

**Evaluation of the 3rd UNFPA Country
Programme for Ukraine
(2018-2022)**

FINAL EVALUATION REPORT

**DECEMBER 1, 2021
Revised January 11, 2022**

The Ukraine Country Map¹



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Acknowledgements

The authors wish to acknowledge with their sincere thanks the numerous staff members from various Government of Ukraine ministries and related institutions, the UN collaborating agencies, donor agencies and a wide range of CSOs for sharing their time, resources and materials to permit the development and implementation of this evaluation. We appreciate participation of the members of the Evaluation Reference Group, especially those who took time to attend briefings and provided comments. We are particularly grateful to the United Nations Population Fund (UNFPA) Ukraine staff members of the country and regional offices who, despite a very heavy load of other pressing commitments, were so responsive to our repeated requests, often on short notice. We would also like to acknowledge many other Ukrainian stakeholders and clients/beneficiaries, including experts in P&D, health, youth, gender, GBV and the dedicated staff who helped us implement this evaluation despite their busy schedules. It is the team's hope that this evaluation, and recommendations presented in this report will contribute positively to building a sound foundation for future UNFPA Ukraine supported programs in collaboration with the Government of Ukraine, regional authorities and municipalities, UN Agencies, private corporations, civil society, and academia.

Disclaimer

This evaluation report was prepared by a team of three consultants, namely: Lyubov Palyvoda, Evaluation Team Leader; Artem Miroshnychenko and Volodymyr Kupriy, Evaluators. The content, analysis and recommendations of this report do not necessarily reflect the views of the United Nations Population Fund, its Executive Committee or member states.

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Abbreviations and Acronyms

AIDS	Acquired Immune Deficiency Syndrome
ASRH	Adolescent Sexual and Reproductive Health
ATO/JFO	Anti-terrorist Operation/ Joint Force Operation
AR	Annual Report
ART	Antiretroviral
AWP(s)	Annual Work Plan(s)
A&Y	Adolescents and Youth
CEDAW	Convention on the Elimination of all Forms of Discrimination against Women
CMU	Cabinet of the Ministers
CO	Country Office
COAR	Country Office Annual Report
COVID-19	CoronaVirus Disease 2019
CP	Country Programme
CPAP	Country Programme Action Plan for persons with disabilities
CPE	Country Programme Evaluation
CPD	Country Programme Document
CRPD	Convention on the Rights of Persons with Disabilities
CSE	Comprehensive Sexual Education
CSR	Corporate Social Responsibility
CSO	Civil Society Organizations
DAC	Development Assistance Committee
DFID	Department for International Development
DV	Domestic violence
ECA	East Conflict Area
EM	Evaluation Matrix
ET	Evaluation Team
ERG	Evaluation Reference Group
EQA	Evaluation Quality Assessment
EQs	Evaluation Questions
EC	European Commission
EU	European Union
FC	Football Club
FCO	Foreign and Commonwealth Office
FFD	Focus Group Discussion
GAC	Government Assistance Canada
GCA	Government Controlled Areas
GBV	Gender-Based Violence
GDP	Gross Domestic Product
GE	Gender Equality
GEWE	Gender Equality and Women's Empowerment
GoU	Government of Ukraine
HCT	Humanitarian Country Team
HIV	Human Immunodeficiency Virus
HQ	Headquarter
ICPD	International Conference on Population and Development
IDP	Internally Displaced Person
IECM	Institute of Educational Content Modernization
IP(s)	Implementing Partner(s)
IPV	Intimate partner violence
KIIs	Key Informant Interviews
KP	Key population
LGBT	Lesbian, Gay, Bisexual and Transgender
MDGs	Millennium Development Goals
MES	Ministry of Education and Science
MISP	Minimum Initial Service Package

MFA	Ministry of Foreign Affairs
MoU	Memorandum of Understanding
M&E	Monitoring & Evaluation
NATO	North Atlantic Treaty Organization
NGCA	Non-governmentally Controlled Areas
NGO	Non-Government Organization
NCD	non-communicable disease
ODA	Official Development Assistance
OECD	Organization for Economic Co-operation and Development
OR	Other Resources
OMT	Operational Management Team
PCA	Programme Coordination Assistance
PLHIV	People living with HIV
PSS	Procurement Services System
P&D	Population and Development
RBM	Result-Based Management
RH	Reproductive Health
RR	Regular Resources
SDG	Sustainable Development Goal
SDP	Session Description Protocol
SIDA	Swedish International Development Agency
SP	Strategic Plan
SRH	Sexual and Reproductive Health
STEM	Science, Technology, Engineering and Mathematics
STI	Sexually Transmitted Infection
TL	Team Leader
ToC	Theory of Change
TOR	Term of Reference
TOT	Training of Trainers
UK	United Kingdom
UN	United Nations
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNCT	United Nations Country Team
UNDAF	United Nations Development Assistance Frameworks
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNESCO	United National Education, Science and Culture Organization
UNICEF	United Nations Children’s Fund
UN RCO	United Nations Resident Coordinator Office
UNWomen	United Nations Women
USA	United States of America
USAID	United States Agency for International Development
USD	US Dollar
WP	Work plan
YWBI	Youth Well-being Index

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Table 1. UKRAINE: Key facts

Key Facts and Figures		Source
<p>Ukraine is a country in Central-Eastern Europe (CEE), lying mostly in the East European Plain. It is sovereign and independent, democratic, social, law-based state, and a parliamentary-presidential unitary republic. Ukraine shares borders with Russia to the east and the north; Belarus to the north; Poland, Slovakia, and Hungary to the west; Romania and Moldova to the southwest; and has a coastline along the Sea of Azov and the Black Sea. The landscape of Ukraine consists mostly of fertile plains (or steppes) and plateaus, crossed by rivers such as the Dnieper (Dnipro), Siversky Donets, Dniester and the Southern Bug as they flow south into the Black Sea and the smaller Sea of Azov. To the southwest, the delta of the Danube forms the border with Romania. Ukraine's various regions have diverse geographic features ranging from the highlands to the lowlands. The country's only mountains are the Carpathian Mountains in the west. Sevastopol and the Autonomous Republic of Crimea were annexed by the Russian Federation in 2014. Certain areas of the Donetsk and Luhansk oblasts are Ukrainian territories temporarily occupied by the Russian military.</p>		
Surface area	603,700 sq. km	
Population		
Population (inhabitants)	41,588,354	Population estimation as of 1 January 2021 (The State Statistic Service of Ukraine) ² . Data on the population of Ukraine as of January 1, 2021 are given excluding the temporarily occupied territory of the Autonomous Republic of Crimea and the city of Sevastopol
Urban population	69.6% (2020)	Urban population estimated by the State Statistic Service of Ukraine
Population growth rate	-0.568 (2020)	World Bank Data ³
Government		
Type of government	Ukraine is a unitary, a parliamentary-presidential republic. State power in Ukraine is exercised on the principles of its division into legislative, executive and judicial branches.	The Constitution of Ukraine
<p>Key political events/dates:</p> <p>1945 – Ukraine became one of the founding members of the United Nations organization</p> <p>1986 – A reactor in the Chernobyl Nuclear Power Plant exploded, resulting in the Chernobyl disaster</p> <p>1989 – The transition from social mobilization to mass politicization of life in Ukraine</p> <p>1990 – The parliament of USSR adopted the Declaration of State Sovereignty of Ukraine</p> <p>1991 – The Ukrainian parliament adopted the Act of Independence. Ukraine gained its independence from Soviet Union</p> <p>1996 – Ukraine adopted of new constitution</p> <p>2004-2005 – The Orange Revolution. It was a series of protests and political events, in the immediate aftermath of the run-off vote of the 2004 Ukrainian presidential election, which was claimed to be marred by massive corruption, voter intimidation and electoral fraud</p> <p>2013-2014 – Ukrainian revolution, also known as the Revolution of Dignity</p> <p>2014 – The Crimean Peninsula was annexed by the Russian Federation. The annexation from Ukraine followed a Russian military intervention in Crimea that took place in the aftermath of the 2014 Ukrainian revolution and was part of wider 2014 pro-Russian unrest in Ukraine</p> <p>2014 – The Association Agreement between Ukraine and the EU was signed</p> <p>2014 – Russian military aggression against Ukraine</p> <p>2017 - The Ukrainian Parliament adopted legislation reinstating membership in NATO and EU as a strategic foreign and security policy objective</p> <p>2017 - The Ukrainian Parliament adopted new legislation on DV / GBV response and prevention that introduce new holistic approach to the issue based on the Istanbul Convention provisions (came in force in 2018), and in particular criminalization of the DV (came in force in 2019)</p> <p>2019 – Ecumenical Patriarch Bartholomew I formally granted the Ukrainian Orthodox Church autocephalous (independent) status</p> <p>2018-2019 - elaboration and adoption of massive of bylaws related to intersectorial coordination on DV / GBV response and prevention, developing the system of specialized services for survivors, programs for perpetrators, that prove Ukrainian commitment to tackle DV / GBV and gender discrimination</p> <p>2020 – Presidential Order <i>On Urgent Measures to Prevent and Combat Domestic and Gender-Based Violence and Protect the Rights of Survivors</i> which led to strengthening the response and result in allocating the significant amount of State budget costs till 2024 as a subventions to the local communities</p> <p>2020 – Approval of Law on Paternity leave</p>		
Seats held by women in the national parliament	20.8% (2020)	Inter-Parliamentary Union ⁴

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Economy		
GDP per capita (PPP USD)	13,056.702 (2020)	World Bank Data ⁵
GDP growth rate	-4.02% (2020)	World Bank Data ⁶
<p>Main industries: Ukraine is home to companies operating in around 20 major industries, namely power generation, fuel, ferrous and non-ferrous metallurgy, chemical and petrochemical and gas, machine building and metalworking, forest, woodworking and wood pulp and paper, construction materials, light, food and others. GDP per sectors in 2018: industry (23%), agriculture (10%), service (45%). The country possesses a massive high-tech industrial base, including electronics, arms industry, and space program.</p>		
Social indicators		
Unemployment	9.48% (2020)	ILO ⁷
Life expectancy at birth	male: 67 years female: 77 years	UNFPA ⁸
Under-5 mortality (per 1,000 live births)	8.4 (2019)	World Bank Data ⁹
Maternal mortality ratio (deaths of women per 100,000 live births)	19 deaths/ 100,000 live births (2017)	UNICEF ¹⁰
Health expenditure (% of GDP)	7.7 (2017)	World Bank Data ¹¹
Births attended by skilled health personnel, percentage	100% (2014)	World Bank Data ¹²
Adolescent fertility rate (births per 1,000 women aged 15-19)	4% (2007)	World Bank Data ¹³
Condom use to overall contraceptive use among currently married women, 15-49 years old, percentage	26.1% (2015)	UN ¹⁴
Contraceptive prevalence rate, any method	65% (2012)	World Bank Data ¹⁵
People living with HIV, 15-49 years old, percentage	1% (2019)	World Bank Data ¹⁶
Adult literacy (% aged 15 and above)	Total population: 100% (2019)	World Bank Data ¹⁷
Total net enrolment ratio in primary education, both sexes (%)	92 (2020)	UNFPA ¹⁸
<p>Sustainable Development Goals (SDGs): Progress by Goal based on international organizations' documents as well as documents of Ukrainian Government¹⁹</p>		

Goals	Indicators	Status²⁰
Goal 3. Good Health and Well-Being	3.1.1 Maternal mortality ratio	18.7
	3.2.1 Under-5 mortality rate per 1,000 live births	7.8
Goal 4. Quality Education	4.5.1 Level of participation of the population in formal and informal forms of education and vocational training, %	8.0
Goal 5. Gender Equality	5.2.1 Number of normative acts which were revised or adopted to provide men and women with equal rights and opportunities and to prevent discrimination against women and girls, units	24
	5.2.2 Number of complaints regarding domestic violence, thousands	211.4 (2020) 267.2 (10 months of 2021)
	5.4.1 Share of women among the Members of Parliament of Ukraine, %	21
	5.5.1 Birth rate under the age of 20, per 1,000 women aged 15-19	16.9
Goal 8. Decent work and economic growth	8.4.1 Share of youth not in employment, education or professional training in the total number of those aged 15–24, %	15.6
Goal 10. Reduce inequality	10.2.1. Share of persons who reported that in the past 12 months they personally experienced gender-based discrimination in the total number of requests to expert councils on gender-based discrimination, %	54.8
Goal 16: Promote peaceful and inclusive societies for sustainable development, provide access to justice for all	16.1.2. Number of victims of crimes related to physical violence (intentional homicide (and relevant attempts), rape (and relevant attempts), grievous bodily harm), reported over the past 12 months, per 100,000 persons	564.62
	16.1.3. Number of victims of rape in the past 12 months, persons/per 100 thousand population	388/0.93 ²¹

EXECUTIVE SUMMARY

Overview: The overall purpose of this Country Programme Evaluation (CPE) was to conduct an independent assessment of the relevance, effectiveness, efficiency, sustainability and coordination of UNFPA support to Ukraine, within 2018-2022 (the 3rd CP). The overall objectives of the CPE were to provide: (i) an enhanced accountability of UNFPA and its country office for the relevance and implementation of its country programme, and (ii) a broadened evidence-base for the design of the next programming cycle. The evaluation had four specific objectives: i) to provide an independent assessment of the progress of the country programme towards the expected outputs and outcomes set forth in the results framework of the country programme (as also updated during the MTR exercise); ii) to provide an assessment of the country office (CO) positioning within the development community and national partners, in view of its ability to respond to national priority needs while adding value to the country development results; and iii) to draw key lessons from the past and the current cooperation and to provide a set of clear, specific and action-oriented forward-looking strategic recommendations in light of the 2030 Agenda for the next programming cycle. This report covers the results achieved during 2018-2021-related interventions in three programme areas: adolescents and youth, gender equality and gender-based violence prevention and response. Other cross-cutting areas included: partnership, resource mobilization and communication. The budget for the 3rd CP was \$9.5 million (\$2.5 regular and \$7.0 other resources). The CPE analysed the achievements of UNFPA CO against expected results at the output and outcome levels, its compliance with the UNFPA Strategic Plans for 2018-2021, the UNDAF and national development priorities and needs. The evaluation reconstructed the programme intervention logic to analyse its logic and identify its gaps and weaknesses. The evaluation examined the programme for such critical features as relevance, effectiveness, efficiency, sustainability and coordination. The CPE took place during the period of July - October 2021.

Evaluation approach and users: The CPE followed the structure provided in the UNFPA Handbook (UNFPA February 2019) to assess the UNFPA CP, using two separate components. The first component was an analysis of the UNFPA CP outputs and their contribution to outcomes within the three programme areas (adolescents and youth, gender equality and gender-based violence prevention and response in developmental and humanitarian contexts). This component comprised four main criteria: relevance, effectiveness, efficiency and sustainability. The second component covered assessment of the positioning of the UNFPA CP in the country based on UNCT coordination criteria. The evaluation covered three and half years of the CP programme. The primary and main users of this evaluation include: the UNFPA Ukraine CO, government counterparts in the country, the UNFPA Executive Board, other development partners and relevant UN Agencies, the UNFPA Regional Office for Eastern Europe and Central Asia and UNFPA Headquarters divisions, branches and offices.

Methodology: The evaluation was conducted by a three-person team (team leader and two evaluators). The evaluation was based on a participatory design and included quantitative and qualitative data collection methods, namely: 1) desk review; 2) key informant semi-structured group and individual interviews; 3) online survey; and 4) observations during field visits and included a diverse range of stakeholders identified through stakeholder mapping exercise to ensure the compilation of well-triangulated data to answer all the evaluation questions. There were 10 evaluation questions that structured the evaluation matrix, which was the main instrument for data collection and analysis. The collection of the evaluation data was implemented both remotely and through personal meetings. All interviews were preceded by consent procedures as required by the UN ethics guidelines for evaluators. The analysis was based on a synthesis and triangulation of information obtained from the above-mentioned evaluation activities. The evaluation relied primarily on qualitative data that was collected through data analysis, semi-structured interviews, and observations and was complemented by quantitative and qualitative data obtained from online survey and secondary sources of data. Throughout the evaluation implementation, from data collection to formulation of recommendations, the Evaluation Team (ET) applied several lenses, including assessment of UNFPA transformative results, integration of GEEW criteria, application of *Leaving no One Behind* policy and innovation and human rights – based approach in CP programming, implementation and monitoring as well as integration of disability lens at all stages. In total, 111 documents/ online resources were analysed, interviews with 86 individuals were conducted online, 35 persons out of 124 invited (or 28.2% response rate), participated in the online survey, and 11 observations of UNFPA-related activities and sites were conducted. All interviews were conducted without presence of UNFPA staff. Limitations of the evaluation were related to COVID-19 pandemic, and availability of some key stakeholders from government.

KEY FINDINGS BY EVALUATION CRITERIA

RELEVANCE: The efforts of UNFPA in Ukraine were relevant to the existing situation in the country and consistent with the needs of vulnerable women, including those who survived GBV, adolescents and youth, as well as representatives of vulnerable groups of the population. The UNFPA-supported interventions were appropriate for ensuring positive changes in lives of the targeted population groups, the selection of these target groups being

consistent with the identified and evolving needs and national priorities. The relevance of the programme interventions, including the COVID-19 response and recovery efforts, was secured through multiple assessments and consultations with key stakeholders. The CP was fully in line with the priorities set by international and national policy frameworks, the Ukraine-United Nations Partnership Framework for 2018-2022. The UNFPA CP is aligned with the goal of UNFPA 2018-2021 Strategic Plan by addressing two UNFPA outcomes. The CO operationalized its interventions through various combinations of five modes of engagement to provide tailored solutions to meet national needs and achieving defined outcomes. It continued promotion and use of national implementation as the preferred mode of delivery of the programme, using universal, inclusive, human-rights based approach, three transformative results as well as integrated principles of equality, *'leave no one behind'*, and inclusivity.

EFFECTIVENESS: The 3rd CP is still ongoing. It had nearly 15 months remaining to its end as of time of the evaluation. The evaluation showed that out of 8 indicators for 3 outputs, 2 were achieved and the other 6 are still in progress to be achieved by the end of the CP. Under the Adolescents and Youth (A&Y) component, none of the 3 output indicators had been achieved at the time of the evaluation. The evaluation concluded that 2 out of 5 GEWE output indicators had already been achieved. The remaining indicators are process indicators, and more time is required to achieve them. Evaluation showed that only 1 out of 5 outcome indicators has been achieved so far. The evaluation demonstrated that in the A&Y sphere, none of the 2 outcome indicators has been achieved yet. Both outcome level indicators measure only limited aspects of the SRH knowledge and behaviour of youth. Data for both indicators were not collected yet, but the ET think that, based on the third party data, both indicators could achieve their targets. Within the Gender Equality Women' Empowerment (GEWE) area 1 of the 3 indicators has been achieved, the value of the 2nd will be confirmed in 2022, the achievement of the 3rd is still in progress. UNFPA policy advocacy and capacity building support helped to ensure that sexual and reproductive health and the associated concerns for the needs of young people, gender equality, and relevant population dynamics were appropriately integrated into the national development instruments and sector policy frameworks in the programme country. However, the extent of their integration varied by programme areas. The CO incorporated three transformative results into formulation of national policies quite well. It also implemented data-driven, gender responsive and human rights-based interventions to maintain essential services, including quality SRH and GBV prevention and protection services within the framework of the COVID-19 response and recovery efforts.

EFFICIENCY: During the 3 and half years of the 3rd CP, the CO has made good use of its human, financial and technical resources and applied an appropriate combination of tools and approaches to pursue the achievement of the planned results. With growing staff up to 49 people and with more complex CP portfolio, changes in human resources structure and profiles were introduced in order to address the goals of the 3rd CP and challenges faced by Ukraine. The CO used available and mobilised financial resources to a great extent. Funding and overall expenditures for the 3 years increased and made up already 135.18% of the proposed indicative assistance of the total \$9.5 million. During 2018 – 2020, expenditures from other resources increased drastically up to 142.81% against planned 100% for 5 years, with the other already committed additional \$4 million by different donors, through 2021. With nearly \$16 million mobilised from external sources, the UNFPA Ukraine became the largest UNFPA programme at the regional level. The resource mobilisation and partnership plans guided efforts to leverage influence and co-financing with the Government, UN partner organisations and other development partners on identified priorities and funding gaps. UNFPA managed to engage adequate in-house and external technical expertise for the CP implementation. The CO documented its activities effectively and used multiple channels, including public annual reports, to promote UNFPA activities and record the best practices, success stories and data in both Ukrainian and English languages. The UNFPA CO supported a number of innovations appreciated by its stakeholders and beneficiaries. Evaluation showed that respondents valued the UNFPA management practices starting with consultation on the CP design and project planning to their implementation, monitoring and evaluation. Moreover, UNFPA showed flexibility and ability to re-programme development activities in case of emergency situations, like COVID-19, and the CO ability to take this pandemic as an opportunity rather than a problem, to promote socially important but difficult to communicate issues, such as DV or GBV.

SUSTAINABILITY: The evaluation demonstrated that UNFPA was successful in developing capacities of partners and beneficiaries and ensuring the ownership in the spheres of: promotion life skills for youth, developing platforms to promote the participation of young people, advancing the youth and peacebuilding agenda, combating GBW and advancing gender equality. CO achieved this due to good assessment of partners' capacities and needs, open and supportive internal communication, skilful external communication, ability to provide key resources, connecting organisations and beneficiaries from different sectors to create self-sustained networks and partnerships. UNFPA used its comparative advantages in the partnerships established with ministries, agencies and other representatives of the partner government to a great extent. To safeguard and promote the national ownership of supported interventions, programmes and policies, the CO established partnerships with partner government institutions. During 2018-2021, UNFPA was successful in scaling up some of the key initiatives under the A&Y and GEWE programme areas.

COORDINATION within the UNCT: The evaluation showed that the CO contributed to functioning and

consolidation of the coordination mechanisms in the UN system to a great extent. The UNFPA's positioning and contributions, reflected in the 2018-2022 UNDAF and the CO contribution to the UNDAF results, were based on the organisation's comparative advantages, such as: mandate and mission, experience and expertise. The CO acted as an effective member of several UN thematic groups and lead of the UN Youth Theme group. The CO collaborated with other UN and development agencies in designing and implementing joint programmes in purchasing the *Delivering-as-One approach*. During the COVID-19 emergency situation the UNFPA provided leadership in GBV area through coordination of GBV sub-cluster policy work, adjusting GBV service provision to the remote mode and conducting information and education campaigns at national and municipal levels. The CO's achievements in resource mobilisation, ability to use 'window of opportunities' to advocate for policy frameworks in the UNFPA-related programme areas, like GE/GBV/Youth, encouraging municipalities to contribute to addressing GE/GBV related challenges at local level, attracting private sector attention to socially important issues (like GBV) and facilitating public-private dialogue, showed ability of an agency, like UNFPA, to reach significant results, complemented by right selection of an UNFPA Honorary Ambassador.

CONCLUSIONS OF THE EVALUATION

Strategic Level Conclusions

Conclusion 1: The evaluation showed that by the end of the 3rd CP, 2 out of 8 output and 2 out of 5 outcome indicators were achieved. 6 output indicators are in progress and will most likely be achieved, while 3 outcome indicators will be measured in 2022. While the achievement progress of the GEWE related output and outcome indicators was good, there were significant delays in achievement of the A&Y related indicators, including all 3 output and both 2 outcome indicators. The outcome indicators under the A&Y domains capture only small part of the results in this area. Also, the ET noticed certain ambiguity in those indicator terms used by the CP and the ones applied by the Ukrainian legislation (e.g. *'anti-discrimination v. gender review'*).

Conclusion 2: Interventions of the 3rd UNFPA CP for Ukraine were mostly focused on the A&Y and GE/GBV programme areas with relatively smaller focus on SRH and P&D. Such targeted focus on two programme areas was defined by national needs and situation, as well as priorities of the 3rd CP. The CO used 'window of opportunity' to promote and raise public attention to GBV issues at both national and municipal levels. Despite downshifting interventions in the SRH area, work done and achievements reached in previous CPs by the CO and its civil society and government partners were supported with focused activities. The CO interventions on sexual and reproductive health issues were important to keep them voicing as nobody else from development actors, except UNFPA, has these issues (SRH/FP/HIV) on their agenda.

Conclusion 3: UNFPA put significant efforts to overallly improve the outreach, visibility and recognition of the brand and mandate of UNFPA in Ukraine- through advance planning and ongoing monitoring of the communication activities. The CO communication and visibility activities were conducted in coordination with various governmental, non-governmental and international institutions. Also, the CO dedicated 3 full-time employees responsible for communication and UNFPA visibility. As of COVID-19 pandemic, the CO has swiftly adjusted communications and advocacy campaigns, by moving them mostly to the digital sphere and closely working with mass media. Despite the challenges associated with pandemic, the numbers of mentions in the press and the level of audience engagement have been steadily increasing. At the same time, when in A&Y domain communication activities being comparatively scarce, interventions within GBV prevention and response area was the most referred program that was associated with the UNFPA brand.

Conclusion 4: The UNFPA CO succeeded in **building partnerships** with UN Agencies, national and local governments, civil society, research institutions and academia, as well as with private sector, by applying various approaches and techniques. UNFPA CO contributed to the UN GTG work, led Youth Working Group and continued coordination of work of the GBV sub-cluster. While at national level 'window of opportunity' was used, that coincided with political will to promote DV/GBV response, at local level a comprehensive GBV prevention and response mechanism was developed to ensure municipality in-kind/ financial support and ownership, including MoU and multisectoral coordination councils. Potential development donors were supplied with important information on targeted population needs and achievements of UNFPA work on an ongoing basis. CSR approach was used in working with the private sector that resulted in signing of the Declaration for GE and DV Prevention, by 31 companies. The business appreciated UNFPA efforts in uniting all actors under the same sector, like it happened in GBV and GE area and promoting public-private dialogue.

Conclusion 5: The UNFPA CO has made a significant achievement in resource mobilisation. The analysis of the financial resources for the 3 years shows that they are overwhelmingly higher from what were envisioned for the five-year committed resources, that are very positive tendencies. The achievements of the other resource mobilisation by UNFPA Ukraine have been remarkable, particularly in the areas of GBV response during the COVID-19 pandemic and in humanitarian settings. With the mobilised amount of almost \$16 millions from external sources, including private

corporations, the UNFPA Ukraine has become the largest UNFPA programme at regional level. This proves that the UNFPA approaches, namely: design of complex programmes with right partners, ongoing communication and advocacy efforts that are evidence-based and built on targeted population group needs, were instrumental for the resource mobilization.

Conclusion 6. The CO interventions during 2018-2021 that coincided with ongoing military conflict in the Eastern part of Ukraine, the COVID-19 pandemic and political changes, highlighted important factors for success used by the CO. They are: importance of strategic approach and careful strategic and operational planning (applying 'bottom up' approach – practical work and real results at municipal level with their followed up policy advocacy to national agenda); view on problem/ challenge as on 'window of opportunity' (like it happened with COVID-19 pandemic that was seen as an opportunity to promote socially inconvenient issues, like DV/GE/GBV); responsive management set up, including human and financial resource procedures and policies; adaptive management approaches and practices, ability to motivate and engage staff in a result-oriented activity.

Conclusion 7: The UNFPA CO should be credited for right selection of the Honorary Ambassador, Masha Efrosinina, whose proactive activities and position in this role has significantly contributed to the promotion of gender mainstreaming and GBV in the public policy agenda at national and local levels. Masha's public image and reputation as well as her access to high political authorities made it possible to promote the topic of GE issues and GBV response to the President and Parliament policy agenda and as one of the priorities issues on the First Lady's agenda. At municipal level, Masha's information campaign during the local elections to promote the topic of GBV response and prevention in the programmes of mayoral candidates, influenced the further perception of this topic by already elected Mayors.

Programmatic Level Conclusions

All programme Conclusion 8: The evaluation demonstrated that UNFPA was successful in developing capacities of partners and beneficiaries and ensuring sustainability of the effects through deep understanding of partner needs and potential, strategic approaches of working at national and municipal levels, open and supportive communication, providing key resources and connecting organisations and beneficiaries from all sectors to create self-sustained local networks and partnerships. At the same time, there still exists low capacity of local partners (especially authorities) to: i) identify and address challenges (like GBV), ii) assess needs of communities in services to effectively develop and deliver them, iii) identify and work with local partners (authorities, community groups, CSOs, private sector), iv) coordinate efforts at inter-municipal and multisectoral levels, and v) mobilise resources.

All programme Conclusion 9: UNFPA supported the Government of Ukraine in promoting and advocating legal framework concerning youth policies, also in building an equal society and promoting the values of gender equality and equal rights and opportunities for men and women. This particularly comprised the legislative part, ensuring equal access to parental leave for both mothers and fathers, promoting gender-sensitive learning, as well as the implementation of legislation to combat domestic violence. Moreover, development of national framework and training of multisectoral teams (local authorities, social services, police, health and legal professionals) facilitates comprehensive implementation of elaborated regulations, ensuring effective coordination, like in GBV response and prevention work, at the local level. However, there is still a lack of multisectoral communication and cooperation, especially between national and local levels as well as lack of institutionalized mechanisms and good practices needed for galvanization of implementation of approved regulations and mechanisms at national, regional and municipality levels in Ukraine.

SRH Conclusion 10: The evaluation demonstrated lack of progress in increased utilisation of integrated SRH Services by those furthest behind, a limited focus on the SRH needs of adolescent girls, young people with disabilities and key populations for HIV prevention, as well as increased access of young people to quality SRH services and sexuality education due to constraining factors i.e. lack of political will and changes of leadership in key Ministries, shifted country priorities due to COVID-19 response.

SRH Conclusion 11. The progress in introduction of the national curricula on *Comprehensive Sexual Education* was limited, due to the change of leadership in MOES. However, there is general consensus among key stakeholders (MoES, teachers and parents) on the need and timeliness of this initiative, which should remain a priority of the CO. This was confirmed both by UNFPA survey presented in 2020, and by the results of the Evaluation.

SRH/HIV Conclusion 12: Progress on the development of policies and programs targeted at vulnerable populations and people with disabilities was quite limited. UNFPA implemented several isolated initiatives (but no less important), including an online course on combating HIV stigma and discrimination for health specialists, support of the project of *Friendly doctors maps* and chatbots, allowing the key population to assess the HIV risk and refer to HIV testing services. UNFPA also piloted the project on HIV testing of GBV victims in Odesa oblast and conducted several rounds online *Health Challenge* initiative for youth and inclusive football training for girls with mental disabilities.

Adolescents and Youth Conclusion 13: A number of initiatives demonstrated potential to become sustainable, among them: *Youth Well-Being Index*; *Skills Lab* approach for youth career development; *ProSkills* Program. Most of them require additional support to fully transfer ownership to partners. At the same time, it is important to identify pathways

of sustainability of certain partnership-based, like public-private (PPP), initiatives like one of the flagship programs *Pact for Youth 2025*.

GEWE Conclusion 14: Quick successes shown with the UNFPA support stimulating interest of local authorities in the GBV area, coincided with the ability of the local government to make financial contributions for infrastructure of shelters/ crisis and daycare centres as of decentralisation reform. UNFPA utilised the complex and conditionality approach in working with local municipalities, ensuring local government ownership and durability of the effects.

GEWE Conclusion 15: The process of creation and integration of specialised services across the country is well underway. It is expected to intensify it in the context of implementation of the state program and the President of Ukraine Order. However, the Government and territorial communities lack methodology for assessing needs of communities in specialised services to effectively develop the services network as part of GBV response and prevention systems. Moreover, ensuring the quality of special social service providers needs a systemic approach to the quality assurance process and the demand for capacity building of newly created PSS MTs, daycare centres and shelters is large. In addition, there is insufficient number of experts, and specifically of male experts in GE/GBV topics. Lack of practical experience of some experts on working with national government and local self- government impede expert's understanding or areas of public bodies' responsibilities and ways of cooperation.

