

INTERNATIONAL PLANNED PARENTHOOD FEDERATION

**DFID Partnership
Programme Arrangements
Evaluation
2008-2010 Period**

FINAL REPORT

November 15, 2010

**Prepared and presented by:
Daniel Genberg
Guillaume Mercier**

Contents

| | |
|--|----|
| Abbreviations | 2 |
| 1-Executive Summary..... | 3 |
| 2-Introduction and methodology | 5 |
| 2.1 The Programme Partnership Agreement (PPA) | 5 |
| 2.2 The Evaluation Methodology | 5 |
| 2.3 The Evaluation Team | 7 |
| 2.4 Evaluation Considerations..... | 7 |
| 3-Results..... | 8 |
| 3.1 Impact of PPA on organizational development of IPPF..... | 8 |
| 3.1.1 PPA Objective 1..... | 8 |
| 3.1.2 PPA Objective 2..... | 12 |
| 3.1.3 PPA Objective 3..... | 14 |
| 3.2 Overall health of IPPF M&E system..... | 15 |
| 3.3 Impact on people’s lives, gender issues and social exclusion issues..... | 17 |
| 3.4 Results of IPPF on policy issues | 18 |
| 4-Value for money..... | 20 |
| 5-Lessons learning | 24 |
| 6-Building support for development | 26 |
| 6.1 Interventions and presence on global level | 26 |
| 6.2 Advocating at the national level..... | 26 |
| 6.3 IPPF MAs as a capacity builder in NGO/CSO sector | 27 |
| 7. Recommendations and issues to be addressed | 29 |
| Annexes | 32 |
| Annex 1 – Terms of Reference | 33 |
| Annex 2 - List of people and organizations interviews | 36 |
| Annex 3 - Documents reviewed or consulted | 42 |
| Annex 4 – Allocation of Working Days: Planned and Actual | 45 |
| Annex 5 – Scope of the Evaluation: the Evaluation WBS..... | 46 |

Abbreviations

| | |
|-----------|---|
| APB | Annual Programme and Budget |
| APR | Annual Performance Report (of IPPF) |
| ARO | Africa Regional Office |
| CMIS | Clinical Management and Information System |
| CO | Central Office (IPPF) |
| CPR | Contraceptive Prevalence Rate |
| CSE | Comprehensive Sexuality Education |
| CYP | Couple Years Protection |
| DANIDA | Danish International Development Agency |
| EC | Emergency Contraception |
| eIMS | electronic Integrated Management System |
| FGAE | Family Guidance Association of Ethiopia |
| Five 'A's | IPPF's Strategic Framework 2005-2015 |
| FIGO | International Federation of Gynecology and Obstetrics |
| FPAN | Family Planning Association of Nepal |
| GCACI | Global Comprehensive Abortion Care Initiative |
| GIS | Global Indicator Survey |
| HIV | Human Immunodeficiency Virus |
| ILO | International Labour Organisation |
| IUD | Intra-Uterine Device |
| LGBTQ | Lesbian, Gay, Bisexual, Transgender and Queer |
| MA | Member Association (of IPPF) |
| M&E | Monitoring and Evaluation |
| MDGs | Millennium Development Goals |
| MTR | Mid Term Review (of IPPF's Strategic Framework) |
| PPA | Partnership Programme Arrangement |
| RO | Regional Office (IPPF) |
| SARO | South Asia Regional Office |
| SDP | Service Delivery Point |
| SIDA | Swedish International Development Cooperation Agency |
| SRHR | Sexual and Reproductive Health and Rights |
| UNFPA | United Nations Population Fund |
| USAID | United States Agency for International Development |
| VFM | Value For Money |
| WHO | World Health Organisation |

1-Executive Summary

IPPF commissioned an evaluation of the Partnership Programme Arrangement (PPA) with DFID to feed into their own reflection and planning processes in the middle of 2010. The broad purpose of the assignment was to evaluate progress made towards the agreed objectives, to assess value for money and the implementation of IPPF's Strategic Framework in the DFID focus countries. The evaluation has been both desk- and field-based. It has involved the review of documents, interviews with staff from IPPF, DFID and some partners, collection of further programme documentation. It has also involved field visits to IPPF Member Associations in two countries.

The PPA between DFID and IPPF was negotiated and agreed in 2008. The PPA is clearly linked to IPPF's own strategic framework for the period 2005-2015, which lays out the commitments of the federation to a number of goals and specific objectives.

With more than 150 national associations, six regional offices and one central office, IPPF is a large organization by any comparison. It also stands out from other international NGOs in that the national member associations are autonomous from the international structure without any formal managerial links. This can make federation wide change more slow to effectuate but it also safeguards the links and roots the associations have in their respective communities. The direct budget support provided through the PPA is channelled to IPPF's member associations as core grants that are used to implement their programmes. This funding is supplemented by restricted projects and by programmes that generate income at country level. These inputs together yield the results that the member associations and IPPF report on an annual basis.

This report should not be read as a complete account of IPPF's work. Evaluators have focused on the specific objectives of the PPA and the examples used to illustrate aspects thereof represent only a fraction of the work of IPPF. This report does not reflect the extensive and wide ranging achievements of IPPF as a whole. In the spirit of learning and improving, evaluators have also focused their comments on the PPA areas where they consider there is room for improvement.

Progress towards the PPA Objectives

It can be generally concluded that there has been a clear and positive trend of progress towards the PPA objectives. This positive progress is partly due to the fact that the PPA objectives were closely aligned to those in IPPF's own organizational priorities and therefore fell under areas that IPPF was already determined to work in.

However, it is not possible to determine exactly the extent of progress in achieving the objectives across the federation as a whole. Such an exercise would require more time and resources than were available to the consultants. The Mid Term Review (MTR) of its strategic framework which IPPF conducted in 2009 provides a lot more detail than can be shown in this report and the evaluators have been fortunate to be able to consult this extensive document. If the MTR is the sky, this evaluation is a satellite and it is hoped that we in this report manage to send clear signals albeit not a complete picture.

PPA Objective 1: Encourage and support better management of resources and outcomes

The PPA has had a positive impact on IPPF organizational development. The progress made through the PPA has brought IPPF to strengthen its monitoring and evaluation system. More MAs are collecting and reporting data based on the IPPF strategic framework and service statistics module than two years ago. An evaluation focal point group constituted of Central and Regional Offices M&E resource persons has taken the lead. The evaluation focal point members are realistic in regards to IPPF M&E system current state and are looking at solutions to improve it. Today one can say that IPPF recognizes the importance of the M&E function and the implementation of the PPA has contributed to that. IPPF has produced the agreed outcomes on measurement of efficiency and improving sustainability. Important discussions on performance based management and budgeting are taking place at the central level. Those discussions show that IPPF has gone further than the PPA outcomes on sustainability issues. A voucher scheme has been presented recently and a new policy for performance based resource allocation is being implemented. On the measurement of efficiency, the accreditation process plays an important. Today, the MAs need to show commitment to results to get accredited.

PPA Objective 2: Encourage and support full compliance with the strategic framework

IPPF has through its reporting in donors' reports, the Annual Performance Report and other specific reports been able to show clear results of its work. This includes both services provided as well as examples and testimonies of how MAs affect and improve people's lives. These reports further show the progress made in the federation to implement the strategic framework. This is in part a result of the improved reporting systems. The targets and indicators established in the PPA have been met and IPPF has continued to improve performance and deliver results on the ground. Further steps can be taken to communicate the significance of these results in comparison to national statistics and in this way report on the outcomes of IPPF's work around the world.

PPA Objective 3: Encourage and support the evolution of IPPF's governance

IPPF has implemented the recommendations presented by the Governance Task Force and the final effects of this will be seen in 2011 when elections to IPPF Governing Council will take place. IPPF has continued to find ways to implement effective governance in the federation. The governance handbook which was recently published is potentially a very good tool for MAs to improve their governance. The integration of the Code of Good Governance in the revised accreditation system will provide a means for monitoring governance practice. Remaining challenges is to improve governance in the long term by reinforcing the capacity of MA volunteers and to attract new skills to serve on the Boards of MAs. The content of PPA Objective 3 can only be achieved through a continuous process and it seems that good governance is now integrated in much of IPPF's work.

Conclusions

IPPF has been able to use the PPA to advance key aspects of its work. The results go beyond that which is measurable by the agreed indicators. The extent to which some of the outcomes sought in PPA have been achieved across IPPF has been more difficult to assess. In part this is due to the fact that the PPA indicators do not cover all areas which the outcomes seek to address. It is clear, however, that IPPF has for every outcome sought taken significant steps for their realization and that the PPA objectives are integral to IPPF's work. It is our opinion that this alignment of priorities has been helped by the fact that the PPA has provided direct budget support to IPPF and has not taken the shape of a project. This has been instrumental in producing lasting organizational effects on IPPF.

In many areas, IPPF has continued to progress beyond the agreed indicators of the PPA. To the evaluators this shows that learning and the determination to improve has become part of the organization.

There remain some areas where IPPF's work can be further strengthened in line with the objectives of the PPA. A lot of this work has already begun and the recommendations made in this report are meant to provide further motivation to IPPF to continue this process. It needs to be noted that the findings and recommendations of this report are areas IPPF is already aware of.

Main recommendations

The recommendations presented at the end of this report are grouped under seven general headings. They are generally driven by the increasing pressure on implementing agencies to show results and display value for money.

The main recommendations are:

- There is a need to develop systems or methods that can capture and analyze the cost-effectiveness of services provided and contribute to sustainability of operations.
- There is a need to further strengthen the M&E system to allow member associations, and IPPF globally, to show and compare the outcomes of their work and to demonstrate objectively value for money.
- There is a need to continue the implementation of the initiatives for improved governance to ensure that current challenges are addressed in the long term.
- The budget support provided through the PPA enables IPPF to perform effectively and it is recommended that DFID continues this support.

2-Introduction and methodology

2.1 The Programme Partnership Agreement (PPA)

The PPA between IPPF and DFID was set up to formalise the relationship between the two organisations and to set out clearly what DFID's expectations are in regards to the funding provided to IPPF. The period covered by the current PPA is 2008-2011. It was agreed in 2008 and slightly revised in September 2009. The partnership objectives, the desired specific outcomes, and the measurable indicators were developed in partnership between DFID and IPPF. They form the basis on which IPPF is held accountable and against which IPPF has reported through annual self-assessments.

The PPA funding approach enters in the category of budget support rather than that of a project. By supporting IPPF budget with unrestricted core funding, DFID has positioned itself in a similar role as a company shareholder working with IPPF at its strategic level. The three PPA objectives agreed with DFID and implemented at the Central Office level are designed to have an impact at all levels of the federation. Evaluating the impact of strategic decisions such as revising the IPPF accreditation system or pushing forward a new sustainability strategy and good governance standards, represent a challenge. The expected impacts of these strategic changes can only be evaluated few years after the end of the PPA period. It is important for IPPF and DFID to understand this specific aspect in evaluating the progress made from their partnership. As a consequence of the outlined PPA characteristics, evaluators have proposed to focus their work towards seeking findings and learnings that can also be used to prepare the next round of PPA.

The evaluators were invited to assess value for money of DFID inputs. DFID like any other investors seeks return on its investment. IPPF understands that value for money is essential and in that sense has requested the evaluators to assess this aspect. The evaluation methodology used for this specific aspect has been to define what value for money is and then assess IPPF current situation. This exercise on value for money is a learning opportunity for IPPF and DFID and should not be regarded as an audit.

This report contains an evaluation of the progress made on the PPA expected outcomes in the short-term, an assessment of how IPPF demonstrates value for money, a section on how IPPF builds support for development and a final section where evaluators' recommendations are presented.

2.2 The Evaluation Methodology

The evaluators followed four stages in the process of carrying out the evaluation. First stage objective: to identify the various elements to be evaluated under the PPA. Second stage objective: to collect and gather information on these elements. Third stage objective: To process the assembled information and to organise the findings in the format of a report. Fourth stage objective: to present the findings and get feedbacks from IPPF and DFID.

First stage: Identifying the elements to be evaluated:

In order to undertake the evaluation, the PPA and TOR¹ elements were first put together as a single piece and then broken down in its various elements. This breakdown allowed the evaluators to define the scope of the evaluation. As mentioned in the introduction of the present section, the PPA is not of a project or programme standard nature accompanied with a well-defined logical framework and a detailed implementation plan. In this context, to define the scope of the evaluation before initiating any evaluation activities was therefore critical.

Once the scope defined, the evaluation content has been organised into four distinctive branches: relevance, effectiveness, efficiency and IPPF PPA performance.² To each element evaluation approaches and methods were assigned. Although there were some overlaps between the different elements, the objective was to define the scope of the evaluation in order to minimise the risk of losing focus. That risk was evaluated as high given the nature of the PPA agreement and given the number of working days allocated to the evaluation.

¹ The Evaluation TOR are in Annex 1

² In Annex 5 – you will find the evaluation elements breakdown

With the scope defined, evaluators then prepared the evaluation guiding questions before starting collecting information:

- Impact of IPPF interventions:
 - What impacts IPPF activities have on people lives?
 - Do IPPF activities impact positively on social exclusion issues?
 - Does IPPF impact on reducing gender inequality?
 - How the PPA with DIFD has impacted on the organisational development of IPPF?
 - As a NGO, how IPPF helps building support for development through advocacy and lobbying?
- Relevance
 - Is IPPF the right recipient for DFID funds invested in the field of Sexual and Reproductive Health and Rights?
- Efficiency
 - IPPF managers in general, are they optimising value for money? Is IPPF following standardised and recognised procurement, financial and auditing practices?
- Performance
 - How IPPF monitors and evaluates its performance? What system do they use to collect data and analyse it? Are they using good performance indicators? Etc.

Second stage – Collecting Data and Information

The scope and the elements of the evaluation defined and the guiding questions written, evaluators started to collect information on the various elements. The first step was to request documents related to the PPA and to the IPPF management procedures from IPPF Secretariat. The document review³ helped to develop an understanding of the context in which IPPF evolves and in which the PPA was developed. The first document reviews was followed by a three day mission in London where evaluators met and interviewed IPPF staff at the Central Office. During the same three days, interviews with DFID representatives in London were held.

The objective of the London interviews and the document review was to develop a clear understanding of the PPA elements, to assess the progress made in producing the PPA outcomes and to identify key issues that has fed the current or may feed any future PPA.

