#). The consultant commits to employing AI tools that adhere to principles of non-discrimination, fairness, transparency, and accountability. The consultant will adopt an approach that aligns with the principle of ‘leaving no one behind’, ensuring that AI tool usage avoids exclusion or disadvantage to any group.

7. Evaluation Process

The CPE process is broken down into five different phases that include different stages and lead to different deliverables: preparation phase; design phase; field phase; reporting phase; and phase of dissemination and facilitation of use. The CPE manager and the evaluation team leader must undertake quality assurance of each deliverable at each phase and step of the process, with a view to ensuring the production of a credible, useful and timely evaluation.

7.1. Preparation Phase (*Handbook, Chapter 1*)

The CPE manager at the UNFPA Viet Nam CO leads the preparation phase of the CPE. This includes:

- CPE launch and orientation meeting for CO staff
- Recruitment of a young and emerging evaluator (YEE)
- Evaluation questions workshop
- Establishing the evaluation reference group
- Drafting the terms of reference
- Assembling and maintaining background information
- Mapping the CPE stakeholders
- Recruiting the evaluation team. If the YEE was not recruited at the beginning of the preparation phase, the YEE can be hired during the recruitment of the entire evaluation team.

The full tasks of the preparation phase and responsible entities are detailed in Chapter 1 of the Handbook.

7.2. Design Phase (*Handbook, Chapter 2*)

The design phase sets the overall framework for the CPE. This phase includes:

- Induction meeting(s) between CPE manager and evaluation team
- Orientation meeting with CO Representative and relevant UNFPA staff with evaluation team
- Desk review by the evaluation team and preliminary interviews, mainly with CO staff
- Developing the evaluation approach i.e., critical analysis of the theory of change using contribution analysis, refining the preliminary evaluation questions and developing the assumptions for verification, developing the evaluation matrix, methods for data collection, and sampling method
- Stakeholder sampling and site selection
- Developing the field work agenda
- Developing the initial communications plan
- Drafting the design report version 1
- Quality assurance of design report version 1
- ERG meeting to present the design report
- Drafting the design report version 2
- Quality assurance of design report version 2

The **design report** presents a robust, practical and feasible evaluation approach, detailed methodology and work plan. The evaluation team will develop the design report in consultation with the CPE manager and the ERG; it will be submitted to the regional M&E adviser in UNFPA APRO for review.

The detailed activities of the design phase with guidance on how they should be undertaken are provided in the Handbook, Chapter 2.

7.3. Field Phase (*Handbook, Chapter 3*)

The evaluation team will collect the data and information required to answer the evaluation questions in the field phase. Towards the end of the field phase, the evaluation team will conduct a preliminary analysis of the data to identify emerging findings that will be presented to the CO and the ERG. The field phase should allow the evaluators sufficient time to collect valid and reliable data to cover the thematic scope of the CPE. A period of 06 weeks for data collection is planned for this evaluation. However, the CPE manager will determine the optimal duration of data collection, in consultation with the evaluation team during the design phase.

The field phase includes:

- Preparing all logistical and practical arrangements for data collection
- Launching the field phase
- Collecting primary data at national and sub-national levels
- Supplementing with secondary data
- Collecting photographic material

- Filling in the evaluation matrix
- Conducting a data analysis workshop
- Debriefing meeting and consolidation of the feedback

At the end of the field phase, the evaluation team will hold a **debriefing meeting with the CO and the ERG** to present the initial analysis and emerging findings from the data collection in a PowerPoint presentation. The debriefing meeting presents an invaluable opportunity for the evaluation team to expand, qualify and verify information as well as to obtain feedback and correct misperceptions or misinterpretations.

The detailed activities of the field phase with guidance on how they should be undertaken are provided in the Handbook, Chapter 3.

7.4. Reporting Phase (*Handbook, Chapter 4*)

One of the most important tasks in drafting the CPE report is to organize it into three interrelated, yet distinct, components: findings, conclusions, and recommendations. Together they represent the core of the CPE report. The reporting phase includes:

- Brainstorming on feedback received during the debriefing meeting
- Additional data collection (if required)
- Consolidating the evaluation matrix
- Drafting the findings and conclusions
- Identifying tentative recommendations using the recommendations worksheet
- Drafting CPE report version 1 (incl. quality assurance by team leader)
- Quality assurance of CPE report version 1 and recommendations worksheet by the CPE manager and RO M&E Adviser
- ERG meeting on CPE report version 1
- Recommendations workshop with ERG to finalize recommendations
- Drafting CPE report version 2 (incl. quality assurance by team leader)
- Quality assurance of CPE report version 2 by the CPE manager and RO M&E Adviser
- Final CPE report with compulsory set of annexes (incl completed evaluation matrix)

The [Handbook](#), Chapter 4, provides comprehensive details of the process that must be followed throughout the reporting phase, including details of all quality assurance steps and requirements for a good quality report.. The final report should clearly account for the strength of evidence on which findings rest to support the reliability and validity of the evaluation. Conclusions and recommendations need to clearly build on the findings of the evaluation. Each conclusion shall make reference to the evaluation question(s) upon which it is based, while each recommendation shall indicate the conclusion(s) from which it logically stems.

The evaluation report is considered final once it is formally approved by the CPE manager in the UNFPA Viet Nam CO.

At the end of the reporting phase, the CPE manager and the regional M&E Adviser will jointly prepare an internal EQA of the final evaluation report. The Independent Evaluation Office will subsequently conduct the final EQA of the report, which will be made publicly available.

7.5. Dissemination and Facilitation of Use Phase (*Handbook, Chapter 5*)

This phase focuses on strategically communicating the CPE results to targeted audiences and facilitating the use of the CPE to inform decision-making and learning for programme and policy improvement. It serves as a bridge between generating evaluation results, and the practical steps needed to ensure CPE leads to meaningful programme adaptation. While this phase is specifically about dissemination and facilitating the use of the evaluation results, its foundation rests upon the preceding phases. This phase is largely the responsibility of the CPE manager, CO communications officer and other CO staff. However, key responsibilities of the evaluation team in this phase include:

- Taking photographs during primary data collection and during the evaluation process
- Adhering to the [editorial guidelines of the United Nations](#) and the [UNFPA editorial and style guide](#) to ensure high editorial standards
- Contribute to the CPE communications plan

The detailed guidance on the dissemination and facilitation of use phase is provided in the [Handbook](#), Chapter 5.

