



## United Nations Population Fund

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**UNFPA – Evaluation**

### United Nations Population Fund

#### Evaluation of the UNFPA support to gender equality and women's empowerment

*Summary*

The Evaluation Office conducted this thematic evaluation as part of the quadrennial budgeted evaluation plan (2018-2021). Covering 2012-2020, the evaluation encompassed three main components: the extent to which UNFPA systems and processes are fit for purpose to advance gender equality and women's empowerment; the extent to which UNFPA has mainstreamed gender equality across all programming areas of the strategic plan; and, the contributions of UNFPA programmatic work under the dedicated gender equality outcome.

As the first broad thematic evaluation of its kind, the evaluation generated important lessons and recommendations on gender equality and gender mainstreaming. The evaluation is intended to be used to support accountability for past performance and inform the formulation of the upcoming strategic plan for 2022-2025, as well as the implementation of the Gender Equality Strategy (2018-2021).

## I. Background

1. The mandate of UNFPA is informed, first and foremost, by the International Conference on Population and Development (ICPD) Programme of Action (1994) and the ICPD beyond 2014 high-level global commitments (for the implementation of the population and development agenda). Over the past decades, additional normative developments have framed how United Nations agencies, including UNFPA, focus on and operationalize their support for gender equality and women's empowerment (GEWE).
2. In 1993, the Declaration on the Elimination of Violence Against Women was the first international human rights instrument to exclusively and explicitly address the issue of violence against women. The Beijing Platform for Action (1995) commits the international community to gender mainstreaming as a methodology for achieving women's empowerment. United Nations commitments to gender equality and gender mainstreaming were further solidified in the agreed conclusions on Mainstreaming Gender Equality in the Economic and Social Council (1997) and the adoption of the United Nations System-wide Action Plan (UN-SWAP) on Gender Equality and the Empowerment of Women (2012). Most recently, the 2030 Agenda for Sustainable Development and the Sustainable Development Goals (SDGs) have raised expectations for how the United Nations system will contribute to helping Member States attain a shared vision of achieving gender equality and the empowerment of all women and girls by 2030.
3. The COVID-19 pandemic has exacerbated existing gender inequalities and the vulnerabilities of women and girls. It has put additional strains on countries, especially fragile countries where health and social systems are already weak. While there are reports of increases in gender-based violence and sexual exploitation and abuse, the provision of gender-based violence services has decreased during the pandemic. Disruptions in the continuity of essential sexual and reproductive health services could have serious implications for maternal and newborn health. Cases of female genital mutilation and the number of child marriages are expected to rise over the next years. In this context, UNFPA has contributed to the global COVID-19 response by focussing on three strategic priorities: (a) continuity of sexual and reproductive health services; (b) prevention and response of gender-based violence and harmful practices; (c) provision of lifesaving supplies and sexual and reproductive health commodities, including modern contraceptives, maternal health drugs and supplies, and personal protective equipment.
4. Over the three strategic planning cycles (from 2012 to the present), UNFPA implemented a twin-track approach to programming, consisting of mainstreaming gender considerations across all programmatic areas as well as implementing a stand-alone dedicated outcome area on gender equality and women's empowerment. To guide its work, UNFPA has produced a set of key guidelines on gender equality and women's empowerment, including gender-based violence and harmful practices.
5. UNFPA has actively pursued a multi-agency, multi-stakeholder collaborative approach. It has played a leadership role in the Inter-Agency Network on Women and Gender Equality and the Inter-Agency Taskforce on Violence against Women. UNFPA also actively participates in the United Nations Development Group Task Team on Gender Equality and co-chaired the United Nations Sustainable Development Group Task Team on GEWE.
6. UNFPA has played an active role in the UN-SWAP Focal Point Network for many years. It has been part of key global programmes targeting women and girls, including the Joint Programme to Accelerate Ending Child Marriage, the Joint Programme to Eliminate Female Genital Mutilation, the Joint Programming Initiative on Violence Against Women, and the Joint Programme on Essential Services for Women and Girls Subject to Violence.
7. Through human-rights-based, gender-responsive, and culturally sensitive programming, UNFPA has contributed, among others, to the development of normative frameworks, collaborative efforts to learn and share practical programme experiences, and efforts to engage stakeholders beyond traditional United Nations actors.

## II. The purpose, objectives and scope of the evaluation

8. The evaluation was conducted by the UNFPA independent Evaluation Office, with the support of an external evaluation team, with the active engagement of a reference group and – in case-study countries – national evaluation reference groups.

9. The purpose of the evaluation was to assess UNFPA support for gender equality and women’s empowerment across development, humanitarian and peace contexts. The evaluation aims to inform the next strategic planning cycle including the strategic direction, gaps and opportunities for UNFPA work on gender equality and women’s empowerment. Finally, the evaluation provides learning inputs to inform the strategic positioning of UNFPA in this area of work, reflecting the changing development environment, including United Nations reform and alignment with the 2030 development agenda.

10. Spanning 2012-2020, the evaluation assessed the contribution of UNFPA over three strategic plans (2012-2013, 2014-2017 and 2018-2021), including through the UNFPA Strategic Framework on Gender Mainstreaming and Women’s Empowerment (2012-2013) and the UNFPA Gender Equality Strategy, 2018-2021. While the evaluation focuses on 2012-2020, it also reflects on the foundations set in earlier strategic planning periods (2008-2011). Assessed was the UNFPA work at global, regional and country levels.