The evaluators then prepared the two country case studies in Ethiopia and Nepal. A series of questions on governance, resource mobilisation, advocacy, monitoring and evaluation, procurement and financial management were prepared. Based on those questions, meetings and interviews were organised. The objective of doing the two country case studies was to get the country perspective of the PPA and IPPF. Evaluators met with key staff from both the FGAE and the FPAN as well as with external partners who work in the SRHR sector in Nepal and Ethiopia. The evaluators also visited Ethiopian and Nepalese MAs clinics to complete the evaluation at country level.

At this stage the two evaluators started to develop a common understanding of the PPA results on the Federation. To verify some of their ideas and findings, an online questionnaire was prepared and sent to 13 of the MAs located in DFID priority countries and the evaluators conducted phone interviews with some DFID Health Advisers based in the same countries.⁴

Third stage – Processing the Assembled Information

Once the information had been collected and gathered together, a two day retreat was organised to brainstorm and discuss evaluation findings. At the end of the two day retreat, the evaluators put together the various elements and structured them following the report format sent by IPPF. While doing this exercise the

³ A list of documents reviewed is found in Annex 3

⁴ The complete list of people interviewed and contacted can be found in Annex 2

evaluators have tried to keep the emphasis on the learning aspects of the evaluation and have tried to identify key elements that can help IPPF in the future.

Fourth Stage – Getting IPPF Feedback

Taking into consideration the wide scope of the PPA and the large amount of information collected by the two external evaluators, a feedback meeting on the draft report was planned in London. The main findings and learnings were planned to be discussed there before submitting the final version of the Evaluation Report. The feedback meeting was also an opportunity to present information and ideas to IPPF which may not be included in the 25 pages report and which could be useful for IPPF.

2.3 The Evaluation Team

Since the PPA evaluation covers a large range of topics, from specific topic like NGO governance, or procurement of RH commodities to wide ones such as value for money, the evaluators decided to team up. Part of the methodology, the evaluators decided to specialise on PPA topics according to their professional skills and background. Guillaume Mercier brought expertise in the areas of monitoring and evaluation, project management and evaluation, procurement and financial management. Daniel Genberg brought experience in NGO governance, organizational development as well as detailed knowledge of IPPF in terms of its operations, structure and thematic area of work.

2.4 Evaluation Considerations

Readers looking at the present report should take into considerations the following three elements:

1. In the first technical proposal submitted by the evaluators, it was planned to do a third country case study and a short visit with meetings at the IPPF Regional Office in Africa. For budgetary reasons, IPPF has taken out these planned activities from the proposed evaluation methodology. Evaluators agreed with IPPF decision.
2. The reply rate from the Online Survey sent to MAs has been very low, 2 replies have been received, one from the Indonesian association and one from the Vietnamese association.
3. The scope of work was 40 working days, 20 working days per evaluator.

3-Results

In this section we present our view on whether IPPF has met the agreed requirements of the PPA and the extent to which these have had an impact on IPPF's organizational development. We also report on the overall situation of IPPF's monitoring and evaluation system, the results of IPPF on policy issues and the impact of IPPF on people's lives, gender issues and social exclusion issues. These items were included in the Terms of Reference for the evaluation. The limited scope and time period of the evaluation does not allow us to assess these latter impacts with any further certainty than that provided by examples. They are thus not conclusive but rather indicative of progress.

3.1 Impact of PPA on organizational development of IPPF

3.1.1 PPA Objective 1

| Objective 1: To encourage and support better management of resources and outcomes. Better monitoring and evaluation mechanisms at central, regional and national level that will ensure continual feedback to operation levels for programme improvement 2008-2010 | |
|--|--|
| Outcomes Sought | Agreed PPA Indicators |
| Better monitoring and evaluation mechanisms at central, regional and national level that will ensure continual feedback to operation levels for programme improvement. | <ol style="list-style-type: none"> 1. 96% of IPPF MAs have responded to the online survey. The PPA target was 93%. On the service statistics module the PPA target was 79 % and the 2009 results was 90%. 2. Evaluation Focal point meeting were held and recommendations prepared in 2008 in Kuala Lumpur and in 2009 in London. 3. Donor reports for years 2008 and 2009 were produced using the global indicators and the service statistics data and a presentation of the report was organized in donors meetings in January 2008 and 2009. 4. Three E-learning fact sheets have been produced in 2008 and 2009 and disseminated. IPPF did not organize the peer-review activity with another NGO after agreement with DFID. |
| Measurement of efficiency: By the end of 2008 the IPPF Accreditation System will be reviewed and evaluated. The review should discuss the inclusion of a standard to monitor systems and measures that Member Associations have in place to assess service efficiency and the use of capacity at the clinic level. | <ol style="list-style-type: none"> 1. The ToR for the evaluation of the accreditation system were developed and reviewed by IPPF Governing Council, and; 2. An external consultant was assigned to conduct the evaluation of the accreditation system. 3. In 2007, the results of the evaluation were disseminated to IPPF Member Associations and the recommendations of the evaluation were addressed during the revision of IPPF's accreditation system. The revised accreditation system was ready for implementation in 2009 and reviews started that same year. 4. The revised accreditation system includes a section entitled "Committed to Results" and standard 8.2 reads: "The Association uses data to inform decision making, to adjust its programme where necessary and to continuously improve performance". Within this standard there is a check (8.2.3) that asks: "Does the Association review the cost-effectiveness of its service delivery points?" |
| Sustainability: A clear definition of and policy on sustainability for MAs. This could include the possibility of raising funds from private donations, cross-subsidization, sales of goods and contraceptives etc. and should not just mean covering costs with service charges. The policy of sustainability needs to fully embrace principles of access and equity. | <ol style="list-style-type: none"> 1. In preparing the resource mobilization toolkit two workshops were organized to get inputs from a sample with regional offices and MAs representatives. 2. "The Funding Formula: a guide to effective resource mobilization", has been published in December 2008. It exists in four languages. 3. A discussion paper on sustainability was produced by IPPF in February 2009. 4. IPPF has also produced a "Discussion Guide" on sustainability. It is not clear whether this guide has been disseminated to Member Associations (disclaimer mentions it is confidential) or how it is intended to be put to use. Also, although the words 'access and equity' are found 4 times in the Guide it seems they are more 'mentioned' than explored in the context of sustainability. The Guide has been used to inform discussion at Governing Council and Regional Councils. |

Objective 1 - Outcome 1

Reporting

The increased response rates on GIS and service statistics module are good signs of progress of creating a global system for reporting results against the strategic framework. Seeing the relative stability of the response rate following the rapid increase 2005-2006 it is likely that these now form of the accepted infrastructure of reporting in IPPF. The impact of having a reporting system integrated in a global movement since IPPF will be able monitor data and trends and address issues as they arise. The data collected is now also an integral part of the performance assessment which the revised resource allocation system is based.

The donor reports and the APR have provided common ground for IPPF and donors talk about its work and performance. The reports have been continuously improved something that has been noted by donors in the MTR. The meeting with donors also provides direct feedback giving them the opportunity to suggest areas for improvement. Donors also note that there is a risk that a lot of data is collected but not used as an internal management tool. In the two MAs visited for this evaluation this seemed to be true.

Feedback loop

The evaluation Focal Point meetings constitute an important means of gathering feedback to identify improvements needed, generate new ideas and share good practice. Judging by the reports from these meetings in 2008 and 2009, it is also clear that they are important for improving data quality, agreeing on definitions and identifying areas of monitoring that need improvement. The impact on IPPF's organizational development is that the formal forum can plough the ground for future developments and build on the experiences of the group. The quality of reports submitted by the evaluation focal point has improved steadily.

The e-learning fact sheets are indication that IPPF is working on building the M&E culture in IPPF. The impact of the fact sheets is impossible to evaluate but like the GIS and evaluation focal point meeting, they provide part of a tangible infrastructure of this 'culture'. The M&E handbook and factsheets are theoretical with basic M&E principles and approaches. These have been taken as inputs in FGAE where they are planning to adapt it to their own requirements in order to prepare their own monitoring and evaluation operational manual.

Mid term review

In 2009, IPPF undertook a comprehensive review of its strategic framework, the Mid Term Review (MTR). This exercise lends evidence to show that IPPF takes M&E and organizational learning very seriously. The review process employed also provides evidence that the approach to M&E in IPPF is not one of establishing achievements and failures but is one where learning for improvement is the cornerstone. This is consistent with the IPPF policy on M&E. It is yet too early to see the changes that will stem for the MTR although the seven critical issues identified after the review gives an indication of where progress can be expected. This is also an appropriate area where the priorities of DFID and IPPF can be aligned in future PPAs.

The M&E Handbook which was finalized and distributed in 2009 is an important step towards improving M&E and reporting at all levels of IPPF. It is too early to see its impact on the organizational development but it has the potential to play a key role in aligning and improving M&E practices at all levels of IPPF. The handbook is also a tangible result of improved M&E systems in IPPF.

One example of how different M&E developments have had an impact at national level is the monitoring and supervision checklist which FPAN developed in 2010. This checklist was developed to provide a comprehensive and consistent tool for monitoring the work in FPAN branches and clinics. In its development, FPAN used many of the IPPF tools in existence to ensure that all data necessary for reporting are gathered. One of the key documents used in the development of the checklist was the M&E Handbook.

Using data

Collecting data and making use of that data is not one and the same. Data collected and analyzed can be used in two important ways. First of all, it can be used to show the results and achievements of an organization. Second, it can be used to make improvements to programmes and operations. IPPF is collecting a lot of data at all levels. At the global level, the results can be seen in the APR. This publication analyses and reports all data collected through the GIS, the Service Statistics module and additional activities collecting qualitative data. In addition, IPPF publishes a condensed summary of the results in the 'IPPF at a glance'. Performance data is also used to inform the resource allocations to MAs done at regional levels.

Each MA is producing its own annual reports. In the MAs visited, these reports are comprehensive accounts of all activities undertaken and contain detailed information on all services provided. One area lacking in these, however, is the analysis of the data. It is difficult to assess the significance of the results of the MAs in the country context based on these reports. The results are not put in relation to national priorities and statistics and do not show the contribution of the MAs to SRHR in the country. The impact of the MAs' work is thus difficult to assess. It is also fair to say that the length and format of the annual reports make it difficult to get an overview of the MAs achievements. This observation can clearly not be taken to hold true for all MAs but it is an indication that there is progress to be made in analyzing data and reporting key results.

In the MAs visited, data was used to set targets for the coming year and to identify areas for expansion or adjustment. This holds true for both service provision and for advocacy work. An example of this is the decision of FPAN to seek to expand to areas of the country where there is an unmet need so as to cover 50% of the country's districts and at least 50% of the country's population. This is in line with FPAN's commitment to reach the poor, the excluded and vulnerable population groups. It also represents a considerable investment. FPAN is aware that providing services in these is more costly than in dense urban areas and that there are challenges in ensuring permanence of medical staff. However, FPAN has not done an analysis of the cost per service/client for its SDPs. There is a need to use the data available to assess the cost-effectiveness of service provision from the angle of access and equity.

IPPF has developed a tool called Clinical Management Information System which is currently running in 20 clinics in seven MAs, and an expansion to six further MAs is planned for 2010/2011. This system eliminates manual client records and integrates service delivery statistics. This development can be seen as an impact of the heightened priority which M&E systems have received in IPPF since 2008.

IPPF at all level is investing more in better M&E and the support that the PPA provides has been an important part of this development.

Objective 1 - Outcome 2

Improved accreditation system

One of the key recommendations of the evaluation of IPPF's accreditation system was that the process needs to continue and that it be streamlined to capture not only compliance on paper but also in practice. IPPF has streamlined the accreditation system and was designed to better capture compliance in practice. It also includes criteria assessing the role that an Association plays in its country context. Another recommendation was that review visits be more focused on key issues and this has been addressed by introducing a desk review stage through which the critical issues are established. This is described in the procedures of the accreditation system.

The standard and check (8.2.3) concentrating on cost-effectiveness of services has yielded some results. A report showing the details of this check for the first 13 accreditation reviews 9 Association does review cost-effectiveness of its services. We cannot from the report, however, deduct whether the analysis is of sufficient detail and quality or which parameters of the costs are included and in relation to which output. This topic was discussed at a meeting for IPPF's accreditation focal points in 2010. It could be beneficial for IPPF to agree on what the essential input parameters are and how they relate to outputs. This could provide comparable data across IPPF.

Visibility

One of the findings of the evaluation of the accreditation system was that it had been beneficial for the Member Associations and this was confirmed through the interviews and questionnaires we conducted. It would also seem from the Mid Term Review that donors at the global level are aware of and appreciative of the accreditation process. However, only one of the in country donor agencies and partners that the evaluators spoke to in the current evaluation had heard about IPPF's accreditation system. Although not conclusive, it is an indication that better in country communication about the accreditation system is needed.

Objective 1 - Outcome 3***Resource mobilisation toolkit***

The PPA has encouraged IPPF to put more emphasis on local resource mobilization, a process that had started already before. The resource mobilization toolkit has together with workshops and trainings started the process of translating it to realistic and forward looking plans in MAs. It is too early to assess the impact of the resource mobilization tools. In FGAE, the tools and training seemed to have had little impact. FGAE had a resource mobilization plan previously, developed for the accreditation process, but it seemed not to be implemented. This is perhaps because FGAE has at the moment a secure funding situation with IPPF being its fourth largest funder.

In FPAN the opposite seemed to be true. FPAN has used the Funding Formula to rethink its strategy and approach to resource mobilization and reported that it has changed its approach to the subject. A person responsible for resource mobilization has been recruited and many projects and new partnerships are in the pipeline. FPAN has realized that the development of the organization needs to go in the direction of strengthening FPAN strong points and has therefore decided to expand its geographic and population reach to respond to unmet needs. This seems to be both driven by FPAN's mission and a realization that this is a strong 'selling point' to donors.

Sustainability principles

The evaluators have not been able to detect any direct result of the development of the sustainability discussion paper or the discussion guide (both entitled "Unlocking the Potential for Sustainability"). It is not clear if these are complementary to the resource mobilization toolkit or if they serve a different purpose. They do not seem to have been distributed to MAs and their impact on the organizational development of IPPF seems very limited. They have been used to inform discussion at Governing Council and at Regional Councils.