8. Expected Deliverables

The evaluation team is expected to produce the following deliverables:

- **Design report.** The design report should translate the requirements of the ToR into a practical and feasible evaluation approach, methodology and work plan. In addition to presenting the evaluation matrix, the design report also provides information on the country situation and the UN and UNFPA response. The Handbook section 2.4 provides the required structure of the design report and guidance on how to draft it.
- **PowerPoint presentation of the design report.** The PowerPoint presentation will be delivered at an ERG meeting to present the contents of the design report and the agenda for the field phase. Based on the comments and feedback of the ERG, the CPE manager and the regional M&E adviser, the evaluation team will develop the final version of the design report.
- **PowerPoint presentation for debriefing meeting with the CO and the ERG.** The presentation provides an overview of key emerging findings of the evaluation at the end of the field phase. It will serve as the basis for the exchange of views between the evaluation team, UNFPA Viet Nam CO staff (incl. senior management) and the members of the ERG who will thus have the opportunity to provide complementary information and/or rectify the inaccurate interpretation of data and information collected.

- **Version 1 evaluation report.** The version 1 evaluation report will present the findings and conclusions, based on the evidence that data collection yielded. It will undergo review by the CPE manager, the CO, the ERG and the regional M&E adviser, and the evaluation team will undertake revisions accordingly.
- **Recommendations worksheet.** The process of co-creating the CPE recommendations begins with a set of tentative recommendations proposed by the evaluation team (see [Handbook](#), section 4.3).
- **Final evaluation report.** The final evaluation report (*maximum 80 pages, excluding opening pages and annexes*) will present the findings and conclusions, as well as a set of practical and actionable recommendations to inform the next programme cycle. The Handbook (section 4.5) provides the structure and guidance on developing the report. The set of annexes must be complete and must include the evaluation matrix containing all supporting evidence (data and information and their source).
- **PowerPoint presentation of the evaluation results.** The presentation will provide a clear overview of the key findings, conclusions and recommendations to be used for the dissemination of the final evaluation report.

Based on these deliverables, the CPE manager, in collaboration with the communication officer in the UNFPA Viet Nam CO will develop an:

- **Evaluation brief.** The evaluation brief will consist of a short and concise document that provides an overview of the key evaluation results in an easily understandable and visually appealing manner, to promote their use among decision-makers and other stakeholders. The structure, content and layout of the evaluation brief should be similar to the briefs that the UNFPA Independent Evaluation Office produces for centralized evaluations.

All the deliverables will be developed in English.

9. Quality Assurance and Assessment

The UNFPA Evaluation Quality Assurance and Assessment (EQAA) system aims to ensure the production of good quality evaluations through two processes: quality assurance and quality assessment. Quality assurance occurs throughout the evaluation process and involves a proactive approach which aims to prevent the production of an evaluation report that would not comply with the ToR. Quality assessment takes place following the completion of the evaluation process and is limited to the final evaluation report with a view to assessing compliance with specific criteria.

The EQAA of this CPE will be undertaken in accordance with the IEO [guidance and tools](#). An essential component of the EQAA system is the EQA grid, which sets the criteria against which the versions 1 and 2 of the CPE report are assessed to ensure clarity of reporting, methodological robustness, rigor of the analysis, credibility of findings, impartiality of conclusions and usefulness of recommendations.

The evaluation team leader plays an instrumental quality assurance role. S/he must ensure that all members of the evaluation team provide high-quality contributions (both form and substance) and, in particular, that the versions 1 and 2 of the CPE report comply with the quality assessment criteria outlined in the EQA grid¹⁰ before submission to the CPE manager for review. The evaluation quality assessment checklist below outlines the main quality criteria that the version 1 and version 2 of the evaluation report must meet.

- **Executive summary:** Provide an overview of the evaluation. It is written as a stand-alone section and includes the following key elements of the evaluation: overview of the context and country programme; evaluation purpose, objectives and intended users; scope and evaluation methodology; summary of most significant findings; main conclusions; and key recommendations. The executive summary can inform decision-making.
- **Background:** The evaluation (i.e. interventions under the country programme) and context of the evaluation are clearly described. The key stakeholders are clearly identified and presented.
- **Purpose, Objectives and Scope:** The purpose of the country programme evaluation is clearly described. The objectives and scope of the evaluation are clear and realistic. The evaluation questions are appropriate for meeting the objectives and purpose of the evaluation.
- **Design and Methodology:** The analysis of the country programme theory of change, results chain or logical framework should be well-articulated. The report should provide the rationale for the methodological approach and the appropriateness of the methods and tools selected, as well as sampling with a clear description of ethical issues and considerations. Constraints and limitations are explicit (incl. limitations applying to interpretations and extrapolations in the analysis; robustness of data sources, etc).
- **Findings:** They are evidence-based and systematically address all of the evaluation's questions. Findings are built upon multiple and credible data sources and result from a rigorous data analysis.
- **Conclusions:** They are based on credible findings and convey the evaluators' unbiased judgment. Conclusions are well substantiated and derived from findings and add deeper insight beyond the findings themselves.
- **Recommendations:** They are clearly formulated and logically derived from the conclusions. They are prioritized based on their importance, urgency, and potential impact.
- **Structure and presentation:** The report is clear, user-friendly, comprehensive, logically structured and drafted in accordance with the outline presented in the [Handbook](#), section 4.5.
- **Evaluation Principles/cross-cutting issues:** Cross cutting issues, in particular, human rights-based approach, gender equality, disability inclusion, LNOB are integrated in the core elements of the evaluation (evaluation design, methodology, findings, conclusions and recommendations).

