



EVALUATION QUALITY ASSURANCE SYSTEM

Office Of Evaluation
Measuring Results, Sharing Lessons

TERMS OF REFERENCE
JOINT EVALUATION OF REACH
(RENEWED EFFORT AGAINST CHILD HUNGER AND UNDER-NUTRITION)
COMMISSIONED BY THE OFFICES OF EVALUATION OF
FAO, UNICEF, WFP, WHO, DFATD CANADA

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1. Background

1.1. Introduction

1. The purpose of the TOR is to provide key information to stakeholders about the proposed evaluation, to guide the evaluation team and specify expectations that the evaluation team should fulfil. The TOR were reviewed by key stakeholders and inputs taken into consideration in the final version. The TOR were approved by the joint Evaluation Management Group comprised of the Offices of Evaluation of the UN REACH partner organizations (Food and Agriculture Organization FAO, World Health Organization WHO, United Nations Children's Fund UNICEF) and the Canadian Foreign Affairs, Trade and Development (DFATD), one of REACH's major donors.
2. The TOR are structured as follows: Chapter 1 provides information on the context; Chapter 2 presents the rationale, objectives, stakeholders and main users of the evaluation; Chapter 3 presents an overview of REACH and its activities, and defines the scope of the evaluation; Chapter 4 the evaluation approach and methodology; and Chapter 5 indicates how the evaluation will be organized.
3. The annexes provide additional information on REACH and the evaluation process including a stakeholder analysis, REACH working tools and guidelines, REACH log frame, detailed timeline of the evaluation and REACH fact sheets.

1.2. Context

4. There has been a long standing interest in nutrition at the international level, but the interest has heightened in recent decades. The United Nations Standing Committee on Nutrition (SCN) was originally created in 1977, although it evolved over time in structure and focus. In 1992 the first International Conference on Nutrition (ICN) was held which led to a declaration and plan of action on nutrition. The Lancet Series on Maternal and Child Nutrition published in 2008 presented evidence of the irreversible and profound effect of nutrition on overall child development and linked achievement of the Millennium Development Goals to efforts to address nutrition¹.
5. In 2008 the Directors-General of the Food and Agriculture Organization (FAO) and WHO and the Executive Directors of United Nations Children's Fund (UNICEF) and WFP wrote a letter to Country Representatives recognizing undernutrition as a key component to malnutrition and health. The letter noted that the causes of undernutrition are preventable and linked undernutrition to overall economic and social development². The letter committed the agencies to developing a partnership called the Renewed Effort Against Child Hunger and Undernutrition (UN REACH) in an effort to strengthen the fight against undernutrition. The International Fund for Agricultural Development (IFAD) later joined REACH in an advisory role. REACH was initially intended to help countries accelerate progress towards the Millennium Development Goal MDG 1, Target 3 (to halve the proportion of underweight children under five globally by 2015) primarily through a public health oriented approach. This approach evolved over time to reflect an evolving broadened multi-sectoral approach which was articulated also in the 2013 Lancet Series.
6. REACH takes place in the context of other UN and global initiatives on nutrition. The SUN movement (Scaling Up Nutrition) was launched in 2010. SUN

¹ The Lancet, Maternal and Child Undernutrition, January, 2008

² Letter from the Directors-General of FAO, WHO and Executive Directors of UNICEF and WFP addressed to All Country Representatives and dated 22 October 2008.

has been described as a voluntary multi-stakeholder partnership to scale up nutrition³. An external evaluation is currently on going of the SUN movement, with preliminary results indicating the growing importance of nutrition on the international agenda, but with concurrent concerns about the proliferation of initiatives that are not always well harmonized. The preliminary results also point to the challenges related to managing multi-sectoral engagement in the nutrition agenda at the country level, an issue that REACH also aims to address. The SUN Global Gathering held between 16-18 November 2014 in Rome brought together a large number of SUN stakeholders and provided an opportunity to discuss emerging evaluation findings.⁴ In its most recent annual report, REACH is described as co-facilitating with UNSCN the UN System Network (UN Network) at the global level, which supports the Scaling Up Nutrition (SUN) Movement. UNSCN harmonizes UN nutrition policy and standards across the UN agencies (Annex 1). REACH is responsible for supporting SUN processes at the country level by strengthening cooperation and coordination⁵.

7. Another important event, the second International Conference on Nutrition (ICN2) was held in Rome in 2014 to follow up on the 1992 ICN. Progress has been made since the first ICN, with diets and nutrition having improved over much of the world. However, improvements were not uniformly felt, with many people still under nourished and little change seen in in some regions, notably Sub-Saharan Africa and India.⁶ A background paper on policy recommended more public investments in agriculture and a focus on the poorest regions and different approaches to address the diverse needs of different segments of populations.

8. WFP's Office of Evaluation (OEV) was requested by the REACH Secretariat to manage the independent evaluation required by the Canadian donor because of its capacity to undertake such work including its Evaluation Quality Assurance System (EQAS) and because of its structural, institutional and behavioural independence. OEV carried out an evaluability assessment in 2013 in order to prepare for the evaluation. The evaluability assessment confirmed the importance of carrying out the evaluation jointly with all REACH partners. An agreement among the Offices of Evaluation of the REACH partners and DFATD to cooperate on the joint evaluation was developed in 2014.

2. Reasons for the Evaluation

2.1. Rationale

9. Monitoring and evaluation is a high priority for REACH in order to build understanding of the initiative's effect on improving nutrition governance and ultimately nutrition outcomes in participating countries; for knowledge sharing and learning across REACH countries and with other stakeholders. The evaluation is one element of REACH's overall accountability and learning framework, documented in the REACH Monitoring and Evaluation Overview (2012). Since nutrition governance

³ An overview of the evolution of SUN is presented in the SUN external evaluation Terms of Reference and Inception Report available on the SUN website. Scalingupnutrition.org

⁴ Mokoro, 2014. *Independent Comprehensive Evaluation of the Scaling Up Nutrition Movement: Interim Progress Report*. Oxford: Mokoro Ltd, 03 October 2014.

⁵ REACH Annual Report 2013

⁶ The Importance of Trend and Policy Influences on Global Diets since 1992 Summary Mazzocchi, M; Shankar, B; Traill, WB; Hallam, D. Paper presented to the Preparatory Technical Meeting For The International Conference On Nutrition (ICN2) Rome, 13-15 November 2013

must be tailored to each unique situation and is led by government, lesson learning and knowledge sharing are strongly linked to REACH's goal achievement, and has therefore been a high priority.

10. The evaluation is intended to address aspects that cannot be understood through routine monitoring in particular the extent to which REACH's outcomes have been achieved, factors affecting REACH outcome achievement and a comparison of experiences across different REACH countries that capture the difference in how REACH has been implemented in different countries. This will inform participating countries of progress and effects, and enable countries to understand how their own experiences compares to those of other countries. This is important information upon which future action by the REACH partner agencies or the country governments themselves could be based. Finally, the Canadian government funding for REACH came with the expectation that an independent evaluation be conducted of REACH. While the evaluation will satisfy that requirement, it could also be of interest to other current and possible future donors.

2.2. Objectives

11. The evaluation will address the dual objectives of accountability and learning as follows:

- **Accountability:** The evaluation will assess and report on the performance and results of REACH in the 8 DFATD funded countries. A management response to the evaluation recommendations will be prepared by the REACH secretariat to document the level of agreement with the recommendations and the steps to be taken to address the recommendations; and
- **Learning:** The evaluation will determine the reasons why certain results occurred or not to draw lessons and derive good practices for learning. It will provide evidence-based findings to inform REACH's future operational and strategic decision-making. Findings will be actively disseminated and lessons incorporated into relevant lesson sharing systems.

2.3. Stakeholders and Users of the Evaluation

12. An initial stakeholder analysis was conducted as a part of the 2013 evaluability assessment. The results are shown in a table in Annex 2.

13. Stakeholders were categorized as those in REACH Countries and those at the global REACH secretariat level. In country stakeholders include government actors in the range of ministries associated with nutrition, non-governmental partners involved in nutrition, UN partners, key donors and international and national REACH facilitators. Their interests are in knowing how effective REACH is, how to redirect if when needed to improve effectiveness, and how lessons can be shared across countries. These will be represented on an external advisory group.

14. Global actors include the REACH secretariat staff notably the REACH coordinator and REACH team. All UN partners including agencies WFP, FAO, WHO and UNICEF and global bodies such as SUN Networks and SUN Secretariat, the High Level Task Force on Global Food Security and the Standing Committee on Nutrition have interests in the evaluation. UN agencies collaborated in the establishment and implementation of REACH and are actively involved in REACH management and governance. They will also use the lessons learned to improve current programmes and when expanding REACH to new countries in the future. The SUN secretariat is a

key stakeholder with an interest in coherence and synergies between SUN and REACH. Other UN bodies have an interest in ensuring that REACH is contributing in a coherent way to the overall UN effort to improve nutrition, the zero hunger initiative and the Sustainable Development Goals (SDGs).

15. Since the evaluation focuses on countries funded by the Canadian government, the donor with the highest level of interest in the evaluation is Canadian DFATD who will be actively involved in the evaluation. The evaluation is essentially a formative evaluation, because decisions have already been taken to expand the REACH approach to additional SUN countries. Other REACH donors may be interested in the results because of their potential to fund the REACH approach to other countries.

16. The evaluation will be conducted as a joint evaluation with the Offices of Evaluation of all UN partners and the DFATD donor serving on an Evaluation Management Group (EMG described more fully in Section 5.3 below).

17. An Evaluation Reference Group will be developed that includes the REACH Steering Committee (technical representatives of the UN partner agencies), the REACH secretariat, REACH facilitators and SUN Focal Points (representatives of host country governments) in the 8 countries included in the evaluation. The role of the evaluation reference group will be to::

- Review and provide inputs on the key outputs in draft form (Terms of Reference and Evaluation Report)
- Facilitate access to sources of evidence and data at country or agency level
- Participate as key informants in interviews conducted by the evaluation team
- Facilitate broader stakeholder interest in the evaluation process and utilization of results (especially amongst national government line ministries and other national actors)
- Facilitate preparation of a consolidated management response to the evaluation

3. Subject of the Evaluation

3.1. Overview of REACH and its Activities

18. REACH aims to reduce maternal and child undernutrition in participating countries, as a part of country's efforts to achieve its development goals. REACH's contribution is to improve national nutrition governance and management in the countries in which it works. Two overarching theories underlying REACH are that:

- a. Through **better coordination** and less duplication, nutrition actions will be more efficiently and effectively delivered.
- b. By taking a **multi-sectoral approach** to nutrition, both nutrition direct and sensitive interventions will have a bigger impact on nutritional status of women and children.