The internal discussion on sustainability has also revolved around the issue of clients paying for services. Both FGAE and FPAN employ a system whereby clients who cannot pay are exempted from fees while those who can afford are asked for a low fee. Questions arise around how a client's capacity to pay can be established and this depends on country context. Both FGAE and FPAN seem reluctant to introduce a system where services are for free. Since they cannot guarantee that services will be free in the future they prefer clients to be used to paying a fee rather than discontinue use in the future in the event that a fee will be necessary. Although not substantial, there is also some revenue from clients' fees that can partly cover the cost of services for those not able to pay. IPPF is currently conducting an exercise to look at how it can increase demand for services and the role of fees as a barrier to access. In this regard, IPPF is investigating various options, including voucher schemes.

3.1.2 PPA Objective 2

| Objective 2: To encourage and support full compliance with the strategic framework: The Five A's | |
|--|---|
| Outcomes Sought | Agreed PPA Indicators |
| <p>Country reports to be prepared outlining 5 MAs' compliance with IPPF's Strategic Framework based on agreed indicators. The 5 countries that will be analysed are: Kenya, Uganda, Bangladesh, Nepal and Bolivia. Specific data from the 5 MAs will be collected and analysed by IPPF to demonstrate progress and effectiveness in the following areas:</p> <p>a) Meeting the SRH needs and defending the SRH rights of the poor and the most marginalized with data from 2004-2009 period;</p> <p>b) National advocacy initiatives for 2009 (including participation in PRSPs, global fund, national dialogues about SRHR policy).</p> <p>c) Efficiency and comprehensiveness of clinical services for 2009 (to include percentage use of clinic capacity and service efficiency).</p> | <ol style="list-style-type: none"> 1. IPPF did achieve to fulfill the agreed indicator by preparing 19 country reports in 2008. 2. A section in each country reports were included to present achievement on advocacy. IPPF ARO coordinated activities in the African Union to support this indicator and reported it in the 2009 PPA self-assessment. 3. IPPF reported correctly on the agreed indicator but the indicator is not directly relevant to the outcome sought regarding efficiency of clinical services. Calculating the number of services provided does not indicate efficiency of services. Costs of services provided and population reached are critical to assess efficiency and comprehensiveness. In 2008 country reports there was a section on comprehensiveness and 'service efficiency'. The analysis of the latter was not sufficient since it only reported No of services per day, number of clients per day, number of clinics and number of staff. No further analysis was made. In the 2009 country report this section was not included. |
| <p>Advocacy & Building Support for Development It is DFID's anticipation that IPPF will significantly strengthen its programmes of advocacy and communication at the national, regional and international levels, amplifying its global voice as a foremost champion of sexual and reproductive health and rights and increasing its impact on the policy and funding agendas of national governments and international organisations).</p> | <ol style="list-style-type: none"> 1. As agreed, IPPF has produced a landmark publication on reproductive commodity supplies in 2008: Contraception at a Crossroad. A second landmark publication was made in 2009 on young people: Stand and Deliver: Sex Health and Young People in the 21st century. IPPF Central Office is currently producing a third landmark publication for 2010. In 2008, IPPF also published the Declaration on Sexual Rights. 2. IPPF Central Office has participated in organizing a reception to mark World Population Day at the House of Lords in 2009. They also launched findings from a research on "the people living with HIV stigma index" for World AIDS day in 2009. |

Impact on IPPF organizational development

Objective 2 - Outcome 1

Country reports

The country reports were produced as agreed and the first round were too voluminous. It was agreed that during the second year IPPF produced a smaller report on fewer countries. It seems that these reports give an idea of results achieved but is still not providing the analysis DFID would like, something reflected in the MTR report: "it is clear that it can do a better use of data at every level of the Federation to make decisions". The strategic framework has brought a lot of information and IPPF is now at the stage of using the collected data and implement results-based management within the Federation.

However, in relation to the agreed PPA objective, the country reports together with the global indicators do show that MAs are implementing the Five 'A's. The country reports also give detail and examples of how poor and most marginalized are reached and how the MAs advocate in country.

From interviews in the two MAs visited, it seems that the Five 'A's has facilitated communication and programmatic reporting as well as brought all parts of IPPF to work on common objectives. For example, a person responsible for HIV and AIDS in FPAN knows who to contact in SARO and CO for support or advice. The

same holds true for the other 'A's and for the supporting strategies. This observation is supported by the findings of the MTR where a reported 71.1% of the MAs thought that the Five 'A's has made it easier to access technical support from the Regional Offices.

Clinic efficiency

Relating to the issue of efficiency of clinics the PPA, together with other developments, has been useful in making IPPF realize the importance of looking at cost and efficiency of service delivery. The next step in the thinking around service provision could be to assist MAs in estimating the cost of their service provision (per client or service). This is a complex issue that MAs have wrestled with because of varying parameters: which staff time/costs to include and how much by service, at what level to include commodities received as donation, how estimate maximum capacity of service outlet, etc. Such estimates can be useful in setting up pricing policies with a view to increase access for clients.

A subject linked with this is also the comparability of costs between organizations. Donors have expressed a need to be able to show competitive value of MA service delivery: how many services can you provide for 100 dollars? When doing such comparisons it is important to bear in mind that the services provided need to be comparable. What does the unit of 'service provided' include? In integrated SRH services the costs are likely to be higher. One example given was that of the difference between calculating the cost of just providing one client with an ARV drug with one where the client is also supported to ensure that the client has sufficient nutrition for the drug to be effective.

The progress on the outcome on efficiency and comprehensiveness of clinical services is not measured systematically although the initial results of the second phase of accreditation seem to suggest that the issue is being addressed in one way or another in many MAs. We have observed, however, through the interviews and the documents reviewed that the IPPF Secretariat is paying close attention to this at the moment.

Objective 2 - Outcome 2

For this evaluation, it proved difficult to look at the impact of the landmark publications specifically. IPPF publications in general are well appreciated by MAs as a key source to stay updated on specific issues. The Declaration of Sexual Rights has also provided a central document to focus discussion and work on sexual rights. It has been translated in 23 languages and a short guide to its content has been produced as well as posters. In Nepal, FPAN is together with another organization defining a strategy to try to get sexual rights included in the revision of the constitution of Nepal currently underway. They noted that the fact that the Declaration is written in a 'legal language' and references international charters and conventions is helpful in this process.

The country reports, the donor reports and the APR provide a number of examples of MAs working to improve the SRHR policy environment in their countries. These are not directly related to the publications and events organized by IPPF in London but it is linked to the increased focus of the advocacy support given by IPPF. The MTR reports that 77% of the MAs had requested support from IPPF for advocacy, and that 92% felt that they had received the support they needed. MAs are addressing issues like contraceptive supply (Bangladesh government purchasing 24.5 million contraceptives following shortage), national budget allocation to SRHR (for example Tanzania and Nigeria), increase number of contraceptives on the national essential medicines list (Ghana). These examples are not the results of the sole efforts of the MAs but the MA has in each case played a key role.

3.1.3 PPA Objective 3

| Objective 3: To encourage and support the evolution of IPPF's governance | |
|--|---|
| Outcomes Sought | Agreed PPA Indicators |
| IPPF reviews and reflects on the role and constitution of its volunteer governing bodies, enabling them to better support IPPF's own management structure and Strategic Framework. | <ol style="list-style-type: none"> 1. The Terms of Reference of Governance Task Force (GTF) agreed in 2006. 2. Recommendations of GTF reviewed and adopted by IPPF Governing Council in 2008. 3. IPPF Regulations Regional constitutions were revised to give effect to those GTF recommendations requiring change in these documents (number of young persons, shifting responsibilities, performance review of MAs, reducing number of persons on IPPF governing bodies, non-voting experts can be co-opted, audit committees as needed). 4. Regional blocks at Governing Council have been replaced by random seating. 5. The Governance Handbook has been developed and published, and includes self-assessment tools for Boards. 6. The IPPF Exchange will be open to volunteers and provides space for sharing and learning. 7. The Revised accreditation system has incorporated the seven principles of the Code of Good Governance and these will be systematically checked during accreditation reviews. |

Impact on IPPF organizational development

Objective 3 - Outcome 1

Governance is one of the supporting strategies of IPPF's Strategic Framework 2005-2015. This is an indication that IPPF had realized well before the current PPA that governance is an area that needs attention to ensure effectiveness of operations. By identifying improved governance as one of the outcomes sought, the PPA has reinforced the initiatives in IPPF. This is a reflection of an alignment of priorities and it is one that is of continued importance. The MTR resulted in a process of priority setting in IPPF whereby seven critical issues were identified in early 2010. One of these is effective governance. While there are big challenges to addressing governance issues in an international NGO, it is possible to identify some examples where the focus on governance has resulted in a process of improvement.

In 2008, IPPF Governing Council established working groups to discuss key issues within three central governance responsibilities: Performance, Sustainability and Policy. The working group on sustainability has been helpful in establishing the "25% policy" which states that in order for a Member Association to receive increased funding from IPPF based on good performance it must show that at least 25% of its income comes from sources other than through IPPF.

The GTF recommended that the cost-effectiveness of governance activities be given a priority. The reduced size of IPPF governing bodies and the decision of holding all Governing Council meetings in London to reduce costs are some small examples of the impact of the GTF recommendations.

The shift of responsibilities between the Regional Council and the Regional Executive Committee has had a positive effect on decision making in the federation. Given that the Regional Executive Committees meet more frequently and are smaller in size has sped up the process of taking decisions and is making governance in IPPF more effective.

Another example can be seen in initiatives which FPAN has taken following GTF. There is an initiative to identify ways of attracting individuals with diverse and specific areas of expertise to the board. Also, FPAN decided to co-opt a person openly living with HIV to join the board. It established an audit committee in 2007 which already has had some impact on the association. FPAN has also translated the Code of Good Governance in Nepali to make it accessible to its volunteers and the FGAE is currently developing their own Code of Good Governance in Amharic and English. These new guidelines on governance will be included in the MA's constitution.

There is also evidence that the challenges are more persistent in some MAs than others. Concern was expressed from two persons external to IPPF that there seems to be a quick turnover of Executive Directors. In one of the cases the cause was attributed to the governance of the MA and it was said that this 'rumour' somehow overshadows the results and achievements of the work of the MA.

It thus seems to be a case where the initiatives undertaken at Governing Council and Secretariat may need some time before being observable in the MAs. This is not to suggest that all MAs are suffering from poor governing bodies but rather to suggest that there is a need to analyze where the need is and what the causes are. This would be a logical follow up to the governance initiatives undertaken. Such an analysis could also look at the effectiveness of some MAs' branch structures and see if the roles of volunteers and governing body are clear at all levels.

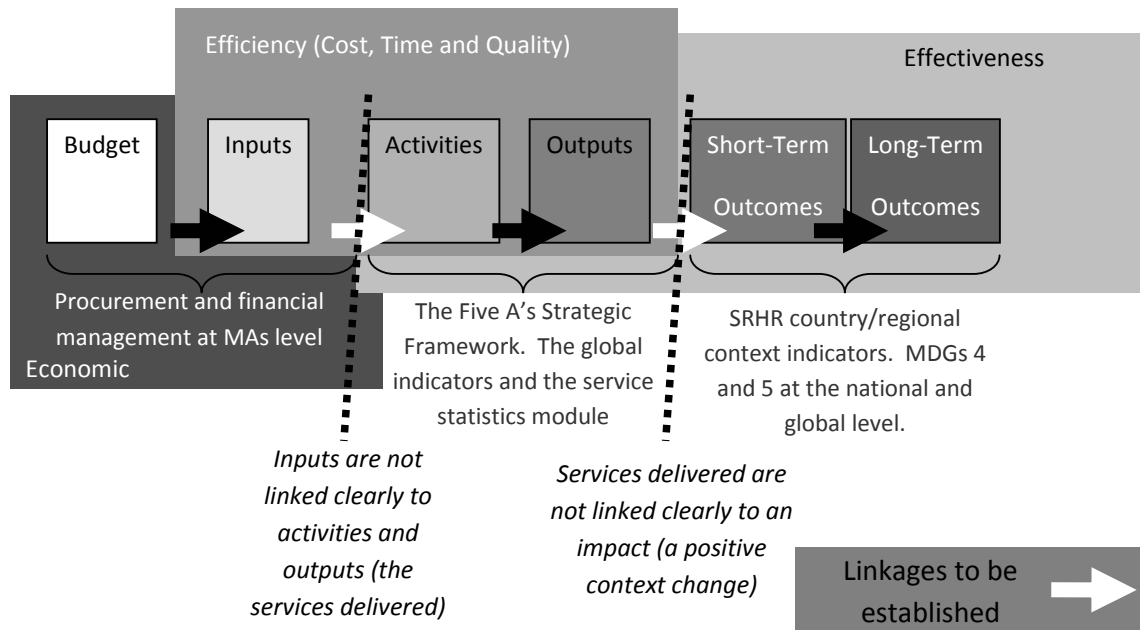
3.2 Overall health of IPPF M&E system

In 2005, IPPF adopted a new strategic framework, based on five strategic objectives known as the five As. Since then the progress made by the MAs on the Five 'A's has been monitored using a set of thirty indicators: the global indicators. This framework has been embedded in an e-platform, the eIMS. This e-platform allows IPPF to track MAs progress made on the global indicators and the number of services delivered by each association with its service statistics module.

The implementation of the system has brought positive changes. The large majority of people interviewed said that it has brought IPPF to align on five strategic fields of intervention and that the framework has provided the federation with common objectives. The framework has facilitated communication by establishing a common language and terminology at all levels of the Federation: Central, Regional and Country levels. Having the Five 'A's framework has also helped to define the boundaries within which IPPF services are offered. Considerable progress has been made in implementing the strategic framework and the MTR undertaken and completed this year clearly shows progress and achievements. Within the current PPA, important developments have been also made. Monitoring and Evaluation using the electronic reporting system is recognised as a key activity in MAs and in the Secretariat.

During the PPA period IPPF has continued to consolidate its framework by improving the response rate to the survey statistics and the global indicators. Within the period, the federation has published a Monitoring and Evaluation Handbook, has produced e-learning fact sheets and has strengthened its evaluation focal point group. IPPF has also continued to use the results from the global indicators database to communicate its work to the donors' community. Despite the fact that important progress was made, evaluators have come to the conclusion that the current state of IPPF monitoring and evaluation system could still be improved and strengthened. Some weaknesses have appeared during the evaluation, especially with the use of the service statistics produced by the module. The following analysis focuses on this aspect.