P&D and Knowledge Management Conclusion 16: The evaluation showed that absence of National Census for the last two decades impedes understanding of targeted population needs and interests. That is exacerbated by inconsistent terminology used in the UNFPA-related programme areas, insufficient and low-quality statistics, and a low culture of data use. In addition, low interest of youth in formal education, low civic activity of youth, and low demand for the new skills of 21 century, including critical thinking, healthy lifestyle, accompanied by increased role of social media and mobile applications require new innovative and creative solutions in working with key groups of population.

RECOMMENDATIONS

Strategic Recommendation 1: Considering the new UNFPA Strategic Plan 2022-2025 and its focus on accelerating and scaling up the already achieved results in order to reach the three transformative results along with opinions of evaluation respondents, it will be important for UNFPA Ukraine to focus on interventions within areas where significant achievements were reached and disseminate them to other regions and municipalities as situation dictates. At the same time, it is important to keep focus on SRH and P&D areas as UNFPA has unique expertise and mandate in these areas and is the only development actor with such focus. Also, if opportunity comes, the CO should accelerate good achievements and practices reached in partnerships with government civil society, business, academia, and public figures (like the Honorary Ambassador and the Office of the First Lady) in recent years and CPs.

Strategic Recommendation 2: The UNFPA CO should continue to promote and implement its comprehensive 'bottom up' approach used for GBV prevention and response that proved its effectiveness, efficiency and one that promotes ownership of municipalities/ local communities and form/ influence national advocacy policy agenda.

All programme areas Recommendation 3: UNFPA should strengthen national and local capacity across all programme areas, including institutional, advocacy, policy as well as culture of data use and promotion of multisectoral and inter-municipal coordination and collaboration.

SRH/GE area Recommendation 4: It is important to continue and accelerate work on promoting the formed unified vision of the main priorities and consolidated actions to ensure introduction of a Comprehensive Sexual Education and gender component in non-formal and formal education in Ukraine.

GEWE/ A&Y Recommendation 5: It is crucial to invest more effort in engaging the business community in response to GBV, gender inequality and challenges faced by youth, as it has huge potential though the problem itself is insufficiently dealt. At the same time, it is important to promote the interaction of business campaigns and CSOs, and public-private dialogue, particularly business engagement and cooperation in UNFPA-related programme areas, especially at local and community levels.

GBV Recommendation 6: It is recommended to continue GBV-related prevention work in 4 key areas: 1) strengthening the national system for combating gender-based violence; 2) expanding the access of survivors of gender-based violence to specialised services; 3) raising awareness on the possibilities of obtaining specialised services; and 4) expanding the circle of male GBV experts and experts in anti-discrimination (inclusivity of services and support mechanisms).

Cross-cutting issues Recommendation 7: To accelerate good practices gained by the CO in communication, partnership building and resource mobilisation in GE/DV/GBV related areas and adjust them to other socially significant areas such as SRH, HIV, Family planning, P&D.

CHAPTER 1: INTRODUCTION

1.1 Purpose and objectives of the country programme evaluation

The UNFPA Country Office in Ukraine, in collaboration with the UNFPA Regional Office for Eastern Europe and Central Asia and UNFPA Evaluation Office, contracted team of independent experts to conduct evaluation of the third UNFPA Country Programme for Ukraine (2018-2022) as part of the Country Office evaluation plan and in accordance with the UNFPA evaluation policy (DP/FPA/2019/1). **The overall objectives** of evaluation were: i) enhanced accountability of UNFPA and its country office for the relevance and performance of its country programme, and ii) broadened evidence base for the design of the next programming cycle. For achievement of the overall objectives, the evaluation had the following **specific objectives**: i) to provide an independent assessment of the progress of the country programme toward the expected outputs and outcomes set forth in the results framework of the country programme as also updated during the MTR exercise; ii) to provide an assessment of the country office (CO) positioning within the development community and national partners, in view of its ability to respond to national priority needs while adding value to the country development results; and iii) to draw key lessons from the past and the current cooperation and to provide a set of clear, specific and action-oriented forward-looking strategic recommendations in the light of Agenda 2030 for the next programming cycle.

1.2 Scope of the evaluation

The evaluation covered all activities planned and/or implemented during the period 2018-2021 within each programme area (adolescents and youth, gender equality and gender-based violence prevention and response). Crosscutting areas included: partnership, resource mobilization and communication. The country programme evaluation (CPE) analysed the achievements of UNFPA against expected results at the output and outcome levels, its compliance with the UNFPA Strategic Plan for 2018-2021, the 2018-2022 UNDAF and national development priorities and needs. The evaluation reconstructed the programme intervention logic to analyse its logic and identify its gaps and weaknesses. The evaluation examined the programme for such critical features as relevance, effectiveness, efficiency, sustainability, and coordination. In addition, the Evaluation Team (ET) applied several lenses throughout the evaluation implementation, from data collection to formulation of recommendations, including assessment of UNFPA transformative results, integration of GEEW criteria, application of *Leaving No One Behind* policy and innovation and human rights-based approach in CP programming, implementation and monitoring as well as integration of disability lens at all stages. The main audience and primary users of the evaluation included: the UNFPA Country Office in Ukraine, national partners of UNFPA (including government agencies, civil society organizations and academic institutions), the UN Country Team in Ukraine and donors operating in Ukraine, as well as the UNFPA Regional Office for Eastern Europe and Central Asia and UNFPA Headquarters divisions, branches and offices.

1.3 Methodology and process

EVALUATION METHODOLOGY

Evaluation criteria and evaluation questions

The evaluation has been structured around the following evaluation criteria: i) four out of the five standard OECD-DAC criteria: relevance, effectiveness, efficiency and sustainability²²; ii) one criteria specific to UNFPA, with a view to assessing, namely UNFPA coordination with UNCT. Based on these evaluation criteria, the evaluation team used the following evaluation questions (by criteria), which guided the data collection and analysis work throughout the evaluation process.

Relevance	EQ1	<i>To what extent are the objectives of the programme adapted to the needs of vulnerable women, including those who survived GBV, adolescents and youth, people at risk of HIV infection?</i>
	EQ2	<i>To what extent are the objectives of the programme aligned with the national development priorities and policies, UN-Ukraine Partnership Framework (2018-2022) as well as with interventions of other development partners and with the UNFPA strategic plan (2018-21) in particular goals, principles, and programme mode of engagement?</i>
Effectiveness		<i>To what extent have the intended programme outputs been achieved?</i>
		<i>To what extent did the outputs contribute to the achievement of the planned outcomes: <u>Outcome 2</u>: Adolescents and youth. Increased focus on adolescents, especially on very young adolescent girls, in national development policies and programmes, particularly increased availability of comprehensive sexuality education and sexual and reproductive health services; and <u>Outcome 3</u>: Gender equality and women's empowerment. Advanced gender equality, women's and girls' empowerment, and reproductive rights, including for the most vulnerable and marginalized women, adolescents and youth and what was the degree of achievement of the outcomes?</i>

		<i>To what extent has UNFPA policy advocacy and capacity-building support helped to ensure that prevention and response to gender-based violence, and the associated concerns for the needs and rights of young people, including their needs in SRH, gender equality, and relevant population dynamics are appropriately integrated into national development instruments and sector policy frameworks in Ukraine?</i>
Efficiency	EQ6	<i>To what extent has UNFPA made good use of its human, financial and technical resources, and has used an appropriate combination of tools and approaches to pursue the achievement of the Results defined in the UNFPA country programme?</i>
Sustainability	EQ7	<i>To what extent has UNFPA been able to support its partners and the beneficiaries in developing capacities and establishing mechanisms to ensure ownership and the durability of effects?</i>
	EQ8	<i>To what extent have the partnerships established with ministries, agencies and other representatives of the partner government allowed the country office to make use of the comparative strengths of UNFPA, while, at the same time, safeguarding and promoting the national ownership of supported interventions, programmes and policies?</i>
	EQ9	<i>To what extent have some of the results of pilot projects been used to scale up interventions and/or bring relevant evidence to policy-makers to adopt such approaches?</i>
UNFPA CP coordination with UNCT	EQ1	<i>To what extent did UNFPA contribute to coordination mechanisms in the UN system (UNCT and HCT) in Ukraine?</i>

In addition to the proposed EQs, the ET employed the following crosscutting lenses into evaluation process (from planning to data collection and analysis and reporting) of the 3rd CP, including:

- **Three transformative and people-centred results** in the period leading up to 2030. These include: (a) an end to preventable maternal deaths; (b) an end to the unmet need for family planning; and (c) an end to gender-based violence and all harmful practices, including child, early and forced marriage;
- **Gender Equality and Empowerment of Women (GEEW)** integration criteria²³;
- Application of **Leaving No One Behind** policy (e.g. reaching most vulnerable groups and underserved, including persons with disabilities, LGBTI and other minority groups, older persons, migrants, etc.) in the UNFPA Ukraine activity, including UNFPA comparative advantages in data, population dynamics, reducing inequalities in health and education;
- Application of **innovation and human rights** in UNFPA programming, implementation, and monitoring. Specific focus will be given to human rights principles of participation and inclusion, equality and non-discrimination in situation analysis, programme design, implementation and monitoring;
- Integration of **disability inclusion**, or *'the meaningful participation of persons with disabilities in all their diversity, the promotion and mainstreaming of their rights into the work of the Organization, the development of disability-specific programmes and the consideration of disability-related perspectives, in compliance with the Convention on the Rights of Persons with Disabilities (CRPD)*²⁴.

The proposed set of evaluation questions provided a balanced mix of generic and specific questions, and all of them were focused on providing useful information. Also, the proposed list of evaluation questions was manageable and not too long. Evaluation sub-questions were developed to help define a particular question or drill down on specific areas. Also, having fewer evaluation questions helped to keep the focus on the evaluation objectives and made the evaluation manageable and cost-effective.

Methods for data collection and analysis

The evaluation methodology was based primarily on standards and guidance described in *How to Design and Conduct a Country Programme Evaluation at UNFPA*²⁵ throughout the phases of the evaluation. Suggested and prescribed tools, such as the evaluation matrix, was adapted for the country programmes' context. Evaluation methods were both quantitative and qualitative, including documentary review, group and individual online interviews, observations, and online survey. At planning stage of field mission it was decided to conduct evaluation both online and offline if situation with COVID-19 pandemic allows. The collection of evaluation data was carried out through, mostly, online semi-structured interviews and online survey. Envisioned in the *Evaluation Design Report*²⁶ visits to UNFPA targeted areas, both in capital and regions, and observation method were used and field visits to five oblasts were conducted. The evaluators took into account ethical considerations when collecting information. The team adhered closely to the *UN Evaluation Group Code of Conduct and Ethical Guidelines for Evaluations* (2008). The evaluation was based on a person-centred approach by emphasizing respect, accountability, fairness and transparency. Before fieldwork, the evaluation team (ET) reviewed cultural and religious sensitivities existing in Ukraine and considered potential harm to participants' evaluation can make. While setting the interviews the ET considered respondents availability, opportunity to online and personal interviews. Every meeting started with acknowledgement that all received information from respondents will

be treated as confidential, respondents' privacy and anonymity will be guaranteed and information they shared will not be linked to them as well as their participation in evaluation is voluntary and free and they can stop interview at any moment (ET was prepared where deemed necessary, to obtain statements of informed consent).

The following mixed methods were used to collect needed information in order to answer EQs in given country and programmes' context and timeframe, including²⁷: i) desk review and analysis; ii) online interviews with key informants, both individual and group; iii) observations, and iv) online survey. Table 2 presents numbers of data sources used to collect information by each data collection method. The methods used for data collection ensured the validity of the data collected. Besides a systematic triangulation of data sources and data collection methods and tools, the validation of data was sought through a thorough analysis of primary and secondary documentation and of the findings from the interviews, and the online survey. To address the EQs, the Evaluation Team used more than one type of informants (including the UNFPA programme staff) to obtain data and triangulate the data. Agreement between respondents and/or evidence of different types on a given EQ suggested that the underlying data were accurate. Differences indicate either inaccuracies or the possibility that an activity had different results on the different types of respondents. Special attention was given to cross-validation of programmes' documents.

Table 2. Data sources by collection methods

<i>Data collection methods</i>	<i>Number of data sources</i>
Documents/websites review	
• Number of documents	72
• Number of websites/online sources	39
Total documents/ websites reviewed	111
Interviews (by Interviewees' sectors)	
1. Government officials /experts – national level	5
2. Government officials – regional level (including ECA GCA)	20
3. CSOs	30
4. Academia/UNFPA Experts	5
5. UNFPA staff /UN Agencies/Institutions	16
6. UNFPA Donors	6
7. Beneficiaries (including ECA GCA)	4
Total Interviewees - 86, including 18 male and 68 female interviewees	
Observations²⁸	
1. Social enterprise (bakery), Lviv	
2. NGO Garage Craft, Sievierodonetsk	
3. NGO Smile UA, Zaporizhzhya	
4. Online event "100 minutes with youth for youth", Miropolis project, Lviv	
5. TatoHUB, Kramatorsk	
6. Shelter for GBV survivors, Rubizhne	
7. Shelter for GBV survivor, Myrnohrad	
8. Service delivery point on medical-psychological support for GBV survivors in the hospital, Rubizhne	
9. Municipal Social Services Center, Zaporizhzhya	
10. Panel Discussion on "Combating GBV" during the Congress of Women of Donetsk Region, Kramatorsk	
11. The Day Centre and Crisis Room for GBV survivors, Pokrovsk	
Total number of observations	11
Online survey	- 35, or 28.2% response rate, including 11 male and 24 female respondents
Total invited/participated	124 invited/ 35 participated

The evaluation used various **data analysis methods** in order to develop the findings, conclusions, and recommendations to answer the EQs. The data analysis took place on a continuous basis, i.e. during the desk phase, field phase, and synthesis phase. The following mix of methods (used in an intertwined way) guided the analysis: document analysis; theories of change and contribution analysis, triangulation of analysis of primary and secondary documentation and of the findings from the interviews, and the online survey; content analysis; descriptive statistics; process mapping and visualization. The collected data was analysed with gender dimension in mind to reflect a gender perspective so as to exclude gender bias and to enable the team to map all possible consequences for women and men²⁹ within the UNFPA programmes' framework. In addition, the data analysis considered achievement of UNFPA transformative results, integration of GEEW criteria and disability concerns, application of *Leaving No One Behind* policy and innovation and human rights-based approach in CP programming, implementation and monitoring.

Selection of the sample of stakeholders, samples and sampling

The UNFPA country programme involved/affected a wide range of stakeholders. The evaluation adopted an inclusive approach, involving a broad range of partners and stakeholders. During the preparation phase, the evaluation manager performed stakeholders mapping in order to identify both UNFPA direct and indirect partners (i.e. partners who do not work directly with UNFPA and yet play a key role in a relevant outcome or thematic area in the national context). These stakeholders included representatives from the national and local governments and public institutions, academia, media, civil society organizations, and donors. In addition to this, stakeholders from other UN organizations operating for/in Ukraine (like UNDP, UNICEF, UN Women, UNAIDS etc.), bilateral donors (EU, SIDA, CIDA), and private businesses (AVON, L’Oreal, StarLight Media) were identified. The stakeholder sample was selected by using the selection criteria³⁰ that allowed narrowing 147 names from various groups³¹ to 76³² most important names. The final list of stakeholders interviewed is presented in Annex 2. All stakeholder samples covered only GCA areas of Donetsk and Luhansk oblast

Key Informant Interviews. Within the framework of non-experimental design, several types of samples were used depending on evaluation sub-questions, chosen data collection tools, and available resources. Purposive sampling and convenience sampling were applied. Representatives of key actors out of capital city were identified based on the selection criteria and UNFPA activity at local level to ensure that they represent: all programme components and various types of stakeholders groups and activities. The stakeholder map was updated (Annex 6) and actually numbers of interviewed 86 KIs is presented in the Table 3 specifying distribution of male/adult and female/adult.

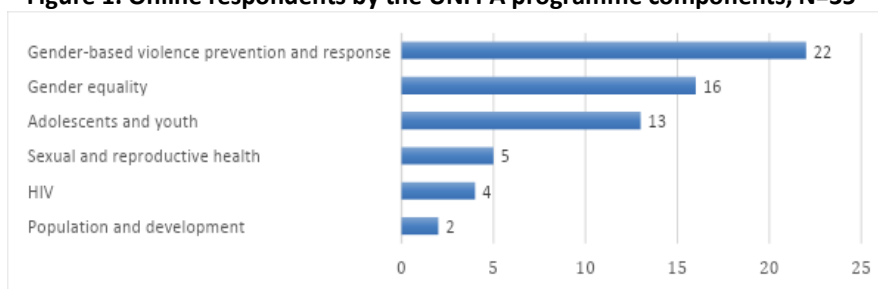
Table 3. Numbers of interviews (identified in terms of stakeholder map/ planned/ interviewed)³³ at design v. field stages³⁴ by UNFPA programme areas and stakeholders' sectors

Programme Area		Government and other Institutions	INGO/NGO	Donors/ UNRCO/ UN Agencies	Total
Outcome 1: Adolescents and youth ³⁵	Design	12/7 ³⁶	11/9	6/5	29/21
	Field	9 (3 male/4 female)	11 (3 male/8 female)	4 (1 male/3 female)	24 (7 male/15 female)
Outcome 3: Gender equality and women's empowerment/ Output 1	Design	22/3	29/8	8/2	59/13
	Field	3 (0 male/3 female)	10 (3 male/7 female)	4 (0 male/4 female)	17 (3 male/14 female)
Outcome 3: Gender equality and women's empowerment/ Output 2	Design	14/14	16/12	8/6	38/32
	Field	20 (3 male/17 female)	11 (4 male/7 female)	4 (0 male/4 female)	35 (7 male/ 28 female)
UNFPA Ukraine CO	Design			21/10	21/10
	Field			10 (2 male/8 female)	10 (2 male/8 female)
TOTAL	Design	48/24	56/29	43/23	147/76
	Field	32 (6 male/26 female)	32 (9 male/ 23 female)	22 (3 male/ 19 female)	86 (18 male/ 68 female)

Observations. In total, eleven observations of the UNFPA IPs, beneficiaries' activities and premises were conducted in six sites of different parts of Ukraine (Table 2).

Online Survey. Invitation for participation in the online was sent to 124 representatives of the UNFPA stakeholder groups. 35 answers were received (or 28.2% response rate). Online respondents represented Government of Ukraine (6 respondents), municipalities (9 respondents), civil society (7 respondents), UNFPA local and international implementing partners (3 respondents), academia (1 respondent), and others (8 respondents from private business, expert community) from Kyiv (19 respondents), Odesa and Poltava (3 respondents from each city), Kharkiv and Zaporizhzhia (2 respondents from each city), and Kremenchuk, Melitopol, Lviv, Mariupol, Sievierodonetsk, and Kramatorsk. 35 respondents covered all UNFPA programme components³⁷, including GE and GBV, Adolescents and youth, SRH, HIV and P&D (Figure 1).

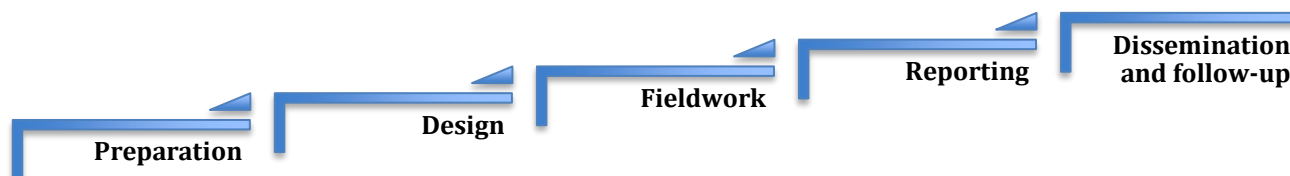
Figure 1. Online respondents by the UNFPA programme components, N=35³⁸



In conclusion, it should be noted that 9 more interviewees compared to 77 planned were interviewed (86 interviewees in total). In addition, to avoid the possibility of bias from the presence of UNFPA staff, all interviews were conducted by the evaluation team in private without any CO staff present observing ethical considerations specified in the Design Report and TOR (Annex 1).

EVALUATION PROCESS

The country programme evaluation was implemented in five sequential phases, each including several steps, with respective deliverables as follows:



1. **Preparation.** This phase, managed by the UNFPA Country Office in Ukraine, included: a) Drafting of country programme evaluation (CPE) terms of reference (ToR); b) Establishing an Evaluation Reference Group (ERG); c) Receiving approval of the CPE ToR from the UNFPA Evaluation Office; d) Selecting potential evaluators; e) Receiving pre-qualification of potential evaluators from the UNFPA Evaluation Office; f) Recruiting evaluators and establishing an Evaluation Team chaired by the Evaluation Team Leader; and g) Preparing the initial set of documentation for the evaluation, including list of projects and stakeholder map.
2. **Design.** During the design phase, the Evaluation Team performed the following tasks: i) documentary review of all relevant documents available at UNFPA HQ and CO levels regarding the country programmes for the examined period; ii) stakeholder mapping; iii) analysis of the intervention logic of the programme; iv) finalization of the list of evaluation questions; v) development of a data collection and analysis strategy as well as a concrete work plan for the field phase. At the end of the design phase, the evaluation team leader produced a design report that outlined the detailed evaluation methodology, criteria, timeframes and the structure of the final report. Once the design report was approved, the UNFPA Evaluation Manager set a preliminary agenda for the field phase and run the required logistical arrangements.
3. **Fieldwork.** After the design phase, the Evaluation Team undertook a four-week online/offline field work in Ukraine to collect and analyse the data required in order to answer the evaluation questions. During September 8 – October 8, 2021 the ET interviewed 86 people (out of 77 planned). At the end of the field phase, namely on November 5, the Evaluation Team provided the UNFPA country office with a debriefing presentation on the preliminary results of the evaluation.
4. **Reporting.** During this phase, the ET continued the analytical work initiated during the field phase taking into account comments made by the CO at the debriefing meeting. This *first draft final report* was submitted to the Evaluation Reference Group for written comments. Comments from the Country Evaluation Reference Group consolidated by the UNFPA Evaluation Manager allowed the ET to prepare a second draft final evaluation report. A formal evaluation quality assessment (EQA) took place at this stage.
5. **Dissemination and Follow-Up.** During this phase, the country and regional offices, as well as relevant divisions at UNFPA headquarters are informed of the CPE results with an invitation to submit their management response. The evaluation report, along with the CPE ToR and management response, will be published in the UNFPA evaluation database within eight weeks after their finalization. The evaluation report will also be made available to the UNFPA Executive Board and will be widely distributed within and outside the organization.

Team composition and distribution of tasks

The evaluation was carried out by a competitively selected independent Evaluation Team consisting of an Evaluation Team Leader and two Evaluators who are external to UNFPA. The team members combined knowledge and experience in evaluation with technical knowledge and expertise in areas related to the UNFPA Programme of work. The allocation of responsibilities and distribution of work included, at least, two aspects: (i) allocation of responsibilities by area of work; (ii) allocation of responsibilities for sections of the final evaluation report.

Evaluation limitations

The Evaluation Team did not have any significant challenges during the data collection process.

However, there were two minor limitations that have no significant impact of the evaluation results, including:

- **The COVID-19 Pandemic:** It was expected to conduct more field visits and personal interviews. However, because of protection measures, the field visits were made to most important UNFPA activity sites, and the team conducted all other interviews remotely. While the ET adapted its methodology accordingly, there was no doubt a disadvantage that the TL cannot speak with stakeholders and beneficiaries in-person and visit all municipalities where the Fund works. That, to a certain extent, limited greater understanding of UNFPA activities impact on beneficiaries and visualization of conditions, in which stakeholders conduct their activity. Finally, limited direct access to the ECA beneficiaries / informants led to the limited opportunity to fully assess the humanitarian-development bridging (nexus) of UNFPA activities in the affected regions. However, open questions in the online survey provided opportunity to stakeholders ‘speaking up’ on their beneficiaries’ behalf. In addition, the ET used validation techniques, including discussion of the necessary information with CO leaders and team during KIs; getting data from the UNFPA partners and IPs; UNFPA documents review, as well as interviewing additional stakeholders when information from stakeholders was missing;
- **Availability of some key stakeholders from government** was limited (e.g. Commissioner for Human Rights of the Parliament, Office of the First Lady). The ET used validation techniques described above to mitigate this limitation.

CHAPTER 2: COUNTRY CONTEXT

2.1 Development challenges and national strategies

UNFPA has been operating in Ukraine since 1996 through standalone projects mostly focusing on supporting the national family planning and reproductive health programmes and on developing systems for the prevention of sexually transmitted infections, including HIV infection. **The first UNFPA Country Programme (CP)** for Ukraine was implemented in 2006-2011 and addressed three key programmatic areas of reproductive health, gender equality, and population and development. **The second UNFPA Country Programme** for Ukraine was implemented in 2012-2017 by UNFPA and its national counterparts have and cover the five main areas of focus: 1) Sexual and Reproductive Health (SRH) 2) Youth, 3) Gender, 4) Population and Development (PD), and 5) Humanitarian Response. The initial CP budget of \$6.5 million (\$5.0 regular and \$1.5 other) was increased to \$7.25 million by 2017 (\$2.7 regular and \$4.55 other). The current **third UNFPA Country Programme** (2018-2022) is aligned with the draft national 2030 Sustainable Development Goals, the Ukraine-United Nations Partnership Framework for 2018-2022, and the national sustainable development strategy, Ukraine 2020, through which the country has identified as a priority the investment in young people, including through healthy lifestyles and employable life skills. Likewise, the Concept of the State Programme on Ensuring Equal Rights and Opportunities of Women And men (2012) and the National Action Plan on United Nations Security Council Resolution 1325 (2016) have identified the importance of eliminating all barriers to women’s full participation in social, economic and political life, including an end to violence against women. The Programme’s budget for addressing the challenges in the two principal focus areas (2) Youth and (3) Gender equality and women’s empowerment), UNFPA is estimated around \$9.5 million: \$2.5 million from regular resources and \$7.0 million through co-financing modalities and/or other resources, including regular resources³⁹.

During the past years, Ukraine has faced a number of significant political, security, and economic challenges, including the loss of territories, the ongoing armed conflict between the government of Ukraine and Russia-backed separatists in the eastern regions of Donetsk and Luhansk (NGCA now) and an epidemic of COVID-19. Despite these challenges, Ukraine has been showing certain positive changes in a number of directions. According to the Human Development Index, Ukraine is considered a country with high human development. Ukraine’s Human Development Index (0.779 in 2019) has been increasing since the early 2000s, currently ranking the country at the 74th position globally⁴⁰. However, though its Gross Domestic Product (GDP) per capita has increased from US\$ 2,115 in 2015 to US\$ 3,118 in 2020⁴¹, it still puts Ukraine into a lower middle-income economy with a rising share of the poor population, which at present constitutes 51%, according to national poverty criteria.

Over the past 30 years, Ukraine’s population has shrunk by almost 10 million people due to both a natural loss of population (birth rate of 1.2 children per woman⁴²) and emigration. In 1990, Ukraine had 51,556.5 thousand permanent residents, in 2020 - 41,732.8 thousand⁴³, an approximate estimate, as the last census was conducted in Ukraine in 2001. According to the 2019 data by the State Statistics Service, the average life expectancy for men was 66 years, and for women 76 years, a significant difference related to lifestyle choices. The average predicted life expectancy is 72.01 years. The aging population is expected to shape the face of the Ukrainian society over the next decades. As of 1 January 2020, the demographic burden constituted 480 persons per 1000 population of working age (15-64). This figure is disaggregated into 226 young persons (0-14) and 254 elderly people (65 and older)⁴⁴, and by 2030 it is projected to rise to 531 and further to 721 by 2050.

More than half a million people in Ukraine die each year from various diseases, and non-communicable diseases (NCD) are estimated to account for about 92% percent of deaths⁴⁵, with cardiovascular diseases as the main cause, followed by cancer (80,000 deaths). Another 8.5% of deaths are caused by injuries. Mortality due to old age, indeterminate sudden death syndromes and other symptoms and abnormalities have also increased in the country in recent years.⁴⁶

Sexual and reproductive health services are generally available in Ukraine but their quality and accessibility vary. In 2019 adolescent fertility (births per 1000 girls 15-19) rate was reported at 23.7⁴⁷. Maternal mortality was at 19 deaths per 100,000 live births. In recent decades, Ukraine has shown constant positive dynamics in reducing child mortality. Infant mortality and mortality for children under five were at 7.18 and 8.39 per 1000 respectively⁴⁸.

Ukraine bears the second-largest HIV epidemic in Eastern Europe and Central Asia. With the estimated 240,750 PLHIV in 2018, Ukraine registered 3,448 AIDS related deaths and 15,787 newly diagnosed HIV cases. The prevalence among the general population is around 0.9-1% and is significantly higher among certain population groups. Since 2008, sexual transmission of HIV has been driving the epidemic, with sexual partners of people from targeted populations particularly at risk and most new HIV infections occurring in people under the age of 30. Ukraine's HIV epidemic remains geographically concentrated, most affecting several regions in the South and East of the country. Military conflict poses additional risks to the national HIV response in these areas (possible ART interruptions, disruptions of harm reduction services, preventing mother-to-child transmission services and paediatric treatment, sexual violence etc.).⁴⁹

The military conflict has created unprecedented challenges to the realization of women's and children's rights throughout Ukraine, and especially in the conflict-affected areas. A direct consequence of the conflict has been the displacement of hundreds of thousands of individuals and families and, as of June 2021, 1 473 650 people have registered as Internally Displaced Persons (IDPs)⁵⁰ in Ukraine and even more were affected by the conflict, many contributing to the emigration trend. The financial and social strain of supporting the large number of IDPs has further exacerbated the challenges for authorities and communities alike in all areas from livelihoods to health and education. The direct consequences of the conflict as well as resulting social and economic crises disproportionately affect women due to persistent gender inequality, discrimination, and reinforced stereotyping⁵¹.

Stereotypical gender roles are overall still deeply ingrained in Ukrainian society, preventing women from enjoying equal opportunities and rights. In recent years Ukraine has somewhat improved her standing in the UN's Gender Inequality Index (0.234) climbing from 55th position in 2016 to 52nd in 2020⁵², which can be seen as an indicator of positive changes. However, gender inequality in economic opportunities, as well as discrimination in recruitment and at work, have limited women's access to employment, income and career promotion. The gender pay gap in 2020 amounted to 20% for all wage labourers. In certain industries (finance, transportation, entertainment, postal services), it reaches over 30%.⁵³ Women remain underrepresented in Ukrainian politics with only 20.6% in the Verkhovna Rada, and only one woman being a member of the current Cabinet of Ministers.

Domestic violence remains widespread, under-reported, and often ineffectively addressed. In 2019⁵⁴ 75% of women have said that they experienced some form of violence since age 15, and one in three had experienced physical or sexual violence. Ukraine has adopted new legislation and institutional frameworks relating to gender-based violence, generally in line with international human rights law. These include the 2017 Laws on *Preventing and Combating Domestic Violence* (came in force in 2018), on Amending the Criminal Code and Criminal Procedural Code of Ukraine to Implement Provisions of Council of Europe Convention on Preventing and Combating Violence Against Women and Domestic Violence (came in force in 2019), amendments to the Law on Ensuring Equal Rights and opportunities for Women and Men (came in force in 2018); the introduction of emergency barring orders, restraining or protection orders orders, shelters and other safe accommodation solutions for DV / GBV survivors, and special police units trained to address situations of domestic violence. However, The Council of Europe Convention on *Preventing and Combating Violence Against Women and Domestic Violence* (Istanbul Convention) is yet to be ratified by Ukraine after ten years, and the existing legal and institutional initiatives are often poorly implemented, if at all. Access to support services for survivors of domestic violence is especially complicated in the Donetsk and Luhansk regions, severely affected by the conflict (i.e. territorial hromadas lead by military-civil administrations, settlements close to the contact line on GCA, territory of NGCA). COVID-19 pandemic has negatively affected the situation on the national level with the number of cases of domestic violence rising and the strict quarantine measures preventing survivors from seeking help⁵⁵. Decentralisation processes also result in additional challenges related to developing and strengthening the network of specialised support for DV/GBV survivors, and capacity building to respond to and prevent DV/GBV at local level.