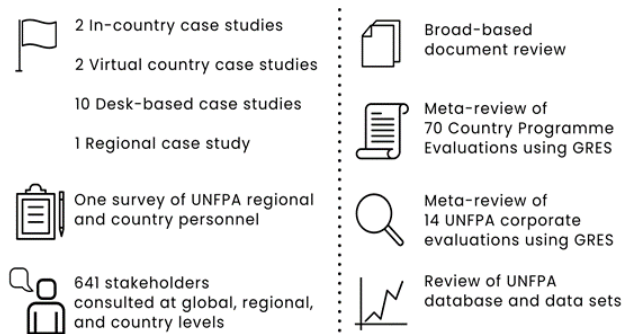
11. The evaluation encompassed three main components: (a) the extent to which UNFPA systems and processes are fit for purpose to advance GEWE; (b) the extent to which UNFPA has mainstreamed gender equality across all programming areas of the strategic plan; and (c) the contributions of UNFPA programmatic work under the dedicated gender equality outcome of its strategic plans.

## III. Evaluation methodology

12. The evaluation approach was theory-driven based, integrating human rights and gender equality principles. It used a mix of data collection methods that generated both qualitative and quantitative data.

13. The main limitation was imposed by the COVID-19 pandemic, which affected the possibilities to gather direct input from the most vulnerable groups (with the exceptions of Malawi and Jordan where fieldwork was conducted before COVID-19).

14. The evaluation analysed data by global, regional, country levels, and applied triangulation techniques that included comparing results from different data sources for specific lines of inquiry. The evaluation validated findings by presenting preliminary case study findings to country/regional offices, sharing updates and conducting data analysis workshops, in addition to validating preliminary findings, conclusions and recommendations with the evaluation reference group.



15. The evaluation was guided by the UNEG Ethical Guidelines,<sup>1</sup> and abided by the ethical standards for violence against women and girls research and evaluation.

<sup>1</sup> Specific commitments included: independence, credibility and accountability, fair representation, confidentiality, avoidance of harm, accuracy, reliability, and transparency.

## IV. Conclusions

**Conclusion 1: UNFPA has made important contributions to gender equality since 2012 through the different roles that it plays at global, regional and national levels; this is clearly evidenced at country level where the change occurs.**

16. There is a wealth of evidence on UNFPA contributions to GEWE at global, regional and national levels and in both development and humanitarian settings. Such results pertain to both the gender-dedicated and gender mainstreamed outcome areas. UNFPA has contributed to policy development and legislative reform for the thematic areas of its mandate, and its alignment with normative frameworks means that these changes are a significant step forward for several countries. In the last decade or so, UNFPA has shifted away from a direct leadership position on the Beijing Platform of Action, as UN-Women stepped into that role, and increasingly gained a foothold in gender-based violence response and prevention in both the humanitarian and development arenas.

17. UNFPA collaboration with UN-Women, UNICEF and other United Nations agencies is critical to success in achieving and sustaining broader gender equality gains. While such collaboration is valued by United Nations agencies and promoted by the ‘common chapter’ of the strategic plans, 2018-2021, in practice there are still some competition and missed opportunities in creating synergies. Synergies are very important because, even as UNFPA has acquired the lead role in the gender-based violence Area of Responsibility in humanitarian settings and deepened the foundational, systemic work around gender-based violence prevention and response, gender-based violence is not the purview of UNFPA alone. Work on changing social norms, and the difficulties this poses, require collective efforts. The Spotlight Initiative and the United Nations Sustainable Development Cooperation Framework (UNSDCF) reforms have demonstrated to be an additional opportunity to enhance synergies and collaborative relationships.

18. Significant gains have been made to the benefit of women and girls’ lives and to their sexual and reproductive health and reproductive rights, notably in averting maternal deaths, preventing unintended pregnancies, and providing access to a range of essential services in sexual and reproductive health. Child, early and forced marriage and female genital mutilation rates have declined over the period, even though COVID-19 threatens to reverse trends. UNFPA has also benefitted women in the health workforce, in particular by professionalizing and raising the profile of midwifery. Youth programming has also been a critical entry point for addressing sexual and reproductive health challenges; youth networks have been a channel for awareness-raising on gender-based violence, child marriage, sexual and reproductive health, HIV and other issues. And while inequalities in maternal mortality rates and other key indicators persist, UNFPA is making concerted efforts to address these through its programming that includes adopting Leave No One Behind principles and more inclusive statistics so that intersectional work can become more embedded in the agency’s routines. In the past decade, UNFPA has invested in gender advisors based in the regions who have been important in contextualizing gender equality and sexual and reproductive health and reproductive rights issues, although overall an adequate level of resourcing remains problematic.

19. In terms of a gender-transformative approach, a term only recently adopted by UNFPA, evidence shows a stronger application in the gender-dedicated outcome areas than in the gender mainstreamed outcome areas. The discriminatory or patriarchal attitudes that create barriers to women’s access to sexual and reproductive health and control over bodily integrity are structural and require more than ensuring quality and accessibility of services. UNFPA, through dialogue, awareness-raising, and evidence-based advocacy, has supported national frameworks that align with the ICPD agenda, even though contested areas of sexual and reproductive health and reproductive rights in particular country contexts remain. In as much as the UNFPA approach has sought to change behaviours, and the persistence of adverse gender norms, such change is highly contextual and brings its own set of challenges. A resurgence of gender-based violence and harmful practices during the COVID-19 pandemic has drawn attention to this aspect of UNFPA work which is not easy to resolve.