D.1 IPPF Results-Chain for services delivered



Monitoring and evaluation aims mainly at two objectives, assessing the efficiency (cost-time and quality) and assessing the effectiveness of what an organisation produces.

Linking costs of inputs to activities and outputs

Evaluators have looked at how the MAs visited use the service statistics produced. One of the conclusions is that the way the module is used makes assessing efficiency and effectiveness difficult. Looking at the IPPF results-chain (see diagram 1) for service delivery, one will realise that for each activity and output, (services delivered), the system does not integrate in its process the cost of inputs. In the M&E system the level of inputs which means the money injected to produce a clinical service is unknown. This missing linkage makes assessing efficiency through the system impracticable.

The only assessment that can be done at this level is economic. This means assessing the budget to inputs relationship; assessing how much IPPF spends to procure SRH commodities. This type of assessment can be done through the MAs and ICON archived procurement documents by comparing prices and quality of commodities procured with the current market conditions.

Through the two country case studies, evaluators realised that this weakness in the system is common. Nevertheless evaluators are conscious that almost all the data exist to connect the budget to the inputs and the inputs to the activities and outputs. Linkages between MAs financial and procurement information and the service statistics module could be established to evaluate the cost-efficiency in a systematic and objective manner. With the data on cost per service developed, IPPF could then present indicators to assess efficiency of MAs services by linking it to a qualitative evaluation of the services provided. MAs have the responsibility to monitor and evaluate the quality of services provided. IPPF has provided through the Quality of Care project some qualitative evaluation tools to do it. Both MAs visited undertake periodically a qualitative review of the services offered though their clinics and delivery points.

Linking outputs to impact

In terms of evaluating the effectiveness of the services delivered, evaluators have realised that except when donors required so MAs are not doing impact assessment. MAs only seem to do impact assessment when mandatory for projects under restricting funding. MAs' M&E unit cannot answer with objectively verifiable indicators the key question of how the association interventions have brought a positive change in a certain

community, region, city or country. IPPF services delivered help to improve peoples' conditions; there is no doubt on this question. All external stakeholders met in Nepal and Ethiopia agreed on the excellent work done by both associations. MAs current problem is that they do not assess objectively the work leading to the population conditions' improvement. The current monitoring and evaluation system focuses on quantity of services delivered.

MAs could work closer with local organisations that collect data on health and population at the national and regional levels. By working with the health and population statistics, MAs could try to assess their contribution in bringing positive benefits for a population by evaluating changes where they have intervened and where they deliver services. For this second point on effectiveness of services delivered some linkages between the statistics collected on services delivered though the M&E system could again be created with existing context indicators at country level. By using data already available, MAs could assess their contribution on people's lives without spending extra financial resources on collecting data. Being able to link the number of services delivered to its greater context may help IPPF MAs to outline some of their comparative advantages. For instance, MAs visited compared with NGOs evolving in the SRH sector, are alleged to have an extensive and better geographical coverage in remote areas in Ethiopia and Nepal, this comparative advantage is unfortunately not captured with objectively verifiable indicators.

Evaluators have observed that a lot of statistics are collected and generated with the current system and these statistics are put in voluminous and comprehensive reports which cover all service statistic indicators. The problem observed is that the MAs monitoring and evaluation units met with do not know exactly how to use the information generated. The fact that the system is new may partially explain the situation. However the evaluators believe that since the statistics generated cannot be used to evaluate directly any variation in efficiency and effectiveness makes difficult for MAs to internalise its use for decision making. These two missing linkages as illustrated may cause this incapacity and the low interest in using the data collected at MAs level. Without the missing linkages in the presented IPPF results-chain there is a risk that the current M&E system will only remain a good tool to communicate to IPPF central office and to donors the level and variation of IPPF activities at global and country levels.

Evaluators strongly suggest IPPF to continue working on implementing the MTR monitoring and evaluation recommendations. More resources should be allocated to the M&E function and the effort on building capacities at all level of the Federation should continue. An improved monitoring and evaluation system is an investment, it is an excellent tool to mobilise resources with donors increasingly asking to see value for money.

Evaluators also recommend IPPF to invest in its M&E system in order to make MAs less dependant on staff turnover. When a Monitoring and Evaluation officer leaves and there is no system established it often means that the system has left with the officer. The FGAE experience has been a good indication of this threat. The association took six months with the support of costly interventions from the Regional Office to finally re-established the M&E system after one of the FGAE M&E key employee had left.

3.3 Impact on people's lives, gender issues and social exclusion issues

The IPPF approach to services provision is to provide comprehensive and integrated services and to make these services accessible to the poor, marginalized, underserved and socially excluded. The Global Indicators suggest that 69% of IPPF's total clients are from groups of the population considered poor and vulnerable (in countries recipient of official development assistance this figure is 73%). This is an increase from 57% in 2005 and from 66.4% in 2008. There has also been an increase of the number of clinics in peri-urban and rural areas and in 2009 this is 61% of all clinics. However, the proportion of MAs reported to conduct programmes aiming at increased access for these groups has decreased from 92.6% in 2008 to 84% in 2009. In the review of its strategic framework, increased access for these groups has been identified as one of the seven priority areas to address in the coming five years. However, in the documents reviewed it is not clear what the targets are or how they will be determined. How will IPPF assess its achievements in this area in the coming years?

FGAE provides an interesting example of an MA that decided to focus more on the poor and marginalized groups of the population at a time when the Ethiopian government was starting to provide SRH services to the groups that the MA had previously focused on. As the government was starting to cover their target groups the MA decided to focus on those groups that were not being reached by the government, to fill the gaps.

The work of the MAs has effects beyond the direct service delivery. This includes advocacy, education and information, peer education, awareness raising and support activities that go beyond SRHR. It also entails

activities directly concerned with SRHR but that go beyond the MAs' own service provision. An example of this was observed in FPAN who has two clinics where doctors can receive training and practice to complete their specialization. These doctors are then active in government hospitals or in private practices. This is an example of how FPAN contribute to the strengthening of the national health system by contributing to the increased number of births attended by skilled staff, and ensuring that medical doctors have increase knowledge in SRHR matters. This was an area where government agencies and multilaterals in Nepal thought that FPAN could play an increasingly important role in the coming years since it is the only health NGO which has sufficient skills and infrastructure to complement the government.

A similar programme is being developed in Ethiopia where FGAE is developing plans with support of a private donor, and with IPPF as a guarantor, to build a training centre for health sector workers and to in this way contribute to the development of the health workforce and to the sustainability of the association. FGAE is active in training health sector workers. The association trained 18 qualified health personnel in 2009 to create a pool of trainers on how to insert the Implanon hormonal implant. They subsequently worked within the government health system to train thousands of health extension workers. Recognizing that this is a key intervention to reduce maternal mortality and morbidity the plan is now to train 14,000 health extension workers.

Gender issues are integrated to IPPF's programmes. This takes different shapes. One example is the inclusion of gender issues in sexuality education. There are also examples of gender issues being addressed by specific projects.

In 2009, a reported 90% of IPPF MAs has Gender Based Violence (GBV) as part of their programme. One such case was observed in Nepal where FPAN, with support from DFID, initiated and completed a project on GBV. The approach taken was one of service provision together with advocacy. In FPAN's clinics, staff were trained and recruited to be able to screen clients and identify occurrences of GBV. Specialized staff were also present to provide counseling and support for women concerned. This restricted project has now ended but one of the outcomes of that project is that GBV screening and counseling is now an integrated part of FPAN's clinical services. FPAN also addressed GBV through advocacy efforts. FPAN was the secretariat of a coalition and cooperation with the Ministry of Women and in 2009 we were successful in passing the Domestic Violence Control Act in Parliament. Following this, a National Surveillance Committee was set up to monitor GBV and progress towards eliminating it. FPAN is part of this committee and has been charged with monitoring five of the country's district.

The percentage of MAs with gender focused policies and programmes was in 2009 74%. In 2005 this number was 72.2% and the increase is arguably not significant. The 2009 Donor Report states that 56% of management positions in IPPF are filled by women. It was observed in FGAE and FPAN that a striking majority of senior positions were filled by men. One of the donors interviewed expressed a concern about the predominance of men in senior management positions in one of the MAs. This concern was expressed because of the emphasis that the MA was putting on gender relations in its programmatic work but not following in its own organization. It would thus be interesting to know how the gender equity in terms of staffing is distributed among MAs and regions. What percentage of MAs, for example, has more than 50% women in management positions? Are there significant regional variations? Is there a correlation between MAs with gender equity in management positions and MAs with gender focused policies and programmes?

3.4 Results of IPPF on policy issues

In 2009, 93% of the MAs were reported to be involved in national policy issues relating to SRHR. This includes working with media, the public and with decision makers. It is also reported that MAs were involved in 73 positive policy or legislative changes, an increase from the 56 reported in 2008.

The IPPF Global Indicators relating to national policy have a tendency to focus on the arena of national policy and legislation. This is no doubt the most important one in the country and one in which it is important for the MAs to be active. There is indication, however, that another key advocacy role played by MAs is that of ensuring that agreed national policies are implemented and that they are known beyond the capital city. In Ethiopia, the MA saw its most important advocacy role to be that of bring national policies to bear on the rural reality. The MA would thus train its branch staff and volunteers and ensure that the authorities in the communities they are active and are aware of changes in policy. Another important role observed in Nepal and Ethiopia was that of monitoring the implementation of national policies. Following the abortion legislation in

2002, FPAN was actively pursuing this issue to make sure that appropriate guidelines were prepared and that medical staff in government facilities were trained, and that abortion services were available outside Kathmandu.

In Ethiopia, we also saw the example of FGAE participating in the introduction of tax exemption for reproductive health commodities in the country and then a concentrated effort to follow up with national administration to ensure that it was implemented. To hold governments accountable to what they have decided at a policy level is a crucial role for NGOs in any part of the world. This may be very difficult to assess and measure but it is important to bring into the equation because it does require both time and resources.

Another example of bringing policy to life is the FPAN training of pharmacists in Nepal. Seeing that the pharmacies are often the first point of call for people when they need medical advice, FPAN has trained the Nepalese pharmacists and druggist association to ensure that they have sufficient knowledge on issues around abortion. After the legalization of abortion in 2002, FPAN has continued the work to advance the establishment of appropriate protocols and guidelines. To reach the concerned population as early as possible, the pharmacists were trained on how to talk about abortion to reduce stigma, and to refer to appropriate service providers in the area. This is an example of how advocacy flows from national level to the level of implementation.

It is fair to say that the impact on policy issues goes beyond that which is captured by the GIS. In FGAE and FPAN one can see their work in advocacy having four different emphases: to influence national policy, to bring national policy to communities, and to monitor national policy implementation and to bring about change in the perception and opinion of SRH issues in the population and among community and religious leaders. The latter is really not about policy change but is a long-term work through awareness raising, information and dialogue. Concentrating advocacy work on national policy may take focus away from the advocacy work being done in communities.

The role that unrestricted funding such as that provided within the PPA cannot be underestimated here. Work on seeing through a policy change is a long process. The work that FPAN started in 1996 when one of their Board members (and MP) submitted a private bill to the parliament on the subject of abortion needed six years of efforts to produce a change in legislation in 2002. The work was not finished there. Ensuring that procedures and guidelines are in place to ensure access to safe abortion services continued and is ongoing. In 2010 there were further changes to certain procedures increasing access to safe abortion services (in this case to the benefit of FPAN and MSI service delivery points). In parallel it is important to link various policy issues and to ensure that there are no regressions. Direct support to MAs budgets provide the MA with the possibility of a long term view and medium term strategy on policy issues, something which has yielded results in many MAs.

4-Value for money

Value for Money: a definition

The 2008 financial crisis has forced donor countries to inject public funds in the national financial system. The European countries, the United Kingdom and the United-States have bailed out banks and insurance companies in order to stop the crisis. These investments and the slow economic recovery have brought a scarcity of public funds. UK government has since decided to implement an austerity plan to fight the government deficit generated from the crisis. Today British taxpayers are asked to make sacrifice. Despite these cuts, the UK government has decided to maintain its budget for development assistance. Nevertheless, the government has warned that organisations using public funds for development assistance should demonstrate value for money.

With the current economic stagnation, the value for money concept has been brought under the spotlight. Donor countries representatives use more and more the concept. Behind the buzzword, what is actually value for money? To answer this question evaluators have undertaken a short review on VFM and for the purpose of the present evaluation will refer to the following definition. Value for money is **economics**; this means that the financial inputs are in connection with the actual expenditures. Value for money is **efficiency**; this means the organisation produces quality, on time at a good cost. Value for money is **effectiveness**; this means that what the organisation produces contribute in fulfilling its objectives, in improving an unsatisfactory situation.

$$\begin{aligned} \text{D2. Value for Money} &= \frac{\text{Outcome}}{\text{Expenditure}} \\ &= \frac{\text{Input}}{\text{Expenditure}} \times \frac{\text{Output}}{\text{Input}} \times \frac{\text{Outcome}}{\text{Output}} \\ &\quad \text{« Economics »} \quad \text{« Efficiency »} \quad \text{« Effectiveness »} \end{aligned}$$

Evidence to answer question if IPPF is able to show value for money for DFID's PPA inputs

As mentioned in the methodology section, the PPA funds are unrestricted. Unrestricted funding means that the money granted by DFID is not tied to a specific project, or a programme. The funds are also not tied to a specific country or a particular IPPF field of interventions. The PPA scheme provides then IPPF with core unrestricted funding, which is commonly defined as the budget support approach. Under the budget support approach tracking the use of each PPA pound spent by IPPF is impossible. To demonstrate value for money for PPA inputs, evaluators have therefore decided to present the progress and results made on the agreed PPA outcomes. PPA outcomes are not linked to a specific budget. These outcomes are organisational development orientations and to evaluate value for money at the level is nearly impossible in the short-run. Consequently, evaluators have decided to focus their analysis on IPPF production-chain; from allocating financial resources to MAs which deliver services to improve a situation, and present what IPPF does to ensure value for money.