2.2. The role of external assistance

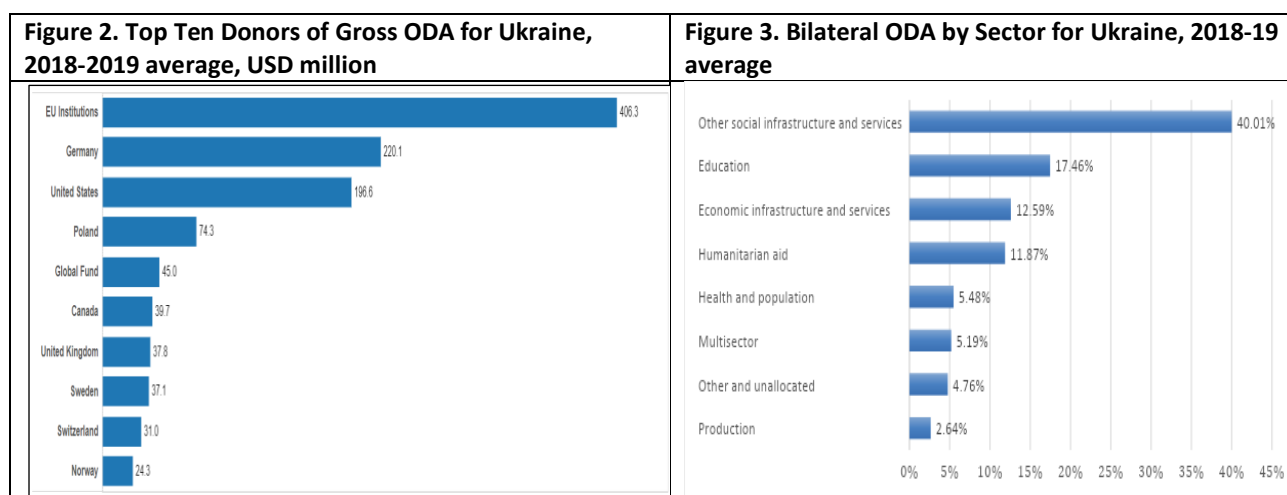
Since its independence, Ukraine has been a recipient of foreign aid (including military financing), provided by the US and European countries. The U.S. government provided in the 1990s almost \$2.6 billion in total aid to Ukraine (on average \$287 million a year) and \$1.8 billion – in the 2000s (on average \$199 million a year). In the five years before the beginning of the military conflict with Russia, assistance was provided both by the State Department and US Agency for International Development (USAID) - average \$105 million per year, and by Departments of Energy and Defence - \$130 million per year in obligated funds⁵⁶. The EU was also one of Ukraine's most prominent international donors throughout the history of its independence. The EU's assistance included macro-financial assistance and loans as well as technical expertise, development assistance and budget support and the mobilisation of finance for investment projects⁵⁷.

Since the start of the conflict in the East of Ukraine (2015-2019), the amount of International assistance has increased to help Ukraine to overcome its effects. The US-assigned support increased to an average of \$321 million per year with additional assistance provided for the IDPs and other victims of the conflict⁵⁸. During the same period, the European Union and its Member States have contributed in general over €1 billion in humanitarian and early recovery aid⁵⁹. Within the European Neighbourhood Instrument framework, the EU has committed €1,365 million to Ukraine since 2014 to support and monitor democratic reforms, strengthen governance capacity and Ukraine's socioeconomic development. Following the 2019 EU-Ukraine summit, the European Commission adopted a new package of measures, worth €109 million, to further support Ukraine's reform process⁶⁰. The total Macro-Financial Assistance extended to Ukraine by the EU since 2014 has reached € 3.8 billion – 'the largest amount of such assistance directed at any single partner country'⁶¹.

According to the Organisation for Economic Co-operation and Development (OECD)'s statistics⁶², in 2018 Ukraine has received from its donors a total amount of 2,579.7 million USD in official development assistance. In 2019 – 3,358.2 million USD (Table 4). Various EU institutions were the top donor during that period, followed by Germany and the US (Figure 2).

Table 4. Official Development Assistance (ODA) received by Ukraine in 2017-2019

	2017	2018	2019
Net ODA (USD million)	1,180.7	1,223.2	1,148.3
Net ODA/GNI (%)	1.0	0.9	0.7
Gross ODA (USD million)	1,205.1	1,256.6	1,335.1
Bilateral share (gross ODA) (%)	65.7	64.5	59.8
Total net receipts (USD million)	2,579.4	2,579.7	3,358.2



Of the ODA received during the period of 2018-2019 (Figure 4), more than a half was aimed at supporting social and economic infrastructure (52,6% in total), other sectors receiving the most help were education (17,46%) and humanitarian aid (11,87%).

CHAPTER 3: UNITED NATIONS/ UNFPA RESPONSE AND PROGRAMME STRATEGIES

3.1 UNFPA strategic response

UNFPA is the lead United Nations agency for delivering a world where every pregnancy is wanted, every childbirth is safe and every young person's potential is fulfilled. UNFPA is guided by the International Conference on Population and

Development (ICPD) Programme of Action (1994) and the 2030 Agenda for Sustainable Development (2015) as well as other global frameworks underpinning the 2030 Agenda, including the Sendai Framework for Disaster Risk Reduction 2015-2030 of the Third United Nations World Conference on Disaster Risk Reduction, the 2015 Paris Agreement on Climate Change and the 2015 Addis Ababa Action Agenda of the Third International Conference on Financing for Development.

UNFPA is committed to the *Delivering as One* approach and the system-wide coherence principles contained in the Standard Operating Procedures. UNFPA country programmes are fully aligned with the United Nations Development Assistance Frameworks (UNDAF) and implemented to enhance country, regional and global policy coherence, joint programmes, monitoring, and reporting for results. UNFPA is one of three United Nations organizations that chairs the largest number of United Nations country team inter-agency groups and participates in the largest number of joint programmes. As such, it is uniquely positioned to further advance coherence in programme delivery in partnership with a number of UN entities.



The 2018-2021 UNFPA strategic plan informed the 2028-2022 Country Programme for Ukraine. It reaffirmed the goal of achieving universal access to sexual and reproductive health and reproductive rights, focusing on women, adolescents and youth.

UNFPA has committed to focus on three transformative results: (a) end preventable maternal deaths; (b) end the unmet need for family planning; and (c) end gender-based violence and harmful practices, including child marriage. The Fund aims to achieve these three transformative results by 2030 through the work of 3 four-year-cycle strategic plans, the first of which is the UNFPA strategic plan, 2018-2021.

UNFPA applies the principles of the 2030 Agenda for Sustainable Development, including protecting and promoting human rights, prioritizing “leaving no one behind” and “reaching the furthest behind first”, ensuring gender responsiveness, reducing risk and vulnerabilities and building resilience, strengthening cooperation and complementarity among development, humanitarian action and sustaining peace and, above all, being efficient, accountable and transparent to all stakeholders.

The strategic plan 2018-2021 charted the course to achieve the three transformative results and further advanced the implementation of the ICPD Programme of Action. However, during this period, the world faced a series of challenges, not the least the onset of the COVID-19 pandemic. The strategic plan 2022-2025, while continuing to advance the ICPD Programme of Action, will concentrate on recovering from the COVID-19 pandemic and restoring the gains lost while accelerating progress towards achieving the three transformative results and the sustainable Development Goals. The

new Strategic Plan is expected to pursue some key shifts and adopt new ways of doing business which will impact the development of the new UNFPA Country Programme for Ukraine and as such these have been taken into account while formulating this report’s recommendations.



3.2 UNFPA response through the country programme

UNFPA presence in Ukraine dates back to 1996, and it has assisted the country through standalone projects mostly focusing on supporting the national family planning and reproductive health programmes and on developing systems for the prevention of sexually transmitted infections, including HIV infection. UNFPA implements its strategic plan at headquarters, regional, multi-country and country levels. Country programmes are at the forefront of implementing the

strategic plan. They respond to country needs and priorities, and to the achievement of the Sustainable Development Goals. Country programmes are aligned with the outcomes and outputs of the UNFPA strategic plan and are guided by country priorities, the United Nations Development Assistance Framework (UNDAF), and the revised business model and UNFPA modes of engagement.

3.2.1 Brief description of UNFPA previous cycle strategy, goals and achievements

UNFPA has been operating in Ukraine since 1996 through standalone projects mostly focusing on supporting the national family planning and reproductive health programmes and on developing systems for the prevention of sexually transmitted infections, including HIV infection. **The first UNFPA Country Programme (CP)** for Ukraine was implemented in 2006-2011 and addressed three key programmatic areas of reproductive health, gender equality, and population and development. **The second UNFPA Country Programme** for Ukraine was implemented in 2012-2017 by UNFPA and its national counterparts have and cover the five main areas of focus: 1) Sexual and Reproductive Health (SRH) 2) Youth, 3) Gender, 4) Population and Development (PD), and 5) Humanitarian Response. The initial CP budget of \$6.5 million (\$5.0 regular and \$1.5 other) was increased to \$7.25 million by 2017 (\$2.7 regular and \$4.55 other).

3.2.2. The 3rd country programmes, 2018 – 2022

The 3rd UNFPA Country Programme Document for Ukraine (DP/FPA/CPD/UKR/3) has been approved by the UNDP/UNFPA/UNOPS Executive Board at its second regular session in September 2017. The third country programme for Ukraine has been developed with the participation of government counterparts, academia, civil society and international development partners. It is aligned with the draft national 2030 Sustainable Development Goals, the Ukraine-United Nations Partnership Framework for 2018-2022, and the national sustainable development strategy, Ukraine 2020, through which the country has identified as a priority the investment in young people, including through healthy lifestyles and employable life skills. Likewise, the Concept of the State Programme on ensuring Equal Rights and Opportunities of Women and Men (2012) and the National Action Plan on United Nations Security Council Resolution 1325 (2016) have identified the importance of eliminating all barriers to women's full participation in social, economic and political life, including an end to violence against women.

Based on the consultative processes that identified UNFPA comparative advantage, the country programme is seeking to bring about lasting changes in the ways young Ukrainians prepare for their adult lives with respect to their perspectives on positive sexuality, gender equality, and non-discrimination, and the ways in which society makes such choices possible. The programme promotes investments in the abilities of young people, and especially young women and girls, to make responsible choices about their lives, including their sexual and reproductive lives, and by contributing to the legal and social adoption of more equitable gender norms, including the right to live free from stereotypes, coercion and violence. With its flagship focus on prevention and response to gender-based violence (GBV) Ukraine Country Programme contributes to the achievement of UNFPA global transformative result: end gender-based violence and all harmful practices against women and girls. To support these goals, UNFPA engages primarily through advocacy and policy dialogue, at national and subnational levels. Given Ukraine's European ambitions, an integral part of UNFPA support will be through knowledge management, particularly on good practices and the adoption of international norms and standards, along with limited capacity development to key counterparts, particularly related to the lingering effects of the humanitarian crisis. As recommended by the programme evaluation, the country office expands its work at subnational level, and seeks synergies with relevant initiatives of other development partners.

Outcome 2. Adolescents and youth

Output 1: Evidence-based and inclusive national and subnational policies and programmes for young people that advance sexual and reproductive health, reduce risks and vulnerabilities, expand opportunities, and promote youth participation for the full realization of their potential, including in humanitarian settings. The programme focuses on the needs of adolescent girls, young people with disabilities and those who have suffered from armed conflict, as well as key population for HIV prevention. It fosters policy and programmatic change: (a) promoting healthy lifestyles among young people to reduce the risks of unintended pregnancy and sexually transmitted infections, (b) improving sexual and reproductive health services for young people with disabilities and young targeted population; (c) supporting platforms to promote the participation of young people in decision-making processes related to their lives; (d) promoting life skills to allow young people to become more socially active, politically engaged and economically resilient; and (e) advancing the youth and peacebuilding agenda, in support of United Nations Security Council resolution 2250.

UNFPA engages in policy dialogue with national and subnational government entities, to ensure that young people have priority access to relevant health and social services; create space for young people to participate in programme design

and monitoring; and provide technical assistance in the design of curricula and medical protocols and for the operationalization of Security Council resolution 2250.

Outcome 3: Gender equality and women’s empowerment

Output 1: Strengthened national and subnational partnership frameworks in place for reducing gender inequalities in social, economic and political spheres of life by providing policy advice and foster partnerships among governmental agencies, civil society and the private sector to advance women’s rights by focusing on: (a) reducing gender stereotypes that shape gender roles at home and at work, including through education of adolescents and male involvement; (b) fostering solutions to empower adolescent girls and women, including women with disabilities, to claim their rights and voice their needs; and (c) exploring gender disparities from an economics angle.

UNFPA engages, inter alia, in dialogue with national and subnational authorities and the private sector to help reconcile productive and reproductive roles; foster broad-based coalitions to engage in public campaigns to reduce gender stereotyping; advance gender-sensitization of school textbooks; and provide technical assistance for the integration of gender-sensitive approaches in the mandatory curricula of mid-level civil servants.

Output 2: Strengthened national gender-based violence prevention and response mechanisms, including in humanitarian settings by improving coordination and referral pathways among gender-based violence services, expand their scope and focus on prevention by addressing gender-based violence by: (a) improving national and local policy and regulatory frameworks; (b) developing capacity, especially at local level, to comprehensively address gender-based violence, including through data management; (c) generating demand for services in response to gender-based violence and by working with aggressors; and (d) strengthening partnerships to address and sustainably fund gender-based violence prevention and response nationwide.

UNFPA advocates for investments in budgets and capacities to sustain the multi-sectoral systems now in place in some regions, and that they be expanded to others; advocates for the adoption of legal frameworks at national and local levels; provides technical assistance to partners to embed gender-based violence prevention elements in their operations, and for the design and operationalization of a national system for gender-based violence case management.

Implementation of the 3rd UNFPA CP contributes to the achievement of all four outcomes of the Government of Ukraine – United Nations Partnership Framework 2018-2022 for the following priorities: I. Sustainable economic growth, environment and employment; II. Equitable access to quality and inclusive services & social protection; III. Democratic Governance, rule of law and civic participation; and IV. Human security, social cohesion and recovery with a particular focus on Eastern Ukraine. The linkage among the UNDAF outcomes, UNFPA outputs 2018-2022, and UNFPA Strategic Plan 2018-2021 presented in the Annex 7.

3.2.2 The 3rd Country Programme financial structure

The UNFPA Executive Board approved⁶³ funding for the 2018-2022 CP in amount of \$9.5 million: \$2.5 million from regular resources (RR) and \$7.0 million through co-financing modalities and/or other resources (OR), including RR. These funds were dedicated to Outcome 2 – Adolescents and Youth, Outcome 3 – Gender equality and women’s empowerment, and Programme coordination and assistance (Table 6). Financial structure of the 2018-2022 Country Programme is presented in Results and Resources Framework for Ukraine⁶⁴. Table 5 presents the UNFPA financial commitment for 2018-2022 by outputs.

Table 5. The UNFPA financial commitment for 2018-2022 by outputs⁶⁵

Output 2.1: Evidence-based and inclusive national and subnational policies and programmes for young people that advance sexual and reproductive health, reduce risks and vulnerabilities, expand opportunities, and promote youth participation for the full realization of their potential, including in humanitarian settings	\$2.8 million (\$0.8 million from RR and \$2.0 million from OR)
Output 3.1: Strengthened national and subnational partnership frameworks in place for reducing gender inequalities in social, economic and political spheres of life	\$1.65 million (\$0.65 million from RR and \$1.0 million from OR)
Output 3.2: Strengthened national gender-based violence prevention and response mechanisms, including in humanitarian settings	\$4.7 million (\$0.7 million from RR and \$4.0 million from OR)
Programme Coordination and Assistance	Regular: \$0.3 million
TOTAL	\$9.45⁶⁶ million

Table 6. The UNFPA financial commitment for 2018-2022 (in USD millions) by outcomes⁶⁷

	RR	OR	Total
Outcome 2: Adolescents and Youth	0.8	2.0	2.8
Outcome 3: Gender equality and women’s empowerment	1.4	5.0	6.4
Programme coordination and assistance (PCA)	0.3	–	0.3
Total	2.5	7.0	9.5

Financial data for three years (2018-2020) of the 3rd country programme is presented in the Table 7 below.

Table 7. Expenditures for three years of the 3rd Country Programme (2018-2022) (in USD)

Programme area	Year	Regular resources	Other resources	TOTAL
Adolescents and youth	2018	298,178.46	89,600.66	387,779.12
	2019	339,079.96	226,214.47	565,294.43
	2020	355,247.71	388,090.05	743,337.76
	Total	992,506.13	703,905.18	1,696,411.31
Gender equality	2018	255,914.11	60,205.17	316,119.28
	2019	287,753.62	19,164.81	306,918.43
	2020	313,755.06	119,212.22	432,967.28
	Total	857,422.79	198,582.20	1,056,004.99
GBV prevention and response	2018	134,905.45	2,764,078.22	2,898,983.67
	2019	46,297.51	3,567,993.93	3,614,291.44
	2020	468,224.40	2,762,055.25	3,230,279.65
	Total	649,427.36	9,094,127.40	9,743,554.76
Programme coordination and assistance	2018	118,337.71	-	118,337.71
	2019	172,405.97	-	172,405.97
	2020	55,803.26	-	55,803.26
	Total	346,546.94	-	346,546.94
TOTAL	2018	807,335.73	3,134,896.43	3,721,219.78
	2019	845,537.06	3,365,947.48	4,658,910.27
	2020	1,193,030.43	3,255,124.50	4,462,387.95
	Total	2,845,903.22	9,755,968.41	12,842,518.00
Financial commitments (\$)		2,500,000.00	7,000,000.00	9,500,000.00
% from Committed resources		113.84%	142.81%	135.18%

Analysis of expenditures of 3rd CP for 2018-2020 as well as spending by programme areas are discussed in FINDING section of the report under EQ5 on efficiency.

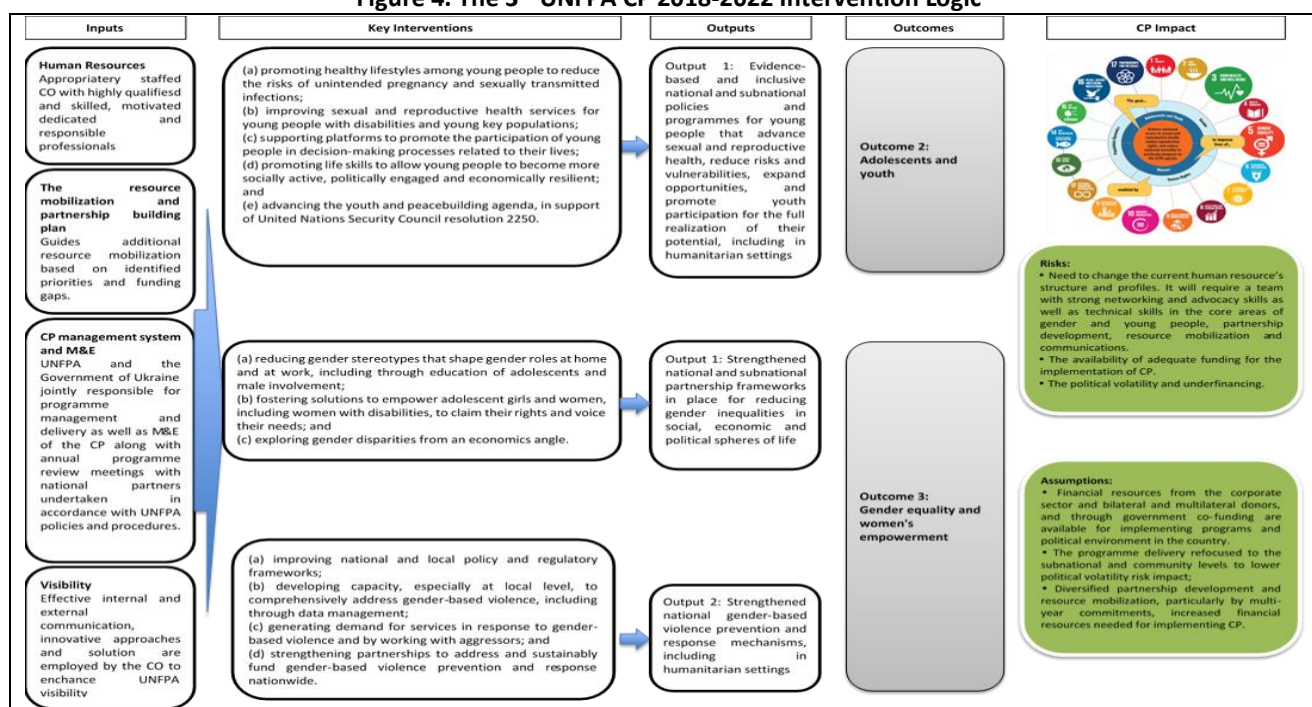
CHAPTER 4: FINDINGS: ANSWERS TO THE EVALUATION QUESTIONS

This chapter summarises the main findings of the 3rd Country Programme for Ukraine.

Intervention logic

The evaluation team has summarized the intervention logic underlying the 3rd CP (2018-2022) in the Figure 5 below. The intervention logic is based on the document review conducted during the development of the evaluation design, approach and methodology. The evaluation assessed the extent, to which the expected results articulated in the intervention logic of the CP had been achieved and whether the activities of the UNFPA CO in Ukraine had contributed to these results, to generate insights about what works (and does not), why and for whom.

Figure 4. The 3rd UNFPA CP 2018-2022 Intervention Logic



RELEVANCE

EQ1. To what extent are the objectives of the programme adapted to the needs of vulnerable women, including those who survived GBV, adolescents and youth, people at risk of HIV infection?

SUMMARY of FINDINGS. The efforts of UNFPA in Ukraine were relevant to the existing situation in the country and consistent with the needs of vulnerable women, including those who survived GBV, adolescents and youth, as well as representatives of vulnerable groups of the population. The UNFPA-supported interventions were appropriate for ensuring positive changes in lives of the targeted population groups, the selection of these target groups being consistent with the identified and evolving needs and national priorities. The relevance of the programme interventions, including the COVID-19 response and recovery efforts, was secured through multiple assessments and consultations with key stakeholders.

The analysis of the documents⁶⁸, meetings with the key stakeholders⁶⁹, and the online survey⁷⁰ show that the work of UNFPA in Ukraine has been consistent with national priorities, the selection of target groups was relevant to the existing situation in the country. Evaluation confirmed that the interventions supported by UNFPA were appropriate for ensuring positive changes in lives of the targeted population groups: vulnerable women (including those who survived GBV), adolescents and youth, and others. Moreover, the ongoing 3rd CP was built upon the experience and lessons learnt of the previous programme cycle, integrating its achievements and findings into the new design and implementation processes.

Key stakeholders interviewed acknowledged⁷¹ UNFPA ongoing efforts in situation analysis and research/studies of the pressing issues and needs of most vulnerable groups, as well as analysis-based planning, and flexibility in adapting to

unforeseen situations. The KIIs noted, “*all stakeholders were strongly involved in the planning of the new program*”⁷². Online survey respondents also confirmed that the CP activities were relevant to the needs of vulnerable groups of the population⁷³ and that in order to identify the relevant target groups and their needs, Country Office organized consultations⁷⁴ with the key stakeholders during the programming process and had conducted appropriate needs assessments, studies, and evaluations⁷⁵. The online survey also showed that UNFPA programmes adequately addressed the changing needs of beneficiaries as part of the COVID-19 response and recovery efforts⁷⁶.

In the **A&Y** domain, one of the main focus areas of the 3rd country programme included the issues of youth employment and ability of the young people to build and fulfil their potential in their community. The interventions of the UNFPA CO in this area were relevant to and in accordance with the UNFPA Strategic Plan 2018-2021⁷⁷. The Sustainable Development Goals for Children in Ukraine 2030 report as well State Of Youth In Ukraine 2019 report⁷⁸ developed with UNFPA participation identified the key areas of youth needs and presented a solid evidence base for developing programming in the A&Y in facilitating youth participation in political and public life of the country, career development and self realization, improving existing policies and strategies related to youth health, reforming the education system via competency development and capacity building for teachers, providing psychological support and teaching the key life skills and competencies to children and young people, as well as combating HIV among young people, and improving their reproductive health. A number of other studies provided more evidence to ensure the ongoing relevance of the programme interventions: survey of *Teachers and Parents Attitude to Comprehensive Sexuality Education*⁷⁹; survey on *How to choose a profession without prejudice: what the youth of the Azov region think*⁸⁰, survey on gender stereotypes on girls in sports⁸¹, a series of round tables in 2018 in preparation of Youth Pact 2025⁸²

Additionally, a number of studies focused on the sexual and reproductive health and HIV/STI prevention among both young people and vulnerable and targeted population (*International Sexual Health And Reproductive Health*⁸³ on-line survey, *Barriers to Accessing and Receiving Comprehensive Family Planning and Disability Services*⁸⁴, *Happiness Unlimited* inclusive discussions⁸⁵, *For Violence No Excuses*⁸⁶ report). However, although the needs of those at risk of HIV infection were considered at the level of Programme objectives, the activities addressing these needs were rather modest⁸⁷ due to the limited resources and the changing priorities of the governmental partners, and they focused on the local or online initiatives. The same can be said on the activities aimed at young people with disabilities and young targeted population.

Most of the interviewed key stakeholders recognized that UNFPA support was preceded by intensive consultations. Several interviewees specifically underlined that UNFPA supported both consultations and surveys among the young people themselves, and facilitated dissemination of their opinions among decision makers (educational institutions, local and national authorities etc.)⁸⁸. A number of KIIs⁸⁹ pointed out a need for additional focus on interventions aimed at the inclusion of different vulnerable groups, especially, among the young population, such as people with disabilities, those living in the conflict zone, or coming from vulnerable backgrounds. The need for additional focus on reproductive health and elimination of preventable maternal deaths on the part of UNFPA specifically was also named by several KIIs⁹⁰ as an area for additional focus for the future.

In the **GE & GBV** domain, the 3rd UNFPA country programme focused on reducing gender inequalities and combating GBV. Evidence of the country's needs, which confirmed the relevance of the CP focus, was reflected in the situation analyses and was synergized with the national strategies on ensuring gender equality, defined in a number of national strategic documents: Decree of the President of Ukraine *On the Sustainable Development Goals of Ukraine until 2030*⁹¹, *State Social Program for Ensuring Equal Rights and Opportunities for Women and Men for the Period until 2021*⁹², *The National Action Plan on the Implementation of Recommendations* set out in the Concluding Observations of the UN CEDAW to the *Eighth Periodic Report of Ukraine on the Implementation of Convention on the Elimination of All Forms of Discrimination against Women for the Period until 2021*⁹³, *The State Social Program to Prevent and Combat Domestic Violence and Gender-Based Violence until 2025*⁹⁴. A number of corresponding national laws were adopted and amended; the new Electoral Code of Ukraine was adopted, introducing 40% gender quotas for nomination by political parties of their candidates for the Ukrainian Parliament. Gender issues were included in the Government's Action Plans for 2018 and 2019.

A continuous consultation process with governmental agencies, CSOs, some public events on gender issues supported by UNFPA allowed to identify the key areas of target groups needs and collect evidence base for developing programming in Gender and GBV Prevention and Response spheres. A number of reviews and studies were also conducted during the period of the 3rd UNFPA CP cycle, both by the UNFPA (“*Masculinity Today: Men's Attitudes To Gender Stereotypes and Violence Against Women*”⁹⁵; “*Gender Equality and Response to Domestic Violence in the Private*

*Sector of Ukraine: Call for Action*⁹⁶) and other stakeholders (*National Voluntary Review of Achievement of the Sustainable Development Goals in Ukraine*⁹⁷, *The SDGs 2020 Monitoring Report for 2015-2019*⁹⁸, *Ukraine's Common Country Analysis (CCA) 2021*⁹⁹) ensuring the ongoing relevance of the CP activities. According to the KIIs, the key aspects of the program strategies ensured political dialogue and development of the national capacity to meet the needs of the target groups at the national, regional and municipal levels: “We have a high level of trust in UNFPA. Their specialists are real professionals. The advantage of UNFPA is that they strive to carefully study the region, the community in which they plan to work. This allows us to take into account the real needs we have”¹⁰⁰.

EQ2. To what extent are the objectives of the programme, aligned with the national development priorities and policies, UN-Ukraine Partnership Framework (2018-2022) as well as with interventions of other development partners and with the UNFPA strategic plan (2018-21) in particular goals, principles, programme mode of engagement?

SUMMARY of FINDINGS. The 3rd UNFPA Ukraine CP 2018-2022 was completely in line with the priorities set by international and national policy frameworks (including national 2030 Sustainable Development Goals, the national sustainable development strategy, etc.), the Ukraine-United Nations Partnership Framework for 2018-2022. The country office found synergies with relevant initiatives of other development partners on the priorities of the CP key components. The UNFPA CP is aligned with the goal of UNFPA 2018-2021 Strategic Plan by addressing two UNFPA outcomes. The CO operationalized its interventions through various combinations of five modes of engagement to provide tailored solutions to meet national needs and achieving defined outcomes through national ownership and cost-effective synergies, with civil society and academia, United Nations organizations and development partners as well as with partnerships with the media and the private sector. UNFPA continued promotion and use of national implementation as the preferred mode of delivery of the programme and employing universal, inclusive, human-rights based approach, three transformative results as well as integrated principles of equality, ‘leave no one behind’, and inclusivity.

UNFPA Ukraine 2018-2022 country programme was in line with the priorities set by **international and national policy frameworks**. The CP for Ukraine was developed with the participation of government counterparts, academia, civil society and international development partners, taking into consideration the general framework provided by the draft national 2030 Sustainable Development Goals, the Ukraine-United Nations Partnership Framework for 2018-2022, and the national sustainable development strategy, Ukraine 2020 as well as the Concept of the State Programme on ensuring equal rights and opportunities of women and men (2012) and the National Action Plan on United Nations Security Council resolution 1325 (2016). UNFPA aligned its 3rd CP with the Ukraine’s commitment to achieving SDGs, specifically Sustainable Development Goals 3, 4, 5, 8, 10, 11 and 16: i) *Good health and well-being*; ii) *Quality education*; iii) *Gender equality*; iv) *Decent work and economic growth*; v) *Reduced inequalities*; vi) *Sustainable development of towns and communities*; and vii) *Peace, justice and strong institutions*. Moreover, Ukraine has ratified the main international conventions on women's rights, gender equality (except the Istanbul Convention), and is a leader in the Eastern Europe region in developing a national legal framework on women's rights in accordance with international standards. Online survey respondents confirmed that target groups for UNFPA-supported interventions were consistent with identified and evolving needs and national priorities¹⁰¹.

