
Evaluation of UNFPA support to the prevention of, response to and elimination of gender-based violence and harmful practices (2012-2017)



UNFPA Evaluation Office

2018

KEY HIGHLIGHTS



UNFPA has made **SIGNIFICANT CONTRIBUTIONS** to **RESPONSE** to gender-based violence and harmful practices at all levels

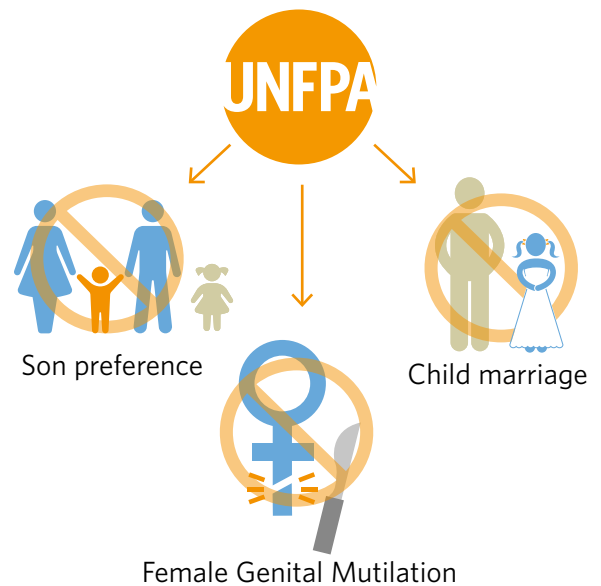


UNFPA should progressively **ENHANCE** its work on **PREVENTION** of gender-based violence and harmful practices at all levels



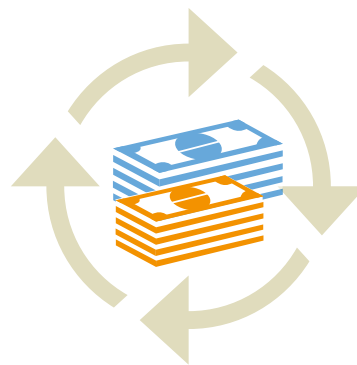
Existing **JOINT PROGRAMMES**, in particular, are an effective way to create synergies among different partners using dedicated resources

UNFPA is the **ONLY UN AGENCY** that works across all 3 harmful practices



UNFPA is making **IMPORTANT PROGRESS** in responding to gender-based violence and harmful practices across the **humanitarian, development and peace nexus**

UNFPA plays a **CRITICAL COORDINATING ROLE** in responding to gender-based violence in **humanitarian situations**



SUSTAINABLE AND CONSISTENT FUNDING to end gender-based violence and harmful practices is **increasingly difficult** for all development actors to secure



UNFPA should strengthen its approach to **COORDINATION**, including by **LEARNING** from other UN agencies' experiences in **humanitarian cluster coordination**



Greater commitment to **LONG TERM PREDICTABLE FUNDING** is critical to effectively address underlying **social norms and advance behavior change**

BACKGROUND

Widely recognized as an international public health crisis, gender-based violence (GBV) is a gross violation of human rights resulting in multiple physical, sexual and psychological consequences that affect the long term well-being of individuals and communities. Women and girls also continue to suffer from harmful practices, including child marriage, female genital mutilation, and son preference.

UNFPA has a long history of responding to GBV and harmful practices, tracing back to the International Conference on Population and Development (ICPD) in 1994. Since 2006, however, the tempo of this work has accelerated. The current UNFPA Strategic Plan 2018-2021 features dedicated outputs on GBV and, for the first time, all three harmful practices (female genital mutilation, child marriage, and son preference). Notably, UNFPA is also the only UN agency that is working on all three harmful practices.

To respond to GBV and harmful practices, UNFPA supports service delivery, conducts advocacy initiatives and policy dialogue, and develops capacities through its partnerships with government bodies, civil society and academia. Through multi-stakeholder partnerships and a human rights-based, gender responsive, and culturally sensitive approach to programming, UNFPA has contributed to the development of normative frameworks, collaborative efforts to share practical programme experiences, campaigns to support political accountability, and efforts to engage stakeholders beyond traditional UN actors.