Economics: Allocation of Budget

Approximately 70 %⁵ of the IPPF budget is allocated to Associations that have completed the IPPF accreditation process or to associations that are in the process of becoming an IPPF member or an accredited association.

To be accredited, MAs have to pass through a thorough review process. When a MA has fulfilled the accreditation criteria it will be qualified to be a full member. The accreditation criterion covers good

⁵ Data taken from the IPPF financial reports

governance aspects, financial management and risks among other things. The 10 accreditation principles cover among other things the elements of value for money. The Governing Council bases to a certain extent the decision of allocating funds on the accreditation process. This practice is a first filter, by transferring most of its money to associations that have demonstrated compliance with IPPF's membership standards to get accredited; IPPF is working with associations that can be defined as qualified recipients.

Economics: Procurement and Financial Management

IPPF promotes good standards in using the financial resources economically. MAs have to establish a procurement procedures based on public procurement principles and standards.

For instance, the FGAE supply-chain manual presents a set of guidelines which ensures economy, transparency and fairness. Based on these guidelines, FGAE supply-chain manager has to organise a competitive bidding process in most cases. This competition leads to procure economically. The procurement manager has to publish procurement notices in newspapers and to organise public bid opening session, these requirements support transparency. He also organises open bidding then all potential bidders are invited to participate without restriction, this openness brings fairness. The supply-chain manager with the support of a committee awards contract based on known and published criteria, to have clear rules and criteria announced before and used during the competition brings fairness and transparency.

At Central Office, ICON is the IPPF procurement unit. ICON is a legal separate entity. According to IPPF managers interviewed this status allows greater commercial flexibility due to restrictions in the UK charity law. ICON procurement managers use then commercial practices for procuring SRH commodities. Their procurement practices are based on private sector standards.

One of IPPF internal rule stipulates that MAs are allowed to procure directly without using ICON services if they can ensure that it is clearly advantageous not to purchase via ICON. Through the feedbacks received from MAs, evaluators have perceived that this specific rule brings to a certain extent competition between the MAs procurement departments and ICON. This competition seems positive since it forces both procurement entities to show their comparative advantages (Price, delivery time, quality, economy of scale, etc.).

The PPA inputs are deposited in a basket at the Central Office level in London before being transferred to MAs at country level or used to cover other Secretariat expenditures. The transfers are made through five instalments which are based on one annual amount presented in the Association Annual Programme and Budget (APB). These five instalments are linked to conditions such as to submit the association certified audited financial statement, to prepare an Annual Programme and Budget and to get it approved by the relevant IPPF Regional Office and to sign a formal funding agreement. These conditions bring MAs to adopt business standards in term of Auditing and Financial Management.

The association's external auditor is required to be recruited by the association elected board and not by its management. It also has to be selected from a list of approved reputable and pre-qualified external audit firms provided by IPPF. The Association National Council recruits then the auditor and the auditor reports to the Council. This ensures that the external auditor is neutral and impartial. This type of policies makes association financial system credible.

As mentioned, associations receiving grants have to sign a binding funding agreement. This contract contains obligations such as to submit an annual report and a six month progress report. There is also the obligation for the association to report on the global indicators and on service statistics module.

In the IPPF structure, the Regional Offices take an important responsibility in monitoring the work done by MAs. This responsibility has led Regional Offices to assess through the accreditation process the fiduciary risks. Regional Offices also look at MAs procurement, audit and financial policies. In transferring funds from the Central Office to the MAs, Regional Offices have a role as a third party in the transaction. For instance, an association cannot request the Central Office to change the Bank account in which IPPF money is transferred directly. Any request for changes have to pass through the Regional Office. This instruction reduces the risk of non authentic bank account changes.

All these IPPF rules and regulations bring credibility to MAs as local NGOs. In one of the MAs visited, the association managers said that donors at country level really appreciate the IPPF membership. It brings the association lot of credibility.

Efficiency

In the introduction of this section, value for money has been defined as the integration of the concepts of economics, efficiency and effectiveness. Efficiency is commonly described as producing good quality, on time at good prices.

Regarding the quality of the clinical services offered; the two MAs visited seem to produce good quality services when compared with their country public health system. The surprise clinic visits in Ethiopia and Nepal had been good proxy indicators for the evaluators. In Ethiopia, the Ministry of Health is even relying on FGAE to start-up the operations in 11 of its new youth centres. The Ministry also requested FGAE to train many of its newly recruited health workers.

The external actors interviewed also mentioned that the Nepalese and Ethiopian Associations have an extensive coverage in the rural and remote areas of the country. In term of reaching the most vulnerable groups the global indicators are also showing an increase. IPPF has also implemented in certain countries recently a project named Quality of Care to ensure better clinical services. Looking at quality with the perspectives of reaching the needs where they are and then offering quality services to satisfy these needs, MAs visited are showing results.

For IPPF, the key challenge to demonstrate efficiency, as mentioned in the monitoring and evaluation section, is to integrate the costs with the service statistics module to calculate and use efficiency indicators. Linkages between MAs financial data and MAs service statistics should be established to demonstrate objectively value for money in term of efficiency.

IPPF could also start to look at the productivity costs of its associations to assess efficiency and answer some of donor countries recurring key questions such as: how much of their spending reaches the countries and is used to deliver services and how much stays at home? What are the transaction costs recipients face per pound provided? For instance using the data from the Ethiopian association and the one provided by the Central Office, on each PPA pound spent for FGAE and through IPPF, 52.5 cents were used to deliver services⁶. Is this efficient for IPPF? Is this good compare to other NGOs? IPPF central office should try to look at these questions and develop efficiency indicators. MAs under IPPF leadership already monitor quality, report quantity through the service statistic modules and produce credible financial data. The idea now could be to build bridges between these three dimensions and develop efficiency indicators to demonstrate objectively value for money.

Effectiveness

“The true test of aid effectiveness is improvements in people’s lives⁷”. IPPF interventions have an impact on improving people’s lives; at grass root level a visit in one of the Nepalese or Ethiopian crowded clinics will convince anybody, at global level a review of the work done in 2010 by IPPF Director General at advocating for SRHR is another evidence. However a big question remains: how IPPF measures its effectiveness to ensure value for money? As mentioned under the monitoring and evaluation section, low emphasis is currently put on impact evaluation. Linkages between the service statistics collected and the SRHR country indicators are suggested to be established. Associations should try to connect their work plan with the statistics collected by the Ministry of Health and by the UN agencies. By connecting the services delivered to their context (outputs to outcomes), MAs could then evaluate their contribution in improving people’s lives with objectively verified results. This can be a powerful tool to convince donors to support IPPF.

Chapter recommendations

IPPF staff at all levels are conscious of the challenges in assessing value for money. Discussions on performance-based budgeting and management are currently ongoing. The federation is certainly moving towards a results-based culture of management. To work on demonstrating objectively value for money,

⁶ The calculation is based on the administrative costs of CO, ROs and FGAE provided in the 2009 financial statements

⁷ 2006 Survey on Monitoring the Paris Declaration, OECD 2007.

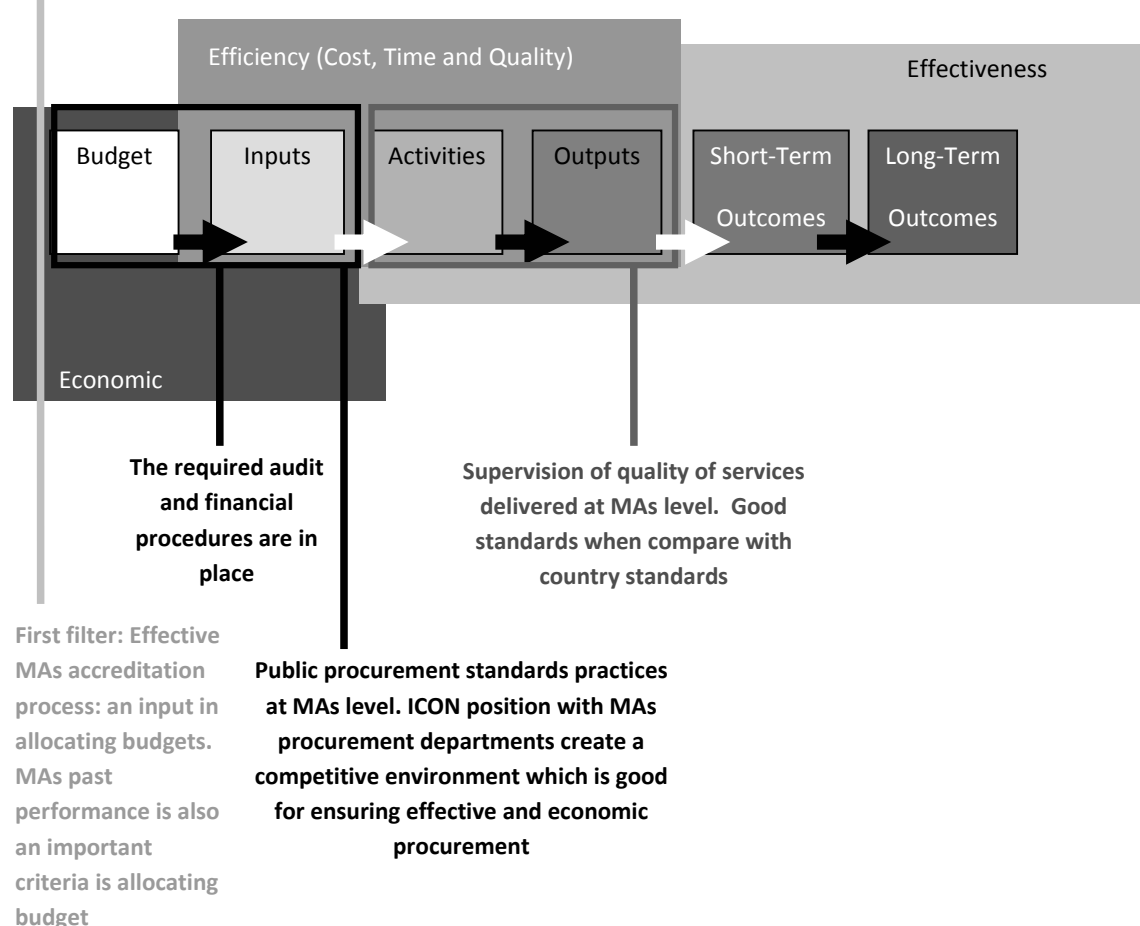
evaluators recommend IPPF to develop a model for MAs that is applicable at country level. Assessing value for money for service delivery is an excellent and feasible starting point and it is feasible. Most of the data exist and few linkages need to be established. IPPF strongest MAs could be supported in defining an implementing the model as a pilot project.

For the readers' information, the MAs managers' main question on that issue is how to allocate the indirect costs (salaries, fixed-costs, overheads, etc.) to the association services delivered. Answering this first question and developing a model seems good directions to take in starting monitoring and evaluating MAs efficiency.

With the current scarcity of funds in donors' countries, governments and tax-payers' will continue to ask for evidence that demonstrate good use and results in using public funds. IPPF has to undertake in a more systematic manner impact evaluation of the work done at country level. MAs should be supported in using country statistics to evaluate their contribution in improving peoples' live. The publication of the M&E handbook is a good step in that direction. Planning an impact assessment of the Annual Programme Budget where MAs are performing could be an interesting next step to bring the theory into practice.

In conclusion, value for money is one element not to be underestimated. However, reaching and serving the most-vulnerable groups is for IPPF and for the communities it serves even more important. The two concepts may sometimes be in conflict and to reach a balance between the two is certainly a challenge. Value for money may lead to prioritise certain needs and abandon others, risks exist. MAs could start to procure lower quality commodities to procure greater quantities; MAs may start not to offer quality contraceptives to save on costs; MAs may not offer all the range of contraceptive products in order to make economy of scale; MAs may start to prioritise urban areas over the rural and remote areas like some NGOs do to present better figures. Looking at value for money, DFID and IPPF are invited to always keep in mind what is the federation's *raison-d'être*.

D.3 IPPF Results-Chain for Services Delivered and Value for Money Analysis



5-Lessons learning

The **MTR** constitutes an important example of how far IPPF has come in integrating and implementing the M&E policy adopted just before the current PPA. It is a thorough piece of work from which lessons can be drawn for most aspects of IPPF's work. The review process was inclusive and reflective and, once completed, included sessions that served to distill the most critical issues to address immediately. In that sense it is a forward looking document. It remains to be seen what concrete targets IPPF will set for itself based on this document. The MTR is also an outcome of the constant process of improving M&E systems in IPPF. The constant refinement can also be seen in the discussions of the evaluation focal point group which serves as an important feedback loop.

In line with its policy on M&E, IPPF has in recent years called on **external evaluators** to assist them in the evaluation of its activities. This is a sign that the policy has been put in practice. Further, the MTR identifies the need to balance external and internal evaluations in carrying the work of evaluation and learning forward in IPPF.

Another result of the increased effort and sharper focus in M&E is the **M&E handbook**. This gives an introduction both to M&E more broadly and to M&E in IPPF and is a significant step to ensuring that there is a common language for M&E in IPPF. In that sense it is both a handbook and a reference manual. FPAN used the handbook to develop its own monitoring and supervision checklist and this is an indication of how it is useful to coordinate M&E efforts at country level.

The **IPPF Exchange** is another example of an area where IPPF has drawn lessons from its operations. Its origins stem from the recommendations of the governance task force which the current PPA identified as a focus area. The approach to organizational learning which IPPF has taken in recent years has been instrumental in ensuring that it is in line with other initiatives in IPPF and that it has integrated technical assistance thus linking 'sharing' to 'learning'. The results of the IPPF Exchange are yet to be assessed.

'Welcome on Board: A Handbook to help IPPF Member Associations improve their governance' is a concrete step towards implementing the Code of Good Governance. It provides MAs with explanations, tools, checklists and examples of how governance can be improved. Again, the current PPA identified governance as a key area to address and IPPF has through the handbook provided a tool for its MAs. The integration of the Code of Good Governance into the revised accreditation system is another vehicle to ensure that good governance practice is followed in MAs. One question that may need further discussion is how the central and regional governing bodies can show that they uphold the principles of good governance.