UNFPA country programme was aligned with the **UN-Ukraine Partnership Framework (2018-2022)**. As it was specified earlier, the 3rd CP strategic outcomes and country programme areas and outputs contribute to achievement of UNDAF outcomes and national priority and development goals guide UNFPA strategic outcomes and country programme areas and outputs. It was expected that implementation of the 3rd UNFPA Country Programme would contribute to the achievement of all four 2018-2022 UNDAF outcomes. The UNPF gives special attention to the needs and aspirations of the most marginalized and vulnerable populations in Ukraine that is aligned with the UNFPA approach as well. This approach builds on the core SDG concept of equitable development for all, ‘leaving no one behind’ and the key message to ‘reach the furthest behind first’. Implementation of the UNPF considers the UN’s strengths that include UNFPA ones as well. These include: i) advocacy for gender equality and full human rights for women and all vulnerable groups; ii) support to the development of data for evidence-based decisions in key areas; iii) multi-sectoral approaches; iv) improvements in social service access and quality; and v) the development of a more dynamic and equal partnership between government and national civic groups and international partners. Also, UNFPA collaboration with key actors in UNFPA-related programme areas such as UN Women, UNICEF, UNDP, UNAIDS guided by the spirit of Delivering-as-One and Sustainable Development Agenda to ensure that their programmes and activities are clearly linked to national

development priorities and outcomes jointly agreed with the GOU. In addition, the Delivering-as-One principle makes an important contribution to reaching out the most vulnerable population groups and assisting Ukraine in meeting its international Conventions and frameworks, including CEDAW, ICDP, etc. UNFPA led the GBV Subcluster as coordinating actor in humanitarian context and Youth Working Group, contributed to the work of UN GTG and proactively participated in HRDDP taskforce, UNPF Results Groups, OMT, etc. and in joint programming in adolescents and youth, gender-based violence, gender equality, and data collection and analysis. Online survey respondents confirmed that the UNFPA programmes are aligned with the national development priorities and policies, UN-Ukraine Partnership Framework (2018-2022) as well as interventions of other development partners¹⁰². Once planned in the 3rd CP, the UNFPA Ukraine successfully cooperated and found support from bilateral and multilateral donors (such as the Governments of Canada, Estonia, Sweden, the United Kingdom, and the European Union) on the priorities of the CP key components overlapping with those of the development partners/ donors mentioned above. The country office does it through synergies with relevant initiatives of other development partners, specifically in the area of combating gender-based violence in Ukraine at subnational level.

As such, the 3rd Country Programme was completely aligned with the goal of **UNFPA 2018-2021 Strategic Plan**. The goal of the UNFPA strategic plan 2018-2021¹⁰³ is the same as that of the previous UNFPA strategic plan 2014-2017 as it remains relevant. Based on the recommendations of evaluation of the previous CP, the 3rd CP addresses challenges in the area of sexual and reproductive health that were not achieved, focuses on the investment in young people, including through healthy lifestyles and employable life skills, and ensures that gender be more systematically embedded in all areas of work, particularly by making it an integral part of other sectoral policies, and all barriers to women’s full participation in social, economic and political life, including an end to violence against women, are being eliminating. The CP interventions in Ukraine is operationalized through five modes of engagement proposed in the UNFPA Strategic Plan 2018 – 2021, including advocacy and policy dialogue, at national and subnational levels, knowledge management, particularly on good practices and the adoption of international norms and standards, along with limited capacity development to key counterparts, particularly related to the lingering effects of the humanitarian crisis, and partnerships and coordination. The CO effectively interlinked modes of engagement and applied them in various combinations to provide tailored solutions to meet national needs. To achieve defined outcomes UNFPA Ukraine implemented its programmes through national ownership and cost-effective synergies, with civil society and academia, United Nations organizations and development partners, and built on the momentum of national reforms and work through national coordination mechanisms. Moreover, UNFPA established partnerships with the media and the private sector, based on shared values and comparative advantages. The country office continued promotion and use of national implementation as the preferred mode of delivery of the programme.

In addition to addressing two UNFPA outcomes of its strategic plan in an integrated manner guided by country priorities, the United Nations Development Assistance Framework, the revised business model and UNFPA modes of engagement, UNFPA CP employed universal, inclusive, human-rights based approach, three transformative results as well as integrated principles of equality, ‘leave no one behind’, and disability inclusion.

EFFECTIVENESS

EQ3: To what extent have the intended programme OUTPUTS been achieved?

SUMMARY OF FINDINGS. The 3rd CP is still ongoing, and it had nearly 15 month to its end as of time of evaluation. Evaluation showed that out of eight indicators for three outputs, two were achieved and the other six are in progress to be achieved by the end of CP. Under the **Adolescents and Youth** component, none of the three output indicators had been achieved at the time of evaluation. The substantial progress was made under the second output indicator: *Number of municipalities with operational platforms/mechanisms that address youth health and well-being*, reaching 55% of the target value, and there is a high probability that this target will be achieved by the end of the CP. Indicator 1, *Share of new youth policies and programmes at national and sub-national levels based on data evidence*, was not measured yet, but the evidence collected in the course of evaluation demonstrated that progress under this indicator was made, and three national level policy documents on youth were approved based on the data and evidence that UNFPA contributed to. This indicator could be achieved by the end of the CP. The third indicator under A&Y component, *Share of new policies regarding sexual and reproductive health, at national and subnational levels, that reflect the needs of people with disabilities*, need substantial progress to be made in 2021-2022 in order to be achieved by the end of the CP. **GEWE:** The evaluation concluded that 2 out of 5 GEWE output indicators had already been achieved. The remaining indicators are process indicators, and more time is required to achieve them. The main achievements within the GEWE programme component included: national standard for gender review of school

textbooks developed, regional coordination bodies on multi-sectoral prevention and response to GBV established; new community-based initiatives and programmes on women’s empowerment and participation and male engagement implemented by municipalities; studies on gender stereotypes, gaps and inequalities conducted. In addition, it is worth mentioning that the results achieved by the CO by September 2021 would not have been possible without the CO’s effective communication campaigns, proactive partnership building and resource mobilisation efforts.

ADOLESCENTS and YOUTH COMPONENT (A&Y). The status of achievement of the output indicators under the 3rd UNFPA CP 2018-2022 as of the middle of 2021 is presented in Table 8.

Table 8. Status of achievement of output A&Y indicators of the 3rd UNFPA CP, 2018-2022

<i>Indicators</i>	<i>Base-line</i>	<i>Target/ Current status</i>	<i>Remarks</i>
Output 1 of Outcome 2: Evidence-based and inclusive national and subnational policies and programmes for young people that advance sexual and reproductive health, reduce risks and vulnerabilities, expand opportunities, and promote youth participation for the full realization of their potential, including in humanitarian settings			
Indicator 1: Share of new youth policies and programmes at national and sub-national levels based on data evidence regarding youth demographics, needs of young people and inequalities in exercising their rights	0%	100%/ in progress	The latest available UNFPA annual report of 2020 does not provide measures for this indicator. It is stated that the assessment of the indicator is postponed till 2021. Documents review and results of interviews provided evidence that the indicator could be achieved by the end of CP.
Indicator 2: Number of municipalities with operational platforms/mechanisms that address youth health and well-being and ensure youth participation in elaboration, implementation, and monitoring of local development programmes	1	20/ 11 – in progress	The latest available UNFPA annual report for 2020 has 4 municipalities as a value for this indicator. However, documents reviewed demonstrated that in 2021 the value was increased to 11 municipalities implementing the Youth Well-Being Index. Based on the results of interviews and document review, the evaluation team concluded that there is a high probability that this indicator will achieve its target by the end of CP.
Indicator 3: Share of new policies regarding sexual and reproductive health, at national and subnational levels, that reflect the needs of people with disabilities	0%	100%/ in progress	The evaluation did not find evidence of adoption of new policies regarding sexual and reproductive health at the national or subnational levels that reflect the needs of people with disabilities. This indicator will probably not be achieved unless substantial progress is made in 2021-2022.

Because the 3rd CP is still ongoing, it is too early to evaluate whether the output indicators have all been achieved. Some output indicators are difficult to evaluate by the nature of not meeting the SMART criteria (Specific, Measurable, Achievable and Attributable, Relevant/ Realistic, Time-bound/ Timely/ Traceable/ Targeted). Nonetheless, after reviewing annual reports, and triangulating it with information from other documents¹⁰⁴ and from KIIs, it is possible to evaluate certain achievements of the Country Program accomplished during three years of the programme implementation:

Output 1 of Outcome 2. Within Indicator 1, the following results were achieved:

- UNFPA contributed to the development of several national-level youth policies, which were approved by the Government of Ukraine, namely: *National Strategy of State Youth Policy in Ukraine until 2030*¹⁰⁵ (approved 12.03.2021); *State Programme Youth of Ukraine 2021-2025*¹⁰⁶ (approved 23.12.2021), and Law of Ukraine 1718 *On the Fundamental Principles of Youth Policy*¹⁰⁷ (approved 27.04.2021). Both National Strategy and Youth Programme were developed based on the evidence provided by the *State of Youth in Ukraine 2018, 2019*¹⁰⁸ reports developed with the participation of UNFPA. As the CO led the UN Youth Group, UNFPA coordinated the UN Agencies’ inputs to the new documents and ensured that the new policies were in line with UN recommendations and priorities.
- National Programme *Pact for Youth 2025* implemented by CSR Ukraine and funded by UNFPA was signed by the Ministry of Youth and Sports, the Ministry of Education and Science, the Ministry of Economy, Trade and Agriculture, and 15 large employers on 23.09.2020. The *Pact for Youth* was widely recognized by stakeholders interviewed¹⁰⁹ as a successful initiative addressing the crucial need of expanding career opportunities for youth. Its success was built on achievements of the previous *Ukrainian Pact for Youth 2020* that was launched in 2016 by UNFPA, CSR Ukraine in partnership with Ministry of Youth and Sports. According to UNFPA report,

149 employers joined PACT 2020, and as a result 45,000 internships for youth were provided; about 100 forums, round tables and trainings were conducted engaging 3,000 participants (young people, educators, employers)¹¹⁰.

- In 2020, UNFPA conducted the needs assessment to update the training module *Healthy Lifestyle of Youth under COVID-19 of the Youth Worker Program* (a training program for municipal workers and youth centres supported by Ministry of Youth and UNDP aiming to improve capacity of local specialists who develop and implement youth programs). Municipal toolkit *Youth Policy in Ukraine: Analytics, Policy, Practice* has been jointly developed with the Ministry of Youth and Sports of Ukraine and UNICEF¹¹¹.
- Interviews with representatives of municipalities implementing the *Youth Well-Being Index* (described in more details under Indicator 2) demonstrated¹¹² that this tool provided evidence regarding youth demographics, and the needs of young people. Data collected with the help of this tool were used to develop municipal programs for youth that were funded from the local budget. That is why this initiative contributes to both Indicator 1 and Indicator 2 of the Outcome 2.

Within Indicator 2, the following achieved results include. On a municipal level, UNFPA supported a joint program *Youth Friendly Municipalities* in a partnership with UNICEF, the Ministry of Social Policy of Ukraine, the Ministry of Youth and Sports of Ukraine, the All-Ukrainian Association of Ukrainian Cities, and other national stakeholders. In 2018, UNFPA contributed to the *Youth Friendly Municipalities* partnership with launching *Youth Well-Being Index* (YWBI) online platform. Starting from one pilot city in 2018, the initiative was expanded to 11 municipalities¹¹³ in 2020. These municipalities implemented the YWBI at least once and conducted the survey among youth using the YWBI platform and approach. This initiative allowed local authorities to collect and analyse information about youth in the community, provided evidence for municipal decision-making, budget allocations, and improve youth participation in local decision-making. The initiative was positively assessed by the interviewed stakeholders¹¹⁴. However, the evaluation showed that its impact on youth health and well-being in partner municipalities is indirect and delayed. To achieve stronger impact the YWBI initiative should become a regular instrument used by local government for evidence collection that would inform local youth programmes and policies. Most of the supported municipalities (8 out of 11) used it only once. Further support of the partner municipalities is needed to ensure ownership and regular application of this tool.

Evaluation showed that within Indicator 3:

- Consistent efforts to introduce national curricula on *Comprehensive Sexual Education* did not bring their fruits yet, despite being grounded on convincing evidence from the study *Awareness and Attitudes of Teachers and Parents to Comprehensive Sexuality Education* conducted by UNFPA in 2020, and constant communications with GoU counterparts and other stakeholders. The Ministry of Education representatives remain optimistic on the perspective of this effort, confirmed its high relevance and stayed interested in further cooperation¹¹⁵.
- Progress on the development of policies targeted at vulnerable populations and people with disabilities was limited so far. Several implemented initiatives in this area include: i) an online course on combating HIV stigma and discrimination for health specialists; ii) UNFPA support to the *Friendly Doctors Maps* project and chatbots allowing key population assess the HIV risk and refer to HIV testing services; iii) a pilot project on HIV testing of GBV victims in Odesa oblast; iv) an online *Health Challenge* initiative for youth, v) support of the model of empowerment for teenagers living with HIV in four cities (Cherkasy, Kryvyi Rih, Mykolayiv and Kremenchuk) via vulnerable youth movement on HIV/SRH (with IP Teenergizer); and vi) inclusive football training for girls with intellectual disabilities.

Activities in the following activity areas within three **CROSS-CUTTING ISSUES** were conducted to contribute to the achievements within A&Y area.

COMMUNICATION ACTIVITY. UNFPA CO put significant efforts to improve overall outreach, visibility and recognition of the brand and mandate of UNFPA in Ukraine through advance planning and ongoing monitoring of the communication activities.¹¹⁶ CO cooperated closely with other UN agencies under the umbrella of the UN communications group by providing mutual communication support of initiatives and activities¹¹⁷.

- In 2020, the epidemics of COVID-19 forced the CO to adjust communications and advocacy campaigns swiftly by moving them mostly to the digital sphere and closely working with mass media, and at the same time bypassing more traditional media, such as outdoor advertising campaigns¹¹⁸. Despite the challenges, the number of mentions in the press and the level of audience engagement have been steadily increasing¹¹⁹. In the A&Y domain, communication activities were comparatively scarce; in 2018, they were mentioned in 288 media publications¹²⁰, in 2019 – in 383¹²¹, and in 2020 – in 481¹²².
- **Pact for Youth Initiative.** Both the results of *Pact for Youth-2020* and plans for *Pact for Youth-2025* were communicated via traditional mass media, social networks, webpages of the UNFPA Ukraine and the initiative

partners (Ministry of Youth, Ministry of Education and Science, Ministry of Economics, CSR Ukraine). Additionally, the CO prepared six short videos on success stories of young people who found a job and started their career in private companies that had signed the Pact. The videos were published in ShoTam media platform on Facebook and Instagram and received 226K views¹²³.

- Other all-Ukrainian communication activities included an online **Healthy Challenge** in 2019 and 2020 (in partnership with the Ministry of Education and Science of Ukraine, the Ministry of Youth and Sports of Ukraine, the National Centre of Public Health of the Ministry of Health of Ukraine) and an online Marathon for International Youth Day 2020.
- Communication support was provided to the municipalities conducting the **Youth Well-Being Index**. A joint branding for the initiative was developed and used in all the cities for printed materials (outdoor advertising, posters, rollups, flyers and stickers). Municipalities were also provided with a promo on social media for young people (14-35 y.o.) inviting them to participate¹²⁴.
- Complex communications were provided for several initiatives: **ProSkills** and **Myropolis** - for each project, its own recognisable branding was developed and fully integrated it into the events and all visual materials,¹²⁵ as well as a number of implementation instruments¹²⁶; communication support for Skills Labs included development of the online course for the future trainers.
- Comprehensive sexuality education – a national survey of teachers’ and parents’ opinion on CSE was conducted in 2020, its results were communicated on the national Forum on CSE, via traditional media, and on social media. A set of illustrated infographics was created for social media.
- In lieu of rising SRH awareness, an online educational campaign was implemented on Facebook and YouTube with the expert support of doctor Natalia Silina¹²⁷.

PARTNERSHIP BUILDING. In the A&Y sphere, UNFPA CO was working on joining efforts of business, government and educational sector in order to create sustainable partnerships on the national and local levels.

- With the A&Y initiatives, UNFPA participated in a number of joint UN partnerships, namely: i) partnership within the framework of the UN Recovery and Peacebuilding Programme¹²⁸, implemented by UNDP, UN Women, UNFPA and FAO - (*Myropolis*, *SkillLabs*, *ProSkills*); ii) partnership within UNAIDS framework for combating AIDS/HIV and promoting SRH; and iii) In 2018, UNFPA CO started a partnership with UNICEF within the framework of Youth-Friendly Cities, introducing to it the Youth Well-Being Index methodology.
- At the national level, the CO established and maintained partnership ties with several governmental agencies – the Ministry of Youth and Sports, the Ministry of Social Policy, the Ministry of Education and Science, the Institute of Education Content Modernization, the Ministry of Economics. Within the framework of the *Pact4Youth* initiatives, working partnerships were also established with the business signatories of the Pact.
- At the municipal level, partnerships were established with 11 municipalities participating in the *Youth Well-Being Index*, and cooperation agreements with the local governmental authorities were signed as an integral part of the initiative¹²⁹.
- A partnership with *Special Olympics* Ukraine and *FC Shakhtar* was strengthened within the joint project on introducing girls and specifically girls with intellectual disabilities to football¹³⁰.
- Partnership with dr. Natalia Silina in sexual and reproductive health was aimed at raising awareness among women about SHR.¹³¹

MOBILISING RESOURCES. In terms of raising external resources, UNFPA Ukraine worked on several ‘fronts’, namely: i) maintaining partnerships with international donors (e.g. EU, Governments of the UK, Sweden, Estonia, Canada); ii) pursuing partnership opportunities with other UN agencies in order to achieve cost-effective synergy for the delivery of planned results¹³²; and iii) securing financing at the national and local levels from the State (national and local budgets) and private (business) sources. COVID-19 epidemic presented a significant obstacle by bringing changes and new challenges to and diverting the resources of both international donors, and Ukrainian governmental agencies/authorities. Within the business sector, it led to cuts or closures of the financing of CSR-related activities and therefore had negative impact on participation/partnerships of business companies in the UNFPA initiatives¹³³.

Evaluation respondents identified the following **challenges** in achieving targeted indicators for two outputs of Outcome 2:

- Political instability – structural changes and reforms in the new Ukrainian government and high turnover of public authorities, especially leadership changes in the key ministries responsible for youth employment and youth policy, as well as changes in the national priorities, resulted in postponing of the approval of policies that UNFPA co-developed with other partners, and delays / interruptions in the cooperation process.
- COVID-19 pandemic caused delays in implementation of most of the activities due to change of counterparts’

priorities, limited staff capacity to deliver services on time on the part of UNFPA contractors; it triggered the need to adapt most of the activities to new formats quickly thus escalating greater use of new communication tools and platforms as means of communication; it also introduced new technical restraints – disruption of Internet connection, no possibility to teach practical skills, weak level of IT literacy among state employees and education professionals, and it cut the ability to find/establish new business partnerships and collaborations, lower levels of commitment among participants of online activities, high numbers of drop-outs. Overall, COVID-19 pandemic was a major challenge to most of the activities planned for 2020 and 2021. Involving new municipalities in the YWBI project remained a challenge with a greater number of municipalities being initially interested in the project but dropping out at a later stage due to the COVID-related change of priorities and other additional factors.

- Leadership changes in the Ministry of Health, and high turnover of the Ministry staff, combined with shifted priorities of the national health system to respond COVID-19, constrained significantly the UNFPA ability to pursue the increased access of young people to quality SRH services¹³⁴
- Economic instability is considered by the key respondents to be a challenge as well as a potential risk factor for the future sustainability of the project with shared financing, especially the long-term projects (such as Youth Well-Being Index and Pact4Youth). Economic instability both complicates the search for new partners and threatens the long-term commitment/ownership of the initiatives by the partners.
- Insufficient awareness, lack of knowledge/training and of commitment from educational professionals, especially management of educational institutions, slowed down implementation of initiatives¹³⁵, and in some cases it led to formal participation in the activities and coercion by administrations to involve students in them negatively affecting the outcomes.
- Competition/duplication of functions between UN agencies was considered an additional challenge by some of the interviewed stakeholders¹³⁶.

GENDER EQUALITY and WOMEN’S EMPOWERMENT (GEWE). Status of achievement of the GEWE output indicators of the 3rd UNFPA CP 2018-2022 as of the middle of 2021 is presented in Table 9.

Table 9. Status of achievement of output GEWE indicators of the 3rd UNFPA CP, 2018-2022

<i>Indicators</i>	<i>Baseline</i>	<i>Target/Current status</i>	<i>Remarks</i>
Output 1 of Outcome 3: Strengthened national and subnational partnership frameworks in place for reducing gender inequalities in social, economic and political spheres of life			
Indicator 1: National standard for gender review of school curricula developed	No	Yes/Yes	The indicator has already been achieved. <i>Note. There is some differences on terminology used in the CP and by the MES (e.g. antidiscrimination expertise v. gender review) as official language of GOU documents avoids the term ‘gender’ and gender review is part of wide ‘anti-discrimination expertise’¹³⁷ term.</i>
Indicator 2: Number of municipalities implementing new community-based initiatives and programmes on women’s empowerment and participation and male engagement	0	20/ 8 (2021)	Indicator in progress. Community-based initiatives and programs include TatoHubs and establishment of branches of STEM Girls. However, the latter has not been institutionalised yet.
Indicator 3: Number of new studies on gender stereotypes, roles, gaps and inequalities to inform policy and decision-making processes	0	2/ 7 (2021)	The indicator has already been achieved. 7 studies on gender stereotypes, gaps and inequalities were conducted
Output 2 of Outcome 3: Strengthened national and subnational partnership frameworks in place for reducing gender inequalities in social, economic and political spheres of life			
Indicator 4: Share of regions implementing inter-sectoral coordination mechanisms for gender-based violence prevention and response	20%	100%/ 60% (2021)	This indicator has been partially achieved. <i>Note: Important to clarify the term ‘region’ – 24 oblasts of Ukraine or only 12 regions targeted by UNFPA works. The ET assumed that it is 25 oblasts of Ukraine as the inter-sectoral coordination mechanism is now a requirement of the national legislation which was developed with UNFPA assistance.</i>
Indicator 5: Number of municipalities (with 200,000+ population) that include gender-based violence response in their development policies/programmes and	2	20/15 (2021)	This indicator has been partially achieved. Response measures included allocation of resources to provide services (shelters, safe spaces, psycho-social assistance); established and capacitated multi-sectoral coordination; and

allocate resources to provide services (shelters, safe spaces, psycho-social assistance)			development of costed Action Plans on multi-sectoral response and prevention of GBV. ¹³⁸
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The 3rd UNFPA CP 2018-2022 is ongoing, so not all indicators have been fully achieved yet. Some indicators were process indicators, and more time is required to achieve them. The evaluation team concluded that two indicators have already been achieved out of five. Document analysis, key informants' interviews and online survey shows the following achievements of 3rd UNFPA CP within gender component by output indicators.

Output 1 of Outcome 3. Within Indicator 1, the following results were achieved:

- With UNFPA support, EdCamp Ukraine have designed a methodology of anti-discrimination examination of school curricula and textbook that includes gender review¹³⁹. In November of 2018, the MES approved the Order #1183 *On Approval of Instructional and Methodological Materials for Conducting Expert Examinations of Electronic Versions of Draft Textbooks (#1183)*¹⁴⁰ that included anti-discrimination requirements for textbooks, and defined criteria for their examination. Therefore, this Order established expert examination of school textbooks as mandatory. In 2020, the MES approved the *Procedure for Providing Stamp Signature Textbooks and Curriculum*¹⁴¹ that introduced obligatory anti-discrimination procedures. NOTE: The CO called this indicator as 'national standard for gender review of school curricula'. However, official language of GOU documents avoids the term 'gender' and gender review is part of wide 'anti-discrimination expertise'¹⁴² term.
- Jointly with the MES, IECM, EdCamp Ukraine and CSR Ukraine, UNFPA conducted several events to provide the contribution into update of the school curriculum free from gender stereotypes and discrimination issues as well as to build a network of capacitated teachers applying gender lenses in their work, including: i) 4 Gender-sensitive Hackathons for 165 STEM school teachers from 14 regions were conducted in 2019 with the aim to prevent career choices dictated by gender stereotypes¹⁴³; ii) the 2019 All-Ukrainian Conference was held on the best gender sensitive STEM lessons where 10 lessons were identified and recommended as best practices¹⁴⁴; iii) the 2020 National Gender Sensitive Digital STEM Lesson contest¹⁴⁵ was organized; and iv) the 2020 Anti-Crisis National Online (Un)Conference *High Five for Education!* that was attended by 10 thousand educators. During the conference, an expert and teacher session *Education Without Stereotypes*¹⁴⁶ with the participation of UNFPA Honorary Ambassador Yefrosinina took place;
- With the CO support during 2018-2020, EdCamp carried out different activities, including: i) development of an online course *New Ukrainian textbook: Methods and tools for assessing the quality of educational literature for the New Ukrainian School* that was attended by 258 experts from the Ukrainian Institute for Educational Development and who received certificates about it¹⁴⁷; ii) conference in Kharkiv in July 2019 in cooperation with the MES, where more than 1,000 Ukrainian teachers from primary and secondary education benefited from workshops on free from stereotypes career choice, lectures on sexual education at school, promotion of non-violent communication and antidiscrimination approach, and a round table discussion with the MES ¹⁴⁸; iii) training of 860 teachers as anti-discrimination and gender experts for State Service for the Quality of Education of Ukraine¹⁴⁹; and iv) other interventions that involved 40,000 teachers aiming at providing knowledge about creating educational content without gender stereotypes. These activities laid out a ground for establishment of the teacher network¹⁵⁰.

Output 1 of Outcome 3. In achieving indicator 2, the CO conducted activities within two major interventions, namely TatoHubs and establishment of STEM Girls branches. The following results were achieved within these initiatives as of the time of evaluation.

TatoHubs and events for dads and families included:

- TatoHubs initiative catalyzed a shift of traditional gender roles in the family by helping men to build stronger relationships with their children and to be more involved in the process of caring for them. TatoHubs (clubs for dads) include an important educational component, namely classes in child psychology, partnerships, stress management, nonviolent communication, overcoming gender stereotypes. Clubs also hold separate classes for future parents. As of September of 2021 TatoHubs were established in 8 municipalities, namely: Kyiv, Vinnytiya, Odesa (within EU4GE project); Berdiansk, Myrnohrad, Kramatorsk, Troitsk, and Rubizhne and Zaporizhzhia within UNDP-led RPP project¹⁵¹. It was planned to open 4 more TatoHubs by the end of 2021.
- The resource package for TatoHubs initiative was developed jointly with UNFPA RO and Promundo (USA) with adaptation to the local context¹⁵².
- In Ukraine, TatoHubs were established by local CSOs in partnerships with local authorities with UNFPA support and accompanied by a massive awareness raising campaign on paternity leave and behaviour changing campaign on social norms change around positive masculinity (4 Hands Happiness);

- With the CO support, *Fishermen's Club of Ukraine - UAFishingClub* launched the initiative *Ecodad Can Do Anything*¹⁵³, which included: i) a fusion of 10 family teams from Donetsk, Luhansk and Zaporizhzhia regions; and ii) a family fishing festival in Rubizhne, Luhansk region, which was attended by 100 participants. Moreover, entertaining and educational activities around Fathers Day were conducted aimed at promoting responsible fatherhood;
- Within RPP in 2020 UNFPA organized a 2-month distance learning course on *Strategic Communication for Change*¹⁵⁴ for 24 representatives of local CSOs from Donetsk, Luhansk and Zaporizhzhia oblasts that are engaged or plan to be engaged in developing responsible fatherhood. As a result of the training, two local information campaigns *#SuperTato* and *TurboTato* received technical, expert and mentoring support that helped to involve 322 people from Zaporizhzhia, Donetsk and Luhansk regions to various offline and online events. Another information campaign included a video contest *#SuperDadDoManEverything*, presentation of 5 video stories of parents, and initiation of an online flashmob for Father's Day covered 51,047 users of social networks;
- UNFPA held an online school on responsible fatherhood for 50 dads from Zaporizhzhia region under the supervision of qualified psychologists;
- In 2021 in the framework of RPP (EU funded UNDP-led programme) five Father (Tato) Hubs in Donetsk, Luhansk and south of Zaporizhzhia regions have been actively implementing offline and online education and communication activities by targeting more than 1000 active fathers with children and young boys on a regular basis. The most prominent results of implementation of men-engagement activities within RPP included: i) incorporation of men-engagement and responsible fatherhood action to the Regional target program of development of family, gender policy and human trafficking in Donetsk region 2021-2025 with allocation of 379,000 UAH¹⁵⁵ in the regional budget and 2,200,000¹⁵⁶ UAH in the communities' local budgets for responsible fatherhood activities. Moreover, the Odesa city programme (2022-2024) foresees 350,000 UAH¹⁵⁷. It will allow to launch, at least, 4 new Father Hubs in 2022 in partnership with regional and local authorities; and ii) efficient cooperation with Luhansk region police resulted in the opening of Police Father Hub in Rubizhne together with local community of ATO veterans, work of police psychologists with fathers perpetrators and organizing photo exhibition of fathers policemen with their children.
- During 2021 Ukraine substantially accelerated in the men engagement agenda. Bolstered by the Biarritz partnership framework, UNFPA expertise and advocacy contributed to the Parliament's adoption of the Law No 1401-IX to ensure equal opportunities for mothers and fathers to care for their children. The law sets a basis for improving men's caretaking practices and removing legislative gaps, which restrict a man's right to parental leave. Among others the law foresees introducing a mandatory 14-day paid paternity leave for fathers at the birth of a child as well as an equal right of each parent to childcare leave until the child reaches the age of 3 and an additional leave in case of child's illness or disability.

As a result of grassroots activities implemented by UNFPA supported TatoHubs united 3,400 current and future dads all over Ukraine in building closer relations with their children and were sensitized on child upbringing, psychology, reproductive health, children's safety, spending joint meaningful leisure time with kids, child psychology, first aid, reproductive health, financial literacy for kids through joint edutainment activities for dads and kids, thematic education sessions, individual psychological consultations and live streams for dads and future dads.

STEM Girls program was aimed at developing the knowledge and capacity of girls, as well as promoting STEM activities among adolescent girls, and strengthening girls' motivation to disseminate information about STEM. As of the time of evaluation¹⁵⁸ there were 16 active chapters of STEM Girls in the following local territorial communities: Velykyi Mytnyk (Vinnytsia Oblast), Goloby and Lokachyn (Volyn Oblast), Pokrov (Dnipropetrovsk Oblast), Ukrainsk and Kramatorsk (Donetsk Oblast), Melitopol and Oleksiyivka (Zaporizhzhia Oblast), Ivano-Frankivsk, Pomichna (Kirovohrad Oblast), Yuzhnoukrainsk (Mykolaiv Oblast), Mykolaiv, Konotop (Sumy Oblast), Kharkiv, Rakivka Village (Kherson Oblast), Nova Kakhovka. Representatives of those 16 branches of STEM Girls took part in the program of STEM Challenges Girls Change the World and the webinar course on blogging *How to communicate about STEM*. In the jointly with UNICEF developed recommendations to the MoYS, it was advised to assist certain Chapters of STEM Girls (that expressed their wish) to be institutionalized as CSOs. This form will allow chapters of STEM Girls (registered as CSOs) cooperate and collaborate with local governments and local self-government; raise resources to their activities from various sources, including local budgets. With completing of this task, the target of Indicator 2 will be met.

Output 1 of Outcome 3. As for achievement of Indicator 3, the CO supported/ conducted/ presented 7 research papers, including:

1. 2018 *Masculinity Today: men's attitudes to gender stereotypes and violence against women in Ukraine*¹⁵⁹ special research initiated by UNFPA to fill information gaps in understanding behavioural attitudes and men's

attitudes toward gender equality and violence. The research and publication of the study report was carried out by the Ukrainian Centre for Social Reforms at the request of UNFPA with the assistance of UK DFID applying IMAGES, Promundo (USA) methodology.