**Conclusion 2: The mandate of UNFPA positions it to address GEWE through the focus on sexual and reproductive health and reproductive rights. The strength of the positioning lies in the integration of interventions on gender-based violence, sexual and reproductive health and reproductive rights, harmful practices and the agency’s ability to programme from an understanding of the interlinkages.**

20. At the centre of the UNFPA mandate on sexual and reproductive health and reproductive rights is the protection of women’s bodily autonomy and respect for their choices. This is a broad ambit, highlighting the importance of increasingly integrating sexual and reproductive health and reproductive rights, HIV, gender-based violence services, and harmful practices. A gender perspective on child marriage programming has made it clear that it cannot be tackled as a single-issue harmful practice. The female genital mutilation global programme with UNICEF has revealed the need to assume a more holistic approach that links to child marriage. UNFPA data expertise made it possible to develop new estimates and historic trends on female genital mutilation at national and global levels. As one of its hallmarks, UNFPA has adopted the practice of integrating sexual and reproductive health and gender-based violence services. The concept of women and girls safe spaces that integrates sexual and reproductive health, gender-based violence, family planning, antenatal and postnatal care and emergency obstetric care services in Jordan and other places that have developed a humanitarian response is an effective integrated model designed to make it easy for women and girls to have their needs and rights met. As shown in the work of different regions – i.e. Asia and the Pacific (APRO) research on the interlinkages between sexual and reproductive health and reproductive rights, gender-based violence, and women’s economic empowerment; Latin America and the Caribbean (LACRO) work at the intersection of youth and adolescents, sexual and reproductive health and reproductive rights, gender equality, gender-based violence, and population and data; East and Southern Africa (ESARO) research on menstrual hygiene management and sexual and reproductive health and reproductive rights – bringing attention to the interrelationships between separate areas of UNFPA mandate enhances its comparative advantage. Other United Nations agencies and local partners highly value UNFPA capacity to forge links between different topics. However, UNFPA is not consistently drawing these linkages across its programming. For example, as UNFPA works in sexual and reproductive health services and in harmful practices, UNFPA could systematically integrate advocacy skills on female genital mutilation into the training of midwives to address the medicalization of female genital mutilation.

**Conclusion 3: The absence of partnership strategies that incorporate GEWE concerns has limited UNFPA ability to sustain the momentum on the more challenging gender-related aspects of its agenda.**

21. As UNFPA implementing partners interface with target communities and beneficiaries, their capacity, competencies, attitudes and soft skills are critically important to the UNFPA mandate and to delivering services in a gender-equitable, non-discriminatory manner. However, it is not clear whether such skills development is routine practice. Also, longer-term partnerships (beyond the one-year timelines of funding streams) would be beneficial for addressing social norm change and maintaining relationships with communities where behaviour change is expected. More predictable and multi-year funding might facilitate agreements with local/national non-governmental organizations (NGOs) to work across humanitarian, development and peace contexts more easily and to work on building resilience with specific intersectional population groups and their communities. Exploring partnerships with private-sector entities in humanitarian or development settings is an avenue for pursuing more flexible funding as well. Last but not least, in humanitarian response, low priority to funding prevention of harmful practices not considered ‘life-saving’ is a hindrance to gender-transformative programming.

22. As a United Nations entity, UNFPA has a direct line to Member State Governments. It can support Governments in making policy changes, which may include advocating and deliver technical assistance concerning an area of the ICPD mandate. However, when different perspectives arise, civil society organizations are well placed to engage in advocacy and have an important role in holding stakeholders accountable. Civil society organizations also have an important role in accessing difficult-to-reach populations and communities in remote areas to bring services, information, or awareness-raising.

UNFPA also has a well-established practice of working with faith-based organizations; this collaboration is both essential and fruitful but continues to introduce potential risks to UNFPA positioning on the issues.

23. In terms of skills and expertise, national and international NGOs and academic institutions can bridge key gaps in expertise. As UNFPA engages more deeply in gender-transformative work, it may prove fruitful to seek partners with more experience in social norm change, prevention of specific harmful practices, approaches to transforming violent or harmful masculinities as mutually reinforcing of women and girls' empowerment, and in priority research areas.

24. UNFPA has collaborated with other United Nations agencies, state actors and civil society organizations to address areas outside its mandate, such as women's leadership and political engagement, livelihood security, child protection, intergenerational poverty, and girls' education for achieving successful outcomes in sexual and reproductive health and reproductive rights. However, leveraging partnerships for the broader spectrum of gender equality and women's rights deserves more focused attention.

25. In short, UNFPA has not yet conducted a strategic analysis of the bottlenecks it faces in achieving sustainable change in GEWE, which would serve as a basis for a partnership strategy/configuration. A piecemeal approach in developing partnerships for different purposes, even if some promote GEWE, is more prevalent.

**Conclusion 4: The COVID-19 pandemic has brought into sharper focus the importance of building resilience, breaking down silos and embracing interagency collaboration to ensure more enduring solutions to addressing gender inequality and intersectional inequities in access to quality services (sexual and reproductive health and reproductive rights, gender-based violence, HIV/AIDS) that are inherent to development, humanitarian, and peace contexts.**

26. The COVID-19 pandemic affected all operations of UNFPA in both the humanitarian and development arenas. While the agency worked to mitigate the disruption of essential services in gender-based violence and sexual and reproductive health and reproductive rights and played its part in the global response, the adverse effects could not be completely avoided. All over the world, countries have witnessed increasing domestic violence and gender-based violence. Cases of female genital mutilation and the number of child marriages are expected to rise over the next decade. The socio-economic impacts on women and girls cannot be underestimated. The pandemic has highlighted the risk of pre-existing inequalities that render marginalized groups more vulnerable and disproportionately affected during times of crisis.

27. Any type of crisis (health, natural or man-made disaster) brings to light the importance of building resilience among population groups that are at risk of being most severely impacted. Supporting rights defender organizations and their capacities for advocacy and policy dialogue is one key pathway. UNFPA LACRO has done this by supporting the establishment of networks for indigenous, Afro-Latino-American and Afro-Caribbean women. In turn, partnerships with these organizations (and with other women-led organizations and local NGOs) become an asset during humanitarian response and build stronger accountability to population groups disproportionately affected.