In terms of **resource mobilization and sustainability** there is also evidence that IPPF has learnt lessons and continues to implement initiatives supported by the PPA. The results on the MAs situation can only be assessed in the years to come but some decisions taken by IPPF respond to the changing funding environment internationally and nationally. One example is the introduction of performance based funding where the grants allocated to MAs now depend on the performance and results of the MAs. A poor performance will result in a cut of the grant and an MA performing above expectations may receive an increase in its grant to encourage even better performance. This is linked to second example of where IPPF has taken steps to improve performance and work towards sustainability. To receive an increase in funding through IPPF, an MA must show that at least 25% of its income comes through other channels than IPPF. This decision was taken to encourage MAs' efforts to seek income from other sources. The financial analysis (FY 2008) in the MTR shows that 32 MAs had more than 80% of its income coming through IPPF. The '25% policy' will thus affect at least 1/5 of IPPF's MAs. The analysis does not provide a breakdown per region and it worth to further explore where these MAs are located and to link it to the funding opportunities in those countries. The financial statements of 2009 state that IPPF income represents only 22% of the total income of grant receiving MAs and 64% being raised locally. It seems, therefore, that there are specific MAs or perhaps regions where dependence on IPPF is greater than others and any further sustainability intervention would need to be based on such analysis.

The changing structure of international aid has been taken up and addressed in IPPF. **'The Funding Formula'** has been developed and translated to four languages. The case of FPAN shows that it has fed straight into the MA's resource mobilization strategy and given focus to its work. FPAN has also decreased its dependency on funds coming through IPPF to about 50% and at the same time showing an increased number of donors. In FGAE, it has not had the same effect because FGAE has not perceived a need to change its resource

mobilization strategy because IPPF funding represents only **15.3**⁸ % of its total income. FGAE also generates incomes from charging clients and selling services, **5.6** % of its total incomes are from this source of revenues. The association can rely on four other major donors at local level.

One question that arises is how the IPPF Secretariat will sustain its operations if funding through IPPF is decreasing. The IPPF Governing Council has decided that the operations of Central Office and the six Regional Offices should not exceed 30%⁹ of total IPPF income. Can IPPF sustain an effective Secretariat at 30% of total income in case that total income generated at global level is decreasing?

The support received through core grants from governments is essential for IPPF to uphold its advocacy role at the global level. These activities are difficult to finance through a project model as it needs to be both flexible and sometimes reactive. The 'Donor's voice' of the MTR show that donors appreciate the value of IPPF as a global advocate because of its rights-based approach and because of its connection to the grass-roots organizations that are the MAs. The sustainability of the IPPF Secretariat is thus key for IPPF to continue its role as a global advocate for SRHR.

Another area where IPPF is taking steps to improve is in the area of **cost-effectiveness**. This seems at the moment to be at a stage of development. It remains to be seen what concrete steps IPPF will be taking to increase cost-effectiveness beyond actions aiming at cost-saving. There is evidence of dual thinking in IPPF Central Office through an approach to both increase cost-effectiveness and to show cost-effectiveness. Part of this are the efforts to calculate and show cost per client served or service provided. The experience in FPAN and FGAE is that these can be quite complex to derive and it would be beneficial for IPPF to develop one model that can be used to derive MA estimates for different service outlets (urban, rural, outreach etc) and that ratios are established at MA level.

⁸ Based on the figures presented in the FGAE 2009 Annual Financial Report

⁹ This figure should not be considered an overhead cost because it includes technical support activities, global and regional advocacy, M&E, accreditation and other programmatic components.

6-Building support for development ¹⁰

6.1 Interventions and presence on global level

IPPF has for a number of years played an important role in SRHR at the international level and is recognized by many as the leading SRHR advocate globally. The PPA has directly contributed to this leadership through the budget support it provides IPPF.

Since the establishment of the Millennium Development Goals, IPPF has been required to more closely show the link between SRHR and the reduction of poverty. During the current IPPF has continued its work in international advocacy and has represented SRHR at a number of important meetings and events. IPPF has cooperated with the Guttmacher Institute and in April 2010 a factsheet on SRH of adolescent in the developing world was published. Another factsheet analyzed the unmet need of contraception in developing countries.

As one of six NGOs, IPPF was invited to attend and speak at the roundtables at the MDG summit where heads of state and met in September 2010. IPPF also participated in the development of the Global Strategy for Women's and Children's Health which WHO and the UN launched in 2010. IPPF notably contributed to a document with recommendations for human rights. Further, IPPF chairs the NGO advisory panel to UNFPA, working on issues concerned with women and development with CEDAW. IPPF has also been active in ensuring that the G8 summits follow up on commitments to SRHR and development.

IPPF is also collaborating with other agencies on specific issues. For example, through the Comprehensive Sexuality Education framework IPPF has the support of UNICEF. Another example is the collaboration with UNHCR for the development and rollout of SPRINT which focuses on meeting SRHR needs in situations of crises and disasters. IPPF is also present in the CSO advisory group of the International Health Partnership which seeks to achieve better health results by mobilizing donors and development partners around a single country-led national health strategy.

IPPF is implementing an advocacy project that seeks to hold governments accountable to MDG5 in 11 countries in Latin America, Central Asia and Eastern Europe. So far, this project has resulted in an SRHR action plan in Bosnia and Herzegovina and an action programme for SRHR of adolescents in Mexico.

At regional levels there are also examples of IPPF being actively involved in linking SRHR and development. The ARO has been active in assisting MAs to hold their governments accountable to the agreed Maputo Plan of Action. In Europe, the European Network is hosting an NGO platform (EuroNGOs) which links SRHR and development.

IPPF Secretariat provides an important platform to convene and coordinate national advocacy activities and to ensure collaboration at international meetings. These can be effectively used to counter negative proposals and to promote policies that are favourable for SRHR.

6.2 Advocating at the national level

IPPF is not only advocating on the international level. In the GIS 21% of IPPF Member Associations reported that they provided technical assistance in advocacy to organizations in developing countries outside their own countries. This support is provided both to MAs and to other civil society organizations. This means that these MAs are both working in their own country as well as being active in development work abroad. In their country they are also active in ensuring that government lives up to international commitments of development assistance, and that SRHR issues receive their share. An example of this is the work of RFSU leading up to the elections in Sweden in September 2010 and their public campaign 'Unite for Women' focusing on stopping maternal mortality.

¹⁰ Evaluators would like to note that the account in this section is a non-exhaustive snapshot of global and local advocacy activities conducted during the PPA period. The evaluators have not sought to provide a complete list of all efforts and achievements of IPPF. This type of assessment will have required much more than the number of working days allocated to the current evaluation and more MAs visits.

39% of the MAs are reported to have participated in the development of poverty reductions strategy papers and 49% participated in the formulation of national development plans. To further SRHR, 84% of IPPF's members have advocated for increased financial resources to SRHR in the national budgets. A further 64% of IPPF MAs are part of the country coordinating mechanisms of the Global Fund.

FGAE and IPPF organized a meeting with the Ministry of Finance and MPs in Ethiopia to explain the links between SRHR, growth and development.

FPAN has in Nepal established a group of journalists that they are working with. They have been attending workshops aimed at sensitizing them to SRHR issues and the link to the development of the country. This group of journalists was helpful in putting pressure on the Minister of Education to In September 2010, FPAN submitted a letter to the Minister of Finance asking that the budget set apart for health be raised from 7% to at least 10% to meet the needs in the country. FPAN is also working on broader national development issues through its involvement in NGOCC (a NGO coordination group) and a number of other panels and platforms.

6.3 IPPF MAs as a capacity builder in NGO/CSO sector

Section 4 of the PPA identifies the two policy areas where IPPF has relevance for the priorities of DFID. The first area is 'SRHR policy relevance' and the second is 'Civil Society and effective states policy'. The PPA objectives focus on the first of these policy areas. Through the interviews and the country visits it became apparent that IPPF has in many ways contributed also to the second policy area, the focus of which is:

The development of more effective and accountable states is key for poverty reduction, and effective and accountable states need effective and accountable civil society. It is important to provide people with the space for association, critical reflection, debate and action and through these a means for poor people to claim their rights. This is potentially one of the decisive factors in progress towards poverty reduction, including the move from being passive recipients of government services to becoming active citizens.

There is congruence between the importance that DFID attaches to the development of civil society and that expressed by IPPF Director General. IPPF's work contributes to the development of civil society in the countries they operate, something which is important for democratic societies to develop.

The membership of IPPF has grown steadily since 1952 when the federation was established. The MAs have received grants through IPPF and often this has been core support with additional support for restricted projects. This kind of support has in a sense been an investment in the MAs for the long run and it has enabled MAs to recruit staff, invest in clinics, establish offices and set up financial and administrative systems and procedures. In many cases, the MAs were among the first national NGOs established in their countries. This is especially true in developing countries.

The MAs often cooperate with other NGOs in the country they operate. One of the persons interviewed said that the MA in his country of origin had been supportive in the establishment and development of the association of gynecologists and obstetricians in the country by providing meeting space and administrative support.

The case of FPAN

In Nepal it became clear from interviewing the partners of FPAN that it had played a crucial role in the development of civil society. For a long time FPAN had housed and chaired the Non-Governmental Organization Coordination Council, it had helped to improve the monitoring and reporting systems of partnering organizations, and often assisted them in the process of registering as formal NGOs. For the partners, FPAN is a stable and established NGO that "can lead on the big issues that require both advocacy and technical expertise". Another person noted that FPAN is "sometimes confused with government institution because it has been around for so long, but it remains a real NGO. The sustainability of national NGOs is very important for development of country." (Partner NGO).

Linked to this idea of the importance of national NGOs was seen in a comment on the fact that it is rooted in the community: "FPAN has confidence in the community. A national NGO has this advantage, it is accepted. And, if an organization is not accepted the programme is not sustainable and not effective. Usually, local NGO capacity is low but not FPAN. There is need for support to NGOs in the country. FPAN is an institution present

at district levels. A lot of NGOs appear and dissolve and FPAN remains. The focus of FPAN makes it unique because there is a width of focus also beyond SRH services.” (Multilateral).

This connection to the community and to local volunteers is also a resource which partner NGOs can draw on in their work: “FPAN has established and maintained a youth volunteer group that you can call on. If I need a youth volunteer in a certain district I contact FPAN and they give me the name of a capable, energetic, honest and dedicated person. There is no other organization with this network in the country.” (Partner NGO).

When asked about the extent to which FPAN is contributing to strengthen local NGOs, it was reported FPAN has helped to establish 278 local organizations in the communities in different districts and cooperates with these for programmatic activities, and is on a more continuous basis providing support to 25 NGOs in different areas.

The core funding, such as the PPA, provided to MAs through IPPF has over the years helped establish and sustain NGOs like FPAN in a way that restricted project funding is unlikely to have achieved. The stability and long term development of many of the MAs has in turn been instrumental in strengthening the civil society in the countries where they operate. This is an area that is not reported on systematically but there is sufficient indication to suggest that the example of FPAN is not a unique case.

7. Recommendations and issues to be addressed

The partnership between DFID and IPPF has been beneficial for the organizational development of IPPF. In the PPA period that this evaluation is looking at, IPPF has put in consistent and focused efforts to attain the agreed PPA outcomes. In the view of the evaluators, IPPF has successfully met the requirements detailed in the PPA and has continued to learn and develop in all areas. Having established this, there are some areas where the evaluators consider that IPPF can still improve to give further momentum to their work. These areas are summarized below in the form of recommendations. The last two recommendations are directed both at IPPF and DFID for their future collaboration.

7.1 Value for money

7.1.1 It is recommended to develop a model for assessing objectively MAs efficiency in delivering services. The model should be developed based on the existing financial and service statistics databases. Linkages between the financial data and the service statistics modules are recommended to be established and performance indicators developed. The model should be thought as a tool functional at MAs level; as an instrument aiming at improving efficiency in delivering services. It is also recommended not to use the developed model to make comparison between MAs. Each country context presents too many different variables to undertake such an analysis.

7.1.2 Evaluators suggest IPPF to undertake a pilot experience with some targeted MAs¹¹ in evaluating the impact of the APB activities in improving people's lives. The objective of these APB impact evaluations should aim at developing evaluation methods and indicators specific to the IPPF context. The tested and developed methodology and indicators could then be shared to all MAs and used as an instrument to demonstrate value for money in terms of effectiveness.

7.2 Monitoring and evaluation

7.2.1 It is recommended to continue investing in strengthening the existing monitoring and evaluation system. This means to strengthen the system itself by bringing together the different elements composing the results-chain and by establishing the relevant missing linkages. This also means to strengthen the staff skills by continuing to build monitoring and evaluation capacities.

7.2.2 Central office monitoring and evaluation department is recommended to develop a set of performance indicators to assess value for money (economic, efficiency and effectiveness). The developed indicators should then be used at MAs level. With a set of new IPPF performance indicators, MAs will start to use all the data they collect to assess and improve their work. These indicators will also be a good tool to convince donors of IPPF contributions in improving people's lives.

7.3 Governance and accreditation

7.3.1 IPPF has taken significant steps to improve the effectiveness of governance at all levels and are aware that some hurdles and challenges remain to be overcome. 'Effective governance' is one of seven critical issues emanating from the MTR. In support of this continued effort, it is recommended that IPPF strive to identify the main challenges, where they occur and possible strategies or interventions that can help resolve these challenges in the long term.

¹¹ MAs located in developing countries which are known to be performing and willing to participate in new experiences

7.3.2 IPPF has invested considerable time and resources in the implementation and revision of its accreditation system. According to the evaluation of the accreditation system and the MTR, accreditation seems to be appreciated by MAs and by IPPF's donors. However, this evaluation revealed that IPPF's accreditation system is not known in the countries where the MAs are operating and it is recommended that IPPF finds ways in which the accreditation can become more known and valued at the country level.

7.3.3 The revised accreditation system has under standard 8.2 included a check on cost-effectiveness of the services provided by MAs. To reinforce the recommendations made in 7.2 above, it is recommended that the staff and volunteers involved in accreditation reviews are giving sufficient guidance on how to assess cost-effectiveness to be able to review and assist MAs using the same model or framework.

7.4 CSO development

7.4.1 The interviews conducted in this evaluation give clear indication that MAs in many countries play and have played a significant role in the development and strengthening of the civil society where they operate. This contribution is significant as the existence of a functioning civil society is considered to strengthen democratic societies and accountability of governments and to contribute to the reduction of poverty. Given that the strengthening of civil society it is not a primary goal of IPPF, the contributions of MAs in this development are not collected or reported. It is recommended that IPPF consider collecting data on this 'added value' of its network to show the effects it is having on civil society.