2. 2019 *Gender Equality and Response to Domestic Violence in the Private Sector in Ukraine: Call for Action*¹⁶⁰ research was completed by the CO in collaboration with the CSR Centre with the financial support of the UK government. The study was conducted to identify the most pressing gender issues that Ukraine's private sector employees may face and to look for possible business responses to these challenges. The study addressed issues of equal treatment for women and men working for companies in Ukraine, and examined the possibility of combining professional and parenting responsibilities, as well as the effects of domestic violence on the survivors' professional lives. This research is a good example of South-South Cooperation with UNFPA Turkey CO leading the *Business Against Domestic Violence* (BADV) activity and a similar research there. As a follow up to the research in Ukraine a guide was developed for HRs/CEOs on *How business can take the lead in promoting Gender Equality and combating domestic violence?* in order to sensitize private sector representatives on gender equality and means to combat domestic violence.
3. 2020 *How to Choose a Profession Being Unbiased: Opinions of the Youth from Pryazovia*¹⁶¹ sociological survey was conducted by the Council of Women of Donetsk Region NGO in cooperation with the Mariupol Youth Union NGO within the UN Program for Reconstruction and Peacebuilding, which is implemented, among other things, by UNFPA. The aim of the study was to collect and analyse data on gender stereotypes and perceptions of social roles by students and vocational schools, study the views, opinions and beliefs of young people about gender equality, determine the impact of gender stereotypes on career guidance, identify young people's perceptions of modern professions and employment strategies in the Azov region.
4. 2020 *The role of men in caring for children*¹⁶² survey was conducted by the research company *Info Sapiens* on UNFPA's request under the *EU for Gender Equality: Together Against Gender Stereotypes and Gender-Based Violence* programme funded by the European Union and implemented jointly by UN Women and UNFPA.
5. 2021 *Awareness and Attitudes of Teachers and Parents to Comprehensive Sexuality Education in Ukraine*¹⁶³ survey was conducted by the research company *Info Sapiens* commissioned by UNFPA Ukraine.
6. 2021 *What Ukrainians are driven by when choosing a profession* national public opinion survey on key factors and stereotypes, but it was presented in 2021 within the framework of the *Springboard to Equality: Project to Change Social Norms and Eradicate Gender Stereotypes for Sustainable Development and Well-Being of Women and Men in Ukraine* project funded by Sweden.
7. 2021 *Family-Friendly Companies* ranking conducted by UNFPA together with the CSR within Equality Springboard project funded by Sweden. 50 Ukrainian companies from 16 sectors of economy took part. The ranking¹⁶⁴ identified leaders of the corporate sector of Ukraine that implement policies of equal rights and opportunities for women and men, promote work-life balance, and combat gender-based violence¹⁶⁵.

It should be noted that UNFPA has also contributed to the researches conducted jointly with implementing partners. For example, a *Teach and learn: how and where to grow Ukrainian teachers?*¹⁶⁶ research was conducted with NGO EdCamp Ukraine and International Renaissance Foundation with the aim to identify gaps in knowledge and skills of teachers in Ukraine about discrimination issues. In addition, a few more small-scale polls were held by UNFPA to measure public attitudes towards sexual harassment¹⁶⁷ and GBV¹⁶⁸.

Output 2 of Outcome 3. Within Indicator 4, the following results were achieved:

- With support of the CO multi-sectoral coordination mechanisms were established in 15 regions/oblasts¹⁶⁹ (63% out of 24 regions/oblasts), including: i) multi-sectoral Council on Family, Gender Equality, Prevention of Domestic Violence and Combating Trafficking of Human Beings at oblast level; and ii) the localised mechanisms of implementing the CMU Decree #658 from Aug 22, 2018 On Multi-Sectoral Collaboration on GBV Response and Prevention at community level¹⁷⁰.
- UNFPA provided support to the process of establishing multi-sectoral coordination mechanism through: i) advocacy of the process of establishing the multi-sectoral Councils / working groups, including expert support of meetings for the establishment of councils / working groups; ii) support to coordination councils' / WGs meeting; iii) methodological assistance in drafting local by-laws, the orders on interaction; and referral algorithms; iv) training of members of intersectoral coordination councils, in particular on establishing multisectoral interaction;

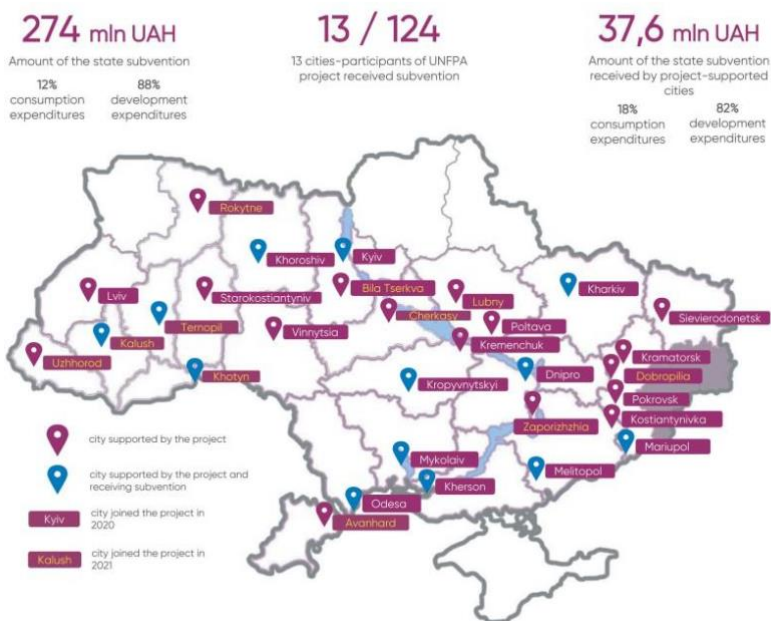
It should be noted that after 2019, UNFPA shifted its focus from working with regional authorities to local communities¹⁷¹.

Output 2 of Outcome 3. Within Indicator 5, the CO provided comprehensive support for development of municipal GBV response and prevention systems to 15 municipalities¹⁷² (with 200.00+ population). UNFPA technical assistance included

design of the architecture of the municipal GBV response system; capacity development in GBV response of public officials, duty bearers and service providers; seed funding for setting up specialised services; and support with awareness-raising and community mobilisation initiatives. The CO activities resulted in establishment of 16 shelters that provided safe space and psychosocial support to GBV survivors; 11 daycare crisis centres that provided informational support and psychosocial counselling to GBV survivors; 6 crisis rooms to provide urgent placement and counselling; 21 health care service delivery points to support GBV survivors; 2 primary psychosocial counselling services, 1 centre for work with perpetrators. The CO also supported the operation of 6 municipal mobile teams of social and psychological assistance that provide tailored support to

ATO/JFO veterans and their families in two target regions (Kyiv and Mykolaiv). Mobile teams alone assisted 3,846 people (31% women and 69% men), including 64% former combatants in 2020 alone¹⁷³. The teams were in operation from November 2019 till March 2021.

Cities and Communities Free from Domestic Violence



Those interventions were implemented by UNFPA within the *Cities Free from Domestic Violence* initiative. Overall, in addition to 15 municipalities with 200,000+ population 15 more (with population less than 200,000) received comprehensive assistance with the development of municipal system of GBV response and prevention, including establishment of, at least, one type of specialised services¹⁷⁴ (the complete list of municipalities with specialised services for GBV survivors as of November of 2012 is presented in Annex 10).

In establishment of a **comprehensive GBV prevention and response mechanism** for providing support and assistance to municipalities, UNFPA used the following approach that includes the following elements: (1) signing a memorandum of cooperation with the municipality, according to which the municipality, after the introduction of specialised services (shelters, daycare centres, crisis rooms, primary psychosocial counselling service, health care service delivery points) takes responsibility to finance these services and pay salaries to employees; (2) establishment of multi-sectoral coordination councils on GBV prevention and response; (3) approval of the order on interaction and referral algorithms by local authorities; and (4) establishment of institutions that provide specialised services to GBV survivors. All the above-mentioned municipalities followed this approach, which resulted in establishment of multi-sectoral coordination councils and development of costed Action Plans (that equals to Local Programme that is a local Policy Document) on multi-sectoral GBV response and prevention¹⁷⁵. The CO in partnership with CSOs implementing partners provided support to municipalities in improving their capacity for provision of quality specialised services for GBV survivors, effective management of the infrastructure of specialised services, and the way to ensure work of interaction and referral algorithms: *“we received from UNFPA useful and interesting tools, methods of working with GBV survivors. We got what we didn't use in our work before and what we didn't know about”*¹⁷⁶.

Evaluation showed that the results achieved by the CO during 2018-2021 would not have been possible without using three **cross-cutting issues**, namely – communication, partnership building, and resource mobilisation.

COMMUNICATION ACTIVITY. The achievement of outputs within Outcome 3 was facilitated by active communication and visibility activities of the CO in partnership conducted in coordination with various governmental, non-governmental and international institutions. Analysis of documents and interviews with CO staff, representatives of implementing partners showed that within the GEWE component the following communication support to the program activities was provided during 2018-2020:

- **Information campaign 4 Hands Happiness (4HH).** The initiative has been launched jointly with the Ministry of Social Policy in 2015. It entails behaviour changing campaigns and events and educational tools targeting primarily male audience to promote egalitarian social norms in the society. Promoting gender equality through male engagement may be considered as one of the comparative advantages of UNFPA work. In 2018, it was outdoor advertising: 150 boards in 18 regions with message “*I care for my kids as well as my wife does*” involving 6 men celebrities (sportsmen and singers), 33 posters to International Dads day in Vinnytsia oblast, 50 citylights in Kyiv with teaser of “*Daddy, read to me event*”. In 2019, UNFPA engaged Swedish Dads photo exhibition through Swedish Embassy, which was shown in 3 cities (Kyiv, Lviv, and Kharkiv). Also, the campaign 4 Hands Happiness had a new wave of videos and posters placement, the main message of which were “*Super Dad Can*” and later after “*can*” it was added what responsible father must do in practice. As result 716 visuals (billboards, citylights and posters) and videos within superdads campaign were placed in 7 municipalities (Kyiv, Cherkasy, Vinnytsia, Odesa, Kherson, Mariupol and Dnipro). In 2020, the CO continued to share information with families (with focus on fathers) under the 4 Hands Happiness campaign. One of the digital campaign¹⁷⁷ waves includes educational videos on YouTube Channel with engagement of fathers-celebrity figures and experts covering various topics with overall reach over 1 mln people. In 2021 in response to the COVID-19 pandemic and unequal distribution of the duties in the family a first simulator¹⁷⁸ of the family relations was created on the 4 Hands Happiness platform allowing couples to conduct a self-evaluation and get acquainted with recommendations of psychologists. Accompanied with a video¹⁷⁹ to promote responsible fatherhood that has a half million reach. 4HH campaign had only over 13,000 followers on Facebook.
- **Break the Circle information campaign** is one of the biggest and longest-standing information campaigns on GBV issues in Ukraine. During 2015-2018, the campaign focused on bringing the problem of GBV out of silent denial in society. Having achieved due recognition of the importance of GBV response reflected in the fundamental changes in legislation and national policy, the concept of “Break the Circle” campaign was fully updated in 2018. The campaign focused on challenging deep-rooted stereotypes that condone GBV and transforming public perceptions to foster zero tolerance to GBV in Ukrainian society.
- Since 2019, **complex multi-channel campaigns** were conducted to: i) inform society about GBV, rights of survivors and available assistance; ii) challenge society’s stereotypes and myths about GBV; iii) encourage Ukrainians to act to stop or prevent violence; and iv) foster zero tolerance to GBV in Ukrainian society
- In 2020, with the support of UNFPA and in partnership with the Ministry of Internal Affairs of Ukraine and the National Police, an installation-exhibition **The Matter is...** was opened in Kyiv. *The Matter is ...* once again drew attention to such a horrible phenomenon as violence that often remains behind closed doors. After its opening in Kyiv, eight separate exhibitions with photos and stories were shown in eight municipalities (Dnipro, Lutsk, Lviv, Mariupol, Mykolaiv, Poltava, Sumy, Uzhgorod). As of time of CPE report preparation the CO received information that 2020 *The Matter Is* campaign was granted by the GOLD Award of the International Epica Awards festival, which is the most significant recognition of the creative idea globally.



Those communication activities were accompanied by targeted advocacy campaign among high-level decision-makers led to their adoption of “Break the Circle” messages both in policy and public communication. As result, First Lady, Prime Minister, Deputy Prime Minister of European and Euro-Atlantic Integration, Deputy Minister of Internal Affairs frequently spoke of the unacceptability of violence in all forms and called Ukrainians to jointly break the circle of violence. Moreover, as a result of communication and advocacy efforts:

- During 2019-2021, the “Break the Circle” campaign was transforming perceptions of GBV in Ukrainian society, giving way to norms that do not tolerate violence;
- UNFPA-led annual national study captured the following positive shifts: i) Ukrainians demonstrated increased awareness of GBV – 6% more people could identify psychological violence and 9% more people could spot economic violence compared to early 2019; ii) People stated better understanding (6% rise) that unwilling sex in

marriage also constitutes sexual violence; and iii) Ukrainians showed higher sensitivity to the issue of GBV as 9% more men and 8% more women acknowledged that men and women may equally become subject to violence.

- Most common beliefs that condone GBV were challenged. 5% more people considered the statement *'If he beats you, it means he loves you'* obsolete (reaching 87%). Another 5% more Ukrainians thought that a woman should not tolerate violence to save the family (80%).
- The perception informed behaviour change. 5% more people stated their willingness to intervene in a GBV incident to stop it (67%).

This evinced the growing unacceptability of GBV in Ukrainian society that translates into strong disapproval of abuse and provision of support to survivors. Public intolerance of GBV is pivotal for the effective prevention of violence. In addition, the CO GBV prevention and response activity was the most mentioned program implemented by the UNFPA Ukraine¹⁸⁰.

PARTNERSHIP BUILDING. UNFPA Ukraine developed broad partnerships with various state and non-state actors, including national and local governments, CSO implementing partners, and business partners.

- The CO established partnerships with the Government and the authorities at the national and local levels. Partnership with the Office of the First Lady, the Office Vice-Prime Minister was instrumental in bringing gender and GBV issues into the Government's focus and at the top of public policy agenda. In addition to this, UNFPA established a partnership with the Ministry of Education and Science, the Ministry of Internal Affairs, the Ministry of Social Policy, the Ministry of Health, National Police, and Ukrzaliznytsya. Memorandums on understanding (MoU) with 15 municipalities were signed, and the initiative of municipalities *Cities Free from Violence* was designed and implemented. The UN Policy Paper on GBV Response in Ukraine was elaborated and launched in cooperation with the UN Coordinator in Ukraine office.
- The CO partnered with various CSOs to implement UNFPA programmes' interventions. They included *EdCamp* (covered activities on gender review of school curricula); *La Strada-Ukraine* (covered activities on hotlines services); *Centre for CSR Development Ukraine* (covered activities on gender issues promotion among business companies and promotion of STEM Girls); *Ukrainian Foundation for Public Health* and *Ukrainian Medical Association* (covered activities on GBV prevention and response, TatoHUBs initiatives, etc.), *Internews Ukraine*, *Foundation Shakhtar Social*.
- The CO succeeded in building effective partnerships with private corporations, including L'Oreal Ukraine, Avon Ukraine, *StarLightMedia*, *FC Shakhtar*.

MOBILISING RESOURCES. UNFPA Ukraine CO has been working actively towards raising external resources during 2018-2020. The CO made significant efforts to improve the outreach, visibility and recognition of the brand and mandate of UNFPA in Ukraine. The CO communicated proactively with and advocated among the potential partners that have the capacity to contribute to the outreach of UNFPA programmes throughout Ukraine. As a result of the CO efforts, funding was mobilised from the EU, UK Government (FCO and DFID), Estonian Government (Foreign Ministry), Swedish and Canadian Governments as well as from UNDP (RPP). In addition to this, resources (both in-kind and financial) were mobilised from the private sector/international CSOs, including: *L'Oreal Ukraine (Beauty for Better Life project)*, *Avon Ukraine*, *FC Shakhtar (Shakhtar Socia)*, *HelpAge International*.. More detailed information is provided in EQ6 part of this report.

Evaluation identified the following key **challenges** in achieving targeted indicators for Outputs 1&2 of Outcome 3, which included:

- Increased opposition to gender mainstreaming among religious leaders resulted in rollback/cancelling of gender-related program by several regional administrations;
- The results achieved in implementation of new community-based initiatives and programs on women's empowerment and participation and male engagement were vulnerable to the political changes that occurred periodically at the Government level. Political changes in the Ministry of Education and Science of Ukraine stalled progress on elaborating further policy framework such as Gender Strategy in education as a CEDAW recommendation to Ukraine.
- The process of administrative and budget decentralisation, as well as changes in the administrative-territorial structure complicated the interaction with territorial communities significantly. Also, the holding of local elections and changes in local self-government bodies slowed down certain activities within the previously planned projects. This affected the achievement of the planned results.
- Difficulty was encountered in recruiting qualified specialists to work with TatoHubs that have knowledge on gender equality as well as an access to the male audience.
- In time when most donors support was provided to interventions in GBV-related areas, it was difficult to raise

funds for youth and SRH activities.

It is important to highlight the unique design of the current UNFPA CPD that has a **strong linkage between programme streams, namely, YOUTH – GENDER – GBV** that stimulates the achievement of programme goals through combining of the expertise and audience. For example, it refers to the *No Trivia* initiative targeting at young people to address toxic GBV relationship patterns or *Business Against Domestic Violence* (BADV) initiative that was enriched with GE or establishing of egalitarian social norms as a common idea for all the streams contributing to its achievement from each side. Some other activities conducted within SRH-Youth-GBV nexus include (but not limited to):

- Partnership with Dr. Natalia Silina in sexual and reproductive health, pregnancy and COVID-19 on awareness raising and myth deter on women health along with digital campaign on promoting the SRH related issues;
- 49 PSS mobile teams (PSS MTs) were supported by UNFPA, providing psychosocial support in 12 regions including 2 conflict-affected (GCA) areas along the contact line and having assisted over 21,000 GBV survivors, out of which 2,132 were IDPs. 513 community-based GBV awareness events (trainings, lectures, round tables, flash mobs, street actions) in multiple locations organized by the PSS MTs, including 120 events within the framework of 16 campaign Days were supported by UNFPA what contributed to building community awareness towards gender roles and gender-based violence. The independent evaluation of the model of mobile PSS service provision was initiated in order to analyze and verify its functionality and impact, measure the achievements and flaws, draw out lessons learned, and most importantly, to develop the evidence-based practical recommendations for further institutionalization and development of the model integrating it into the existing system of PSS service provision in Ukraine.
- 2020 UNFPA national survey on *Sexual Harassment in Public Spaces*.
- A pilot *Healthy Challenge* program was implemented in 2019 and 2020 by the CSR Ukraine and the UNFPA in order to promote a healthy lifestyle among young people studying in VET and Higher Education Institutions. The program inspired students, teachers and administrators to establish a movement for healthy lifestyles in educational institutions and warning students about non-healthy lifestyles. Implementation of the Program stimulated educational institutions to create and organize mini-projects and activities on a healthy lifestyle including topics like rational nutrition, physical activity, reproductive health, mental health and prevention of infectious diseases.

Since 2014, Ukraine has faced a number of challenges, including the loss of territories, the ongoing armed conflict in the eastern regions of Donetsk and Luhansk (NGCA), that required humanitarian interventions. Along with development interventions, the CO has conducted the following **HUMANITARIAN ACTIVITIES**.

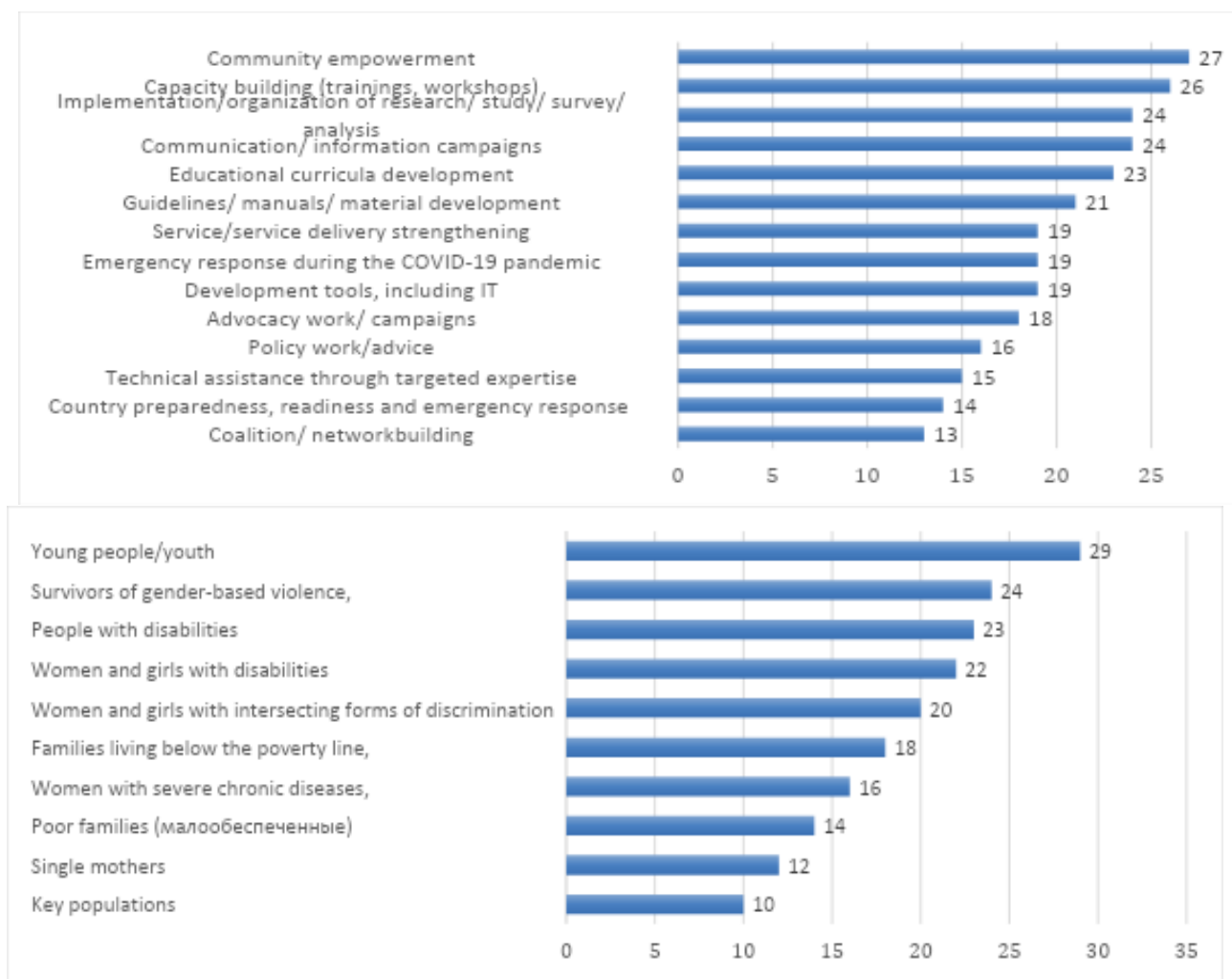
- **Medical and psychological care units** established by UNFPA Ukraine together with the implementing partner Women's Health and Family Planning Charity Foundation with the support of the Government of the United Kingdom. Medical and psychological care units are usually located at multidisciplinary hospitals, equipped with modern medical devices, diagnostic kits, medicines – everything necessary for reproductive health, HIV prevention, treatment of sexually transmitted infections, prevention of unwanted pregnancies and provision of emergency care to victims of rape. Currently, there are 17 such units in Ukraine. Six of them are in Donetsk Oblast, 5 – in Luhansk Oblast, and others are located in Vinnytsia, Mykolayiv, Kharkiv, Kryvyi Rih, Odesa and Kherson. Each unit provides 24-hour free assistance to women anonymously. In addition, most units have a separate entrance. 17 medical care units provided medical counseling and assistance to about 15,000 women in 8 Oblasts in 2019-2020.
- UNFPA supported psychosocial support **mobile teams** operation in the conflict-affected zone throughout 2015-2019. Faced with many challenges, mobile teams operated in a narrowly defined service area away from the contact line. UNFPA developed capacity of seven municipal mobile teams on survivor-oriented psychosocial service provision, including safe modalities of assistance during COVID-19 quarantine. UNFPA also covered operational costs of the MTs so they could make visits to deliver assistance to survivors residing along the contact line and isolated settlements of Donetsk and Luhansk regions. In seven months of extended operation (June-December 2020), the MTs provided assistance to 587 GBV survivors in 68 remote settlements in the conflict-affected area. Recognizing a positive impact of psychosocial support mobile teams operation in the conflict-affected zone, local authorities launched municipal mobile teams in early 2020. Enhancement of capacities of municipal PSS MTs in the East of Ukraine enabled cost-effective provision of crucial psychosocial help to survivors living along the contact line and hard-to-reach areas. The teams also expanded their service provision geography to the neighboring towns where such service otherwise is not available. This opens up possibilities for experience exchange and procurement of PSS services between communities.
- UNFPA formed Women's Hygiene Kits for **female healthcare workers** providing care to patients with COVID-19. The sanitary kits contain all the supplies necessary to maintain the continuous work of female healthcare workers

in the in-patient clinic for 5 days: hand and face creams, deodorant, medical slippers, toothpaste and toothbrush, 5 T-shirts, 5 pairs of socks, towels, feminine hygiene products, washing powder, boot covers, etc. Women's hygiene kit for female doctors and medical staff were delivered to hospitals in Kyiv, Chernihiv, Sumy, Ivano-Frankivsk, Odesa and Chernivtsi Oblasts.

- UNFPA assessed the needs of geriatric care facilities for the **older people** in the regions most affected by the COVID-19 pandemic, and then procured and distributed personal protective equipment and disinfectants among 15 state geriatric care facilities in 6 Oblasts most affected by the pandemic. In particular, 761 hygiene kits and disinfectants to control the spread of COVID-19 were procured and distributed in 10 facilities for the older people and people with disabilities in the East of Ukraine. 2,094 persons staying in these facilities, together with staff, received personal protective equipment, detergents and disinfectants, as well as information materials on the prevention of coronavirus infection. In November, the training in the basics of anti-epidemiological measures in the context of the COVID-19 pandemic was held for staff of geriatric care facilities. In addition, UNFPA delivered sanitary kits to elderly houses and 27 hospitals.
- In June to December 2019, jointly with the Ukrainian Medical Mission PO and the Women's Health and Family Planning Charity Foundation, UNFPA implemented the *Response to the pressing humanitarian issues (sexual and reproductive needs) of the most vulnerable women and teenage girls in Eastern Ukraine* project. The project implementation was funded by the UN Central Emergency Response Fund (CERF). Three **mobile healthcare teams** provided gynecological and therapeutic diagnostic and prevention care, supplied basic kits of medicines and contraceptives for the population of the settlements along the contact line in Donetsk and Luhansk Regions, who have limited access to state healthcare services due to poor transport connection. The teams were equipped with portable electrocardiographs, ultrasonic scan machines, including those for gynecological examinations. Every team was provided with rapid tests for blood glucose, Hepatitis B and C, and HIV/AIDS. In order to raise the level of prevention of sexually transmitted diseases and HIV, 1.62 million male condoms were provided to centers of social services for families, children and youth, to centers for AIDS prevention and combatting, and to other healthcare and prevention institutions of Donetsk and Luhansk Regions. 357 primary and secondary health care professionals, as well as infectious disease physicians, epidemiologists and family doctors were trained in modern methods of diagnostics and treatment of infectious diseases, planning and providing emergency care in the area of reproductive health, sexually transmitted infections, gender-based violence and delivery of services to women with disabilities in the area of reproductive health.
- As part of the UNFPA program, with the support of the Government of the United Kingdom and the implementing partner *Women's Health and Family Planning Charity Foundation*, **mobile clinics** were launched in the Luhansk and Donetsk Oblasts in July 2020. They provided access to highly specialized medical and socio-psychological services to people living in settlements along the contact line and/or in remote isolated towns in the East of Ukraine, namely in the Bakhmut, Yasynuvata Rayons and in Avdiivka City, Donetsk Oblast, as well as in Stanytsia-Luhanska, Novoaydar and Popasna Rayons of the Luhansk Oblast. The mobile clinics conducted medical examination, provided emergency medical care services, and identified hidden cases of domestic and gender-based violence. In 2020, 2 mobile clinics provided vital medical care and referred 7,964 residents of 58 remote settlements and areas along the contact line in the East of Ukraine to specialized services. In 2021, mobile clinics assisted 5,431 clients, 62% of whom are women 18-59 years of age. Sensitized in GBV-related issues and trained to identify such cases, mobile clinics' specialists documented 108 GBV cases. As a follow-up, all the GBV survivors were referred to the specialised GBV services. Notably, in three months mobile clinics provided services to 27 clients from NGCA. Hence, the clinics proved to be much-needed medical care and GBV response service, especially in the isolated settlements of the conflict-affected area.

As UNFPA will soon be formulating a **NEW 5-YEAR COUNTRY PROGRAM** within its mandate areas, evaluation online respondents were asked to provide their opinions on what activities¹⁸¹ and which target/ vulnerable groups¹⁸² the new CP should focus on. Graphs 1 and 2 reflect respondents' opinions. Other areas of potential CO activities specified by respondents include project for people with mental issues and new approaches and methods in domestic violence prevention and response. In addition to proposed target and vulnerable groups of population the new CP needs to focus on, online respondents mentioned men and their children, people with intellectual disabilities, men/young men, children, adolescents, and young people with special educational needs and their parents.

Graphs 1 – 2. Activities of and target /vulnerable groups of population the new UNFPA CP needs to focus on, N=35



Considering the new UNFPA Strategic Plan 2022-2025 and its focus on accelerating and scaling up the already achieved results in order to reach the three transformative results, along with opinions of evaluation respondents, it will be important for UNFPA Ukraine to focus on interventions within areas left behind in the current CP, namely SRH: “UNFPA strengths are expertise in prevention, reproductive health. It is important during the next programming cycle to pay enough attention to the reproductive health among young people, in general, but also to reach vulnerable groups (including sexual partners)^{183/}, and P&D. No census conducted in Ukraine for 20 years made it difficult to identify specific targeted population groups to be targeted by the UNFPA interventions. Evaluation results showed that youth, GBV survivors, women and girls with disabilities, and elderly need more of the CO attention. The UNFPA LNOB agenda of reaching most vulnerable groups and underserved allows the CO to identify and prioritise those (and others after census and stakeholder consultation have been conducted) groups not only during CP strategic planning process, but also throughout its implementation. There are five Modes of Engagement used by UNFPA. Survey results showed that community empowerment and capacity building are the types of engagement with the CO partners prioritised by the majority of respondents in addition to advocacy and policy dialogue, knowledge management, communication, partnership and coordination. KIIs also confirmed the importance of building and strengthening of the CO partners’ both technical and institutional capacity. Furthermore, evaluation showed that in times of emergency, like COVID-19 pandemic, innovative solutions and digital approaches play a crucial role, application of which allows continuing programme activities implementation without compromising such important principles as inclusion, equality and non-discrimination. The CO managed to adapt its own and its IPs’ activities to ‘new online reality’ by actively employing online application for meeting, workshops and training; mobile application for GBV survivors; digital platforms to meet and have social interaction, especially used by youth. However, with increased investment into digital transformation and interventions a possibility of achieving much and more tangible results increases as well.