PURPOSE AND SCOPE

The UNFPA independent Evaluation Office, supported by an external multidisciplinary team of thematic experts and evaluators, conducted an evaluation of UNFPA support to the prevention of, response to, and elimination of gender-based violence and harmful practices. Three harmful practices were included in the evaluation's scope: child marriage, female genital mutilation, and son preference. With the active engagement of an evaluation reference group, the thematic evaluation assessed the relevance, effectiveness, efficiency and sustainability of UNFPA work on gender-based violence and harmful practices. Covering the period 2012-2017, the evaluation considered support across the development-humanitarian-peace nexus at global, regional and country levels.

METHODOLOGY

The evaluation followed a mixed methods approach, collecting and analyzing both qualitative and quantitative data. Case studies were selected through purposive sampling: four country case studies, eight country extended desk reviews, two regional case studies, and a global review were chosen.

Analysis techniques included qualitative comparative analysis, contribution analysis, and realist synthesis to generate and triangulate evidence on the causal chain connecting UNFPA interventions to observed outcomes based on a reconstructed theory of change. To strengthen reliability, the evaluation used triangulation and internal and external validation mechanisms, including internal revisions among evaluation team members and external presentations and discussions of preliminary findings in debriefings and evaluation reference group meetings.



FINDINGS: AN OVERVIEW

Overall, efforts by UNFPA and its partners to respond to and eliminate GBV and harmful practices are contributing to progress on the implementation of the Programme of Action of the ICPD and have driven efforts to achieve the 2030 Agenda. The 48 findings of the evaluation relate to the evaluation's seven questions.

Alignment with international, regional and national normative frameworks as well as national needs

UNFPA programming firmly aligned with and contributed to relevant international human rights conventions, instruments and reports at all levels. At country level, UNFPA country programmes, priorities, and strategies aligned with national plans of action and contributed to UN Development Assistance Frameworks (UNDAFs).

UNFPA offices drew on situation analyses, studies and mappings to ensure the relevance of programme design to both rights holders and duty bearers. However, while all UNFPA programming addressed the needs of women and girls, the level of context-specific gender analysis informing each intervention was often dependent on the level of integration and the (varying) gender expertise of staff members within each office.

UNFPA strategic positioning at the intersection of sexual and reproductive health and GBV and harmful practices is a core comparative strength. Facilitating inter-sector relationships, straddling development-humanitarian contexts, field presence, and leveraging analysis of population data to inform programming contributed further to this strength.

Contribution to development results

The health sector response, particularly in terms of the clinical response, is the most tangible contribution of UNFPA to quality, accessible services. UNFPA support to a multi-sector response is advancing, albeit unevenly, thanks to the UN Joint Global Programme on Essential Services for Women and Girls Subject to Violence and strong initiatives by regional offices. Despite pockets of innovation, prevention side interventions are far more limited.

Evidence from UNFPA supported interventions helps inform national implementation of international commitments, local laws and gender policies. However, the commitment by UNFPA offices to knowledge exchange and learning across countries on solutions to end GBV and harmful practices (through, for example, South-South and triangular cooperation) is not yet backstopped by a systematic approach to aggregating and organizing this information (and using it for improved programming) at corporate level.

The strongest advocacy for funding GBV interventions is based on a combination of qualitative stories and quantitative incidence data. Success in UNFPA advocacy has brought other actors and resources to the table, with regional-level proving to be particularly well-suited for joint advocacy.

National capacity has been extensively supported by UNFPA. This is strongest in relation to the clinical response, with more variation in prevention and the psychosocial response. UNFPA capacity development of civil society at the local level has been primarily operational, with less attention given to building/supporting advocacy capacity to influence local political decision-making and budgeting. UNFPA also contributes significantly to the public good in terms of guidelines and knowledge products, but is generally lacking the resources for translation, roll-out, and ongoing follow-up to ensure national implementation of guidance.

UNFPA is making a strong contribution to national tracking of Sustainable Development Goal indicators on the prevalence of violence against women and harmful practices. UNFPA support to national data management capacity on GBV incidence and response is also a relevant, but nascent, area of contribution. Neither national nor UNFPA monitoring systems are currently sufficient to track the outcomes of (legal and social) normative interventions.

Organizational efficiency

GBV and harmful practices have progressively become more visible within UNFPA strategic plans. However, an increased proportion of non-core funds is limiting options for UNFPA offices to address the root causes of gender-based violence and harmful practices through sustained long-term programming. In the past, the UNFPA “business model” has not taken sufficient account of inequality at sub-national level, including variations in needs and capacities. Greater flexibility, introduced with the UNFPA Strategic Plan 2018-2021, is a welcome change in this regard. UNFPA leadership on GBV and harmful practices can also be strengthened by better integrating often siloed thematic teams (particularly at country level) and improved knowledge management.