Using the EQA grid, the EQAA process for this CPE will be multi-layered and will involve: (i) the evaluation team leader (and each evaluation team member); (ii) the CPE manager in the UNFPA Viet Nam CO, (iii)

¹⁰ The evaluators are also invited to look at good quality CPE reports that can be found in the UNFPA evaluation database, which is available at: <https://www.unfpa.org/evaluation/database>. These reports must be read in conjunction with their EQAs (also available in the database) in order to gain a clear idea of the quality standards that UNFPA expects the evaluation team to meet.

the regional M&E adviser in UNFPA APRO, and (iv) the UNFPA Independent Evaluation Office, whose roles and responsibilities are outlined in section 11.

10. Indicative Timeframe and Work Plan

The table below indicates the main activities that will be undertaken throughout the evaluation process, as well as their estimated duration for the submission of corresponding deliverables. The involvement of the evaluation team starts with the design phase and ends after the reporting phase. The Handbook contains full details on all the CPE activities and must be used by the evaluators throughout the evaluation process.

Tentative timelines for main tasks and deliverables in the design, field and reporting phases of the CPE¹¹

Main tasks	Responsible entity	Deliverables	Estimated Duration
Design phase			
Induction meeting with the evaluation team	CPE Manager and evaluation team		4 to 6 weeks
Orientation meeting with CO staff	CO Representative, CPE Manager, CO staff and RO M&E Adviser		
Desk review and preliminary interviews, mainly with CO staff	Evaluation team		
Developing the evaluation approach	Evaluation team		
Stakeholder sampling and site selection	Evaluation team, CPE Manager	Stakeholder map	
Developing the field work agenda	Evaluation team, CPE Manager	Field work agenda	
Developing the initial communications plan	CPE Manager and CO communications officer	<i>Communication plan (see Evaluation Handbook, Chapter 5)</i>	
Drafting the design report version 1	Evaluation team	Design report- version 1	
Quality assurance of design report version 1	CPE Manager and RO M&E Adviser		
ERG meeting to present the design report	Evaluation team, CPE manager	PowerPoint presentation on design report version 1	
Drafting the design report version 2	Evaluation team	Design report - version 2	
Quality assurance of design report version 2	CPE Manager and RO M&E Adviser		

¹¹ For full information on all tasks and responsible entities, see the relevant chapters of the [Handbook](#)

Final design report	Evaluation Team	Final design report (see Evaluation Handbook , section 2.4.4)	
Field phase			
Preparing all logistical and practical arrangements for data collection	CPE Manager		4 to 6 weeks
Collecting primary data at national and sub-national level	Evaluation team		
Supplementing with secondary data	Evaluation team		
Collecting photographic material	Evaluation team	Photos (see <i>Evaluation Handbook</i> , Section 3.2.5)	
Filling in the evaluation matrix	Evaluation team	Evaluation matrix	
Conducting a data analysis workshop	Evaluation team		
Debriefing meeting with CO and ERG	Evaluation team and CPE manager	PowerPoint presentation	
Reporting phase			
Consolidating the evaluation matrix	Evaluation team	Evaluation matrix	Approximately 12 weeks
Drafting CPE report version 1	Evaluation team	Evaluation report - version 1	
Quality assurance of CPE report version 1	CPE Manager and RO M&E Adviser		
ERG meeting on CPE report version 1	Evaluation team and CPE Manager	PowerPoint presentation	
Recommendations workshop	Evaluation team, CPE manager, ERG members	Recommendations worksheet	
Drafting CPE version 2	Evaluation team	Evaluation report - version 2	
Quality assurance of CPE report version 2	CPE Manager and RO M&E Adviser		
Final CPE report	Evaluation team	Final CPE report (see <i>Evaluation Handbook</i> , section 4.5) with powerpoint presentation and audit trail	

Nota Bene: Column “Deliverables”: In italics: The deliverables are the responsibility of the CO/CPE Manager; in bold: The deliverables are the responsibility of the evaluation team.

11. Management of the Evaluation

The **CPE manager** in the UNFPA Viet Nam CO, in close consultation with the Ministry of Finance that coordinates the country programme, will be responsible for the management of the evaluation and supervision of the evaluation team in line with the [UNFPA Evaluation Handbook](#). The CPE manager will oversee the entire process of the evaluation, from the preparation to the dissemination and facilitation of use of the evaluation results. It is the prime responsibility of the CPE manager to ensure the quality, independence and impartiality of the evaluation in line with UNFPA IEO methodological framework, as well as the UNEG norms and standards and ethical guidelines for evaluation. The tasks assigned to the CPE manager, for each phase of the CPE, are detailed in the [Handbook](#).

At all stages of the evaluation process, the CPE manager will require support from staff of the UNFPA Viet Nam CO. In particular, the **country office staff** contribute to the identification of the evaluation questions and the preparation of the ToR (and annexes). They contribute to the compilation of background information and documentation related to the country programme. They make time to meet with the evaluation team at the design phase and during data collection. They also provide support to the CPE manager in making logistical arrangements for site visits and setting up interviews and group discussions with stakeholders at national and sub-national level. Finally, they provide inputs to the management response and contribute to the dissemination of evaluation results.

The progress of the evaluation will be closely followed by the **evaluation reference group (ERG)**, which is composed of relevant UNFPA staff from the Viet Nam CO, APRO, representatives of the national Government of Viet Nam, implementing partners, as well as other relevant key stakeholders, including organizations representing vulnerable and marginalized groups (see [Handbook](#), section 1.4). The ERG serves as a body to ensure the relevance, quality and credibility of the evaluation. It provides input on key milestones in the evaluation process, facilitates the evaluation team's access to sources of information and key informants and undertakes quality assurance of the evaluation deliverables from a technical perspective. The ERG has the following key responsibilities:

- Support the CPE manager in the development of the ToR, including the selection of preliminary evaluation questions
- Provide feedback and comments on the design report
- Act as the interface between the evaluators and key stakeholders of the evaluation, and facilitate access to key informants and documentation
- Provide comments and substantive feedback from a technical perspective on the version 1 evaluation report
- Participate in meetings with the evaluation team
- Contribute to the dissemination of the evaluation results and learning and knowledge sharing, based on the final evaluation report, including follow-up on the management response

In compliance with UNFPA evaluation policy (2024), the **regional M&E adviser** in UNFPA APRO will provide guidance and backstopping support to the CPE manager at all stages of the evaluation process. In particular, the regional M&E plays a crucial role in the quality assurance of the CPE deliverables. This

includes quality assurance and approval of the ToR, pre-qualification of consultants, quality assurance and assessment of the design and evaluation reports. S/he also assists with dissemination and use of the evaluation results. The role and responsibilities of the regional M&E adviser at all phases of the CPE are indicated in the Handbook.