19. The premise that improved nutrition governance is a key component in the fight against malnutrition is broadly supported by academic literature and the international nutrition community⁷. For example, the WHO Commission on the Social

⁷ An overview of the background to the emergence of nutrition governance as a key component to combat malnutrition is provided in pages 4-5 of the REACH Monitoring and Evaluation Overview, July 2012.

Determinants of Health argued that increased coordination and commitment among nutritional players was critical at all levels⁸.

20. To strengthen national governance and management, REACH implements standardized approaches and tools in each country. Capacity strengthening of national actors is a critical dimension.

21. REACH's *modus operandi* is to establish national facilitation mechanisms to support countries to intensify coordinated action to address undernutrition and stunting. An international facilitator is teamed up in each country with a national facilitator. Facilitators support the establishment of effective systems for nutrition governance and management. REACH defines effective systems as sustainable, government-led, multi-sectoral, and solution-oriented and based on partnerships involving different government agencies, as well as civil society, the private sector and relevant United Nations agencies. Implementation arrangements at the country level has varied from country to country depending on the national context.

22. REACH has a multi-tiered management structure with a small international secretariat based at WFP in Rome and governance in the form of a steering committee that includes representatives of all partner agencies, in addition to its country level governance and facilitation.

23. At country level, REACH introduces a number of diagnostic and analytical tools, including initial in-depth scoping and analysis of each country's nutrition situation (see Annex 3). Knowledge sharing systems are established and coordination mechanisms set up. The multi-sectoral approach aims to engage relevant government ministries across relevant sectors on nutrition-specific and nutrition-sensitive actions to ensure resources are used most effectively to reach those children in need.

24. The ultimate beneficiaries of REACH are women and children under five years of age, the most affected vulnerable populations with nutritional deficiencies. REACH aims to achieve a level of improved governance that indirectly impacts these beneficiaries while supporting UN agencies' ability to assist governments in the scale-up of nutrition efforts.

25. As shown in the REACH logframe (see Annex 4), REACH established a high level impact aim of improving the nutritional status of children under five years of age and women. This would be achieved by addressing the four REACH outcomes:

Outcome 1: *Increased awareness and consensus* of stakeholders of the nutrition situation and the best strategies and priorities for improvement

Outcome 2: *Strengthened national policies and programmes* that operationalize and address nutrition through a multi-sectoral approach

Outcome 3: *Increased human and institutional capacity* on nutrition actions at all levels

Outcome 4: *Increased effectiveness and accountability* of stakeholders in implementing at scale and supporting nutrition actions.

26. REACH began in two pilot countries Laos and Mauritania in 2008. Building on those experiences in 2010, the Canadian government (originally Canadian

⁸ WHO Commission on Social Determinants of Health 2008

International Development Agency CIDA now DFATD) funded REACH efforts in the eight additional countries in Africa and Asia, as shown in the following table:

Region	Country
Asia	Bangladesh, Nepal
West Africa	Ghana, Mali
East and Southern Africa	Mozambique, Rwanda, Tanzania, Uganda

Implementation of REACH in those countries began in 2011

3.2. Scope of the Evaluation

27. The evaluation will assess the relevance, efficiency, effectiveness and sustainability of REACH. The evaluation will also assess the effectiveness of the REACH secretariat, processes and coordination arrangements, governance and partnerships at all levels. It will also assess progress/ achievements of results at the country level in the eight DFATD funded countries. Case studies will cover all countries. The evaluation will also examine issues that are cross- cutting in nature (such as gender and equity, participation, national ownership, use of evidence, progress monitoring and reporting).

28. Funding was received in March 2011 and activities are on-going in all countries up to the present time. Therefore the evaluation reference period will be from March 2011 up until April 2015, when the evaluation's data collection will take place in order to assess the fullest extent of results achievement.

4. Evaluation Approach, Questions and Methodology

4.1 Overview of Evaluation Approach

29. The focus will be on evaluating the REACH country-level initiative and on the extent to which the systems, processes and activities developed have collectively contributed to the overall achievements of the REACH objectives and impact on country scale-up of nutrition.

30. The evaluation will assess what has been achieved by the REACH initiative; and its overall performance and effectiveness in achieving its objectives and outcomes, which are to improve nutrition governance and management and ultimately, improve nutrition in the 8 countries covered by the evaluation. It will also assess REACH's relevance, efficiency, and effectiveness. An important element is the extent to which REACH has been able to build sustainable nutrition governance and management mechanisms in the 8 countries including policies, systems and capacity. This will include the extent to which REACH was able to affect gender equality within the institutional structure of participating countries.

31. The evaluation will focus closely on the REACH logframe, both in terms of assessing the degree to which the logframe served as a realistic framework of objectives, risks and assumptions and the extent to which the objectives set out in the logframe were accomplished.

32. The evaluation approach will enable an assessment of gender and equity issues, which is particularly important considering that REACH aims to positively impact

women and children. The evaluation team will include one or more members with gender expertise; the final evaluation questions will reflect an appropriate focus on gender and equity issues

33. The evaluation will also build understanding of the reasons for the observed performance and results and draw lessons to start identifying best practices more broadly. It will form the basis for possible changes to REACH approaches for development of future interventions.

4.2 Evaluability Assessment

34. An evaluability assessment was commissioned by OEV in late 2012 to determine the feasibility of the eventual evaluation of REACH, to identify potential uses of the evaluation and how utility can be maximized, to refine the purpose of the evaluation and provide suggestions for the evaluation approach and methods. The evaluability assessment was conducted by an independent consultant, and included document and data review, a survey of REACH facilitators, interviews and country visits and participation in a REACH workshop. The report was finalized in April 2013.

35. One of the overarching recommendations of the Evaluability Assessment was to “ensure the evaluation examines the relevance, efficiency, effectiveness and sustainability of REACH, including the governance and management of REACH”. It concluded with four more specific recommendations. The first was that REACH be fully implemented prior to the evaluation. At the time of the evaluability assessment, with the evaluation was planned for 2014, and the Canadian funded project closed in mid-2014. However due to delays in starting up REACH, the evaluability assessment found that REACH would not have been implemented sufficiently to allow for an evaluation. The recommendation was to extend the Canadian funding and delay the implementation of the evaluation to Q1 2015. This recommendation has been fully adopted.

36. The second recommendation was to clarify the logic model to focus more on the changes sought in nutrition governance. The logic model and logframe have evolved over time. These changes will be documented and analysed, and additional modification and/or validation may be needed during the evaluation inception phase. The evaluability assessment recommended that the impact level not be assessed, as the length of the REACH implementation period would likely not have been long enough to see changes at the impact level. The evaluation should focus on assessing changes at the outcome level using both quantitative and qualitative data. This recommendation is reflected in the approach and evaluation questions.

37. Case studies should cover all countries to capture the diversity of country context and operational modalities employed in each country. At the time of the evaluability assessment, REACH was planning to conduct its own country case studies which would have been integrated into the external evaluation, but in consultation with the REACH secretariat a decision was made to integrate the case studies fully into the external evaluation methodology. This will minimize confusion and possible duplication of effort and lend additional credibility to the case studies conducted by the external, independent evaluation team. The collection of baseline and endline data is the responsibility of the REACH team, and will be analysed by the evaluation team. During the inception phase, this data will be made available to the evaluation team, and assessed for completeness and quality and a decision taken by the evaluation team whether the quality and coverage of the data is adequate for inclusion in the evaluation. This decision will be reflected in the Inception Report. The evaluation

team will also develop the evaluation design that specifies how the baseline/endline data will be incorporated into the overall evaluation.

38. The evaluability assessment recommended a joint evaluation but ensuring that the process not become overly bureaucratic and lengthy and roles clearly defined. The evaluation is being conducted jointly, and terms of the collaboration and roles are documented in an agreement to collaborate on the evaluation.

39. Requisite language and technical skills will be included in the evaluation team. External small technical reference group comprised of experts in nutrition governance and management, coordination and partnership and also representatives from national governments will be established.

4.3 Evaluation Questions.

40. The inception report will include a complete evaluation matrix with fully developed evaluation questions and sub-questions, indicators, data sources and approach to analysis. The inception phase will include an assessment of existing REACH indicators, analysis frameworks and available base and end line data, and the evaluation matrix will build on them where appropriate. The following four key evaluation questions were derived from the REACH M&E Overview (2012), the evaluability assessment (2013) and consultation among stakeholders:

Question 1. Relevance of REACH and appropriateness of the design: The extent to which:

- i) REACH objectives and strategies are in line with the international development agenda and with the priorities of participating countries in terms of reduction of hunger and improvements in nutrition;
- ii) the initiative is coherent with the mandates and capacities of the four UN agencies, including *inter alia* gender and equity objectives;
- iii) coherence, alignment, and complementarity were as achieved between REACH and other global nutrition initiatives (including the SUN initiative), and national nutrition policies and programmes.
- iv) REACH was designed and implemented to align and contribute to equity (including gender equality) as defined by international and regional conventions, national policies and strategies and the needs of the target group (women and children under five);
- v) the initiative's logic model including assumptions are valid, in terms of potential of REACH's activities and design to lead to its intended outcomes and impacts. Of particular interest are the assumptions concerning the importance of the multi-sectoral approach and coordinated action;
- vi) the design is appropriate to the stated goal in regard to the selection of outcomes, target groups (women and children under five), activities, countries and partnerships;

Question 2. Performance at the Country Level:

- i) Effectiveness: Analysis of the nature, quantity and quality of results against those intended; and unintended, including both positive and negative effects; While the focus is on outcome level, the evaluation will also analyse whether REACH is on track to achieve its intended impacts, and to what extent REACH's analysis is being reflected and taken up in policy and action planning at country level;

- ii) Equity: Extent to which REACH outputs and outcomes address equity considerations, including gender equity which is relevant to all four outcome areas: awareness raising and consensus building; policies and action planning; country priority interventions and coordinating mechanisms; and tracking and accountability systems; as well as the extent to which outputs and outcomes are moving towards achieving REACH's intended impacts on women and children;
- iii) Efficiency: Quantitative and qualitative assessment of the observed outputs produced in relation to inputs; how efficient are the administrative structures that REACH has put into place; are the current and/or proposed arrangements for managing REACH relative to SUN the most cost and administratively effective; and, could the results have been achieved more efficiently through other means.