28. Population groups already affected by conflict or a humanitarian crisis have also faced greater challenges related to gender-based violence as a result of the pandemic. UNFPA has taken measures to mitigate risk for refugees and IDPs, but there has been a disruption of sexual and reproductive health and reproductive rights and gender-based violence services, as well as a rise in child marriage as a family coping mechanism during times of elevated stress. This raises the importance of strengthening systems in countries that have limited capacity to respond to the demand for sexual and reproductive health and gender-based violence services and to prevent, mitigate and respond to a pandemic. It exemplifies the kinds of actions to consider within the humanitarian-development-peace contexts. The work of UNFPA around youth, peace and security is another critical entry point for addressing the exposure of women, girls and vulnerable groups to violence, and highlighting the role of young women's leadership in fostering non-violent, gender-equitable societies.

29. As a member of the Inter-Agency Standing Committee's Global Humanitarian Response Plan for COVID-19, UNFPA has been able to represent the sexual and reproductive health, maternal health, and gender-based violence and harmful practices response needs and to track related targets in the plan. At country level, UNFPA has collaborated with UN-Women, the United Nations country team's gender theme group and state actors to respond to the effects of COVID-19 as they relate to the impacts on women and girls, and in particular to their exposure to gender-based violence. The collaboration and ways of connecting, including joint webinars and forms of information sharing, driven by the pandemic may generate new patterns of cooperating.

30. Siloing between divisions and programmes is fairly common in UNFPA and other United Nations agencies. Bridging these gaps may be aided by sharing information across teams, countries and regions through the COVID-19 portal on the MyUNFPA site. The combination of the following three factors may encourage greater coherence within UNFPA response in humanitarian-development-peace contexts: (a) a portal that potentially scales knowledge on intersectional gender inequalities associated with the pandemic; (b) the establishment of the Humanitarian Office; and (c) the fact that the pandemic is a concern for both the humanitarian and the development side.

**Conclusion 5: Over the last decade UNFPA has taken leadership for gender-based violence in both the humanitarian and development arenas. It has made notable contributions to capacity development, service provision and systems strengthening with evidence of a gender transformative approach in response and prevention.**

31. UNFPA has continued to build its capacity and reputation around gender-based violence, which is one of the organization's three transformative results. In the past decade, UNFPA has become the designated gender-based violence area of responsibility lead in the humanitarian sphere and continues to work on achieving consistency in its performance and capacity. In the last decade, the Gender-Based Violence Information Management System has become the global standard for gender-based violence survivor data management, and has been adapted for use in some countries during the COVID-19 pandemic. Also of importance to advancing GEWE, the minimum standards for gender-based violence in emergencies are grounded in a gender equality approach that recognizes unequal gender relations as the driver behind gender-based violence and the formulation of the response in humanitarian settings. The provision of lifesaving gender-based violence services, which are increasingly being integrated with sexual and reproductive health services, is meeting the critical needs of survivors, while systems strengthening in the response is contributing to better prevention. However, embedding social norm change work as part of a humanitarian response remains a work in progress. Overall, UNFPA has made progress in its gender-based violence area of responsibility role, but remains hampered by funding and human resource constraints.

32. In development settings, UNFPA has more firmly established its role in the prevention and response to gender-based violence. It has undertaken a broad array of interventions at many different levels, and has made significant strides to put in place the required infrastructure, capacity, services and legal/policy frameworks. UNFPA has worked on the response side to ensure delivery of services, often integrated into sexual and reproductive health services, and the availability of a referral system, including access to justice services; and on the prevention side through awareness-raising, engaging local actors in behaviour change communication and advocacy. However, UNFPA could better leverage its data expertise in violence against women to consolidate its leadership in the thematic area of gender-based violence, going forward with opportunities such as the Spotlight Initiative. To varying degrees, the agency has also sought to address the intersectional inequalities regarding populations most affected by gender-based violence. In general, its approach to gender-based violence is gender-transformative in seeking to address the myriad aspects of this phenomenon inherently rooted in patriarchal norms.

33. As the COVID-19 pandemic has starkly revealed, behaviour change to end gender-based violence is more intractable than the laws and systems in place, however strict or efficient they are. Thus, awareness raising to prevent gender-based violence; male engagement and addressing harmful masculinities; youth sexual and reproductive health; and other entry points for prevention, continue to require intense efforts in a multi-stakeholder, multisectoral, whole-system approach to bring about

lasting change. The structural change needed to end gender-based violence remains a daunting endeavour for a 2030 time horizon.

**Conclusion 6: UNFPA work on harmful practices has brought needed attention to the complexity and multi-faceted aspects of addressing practices such as child marriage, female genital mutilation and gender-biased sex selection. Much progress has been made, particularly owing to the cumulative years of programming in female genital mutilation, to establish a firm foundation upon which to build further. Now is the time to reflect on what the good models are and to develop a robust research agenda.**

34. Where a younger female population is concerned, addressing sexual and reproductive health and reproductive rights is a complex and delicate task owing to the combination of gender and age. Harmful practices such as child, early and forced marriage and female genital mutilation, and also gender-based violence, affect under-age girls who do not have the autonomy and agency that women survivors of gender-based violence may have in coming forward to defend their rights. The social controls over adolescent girls' sexuality place child marriage within a constellation of power relations with state actors, the community, families, and parents that ultimately must be understood and disentangled. Moreover, that women participate in sanctioning practices such as female genital mutilation (as mothers or cutters, for example), gender-based violence, son preference and gender-biased sex selection illuminates the importance of understanding socialization processes, the external pressures that drive behaviour, and the challenges to undoing adverse social norms in their specific socio-cultural, economic contexts.