While results-based management systems are in place, they are primarily focused on the output level (with variability in the quality and granularity of reporting at this level, as well), and contribution to outcomes is insufficiently considered. The short time frame of the annual work plans also create significant risks to delivering medium-term outcomes and ensuring no harm is created by interrupting services or creating unmet demands.

Sustainability of benefits beyond UNFPA support

UNFPA is laying the foundation for national capacity for prevention and response to GBV, with the creation of operational tools a key pillar of UNFPA strategies for sustainability. At the same time, UNFPA advocacy at the country-level is winning political will for policy change, but is often not translated into firm national budget commitments. UNFPA holds strong multi-sector relationships with ministries and local administrations to support national implementation, but heterogeneous links with the executive branch of governments limit political sustainability. In many places, UNFPA is part of a wider movement to change socio-cultural norms and these partnerships are a mechanism for sustainability beyond the programme cycle.

Humanitarian action

The Gender Based Violence Area of Responsibility (AoR) is the highest profile strand of UNFPA leadership on GBV in humanitarian action. Despite crucial core funding committed by UNFPA, the GBV AoR is under-resourced at global and country levels to ensure that UNFPA can deliver on this role and its commitment. Despite these constraints, UNFPA has made significant efforts to establish proper systems and structures to support humanitarian response and coordination. UNFPA surge has been a critical achievement and first step in establishing agency capacity to address GBV in emergencies at the operational level.

UNFPA is maturing in its role as a sub-cluster lead agency for GBV in humanitarian action. Where UNFPA has met the immediate operational and capacity challenges, humanitarian crises have been a key opportunity to kick-start the transformation of policy into action. Protracted crises provide opportunities to address prevention as well as response, and UNFPA can more systematically seize this window-of-opportunity.

The Minimum Initial Service Package (MISP) has successfully consolidated the entry point for UNFPA work on GBV preparedness to ensure greater consistency across countries, and has provided impetus to accelerate the coverage of preparedness work across more countries. UNFPA is actively attempting to enhance its contribution to the development-humanitarian-peace nexus, with the The Essential Services Package and the Minimum Standards for Prevention and Response to GBV in Emergencies significant contributions to this.

Shifting social norms

Social norms programming, especially at the community level, is a key pillar of UNFPA contribution, with extensive evidence of concrete programming with men and boys. However, social norms programming which does not tackle the structural determinants of marginalisation is limited in its contribution to eliminating GBV.

Advocacy and partnerships

UNFPA offices have contributed significantly to keeping GBV and harmful practices on political and programmatic agendas at all levels of decision-making and practice. However, outside of joint programmes, interagency cooperation and coordination between UNFPA and other UN entities at field-level is inconsistent, sometimes strained, and would often benefit from more structured governance agreements at the global level.

The current approach of UNFPA to GBV is responsive to contextual variations and various forms of strategic partnerships are contributing to outcomes through gender mainstreaming in humanitarian action, knowledge production, and support to services. Where strategic partnerships are developed with the UN system they can help mitigate interagency competition.

Working quietly to support national champions on often neglected topics has been essential to the contributions made by UNFPA, as has being a strong connector of different actors and levels. Diverse civil society partners remain the backbone of UNFPA reach to the furthest behind. Alongside this, UNFPA is building alliances with non-traditional stakeholders but has not yet systematically collected data on the efficacy and potential risks of doing so.

CONCLUSIONS: AN OVERVIEW

Conclusion 1

UNFPA has made unique and valuable contributions to the international system's response to GBV at all levels (global, regional, and country) across the humanitarian-development-peace nexus. Contribution has primarily been in the area of response to GBV through health-sector and multisectoral referral pathways and coordination, but UNFPA has also made contributions to capacity and institutions across the health sector and national gender equality mechanisms, with links to the justice, security and economic livelihoods sectors as well as reference to the education, youth and planning sectors. Emerging evidence of contributions to primary and secondary prevention, and examples of gender-transformative programming were also documented.