Question 3. Contributing/Explanatory Factors: Analysis of the factors which affect REACH's performance and results, including *inter alia*:

- i) The operational and policy environments, capacity and resources, skills and knowledge in participating countries;
- ii) The governance and management of REACH, including the Steering Committee, the Secretariat, Country Committees and Technical Group;
- iii) REACH partnerships including: whether the necessary commitment, agreement and actions were taken by partners (including UN agencies at country and global levels) to support REACH to achieve its objectives; and, quality of partnership management by REACH with respect to other global and national nutrition initiatives

Question 4. Sustainability and the way forward

- i) Sustainability of the results achieved and of the REACH operational models;
- ii) The extent to which REACH is contributing to increased national ownership and its leadership role in multi-sectoral nutrition governance and coordination;
- iii) Based on the findings, concrete advice on ways forward, including whether REACH should continue and if so in what form; and/or other options for achieving outcomes.

4.4. Methodology

41. This section presents the overall preliminary methodology for the evaluation. Building on this, a complete methodology guide based on a fully developed evaluation matrix will be contained in the Inception Report, with annexes covering data collection instruments and further details as needed.

42. The methodology should be appropriate in terms of:

- Assessing REACH's logic and its objectives;
- Addressing the evaluation questions presented in section 4.3.
- Accounting for the limitations to evaluability identified in 4.2 as well as budget and timing constraints.

43. Data collection and analysis will be conducted at country level, for cross-cutting issues such as partnership, equity and capacity development, as well as analysis of REACH implementation mechanisms at the global level.

44. The methodology should demonstrate impartiality and lack of biases by enabling findings to be triangulated from a variety of information sources and both

qualitative and quantitative data derived primarily from interviews with the full range of REACH stakeholders, data analysis, and document and records reviews.

45. Case studies will be carried out in all eight countries to explore the country level evaluation questions. Country cases will explore the achievement of outputs and outcomes, whether or not REACH is on track to achieve the planned impact, indications of the sustainability of efforts, and the processes and methods used as well as the different modus operandi employed at country level and their effectiveness. Case studies will be based on document review and interviews with all REACH stakeholders and those responsible for implementing REACH in each country. The sampling technique to impartially select stakeholders to be interviewed will be specified in the Inception Report.

46. The evaluation will also include an analysis of endline and baseline data on REACH outcomes collected by REACH facilitators, which will be analysed at both country level and across countries (where possible).

47. The methodology will also enable an assessment of the effectiveness and efficiency of the REACH's governance and management, including the Steering Committee, the Secretariat, Country Committees and Technical Group. Benchmarking may be used to compare REACH's governance and management with its own Memorandum of Understanding and with good practice in other international partnership arrangements. The evaluation should also explore how the governance and management structures interacted and impacted on each other.

48. The methodology should enable an assessment of the effectiveness of the REACH partnership including whether the necessary commitment, agreement and actions were taken by all partners to support REACH to achieve its objectives.

49. Where relevant, data will be disaggregated by sex, by age group and by country. The evaluation findings and conclusions will highlight differences in performance and results of the operation for different beneficiary groups as appropriate.

4.5. Quality Assurance

50. WFP's evaluation quality assurance system (EQAS) for Strategic Evaluations will be applied to all substantive aspects of the evaluation, including terms of reference, evaluation team selection, the inception report and draft and final evaluation report. EQAS is based on the UNEG norms and standards and good practice of the international evaluation community (ALNAP and DAC). It sets out processes with in-built steps for quality assurance and templates for evaluation products. It also includes quality assurance of evaluation reports (inception, full and summary reports) based on standardised checklists. EQAS will be systematically applied during the course of the evaluation and relevant documents provided to the evaluation team.

51. A small technical advisory group comprised of technical experts in multi-sectoral nutrition governance will review the TOR and the draft Evaluation Report to ensure the evaluation draws upon the appropriate literature and existing knowledge base, and meets expected quality in terms of multi-sectoral nutrition governance.

52. An interagency joint Evaluation Management Group (see section 5.3 below) will conduct the first level quality assurance, while the Senior Evaluation Officer on behalf of the OEV Director will conduct the second level review and clearance of all evaluation products. This quality assurance process does not interfere with the views and

independence of the evaluation team, but ensures the report provides the necessary evidence in a clear and convincing way and draws its conclusions on that basis.

53. The evaluation team will be required to ensure the quality of data (validity, consistency and accuracy) throughout the analytical and reporting phases.

5. Organization of the Evaluation

5.1. Phases and Deliverables

54. In consultation with the REACH secretariat the evaluation reporting date was brought forward from February 2016 to November 2015, in order to ensure that the evaluation findings remain relevant in light of the expected evolution of REACH and changes in the international context for nutrition governance. A detailed timeline will be developed during the inception phase that enables the deadlines to be met, keeping in mind the consultation processes foreseen among the partners collaborating on the REACH evaluation and with other stakeholders.

Table 1: Timeline summary of the key evaluation milestones

Main Phases	Timeline	Tasks and Deliverables
1.Preparatory	Nov-Dec 2014	Terms of Reference Select and Contract Evaluation Team and/or firm
2. Inception	Jan-Feb 2015	Inception Mission and Inception Report.
3. Fieldwork	Mar-May 2015	Evaluation missions; data collection and case study reports
4. Reporting/ Reviews	Jun- Aug 2015	Evaluation Report Drafts and Final
5. EB.2/2015 (Nov)	Nov 2015	Summary Evaluation Report Editing/Formatting Management Response and Executive Board Presentation

5.2. Evaluation Component

55. A team leader and team members with appropriate evaluation and technical capacities will be engaged for the evaluation. Within the team, the team leader bears ultimate responsibility for all team outputs, overall team functioning, and client relations. The team leader requires strong evaluation and leadership skills, experience with evaluation of coordination mechanism and national programme capacity strengthening and technical expertise in one of the technical areas listed below. His/her primary responsibilities will be (a) setting out the methodology and approach in the inception report; (b) guiding and managing the team during the inception and evaluation phase and overseeing the preparation of working papers; (c) consolidating team members' inputs to the evaluation products; (d) representing the evaluation team in meetings with stakeholders; (e) delivering the inception report, draft and final evaluation reports (including the Executive Board summary report) and evaluation tools in line with agreed EQAS standards and agreed timelines.

56. A small evaluation team will bring together a complementary combination of technical expertise and experience in the fields of: (a) food security and nutrition

issues and governance, policy and advocacy at country level; (b) the international nutrition landscape including other coordinating mechanisms and the roles of major UN actors, (c) multi-sectoral nutrition programming (country level) (d) coordination mechanisms, multi-sectoral partnerships or leadership and (e) institutional change and capacity building. The team should have strong capacity in conducting global evaluations that incorporate country level cases, the use of mixed methods in evaluation, and integrating equity issues including gender equity in evaluation. The team should have the appropriate language capacity (English, French and Portuguese). Back office support in data analysis will be required to support the evaluation team members.

57. The evaluation team leader and members will contribute to the design of the evaluation methodology in their area of expertise; undertake documentary review prior to fieldwork; conduct field work to generate additional evidence from a cross-section of stakeholders, including carrying out site visits, as necessary to collect information; participate in team meetings, including with stakeholders; prepare inputs in their technical area for the evaluation products; and contribute to the preparation of the evaluation report. All members of the evaluation team will abide by the Code of Conduct for evaluators ensuring they maintain impartiality and professionalism.

58. Support will be provided by OEV to collect and compile relevant documentation, facilitate the evaluation team's engagement with interview subjects and provide support to the logistics of field visits.

5.3. Roles and Responsibilities

59. The evaluation is managed jointly by an interagency Evaluation Management Group comprised of representatives from the Offices of Evaluation of FAO, WHO, UNICEF, DFATD and WFP. The roles and responsibilities of the EMG are outlined in the agreement to collaborate on the evaluation. Main responsibilities are to support and oversee the evaluation management and act as a liaison for the evaluation with the appropriate technical units within their own organizations. They will provide inputs and review documents at key decision points in the development of the TOR, the selection of the evaluation team, the finalization of the inception report and the evaluation report.

60. The members of the Evaluation Management Group from the respective evaluation offices are:

- Marta Bruno, Evaluation Officer, FAO
- Krishna Belbase, Senior Evaluation Specialist, UNICEF
- Anand Sivasankara Kurup, Technical Officer, Programme Evaluation, WHO
- Pierre Tremblay, Head of Decentralized Development Evaluation, DFATD-Canada
- Dawit Habtemariam, Evaluation Officer, WFP

61. The WFP Office of Evaluation will chair and provide the secretariat function for the EMG, and will thus lead management of the process. Dawit Habtemariam will be the focal point, working closely with Jamie Watts, Senior Evaluation Officer who will provide supervision and second level review and Helen Wedgwood, OEV Director as needed.

62. The group will convene as needed at the key milestone points in the evaluation process. While most of these meetings will be virtual, two face to face meetings are foreseen: an initial planning meeting in November 2014 and a meeting during the finalization of the conclusions and recommendations (which may be held in conjunction with a stakeholder workshop in the summer of 2015; details to be developed during the inception phase). Each agency will meet the costs of its participation (a video link back-up will be provided for any member of the group which cannot be present in Rome).

63. Using a pragmatic approach that works within the given budget and time, the EMG will manage the entire evaluation process from consultation on draft terms of reference through to dissemination and follow-up to the final evaluation report. WFP will lead management of the process, but all milestone decisions will be taken jointly by the EMG on the basis of inputs from collaborating agencies.

64. WFP will lead the recruitment of an evaluation team using the procedures it has established and relationships with firms with which it holds Long Term Agreements. WFP will act as the main interlocutor between the evaluation team, represented by the team leader, and facilitate interactions with other agencies' counterparts to ensure a smooth implementation process.

65. All agencies will participate in briefing the team (either in person or virtually) and participate in the inception visit to WFP HQ and field visits during the inception phase if these are deemed necessary (which may be by telecom). Agencies will support the collection and organization of all relevant documentation from within their own organization and making this information available to the evaluation team.