7.5 Resource mobilization and sustainability

7.5.1 Within the framework of the PPA IPPF has developed a sustainability discussion paper and guide. It is not clear to the evaluators what the purpose and audience of these documents is and how they relate to "The Funding Formula". As it stands, they do not respond to the issues around sustainability as described in Objective 1, Outcome 3 of the PPA. It is recommended that IPPF either revise these documents or develop new ones to guide IPPF in its work towards sustainability of all the levels of the federation. Such a piece could incorporate the discussions around charging or not charging for services and voucher schemes currently being explored in IPPF.

7.6 Staff turnover

7.6.1 During the evaluation it appears that IPPF faces some staff turnover problems. During the interview in London, Nepal and Ethiopia this specific problem has been mentioned. The evaluators have discussed the issue. Based on the information they got they have found that the causes feeding the staff turnover problem in each case are different. Nevertheless, it is suggested to look at this specific problem for reasons of sustainability and continuity.

7.7 Recommendations on the PPA

7.7.1 In the current PPA there were some indicators that did not sufficiently address all the aspects of the agreed outcomes. It is recommended to DFID and IPPF to ensure that future PPAs contain indicators that are relevant and sufficient for assessing the agreed outcomes sought.

7.7.2 The PPA fund is IPPF second major source of unrestricted funding¹². The unrestricted funds play an important role at the IPPF Central level. It brings more flexibility to the Secretariat in order to deal with unplanned events; it is used to finance IPPF participation in the global debate and the Secretariat advocacy

¹² Data taken from IPPF financial Statements 2009, page 30

activities in international forums. This unrestricted funding is also used to fill in gaps where donors granting tied money may be less interested to intervene. It can be gaps within the Five A's framework or geographical gaps where bilateral agencies have no interest in investing in. Core funding also means that specific initiatives supported by restricted projects can be mainstreamed and incorporated into the general programme of MAs once the project has ended. The core funding received at central level is essential to support the coordination work of the Federation, it is the necessary glue used to stick all pieces of the organization together.

The PPA unrestricted funds transferred and used by MAs play a similar role in supporting activities at country level. MAs visited have mentioned the importance of receiving unrestricted incomes from IPPF. This unrestricted budget is essential to finance the coordination, communication and advocacy activities of their association. This money is used to fill in gaps where local donors have no interest. In Ethiopia for instance donors are mainly interested in three As; Adolescents, HIV/Aids and Access. Without the IPPF unrestricted cash transfer, FGAE may have problem to deliver for the two other 'A's.

In the current economic context where donors are tempted to go back to projects tied to a restricted budget, DFID is recommended not to underestimate the importance of the PPA funding for IPPF and not to forget the strategic position it brings DFID, as a key IPPF partner, to deliver comprehensive SRH services and promote sexual and reproductive rights globally.

Annexes

- 1-ToR**
- 2- List of people and organizations interviewed**
- 3- List of documents reviewed**
- 4- Timeline of evaluation process**
- 5- Evaluation Break down**

TERMS OF REFERENCE FOR IPPF PPA EVALUATION

BACKGROUND

Partnership Programme Arrangements (PPAs) were introduced by DFID in 2000 as direct replacements for the Block Grant and Volunteer Grants. These new models of civil society organisations (CSOs) support allowed DFID to enter high level strategic partnerships with some of the most trusted and respected CSOs with whom DFID shared common goals and objectives.

PPAs provided the holders with longer term, unrestricted strategic funding in support of mutually agreed outcomes, enabling them to undertake those potentially higher yielding areas of their work which were innovative and higher risk but were, as a result, often under-funded.

International Planned Parenthood Federation (IPPF) is the world's leading non-governmental sexual and reproductive health and rights organization providing a comprehensive range of services and delivering advocacy at the district, national, regional and global levels. We are a truly global movement of service providers and activists working in 171 countries through 60,000 service delivery points that provided 66.8 million services in 2008. Seventy per cent of these services were provided to poor, marginalized, socially excluded and underserved people; these people would otherwise have been unlikely to enjoy the benefit of good health.

IPPF first received DFID PPA support in July 2008 and its current PPA with DFID is due to end on 31 March 2011.

PURPOSE, OBJECTIVE AND SCOPE

As part of the PPA funding arrangement with DFID, it was agreed that all PPA holders would, in the last year of funding, arrange for an independent external evaluation of the PPA for the period 2008-11. This evaluation will use the most recent version of the IPPF PPA performance framework.

- The purpose of this evaluation is to re-confirm the common ethos and vision in recognised priority areas which exist between IPPF and DFID and which led to the formulation of the current PPA.
- The objective is to evaluate how far IPPF has gone towards achieving the mutually agreed outcomes as stated in the PPA performance framework. The evaluation will also derive lessons which will enable IPPF to inform its future strategies, programmes, approaches and set-up.
- The target audience and main users of the findings of the evaluation will be IPPF and the Civil Society Team at DFID. However, IPPF partners and other stakeholders may also benefit from the findings.
- In terms of scope, the evaluation will focus only on the most recent PPA period ie 1 April 2008 to present therefore it should cover developments in IPPF's strategies, programming, structure, and context over this time frame.

METHODOLOGY

Using the most recent agreed version of the IPPF PPA performance framework and the agreed PPA baseline, the successful bidder will:

- arrange and chair series of meetings/interviews with IPPF staff to review and assess the range of initiatives that were selected for support from the PPA and an evaluation of their contribution to the achievement of the agreed outcomes of the PPA
- undertake a review of monitoring reports received by IPPF, from the partners and/or field offices
- undertake 3-4 case studies/evaluations of IPPF's Member Associations' contribution to development process in country including contribution to health systems strengthening through policy change
- undertake interviews/survey of a range of stakeholders from **IPPFs** partners, DFID policy teams and country offices, other donors, etc
- interviews/survey with a selection of key partners by a range of means including tele/videoconference interviews and meetings with and visits to an agreed number of partners.
- Review the annual PPA Self-Assessment reports which IPPF has submitted to DFID in 2009 and 2010.

SKILLS AND QUALIFICATIONS

The successful bidder will be expected to have:

- A strong understanding and experience of evaluation methodology
- A comprehensive background in working with civil society organisations in the field of international development

OUTPUTS

The successful bidder will be expected to produce a report of no more than **20-25 pages** of A4, in Plain English. This report will be written in a format which is easily accessible to all stakeholders.

This report will follow the following format:

1. Summary section (approx 2 pages). This summary will focus on the main findings and will specifically state how far the evaluator feels **IPPF** has gone towards achieving the mutually agreed outcomes as stated in the PPA performance framework.
2. An Introductory section (approx 2 pages) which should include the methodology used in undertaking the evaluation.

3. A section on Results (approx 6 pages) – this section should include (i) results, including impact, of **IPPF** activities ‘on peoples’ lives’ including any specific impacts on gender relations and social exclusion issues (ii) results, including impact, of **IPPF** on relevant policy issues (iii) the impact of the PPA on the overall organisational development of **IPPF**. It should also comment on the overall health of **IPPF** monitoring and evaluation systems.
4. A section covering Value for Money (approx 3 pages). In this section the evaluator will provide specific evidence to show whether or not **IPPF** is able to show value for money for DFID’s PPA inputs. This should include specific details about the organisation’s procurement processes and procedures, and measures in place to manage overall fiduciary risk.
5. A section covering Lesson Learning (approx 3 pages). This section will highlight lessons learned throughout the 3 year PPA period and how/whether these have been taken up across the **IPPF**.
6. A section covering Building Support for Development (approx 2 pages) showing what progress IPPF has been made against the objectives of (i) building public knowledge and awareness of global poverty; (ii) generating public support and momentum for action to reduce global poverty, (iii) stimulating the public and/or organisations to act to reduce global poverty..
7. A section on Issues to be addressed (approx 2 pages). This section will highlight any specific issues which arose during the evaluation which the evaluator feels need to be addressed by **IPPF** or DFID.

In submitting the final report we would ask that you include annexes which contain:

- details of the final agreed TORs
- a list of people and organisations interviewed
- a list of documentation reviewed
- a timeline of the evaluation process

TIMETABLE

The successful bidder will be expected to begin the work in July 2010. An estimated 40 working days have been allocated for this evaluation and it is anticipated that the work will take place over four months. The successful bidder will be expected to produce a finalised evaluation report agreed with **IPPF**, for submission to DFID by no later than **Monday, 15 November 2010**.

SUBMISSION OF PROPOSALS

Individuals and firms are encouraged to submit proposals to Riva Eskinazi by email to the following address: reskinazi@ippf.org by no later than COB **Tuesday 6 July, 2010**.

Proposals should include a work plan and detailed budget, proposed approach, curriculum vitae, examples of similar work, and availability. Proposals should also include contact information for two independent references for whom you have carried out similar work over the last three years.

Annex 2 - List of people and organizations interviews

IPPF Central Office

| Name | Position | Location | Date and time |
|--|---|--|------------------------------------|
| Matthew Lindley | Senior Adviser, Resource Mobilization External Affairs, Operations Division with IPPF | London | 6/9/2010 14:00 to 14:45 |
| Mahugnon Achille Togbeto | Head, Governance & Accreditation with IPPF | London Pop-in Room | 6/9/2010 15:00 to 16:00 |
| Kevin Osborne | Senior Adviser with IPPF | London Kevin's Office | 6/9/2010 16:00 to 17:30 |
| Matthew Lindley and Jennifer Woodside | Senior Adviser, Resource Mobilization External Affairs, Operations Division and Head Advocacy and Communications with IPPF | London Jennifer's Office | 7/9/2010 09:30 to 10:30 |
| Gill Greer | Director-General with IPPF | London Gill's Office | 7/9/2010 10:30 to 11:30 |
| Heidi Marriot | Head, Organisational Learning and Evaluation with IPPF | London Heidi's Office | 7/9/2010 11:30 to 12:30 |
| John Good and David Smith | Director, Finance and Director with ICON | London John Good's Office | 7/9/2010 14:00 to 15:00 |
| John Worley | Global Advisor Public Policy and Acting Director of Operation with IPPF | London John Worley's Office | 7/9/2010 15:00 to 16:00 |
| Kelly Culwell | Senior Advisor, Abortion with IPPF | London Kelly's Office | 8/9/2010 09:00 to 09:45 |
| Garry Dearden | Director, Organisational Effectiveness and Governance with IPPF | London Garry's Office | 8/9/2010 09:45 to 10:30 |
| Dr. Hamid Rushwan | ED, FIGO | London | 8/9/2010 11:00 to 12:00 |
| Nel Druce and Benny Panayi | | London | 8/9/2010 13:00 to 14:00 |

Family Guidance Association of Ethiopia

| Name | Position | Location | Date and time |
|--|--|--------------------------------|--------------------------------------|
| Fisseha Mekonen | Executive Director with FGAE | Addis Ababa | 28/9/2010 8:45 to 10:15 |
| Mehari Getanch and Medhanit Getachew | Research Planning, MIS, M&E Coordinator and M&E Officer with FGAE | Addis Ababa | 28/9/2010 10:20 to 12:30 |
| Adam Zeleke and Abadi Kulayu | Advocacy, Policy and Documentation Advisor with IEC and Organisational, Development and Management Director with FGAE | Addis Ababa | 28/9/2010 13:45 to 16:30 |
| Admassu Tekolla Worku | Supply-Chain Manager with FGAE | Addis Ababa | 29/9/2010 09:00 to 10:30 |
| Zegeye | Financial Officer with FGAE | Addis Ababa | 29/9/2010 10:30 to 12:30 |
| Asqual | Governance with FGAE | Addis Ababa FGAE HQ | 29/9/2010 14:00 to 15:00 |
| Zena Dori | Finance and Administration Director with FGAE | Addis Ababa FGAE HQ | 29/9/2010 15:00 to 16:30 |
| Adam Zeleke | Advocacy, Policy and Documentation Advisor with IEC | Addis Ababa FGAE HQ | 30/9/2010 08:00 to 9:30 |
| Clinic Visit to the Family Guidance Association of Ethiopia, The Sarais Clinic with Adam Zeleke | | Addis Ababa | 30/9/2010 10:30 to 12:30 |
| Guebray | Communications Officer at the ILO Regional Office | Addis Ababa | 30/9/2010 15:45 to 16:15 |
| Abraham Gelaw | Communications Officer at the United Nations Population Fund | Addis Ababa | 30/9/2010 16:20 to 17:00 |
| Packard Foundation | Major Donor that works with FGAE | Addis Ababa | 01/10/2010 08:45 to 10:15 |
| Ali Forder | Health Advisor with DFID | Addis Ababa | 01/10/2010 11:00 to 12:15 |
| Fisseha Mekonen | Executive Director with FGAE | Addis Ababa | 01/10/2010 |