EQ4: To what extent did the outputs contribute to the achievement of the planned outcomes (i. increased utilisation of integrated SRH Services by those furthest behind, ii. increased the access of young people to

quality SRH services and sexuality education, iii. mainstreaming of provisions to advance gender equality, and iv. developing of evidence-based national population policies) and what was the degree of achievement of the outcomes?

SUMMARY OF FINDINGS. Evaluation showed that only one out of five outcome indicators has been achieved so far. In the **A&Y area:** evaluation demonstrated that in the A&Y sphere, none of the two outcome indicators has been achieved yet, and the outputs contributed to the achievement of intended outcomes in a minor way. A small number of activities contributed to *Increased utilization of integrated SRH Services by those furthest behind* indicator, including an online course on combating HIV stigma and discrimination for health specialists and support of creation of the *Friendly Doctors Map*. More activities were conducted to achieve *Increased the access of young people to quality SRH services and sexuality education* indicator, including efforts taken to implement Comprehensive Sexual Education at the national level, but they did not lead to the expected outcomes yet. Both outcome level indicators measure only limited aspects of the SRH knowledge and behaviour of youth, and do not measure other aspects of the intended outcome i.e. increased utilisation of integrated SRH services by those furthest behind, increased access of young people to quality SRH services and sexuality education. Data for both indicators were not collected yet, but the ET think that, based on the third party data, both indicators could achieve their targets. Within the **GEWE area:** One of the three indicators has been achieved, the value of another will be confirmed in 2022, the achievement of another indicator is still in progress; (1) 80% do not believe that a woman should "turn a blind eye" to violence by a man to save the family – the share of such responses increased significantly among both men and women. 28% of Ukrainians believe that men violence against women can be justified; (2) 58% of men aged 18-59 agree some professions are suitable only for men or only for women, while 28% disagree; (3) gender review of textbooks according to the national standards was institutionalized. Gender review of textbooks is obligatory.

A&Y. Evaluation demonstrated that outcome indicators established for monitoring and evaluation of A&Y area in Outcome 2 are capturing only limited aspects of the intended outcome related to SRH knowledge and behaviour of youth. The evaluation found that a small number of UNFPA outputs contributed to reaching these aspects of the outcome. The existing indicators either are collected only by large-scale surveys or they can be based only on estimations from routine statistics. Table 10 below presents the best available information that can only be used for approximate assessment of the trend reflecting the progress in the program area.

Table 10. Status of the outcome indicators for A&Y area of the 3rd CPs

<i>CP/ Outcome/ Indicators</i>	<i>Baseline</i>	<i>Target/ Actual result</i>	<i>Remarks</i>
Outcome 2: Adolescents and youth			
Indicator 1. Percentage of young women and men aged 15-24 years who correctly identify ways of preventing sexual transmission of HIV and who reject major misconceptions about HIV transmission	49.9% (women), 45.8% (men)	60% (women and men) /TBC in 2022	There is no current value of the indicator, as data for its calculation is collected only during large-scale surveys. UFPA is going to conduct a survey for measuring this indicator in 2022.
Indicator 2. Percentage of women and men aged 15-49 years who had more than one sexual partner in the last 12 months and who reported use of condom during their last intercourse	53.3% (women), 69% (men)	60% (women), 80% (men)/TBC in 2022	There is no current value of the indicator, as data for its calculation is collected only during large-scale surveys. UFPA is going to conduct a survey for measuring this indicator in 2022. Based on state statistics data, the target for this indicator was achieved in 2019.

Indicator 1 was not measured recently. The data for this indicator will be collected during large-scale surveys. UNFPA is planning to collect data for measuring this indicator by the end of the CP in 2022. Several activities implemented by the CO contributed to achievement of this outcome indicator:

- In partnership with Ministry of Education and Science of Ukraine, the Ministry of Youth and Sports of Ukraine, the National Centre of Public Health of the Ministry of Health of Ukraine, UNFPA implemented of the all-Ukrainian **Healthy Challenge Programme** to promote healthy lifestyle among young people, which was implemented in 2019 and 2020 and involved about 20 educational institutions and 15,000 young people in different regions of Ukraine. The goal of the programme was promotion of healthy lifestyle among Ukrainian youth, improvement of their emotional state especially in the context of the spread of COVID-19, introduction of innovative forms of useful leisure activities during the quarantine. The programme included development of the programme Telegram bot, conduct of the online *Marathon on Mental Health and Self-Fulfilment* with a total of 580 young people taking part

in it, as well as conduct of two rounds of the set of programme educational activities with a first one covering 4,500 young people from four different regions of Ukraine, and the second one targeting the students of 42 VET schools of nine regions of Ukraine covering a total of 12,000 young people, and over 32,000 teachers and community members.

- In 2018, UNFPA started to work in partnership with Dr. Natalia Silina in sexual and reproductive health sphere on raising awareness among women on such issues as family planning, contraception, cervical cancer, and others. In 2019 a digital campaign on promotion the issues of SRH was conducted in YouTube. As result, 761 094 people (mostly women) were reached¹⁸⁴. In 2020, together with Dr. Natalia Silina UNFPA covered topic of reproductive health, pregnancy in relation to COVID-19 pandemic. Digital communication campaign reached about 200 thousand people online¹⁸⁵.
- UNFPA supported development of a training module on health (including safe behaviour and HIV) for the curriculum of the *Youth Worker* course. *Youth Worker* is a training program for municipal workers and youth centres supported by the Ministry of Youth and UNDP aiming to improve capacity of local specialists who develop and implement youth programs. The Health module was integrated into the program, and the first pilot training was conducted in the end of 2019 in the city of Kharkiv.

As for indicator 2, according to state statistics¹⁸⁶, the percentage of women and men who claimed to have used condoms during the last sexual intercourse with a partner who was not their husband / wife / regular partner in the last 12 months totalled 80% in 2019. Similar results were obtained earlier, by the 2014-17 study of the Ukrainian population's HIV awareness¹⁸⁷ according to which among those Ukrainians, who had had sexual intercourse in the previous 12 months, 83% had it with their regular sexual partner only. Of those, put pf those who had more than one sexual partner during that period, the vast majority said that they did use a condom during the last contact – 78% of the general population, and 85% among the young people. The exact estimations may differ depending on the type of the survey. However, 2014 and 2018 surveys¹⁸⁸ showed that use of condoms with the regular partner among youth falls into the general population trend – only half of young people used a condom during the last sexual intercourse with a regular partner reasoning that they can trust him/her. HIV remains a serious threat affecting young people, despite a number of positive trends being observed in recent years¹⁸⁹, especially for young women (15-24 y.o.) who remain more likely than men of the same demographic to be affected by this epidemic and feel the effects at a younger age. Additionally, despite its undeniable importance, adolescents' understanding and knowledge of HIV prevention remain below target levels, as does the percentage of adolescents and young people receiving HIV testing in their lives. UNFPA is planning to collect data for measurement of Indicator 2 by the end of the CP in 2022.

Several activities implemented by the CO contributed to achievement of the *Increased utilisation of integrated SRH Services by those furthest behind* outcome:

- Since 2018, UNFPA established 21 health service delivery points (SDPS) for GBV survivors, of which 17 SDPs opened in conflict-affected Donetsk and Luhansk regions (GCA)¹⁹⁰. Enjoying a high level of trust, the health workers are often the first to address the requests for help from GBV survivors. The doctors are well-positioned to provide effective and timely assistance to GBV survivors: *“these cabinets are not only equipped with the necessary tools. Equipping medical staff with the right knowledge and skills is also important, especially when it comes to addressing domestic and gender-based violence. That is why health workers need to identify hidden incidents of violence, find an individual approach to each woman, and best ways to help. We are very pleased that such assistance has become more accessible to women of the frontline areas.”*¹⁹¹
- From 2019 to 2021, UNFPA supported operation of 2 mobile clinics¹⁹² working along the contact line and isolated settlements of Donetsk and Luhansk regions (GCA) to address the dire need for quality health services caused by limited access and financial capabilities of the residents of conflict-affected areas, further complicated by the pandemic: *“operation of mobile medical teams is much needed in times of COVID-19 outbreak and helps respond to the acute shortage of local medical capacities during the times of pandemic.”*¹⁹³ The mobile clinics delivered quality medical assistance to residents of 56 settlements along the contact line and in isolated areas. The data evidences that this intervention effectively reached those furthest left behind.
- Support to vulnerable youth movement on HIV/SRH Teenergizer and their model of empowerment teenagers living with HIV in four cities (Cherkasy, Kryvyi Rih, Mykolayiv and Kremenchuk). A total of 97 support groups for 49 HIV-positive young people conducted; 94 peer-to-peer reproductive health & HIV-related educational activities organized for 2 151 adolescents in schools and technical-vocational establishments; 8 069 young people of 14-22 y.o. received information on HIV testing possibilities with 180 persons tested; 105 young people participated in Teenergizer internships and mentorship programme. Manual for the work of Teenergizer coordinators and young people on transition to online format of work was developed and used. In total, 5 666 young people from four cities supported by UNFPA visited Teenergizer's website and received

- educational information of HIV, reproductive health and sex education¹⁹⁴
- In 2018-19, UNFPA strengthened capacity of family doctors/primary health care doctors as an entry points to healthcare for PLHIV supporting development of an **online course for Friendly Doctors** aiming to reduce discrimination of the key population and PLHIV. To make the key population (KP) and PLHIV aware of a friendly doctor nearby, UNFPA developed the interactive map platform, with contacts and location of the friendly doctor in a city. *Friendly Doctors* were trained to deliver information about the available prevention, social and support services. The developed chat bots allow KPs to assess the HIV risk and refer to HIV testing services¹⁹⁵. KIIs respondents with organizations from the SRH sphere and organizations representing the key population confirmed effectiveness of the taken approach and existing demand from the key population for this service¹⁹⁶. PLHIV have more trust to tolerant medical providers that increases the number of visits to medical facilities and improve HIV testing in healthcare settings among KP. Thus, UNFPA contributed to increasing the number of PLHIV aware of their status.
 - In 2018, UNFPA conducted workshops and trainings for health care providers and SDPs on prevention and treatment of STIs (including HIV), 216 health workers improved the capacity to provide reproductive health services in cases of gender-based violence, prevention and treatment of STIs, comprehensive health care to women subjected to sexual violence, provision of emergency post-rape assistance to GBV survivors. Special training sessions were conducted for 60 healthcare professionals of the primary care units as well as health care personnel of selected hospitals in Donetsk and Lugansk oblasts aiming at strengthening their knowledge on HIV/STI/SRH prevention based on SWIT and MSMIT guidelines.
 - In 2019 UNFPA initiated three **mobile healthcare teams** for the most vulnerable women and teenage girls in Eastern Ukraine that provided gynaecological and therapeutic diagnostic and prevention care, supplied basic kits of medicines and contraceptives for the population of the settlements along the contact line in Donetsk and Luhansk Regions, who have limited access to state healthcare services. In 2019 the teams provided medical and preventive care in the total of 253 population centers and carried out 18,201 medical examinations. Of those, 8,226 were gynaecological examinations and 9,975 — family doctor consultations. In 2020 the **mobile healthcare teams** were transformed to **mobile clinics** covering medical needs of vulnerable population living in settlements along the contact line and/or in remote isolated towns in the East of Ukraine.

Achieving the *Increased access of young people to quality SRH services and sexuality education* outcome is still in progress. To achieve this outcome, UNFPA made consistent efforts on introducing the **national curricula on Comprehensive Sexual Education (CSE)**. For this purpose, the CO conducted the *Awareness and attitudes of teachers and parents to comprehensive sexuality education* study, followed up by the two-day conference *Introduction of comprehensive sexuality and gender-equality principles: prospects in Ukraine of the 21st century* conducted in November 2020 in partnership with the Ministry of Education and Science as well as the key CSE partners and stakeholders. The conference aimed to establish an open dialogue between senior officials in the area of education, teachers, researchers, health professionals, and young people, aimed at providing substantiation for the CSE priority status, finding the optimal strategy for its development, and adopting a single statutory instrument on the goals, objectives, forms and principles of the CSE implementation in educational institutions. The unified vision of the main priorities and consolidated actions to ensure introduction of a CSE and gender component in non-formal and formal education in Ukraine was formed. It was expected that an interdepartmental working group on the development of the CSE Concept would be formed by the Ministry in early 2021 to develop the future concept¹⁹⁷. Although the resolution of the conference confirmed the interest of GOU and non-government stakeholders in development and implementation of the national curricula on Comprehensive Sexual Education, due to changes of the leadership in the Ministry of Education and sensitivity of the topic, currently there is no progress on advancing the curricula or establishing a working group within the Ministry. Still, representatives of the Ministry and other interviewed stakeholders¹⁹⁸ confirm that this initiative remains highly relevant, and there is a potential of achieving the expected results within the CP timeframe. Despite SRH services and sexual education not being the main focus of the 3rd CP, online survey participants believe that UNFPA activities have contributed to the increased priority on adolescents, especially on very young adolescent girls, in national development policies and programmes increased availability of comprehensive sexuality education and sexual and reproductive health services¹⁹⁹

Results of activities within three **CROSS-CUTTING ISSUES** have contributed to achievements made so far.

COMMUNICATION ACTIVITY. Within the **stream of SRH**, communication and visibility activities of the UNFPA CO were conducted in accordance with the programmatic activities and available resources for the existing period. It is important to keep in mind that SRH issues were always part of the other communication campaigns like *4HH* (when messages to families about the pregnancies, family planning etc. were delivered) and *GBV Break the Circle* where consent and other relevant topics were always included. UNFPA utilized a result of a national survey of teachers'

and parents' opinion on *Comprehensive Sexual Education* (CSE) to increase attention to the topic of CSE and build consensus among stakeholders using evidence collected in the survey. Although communication efforts were successful due to changes of leadership in the Ministry, the CSE agenda is currently on pause. Another example of successful communication rising SRH awareness was online educational campaign implemented on Facebook and YouTube with the expert support of doctor Natalia Silina. The communication reached over 950 thousand viewers (mostly women). In the **A&Y area**, the major communication contribution on the national level was made through promotion, support and delivery of the online *Healthy Challenge Programme*, implemented in partnership with the Ministry of Education and Science, the Ministry of Youth and Sports, and the National Centre of Public Health of the Ministry of Health of Ukraine. Communication of both *Pact for Youth-2020* and *Pact for Youth-2025* via traditional mass media, social networks, webpages of the UNFPA Ukraine and the initiative partners, helped to attract more partners for business and educational sector, as well as reach to more young people. Furthermore, without communication support on municipal level, the *Youth Well-Being Index* could not have achieved its success in engaging youth and local businesses.

PARTNERSHIP BUILDING. Partnerships established with the Ministry of Youth and Sport, the Ministry of Education and Science allowed UNFPA to provide support to its youth programming, and stayed in policy dialogue, i.e. be included and co-chair the sectoral Working Group on Youth under CMU, successfully launch *Pact for Youth 2025*, and accompanying activities like *Skill Labs*. Partnerships with municipalities allowed promoting and using the *Youth Well-Being Index* as source for evidence for changing local youth policies and argument for budget allocations. In the SRH are at the regional level, most prominent were the activities in the partnership with the Teenergizer youth movement. The CO helped to strengthen the online presence of the initiative by developing the tools for the moderators, supporting the expansion of the online platform. Offline activities supported awareness-raising talks for young people and parties, promoting healthy lifestyle.

MOBILISING RESOURCES. Training course for family doctors/primary health care doctors and an interactive map of the *Friendly Doctors* online platform developed in partnership with the NGO *100% Life* utilized resources mobilized via Unified Budget, Results and Accountability Framework (UBRAF) as of partnership with UNAIDS²⁰⁰. In addition in 2020 HIV/GBV integration initiative funded by UBRAF was piloting. Resources mobilized via *UN Recovery and Peacebuilding Programme*²⁰¹ allowed achieving outcomes in advancing the youth and peacebuilding agenda via *Myropolis* initiative, and promoting life skills via *SkillLabs*, *ProSkills* programs. In 2021 the PBF funded joint *Building a constituency for peace in Ukraine by engaging young people to promote social cohesion, national unity and a culture of dialogue* project was started.

GEWE Programme Area. Analysis of documents, research results, and interviews showed that outputs contributed to the achievement of the planned outcome to a good extent. The evaluation found that 2 out of 3 UNFPA outputs contributed to reaching the outcome. Information for one indicator that was not achieved will be collected via a large-scale survey, yet preliminary trends can be identified from recent studies. Table 11 below presents the status of achievement of Outcome 3 *Gender equality and women's empowerment* indicators.

Table 11. Status of the outcome indicators for GEWE area of the 3rd CPs

<i>CP/ Outcome/ Indicators</i>	<i>Baseline</i>	<i>Target/ Actual result</i>	<i>Remarks</i>
Outcome 3: Gender Equality and women's empowerment			
Indicator 1: Percentage of women and men aged 15-49 years who believe a husband is justified in beating his wife/partner under certain circumstances	(2012): 2.9% (women), 9.4% men	Decrease by 50% / TBC in 2022	Not achieved. The CO has not measured it yet, and it is planned for 2022 ²⁰² . However, evaluation showed that the existing studies ²⁰³ can provide data for this indicator to be measured.
Indicator 2. Share of women and men who believe there are 'women's' and 'men's' occupations	(2012): 72%;	60% / 56% (2021)	The value of the indicator has already been reached and exceeded. This is confirmed by a survey conducted in 2021 ²⁰⁴ .
Indicator 3. Share of new school textbooks that underwent gender review according to national standards	0%	100%/100%	The indicator has already been achieved. ²⁰⁵ It should be noted that formulation of the indicator is not very clear. According to the procedure established by the MES, no Ukrainian textbook can reach schoolchildren without an anti-discrimination examination that includes gender issues. At the same time, not all new school textbooks were submitted for review. It is recommended to clarify formulation of indicator as - <i>Share of new school textbooks approved for use by the MES that underwent gender review according to the national standards.</i>

Evaluation showed the status of outputs' contribution to the achievement of the planned Outcome 3.

Indicator 1: *Percentage of women and men aged 15-49 years who believe a husband is justified in beating his wife/partner under certain circumstances* will be measured by a study scheduled for 2022. However, evaluation showed that analysis of the other studies²⁰⁶ already conducted by UNFPA presented certain trends in the context of this indicator. For example, 2018 *Masculinity Today: Men's Attitudes to Gender Stereotypes and Violence Against Women* research demonstrated that, *first*, the prevailing public views on the division of social roles and powers between women and men largely determine the attitudes towards gender-based violence. Patriarchal expectations about the 'proper' behavioural patterns for women result in victim-blaming, as victims of sexual violence are often blamed for provoking violence with their behaviour and lifestyle associated with promiscuity in relations with the opposite sex. A half of the surveyed men questioned the rape in case when a woman was affected by alcohol or drugs, 43% of men – in case when women had a bad reputation, one-third of men – if a woman did not fight back physically. And *second*, tolerant attitudes to domestic violence are also quite prevalent among men. To a large extent, the reasons for this attitude are related to the deeply rooted perceptions of the unequal importance of women and men in a society, in particular women's subordinate position in the family hierarchy. As a result, cultural practices that justify men's rights to use physical punishment against their wives remain quite widespread in the public opinion. In particular, 13% of the surveyed men agreed that one's wife beating can be justified in some situations, 18% of men agreed that a husband has the right to hit or beat his wife if she cheats on him, 5 % of men – if the wife does not want to have sex with her husband, and one out of ten respondents agreed with the statement that a woman should tolerate her husband's violence to keep her family together. The 2021 survey²⁰⁷ demonstrated that 80% of citizens of Ukraine do not believe that a woman should "turn a blind eye" to violence by a man to save the family – the share of such responses has increased significantly among both men and women. 28% Ukrainians believe that men's violence against women can be justified: 37% of men and 20% of women – this share has changed slightly since 2020.

Indicator 2: Data from a survey²⁰⁸ of citizens conducted in February 2021 indicated that 56% of respondents agree that some professions are suitable only for men or only for women, and 30% do not agree. Men agree with this statement more often (59%) than women (53%). The survey also showed similar trends among different age groups. Young people are less likely to agree that some professions are suitable only for men or only for women as compared to prior generations. Also 50% of people aged 14-24 agree that some professions are suitable only for men and only for women, and 30% disagree. Young males agree with this statement more often (52%) than young females (48%).

Indicator 3: EdCamp activities supported by the CO contributed to achievements of this indicator. As of the time of evaluation, the *Procedure for Competitive Selection of Textbooks for General Secondary Education* determined by the Ministry of Education and Science was in force since its approval in 2020 by the MES. This Procedure envisages mandatory anti-discrimination examination of each textbook by the relevant anti-discrimination expert. Anti-discrimination examination is described as "*the analysis of textbooks as to the presence in textual and non-textual (illustrations, methodological apparatus, apparatus of orientation) materials of discrimination against the protected characteristics (race, skin colour, political, religious and other beliefs, gender, age, disability, ethnic and social origin, language, etc.) in the form of stereotypes, xenophobia, ageism, andro- and ethnocentrism, sexism, etc. and providing recommendations for their elimination*"²⁰⁹. This normative legal document included gender among others issues for anti-discrimination examination.

Based on a memorandum of cooperation with the State Scientific Institution *Institute of Education Content Modernization* (IECM), CSOs *EdCamp* has developed and implemented a specialized program for the training of anti-discrimination experts. EdCamp certified anti-discrimination experts, and their certification is recognized by the IECM. Thus, with the support of UNFPA Ukraine, the process of certification of experts who can carry out anti-discrimination expertise of school textbooks, including gender review, was institutionalized in accordance with the Procedure established by the MES²¹⁰. During 2018-2021, 89 anti-discrimination experts were trained and certified by Edcamp. These Experts are involved by IECM in conducting anti-discrimination examinations, and their work is paid for from the state budget²¹¹. While in 2017 there was no textbook that would meet non-discriminatory criteria, in 2021 60% of textbooks fully met such criteria, and 38% met them partially. Only 1-2% did not fully meet the non-discriminatory criteria²¹². For the last four years, the need and importance of anti-discrimination expertise was perceived as appropriate at the level of ministries and institutions²¹³. Two-thirds of key publishers and school textbook developers were trained in anti-discrimination standards, including gender issues. This training was provided by EdCamp with the support of UNFPA Ukraine. It resulted in publishers taking gender issues into account when publishing textbooks before submitting such textbooks for examination to the MES²¹⁴.

The following three **CROSSCUTTING ISSUES** contributed to the progress of the GEWE-related outcome indicators.

COMMUNICATION ACTIVITY. The achievement of Outcome 3 indicators was facilitated by the active communication activities of the CO in partnership conducted in coordination with various governmental and international institutions, private/NGO sectors. UNFPA built awareness and capacities of women and men, boys and girls to recognize, react to, report and act to prevent GBV in their communities, aiming at raising awareness on GBV/DV in society at large in order to generate demand to seek services among survivors, and reduce tolerance towards GBV in their communities. Analysis of documents and interviews with CO staff, representatives of implementing partners showed that within the GEWE component the communication support contributed to achieving the following²¹⁵:

- UNFPA Ukraine built a strong community of supporters of UNFPA's work in Ukraine;
- UNFPA Ukraine was mentioned 3,693 times in national and local media;
- Building communities awareness towards gender roles and GBV laid the foundation for GBV prevention and response mechanism;
- The website of *4HH* campaign had increased number of visitors and new followers, of which every fifth is a man. FB page of the campaign had 12,537,000 followers as of November 2021²¹⁶;
- *Break the Circle* campaign platform (rozirvykolo.org) increased its number of visitors by almost 7 times from December 2018 to December 2019, and over 8 times from January 2020 to December 2020. The share of male visitors was steadily growing, reaching 32% in December 2020. The website had 58,580 visitors throughout 2020, and every month approximately 3,000 people get to know what domestic violence stands for, how to identify it, and where the needed services can be received. Also, the *Break the Circle* campaign is the longest-standing and biggest informational campaigns on GBV issues in Ukraine, and in 2019 it was recognized as a national one by the Ukrainian government when the high-level politicians and opinion leaders were involved in it;
- Targeted at youth the UNFPA *non-violence video campaign* was viewed by 3,256,492 viewers on Youtube and Instagram only during two months.

PARTNERSHIP BUILDING. As a result of established partnerships with national and local governments, the private sector and CSOs as well as joint interventions conducted by the CO with them, the following key results were achieved: i) the Office of the First Lady, the Office of Vice-Prime Minister played a key role in moving gender issues to the top of public policy agenda; legislation on GBV prevention and response was improved; ii) anti-discrimination expertise, including gender review, of textbooks was institutionalized by the Ministry of Education and Science and IMSE; iii) training in the GBV area for specialists of the Ministry of Internal Affairs and National Police was improved and institutionalized²¹⁷; iv) Ukrainian delegation to the Nairobi Summit led by the Minister of Social Policy has also reaffirmed Ukraine's commitments to reach zero GBV by 2030; v) 15 cities, including Kyiv, and Donetsk Oblast State Administration signed MoUs with UNFPA to strengthen GBV component; vi) at the request of Ukrzaliznytsia, the CO supported a gender audit of the company²¹⁸; vii) partnership with the L'Oreal in economic empowerment of vulnerable and marginalised women resulted 27 women receiving substantive professional training in hairdressing occupation (estimated monetized value is more than \$80,000²¹⁹); viii) partnership with FC Shakhtar contributed greatly to reduction of gender stereotypes at home, and stereotype of free choice of profession and occupation as well as in expansion of the CO outreach to more than 1.4 mln people, with a focus on male audience²²⁰; ix) 31 companies signed the UNFPA Declaration for Gender Equality and Prevention of Domestic Violence and became equipped to develop corporate culture of zero tolerance to violence. UNFPA provided capacity development of the signatories (workshops) equipping them with knowledge and skills to promote gender equality, prevent GBV and provide assistance to survivors. Several large companies (StarLightMedia, Avon, Ferrexpo, Corteva) already piloted corporate initiatives to prevent GBV. StarLightMedia, one of largest media holdings in Eastern Europe, launched its first ever corporate programme on GBV response. With UNFPA support, the company conducted thematic training for employees, organised awareness-raising campaigns and integrated GBV response into the media group content. Employees resorted gladly to the introduced protection mechanism that enabled them to disclose their experience of violence safely and receive assistance; and x) The CO selected and appointed the first ever Honorary Ambassador for Ukraine – Maria Efrosinina, a popular TV host and opinion leader. The Ambassador has already contributed greatly to the promotion of the UNFPA mandate at the number of events, visibility in social media and advocacy efforts in media channels.

MOBILISING RESOURCES. The CO efforts in building relationships with traditional donors and showcasing UNFPA work in Ukraine have brought significant results. Once seen as a small UN Agency with a focused mandate, the CO became a primary implementing partner in the GBV/GE area for the UK, Canada, Sweden, EU, Sweden and Estonia as well as for private corporations. Engaged resources of UNDP with financial support of Denmark, Sweden and Switzerland for establishment of the new safe spaces for GBV survivors in the conflict affected regions were mobilised as well. In 2019,

through the established cooperation with AVON Ukraine to strengthen the GBV programme, the CO received a significant in-kind donation from the company (amounted over \$415,000). This was setting up a great precedent and example of this type of cooperation with corporate sector. Attracting additional resources by expanding the range of donors allowed moving away from the traditional gender focus on strengthening women's participation in politics and military service and increasing STEM's focus on women's education and social entrepreneurship for women victims of GBV²²¹.

Based on the results of interviews and documents' analysis, a range of **CONSTRAINTS AND FACILITATING FACTORS** were identified with respect to the contribution of implementing activities within UNFPA programme areas in addition to challenges mentioned in the EQ2. The following major **constraints** were mentioned:

Constrains in the A&Y area include:

- Limited attention and/or ability of the national government to tackle the problems of youth, especially women and girls. Lack of multi-sectoral communication and cooperation, especially between the national and local levels as well as lack of institutionalized mechanisms and good practices. This leads to unequal and unbalanced participation of the stakeholder groups, i.e. the Ministry of Education and Science was active while schools stays very conservative and unresponsive²²².
- Absence of National Census for the last two decades impedes understanding of the targeted population needs and interests²²³.
- Low interest of youth in formal education, low electoral activity of youth, and low demand for new skills of the 21 century, including critical thinking, healthy lifestyle, quality medical and health services²²⁴.
- In the SRH area changes in the Ukrainian government, particularly leadership changes in the Ministry of Health, and high turnover of the Ministry staff combined with shifted priorities of the national health system to respond COVID-19 significantly constrained the UNFPA ability to pursue the increased access of young people to quality SRH services and integrated SRH Services for those furthest behind.
- Significant increase of GBV response interventions in UNFPA portfolio in combination with the above-mentioned constraining factors shifted the CO priorities away from Sexual Reproductive Health area, which could pose a risk of downside in this area given the lack of other influential international advocates in SRH sphere in Ukraine²²⁵.

Constrains with GBV and GE promotion relates to:

- Changes in Government, the new structure of government/ministries and new appointees; high turnover of public authorities (during 2019-2020, there were twice the following changes among high-level officials and key partners of UNFPA: the Ministry of Health, the Ministry of Education and Science, the Ministry for Social Policy) led to delays in developing draft bylaws/policy documents. There is a continuing need for advocacy efforts after the change of key decision-makers at the ministerial level. It is necessary to close periodically the gap of the newly appointed persons in understanding the importance of an integrated approach to the development of combating domestic violence²²⁶.
- Lack of understanding of this complex topic by public authorities and high turnover of public authorities and political actors, short-term planning of government, and insufficient sustainability of changes and reforms²²⁷.
- Constrains are exacerbated by inconsistent terminology used in the sphere, insufficient and low-quality statistics lack of gender disaggregated data , as well as low culture of data use²²⁸.
- Insufficient attention to GBV prevention overall, and lack of inclusion of the court system in GBV prevention and response activities²²⁹.
- At the local level, there is low capacity of local authorities to address challenges like GBV²³⁰.
- A significant limitation was presented by changes in the composition of local authorities at the community level. The general attitude of heads of community and their subordinate institutions to make efforts to promote gender issues depends on the change of heads of community. Dependence on the change of decision-makers greatly affects the dynamics of the planned activities. Local elections in some communities stopped the local development plan and budget approval process as well as brought up new teams of elected local officials²³¹.
- Access to non-government-controlled areas is limited, and what is more important, limitations in movement between non-government-controlled areas and government-controlled areas under COVID-19 deteriorate access of survivors from non-government-controlled areas to services and consultations sharply. In addition to this, there was a crucial difference between GBV and IPV/DV response regulations in non-government controlled areas and government controlled areas, and it necessitates finding solutions for humanitarian partners having access to non-government controlled areas²³².
- The dominance of patriarchal traditions in the perception of gender issues also limits the dynamics of action²³³ significantly.

- There is an insufficient number of experts, and specifically male experts in GE/GBV topics²³⁴. Lack of practical experience of some experts on working with national government and local self- government²³⁵ impedes expert's understanding or areas of public bodies' responsibilities and ways of cooperation.

At the same time, the ET identified the following **FACILITATING FACTORS** in each UNFPA programme area.