The UNFPA **Independent Evaluation Office (IEO)** commissions an independent quality assessment of the final evaluation report. The IEO also publishes the final evaluation report, independent quality assessment (EQA) and management response in the [UNFPA evaluation database](#).

12. Composition of the Evaluation Team

The evaluation will be conducted by a team of 4 independent, external evaluators, consisting of: (i) an evaluation team leader with overall responsibility for carrying out the evaluation exercise and covering one of the thematic areas listed below as thematic expert, and (ii) 02 team members who will provide technical expertise in thematic areas relevant to the UNFPA mandate (SRHR, youth, and gender equality and women's empowerment, population dynamics, and humanitarian response) and (iii) a Young and Emerging Evaluator who will provide support to the evaluation team throughout the evaluation process. In addition to her/his primary responsibility for the design of the evaluation methodology and the coordination of the evaluation team throughout the CPE process, the team leader will perform the role of technical expert for one of the thematic areas of the 10th UNFPA country programme in Viet Nam.

The evaluation team leader will be recruited internationally, while the evaluation team members, including the young and emerging evaluator, will be recruited locally to ensure adequate knowledge of the country context. Finally, the evaluation team should have the requisite level of knowledge to conduct human rights- and gender-responsive evaluations and all evaluators should be able to work in a multidisciplinary team and in a multicultural environment.

12.1. Roles and Responsibilities of the Evaluation Team

Evaluation team leader

The evaluation team leader will hold the overall responsibility for the design and implementation of the evaluation. S/he will be responsible for the production and timely submission of all expected deliverables in line with the ToR. S/he will lead and coordinate the work of the evaluation team and ensure the quality of all evaluation deliverables at all stages of the process. The CPE manager will provide methodological guidance to the evaluation team in developing the design report, in particular, but not limited to, defining the evaluation approach, methodology and work plan, as well as the agenda for the field phase. S/he will lead the drafting and presentation of the design report and the draft and final evaluation report, and play a leading role in meetings with the ERG and the CO. The team leader will also be responsible for communication with the CPE manager. Beyond her/his responsibilities as team leader, the evaluation team leader will serve as technical expert for one of the thematic areas of the country programme described below.

Evaluation team member: SRHR expert

The SRHR expert will provide expertise on integrated sexual and reproductive health services, HIV and other sexually transmitted infections, maternal health, and family planning. S/he will contribute to the methodological design of the evaluation and take part in the data collection and analysis work, with overall responsibility of contributions to the evaluation deliverables in her/his thematic area of expertise. S/he will provide substantive inputs throughout the evaluation process by contributing to the development of the evaluation methodology, evaluation work plan and agenda for the field phase, participating in meetings with the CPE manager, UNFPA Viet Nam CO staff and the ERG. S/he will undertake a document review and conduct interviews and group discussions with stakeholders, as agreed with the evaluation team leader.

Evaluation team member: Gender equality and women's empowerment expert

The gender equality and women's empowerment expert will provide expertise on the human rights of women and girls, especially sexual and reproductive rights, the empowerment of women and girls, engagement of men and boys, as well as GBV and harmful practices. S/he will contribute to the methodological design of the evaluation and take part in the data collection and analysis work, with overall responsibility of contributions to the evaluation deliverables in her/his thematic area of expertise. S/he will provide substantive inputs throughout the evaluation process by contributing to the development of the evaluation methodology, evaluation work plan and agenda for the field phase, participating in meetings with the CPE manager, UNFPA Viet Nam CO staff and the ERG. S/he will undertake a document review and conduct interviews and group discussions with stakeholders, as agreed with the evaluation team leader.

Evaluation team member: Population dynamics expert

The population dynamics expert will provide expertise on population and development issues, such as census, ageing, migration, the demographic dividend, and national statistical systems, ageing and social protection policies. S/he will contribute to the methodological design of the evaluation and take part in the data collection and analysis work, with overall responsibility of contributions to the evaluation deliverables in her/his thematic area of expertise. S/he will provide substantive inputs throughout the evaluation process by contributing to the development of the evaluation methodology, evaluation work plan and agenda for the field phase, participating in meetings with the CPE manager, UNFPA Viet Nam CO staff and the ERG. S/he will undertake a document review and conduct interviews and group discussions with stakeholders, as agreed with the evaluation team leader.

Evaluation team member: Young and emerging evaluator. The young and emerging evaluator (YEE) will contribute to all phases of the CPE. S/he will support the evaluation team leader and members in developing the evaluation methodology, reviewing and refining the theory of change, finalizing the evaluation questions, and developing the evaluation matrix, data collection methods and tools, as well as indicators. The young and emerging evaluator will participate in data collection (site visits, interviews, group discussions and document review) and support data analysis, as agreed with the evaluation team leader and the CPE manager. The YEE will also support the dissemination and facilitation of use of the evaluation results. Finally, S/he will provide administrative support throughout the evaluation process and participate in meetings with the CPE manager, UNFPA Viet Nam CO staff and the ERG.

The modalities for the participation of the evaluation team members (incl. the young and emerging evaluator) in the evaluation process, their responsibilities during data collection and analysis, as well as the nature of their respective contributions to the drafting of the design report and the version 1 and version 2 evaluation report will be agreed with the evaluation team leader. These tasks will be performed under her/his supervision.