35. UNFPA, in close collaboration with UNICEF, has grasped the importance of working at multiple levels with support to upgrading laws and policies, mobilizing communities for behaviour change, giving girls an opportunity to build life skills as part of an empowerment strategy, providing access to comprehensive sexuality education for youth, or engaging youth networks in addressing harmful practices. UNFPA has engaged religious leaders and faith-based organizations to convey the messages for ending harmful practices; it has also engaged men and boys to advocate for the same. All such forms of support have contributed positive steps forward. UNFPA has also recognized the need for more research on harmful practices and broader research on girls' empowerment to be able to address the full spectrum of issues affecting adolescent girls. The vulnerabilities of girls with disabilities and in marginalized or vulnerable situations also deserve further research and targeted programming.

36. Efforts to eliminate female genital mutilation have benefitted from over a decade of programming in this area. Spearheading the learning process within UNFPA around social norm change, female genital mutilation programming has been able to inform the more recent programming on child marriage. UNFPA, in close collaboration with UNICEF, has demonstrated good results in both female genital mutilation and child marriage. However, further progress will be mitigated without (a) acknowledging that implementation of laws and policies in the face of long-standing social norms continues to be a challenge, and (b) clear proven models and pathways of change. Reinforcing monitoring and assessment of interventions would be helpful, but ending harmful practices also requires embracing complexity, as contextual factors vary considerably and affect the outcomes. The COVID-19 pandemic has further complicated efforts in ending harmful practices and has made it clear that pathways to sustainable change need to be articulated. Given the growing attention to the role of UNFPA in ending harmful practices featured in its three transformative results and given the threat of a reversal in gains due to COVID-19, defining its niche and comparative advantage within an ecosystem of stakeholders will become all the more imperative.

**Conclusion 7: UNFPA programming in sexual and reproductive health and reproductive rights, including family planning, has contributed to the provision of services, systems strengthening, and capacity development, with positive effects on global trends. These are accomplished through an inherently gender-targeted approach.**

37. In this outcome area, which supports the utilization of sexual and reproductive health services and the exercise of reproductive rights for women, adolescents and youth, UNFPA has demonstrated clear strengths on the supply side of sexual and reproductive health and family planning. Making sexual and



reproductive health services accessible to women and youth constitute a major contribution to women and girls' overall health as well as for newborns. UNFPA programmes have offered critical services to women suffering from obstetric fistula and to all women through integrated services in family planning and maternal health, sexually transmitted disease and HIV in both humanitarian and development settings. UNFPA support has helped strengthen national capacity in the provision of services and its engagement in policy dialogue has contributed to an improved policy environment. On the demand side, UNFPA support has been less consistent and gaps are also noted in effectively reaching stigmatized or underserved populations.

38. Programming in this outcome area remains largely oriented towards women and girls (and youth in general). To demonstrate a more gender-transformative approach, this area of work calls for more programmatic attention to women's decision-making in their reproductive lives. Global efforts on the part of UNFPA to advocate for the inclusion of targets and indicators in the SDG framework relevant to its mandate have contributed to the recent development of a metric for SDG indicator 5.6.1. This is an important achievement in support of its work ahead, but not all countries have as of yet included relevant questions in their data collection mechanisms, including the Demographic Health Survey. Stronger reporting on the indicator can be expected to enhance data-driven programmes to reinforce women's control over decisions affecting their bodies, which includes being free from violence and knowledgeable about their rights.

39. All areas of demand creation deserve further strengthening to address barriers to access to sexual and reproductive health services and the exercise of reproductive rights, such as targeting the social norms and gender inequalities that prevail over women's right to decisions – access to health care, use of contraceptives, birth spacing, number of children, refusing/consenting to sexual relations with husband/partner, for example. An emphasis on women's decision-making concerning family size or birth spacing would bring attention to the overall well-being of mothers and children. Other areas calling for more concerted attention in the context of such choices include couples counselling, engaging men as husbands/fathers in awareness-raising on women's sexual and reproductive health rights, on unpaid reproductive labour and care work, on family planning, as well as fatherhood and caregiving. Effective approaches to countering harmful masculinities remain sporadic rather than integrated within programming. Such integration is necessary to achieve gender synchronization, a process of empowering women and girls and promoting positive masculinities in a mutually reinforcing way. Comprehensive sexuality education for youth, a salient entry point for addressing masculinities and gender inequalities, is not yet consistent in incorporating positive masculinities.

40. Women's choice and control over their bodies extend to their rights vis-à-vis sexual and reproductive health service providers, the right to non-discriminatory attitudes and behaviours, choice (of interventions and family planning methods), and non-violent treatment. A women's empowerment lens on services would ensure that women are treated with dignity and not as passive recipients by health care providers who might impose their own perspective on what they should do, or who do not provide adequate information to allow them to choose. In humanitarian contexts, women and girls are considered a "vulnerable population" but an empowerment approach would ensure that they participate in programme decisions aimed at providing for their needs. While the evaluation found some evidence of service providers being trained in gender-equality and empowering approaches, this kind of support from UNFPA did not emerge strongly.

41. Inequalities in access to sexual and reproductive health and reproductive rights services is a critical issue highlighted in this evaluation and also in the voluntary ICPD25 commitments. As UNFPA develops its Leave No One Behind strategy, it will be important to consider an intersectional approach to identify the most vulnerable based on gendered differences. Currently, unmarried women and girls, persons of diverse sexual orientation and populations at risk of HIV are not consistently reached by UNFPA interventions. UNFPA has already made a strategic choice to strengthen its work with indigenous populations, people of African descent, and persons with disabilities. At country level, there is room for improvement in considering other population groups at risk of exclusion from sexual and reproductive health services due to their specific contexts.