66. Stakeholders in REACH implementation in participating countries and at the REACH secretariat will be asked to provide information necessary to the evaluation; be available to the evaluation team to discuss the programme, its performance and results; facilitate the evaluation team's contacts with stakeholders for country visits; set up meetings and field visits, organize for interpretation if required and provide logistic support during the fieldwork. A detailed consultation schedule will be presented by the evaluation team in the Inception Report. The members of the EMG should not have had responsibilities in the past related to the implementation of REACH. To avoid a conflict of roles and interests and following WFP EQAS practices, members of the Evaluation Management Group will serve only in a management capacity and they will not be considered members of the evaluation team. Neither EMG members nor staff implementing REACH will participate in meetings where their presence could bias the responses of the stakeholders.

5.4. Communication

67. The EMG will ensure consultation with stakeholders on each of the key evaluation phases as shown in Table1 (above). In all cases the stakeholders' role is advisory. Briefings and de-briefings will include participants from country and global levels. Participants unable to attend a face-to-face meeting will be invited to participate by telephone. A communication plan for the findings and evaluation report will be drawn up by the EMG during the inception phase, based on the operational plan for the evaluation contained in the Inception Report. The evaluation report will be posted on WFP's external website once complete as required by EQAS, other agencies will post the report as per their normal procedures.

68. Key outputs during the evaluation phase will be produced in English. Should translators be required for fieldwork, they will be provided.

69. A workshop is scheduled between the evaluation team and REACH facilitators in February 2015 as a briefing during the inception phase. The usefulness and possibilities for other workshops during the evaluation process for instance, to discuss the evaluation report recommendations will be assessed and decided during the inception phase.

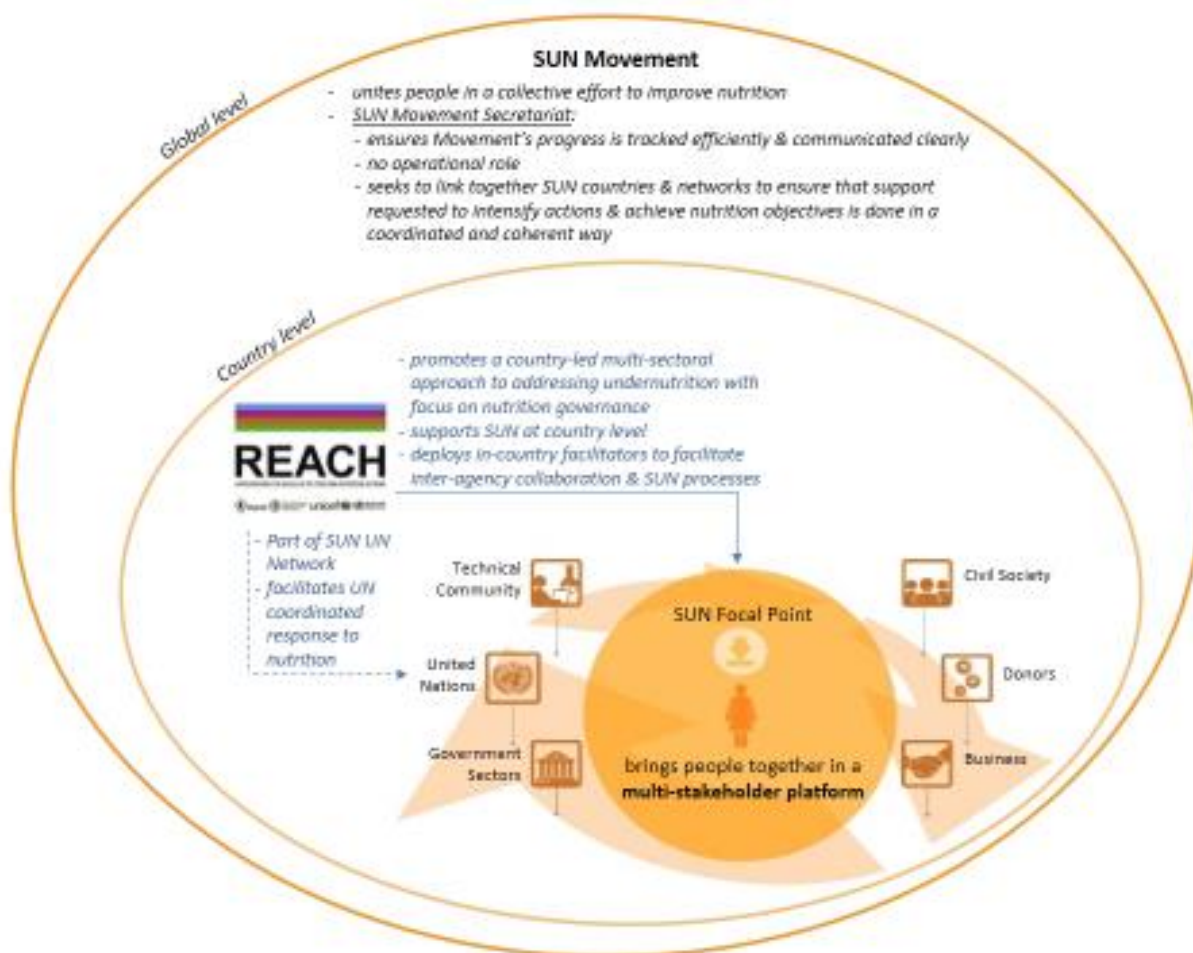
70. The Summary Evaluation Report will be presented to WFP's Governing Body in all official UN languages. Each cooperating agency should report to its governing bodies and management in line with its own procedures. Pro-active communications are encouraged. During the inception phase, the joint evaluation management group will agree on a plan for report dissemination in line with the evaluation objectives (see Section 2.B).

5.5. Budget

71. DFATD-Canada has provided funding to the WFP Office of Evaluation to manage the evaluation, through a trust fund managed by the REACH secretariat. The overall expected cost of the evaluation including preparatory work is US\$ 400,000, with the majority of the funding allocated to an independent evaluation team for fees and travel expenses. Partner agencies in the joint evaluation are covering their costs through in-kind contributions, although a small percentage of the evaluation budget may be used to cover the cost of coordinating the evaluation.

Annexes

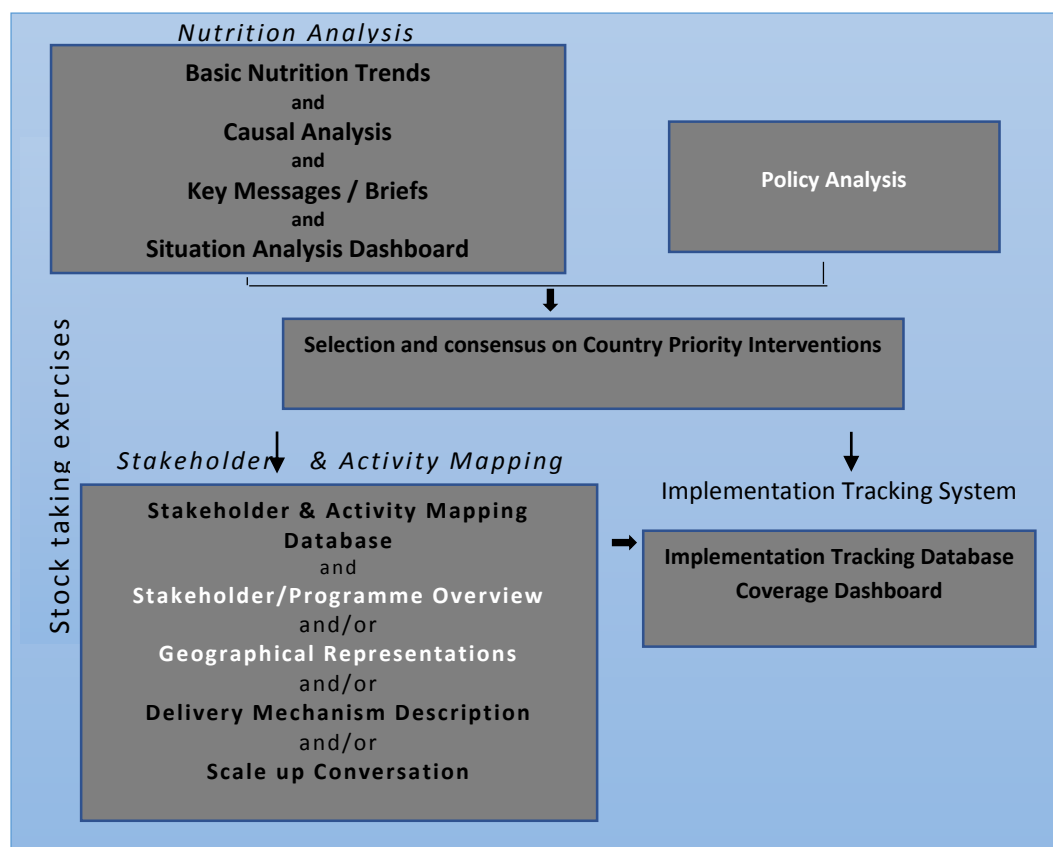
Annex 1. Relationship between SUN Movement and REACH



Annex 2. Stakeholder Analysis from Evaluability Assessment Report

	Stakeholder	Role and interest in the evaluation
Global	REACH Steering Committee (Representatives from WHO, FAO, UNICEF and WFP)	Global Strategic Direction, approval of Global workplan, Approve Guidelines prepared by REACH Secretariat, Oversee Resource Mobilization, Monitor/evaluate progress, Advise REACH Secretariat, Hosting the Secretariat. The REACH Steering Committee has an interest in identifying how best to address undernutrition, whether multi-sector multi-stakeholder initiatives for nutrition governance are an effective and efficient way to address undernutrition.
	REACH Secretariat	Develop and Implement Global Workplan, manage knowledge and information sharing within the partnership and with Countries and organizations, technical and administrative support to mobilize, , technical and administrative support to the Steering Committee, Representation at meetings. How effectively and efficiently the partnership has worked both at a global level and at a country level. The Secretariat is also interested in understanding what elements of the approach worked in order to be able to replicate them in the future and to adapt based on lessons learned.
	Donors	Funding, Monitoring, Advocacy. How effective and efficient is the REACH approach and what results have been achieved? In turn giving indications on future funding options.
	Partner Evaluation Offices (WHO, UNICEF, FAO)	Partners in a Joint Evaluation. Learning across different evaluation offices and about joint evaluations (which are likely to be more common in the future). Learning about potential increased efficiency of joint evaluations.
Country	Government Ministries (MoH, MoA and Food, Social Welfare, etc.,)	Policy, Strategy, Planning, funding and Implementation. How REACH has contributed to more effective and efficient Governance and management of nutrition and the sustainability of such efforts.
	Country Committee	Development of Country Implementation Plan, oversee expenditures, alignment with country objectives and REACH strategies and the achievement of results and provide information to the REACH Facilitator. The Country Committees are interested in understanding how REACH has improved coordination among themselves and with Governments and other nutrition actors. In addition, the role the Secretariat and Steering Committee have played in supporting country offices.
	UN Partner Organizations (WHO, FAO, UNICEF and WFP)	Implementation of activities within the mandate and in respect of specialized nature of the agency, reporting. The UN partner organizations have an interest in understanding how REACH has improved coordination and implementation among themselves and with Government and other actors.
	NGO's	Implementation of activities within the mandate and in respect of specialized nature of the agency, reporting. NGO's are an implementing partner to the REACH partners and have an interest in coordinated implementation and how REACH has contributed to this.
	REACH Facilitators	Support Country Committee, facilitate partner coordination, capacity development, Monitoring. REACH facilitators have an interest in understanding how effective and efficient the REACH approach has been in their respective contexts, as well as their contribution to improved coordination, governance and management of nutrition. In addition they are responsible for monitoring the implementation and evaluation will provide valuable learning for future monitoring.