Conclusion 2

The global joint programmes on harmful practices and essential services demonstrate UNFPA collaborative advantage in addressing gender and social norms, and comparative advantage in opening space for civil society to work on neglected issues. However, while emblematic of the collaborative strengths of UNFPA, the joint programmes have also surfaced specific strategic challenges facing UNFPA, including a (1) concern that the prioritisation and visibility of harmful practices as standalone issues in strategic plans reflects donor funding priorities, rather than an intentional, evidence-based decision to emphasize specific harmful practices; (2) the global joint programmes' theories of change becoming the overall corporate approach to each harmful practice 'by default'; even if the analyses of drivers and change processes are tailored to the specificities of a particular place/region; (3) excluding countries not involved in a joint programme from the knowledge economy and resource mobilization opportunities generated by the joint programme; and (4) centring social norm change in the process of eliminating harmful practices rather than fully acknowledging the underlying structural drivers.

Conclusion 3

With rapid growth in discourse, policies and systems, UNFPA is making important progress in being prepared to respond across the humanitarian-development-peace nexus, and this can be accelerated. In a relatively short period of time, UNFPA has made significant progress in establishing humanitarian systems, functions, human capital and leadership, including through sole sub-cluster leadership of the GBV Area of Responsibility (AoR) and human resources surge, fast track procedures, and emergency funds, among others. Despite these notable achievements, important areas for growth remain to ensure UNFPA is fully geared to respond to humanitarian contexts. These include (1) the need to consolidate and align an expanding set of humanitarian guidelines; emergency funds with a lower ceiling and shorter duration than other agencies (and an inability to roll funds over); and insufficient core funds committed for coordination of the GBV AoR and GBV sub-clusters. Compounding these are specific organizational characteristics, including a culture of direct involvement in technical support, which can quickly overwhelm capacity and inhibit shared action, and diverse understandings of GBV within UNFPA, which can impact the ability of the AoR to clearly articulate the scope of persons of concern.

Conclusion 4

While the scope of UNFPA work on GBV offers a flexibility that has programmatic advantages, having various understandings and articulations of the boundaries of GBV at play within the agency are a barrier to UN coordination and shared understandings with partners. While this plurality allows UNFPA to adapt programming to different political contexts and work with people in the most marginalized situations, a pattern of (mostly negative) unintended effects resulting from the absence of a shared agency-wide understanding of the "boundaries" of GBV work emerged. These include muddled efforts at coordination with UN entities and other partners and a risk of dilution or confusion of UNFPA positions in negotiations (with donors, for example).

Conclusion 5

While working in partnership and through inclusive approaches are the dominant characteristics of UNFPA programming on GBV and harmful practices, the highest level of results has been achieved when this approach is combined with a sequenced focus on one specific "domain of change" (i.e. focusing on change to either the legal/policy framework, or community-level social and gender norms, or institutional services delivery), ground-presence and joint programmes. While inclusive, rights based, participatory partnerships are critical to results, limited core resources have impacted the ability to work in this way, with decreased scope for UNFPA to invest in the capacity of women's civil society organizations (traditional and long-standing UNFPA partners). Joint programmes and sub-national offices (where they exist) have been found to further facilitate contextually embedded programming, and contribute to achieving social and institutional outcomes (which often require complex, non-linear solutions).

Conclusion 6

Important UNFPA strengths of patient, evidence-based and participatory long-term gender-programming that have delivered results in the past are becoming increasingly difficult to maintain because of a reactive approach to coping with shifting global funding patterns. The largest UNFPA contributions have most often started with years of quiet, behind-the-scenes work to support national institutions and civil society work disproportionately funded by core resources: a scenario increasingly unfeasible for country offices to commit to in the current funding climate. While these challenges are not unique to UNFPA, they are affecting the capacity needed to work with the furthest-behind groups (often on neglected issues). Funding uncertainty has also resulted in an expectation that non-core funds be used creatively to cross-resource longer term work on GBV (previously resourced by core funding), but with no clear guidance on the boundaries or mechanisms for doing so.

Conclusion 7

UNFPA programming frequently transforms the knowledge, discourse and thinking of its partners in a sustainable way, but is less successful in maintaining activities once programme funds have stopped. Policy changes, life-skills education, and national prevalence data all exhibit key attributes of sustainability in terms of altering the on-going decision-making framework of individuals and institutions.

RECOMMENDATIONS

Overall recommendations at the corporate level

Recommendation 1

Senior management is strongly encouraged to reiterate the corporate priority placed on maintaining senior gender and GBV expertise in UNFPA. Staff positions at all levels – global, regional and country – should be ensured in order to deliver on commitments under Strategic Plan 2018-2021 Outcome 3.