**Conclusion 8: UNFPA has many institutional processes and systems that help to make it “fit for purpose” for a GEWE agenda in both development and humanitarian settings. It has, for the most part, recognized the need to accelerate those aspects that will increase gender equality and gender-based violence capacity within UNFPA.**

42. UNFPA has the key elements of organizational capacity to be able to deliver on gender equality and women’s empowerment as part of its mandate. Its strategic leadership and internal advocacy helped to maintain gender equality as a dedicated outcome area and to mainstream it in programming areas over the past three strategic planning periods. Its performance on UN-SWAP indicators and findings of this evaluation suggest that it has put in place corporate processes and most of the institutional arrangements that help to strengthen and make it accountable for its work on GEWE. Most of these corporate processes and tools are now being fine-tuned to enhance utility; the gender marker features strongly among them and is currently undergoing an assessment.

43. UNFPA has in place the human resource policies and systems to support gender equality and promote gender parity within the organization. It is now at the stage where more focused attention is needed on (a) incentives and accountabilities to improve the organizational culture for women but also other intersectional groups, and (b) capacity and competencies of programming staff to mainstream gender more systematically. Senior managers have not always modelled gender-equitable behaviours towards staff and yet play a critical role in articulating the gender and human rights aspects of the work and championing GEWE successes and initiatives in their offices.

44. The most recent strategic plan (2018-2021) and the gender strategy imply an increased level of ambition, with greater emphasis on a transformative approach to gender equality and women’s empowerment and articulation of three transformative results. In light of this ambition and gender equality challenges on the ground, certain gaps in capacity may undermine the extent to which UNFPA is “fit for purpose” to deliver on such an agenda in development and humanitarian settings. These gaps include:

(a) Inadequate resourcing. Gender equality and gender-based violence are not adequately resourced to achieve consistency in UNFPA performance and leadership. The reduction in core resource funding has had negative effects on the UNFPA gender equality strategy, its increased focus on changing social norms, and ensuring consistent levels of staffing, including for the recommended gender-based violence sub-cluster coordinator positions and gender-based violence staffing within the Humanitarian Office;

(b) Insufficient staff and partner capacity for gender analysis. There is a limited staff skill set to conduct the gender analysis that would be required for a more considered approach to gender equality in different thematic areas. UNFPA does not assess the capacity of implementing partners to conduct such analyses or to develop approaches to programming that are more transformative;

(c) Although UNFPA has introduced greater flexibility with the business model, country offices still note limitations that hamper their ability to establish the relationships and arrangements required for supporting GEWE within development and humanitarian contexts;

(d) The UNFPA framework for partnerships and its annual planning cycles limit the potential partnership contributions to an agenda that seeks greater social norm change/transformative results. UNFPA systems for monitoring and reporting do not necessarily provide insights on behaviour change outcomes for activities such as awareness-raising and community mobilization.

## V. Recommendations

45. The recommendations are derived from consideration of the full set of conclusions. A first formulation was presented to the Evaluation Reference Group for validation and then refined. They have been organized into two categories: strategic, with higher-order implications for the organization moving forward; and operational, with insight on critical steps to achieving its objectives in GEWE.

## Strategic recommendations

**Recommendation 1.** As the United Nations agency that addresses sexual and reproductive health and reproductive rights in support of GEWE, UNFPA should strengthen its positioning by leveraging its areas of expertise to develop a more integrated, coherent approach that joins up the different areas of its mandate. This would be supported by a broader conceptual framework on GEWE that gives prominence to the social norm change work required for sustainable change in GEWE and that facilitates an understanding of gender-transformative approaches.

**Urgency: High. Impact: High.**

**Directed to: Technical Division, Policy and Strategy Division, Humanitarian Office and regional offices.**

46. UNFPA is uniquely positioned to advance gender equality and women's empowerment through a central focus on women and girls' bodily autonomy, not only because it is the United Nations agency that addresses sexual and reproductive health and reproductive rights, but it is the population data agency. Strengthening the integrative aspects in achieving gender equality and sexual reproductive health and reproductive rights for women, girls and people in marginalized situations, whether in development or humanitarian settings, can only be accomplished by developing stronger linkages between these different areas of expertise. Operationalizing a lifecycle approach will help forge the linkages across areas of its mandate and elevate the importance of youth programming to GEWE.

47. This can be achieved by:

(a) Developing a systems approach that would make it possible to situate UNFPA within a wider landscape of partners, each addressing aspects of gender equality and women's empowerment in areas within and outside of the UNFPA mandate. A systems approach would situate women's and girls' bodily autonomy within a broader causal framework;

(b) Building staff capacity to adopt gender-transformative approaches and social norm change work, particularly across gender mainstreamed areas; would strengthen gender aspects of youth programming, sexual and reproductive health and reproductive rights and population and data, and promote stronger integration. While the integration between sexual and reproductive health and gender-based violence services is already a practice within UNFPA, a more robust integration should also ensue in the work between population dynamics/data and the gender-dedicated programming, as well as between youth and gender-dedicated programming. The recent success in the SDG framework adopting a metric on women's right to decision-making (SDG 5.6.1) is a good example of leveraging its data expertise. For youth programming, the growing focus on teenage pregnancy, for example, provides common ground for more integrated, gender-transformative approaches.

(c) Articulating expectations of and support for gender-transformative programming in the next gender equality strategy. UNFPA could plan the development of guidelines or a module that demonstrates good examples of gender-transformative work in different outcome areas.

(d) Identifying or building on good models for countering harmful masculinities, scaling them up and linking them to promoting access to sexual and reproductive health and reproductive rights/family planning/HIV services.

(e) Investing in high-quality research partners for key areas of work around GEWE, interconnected topics that embrace complexity and the social norm change work at the heart of longer-term change. As UNFPA undertakes a more integrated approach to resolving issues and as the population data agency, having solid research partners would enhance its capacity to deliver the evidence-based intelligence this requires.