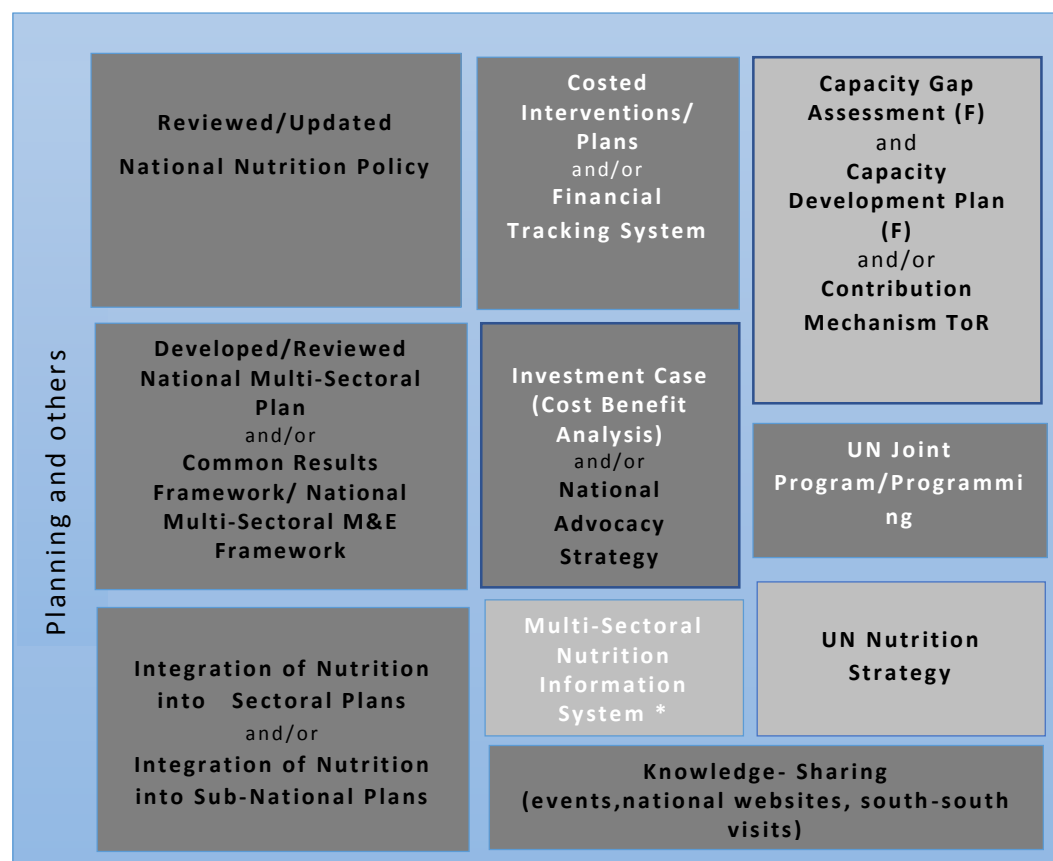
Annex 3. Reach Deliverables and Working Tools



Reach Working tools

- CIP
- Annual workplan
- Nutrition Governance Assessment Tool
- Facilitator Log
- Risk Register

Information for Reach website, e.g. records, files



Key:
Black Text: Mandatory deliverable
White Text: Optional deliverable
Dark grey Box: Reach is directly responsible
Light grey Box: Reach provides support

*Note: Includes inputs from and/or elements of other REACH deliverables e.g. Nutrition Analysis; Causal Analysis; Situation Analysis Dashboard; Stakeholder and activity mapping; Implementation Tracking database; Coverage Dashboards and Common results Framework/ National Multi Sectoral M&E Framework

Annex 4. REACH Logical Framework

Component	Indicator	Definition and Measure of Indicator	Target	Data source	Assumptions and Priority Outputs
Nutritional Impact: Improved nutritional status of children under five years of age and women	[1] Percentage of stunting among children under 5 years of age [2] Percentage of wasting among children under 5 years of age [3] Percentage of women aged 15-49 years with anemia [4] Percentage of children aged 6 to 59 months with moderate and severe anemia [5] Incidence of low birth weight [6] Percentage of women aged 15-49 years with moderate and severe thinness	[1] Number of children aged 0-5 years that fall below minus two standard deviations from the median height-for-age of the WHO Child Growth Standards / Total number of children aged 0-5 years that were measured x100 [2] Number of children aged 0-5 years that fall below minus two standard deviations from the median weight for height of the WHO Child Growth Standards / Total number of children aged 0-5 years that were measured x100 [3] Number of women aged 15-49 years with inadequate hemoglobin levels (<12 g/dL non-pregnant women) / Total number of women aged 15-49 years screened for hemoglobin levels during a specified period x100 [4] Number of children aged 6 to 59 months with inadequate hemoglobin levels (Hb <10 g/dL) / Total number of children aged 6 to 59 months screened for hemoglobin levels during a specified period x100 [5] Number of live-born babies with birth weight less than 2,500 g / Number of live births x100 for a given time period irrespective of gestational age [6] Number of women aged 15-49 years with a BMI<17 / Total number of women aged 15-49 years measured x100	[1] Global target is: 5.1% relative reduction per year (WHA 2012) but countries will set their own targets [2] Global target is: 5.1% relative reduction per year (WHA 2012) but countries will set their own targets [3] Global target is: 6.9% relative reduction per year (WHA 2012) but countries will set their own targets [4] Set by countries [5] Global target is: 6.9% relative reduction per year (WHA 2012) but countries will set their own targets [6] Set by countries	Secondary Data Source: • DHS and MICS • SMART surveys • Countdown to 2015 • National and Local Surveys (at HH level) • Health Facility reporting systems	• In-country data systems provide accurate and timely data • DHS, MICS or SMART surveys are done regularly and fall within the same time frame as the REACH initiative • Countries have agreed to prioritize these nutritional impact indicators • The timeframe of REACH engagement is sufficient to make an impact on these nutritional indicators (3-5 years)
Outcome 1: Increased awareness and consensus of stakeholders of the nutrition situation and the best strategies and priorities for improvement	1A. Commitment of Stakeholders: Percentage of top 5 stakeholders, by stakeholder group*, consciously supporting/implementing nutrition actions <i>*The stakeholder groups investigated include: five government ministries, five UN Agencies (4 REACH Partner Agencies plus another relevant UN Agency), five largest NGOs & donors in the social sector.</i> 1B. Stakeholder Awareness (Optional): Percentage of policy-makers, development practitioners and media with awareness of the country's nutrition situation	1A. Number of top 5 stakeholders, by stakeholder group, consciously supporting nutrition actions / 5 per stakeholder group x100 1B. Number of stakeholders* scoring "high" (>80%) on REACH awareness survey / Total number of stakeholders that took the survey x100 <i>*The stakeholders investigated include: policymakers, development practitioners, media.</i>	1A. 80% at endline for each stakeholder group 1B. 50% of each stakeholder category are aware	Primary Data Source: • REACH UN Focal Point team • Stakeholder Awareness Survey Secondary Data Source: • Nutrition policies and other reports • Ministry of Finance/Planning • REACH annual work plans	• Commitment of stakeholder to support nutrition actions is a direct result of increased awareness and consensus of the nutrition problems and how to address the problems • Nutrition focal points have adequate knowledge about the main stakeholder groups in the social sector in-country • The data is available to make informed choices • A list of donors and NGOs and their financial portfolios exists at the country level • A situational analysis that includes stakeholder mapping has been completed at the national or sub-national level
Output 1.1 Stocktaking Exercise: Multi-sectoral*, multi-stakeholder stocktaking exercise completed <i>*Multisectoral programmes are those that integrate various sectors involved in food, health and care interventions</i>	1.1a. Nutrition Situation Analysis: Nutrition situation analysis conducted and shared with government and other relevant stakeholders 1.1b. Stakeholder Activity Mapping Exercise: Stakeholder activity mapping conducted and shared with government and relevant stakeholders	1.1a. Scale: 20 = Completed 10 = On-going 0 = Not done 1.1b. Scale: 20 = Completed (<12 months old) & Disseminated 15 = Completed and current (<12 months old) 10 = Completed, Out of date (> one year old) 0 = Incomplete	1.1a. "20" at endline 1.1b. "20" at endline	Primary Data Source: • REACH Stocktaking Tools: Stakeholder mapping reports Secondary Data Source: • National information on M&E systems • DevInfo • DHS/SMART/MICS/CFSVA etc.	• Stakeholders are well represented in the nutrition situation analysis exercise • Stakeholders are well represented in the stocktaking exercise
Output 1.2 Consensus on CPIs: Consensus reached on Country Priority Interventions (CPIs)	1.2. Relevant CPIs Selected: CPIs* to address underlying causes of food insecurity, malnutrition and micronutrient deficiencies are selected <i>*CPIs: Country priority interventions are those nutrition actions (nutrition-specific and nutrition-sensitive) stipulated by the multi-sectoral nutrition policy. There are different types of CPIs, including: (a.) national-scale nutrition actions (e.g. Vit A supplementation campaigns); (b.) thematic nutrition-related actions; (c.) information-systems related actions; and (d.) capacity development actions for nutrition, among others. It is important to note that not all CPIs may be conducive to mapping and analyses, as by the REACH stocktaking and other exercises. Each country is encouraged to select 10-20 of the CPIs at the beginning of the REACH engagement to map and analyse during successive phases of the REACH process. Additional CPIs may be mapped and analysed, as the REACH engagement proceeds, time-permitting.</i>	1.2. 20=Yes or 0=No	1.2. "20" at endline	Primary Data Source: • REACH Stocktaking Tools: Dashboard, Stakeholder mapping, coverage and scale, delivery channels Secondary Data Source: • National Nutrition Policy/Action Plan	• Agreement on interventions is clearly defined
Output 1.3 Cost-benefit Analysis: Investment Case Completed	1.3. Cost-Benefit Analysis: Investment case completed and disseminated	1.3. Scale: 20 = Completed & Disseminated 10 = Completed 0 = Not Completed	1.3. "20" at endline	Secondary Data Source: • Ministry of Finance/Planning	• Advocacy for nutrition investment is a priority in the country • Resources are available to fund an investment case
Output 1.4 Joint Advocacy: The issue of malnutrition is featured in the national public arena	1.4a. JNAS Established: Joint Nutrition Advocacy Strategy (JNAS) emphasizing the 1000 days campaign established and adopted by government 1.4b. Nutrition Champions: Number of prominent personalities engaged as Champions in nutrition	1.4a. Scale: 20 = Completed & Adopted by government 10 = Completed 0 = Not Completed 1.4b. Number of nutrition champions	1.4a. "20" at endline 1.4b. ≥ 3 at endline	Primary Data Source: • Nutrition focal point teams Secondary Data Source: • REACH Facilitator work plan • Ministry Reports • Forums/Conferences/Events materials • Media Tracking - Newspaper Reports & Press Releases	• Addressing nutrition is a national priority