Recommendation 2

Building on existing UN joint initiatives, and the opportunity of the 2018-2021 Strategic Plan's common chapter, UNFPA is recommended to issue clear guidance on the UNFPA GBV portfolio of work. This guidance – which should clarify the target and scope of UNFPA support – can be used, inter alia, to facilitate the necessary formally structured mechanism for joined-up working on GBV, especially with UN Women, that ensures no one is left behind.

Recommendation 3

UNFPA is recommended to systematise the production and exchange of outcome-level learning (both positive and less positive effects) from UNFPA programmatic implementation. Opportunities for knowledge exchange about what works and, importantly, what does not work/programmatic failure in GBV and harmful practices should be created, recognising this as valuable learning and a contribution to the public good.

Recommendation 4

UNFPA is recommended to continue engaging Member States and donors in the discussion on the importance of core funding, the need for quality non-core funding through thematic instruments, and adequate levels of predictable funding for the Strategic Plan, that can be flexibly utilized by field offices to support adaptive longer-term programming capabilities.

Recommendations for development contexts

Recommendation 5

Country and regional offices are encouraged to focus their programmatic work. While recognizing the importance of interconnected UNFPA programming on GBV and harmful practices, UNFPA offices with limited resources are encouraged to focus their main efforts on the areas in which UNFPA has the greatest impact, with the aim of avoiding 'spreading too thin'.

Recommendation 6

UNFPA should further invest in interventions supporting prevention of GBV, and progressively rebalance the GBV and harmful practices portfolio towards more and better work on prevention, including the entry point of psychosocial response.

Recommendation 7

UNFPA is recommended to further support recognition of sub-national inequities within the application of the UNFPA 'quadrant classifications' by encouraging country offices to apply UNFPA modes of intervention flexibly.

Recommendations for humanitarian contexts

Recommendation 8

The evaluation endorses the agreed Inter-Agency Standing Committee (IASC) principal of "Humanitarian System-Wide Scale-Up Activation" and on a "no-regrets" basis and recommends that UNFPA fully commit to its implementation. The IASC Principals have agreed that "major sudden-onset humanitarian crises triggered by natural disasters or conflict which require system-wide mobilization are to be subject to a Humanitarian System-Wide Emergency Activation." In exceptional circumstances – where the gravity justifies mobilization beyond normally expected levels – this measure should be applied for a time-bound period (up to six months, with a possible three month extension, for a total of nine months). UNFPA Senior management should fully support the operationalisation of this commitment to ensure that senior-level humanitarian GBV coordinators are present in all active humanitarian emergencies.

Recommendation 9

UNFPA should ensure that staff profiles and procurement policies, approaches and processes are well aligned. Both staff profiles and procurement policies and practices should respond appropriately to the requirements of sudden onset humanitarian emergencies.

Recommendation 10

UNFPA is encouraged to strengthen the humanitarian component of its work, in particular the leadership of the GBV Area of Responsibility. UNFPA should further adapt the lessons and tools from other cluster lead agencies, and thereby mainstream the organizational practice of cluster coordination as an interagency function.

Recommendation 11

UNFPA should strengthen the funding mechanisms across development and humanitarian settings. UNFPA is recommended to create a global continuum fund window within existing UNFPA funding mechanisms as a means to strengthen partnerships, accelerate the continuum approach, and scale-up innovation across the humanitarian-development-peace nexus.

UNFPA Evaluation Office

Marco Segone (Director, Evaluation Office), Alexandra Chambel (Evaluation Manager), Natalie Raaber (Evaluation Research Associate)

ITAD and Impact Ready Core Evaluation Team

Joseph Barnes (Team Leader and Gender Expert), Corinne Whitaker (Gender Equality and Gender-based Violence Expert), Katie Tong (Humanitarian Gender-based Violence Expert), Anna Marcet (Junior Expert)

Copyright © UNFPA 2018, all rights reserved.

The analysis and recommendations of this report do not necessarily reflect the views of the United Nations Population Fund. This is an independent publication by the independent Evaluation Office of UNFPA.

Any enquiries about this evaluation should be addressed to evaluation.office@unfpa.org

Read the full report at www.unfpa.org/evaluation

 [@unfpa_eval](https://twitter.com/unfpa_eval)