(f) Operationalizing a lifecycle approach that cuts across all programming areas. Such an approach takes into account that gender discrimination affects sexual and reproductive health outcomes at each of the different stages of life, beginning before birth (gender-biased sex selection) and manifest in the vulnerability of older women, as the pandemic has starkly revealed. The lifecycle approach will

contribute to better targeting of age groups of women and girls and the particular sexual and reproductive health vulnerabilities they face at different life stages, providing, for example, a clear justification for the focus on young adolescent girls or ageing women. It also brings attention to the intergenerational effects of harmful practices/gender-based violence that result from a gender socialization process.

(g) Continuing to invest resources in demand-generation activities and in addressing social norms, in particular men's engagement in sexual and reproductive health and reproductive rights, fatherhood, domestic and reproductive care work, and positive masculinities. Engagement with men and boys should be designed with accountability to women and girls.

(h) Building better monitoring around social change pathways.

48. The above actions will further help UNFPA become a better convenor, not only in gender-based violence but in sexual and reproductive health and reproductive rights – leveraging data/research to shed light on complex topics and rely on the array of stakeholders needed to engage in this work.

***Recommendation 2. To amplify its leadership and positioning in gender-based violence response and prevention, UNFPA should prioritize investment in staffing working in development and humanitarian contexts and consider scaling up its role as a convenor in this programmatic area, which will enable UNFPA to help drive a change process.***

**Urgency: High. Impact: High**

**Directed to: Humanitarian Office, Technical Division and regional offices**

**This should be integrated into the new enterprise resources planning platform currently being developed and should focus on both data management at indicator level and data collection systems to distinguish types of data (e.g., outputs/outcomes) and purposes of data (e.g., programming, advocacy, communications) and to ensure comparability and consolidation at all levels.**

49. The principal obstacle to the area of work on gender-based violence response and prevention relates to resources. While UNFPA is giving gender-based violence more prominence within its mandate, gaps in financial and human resources curb its ability to step more firmly into a leadership role. Once these resources are commensurate with its mission (and as one of its three transformative results), UNFPA will be better positioned to expand its role to include convening as well as coordination, which will enable it to help drive a change process. Like other areas of intervention, gender-based violence response and prevention will also need to pay closer attention to women and girls in marginalized or vulnerable situations.

50. This can be achieved by:

(a) Leveraging UNFPA data expertise, particularly as it relates to violence against women prevalence surveys and the Spotlight Initiative.

(b) Continuing to strengthen the capacity of gender-based violence coordinators in emergencies and filling gender-based violence positions that have remained vacant.

(c) Prioritizing gender-based violence prevention strategies and considering whether UNFPA is positioned to take on more of a convenor role in this area: possibly moving from coordination of activities, as it does in its gender-based violence area of responsibility lead role, to convening within an ecosystem of players. By definition, convening would put UNFPA at the centre of achieving a shared vision towards longer-term change with an array of key actors, rather than a more narrow view of coordinating to act collectively around a set of predefined issues. As such, a convening role is more squarely focused on a change process. In this scenario, the value-added of UNFPA is in shaping the agenda for change, holding space for diverse voices to be heard and for all stakeholders to act collectively and synergistically. This may mean sharing that space with UN-Women, but it should be done intentionally.

(d) Paying more concerted attention to an intersectional approach in gender-based violence response and prevention.

**Recommendation 3. UNFPA should strengthen capacity for GEWE internally, building on the momentum that has already been demonstrated.**

**Urgency: Medium. Impact: Medium**

**Directed to: Technical Division, Division for Human Resources and regional offices (country offices)**

**This should include a five-year humanitarian human resources strategy for increasing general humanitarian expertise from a clearly understood baseline and with a realistic goal. The strategy should cover new and existing personnel (including senior management) and systematically utilize deployed humanitarian personnel (roving team and surge) for skills transfer to both incoming replacements and national country office staff.**

51. UNFPA has made headway in strengthening its internal capacity in GEWE, with the assistance of tools such as the UN-SWAP, the gender marker which is now under review, and the PSEA policies and guidelines. In making further progress, stronger accountability is needed at management level and the individual performance level to improve gender intersectional equalities. UNFPA has a gender architecture in place that will function more effectively with upgraded skills, through empowering regional offices, and building capacity at both regional and country office level to identify and prioritize the population groups at risk of being left behind.

52. This can be achieved by:

(a) Rewarding senior managers for showing leadership and championing GEWE; introducing incentives into performance appraisals or job descriptions to advance GEWE and diversity, especially at senior management level.

(b) Laying out a strategy for gender staff and focal points to update their knowledge, especially concerning gender-transformative approaches and intersectionality, and giving them the tools to build staff capacity. At regional level, emphasis should be given to the convening role and leading on research/advocacy agendas. Promoting cross-regional exchange should also be considered, given that regions have developed areas of specialization based on their regional contexts.

(c) Strengthening identification of population groups at risk of being left behind to redress inequalities in access to services but with an intersectional approach. This applies to identifying data and data disaggregation gaps to inform targeting as part of the broader Leave No One Behind strategy, and also at country office level to inform a strategy for prioritizing population groups within existing resources. Building programmatic work around identified groups and furthering the commitment to indigenous groups, people of African descent and persons with disabilities.

**Recommendation 4. UNFPA should continue engaging Member States and donors in the discussion on the importance of adequate levels of predictable funding for the Strategic Plan that can be utilized flexibly by country offices to support longer-term programming capabilities on GEWE and gender mainstreaming. Although UNFPA is investing in this area with institutional resources, more is needed.**

**Urgency: Medium . Impact: High**

**Directed to: Policy and Strategy Division and Resource Mobilization Division**

53. The improvements in achieving GEWE as part of the UNFPA mandate will continue to be hindered by insufficient resource commitments and inflexible funding. The COVID-19 pandemic has shown how critical it is to address both the short term and the long term simultaneously, by addressing the immediate needs of intersectional groups concerning sexual and reproductive health/family planning/gender-based violence services and giving sustained and due attention to root causes and to prevention (of gender-based violence and harmful practices as well as gender-based barriers to access to sexual and reproductive health and essential services). Similarly, achieving the three transformative results will remain elusive if resources are not commensurate with the urgency these issues deserve.