12.2. Qualifications and Experience of the Evaluation Team

International Team leader

The competencies, skills and experience of the evaluation team leader should include:

- Master's degree in public health, social sciences, demography or population studies, statistics, development studies or a related field.
- 10 years of experience in conducting or managing evaluations in the field of international development.
- Extensive experience in leading complex evaluations commissioned by United Nations organizations and/or other international organizations and NGOs.
- Demonstrated expertise in one of the thematic areas of the country programme covered by the evaluation.
- In-depth knowledge of theory-based evaluation approaches and ability to apply both qualitative and quantitative data collection methods and to uphold high quality standards for evaluation as defined by UNFPA and UNEG.
- Ability to ensure ethics and integrity of the evaluation process, including confidentiality and the principle of do no harm.
- Ability to consistently integrate human rights and gender perspectives and disability inclusion in all phases of the evaluation process.
- Excellent management and leadership skills to coordinate the work of the evaluation team, and strong ability to share technical evaluation skills and knowledge.
- Ability to supervise a young and emerging evaluator, create an enabling environment for her/his meaningful participation in the work of the evaluation team, and provide guidance and support required to develop her/his capacity.
- Experience working with a multidisciplinary team of experts.
- Excellent ability to analyze and synthesize large volumes of data and information from diverse sources.
- Excellent interpersonal and communication skills (written and spoken).
- Work experience in/good knowledge of the region and the national development context of Viet Nam.
- Fluent in written and spoken English.

National SRHR expert

The competencies, skills and experience of the SRHR expert should include:

- Master's degree in public health, medicine, health economics and financing, epidemiology, biostatistics, social sciences or a related field.

- 5-7 years of experience in conducting evaluations, reviews, assessments, research studies or M&E work in the field of international development.
- Substantive knowledge of SRHR, including HIV and other sexually transmitted infections, maternal health, and family planning, adolescent SRHR.
- Ability to ensure ethics and integrity of the evaluation process, including confidentiality and the principle of do no harm.
- Ability to consistently integrate human rights and gender perspectives and disability inclusion in all phases of the evaluation process.
- Solid knowledge of evaluation approaches and methodology and demonstrated ability to apply both qualitative and quantitative data collection methods.
- Excellent analytical and problem-solving skills.
- Experience working with a multidisciplinary team of experts.
- Excellent interpersonal and communication skills (written and spoken).
- Work experience in/good knowledge of the national development context of Viet Nam.
- Familiarity with UNFPA or other United Nations organizations' mandates and activities will be an advantage.
- Fluent in written and spoken English and Vietnamese.

National Gender equality and women's empowerment expert

The competencies, skills and experience of the gender equality and women's empowerment expert should include:

- Master's degree in women/gender studies, human rights law, social sciences, development studies or a related field.
- 5-7 years of experience in conducting evaluations, reviews, assessments, research studies or M&E work in the field of international development.
- Substantive knowledge on gender equality and the empowerment of women and girls, GBV and other harmful practices, such as female genital mutilation, early, child and forced marriage, and issues surrounding masculinity, gender relationships and sexuality.
- Ability to ensure ethics and integrity of the evaluation process, including confidentiality and the principle of do no harm.
- Ability to consistently integrate human rights and gender perspectives and disability inclusion in all phases of the evaluation process.
- Solid knowledge of evaluation approaches and methodology and demonstrated ability to apply both qualitative and quantitative data collection methods.
- Excellent analytical and problem-solving skills.
- Experience working with a multidisciplinary team of experts.
- Excellent interpersonal and communication skills (written and spoken).
- Work experience in/good knowledge of the national development context of Viet Nam.
- Familiarity with UNFPA or other United Nations organizations' mandates and activities will be an advantage.
- Fluent in written and spoken English and Vietnamese.

National Population dynamics expert

The competencies, skills and experience of the population dynamics expert should include:

- Master's degree in demography or population studies, statistics, social sciences, development studies or a related field.
- 5-7 years of experience in conducting evaluations, reviews, assessments, research studies or M&E work in the field of international development and/or humanitarian assistance.
- Substantive knowledge on the generation, analysis, dissemination and use of housing census and population data for development, population dynamics, migration and national statistics systems.
- Good knowledge of humanitarian strategies, policies, frameworks and international humanitarian law and humanitarian principles, as well as the international humanitarian architecture and coordination mechanisms.
- Ability to ensure ethics and integrity of the evaluation process, including confidentiality and the principle of do no harm.
- Ability to consistently integrate human rights and gender perspectives in all phases of the evaluation process.
- Solid knowledge of evaluation approaches and methodology and demonstrated ability to apply both qualitative and quantitative data collection methods.
- Excellent analytical and problem-solving skills.
- Experience working with a multidisciplinary team of experts.
- Excellent interpersonal and communication skills (written and spoken).
- Work experience in/good knowledge of the national development context of Viet Nam
- Familiarity with UNFPA or other United Nations organizations' mandates and activities will be an advantage.
- Fluent in written and spoken English and Vietnamese.

Young and emerging evaluator (national consultant)

The young and emerging evaluator must be under 35 years of age and her/his competencies, skills and experience should include:

- Bachelor's degree in development studies, population studies, economics, monitoring and evaluation, social sciences, public health, or any other relevant discipline;
- Certificate in evaluation or equivalent qualification;
- Less than 5 years of work experience in monitoring and evaluation, research or social studies in the field of international development;
- Excellent analytical and problem-solving skills;
- Demonstrated ability to work in a team;
- Strong organizational skills, communication skills and writing skills;
- Good command of information and communication technology and data visualization tools;
- Good knowledge of the mandate and activities of UNFPA or other United Nations organizations will be an advantage;
- Keen interest to progress professionally and become a competent evaluator;
- Fluent in written and spoken English and Vietnamese.

13. Budget and Payment Modalities

The evaluators, including the young and emerging evaluator, will receive a daily fee according to the UNFPA consultancy scale based on qualifications and experience.

The payment of fees will be based on the submission of deliverables, as follows:

Upon approval of the design report	20%
Upon submission of a draft final evaluation report of satisfactory quality	40%
Upon approval of the final evaluation report and the PowerPoint presentation of the evaluation results	40%

In addition to the daily fees, the evaluators will receive a daily subsistence allowance (DSA) in accordance with the UNFPA Duty Travel Policy, using applicable United Nations DSA rates for the place of mission. Travel costs will be settled separately from the consultancy fees.