- **Facilitating factors in the A&Y area include:** i) Existing experience and establishing partnerships with business and National Government institutions was utilized to expand the *PACT for Youth* Initiative; ii) Good relationship with several municipalities allowed pilot testing of the *Youth Well-Being Index* approach and use the success to scale up initiative in other municipalities; iii) COVID-19 was used as an opportunity to expand the audience of online events, especially when youth were "*trapped at their homes during the lockdown*"²³⁶; and iii) UNFPA used available and new research and studies as evidence for further activities and projects by the CO as well as for other development actors²³⁷.
- **Facilitating factors in the GEWE area include:** i) COVID-19 was used as opportunity to attract attention of government at all levels to GBV and let this issue to come out to light at the national government level, and to design new policies at national/local levels²³⁸; ii) COVID-19 also attracted additional attention from the International Donor Community to the GBV issues; iii) Existing political will and support from the First Lady, strengthened by properly chosen Honorary Ambassador, Ukraine join of the Biarrits partnership, and good cooperation with police combined with the existing CO expertise on multi-sectoral approach to GBV allowed development of united government policy towards GBV utilising a multi-sectoral approach²³⁹; and iv) Quick successes shown with the UNFPA support stimulated interest of local authorities in the GBV area (and in ECA in particular, where activities of the GBV SC are co-chaired by respective bodies of Donetsk and Luhansk ODAs), coincided with the ability of local government to make financial contributions as of decentralisation reform. UNFPA utilised the conditionality approach in working with local municipalities, ensuring local government ownership and durability of the effects²⁴⁰.

The new UNFPA strategic plan 2022-2025 calls to accelerate achievement of three transformative results through evidence-based actions and ensuring that no one is left behind, human rights for all and protected and promoted as well as addressing gender equality, equity and non-discrimination, empowerment of women and girls, and the pursuit of the realization of sexual and reproductive health and reproductive rights. At the same time, it provides more flexibility in applying modes of engagement to better respond to country needs, encourages scaling up of successful practices, fostering innovations, and improving integration of programmes. Experience of last years of the UNFPA CO in Ukraine provides evidence of what works best, and what lessons should be taken to accelerate achievements. Evaluation identified many good practices that should be continued and/or expanded, as well as important lessons to be learned. Presented here **GOOD PRACTICES** are grouped by programme and crosscutting areas and aiming to attract attention to activities with high impact/high potential of impact. More good practices in the UNFPA programme areas that have replication and scaling up potential are described in EQ7.

A&Y AREA: Several successful initiatives of the CO in the A&Y sphere were identified by national and local level experts, both from governmental and civil society sectors as Good Practices worth scaling up. These initiatives include *Youth Well-Being Index*; *Pact for Youth*, *Skill Labs*, *Pro Skills*, and *Myropolis*.

GE AREA: The CO gender expertise allowed institutionalizing the gender review of the schoolbooks in the Ministry of Education and Science ensuring their higher quality and non-discriminatory nature²⁴¹.

GBV AREA: Good practises include: i) Identifying and utilising existing political will at the level of key policy persons in the country has significantly contributed to the promotion of a comprehensive approach to the development of the system of combating GBV in communities, gender mainstreaming in public educational and family policy²⁴²; ii) Developed and utilised a comprehensive multi-sectoral approach to the combating GBV in the territorial communities and refusal just to introduce a specialised social services in the territorial community was an important factor in the success and effectiveness of the changes that UNFPA manages to achieve in partner communities²⁴³. Detailed description of this approach was presented in the GEWE section of EQ3. In addition, UNFPA's used incentives by convincing local authorities that the development of an anti-GBV system was both an investment in the development and security of the territorial community²⁴⁴; iii) The positive experience and practises gained in previous years of UNFPA's activities on the introduction of specialised social services for survivors of GBV in cities have become drivers and incentives for other territorial communities. Territorial communities began to "compete" for such practises to be/look 'no worse than others'. Study visits to Ukrainian territorial communities, where a comprehensive approach to combating GBV has been successfully implemented, have also been an incentive for other territorial communities. Also, intra-Ukrainian study visits had a more positive effect than study visits to the EU countries²⁴⁵; iv) Study visits practised by UNFPA in areas like GBV (Romania) brought so much needed system thinking on how public authorities can organise/re-organize

work of already existing structures plus what policy framework is needed/lacked for it²⁴⁶; and v) Declaration signed by 31 business entities on GE/GBV issues²⁴⁷.

INTERVENTIONS IN HUMANITARIAN SETTING. The UNFPA CO used combination of various interventions to address needs of targeted population. Each of them separately and in combination with others is seen as a good practice in producing the high impact in humanitarian setting, including: i) **Coordination of GBV sub-cluster:** Humanitarian needs in the eastern Ukraine remain dire as a result of the protracted armed conflict. COVID-19 pandemic has further exacerbated the difficult situation of the most vulnerable people, namely women and adolescents. To ensure their sound protection, UNFPA-led GBV Sub-Cluster coordinates efforts and resources to provide effective GBV response and prevention. Six years of dedicated GBV Sub-Cluster work on partnership building to ensure establishment of strong cooperation ties among over 40 humanitarian actors as well as local authorities in the eastern Ukraine. As a result, in 2020, local GBV prevention and response system operating in humanitarian setting managed to withstand an almost 60% surge of GBV cases triggered by the COVID-19 pandemic. This was ensured through GBV Sub-Cluster communication, coordination and technical guidance of partners at the national and regional levels. GBV Sub-Cluster effectively bridges humanitarian response and development work in the East of Ukraine. Due to the UNFPA technical support, GBV Sub-Cluster partners have strengthened their capacity to assist GBV survivors what also included the COVID-19 response activities. Guided by the GBV Sub-Cluster recommendations, the local state authorities actively demonstrate their local ownership of GBV specialized services, ensuring their sustainability; ii) **Mobile social and psychologic assistance teams:** These teams were formed as a taskforce of specialists (practical psychologist, social worker) providing both emergency and scheduled social and psychological gender-based assistance to victims, including persons under 18, through response and referral. Besides, they were involved into field trips to address such incidents in a specially organized vehicle or providing assistance in a specially designated/adapted facility based on social services provision for families, children and youth or other social services providers in the settlements of regions covered with the project. In 2018, the mobile teams of social and psychological assistance were recognized as an effective tool to respond to cases of violence. The Cabinet of Ministers of Ukraine has approved the Standard Regulations on *the Mobile Groups of Social and Psychological Assistance to Survivors of Domestic Violence and / or Violence based on Sex*. The statistics shows that more than 60% of victims first sought help specifically from the specialists of such mobile teams²⁴⁸. Recognising the positive impact of psychosocial support mobile teams operation in the conflict-affected zone, the local authorities launched municipal mobile teams in early 2020; iii) **Specific assistance to elderly:** UNFPA continued provision of important humanitarian aid to public collective centres for the older people and people with disabilities in Donetsk and Luhansk oblasts based on demand and needs. Together with its partner, HelpAge International, the CO supplied elderly with cleaning and washing products, hygiene products and disposable medical masks. Personal protective equipment and *Institutional Hygiene Kits* were adapted to COVID-19 prevention. In addition, each package contained tips for aged people on how to protect from COVID-19. Additionally, UNFPA Ukraine's *Break the Circle* campaign materials on domestic violence and available assistance services were provided. iv) **Medical Mobile Clinics.** Each mobile clinic is a team of a family doctor, gynecologist, nurse, and driver equipped for primary medical examination. Being a life-saving health care service for residents of remote areas, the work of mobile clinics also focus on identifying GBV cases. As a follow-up, all the GBV survivors were referred to the specialised GBV services. Hence, the clinics proved to be much-needed medical care and GBV response service, especially in the isolated settlements of the conflict-affected area; v) **Health service delivery points (SDPs)** operated in the local hospitals along the contact line²⁴⁹. Supplied with the necessary medical kits and equipment, including specialised gynecological chairs-transformers for medical examination of patients (including persons with disabilities), SDPs provided effective and timely assistance to GBV survivors as well. Anonymous, quality and survivor-oriented free of charge medical assistance forms the basis of SDPs' operation. Such health service delivery points constitute a unique model of assistance to women-survivors of GBV, as they enhance the early detection of covert cases of violence and the effectiveness of coordination and referral of GBV survivors to other service providers.

WORK WITH THE MINISTRY OF INTERNAL AFFAIRS AND POLICE. UNFPA succeeded in the development of an approach that combines a network of shelters, a hotline, and mobile psychosocial support teams. A strong cooperation with the Ministry of Interior is built through providing special Police Units trainings (POLINA). On one hand, the Ministry of Interior and National Police were supported with the expansion of the police GBV/DV response groups POLINA totaling 45 operating mobile groups throughout the country. 17 trainings for 220 POLINA members and 400 members of 102 call-line operators were conducted to build the police capacity in survivor-centered response, including GBV/DV identification, survivor-centered communication, referrals, and prevention. Moreover, 59 tutors from 22 police training centers from every region of Ukraine completed training of trainers to enhance their expertise to provide tailored training to police officers of specialized mobile teams

of police reacting to GBV/DV cases across Ukraine. On the other hand, the CO supported information campaigns, including exhibition and digital campaign *The Matter Is...* to mark the global action *16 Days of Activism against Gender-Based Violence* in Ukraine that was implemented jointly with the Ministry of Internal Affairs of Ukraine and the National Police of Ukraine with the support of the Office of the Deputy Prime Minister for European and Euro-Atlantic Integration of Ukraine and the First Lady of Ukraine. Also, with UNFPA support the *Break the Circle* campaign established new fruitful partnerships of the National Police with Ukrainian State Railway that agreed to broadcast a series of awareness raising videos in interregional Intercity trains (540 displays) for 2 months free of charge. In addition, the Kyiv Tube placed UNFPA safety plans (developed with the National Police) as a social advertisement in every train coach. As collaboration continues, there are many more plans on involvement of the National Police to combat DV/GBV, including development of mobile application for DV/GBV victims and improvement/implementation of the legal framework and policies.



COMMUNICATION: Effective strategic communication utilising both social and traditional media is yet another sphere where UNFPA is particularly strong. Many respondents agreed that communication campaigns of UNFPA played important roles in success achieved. Even COVID-19 was used as an opportunity to expand communication outreach via online media, leveraging the high demand for online events during the first lockdown period in 2020. In addition to this, targeted and continued communication of UNFPA with the key stakeholder groups, including national and local government, CSOs, donors and businesses were often mentioned by various experts as an outstanding feature of the CO²⁵⁰.

PARTNERSHIP BUILDING: UNFPA continued achieving the most gains from creating successful partnerships at local and national levels connecting government agencies, CSOs, donors, and businesses with aim to effectively implement programs. National and local partners share the CO values and beliefs: equality, human rights and sustainable development. UNFPA considered various formats of cooperation with partners, including: i) implementation of joint projects based on win-win mode; ii) information partnership, where UNFPA provide expertise and consultation for an existing platform; iii) collaborations with brands and opinion leaders, and fundraising, when, together with a brand, the CO develop a socially significant idea and jointly implement it; iv) financial partnership in implementing joint projects; and v) cooperation within UNFPA programs. The most significant UNFPA partnership projects include i) *Come on, Let's Play!* in cooperation with *FC Shakhtar* and *the Shakhtar Social foundation* in promoting the ideas of responsible fathering, combating gender stereotypes, in particular in sports, by creating a football team for girls and supporting teams of girls with intellectual disabilities; ii) *Beauty for Everyone* educational project implemented in cooperation with L'Oréal Ukraine to teach women being in difficult living conditions and affected by domestic violence the basics of hairdressing skills and to help them build their way to a better life; iii) AVON charitable assistance for women affected by domestic violence hiding in a shelter where women have an opportunity to solve a difficult situation with the help of specialists without worrying about household problems; iv) *Myths about women's health together with doctor Nataliia Silina's School of Women's Health*; and v) *WikiGap and Women in STEM* with Wikipedia. The CO partnership approach was recognized by a significant part of the stakeholders. Some interviewed respondents called UNFPA "a door opener"²⁵¹ underlining the importance of connection and access to national and international institutions, resources, and decision-makers. Furthermore, UNFPA provided synergy effects of the networks it created and assisted in the public-private dialogue²⁵². This is an outstanding feature of the CO approach that should be used in the next Country Programme.

RESOURCE MOBILISATION PRACTICES: The ET identified the following good practices of the CO, including: i) due to strategic thinking and approaches the CO successfully used elevated Donors' interests to GBV and achieved advances in legal framework to attract additional resources to GBV response. Proactive relationships of the CO with donors and businesses played an important role in as well²⁵³; ii) UNFPA utilised the conditionality approach in working with local municipalities attracting local resources for most of its local initiatives, ensuring local government ownership and durability of the effects (described in the EQ3)²⁵⁴; iii) in the GE/GBV area – creation of social enterprises assisted income generation that resulted in economic independence of DV/GBV survivors²⁵⁵.

HONORARY AMBASSADOR: The proactive activities and position of the UNFPA Honorary Ambassador - Masha Efrosinina contributed significantly to promotion of gender mainstreaming and GBV in the public policy agenda. For example, Masha's information campaign during the local elections to promote the topic of GBV response and prevention in the programs of mayoral candidates influenced the further perception of this topic by the already elected mayors. In addition, the Ambassador's access to high political authorities and her public reputation/image also contributed to the fact that the topic of GE issues and GBV response became one of the priorities of the First Lady.

At the same time, evaluation identified the most important **LESSONS LEARNED** (both positive and negative) to be considered in the next CP and in light of the 2030 Agenda by the UNFPA programme areas:

- **A&Y:** Sometimes success in one sphere could pull the focus and resources from other spheres. Evaluation observed how high success in GBV-response area and lack of opportunities in SRH promotion shifted UNFPA focus and resources to the GBV response and prevention where the biggest progress was made under the current CP. The successful sphere attracted a larger portion of attention, human and financial resources leaving little to other less successful spheres, including work with vulnerable groups and development of SRH policies and services. It is especially important when much success was achieved during previous CPs by the CO and CSO IPs.
- **GE:** (i) The Biarritz Partnership that Ukraine has joined in 2020 led by the Vice Prime Minister Office and Office of the First Lady offers a vision of national policy and priorities in main components of UNFPA work related to gender-sensitive education, GBV prevention, and legislation on paid paternity leaves. This is the basis for building effective synergies and coordination in the further development of national GE strategy. (ii) The curriculum of the training for publishers should include more historical context and background information about the roots of discrimination and gender inequality to bring all the participants to the same level of understanding of basic notions and issues, as well as more information on discrimination of people with disabilities and discrimination based on social origin.
- **GBV:** There were several lessons learned identified by the ET, including: i) In GBV SC work, co-chairing by local authorities is important to strengthen coordination between humanitarian/developmental and governmental actors/partners, in particular concerning the transition process. Also, it is important to transfer the best GBV SC practises and coordination mechanisms to the communities, and bridge it with the national legislative and institutional framework²⁵⁶; ii) The process of creation and integration of specialised services across the country is well underway. It is expected to intensify in the context of implementation of the state program and the Decree of the President of Ukraine. However, the Government and territorial communities lack methodology for assessing needs of communities in specialised services to develop the services network effectively. UNFPA offered its expertise to develop such methodology that can become a part of the national strategy on development of GBV response and prevention mechanisms²⁵⁷; iii) Ensuring quality of newly set-up social service providers (outside the scope of the project) needs a systemic approach to the quality assurance process. Training practises with providers, local civil servants need to be incorporated in national training system for social servants, civil servants²⁵⁸. Currently, there is no national system of provision of such training, while the demand for capacity building of newly created PSS MTs, daycare centres and shelters is large²⁵⁹; iv) It is crucial to continue the dialogue with local authorities to formalise the “institutionalisation” embedded in the MoUs keeping the funding from the local budget in line with the local programmes on gender equality and GBV response; v) In order to ensure the feasibility of the programmes for perpetrators it is crucial to change the perception of such programmes as “punitive” rather than “preventive” among respective stakeholders and caretakers.
- **Communication:** The CO incorporates communication activity to all UNFPA ongoing programme activities, including partnership building and resource mobilisation. For example, all awareness-raising activities during the *16 Days* campaign at the national and local level were held in both offline and online formats at the same time, reaching over 4.5 million people. It not only helped overcome limitations of COVID-19 quarantine but also made all activities more accessible, reaching those who previously could not join (people with disabilities, residents of rural areas, communities that are only at the starting point in their GBV prevention work). Moreover, the campaign virtually united Ukrainian society around the cause of protection of survivors and prevention of GBV. The interventions used real stories of GBV survivors making their voices heard. This helped remove the walls in public perception – the walls built by the fear that care could be considered as interference, the walls of reluctance to make the first step and reach out. The other example, *Break the Circle* campaign established new fruitful partnerships that led to powerful synergies. Ukrainian State Railway agreed to broadcast a series of awareness raising videos (developed jointly with the National Police) in interregional Intercity trains (540 displays) for 2 months free-of-charge. Kyiv Tube placed UNFPA safety plans (developed with the National Police) as social advertisement in every train coach. The presentation of results of the study on attitudes to comprehensive sexuality education showed that the CO should take into consideration “*when communicating the results of research on teachers’ and parents’ attitude to sex there was “uncontrolled communication”, with media twisting the results based on one or two graphs only and blowing it out of proportion. It generated some mistrust in the results*”²⁶⁰. In addition, respondents noted, “*there were not enough resources for information campaigns. Online campaigns are especially important for youth oriented projects*”²⁶¹.
- **Partnership Building:** Bearing in mind that the primary business’ focus is profit increase, it is crucial to showcase and provide evidence to business representatives that the application of gender equality, family-friendly policies,

as well as tools for domestic violence prevention and response are advantageous for business. An online platform for the corporate sector highlighting the best practises in this field and UNFPA knowledge products are beneficial.

EQ5: To what extent has UNFPA policy advocacy and capacity building support helped to ensure that sexual and reproductive health (including Family Planning), and the associated concerns for the needs of young people, gender equality, and relevant population dynamics are appropriately integrated into national development instruments and sector policy frameworks in the programme country?

SUMMARY OF FINDINGS. UNFPA policy advocacy and capacity building support helped ensure that sexual and reproductive health and the associated concerns for the needs of young people, gender equality, and relevant population dynamics were appropriately integrated into national development instruments and sector policy frameworks in the programme country but extent of their integration varied by programme areas. **A&Y:** UNFPA policy advocacy efforts in the sphere of sexual and reproductive health and associated concerns for the needs of young people had limited success in the reporting period. Despite some progress in promotion of *Comprehensive Sexuality Education* to the formal education system on national level, the initiative is not implemented yet. *State Program on Reproductive Health* advocated by UNFPA was not approved by Government as well as *National Action Plan on Youth Employment* developed and advocated by UNFPA and CSR Ukraine. UNFPA contributed to the development of recently adopted *National Strategy of the State Youth Policy*, and the State Programme *Youth of Ukraine* and coordinated contributions of UN Agencies to these policy documents. Currently, UNFPA is co-chairing Sectoral Working Group on Coordination of International Technical Assistance in the Spheres of Youth and Sports ensuring UN involvement in policy dialogue on Youth on the highest level. During the current CP, UNFPA provided little capacity building support in the sphere of sexual and reproductive health. **GEWE.** Gender review and anti-discrimination examination of school textbooks and curricula was institutionalized through the Order by the Ministry of Education and Science. UNFPA provided expert support to developing sectorial public policy in gender equality, GBV response and prevention sphere. UNFPA supported development of various by-laws for GBV response, especially by social service provision. National Gender Policy was improved and it ensured gender mainstreaming in educational, family, youth sectoral public policy. The legal framework at the local levels for GBV prevention and response has been improved. Municipalities included gender-based violence response in their development policies/programmes and allocated resources to improve access of their residents to quality protection from GBV. Evaluation showed that the CO incorporated **three transformative results, Leave No One Behind policy, human rights-based analysis, innovation and disability** issues into formulation of national policies quite well as well as implemented **data-driven, gender responsive and human rights-based interventions** to maintain essential services, including quality sexual reproductive health and GBV prevention and protection services (including mental health and psychosocial support), within the framework of the COVID-19 response and recovery efforts.

A&Y: UNFPA policy advocacy efforts in the sphere of sexual and reproductive health and associated concerns for the needs of young people had limited success in the reporting period. Recently adopted national policies and programs, namely: *National Strategy of the State Youth Policy in Ukraine until 2030* (approved 12.03.2021); the State Programme *Youth of Ukraine 2021-2025* (approved 23.12.2021), and the Law of Ukraine #1718 *On Fundamental Principles of Youth Policy* (approved 27.04.2021) received UNFPA inputs and are in line with UNFPA priority on adolescents' development. At the same time, the Ministry of Youth and Sport representatives consider that inputs from UNFPA in development of these policies were moderate²⁶². UNFPA also participated in development and advocacy of the draft *National Sexual and Reproductive Health Program* that included "improvement of universal access to SRH services, especially people with disabilities, people living with HIV and IDPs". However, the Program has not been adopted yet. Due to structural changes of the Ministry of Youth and Sports, several policies that UNFPA advocated and co-developed with other partners were not approved, including the *Healthy Lifestyle Strategy*, and the *National Action Plan on Youth Employability*²⁶³. Progress on comprehensive sexuality education implementation in national curricula was limited, despite continuous UNFPA efforts grounded on convincing evidence and constant communications with GoU counterparts and other relevant stakeholders. The Ministry of Education remained optimistic on the perspective of this effort, confirmed its high relevance, and stays interested in further cooperation. So far, only the term "sexual health" was included in State Standard of secondary education due to UNFPA efforts²⁶⁴.

During the current CP, UNFPA provided small-scale capacity-building support in the sphere of sexual and reproductive health and associated concerns for the needs of young people. In 2018, UNFPA conducted workshops and trainings for health care providers and SDPs on prevention and treatment of STIs (including HIV), 216 health workers improved the capacity to provide reproductive health services in cases of gender-based violence, prevention and treatment of STIs, comprehensive health care to women subjected to sexual violence, provision of emergency post-rape assistance to GBV

survivors. UNFPA also strengthened capacity of family doctors/primary health care doctors as an entry points to healthcare for PLHIV, supporting development of online course for *Friendly Doctors* aiming to reduce discrimination against the key populations and PLHIV. To make the key populations and PLHIV aware of a friendly doctor nearby, UNFPA developed the interactive map platform with contacts and location of the friendly doctor in a city.

Despite the above-mentioned limitations, online survey participants agreed on that UNFPA was able to ensure that the associated concerns for the needs and rights of young people, including their needs in SRH, gender equality, and relevant population dynamics were integrated appropriately into the national development instruments and sector policy frameworks in Ukraine²⁶⁵

GEWE programme area. The most important result of UNFPA capacity-building support and policy advocacy in reducing gender inequalities, GBV prevention and response areas were received in the following areas.

Improvement of legal framework. UNFPA contributed to advocacy efforts and an expert review of the Law²⁶⁶ on *Amendments to Certain Legislative Acts to Ensure Equal Opportunities for Mother and Father to Care for their Child* to ensure equal opportunities for mothers and fathers to care for their children, improve men's caretaking practises as well as remove legislative gaps restricting a man's right to paternity leave. The law was adopted by parliament and signed by the President of Ukraine on April 15, 2021. In addition to this, UNFPA provided extensive expert support to developing President's Decree *On Urgent Measures to Prevent and Combat Domestic and Gender-Based Violence and Protect the Rights of Survivors*²⁶⁷. The Decree demonstrated the readiness of the Government to protect human rights, dignity and safety of GBV survivors and ensure they have access to high-quality specialised services across Ukraine. Following the Decree signed in September 2020, state authorities at the national and local levels expressed their commitment to GBV response and undertook actions to implement the Decree's provisions.

Policy Document. The CO contributed to the development and adoption of the following Government policy documents, namely: i) Decree of the Cabinet of Ministers of Ukraine of April 11, 2018 No. 273 *On Approval of the State Social Program for Ensuring Equal Rights and Opportunities for Women and Men for the period until 2021*²⁶⁸; ii) Decree of the Cabinet of Ministers of Ukraine of August 22, 2018 No. 658 *On Approving the Procedure for Interaction of Subjects Engaged in Prevention and Response to Domestic Violence and Gender-Based Violence*²⁶⁹; iii) Decree of the Cabinet of Ministers of Ukraine of September 5, 2018 No. 634-r *On Approval of the National Action Plan on Implementation of Recommendations Set Out in the Concluding Observations of the UN Committee on the Elimination of Discrimination against Women to the Eighth Periodic Report of Ukraine on the Implementation of Convention on the Elimination of All Forms of Discrimination against Women for the period until 2021*²⁷⁰; and iv) Decree of the Cabinet of Ministers of Ukraine of February 21, 2021 No. 145 *On Issues of State Social Program for Preventing and Combating Domestic Violence and Gender-Based Violence until 2025*²⁷¹.

Ukraine has gained official status as a member of **the Biarritz Partnership**, an international initiative for equal rights and opportunities for all. Ukraine's accession to it is an important project in the context of equality of all citizens was initiated by the First Lady in December 2019. UNFPA Ukraine provided technical support to the Office of the First Lady and the Cabinet of Ministers in the development of a normative legal document on implementation of Ukraine's commitments within the framework of the Biarritz Partnership. As result, the Cabinet of Ministers of Ukraine voted in support of the country's accession to the Biarritz Partnership for Gender Equality and approved Resolution of the Cabinet of Ministers of Ukraine that endorsed the Decree of December 16, 2020, No. 1578-r *On Approval of the Action Plan for Implementation of Commitments of the Government of Ukraine Undertaken within the Framework of the Biarritz Partnership International Initiative*.²⁷²

GBV response and prevention mechanism. UNFPA provided technical assistance to the **Inter-Sectoral Working Group** in developing 21 by-laws²⁷³ on GBV response and prevention. For the first time, the Government allocated funds (274.2 million UAH) to finance a subvention from the State Budget to territorial communities to create GBV response and prevention infrastructure. UNFPA's approach to the development of a system of GBV response and prevention, based on complexity and inter-sectoral/ inter-institutional cooperation, interaction, was used by local authorities in at least 30 communities²⁷⁴ and was institutionalised through local programs/policy documents²⁷⁵. Territorial communities throughout Ukraine showed great interest in the introduction of specialised social services for GBV survivors. For example, in 2021, 117 territorial communities (8% of all communities) participated in the competition for a state subsidy for establishment of specialised social services for GBV survivors.

At the same time, 30 partner-communities are willing to finance these activities on a partnership basis. Territorial communities invest in creating a robust GBV response and prevention system, not just in establishing specialised social

services. The analysis of the practice of local communities showed that for 1 USD spent on the training of municipal officials on GBV, there is an increase of 50% of expenses from local budgets for the introduction of special social services for GBV survivors: “Municipalities began to invest more of their own funds from the local budget in the creation and support of specialised social services for GBV survivors”²⁷⁶.

Gender Mainstreaming. As it was mentioned earlier, anti-discrimination examination of school textbooks, including gender review was institutionalized in several ways. First, the MES adopted the order *On Approval of Instructional and Methodological Materials for Conducting Expert Examinations of Electronic Versions of Draft Textbooks* (02.11.2018 #1183)²⁷⁷ followed by the MES approval in 2020 of the *Procedure for Providing Stamp Signature Textbooks and Curriculum*²⁷⁸ that introduced obligatory anti-discrimination procedures. Second, 89 anti-discrimination examination experts were trained and certified with MES accreditation²⁷⁹.

In addition, UNFPA succeeded in doubling the number of the companies that became signatories of the *Declaration for Gender Equality and Prevention of Domestic Violence*. Overall, business coalition consists of 31 signatory companies now²⁸⁰. According to the results of the survey of respondents (2.76 of max 3), it can be stated that UNFPA policy advocacy and capacity-building support helped to ensure that prevention and response to gender-based violence are integrated appropriately into national development instruments and sector policy frameworks²⁸¹.

KIIs and Online survey respondents confirmed that UNFPA incorporated **three transformative results, Leave No One Behind policy, human rights-based analysis, innovation and disability** issues into formulation of national policies very well. The CO conducted/supported research and studies to provide and design evidence-driven policies and interventions. Not yet approved the State Social Program on Reproductive Health of the Nation was grounded on evidence of *Awareness and Attitudes of Teachers and Parents to Comprehensive Sexuality Education* study. Evidence from the report on the State of Youth in Ukraine in 2019 supported by the CO contributed to the development of *National Strategy of State Youth Policy in Ukraine until 2030*²⁸²; *State Programme Youth of Ukraine 2021-2025*²⁸³. Implementation of the Youth Well-Being Index provided 11 municipalities with needed evidence regarding youth demographic and needs of young people, inform decision-making at a local level, including budgetary decisions, and increase youth participation in local decision-making processes. The UNFPA support, both technical and financial allowed to: i) adopt Order by the Ministry of Education and Science *On Approval of Instructional and Methodological Materials for Conducting Expert Examinations of Electronic Versions of Draft Textbooks for Antidiscrimination* that were used for development of the national standard for gender review of schoolbooks; ii) develop standard for gender review of school curricula to ensure they are free from gender stereotypes and discrimination, and build a network of teachers applying gender lenses in their work; iii) build capacity in anti-discrimination expertise of textbook for specialists of IECM²⁸⁴; and iv) prevent career choices dictated by gender stereotypes by training school teachers. Photo exhibition promoted the idea of and attitude to being a responsible dad along with educational component in TatoHubs on child psychology, stress management, and non-violent communication. The other installation exhibition “The Matter Is” prepared by the Ministry of Internal Affairs with UNFPA support has drawn attention to domestic violence often happening behind closed doors. Those policy and advocacy events were carried out as results of the studies supported by the CO, including: 2018 & 2019 *Gender Equality and Response to Domestic Violence in Private Sector of Ukraine: Call for Action* research; 2020 *How to Choose a Profession Being Unbiased: The Opinions of the Youth from Pryazovia* sociological survey; 2020 survey of *The Role of Men in Caring for Children*; and 2021 survey *On Awareness and Attitudes of Teachers and Parents to Comprehensive Sexuality Education in Ukraine*. Other studies, research and advocacy work supported by the CO laid down the ground to development and approval of 21 by-laws and regulations that finalised the development of framework for GBV prevention and response in Ukraine. Extensive UNFPA expert support allowed development and approval of President’s Decree *On Urgent Measures to Prevent and Combat Domestic and Gender-Based Violence and Protect the Rights of Survivors*, Government policy documents listed earlier; amend the *Law on Amendments to Certain Legislative Acts to Ensure Equal Opportunities for Mother and Father to Care for Their Child*; and Ukraine gaining the official status as a member of an international initiative for equal rights and opportunities for all called the Biarritz Partnership.


With UNFPA support, several **innovative** training, tools were developed, including training *Skills Labs & PROskills of the Future* for youth on career skills and self-employment; Youth Well-Being Index platform assessing the level of youth well-being at city/town level; *WikiGap* to promote GE online and visualised female achievements in science, sport, politics; public awareness campaigns on GE/DV/GBV issues through theatre and ice performance, photo exhibitions, digital solutions, TV programmes like *Ukrainian Top Model*, as well as through UNFPA Honorary Ambassador Maria Yefrosinina. **Disability** issues were incorporated by the CO through establishment of a partnership with *Special Olympics* and FC *Shakhtar* to implement joint project for girls with intellectual disabilities launched in Nov 2019. Also, UNFPA was

engaged in the film festival focused on inclusivity issues²⁸⁵.

In addition to the integration of associated concerns for the needs of young people, gender equality, and relevant population dynamics into national development instruments and sector policy frameworks, the CO assisted private companies to mainstream gender and GBV issues into corporate policies of signatories of the Declaration for GE and prevention of DV GBV. UNFPA-led online seminars and webinars on gender equality, family-friendly policies, domestic violence, and 16 days campaign had yielded a number of developed and adopted corporate policies, instruments and protocols on paternity leaves, family-friendly policies, courses on childbirth and parenting preparation, women’s career empowerment, zero tolerance to domestic violence, and assistance to survivors (*StarLightMedia, Ferrexpo, Avon, Danone* etc.).