REACH Logical Framework
September 2013

Component	Indicator	Definition and Measure of Indicator	Target	Data source	Assumptions and Priority Outputs
Outcome 2: Strengthened nutrition policies, plans and programmes that operationalize the agreed priority actions and address nutrition through a multi-sectoral approach	2A. State of Policy: The aggregate numeric score measuring the state of the country's National Nutrition Policy 2B. State of Action Plan: The aggregate numeric score measuring the state of the country's National Nutrition Action Plan	2A. The aggregate numeric score of following three sub-components rated according to the respective scales: a) Policy is developed: 20=Yes, 10=On-going, 0=No b) Policy is officially endorsed by government: 20=Yes, 0=No c) Policy is less than 5 years old: 20=Yes, 0=No 2B. The aggregate numeric score of following six parameters rated according to the respective scales: a) Plan is developed: 20=Yes, 10=On-going, 0=No b) Plan is officially endorsed by government: 20=Yes, 0=No c) Plan is less than 5 years old: 20=Yes, 0=No d) Plan is multi-sectoral: 20=Involves 4 or more sectors, 15=Involves 3 sectors, 10=Involves 2 sectors, 5=Involves 1 sector, 0=No plan e) Plan is costed: 20=Yes, 10=On-going, 0=No f) Plan has an M&E framework: 20=Yes, 10=On-going, 0=No	2A. At least an aggregate score of 50 (out of 60) at endline 2B. At least an aggregate score of 95 (out of 120) at endline	Primary Data Source: • REACH UN Focal Point team • Government focal points Secondary Data Source: • National multi-sectoral nutrition policy • National multi-sectoral nutrition action plan	• There is stakeholder consensus on the national nutrition policy across all sectors • All government sectors will support the development/updating of a multi-sectoral nutrition action plan
Output 2.1 Nutrition in Government and UN Strategy: Nutrition included in high-level government development strategy and UNDAFs/UNDAPs	2.1a. Nutrition in Government Strategy: Nutrition is a priority in the National Development Strategy 2.1b. Nutrition in UNDAF/UNDAP: Nutrition is a priority in the UNDAF/UNDAP	2.1a. 20=Yes or 0=No 2.1b. 20=Yes or 0=No	2.1a. "20" at endline 2.1b. "20" at endline	Secondary Data Source: • National Development Strategy • UNDAF/UNDAP	• Nutrition is clearly defined and understood as a development issue • High-level strategy is drawn up during the UN REACH period, and the strategy informs policy and action plans for all relevant ministries and development partners. Or, this indicator can be satisfied based on a previously drafted strategy • UNDAF/UNDAP is drawn up during the UN REACH period, and all UN partner agencies make plans based on UNDAF/UNDAP priorities. Or, this indicator can be satisfied based on a previously drafted UNDAF/UNDAP
Output 2.2 Multi-sector National Nutrition Action Plan reviewed and updated	2.2. Nutrition Action Plan: A National Nutrition Action Plan (accompanying the National Nutrition Policy) budgeted and adopted by government (or modified where applicable)	2.2. Measured under Outcome 2 Indicator 2B			
Output 2.3 Sector/CPI Uptake: Country priority interventions included in annual work plans of relevant ministries/sectors Output 2.4 Sub-national CPI Uptake: Integration of country priority interventions into relevant sub-national development plans	2.3a. Sector Uptake: Number of relevant ministries (e.g. health, agriculture, education, gender and social welfare, etc.) that have included CPIs in their work plans 2.3b. CPI Uptake: Percentage of CPIs integrated in at least one sector's work plans (e.g. health, agriculture, education, social protection, etc.) 2.4. Sub-national Uptake: Percentage of sub-national units including CPIs in their development plans	2.3a. Number of relevant ministries with CPIs integrated <i>Note: List by ministry the number of CPIs in work plans</i> 2.3b. Number of CPIs in work plans / Total identified CPIs x100 2.4. Number of sub-national units including CPIs in their development plan / Number of sub-national units selected by government x100	2.3a. ≥ 3 at endline 2.3b. 75% at endline 2.4. 50% at endline	Primary Data Source: • REACH UN Focal Point Team Secondary Data Source: • Sector plans • Ministry Reports • NCM Reports Primary Data Source: • REACH UN Focal Point Team Secondary Data Source: • Relevant sub-national Ministry work plans	• Interventions have been prioritized and clearly defined • Ministries have been sensitized on the need and/or agree to mainstream nutrition into their respective work planning procedures/practices • The sub-national administrative units support integration of nutrition interventions in development plans

REACH Logical Framework
September 2013

Component	Indicator	Definition and Measure of Indicator	Target	Data source	Assumptions and Priority Outputs
Outcome 3: Increased human and institutional capacity on nutrition actions at all levels	3A. Implementation of Country Priority Interventions (CPIs): Capacity of delivery channels to roll out nutrition actions (via applicable proxy indicators, assuming that full scale-up indicates there is sufficient capacity to implement) 3B. Governance and Management: Capacity of the high level National Coordination Mechanism (NCM) to govern and manage the implementation of the national nutrition plan	3A. [1] Multi-sector: % of children <6 months who are exclusively breastfed [2] Health: % of children aged 6-59 months who received 2 doses of Vitamin A supplements [3] Health: % of pregnant women receiving iron supplements for 90 days or more [4] Health: % of children aged 6-59 months given deworming medication in the last 6 months [5] Health: % of children under 5 years who slept under an ITN the night prior to survey [6] Health: % of children under 5 years of age with severe acute malnutrition (SAM) having access to appropriate treatment including therapeutic foods (TFs) [7] Trade: % of households consuming adequately iodised salt [8] WASH: % of the population with sustainable access to an improved water source [9] WASH: % of the population with sustainable access to sanitation [10] Agriculture & Food Security: % of children 6-23 months of age who receive foods from 4 or more food groups [11] Agriculture & Food Security: Food consumption score [12] Agriculture & Food Security: Diet diversity score [13] Education: Primary school completion rate for girls 3B. Scale: National coordination mechanism (NCM) formally established in government: 20=Yes, 10=On-going, 0=No Committee meeting regularly (at least once in last 12 months): 20=Yes, 0=No Relevant nutrition Sector participation: 20=More than 4 sectors, 10=3-4 sectors, 0=Less than 3 sectors Secretariat established: 20=Functional, 10=Established but not functional, 0=Not established	3A. [1] 3.2% relative increase per year (WHA 2012) [2-13] Improvement X% at endline 3B. An aggregated score of 50 (out of 80) at endline	Primary Data Source: • REACH Stocktaking Tools: Dashboard, Stakeholder mapping, coverage and scale, delivery channels • REACH UN Focal Point Team Secondary Data Source: • National Surveys and surveillance systems • DHS and MICS • VAM and MaFFS • Ministry of Finance and/or Planning • NCM/SUN Progress Reports • Ministry, UN and donor reports	<ul style="list-style-type: none"> The coverage indicators will capture the necessary information on a timely, regular basis The coverage data will be captured accurately Increased coverage is an indication of sufficient capacity All countries will set up a high level coordination committee
Output 3.1 Capacity Gap Analysis and Planning: Functional and technical capacity gaps identified and plans established to address the needs	3.1a. Capacity Gap Analysis: Capacity gap & needs analysis for delivering a multi-sectoral approach completed 3.1b. Capacity Development Planning: Roadmap and resource mobilization plan developed for capacity building (functional)	3.1a. Scale: Functional capacity: 20=Yes, 10=Partially/On-going, 0=No Technical capacity (only two priority sectors): 20=Yes, 10=Partially/On-going, 0=No 3.1b. 20=Yes or 0=No	3.1a. Functional: "20" at endline Technical (only two priority sectors): 20 average score at endline 3.1b. "20" at endline	Primary Data Source: • REACH Facilitator log and case studies • REACH UN Focal Point Team • Situational Analysis • Stakeholder & Activity Mapping Secondary Data Source: • Capacity assessment reports • Nutrition action plan • Capacity development plans	<ul style="list-style-type: none"> The national multi-sectoral action plan which determines capacity needs for the scale-up of interventions is of good quality There is a comprehensive multi-sectoral plan to address capacity needs of the nutrition action plan
Output 3.2 Capacity Development: Human capital allocated and institutions in place for nutrition coordination and for nutrition scale-up	3.2a. Human Capital (technical): Extent to which human capacity needs identified in the capacity gap assessment have been implemented in each sector (both at national and sub-national levels) 3.2b. Human Capital (functional): Number of relevant national ministries and percentage of sub-national administrative units with dedicated focal points to plan, coordinate and monitor nutrition scale-up	3.2a. Scale: National Level - Priority sector 1 and 2: 20=Satisfactorily implemented, 10=Partially implemented, 0=Implementation not started Sub-national Level - Priority sector 1 and 2: 20=Satisfactorily implemented, 10=Partially implemented, 0=Implementation not started 3.2b. National level: Number of relevant ministries with dedicated focal points Sub-national unit: Number of sub-national units with dedicated focal points / Number of selected sub-national units x100	3.2a. National Level: 15 average score at endline Sub-national Level: 15 average score at endline 3.2b. National: ≥ 5 at endline Sub-national: 50% at endline	Primary Data Source: • UN Focal point team • Government focal points • Situational Analysis Secondary Data Source: • Progress reports • Ministry Reports • National Food and Nutrition Action Plan • Other relevant national policy documents • Attendance/Minutes from NCM	<ul style="list-style-type: none"> Technical capacity needs to scale-up nutrition have been determined
Output 3.3 Guidance Materials and Training: Governance, management and nutrition-related training for relevant ministries, regions and districts delivered	3.3a. National Guidance for Government: Nutrition specific training guidance on financial, M&E, and governance capacity developed and delivered for government staff 3.3b. Guidance for Community-Based Nutrition: Nutrition specific guidance that includes CPIs and delivery channels, and training programs on WASH, education, infant and young child feeding and food security developed 3.3c. Nutrition M&E Training: Number of relevant national ministries and percentage of sub-national administrative units with dedicated human capacity trained on nutrition M&E tracking	3.3a. 20=Yes or 0=No 3.3b. Scale: 20 = Comprehensive approach being rolled out 15 = On-going development of a more comprehensive approach (multi-sectoral) 10 = At least 2 sectors have started to review guidelines and tools 0 = No action 3.3c. National: Number of ministries with trained dedicated focal points Sub-national: Number of sub-national units with trained dedicated focal points / Number of sub-national units with dedicated focal points (equal to number of selected sub-national units) x100	3.3a. "20" at endline 3.3b. Minimum "15" at endline 3.3c. National: ≥ 5 at endline Sub-national: 50% at endline	Primary Data Source: • REACH UN Focal point team • REACH situation analysis • Facilitator Observation • Guidance materials developed Secondary Data Source: • Ministry reports • National Food and Nutrition Action Plan • Other relevant national policy documents • CHW curriculum and other community volunteer or worker programmes • Local academic institutions • Attendance/Minutes from NCM	<ul style="list-style-type: none"> Delivery of nutrition by country personnel is a priority NCM is coordinating or overseeing the National Training guidance for community-based nutrition All focal points will have been identified at national and sub-national level