The provisional allocation of workdays among the evaluation team will be the following:

	Team leader	2 thematic experts (per person)	Young and emerging evaluator
Design phase	10	8	10
Field phase	15	10	15
Reporting phase	17	15	12
Dissemination and facilitation of use phase	3	2	5
TOTAL (days)	45	35	42

Please note the numbers of days in the table are indicative. The final distribution of the volume of work and corresponding number of days for each consultant will be proposed by the evaluation team in the design report and will be subject to the approval of the CPE manager.

14. Bibliography and Resources

The following documents will be made available to the evaluation team upon recruitment:

UNFPA documents

1. UNFPA Strategic Plan (2018-2021) (incl. annexes)
<https://www.unfpa.org/strategic-plan-2018-2021>

2. UNFPA Strategic Plan (2022-2025) (incl. annexes)
<https://www.unfpa.org/unfpa-strategic-plan-2022-2025-dpfpa20218>
3. [UNFPA Evaluation Policy \(2024\)](#)
4. [UNFPA Evaluation Handbook](#)
5. Relevant centralized evaluations conducted by the UNFPA Independent Evaluation Office: The evaluation reports are available at: <https://www.unfpa.org/evaluation>

Viet Nam national strategies, policies and action plans

6. National Poverty Reduction Strategy
7. National Development Plan
8. United Nations Sustainable Development Cooperation Framework (UNSDCF)
9. Relevant national strategies and policies for each thematic area of the country programme

UNFPA Viet Nam CO programming documents

10. Government of Viet Nam/UNFPA 10th Country Programme Document (2022-2026)
11. United Nations Common Country Analysis/Assessment (CCA)
12. Situation analysis for the Government of Viet Nam/UNFPA 10th Country Programme Document (2022-2026)
13. CO annual work plans
14. Joint programme documents
15. Project document for interventions/programmes in different thematic areas of the CP 10
16. Reports on core and non-core resources
17. CO resource mobilization strategy

UNFPA Viet Nam CO M&E documents

18. Government of Viet Nam/UNFPA 10th Country Programme Document (2022-2026)
19. CO annual results plans and reports (SIS/MyResults)
20. CO quarterly monitoring reports (SIS/MyResults)
21. Previous Evaluation of the UNFPA 9th Country Programme of Assistance (CP9) to the Government of Viet Nam (2017-2021), available at: <https://www.unfpa.org/evaluation/database>
22. Mid-term Review (MTR) of the UNFPA 10th Country Programme of Assistance (CP10) to the Government of Viet Nam (2022-2026)

Other documents

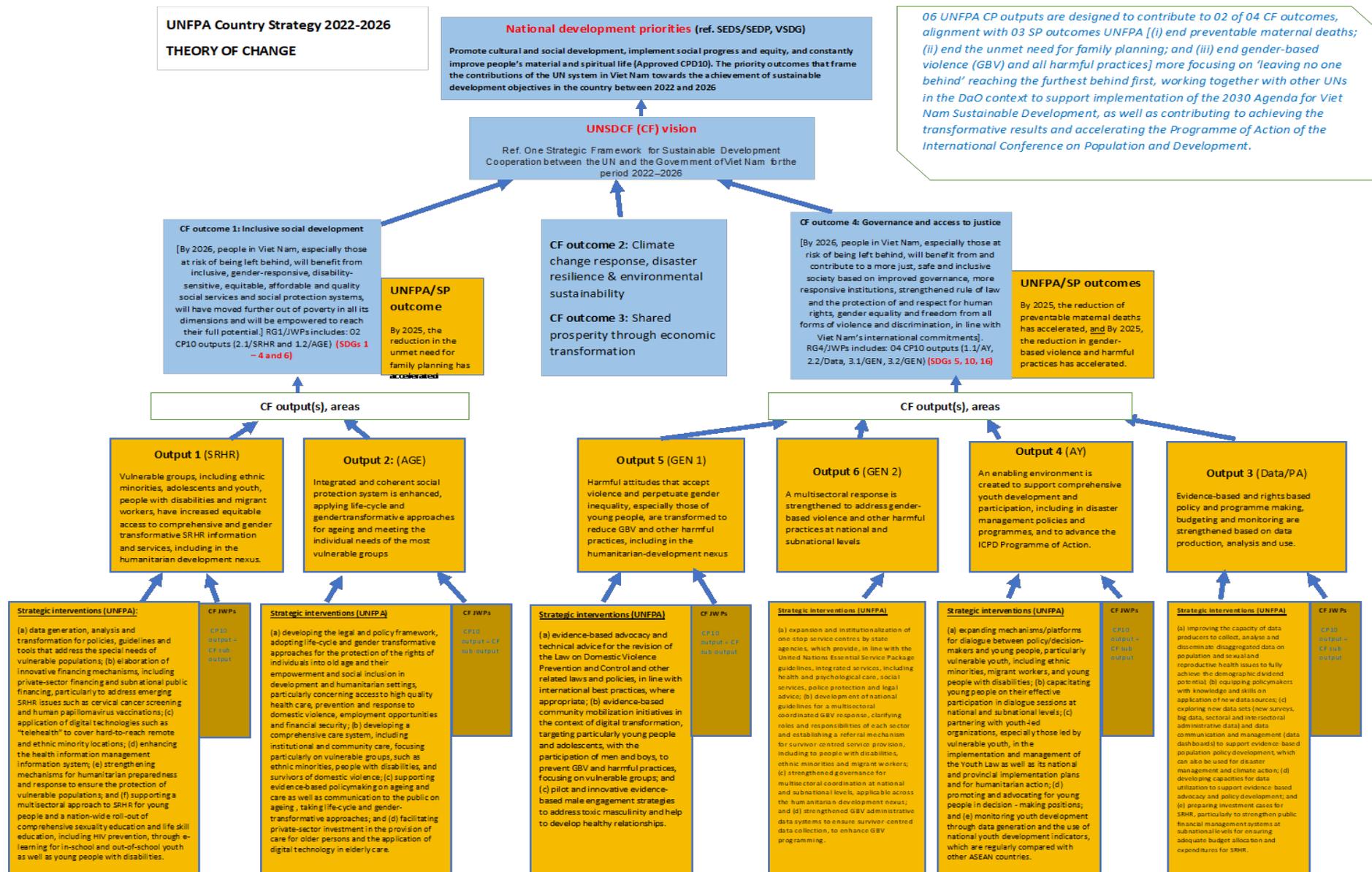
23. Implementing partner annual work plans and quarterly progress reports
24. Implementing partner assessments
25. Audit reports and spot check reports
26. Meeting agendas and minutes of joint United Nations working groups
27. Donor reports of projects of the UNFPA Viet Nam CO
28. HRP- Humanitarian Response Plan and related reports <https://response.reliefweb.int/> [optional: for CPE with a humanitarian component]
29. RRP- Refugee Response Plan and related reports <https://www.unhcr.org/refugee-response-plans> [optional: for CPE with a humanitarian component]
30. Evaluations conducted by other UN agencies