54. This can be achieved by:

- (a) Continuing to identify non-traditional donors, particularly concerning humanitarian settings, to fund prevention, social norm work, and resilience-building on a longer time scale.
- (b) Continuing to identify innovations in fundraising to allocate a larger share of funding to the gender architecture to enable them to develop longer-term strategies in addressing harmful practices and gender-based violence and to dedicate time to supporting other teams to mainstream GEWE.

### **Operational/Programmatic Recommendations**

**Recommendation 5. In developing partnership strategies beyond its engagement with implementing partners, UNFPA should consider which partners can complement UNFPA expertise and resources within an ecosystem approach that is essential to resolving the more complex and deeply rooted drivers of inequalities to achieve sustainable change in GEWE.**

**Urgency: Medium. Impact: Medium**

**Directed to: Technical Division and regional offices (country offices)**

**This should include ensuring that the UNFPA minimum standards regarding gender-based violence are adhered to, including the appointment of a subcluster coordinator and addressing key coordination challenges, such as high turnover of coordination staff, excessive coordination workloads (double/triple-hatting) and lack of information management functions within subclusters.**

55. UNFPA partnerships are a vital element to any strategy to advance gender equality across its mandate. Women-led organizations have a particular contribution to make in this regard. However, across the board, partnerships deserve closer scrutiny for their value-added and their complementarity to the unique positioning of UNFPA. To that end, UNFPA will stand to benefit from strategic choices in partner selection and an ecosystem approach that is essential to resolving the more complex and deeply rooted drivers of gender inequalities within sexual and reproductive health and reproductive rights.

56. This can be achieved by:

- (a) In partnership strategy development, including an analysis of the bottlenecks UNFPA faces in achieving sustainable change in GEWE; using criteria to assess partner capacity beyond implementing partners with this in mind.
- (b) Ensuring more consistent inclusion of women-led organizations in any strategy, to ensure their voices, positions and rights issues are integrated into all thematic areas.
- (c) Applying an ecosystem approach that by definition engages a diverse set of stakeholders and multiple sectors whose value-added and expertise are synergistic. Collectively, their interaction with UNFPA brings a more holistic response to resolving issues concerning GEWE and sexual and reproductive health.
- (d) In challenging environments, engaging civil society organizations strategically to mutually reinforce the roles that both play towards a particular policy change.
- (e) Conducting a review of collaboration with faith-based organizations to update the understanding of the benefits and challenges, and good practices to address the latter.
- (f) Seeking to clarify how UN-Women (and likely also UNICEF) can strengthen the GEWE effects of the UNFPA mandate and, with input from this strategic analysis of contributions and value addition from each entity, presenting its priorities to UN-Women as a basis for ongoing collaboration.
- (g) Including private-sector partners as part of a response to overcoming resource and skill bottlenecks.

**Recommendation 6. UNFPA should continue to build organizational strategic thinking on resilience from an intersectional gender perspective, drawing on lessons learned from the COVID-19 pandemic.**

**Urgency: High. Impact: High**

**Directed to: Technical Division in collaboration with Humanitarian Office and regional offices**

**This should incorporate a vision statement and a three-year to five-year plan on humanitarian population, health and gender data at global, country and field levels. It should also include resource requirements (platforms, staffing, funding strategy) and a workplan, including the activities outlined in the 2018 letter of understanding.**

57. Resilience strategies are at the heart of UNFPA interventions in humanitarian, development and peace contexts, and will help to bridge all three areas of action. Greater attention should be paid to engaging and empowering women and girls to become agents of change and participants in risk prevention and harm reduction. However, building resilience requires an understanding of intersectional inequalities and an inclusive approach to longer-term solutions. Systems strengthening of sexual and reproductive health, family planning and gender-based violence services, commodity supplies, information systems, and training of midwives and health care workers will remain cornerstones of UNFPA support. From a resilience perspective and with lessons from the COVID-19 pandemic, recommended actions go beyond mitigating disruption of services and begin with building better systems that are more resilient to risk.

58. This can be achieved by:

- (a) Taking stock of the patterns of cooperation with other United Nations agencies and internally within UNFPA that have emerged out of the response to the pandemic and leveraging good practices for cross-cutting work in GEWE;
- (b) Adopting an approach that centres on women as agents of change and strengthening women's rights organizations; promoting their voice and their role as rights defenders and as belonging to different intersectional and age groups in all areas of programming;
- (c) Promoting women's and girls' participation in strategies for disaster preparedness and climate change risk reduction, in community-based approaches to resilience building and all risk-informed programming design;
- (d) Ensuring preparedness in UNFPA support, including:
  - i. undertaking gender vulnerability assessments;
  - ii. strengthening early warning system with sex-disaggregated data analysis;
  - iii. participation of women's led organizations in disaster management planning committees and promote women's leadership at all levels;
  - iv. timely proposition of medical supplies for reproductive health and gender-based violence early action;
- (e) Focusing on deconstructing harmful masculinities in conflict prevention and analysis of the drivers of conflict;
- (f) Strengthening the youth, peace and security programming as a platform for establishing clear role-modelling amongst youth in women and girls' leadership and non-violent, gender-equitable behaviours and aspirations. UNFPA to clarify the role it seeks to play in the peace dimension of its mandate and how this work can be leveraged to advance GEWE;
- (g) Drawing lessons from the pandemic, investing in the midwifery programme to reflect the full scope of needs and roles they play and improving the enabling environment for midwives.