**REACH Logical Framework
September 2013**

Component	Indicator	Definition and Measure of Indicator	Target	Data source	Assumptions and Priority
Outcome 4: Increased effectiveness and accountability of stakeholders in implementing and supporting nutrition actions	4A. Impact Tracking: Mechanism to consolidate and analyse food and nutrition security impact data across sectors implemented and updated (<3 years old) 4B. Implementation Tracking: Mechanism to track implementation of the national nutrition plan established 4C. Funding Tracking: Mechanism to track the funding of the national nutrition plan established	4A. 20=Yes or 0=No 4B. 20=Yes or 0=No 4C. 20=Yes or 0=No	4A. "20" at endline 4B. "20" at endline 4C. "20" at endline	Primary Data Source: <ul style="list-style-type: none"> REACH UN Focal Point Teams REACH Stakeholder mapping or other mapping exercise Secondary Data Source: <ul style="list-style-type: none"> Survey reports Ministry of Finance and/or Planning NCM/SUN Progress Reports Ministry, UN and donor reports Donor network reports NCM minutes M&E reports 	<ul style="list-style-type: none"> Information systems across sectors are harmonised. If data collection, sampling methodologies, etc. vary so much, then it will not be possible to interpret these data. For example some surveys could be collecting data in selected regions while others have a national coverage Data for most indicators can be collected routinely and effectively. Most surveys are conducted between 3-5 years and so will not be relevant for decision-making on a regular basis The government has funding to commit to nutrition and is tracking it National government and ministries have clear and accessible reports indicating the amount of funds being earmarked. Also, earmarking funds is considered an action of commitment to implementing nutrition policies and programs
Output 4.1 Effectiveness: A multi-sectoral M&E system and processes in place to analyze, actively coordinate and respond to problems in nutrition governance and programming	4.1a. Dashboard: Dashboard to track nutrition impact and implementation established 4.1b. Governance in NIS: Governance and management outcome indicators integrated within the national/sector information system(s) 4.1c. Nutrition in NIS: Full set of nutrition and coverage indicators identified and integrated within the national/sector information system(s)	4.1a. Scale: 20 = Completed (<12 months old) & Adopted by government 15 = Completed and current (<12 months old) 10 = Completed, Out of date (> one year old) 0 = Incomplete 4.1b. 20=Yes or 0=No 4.1c. 20=Yes or 0=No	4.1a. "20" at endline 4.1b. "20" at endline 4.1c. "20" at endline	Primary Data Source: <ul style="list-style-type: none"> REACH UN focal points Secondary Data Source: <ul style="list-style-type: none"> National information on M&E systems DevInfo DHS/SMART/MICS Stakeholder Mapping 	<ul style="list-style-type: none"> The country is readily willing to adopt the use of a dashboard to track impact and implementation. The country has the technical infrastructure and human capital to implement and support the national/sector information system(s) The national/sector information system is prepared to provide updates and include more indicators The country has a national/sector M&E system(s) that can adopt these new indicators
Output 4.2 Accountability: Results clearly disseminated to relevant stakeholders	4.2. Results: National M&E output results regularly disseminated to key stakeholders	4.2. Scale: 20 = M&E reports available, current (within 12 months) 10 = M&E reports available, out of date 0 = M&E reports not accessible or distributed	4.2. "20" at endline	Secondary Data Source: <ul style="list-style-type: none"> Ministry of Finance/Planning Ministry reports NCM minutes National information systems M&E reports 	<ul style="list-style-type: none"> Resources are available for nutrition M&E reports are disseminated to all key stakeholders
Output 4.3 Joint UN Effectiveness: Nutrition as a key area for the "UN delivering as One" established	4.3a. UN as One: Joint UN programs/programming for nutrition developed and funded 4.3b. UN In-country Focal Points: Number of UN partner agencies (WHO, FAO, UNICEF and WFP) that have focal points with nutrition governance responsibilities in their terms of reference and/or work plans 4.3c. UN Coordination: UN coordination mechanism established/created for enhanced UN system-wide coordination and harmonization of actions 4.3d. UN Strategy in Nutrition: Inter-agency common strategy for nutrition agreed upon by the four UN partner agencies	4.3a. Scale: 20 = 2 or more joint UN programs developed and funded 10 = 1 joint UN program developed and funded 0 = No joint UN program developed and funded 4.3b. Number UN Agencies that have focal points with nutrition governance responsibilities 4.3c. Scale: 20 = Mechanism created and fully operational 10 = Mechanism created but not operational 0 = No mechanism in place 4.3d. 20=Yes or 0=No	4.3a. "20" at endline 4.3b. 4 at endline 4.3c. "20" at endline 4.3d. "20" at endline	Primary Data Source: <ul style="list-style-type: none"> UN Focal point teams Facilitator Observation Secondary Data Source: <ul style="list-style-type: none"> UN partner agency reports UN Programme documents Focal Point TORs/Work plans 	<ul style="list-style-type: none"> The four UN agencies are working effectively in country Facilitator will be privy to all nutrition-related UN programs planned or implemented

Annex 5. Detailed Timeline* Details will be finalized during the Inception Phase

	Name of the Evaluation	By Whom	Key Dates (deadlines)
Phase 1 - Preparation			Nov-Dec 2014
	Desk review. Draft TORs.	EMG	Nov 1-21, 2014
	EMG Planning Meeting to discuss TOR	EMG	Nov 21, 2014
	OEV/D clearance for circulation to Stakeholders	EMG	Nov 29, 2014
	Feedback period on draft TOR	EMG	Nov 29-Dec 12, 2014
	Final TOR sent to Stakeholders	EMG	
	Contracting evaluation team/firm	EMG	December 2014
Phase 2 - Inception			Jan-Feb 2015
	Team preparation prior to briefing (reading Docs)	Team	
	Briefing (WFP Rome)	EMG & Team	January 28-30, 2015
	Inception Mission (visit to a country)	EM + TL	
	Submit Draft Inception Report (IR) to OEV	TL	February 20, 2015
	EMG quality assurance and feedback	EMG	
	Submit revised IR	TL	
	Circulate final IR to key Stakeholders for their information + post a copy on intranet.	EMG	
Phase 3 - Evaluation Phase, including Fieldwork			Mar-May 2015
	Fieldwork & Desk Review	Team	
	Exit Debrief (ppt.) Preparation	TL	
	Debriefing with HQ, RB and COs Staff.	EMG&TL	
Phase 4 - Reporting			Jun-Aug 2015
	Submit draft Evaluation Report (ER) to OEV (after the company's quality check)	TL	June 15, 2015
	EMG quality feedback sent to the team	EMG	
	Submit revised draft ER to OEV	TL	
	Second level clearance prior to circulating the ER to Stakeholders. When cleared, draft evaluation report shared with stakeholders for their feedback.	EMG	
	OEV consolidate all comments (matrix), and share them with team	EMG	
	Submit revised draft ER to OEV based on the comments, and team's comments on the matrix of comments.	TL	
	Review comments matrix and revised ER.	EMG	
	Seek OEV Dir.'s clearance to issue Summary Evaluation Report (SER) to Collaborating Agency Executive Management.	EM	
	OEV circulates the SER to Collaborating Agency Executive Management for comments (upon clearance from second level supervisor)	EM	
	Revise Executive Summary of evaluation report	EMG	
	OEV sends and discuss the comments on the SER to the team for revision	EM	
	Submit final draft ER (with the revised SER) to OEV	TL	
	Seek Final approval by second level supervisor/OEV Director Clarify last points/issues with the team if necessary	EMG&TL	Aug 28

Phase 5 WFP Executive Board (EB) and follow-up ⁹			
	Submit SER/recommendations to RMP for management response + SER to ERBT for editing and translation	EM	
	Tail end actions, posting on websites, EB Round Table Etc.	EM	
	Presentation of Summary Evaluation Report to the WFP EB	D/OEV	Nov 2015
	Presentation of management response to the WFP EB	D/RMP	

⁹ Timing and procedures for presentation to governance bodies of collaborating agencies (FAO, UNICEF and WHO) will be documented in the inception phase and captured in the communications plan.