31. IAHE- Inter-Agency Humanitarian evaluations <https://interagencystandingcommittee.org/inter-agency-humanitarian-evaluations>

15. Annexes

A	Theory of change
B	Stakeholder map (will be provided to the contracted consultants)
C	Excel sheet on analysis of UNFPA interventions (will be provided to the contracted consultants)
D	Tentative evaluation work plan
E	Results framework

Annex A : Theory of change



Annex E: Results Framework

RESULTS AND RESOURCES FRAMEWORK FOR VIET NAM (2022-2026)

NATIONAL PRIORITY: Promote cultural and social development, implement social progress and equity, and constantly improve people's material and spiritual life.				
UNSDCF OUTCOME: By 2026, people in Viet Nam, especially the poor and those at risk of being left behind, will benefit from inclusive, gender-responsive, disability-sensitive, equitable, affordable and quality social services and social protection systems, will have moved further out of poverty in all its dimensions and will be empowered to reach their full potential (SDGs 1-4 and 6). By 2026, people in Viet Nam, especially those at risk of being left behind, will have benefited from and have contributed to a more just, safe and inclusive society based on improved governance, more responsive institutions, strengthened rule of law and the protection of and respect for human rights, gender equality and freedom from all forms of violence and discrimination, in line with international commitments (SDGs 5, 10 and 16).				
RELATED UNFPA STRATEGIC PLAN OUTCOME(S): By 2025, the reduction in the unmet need for family planning has accelerated.				
UNSDCF outcome indicators, baselines, targets	Country programme outputs	Output indicators, baselines and targets	Partner contributions	Indicative resources
<u>UNSDCF Outcome indicators:</u> <ul style="list-style-type: none"> Score of Youth Development Index <i>Baseline: 0.63 (2016); Target: 0.88 (2026)</i> Proportion of population covered by social protection floors/ systems (SDG indicator 1.3.1) <i>Baseline: 42.8 per cent (2021); Target: 55 per cent (2026)</i> <u>Related UNFPA Strategic Plan Outcome indicator(s):</u> <ul style="list-style-type: none"> Proportion of women of reproductive age (aged 15-49 years) who have their need for family planning satisfied with modern methods (SDG 3.7.1) <i>Baseline: 72.2 per cent (2019); Target: 75 per cent (2026)</i> 	<p>Output 1. An enabling environment is created to support comprehensive youth development and participation, including in disaster management policies and programmes, and to advance the ICPD Programme of Action.</p> <p>Output 2. Integrated and coherent social protection system is enhanced, applying life-cycle and gender-transformative approaches for ageing and meeting the individual needs of the most vulnerable groups.</p>	<ul style="list-style-type: none"> Number of national and subnational plans approved to implement the Youth Law, with a special focus on addressing needs of vulnerable young people <i>Baseline: 0 (2020); Target: 1 National Plan of Action for the Law; 1 National Plan of Action for the Strategy; and 63 provincial plans of action (2026)</i> Number of regional youth dialogue platforms established <i>Baseline: 0 (2020); Target: 3 (northern, central and southern regions) (2026)</i> Existence of the revised Law on the Elderly, with provisions on social inclusion and older persons' rights <i>Baseline: Revision proposal of the Law of the Elderly submitted (2020); Target: The Law is approved (2026)</i> Number of new solutions and innovations piloted to enhance social and economic participation and care of older persons <i>Baseline: 0 (2020); Target: 2 (2026)</i> Level of age extension of social assistance coverage for older persons <i>Baseline: Social pension covers people aged 80+ (2020); Target: Social pension covers people aged 75+ (2026)</i> 	<p>Ministry of Home Affairs, Ministry of Health, National Assembly, Youth Union and other youth-led organizations, civil society organizations (CSOs)</p> <p>Ministry of Labour, Invalids and Social Protection, Ministry of Health, CSOs, the private sector</p>	<p>\$1.4 million (\$0.7 million from regular resources and \$0.7 million from other resources)</p> <p>\$2.6 million (\$1.4 million from regular resources and \$1.2 million from other resources)</p>
NATIONAL PRIORITY: Promote cultural and social development, implement social progress and equity, and constantly improve people's material and spiritual life.				
UNSDCF OUTCOME: By 2026, people in Viet Nam, especially the poor and those at risk of being left behind, will benefit from inclusive, gender-responsive, disability-sensitive, equitable, affordable and quality social services and social protection systems, will have moved further out of poverty in all its dimensions and will be empowered to reach their full potential (SDGs 1-4 and 6). By 2026, people in Viet Nam, especially those at risk of being left behind, will have benefited from and have contributed to a more just, safe and inclusive society based on improved governance, more responsive institutions, strengthened rule of law and the protection of and respect for human rights, gender equality and freedom from all forms of violence and discrimination, in line with international commitments (SDGs 5, 10 and 16).				