Family Planning Association of Nepal

| Name | Position | Location | Date and time |
|--|---|-----------------|---------------|
| Natasha Mesko | DFID, Nepal | Phone Interview | 04/10/2010 |
| Ataur Rahman and Varun Anand | Director Evaluation and Accreditation with IPPF in Delhi and Finance Director and Desk Officer in SARO, Delhi | Delhi | 08/10/2010 |
| Mr Subhash Pradhan, Mr. Raj Kumar Shrestha | FPAN President, FPAN Treasurer | Nepal | 10/10/2010 |
| Dr. Giridhari Sharma Paudel | Acting DG, FPAN | Nepal | 10/10/2010 |
| Dr. Deeb Shrestha Dangol | Acting Medical Director, FPAN | Nepal | 11/10/2010 |
| Mr. Balaram Katwal | Deputy Program Director FPAN | NEPAL | 11/10/2010 |
| Diksha Khadka | Sr. M & E Officer , GCACP, FPAN | Nepal | 13/10/2010 |
| Mr. Sudhir Rai, Mr. Rajesh Bhatta | M&E Officers with FPAN | Nepal | 11/10/2010 |
| Dr. Navin Thapa | Director External Affairs and Resource Mobilization, FPAN | Nepal | 13/10/2010 |
| Dirghai Shrestha | Nepal Family Health Programme, USAID | Nepal | 12/10/2010 |
| Dr. Satya Dasai Swamy | UNFPA | Nepal | 12/10/2010 |
| Dr. Indira Basnet | Director IPAS | Nepal | 12/10/2010 |
| Jamuna Sitaula | Advocacy Officer, FPAN | Nepal | 10/10/2010 |
| Sanjjev Gurung, Dr. Khem Karki, Mr. Govinda Shrestha, and Baijanti Karki | Blue Diamond Society, SOLID Nepal, RECPEC, Ama Milan Kendra | Nepal | 12/10/2010 |
| Badri Kumar Guragain, Dharma Subedi, and Keshab Sharma | Finance Director, Procurement Officer and Internal Auditor, FPAN | Nepal | 13/10/2010 |
| Mr Sagar Dahal | Senior Public Health Administrator Family Health Division, Ministry of | Nepal | 12/10/2010 |

| | Health and Population | | |
|---|---|--------------|--|
| Mr. Bir Bahadur Thapa Ms. Sangeeta Khatri Mr. Ramesh Upreti Mr. Udaya Chandra Khanal Mr. Subhash Shrestha Ms. Upama Malla, Ms. Rekha L. Rana, Dr. Niraj Sinha Mr. Pramij Thapa, Mr. Ramchnadra Khanal, Mr. Basanta Parajuli, | Admin Section Chief HIV Manager Youth Manager Acting Program Support Section Manager MPRC Project Coordinator Comprehensive Sexuality Project Coordinator Girl Trafficking Project Coordinator USAID Project Coordinator GCACP Project Coordinator PSR Project Coordinator TGF M & E Officer | Nepal | 11/10/2010 – 13/10/2010 |

MAAs contacted through an online survey

Survey sent on October 20, 2010

| Name | MA | Reply | Date and time |
|---|--------------------|--------------|-------------------------|
| Dr. Amr Al Ayat | Egypt | No | |
| Hussein Gafar El Hafyan | Soudan | No | |
| Inne Silvianne | Indonesia | Yes | October 29, 2010 |
| Roberto Ador | Philippines | No | |
| Le Duc Hoang | Vietnam | Yes | October 25, 2010 |
| KM Tarek | Bangladesh | No | |
| Catherine Dawson-Amoah | Ghana | No | |
| Oliver Waindi | Kenya | No | |
| Josephine Mwankusye | Tanzania | No | |
| Jackson Chekweko | Uganda | No | |
| Meri Khachikyan | Armenia | No | |
| Radosveta Stamenkova | Bulgaria | No | |
| Elona Gjebrea Hoxha (Not reached, wrong email given) | Albania | | |

DFID local health advisors interviewed

| Name | Country | |
|--------------------|----------------|---|
| Natasha Mesko | Nepal | Phone interview |
| Ali Forder | Ethiopia | Face-to-face interview |
| Shehlina Ahmad | Bangladesh | Phone interview |
| Tanya Zebroff | Tanzania | DFID Tanzania not active in the SRHR sector |
| John Leigh | Vietnam | Email |
| Jean-Marion Aitken | Kenya | Phone interview |
| Nel Druce | United Kingdom | Face-to-face interview |
| Benny Panayi | United Kingdom | Face-to-face interview |

Annex 3 - Documents reviewed or consulted

1-PPA and IPPF Documents Reviewed

- IPPF Annual Donor Report 2008
- IPPF Annual Donor Report 2009, A midterm review of IPPF's performance from 2005-2009
- Memorandum of Understanding between the Department for International Development (DFID), United Kingdom of Great Britain and Northern Ireland and the International Planned Parenthood Federation (IPPF) Partnership Programme Arrangement (PPA) for 2008-13
- UK Department for International Development (DFID) and the International Planned Parenthood Federation (IPPF) - Partnership Programme Arrangement 2008/09 -2012/13
- DFID Country Reports - IPPF Member Associations' compliance with IPPF's Strategic Framework in 2009 - 16 July 2010
- Partnership Programme Arrangement Self-Assessment Review, UK Department for International Development (DFID) and International Planned Parenthood Federation (IPPF) - 30 June 2009
- Partnership Programme Arrangement Self-Assessment Review – Reporting Year 2009 – 30 June 2010
- Putting the IPPF Monitoring and Evaluation Policy into practice. A handbook on collecting, analysing and utilizing data for improved performance.
- IPPF Secretariat Finance Guide, Version 4, July 2009
- IPPF Authorities for Expenditure, Version 3, July 2009
- The gain and the pain of organisational change: an independent evaluation of the International Planned Parenthood Federation's Accreditation System – Options Consulting firm, Dr. Kristan Hawkins and Ben Rolfe, September 2007
- IPPF Annual Performance Report 2008-2009
- Strengthening Volunteer Involvement and Governance in IPPF: Final Report of the IPPF Governance Task Force – Adopted by IPPF Governing Council in May 2008 (Without the annexes)
- Civil Society Policy and Practice in Donor Agencies – An overview report commissioned by DFID – International NGP Training and Research Centre, May 2010, Executive summary
- IPPF Strategic Framework: 2005-2015. Third edition, 2007
- Mid-Term Review of IPPF's Strategic Framework 2005-2015 – Voices of IPPF's Donors and External Partners. Options Consultancy Services Ltd. June 2009
- IPPF Global Indicator Survey Template
- IPPF accreditation process documents
- Print out report of accreditation standard x check XX
- Code of Good Governance
- IPPF Governance Handbook
- The Funding Formula: IPPF Resource mobilization guide
- Evaluation Focal Point meeting reports: 2008 and 2009 Meetings in London and Kuala Lumpur

- IPPF Seven Critical issues
- Evaluation of IPPF accreditation system
- Report from IPPF Governance Task Force
- IPPF Act & Regulations
- IPPF accountability profile
- Discussion paper on sustainability
- IPPF Voucher scheme paper
- APR 2008-2009
- Draft Chapter 1 and 2 of APR 2009-2010
- Feedback report by consultant analysis of IPPF indicators
- Final report IPPF sustainability 2009
- IPPF Policy Handbook
- IPPF Financial Statements 2006
- IPPF Financial Statements 2007
- IPPF Financial Statements 2008
- IPPF Financial Statements 2009

2-Documents Consulted from the Family Guidance Association of Ethiopia

- Strategic Plan 2005-2009 – Family Guidance Association of Ethiopia (FGAE)- 2009
- Accounts and Audit Report – Family Guidance Association of Ethiopia – December 31, 2009
- Summary of 2008 APB Project- FGAE
- Statistical Abstract of Year 2009 and Time Series Data (Year 2000 to 2009), Statistical Data on Family Planning and Reproductive Health Services, FGAE – September, 2010
- Advocacy Strategy Ethiopia Working Document 2007-2011 – United Nations Population Fund
- Global Indicators Survey 2008 – FGAE – 2008
- A Brief Profile Reproductive Health for All – FGAE
- Accounts and Audit Report – FGAE – December 31, 2008
- Internal Control Memorandum – FGAE – December 31, 2007
- Human Resources Management Policy and HR Procedural Guidelines 2008 Revised Edition – FGAE – May 1, 2008
- Strategic Plan 2009-2013 – FGAE – January, 2009
- Financial/Accounting Policies and Procedures Manual – FGAE – January, 2009
- Proclamation to Provide for the Registration and Regulation of Charities and Societies – Federal Negarit Gazeta of the Federal Democratic Republic of Ethiopia – February 13, 2009
- Supplies Chain Management Manual – FGAE – October, 2010
- Regional Logistics Manual: Guide for Logistics Managers – IPPF

3- Documents Consulted from the Family Planning Association of Nepal

- MDGs, targets and indicators set by Government of Nepal
- DFID Nepal Evaluation 2007
- FPAN Annual reports 2007, 2008, 2009
- FPAN External Audit reports 2007, 2008, 2009

- FPAN Audit Committee reports 2007 and 2008
- FPAN Strategic Plan 2005-2010
- FPAN Draft Strategic Plan 2010-2015
- FPAN Resource Mobilisation Plan 2010
- FPAN procurement policy
- FPAN Internal Audit guide
- FPAN Supervision and monitoring checklist
- Evaluation on Implementation of Family Planning Association of Nepal Strategic Plan 2005-2009. Final report 2010.
- List of committees FPAN present
- FPAN APB 2010
- Comprehensive Sexuality Education in Nepal (SARO 2010)

4-Other resources consulted:

- Health, Nutrition and Population (HNP) Discussion Paper: Monitoring and Evaluating Projects: A step-by-step Primer on Monitoring, Benchmarking, and Impact Evaluation. © 2006 The International Bank for Reconstruction and Development / The World Bank 1818 H Street, NW Washington, DC 20433
- Getting better value for money from UK development aid – let local civil society organizations monitor recipient government performance. The London School of Economics and Political Sciences. June 2010
<http://blogs.lse.ac.uk/politicsandpolicy/?p=3218>
- Full transparency and new independent watchdog will give UK taxpayers value for money in aid. DFID Website. Andrew Mitchell Speech, June 3 2010
<http://www.dfid.gov.uk/Media-Room/Speeches-and-articles/2010/Full-transparency-and-new-independent-watchdog-will-give-UK-taxpayers-value-for-money-in-aid/>
<http://www.dfid.gov.uk/Media-Room/News-Stories/2010/Mitchell-Full-transparency-and-new-independent-watchdog-will-give-UK-taxpayers-value-for-money-in-aid/>
- International NGO Training and Research Centre(INTRAC): Tracking Progress in Advocacy: Why How to monitor and evaluate Advocacy Projects and Programmes, October 2009. Maureen O’Flynn
- Civil Society Policy and Practice in Donor Agencies (INTRAC, 2010)
- Human and Economic Impact of RH supplies Shortage & Stock-outs in Bangladesh, 2009

Annex 4 – Allocation of Working Days: Planned and Actual

| <p>Guillaume Mercier: 20 Working days allocated</p> <p>Actual number of days worked: 27 days</p> <p>g.mercier@itcilo.org</p> | <p>Daniel Genberg: 20 Working days allocated</p> <p>Actual number of days worked: 27 days</p> <p>dgenberg@googlemail.com</p> |
|--|---|
| <p>Document review: 5 days</p> <p>London meetings and interview: Preparation: 1 day Mission: 3 days Reporting: 0,5 day</p> <p>Ethiopia: first country case study: Preparation: 2,5 days Mission: 5 days Reporting: 1 day</p> <p>Online questionnaire Preparing of the MAs Online questionnaire and sending it to the targeted MAS: 0,5 day</p> <p>Evaluators retreat to analyse and structure the information collected: Retreat in Turin: 2 days</p> <p>Preparation of the draft report: Writing: 4 days</p> <p>Feedback meeting in London: Preparation and presentation: 1,5 day</p> <p>Finalisation of the report: Preparing the final report: 1 day</p> | <p>Document review: 5 days</p> <p>London meetings and interview: Preparation: 1 day Mission: 3 days Reporting: 0,5 day</p> <p>Nepal: second country case study: Preparation: 2,5 days Mission: 5 days Reporting: 1 day</p> <p>DFID phone interview Contacting DFID Country Health Adviser and conducting phone interviews: 0,5 days</p> <p>Evaluators retreat to analyse and structure the information collected: Retreat in Turin: 2 days</p> <p>Preparation of the draft report: Writing: 4 days</p> <p>Feedback meeting in London: Preparation and presentation: 1,5 day</p> <p>Finalisation of the report: Preparing the final report: 1 day</p> |

| ID | Task Name | Duration | Start | Finish | g | | | | | | | | | | | | | |
|----|--|----------------|-------------------|-------------------|---------|---------|---------|---------|---------|---------|---------|----|----|----|----|----|----|----|
| | | | | | '10 Sep | '10 Sep | '10 Sep | '10 Oct | '10 Oct | '10 Oct | '10 Nov | | | | | | | |
| | | | | | 15 | 22 | 29 | 05 | 12 | 19 | 26 | 03 | 10 | 17 | 24 | 31 | 07 | 14 |
| 0 | Time line - Evaluation of DFID-IPPF PPA | 66 days | '10 Aug 16 | '10 Nov 15 | | | | | | | | | | | | | | |
| 1 | Collecting and reviewing input documents: preparation of the evaluation | 10 days | '10 Aug 16 | '10 Aug 27 | | | | | | | | | | | | | | |
| 2 | Inception meeting with IPPF and DFID | 1 day | '10 Sep 06 | '10 Sep 06 | | | | | | | | | | | | | | |
| 3 | Interview with key staff at IPPF's Central Office | 1 day | '10 Sep 07 | '10 Sep 07 | | | | | | | | | | | | | | |
| 4 | Interview with key stakeholders located in London | 1 day | '10 Sep 08 | '10 Sep 08 | | | | | | | | | | | | | | |
| 5 | Case Study 1 - Member association in Addis-Ababa | 5 days | '10 Sep 27 | '10 Oct 01 | | | | | | | | | | | | | | |
| 6 | Case Study 2 - Member association in Nepal | 5 days | '10 Oct 04 | '10 Oct 08 | | | | | | | | | | | | | | |
| 7 | Sending the online survey and interviewinf DFID Health advisers | 2 days | '10 Oct 18 | '10 Oct 19 | | | | | | | | | | | | | | |
| 8 | Evaluators' retreat | 2 days | '10 Oct 26 | '10 Oct 27 | | | | | | | | | | | | | | |
| 9 | Presentation of preliminary results, feedback meeting with IPPF and DIFD | 1 day | '10 Nov 05 | '10 Nov 05 | | | | | | | | | | | | | | |
| 10 | Preparation of final evaluation report | 2 days | '10 Nov 11 | '10 Nov 12 | | | | | | | | | | | | | | |
| 11 | Submission of the final evaluation report | 0 days | '10 Nov 15 | '10 Nov 15 | | | | | | | | | | | | | | |

| | | | | | | |
|---|----------|--|-----------------|--|--------------------|--|
| Project: Time line - Evaluation of DFID Date: '10 Nov 12 | Task | | Milestone | | External Tasks | |
| | Split | | Summary | | External Milestone | |
| | Progress | | Project Summary | | Deadline | |

Annex 5 – Scope of the Evaluation: the Evaluation WBS

ANNEX 5 : IPPF&DFID - (PPA) - Scope of the Evaluation

Elements to be evaluated and evaluators' strategy

ANNEX 5 : IPPF&DFID - (PPA) - Scope of the Evaluation