Annex 6. Factsheets

Table 1 : Nutrition Profile DFADT funded REACH Countries ¹⁰

Country	Region		Percentage of Population below \$1 per day	GDP per capita (PPP US\$)	Low Income Food Deficit Country (LIFDC) ¹³	Percentage Female Body Mass Index (BMI) ⁸	Percentage of children under 5y stunted ¹⁴	Percentage of children under 5y wasted ⁸	Percentage of children under 5y under weighted ⁸	Percentage Low Birth Weight (<2500gr) ⁸	Percentage Anaemia Children <5y (Hb<110 g/L) ⁸	Percentage Anaemia pregnant Women (Hb<110 g/L) ⁸
		Year	Value ¹¹	(Year 2011) ¹²	(Year 2012)	<17 kg/m ²	(Year 2011)	(Year 2011)	(Year 2011)	Value (Year)	Value (Year)	Value (Year)
Bangladesh	Asia	2010	43.3	1.788	Yes	n/a	41.4	15.7	36.8	22 (2006)	68 (2004)	39 (2004)
Nepal	Asia	2010	24.8	1.256	Yes	n/a	40.5	11.2	29.1	18 (2011)	48.4 (2006)	42.4 (2006)
Ghana	West Africa	2006	28.6	1.884	Yes	2.2 (2008)	22.7	6.2	13.4	11 (2011)	76.1 (2003)	64.9 (2003)
Mali	West Africa	2010	50.4	1.099	Yes	n/a	38.5	15.3	27.9	18 (2010)	82.8 (2001)	73.4 (2001)
Mozambique	East and Southern Africa	2008	59.6	982	Yes	1.9 (2003)	43.1	6.1	15.6	17 (2011)	74.7 (2001-2)	n/a
Rwanda	East and Southern Africa	2011	63.2	1.251	Yes	2.5 (2004-5)	44.3	3	11.7	7 (2010)	56.3 (2005)	n/a
Tanzania	East and Southern Africa	2007	67.9	1.521	Yes	12.2 (2005)	34.8	6.6	13.6	8 (2010)	71.8 (2004-5)	58.2 (2004-5)
Uganda	East and Southern Africa	2009	38	1.354	Yes	n/a	33.7	4.8	14.1	12 (2011)	72.6 (2006)	64.4 (2006)

Source of Table 5: Different sources (see footnotes)

¹⁰ The nutrition data are from the Nutrition Information Landscape System (www.reachpartnership.org).

¹¹ **Percentage of population below \$1 per day:** Millennium Development Goals Indicators – UN (www.reachpartnership.com)

¹² **GDP per capita (PPP=Purchasing Power Parity):** World databank. World Development Indicators (WDI) & Global Development Finance (GDF)

¹³ **LIFDC :**Food and Agriculture Organization of the United Nations - Low-Income Food-Deficit Countries

¹⁴ Nutrition Information Landscape System (www.reachpartnership.org). All countries data are for 2011 apart from Mali that is 2006

Table 2. Overview of REACH implementation in DFADT funded countries

Country	Region	Donor	Funding Started (Date)	Date of CIP Approval	Funding due to end (Date)	International Facilitator start Date	International Facilitator end date
Bangladesh	Asia	DFATD	31/3/11	8/8/2011	31/12/14	30.07.12	31.05.13
Nepal	Asia	DFATD	31/3/11	12/3/2012	31/12/14	01.11.12	31.10.13
Ghana	West Africa	DFATD	31/3/11	12/3/2012	31/12/14	14.08.12	13.08.13
Mali	West Africa	DFATD	31/3/11	12/3/2012	31/12/14	03.09.12	02.12.12
Mozambique	East and Southern Africa	DFATD	31/3/11	8/8/2011	31/12/14	15.07.12	14.07.13
Rwanda	East and Southern Africa	DFATD	31/3/11	8/8/2011	31/12/14	01.06.12	31.05.13
Tanzania	East and Southern Africa	DFATD	31/3/11	8/8/2011	31/12/14	23.07.12	22.07.13
Uganda	East and Southern Africa	DFATD	31/3/11	12/3/2012	31/12/14	21.07.12	20.07.13

Source Table 2: Table 6 of Evaluability Assessment of the Renewed Effort Against Child Hunger and Undernutrition Partnership (REACH).

Table 3: Overview of governance in DFADT funded REACH Countries

Country	Region	Governance Score ¹⁵ (-2.5 to +2.5)	National Coordination Mechanism ¹⁶ in the process (Baseline)	National Coordination Mechanism established (current status)	Perceptions of Progress ¹⁷ against plans 1=good 2=average 3=weak/slow	In Depth Country Assessment	Year of In Depth Country Assessment
Bangladesh	Asia	-0.86	n/a	n/a	2	No	n/a
Nepal	Asia	-0.91	n/a	Yes	3+	No	n/a
Ghana	West Africa	+0.11	n/a	n/a	3	Yes	2008
Mali	West Africa	-0.43	n/a	n/a	3	Yes	2011
Mozambique	East and Southern Africa	-0.25	n/a	n/a	3+	Yes	2010
Rwanda	East and Southern Africa	-0.25	Yes	Yes	3	No	n/a
Tanzania	East and Southern Africa	-0.34	n/a	Yes	3	Yes	2011
Uganda	East and Southern Africa	-0.59	Yes	Yes	3+	No	n/a

Source Table 3: Table 1-2-4 of Evaluability Assessment of the Renewed Effort Against Child Hunger and Undernutrition Partnership (REACH).

¹⁵ **Governance Score:** The World Bank Group. Governance Indicators. (<http://info.worldbank.org/governance/wgi/index.asp>)

¹⁶ **National Coordination Mechanism:** Findings on Status of Nutrition Coordination Mechanisms (Reach Annual Report 2013 p 7)

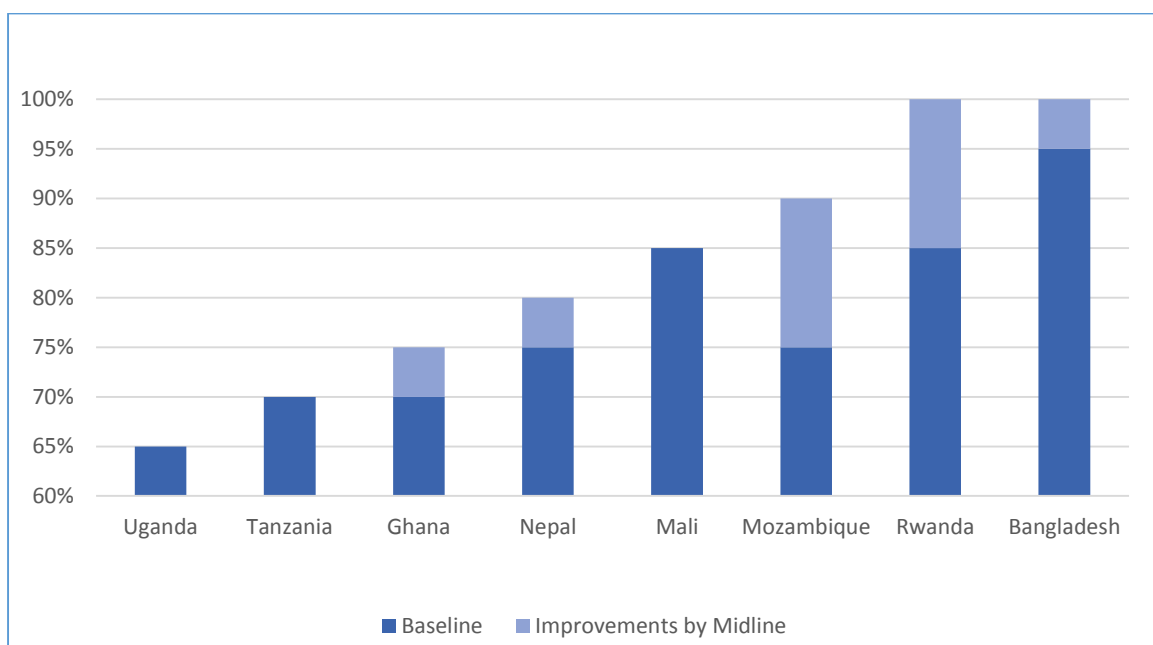
¹⁷ **Perceptions of Progress:** Based on REACH Secretariat perceptions 1=good, 2=average, 3=weak/slow

Table 4: Integration of Nutrition into 4 Sector Plans in REACH countries with County Priority Interventions

Country	Health	Agriculture	Social Protection	Education
Bangladesh				
Nepal	X	X	X	X
Ghana	--	X	--	--
Mali	X	X	--	X
Mozambique	X	partly	X	--
Rwanda	X	X	X	X
Tanzania				
Uganda				

Source table 3: REACH M&E Midline, REACH Country Calls on Status Updates (Dec 2013 as reported in REACH Annual Report 2013)

Figure 1: Stakeholder Nutrition Awareness Levels



Notes:

All countries joined REACH in 2011 except for Bangladesh (Dec 2010)

Stakeholders: Top 5 nutrition relevant Government Ministries, UN Agencies, NGOs and Donors

Source of Graph: REACH Annual Report 2013

Table 5: Overview of Reach funding

Donor	Amount	Funding Started (Date)	Funding Ending (Date)	Extension of Amount	Extension Started (Date)	Extension Ending (Date)
DFATD	\$15.000.000,00	29/03/2011	31/12/2014	\$5.000.000	25/03/2014	31/12/2016
EU	\$4.545.454,54	07/12/2012	06/06/2016	n/a	n/a	n/a
USAID	\$1.303.472,25	16/05/2011	30/09/2014	n/a	n/a	n/a
Total Budget	\$20.848.926,79			\$25.848.926,79		

Source table 4: For DFATD: www.international.gc.ca for EU & USAID data were provided by REACH Secretariat

Acronyms

CIP	Country Implementation Plan (REACH)
DFATD	Canadian Foreign Affairs, Trade and Development
EMG	Evaluation Management Group
EQAS	Evaluation Quality Assurance System
ER	Evaluation Report
FAO	United Nations Food and Agriculture Organization
ICN	The International Conference On Nutrition
ICN2	The Second International Conference On Nutrition
IFAD	International Fund for Agricultural Development
IR	Inception Report
MoA	Ministry of Agriculture
MoH	Ministry of Health
OEV	WFP's Office of Evaluation
REACH	Renewed Effort Against Child Hunger And Under-Nutrition
SCN	United Nations Standing Committee on Nutrition
SUN	Scaling Up Nutrition
UNICEF	United Nations Children's Fund
WFP	World Food Programme
WHO	World Health Organization