RELATED UNFPA STRATEGIC PLAN OUTCOME(S): By 2025, the reduction of preventable maternal deaths has accelerated.				
UNSDCF outcome indicators, baselines, targets	Country programme outputs	Output indicators, baselines and targets	Partner contributions	Indicative resources
<p><u>UNSDCF Outcome indicators:</u></p> <ul style="list-style-type: none"> • Maternal mortality ratio <i>Baseline: 46 per 100,000 live births (2019); Target: 42 per 100,000 live births (2026)</i> • Adolescent birth rate <i>Baseline: 35 per 1,000 women aged 15-19 years (2019); Target: 33 per 1,000 women aged 15-19 years (2026)</i> • Number of new population-based surveys/research conducted for decision-making and monitoring of SDGs <i>Baseline: 0 (2020); Target: 3 (2026)</i> <p><u>Related UNFPA Strategic Plan Outcome indicator(s):</u></p> <ul style="list-style-type: none"> • Proportion of births attended by skilled health personnel <i>Baseline: 96 per cent (2021); Target: 98 per cent (2026)</i> 	<p>Output 3. Vulnerable groups, including ethnic minorities, adolescents and youth, people with disabilities and migrant workers, have increased equitable access to comprehensive and gender-transformative SRHR information and services, including in the humanitarian-development nexus.</p> <p>Output 4. Evidence-based and rights-based policy and programme-making, budgeting and monitoring are strengthened based on data production, analysis and use.</p>	<ul style="list-style-type: none"> • Number of provinces with innovative initiatives aiming to increase access of vulnerable populations to SRHR information and services <i>Baseline: 0 (2020); Target: 10 (2026)</i> • Number of provinces with approved cervical cancer prevention plans applying innovative financing mechanisms, including national and subnational state budgets <i>Baseline: 3 (2020); Target:12 (2026)</i> • Number of provinces that implement approved national guidelines on comprehensive sexuality education and life-skills education in secondary and vocational schools, and introduce CSE and LSE initiatives for out-of-school vulnerable youth <i>Baseline: 0 (2020); Target:10 (2026)</i> • Proportion of women aged 15-49 years residing in areas of humanitarian situations who receive SRH information and services <i>Baseline: 0 (2020); Target:25 per cent (2026)</i> • Existence of population and development policies and strategies aligned with international standards <i>Baseline: National Fertility Adjustment programme (2020); Target: Population Law drafted in line with ICPD principles (2026)</i> • Number of evidence-based policy briefs developed and used for advocacy to increase domestic resource mobilisation and public revenue for ICPD at national and subnational levels <i>Baseline: 0 (2020); Target:4 (2026)</i> 	<p>Ministry of Health, Ministry of Home Affairs, Ministry of Education and Training, Provincial authorities, Youth Union and other youth-led organizations, CSOs, the private sector</p> <p>Ministry of Health, National Assembly, Viet Nam Communist Party, General Statistics Office, Ministry of Justice, research institutes, the private sector</p>	<p>\$6.5 million (\$3.7 million from regular resources and \$2.8 million from other resources)</p> <p>\$1.9 million (\$1.6 million from regular resources and \$0.3 million from other resources)</p>

NATIONAL PRIORITY: Promote cultural and social development, implement social progress and equity, and constantly improve people's material and spiritual life.				
UNSDCF OUTCOME: By 2026, people in Viet Nam, especially those at risk of being left behind, will have benefited from and have contributed to a more just, safe and inclusive society based on improved governance, more responsive institutions, strengthened rule of law and the protection of and respect for human rights, gender equality and freedom from all forms of violence and discrimination, in line with international commitments (SDGs 5, 10 and 16).				
RELATED UNFPA STRATEGIC PLAN OUTCOME(S): By 2025, the reduction in gender-based violence and harmful practices has accelerated.				
UNSDCF outcome indicators, baselines, targets	Country programme outputs	Output indicators, baselines and targets	Partner contributions	Indicative resources
<p><u>UNSDCF Outcome indicators:</u></p> <ul style="list-style-type: none"> Sex ratio at birth <i>Baseline: 112.1 boys per 100 girls (2020); Target: 110 boys per 100 girls (2026)</i> Percentage of GBV victims seeking assistance from any support services <i>Baseline: 9.6 per cent (2019); Target: 50 per cent (2026)</i> <p><u>Related UNFPA Strategic Plan Outcome indicator(s):</u></p> <ul style="list-style-type: none"> Proportion of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence in the previous 12 months <i>Baseline: 27.8 per cent (2019); Target: 20 per cent (2026)</i> 	<p>Output 5. Harmful attitudes that accept violence and perpetuate gender inequality, especially those of young people, are transformed to reduce GBV and other harmful practices, including in the humanitarian-development nexus.</p>	<ul style="list-style-type: none"> Existence of the revised Law on Prevention and Control of Domestic Violence, in line with international standards <i>Baseline: Revision under consideration (2020); Target: The Law is approved and implementation started (2026)</i> Number of provinces implementing evidence-based innovative initiatives addressing discriminatory gender and socio-cultural norms, GBV and harmful practices, including in disaster management <i>Baseline: 3 (2020); Target: 8 (2026)</i> 	Ministry of Labour, Invalids and Social Affairs, Ministry of Culture, Sports and Tourism; Farmer's Union, Youth Union, CSOs	\$6.4 million (\$0.9 million from regular resources and \$5.5 million from other resources)
	<p>Output 6. A multisectoral response is strengthened to address gender-based violence and other harmful practices at national and subnational levels.</p>	<ul style="list-style-type: none"> Number of new one-stop service centres providing timely and high-quality GBV services per United Nations Essential Service Package guidelines <i>Baseline: 1 (2020); Target: 6 (2026)</i> Availability of coordinated multisectoral GBV service provision protocols approved by subnational actors <i>Baseline: Drafting of guidelines and protocols in progress (2020); Target: Guidelines and protocols approved and implemented at subnational levels (2026)</i> 	Ministry of Labour, Invalids and Social Affairs, provincial authorities, CSOs	<p>\$6.5 million (\$1.0 million from regular resources and \$5.5 million from other resources)</p> <p>Programme coordination and assistance: \$1.2 million from regular resources</p>