Online respondents agreed that the UNFPA CO incorporate five crosscutting issues into formulation of national policies (Table 12) to a great extent (in average 2.77 out of 3)²⁸⁶

Table 12. Extent of incorporation of five crosscutting issues into formulation of national policies by 3-point scale²⁸⁷

17. UNFPA three global transformative and people-centred results (ending preventable maternal deaths, ending the unmet need for family planning, ending gender-based violence and all harmful practices, including child, early and forced marriage) have been incorporated into the formulation of national policies	2.72
18. UNFPA ensured vulnerable and marginalised groups (such as young women and girls, persons with disabilities, key/targeted populations, etc.) have the information they need , are protected against violence and have access to life-saving services	2.70
19. UNFPA policy should target the most vulnerable (as part of its Leaving No One Behind policy). Do you think that this has been incorporated into the formulation of national policies? 	2.83
20. UNFPA systematically incorporated and implemented data-driven, gender responsive and human rights-based interventions to maintain essential services, including quality sexual reproductive health and GBV prevention and protection services (including mental health and psychosocial support), within the framework of the COVID-19 response and recovery efforts	2.78
21. Human rights-based analysis (e.g. human rights principles of participation and inclusion, equality and non-discrimination in situation analysis, programme design, implementation and monitoring) has been incorporated into the formulation of national policies	2.84

In addition, it is important to mention that respondents provide very high assessment to UNFPA work on systematic incorporation and implementation of **data-driven, gender responsive and human rights-based interventions** to maintain essential services, including high-quality services related to sexual reproductive health and GBV prevention and protection (including mental health and psychosocial support), within the framework of the COVID-19 response and recovery efforts. UNFPA extended comprehensive support for development of municipal GBV response and prevention systems in 15 cities, and provided technical and capacity building assistance to duty bearers and service providers, seed funding for setting up specialised services, support with awareness-raising and community mobilisation initiatives. UNFPA trained a cohort of 45 municipal consultants from partner-cities to drive development of effective municipal systems of GBV prevention and response as well as strengthened capacity of 754 duty bearers and service providers to build effective multi-sectoral response to GBV, and ensure survivor-oriented assistance to all in need. As result of UNFPA support, the 24-hour-long comprehensive online course was developed and more than 5,300 specialists from social services centres, medical facilities and educational institutions involved in GBV response enhanced their expertise that constitutes 90% of all GBV response focal points²⁸⁸. Via national toll-free hotline for GBV survivors, over 14,500 GBV survivors annually (average for 2018-2021) received vital informational, psychological and legal consultations. As part of the UNFPA-supported PSS services²⁸⁹, ‘silent solutions’, or consultations via texting online was activated which helped over 9,000 people locked home, including persons with disabilities, to receive assistance safely. In June - December 2020 alone, two UNFPA mobile clinics provided life-saving medical assistance and referral to specialised services to over 7,900 people (including 3,298 elderly people, 395 people with disabilities and 113 children) from 58 remote settlements and areas along the contact line, where there is no specialised healthcare assistance. This outreach support was critical for the vulnerable population that is particularly at risk during the COVID-19 pandemic. Many more data and examples were summarised on the UNFPA Ukraine website²⁹⁰, public annual reports²⁹¹ and delivered through various communication channels and means.

EFFICIENCY

EQ6: To what extent has UNFPA made good use of its human, financial and technical resources, and has used an appropriate combination of tools and approaches to pursue the achievement of the Results defined in the UNFPA country programme?

SUMMARY OF FINDINGS. During three years of the 3rd CP, the UNFPA CO in Ukraine made good use of its human, financial and technical resources, and has used an appropriate combination of tools and approaches to pursue the achievement of the planned results. With growing staff up to 49 people and with more complex CP portfolio, changes in **human resources** structure and profiles were introduced in order to address the goals of the 3rd CP and challenges faced by Ukraine. The most significant challenge the CO faced was how to keep such energetic and young team of professionals in the Ukrainian competitive environment with high international donors' demand for qualified and well-trained human resources. The CO used available and mobilised **financial resources** to a great extent. Funding and overall expenditures for 3 years increased and constitute already 135.18% of proposed indicative assistance of \$9.5 million. During 2018 – 2020, expenditures from other resources increased dramatically up to 142.81% against planned 100% for 5 years with the other already committed additional \$4 million by different donors through 2021. Furthermore, the CO succeeded in attracting resources from UNFPA Regional office as well as from private corporations. In general, analysis of financial resources for three years shows that they are overwhelmingly higher compared to those envisioned for five-year committed resources, which is a very positive trend. The CO Ukraine experience in mobilising resources can be used as a best practice to be shared by the CO Ukraine with other countries. The achievements of the other resource mobilisation by UNFPA Ukraine have been remarkable, particularly in the areas of GBV response during the COVID-19 pandemic and in humanitarian settings. With near \$16 million mobilised from external sources, the UNFPA Ukraine became the largest UNFPA programme at the regional level. The resource mobilisation and partnership plans guided efforts to leverage influence and co-financing with the Government, United Nations partner organisations and other development partners on identified priorities and funding gaps. One of the key factors of the CO success in resource mobilisation and partnership building includes the existence of dedicated staff members and stream leads who work with partners and donors, both traditional and non-traditional for the UNFPA Ukraine. UNFPA CO stream leads (GBV, GE, Youth and RPP) develop project proposals and invest significant efforts into nurturing and sustaining strong partnerships with donors. UNFPA has established strong working relations with a number of government counterparts, civil society, academia, development partners, private sector in key sectors, including adolescent and youth, GE and GBV. UNFPA managed to engage adequate in-house and external **technical expertise** for the CP implementation. With useful technical support from the UNFPA Regional Office and HQ in New York and local technical expertise, there was limited availability of male experts in GE, DV, and GBV areas. The CO **documented** its activities effectively and used multiple channels, including public annual reports, to promote UNFPA activities and record best practices, success stories and data in both Ukrainian and English languages. The UNFPA CO supported a number of **innovations** appreciated by its stakeholders and beneficiaries. The evaluation showed that UNFPA programme **management** was guided by the SOP of the UNDG²⁹² for Delivering-as-One. The UNFPA support was provided through IPs and partners from CSOs and government agencies, and national implementation was the preferred implementation modality to foster national ownership, build the capacity of national partners and ensure sustainability of results. Government and other groups of stakeholders recognized UNFPA ability to produce significant and sustainable changes with little support. Evaluation showed that respondents valued the UNFPA management practices starting with consultation on the CP design and project planning to their implementation, monitoring and evaluation. Evaluation showed UNFPA's flexibility and ability to re-programme development activities in case of emergency situations, like **COVID-19**, and the CO ability to take this pandemic as an opportunity rather than a problem to promote socially important but difficult to communicate issues as DV or GBV.

Human Resources. To achieve planned outcomes, UNFPA has made good use of its human resources to a great extent. UNFPA CO changed its human resources structure and profiles in order to address the goals of the 3rd CP and challenges faced by Ukraine. Since the start of the 3rd CP number of staff grew up to 46 people and, as of time of evaluation, three more individuals were in process of hiring. As CP portfolio became more complex, the CO team consisted of individuals with strong technical skills in the core areas of gender and young people, partnership development, resource mobilisation and communications along with networking and advocacy skills and strategic thinking. Skilled operation staff was able to manage the growing investment portfolio effectively and handle multiple tasks and various donors' and partners' requirements efficiently²⁹³. As of time of evaluation, the country office had two sub-offices in eastern part of Ukraine (Kramatorsk and Mariupol) with three employees, but there were 36 consultants working in 30 municipalities throughout Ukraine on UNFPA projects.

Key informants²⁹⁴ and online survey respondents²⁹⁵ acknowledged high work standards, professionalism, openness and accessibility, accuracy and attentiveness, result-oriented and very good attitude of the UNFPA CO staff. Evaluation team

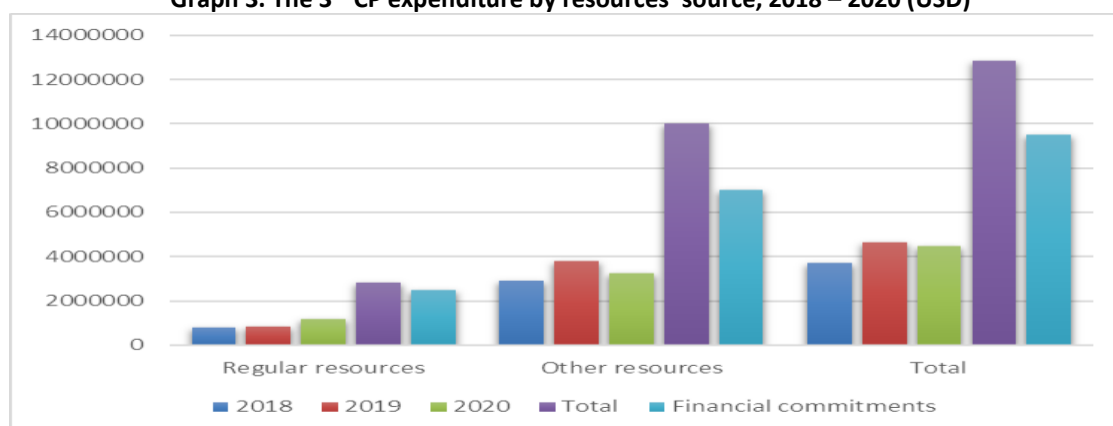
noticed the reliability, support, and collaboration of the UNFPA CO team. The UN partners appreciated flexibility, effectiveness and efficiency of CO managers, but noticed overwhelming business²⁹⁶ and need for additional human resources. Lack of staff was mentioned during evaluation: *“Not enough staff in the youth component. GBV is the main priority. As result the CO is very slow with little focus on youth policy”*²⁹⁷. Human resource limitation was recognized by the CO and, as it was mentioned above, additional staff members have to be hired. KIIs²⁹⁸ noted democratic and inclusive style of both UNFPA Representative and Assistant Representative with positive office atmosphere and encouraging internal and external collaboration and cooperation. Moreover, UNFPA stakeholders²⁹⁹ mentioned UNFPA experience of working with state, civil society, and international organisations, effective involvement of national and international experts and consultants. At the same time, one respondent noted a shortcoming in the CO internal communication: *“new employees were unaware of the arrangements made with their predecessor, and it is important to keep communication open, clear and available / easily accessible to everyone”*³⁰⁰. Moreover, evaluation noticed³⁰¹ that to keep such an energetic and young team of professionals could be a challenge in the Ukrainian competitive environment with high international donors’ demand for qualified and well-trained human resources.

Evaluation noticed the CO practice of annual planning of the Learning agenda both for UNFPA team and individual staff members that agreed with the UNFPA Regional Office. The knowledge sessions on various topics organised in the office under the CO Learning Plan was a good practice that facilitates knowledge sharing among colleagues and helped building / strengthening capacity of the office personnel increasing CO effectiveness and efficiency. At the same time, it was mentioned³⁰² that while the CO Learning Plan is usually approved in January, funds for its implementation, as a rule, come only in September that leaves very short time for implementation of team learning events (at least four of them). The CO has performance appraisal development plan that is used to evaluate staff work and make decisions of position/salary changes/rise.

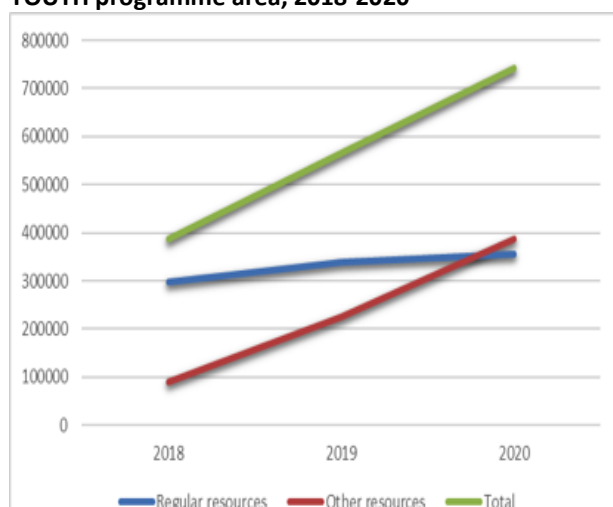
Financial Resources. The CO used available and mobilised financial resources to a great extent. Sources of funding from UNFPA include regular, or core, resources and other, or non-core, resources that the Agency was able to mobilise on the strength of the expected results and strategies. Tendencies in expenditures of 3rd CP for 2018-2020 are presented in Table 7 and Graph 3. Funding RR increased from 2018 to 2020 and overall expenditures for 3 years already constitute 135.18% of the proposed indicative assistance of \$9.5 million³⁰³. During 2018–2020, expenditures from other resources increased dramatically up to 142.81% in three years of the 3rd CP against planned 100% for 5 years with already committed additional \$4 million by different donors³⁰⁴ through 2021. At the same time, CPE TOR stated *‘by now, the total amount of mobilised resources exceeded 16 million with contributions from the Government of UK, Canada, Sweden, EU, Estonia and private sector (in kind)’* that shows availability of resources for the last two years of the CP and not only through 2021 as mentioned above. It should be mentioned that UNFPA Country Office succeeded in attracting resources from UNFPA Regional office totalling \$350,000.00 in addition to the already committed core funds from UNFPA³⁰⁵ for COVID-19 related activities in 2020. This shows the CO’s great efforts in mobilising and using resources. In general, analysis of financial resources for three years shows that they are overwhelmingly higher than those envisaged for five-year committed resources, which is a very positive trend. The CO Ukraine experience in mobilising resources can be used as a best practice to be shared by the CO Ukraine with other countries.

Tendencies of spending by programme areas for 2018-2020 of 4th CP are described below.

Graph 3. The 3rd CP expenditure by resources’ source, 2018 – 2020 (USD)



Graph 4. Tendencies in spending in ADOLESCENTS AND YOUTH programme area, 2018-2020



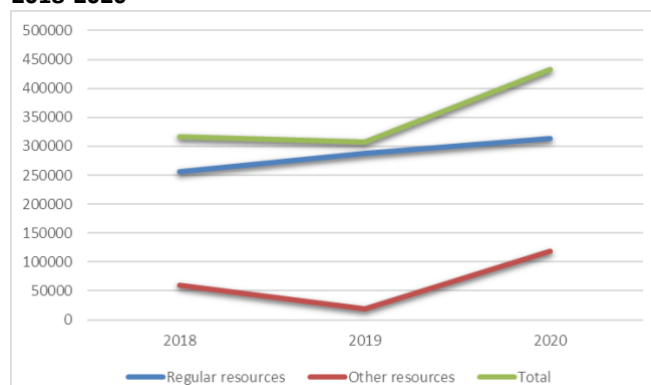
Adolescent and Youth. \$2.8 million were committed to this outcome for 2018-2021 CP (\$0.8 of RR and \$2.0 from OR). For the first three years of the CP³⁰⁶ \$1,696,411.31 (Graph 1) were spent for promoting evidence-based and inclusive national and subnational policies and programmes for young people that advance sexual and reproductive health, reduce risks and vulnerabilities, expand opportunities, and promote youth participation for the full realization of their potential, including in humanitarian settings. During three years of the 3rd CP implementation, 58% of activities were implemented from UNFPA regular resources, and 42% were funded from other resources. Main UNFPA implementing partners for activities related to adolescent and youth activities include government institutions (Ministry of Youth and Sport, Ministry of Education and Science; City Councils of Kremenchuk, Melitopol, Lviv, Mariupol; Regional

Youth Centres of Donetsk and Luhansk; and Luhansk Regional Pedagogical Postgraduate Institute), civil society and academia partners (CSR Ukraine, WHFP, CCO 100% Life, Institute of Demography and Social Studies, NGO Centre for Society Research, Teenergizer, Shakhtar Social, Special Olympics Ukraine, Women’s League of Donetsk Region, and Youth East), and UN agencies (such as UN RCO, UNICEF, UNDP, UNAIDS). EU and UNAIDS support totalling \$1,085,835 was used for implementation of projects³⁰⁷, including i) *2018-2022 EU Support to the East of Ukraine – Recovery, Peacebuilding and Governance* in the amount of \$858,986.00; UNAIDS funded ii) *2018-2019 Re-configured service delivery and innovative partnerships on HIV testing* in the amount of \$129,506.00, and iii) *2020-2021 Enhancing HIV Services for GBV protection providers in Odessa city* in the amount of \$97,343.00.

Gender Equality and Women Empowerment (GEWE).

UNFPA committed \$1.65 million to Output 1 of this Outcome 3 for 2018-2021 CP (\$0.65 of RR and \$1.0 from OR). For the first three years of the CP³⁰⁸ the CO spent \$1,056,004.99 (Graph 2) for reducing gender inequalities in social, economic and political spheres of life. 81% of RR were used in three years of the 3rd CP implementation from UNFPA regular resources, and 19% were funded from other resources. Main UNFPA implementing partners for activities related to GEWE activities include government institutions (Government Commissioner for Gender Policy, Committee of Parliament on Foreign Policy and Inter-parliamentary Cooperation, Office of the Prime Minister for European and Euro-

Graph 5. Tendencies in spending in GE programme area, 2018-2020

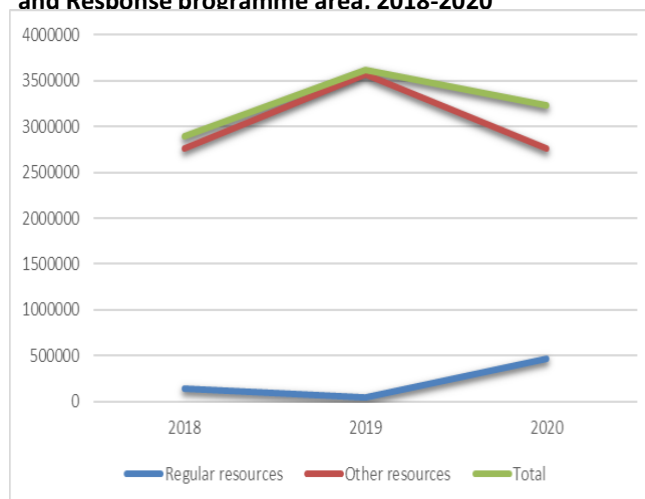


Atlantic Integration, Office of the First Lady, Ministry of Education and Science; Ministry of Social Policy, Ministry of Foreign Affairs, City Councils of Vinnytsia, Odesa, Poltava, Zaporizhzhia; Kyiv City Administration and Donetsk Regional State Administration), civil society and media partners (EdCapm Ukraine, CSR Ukraine, Ukraine Foundation for Public Health, Women’s League of Donetchynna, TatoHubs from Vinnytsia and Zaporizhzhia, StarLightMedia Group, etc.), private partners (Info Sapiens, PWC, Ferrexpo, Danone, etc.), and UN agencies (such as UNICEF, UNWomen). EU and Sweden provided support to the following projects: i) *EU 4 Gender Equality: Together against gender stereotypes and gender-based violence* regional project covering Armenia, Azerbaijan, Belarus, Georgia, Moldova and Ukraine and conducted jointly with UNWomen in the amount of \$441,375 for 2020-2023; and ii) *2020-2023 Equality Springboard: Project on Social Norms Change and Gender Stereotypes Elimination for Better Resilience and Prosperity of Women and Men in Ukraine* in the amount of \$1,717,135.00 respectively.

GBV Prevention and response. \$4.7 million were committed to Output 2 of Outcome 3 for 2018-2021 CP (\$0.7 of RR and \$4.0 from OR). For the first three years of the CP³⁰⁹ \$9,743,554.76 (Graph 3) were spent for strengthening national gender-based violence prevention and response mechanisms, including in humanitarian settings. In three years of the 3rd CP implementation 6.7% of activities were implemented from UNFPA regular resources and 93.3% were funded from other resources. Main UNFPA implementing partners for activities related to GBV prevention and response activities include government institutions (Office of the Prime Minister for European and Euro-Atlantic Integration, Office of the First Lady, Ministry of Social Policy, Ministry of Internal Affairs, National Police, Parliamentary Commissioner for Human Rights; Donetsk and Luhansk Regional State Administrations; city Councils of 30 target cities), civil society and media partners (Ukraine Foundation for Public Health, La Strada Ukraine, WHFP, Women’s League of Donetchynna, Internews Ukraine, Fund Masha, etc.); private partners (L’Oreal, Avon, StarLightMedia), and UN agencies (such as UNDP, UNICEF, UN Women, UNDP, UNHCR). UK, Canada, Estonia and Sweden provided \$10,158,224 to support implementation of seven GBV-related projects during 2018-2023³¹⁰.

Resource Mobilization and Partnerships Plans. The achievements of the Other Resource Mobilisation by UNFPA Ukraine have been remarkable, particularly in the areas of GBV response during the COVID-19 pandemic and in humanitarian settings. With mobilised near \$16 million from external sources, the UNFPA Ukraine became the largest UNFPA programme at the regional level. During the 2018-2020 of CP implementation, resources were mobilised from a large number of donors and private sector, including the Government of UK, Canada, Sweden, EU, Estonia, and private companies, such a Avon, L’Oreal. The largest external donor of the UNFPA CO in Ukraine is the Government of the UK. Most of the above-mentioned donors provided project-related support to the CO, which means that funding is earmarked for specific UNFPA programme activities. A large part of the external funding is a multi-year support that allowed the CO to plan its activities strategically. The list of 12 projects supported by the international donors shows that interventions in the GBV area were the most interesting for the external support. The UNFPA Ukraine succeeded to attract significant support from private companies. For example, in 2019 Avon provided in-kind donation worth of \$0.42 million and in 2020 the company donated \$25,000 in cash for the opening of the crisis room for the first time in its history. This example became a precedent for other companies, like the CO partner L’Oreal, that now are encouraged to follow the Avon practice. However, one respondent noted: *“When providing support on building cooperation with local businesses, the CO expertise did not always take into account the specific features of local business”*³¹¹. UNFPA Ukraine was able to build a strong and growing cohort of businesses, uniting their efforts of international and local companies and organisations around the Declaration for Gender equality and Against Domestic Violence. This initiative facilitates the dialogue and fosters positive changes within the Ukrainian business community. In addition to the mentioned above resource mobilisation efforts with international donors and UNFPA regional office, the CO proactively participated in joint programing with other UN agencies (UNDP, UN Women, UNICEF, FAO, UNAIDS) in the spheres of sexual and reproductive health and reproductive rights, HIV, adolescents and youth, gender-based violence, gender equality, data collection and analysis. In addition to this, UNFPA allocated programme resources for staff to provide technical and programme support.

Graph 6. Tendencies in spending in GBV Prevention and Response programme area. 2018-2020



The resource mobilisation and partnership plans guided efforts to leverage influence and co-financing with the Government, United Nations partner organisations and the other development partners on identified priorities and funding gaps. One of the key factors of the CO success in resource mobilisation and partnership building includes the existence of dedicated staff members and stream leads who work with partners and donors, both traditional and non-traditional for the UNFPA Ukraine. UNFPA CO stream leads (GBV, GE, Youth and RPP) develop project proposals and invest significant efforts into nurturing and sustaining strong partnerships with donors. UNFPA has established strong working relations with a number of government counterparts in key sectors, including adolescent and youth, GE and GBV. This contributed to their commitments to support priority interventions promoted by the CP. Relations with other government agencies, like the Ministry of Health and the State Statistics Agency, were less developed. Partnerships with civil society implementing partners were also strong. IPs have found UNFPA a responsive and flexible partner that

provided financial, informational and institutional support. The CO started to provide small civil society organisations with grants for strengthening their institutional capacity to increase the number of potential UNFPA civil society implementing partners. Building effective partnerships with private sector required time, patience, endless sequence of negotiations and explanations of why business involvement in the area like GBV is important³¹². Private companies³¹³ appreciated the CO expertise, systemic work and strategic approaches starting with policy work, advocacy for needed changes in legislation, careful designing of interventions, and conducting monitoring to adapt next activities. In addition to this, business appreciated UNFPA efforts in uniting all actors under the same sector like it happened in GBV and GEWE areas, and promoting public-private dialogue.

Technical expertise. UNFPA managed to engage adequate in-house and external expertise for the CP implementation. The CO received useful technical support from the UNFPA Regional Office and HQ in New York. Where it was possible, the CO used local technical expertise and experts. Government partners interviewed mentioned the high quality of the UNFPA experts, especially in such areas as Youth and GBV: *“In the last few years, the youth component has expanded significantly. The CO actively uses the expertise of the UNFPA headquarters in New York and of the Regional Office (youth advisers, HIV advisers), and that of Ukrainian experts”*³¹⁴. However, the respondents also mentioned³¹⁵ limited availability of male experts in GE, DV, and GBV areas who, as respondents think, can be more convincing in talking about DV/GBV, especially with men.

Knowledge management. Documentation by UNFPA CP interventions include the required annual reports; monthly UNFPA newsletters on GBV programme, Ukraine humanitarian support, and individual projects like Equality Springboard project which issues its quarterly newsletters; various publications produced within CP programmes and projects; results of public survey opinions; manuals and guides; conference resolutions; technical reports and documents; analytical and situation reports; factsheets and calendars of events; etc.³¹⁶ Except very few publications produced/ordered by UNFPA Regional or Global offices, the majority of publications were produced with UNFPA support or by the CO. All publications are available in both languages, Ukrainian and English. In addition to annual reports required by UNFPA with listing of achievements, lessons learned and challenges by the CP programmes, the UNFPA CO in Ukraine produces public annual reports³¹⁷ that present key data and year highlights, achievements and success stories, programme, projects and policy work results, financial results by CP programmes and projects, and list of donors and partners. The reports are user-friendly, well designed and accompanied by photos of the CO stakeholders and beneficiaries in action that make publications lively and vivid. The CO did not produce policy briefs but it was very successful in supporting and promoting important policies, laws and regulations with follow up approval by the Ukrainian Parliament, the Government of Ukraine, different national agencies and municipalities. In addition to this, stakeholders noted, *“The CO has access to many of the best international practices, and it is important to keep translating, publishing and disseminating them”*³¹⁸.

Innovation. The UNFPA CO supported a number of innovative approaches, including Skill-Labs innovative training on career skills and self-employment, innovative curriculum PROSkills for summer recuperation camps³¹⁹ and other specialists working with adolescents, a photo project to support the draft law³²⁰; Tato-HUBs; WikiGap to promote GE³²¹; ‘silent solution’ (consultation via texting online) as part of PSS services³²²; men-engagement campaigns, and girls in ICT Day³²³; as well as many others. Stakeholders appreciated and valued the CO creativity and innovation, especially digital. The CO supported development of mobile applications allowing DV victims having invisible for offenders interface with function to audio/video recording with follow-up upload to iCloud³²⁴. In November 2020, UNFPA Ukraine with the support of the UK Government established an online Women Career Hub. The Hub aims to develop the professional potential and financial capacity of women survivors or at risk of GBV. Women Career Hub enables women to get tailored employability support from career counsellors with preparing a CV, developing a career plan and determining professional priorities. Career counsellors can also guide women through initial steps with the new job and steer to a stable employment path. Hub clients are offered vocational and professional courses, training sessions and webinars to develop professional and communication skills. Women also have access to free sessions with psychologists if they need it. This modality helps survivors not only to secure employment but maintain it during turbulent COVID-19 times. Partnership with local businesses, social services and entrepreneurship initiatives has also allowed career counsellors of Women Career Hub to address survivors’ career needs in a more integrated and complex manner. Since the launch of the Hub, over 1100 women received consultations, 873 women completed professional development courses and over 160 women secured employment (September 2021). Online survey respondents agreed that UNFPA used innovative technologies appropriately to respond to the COVID-19 crisis and mitigate its effects³²⁵.

Programme management. The evaluation showed that UNFPA programme implementation was guided by the standard operating procedures of the United Nations Development Group for Delivering-as-One. The UNFPA support was

provided through implementing partners (IPs) and partners, including civil society organisations and government agencies, and national implementation was the preferred implementation modality to foster national ownership, build the capacity of national partners and ensure sustainability of results. Other modalities of the UNFPA support included technical support, supplies, commodities and equipment, procurement services, transport, funds for advocacy, research and studies, consultancies, programme development, implementation, monitoring and evaluation, training activities and staff support. UNFPA selected implementing partners for CP implementation based on their capacities, strategic positioning, and ability to deliver high-quality programmes, monitor their performance and adjust the implementing arrangements periodically if needed. CSO IPs were selected for 5 years of the CP implementation period on a competitive basis in the beginning of the CP cycle. In 2018, the CO selected 10 IPs, and one more was chosen in 2019. In 2020, only 9 IPs were engaged into the CP implementation. The CO conducted training for IPs on UNFPA policies, requirements regarding the administrative and financial procedures, and shared *Manual for Implementing Partners on Working with UNFPA* with its partners. IPs' interventions were planned on an annual basis according to the UNFPA requirements with follow-up revision and approval by the CO. There were no complaints on the CO bureaucracy and micromanagement from CSOs, but if there was a request from an IP, the UNFPA reviewed the IP's procurement processes³²⁶. The CO conducted quarterly meetings to discuss quarterly reports submitted by each IP. When needed, UNFPA designed additional policies and guidance as it happened for the CO new grant management activities. The CO conducted monitoring and evaluation of its activities and programmes and is preparing to transfer to the IRP system. With its implementation in 2022 all management processes (planning, proposal design, project implementation, procurement, reporting) will be united into one system allowing it to synchronise all office operations. Meanwhile the CO uses RBM and conducts regular refreshers training for its staff³²⁷.

Government at the national and regional level acknowledged UNFPA ability to produce significant and sustainable changes with little support: *"UNFPA combines soft and hard projects effectively"*³²⁸; and *"More attention was being paid to communication and informing the general population of the CO's projects through media and presence in social networks. The number of mentions of the Fund has increased significantly from 300 per year to 500 per month. The number of subscribers on social networks has grown from 3 thousands to about 46 thousands in total"*³²⁹. Evaluation participants stated that UNFPA has been efficient in organising advocacy activities and ensuring support by government institutions to help a smooth implementation of programs and new initiatives³³⁰, planning its annual work plan as well as to adapt it based on partners' need³³¹, delivering a multi-year and sustainable program³³² with the maximum impact³³³, supporting development of guidelines for school teachers as reference materials³³⁴, providing great and advocacy support in transferring needed knowledge³³⁵. UNFPA professionalism and skills in combining various approaches and tools was mentioned positively by the majority of evaluation participants³³⁶ as well as leveraging effect of the resources provided by the CO, including attention from other donors. An online survey respondent noted, *"Very fruitful work over two years has helped our organisation to meet the needs and solve the problems of thousands of Ukrainian citizens, as well as strengthen the capacity of our organisation! We thank you!"*³³⁷

Evaluation showed that the respondents valued the UNFPA management practices starting with consultation on CP design and project planning to their implementation, monitoring and evaluation, including clear planning of activities, quick response to new challenges, understanding of the mission and tasks of UNFPA in Ukraine. Online survey respondents scored highly the mix of implementation modalities³³⁸ used by UNFPA CO that allow smooth implementation of the country programme as set out in the annual work plans (WPs) and agreements with partners, and receiving the resource support in a timely manner according to the project timelines and plans, or plans adjusted accordingly³³⁹. Respondents agreed that the resources provided by UNFPA have had a leveraging/triggering effect³⁴⁰.

Evaluation showed UNFPA's flexibility and ability to re-programme development activities in case of emergency situations, like **COVID-19**, and the CO ability to take this pandemic as opportunity to promote its socially important but difficult to communicate issues as DV or GBV. Respondents agreed that the country office was able to adapt the level and the allocation of its resources with a view to mitigating the consequences of the COVID-19 crisis³⁴¹ and involve new donors, including business, very proactively as well as to raise much resources needed for GBV response. KIs mentioned the following COVID-19 related challenges: *"COVID-19 epidemics had a negative impact on the efficiency. Due to switching completely to online events, part of the audience was lost. The numbers of online attendance have dropped as well among the young people, especially for long-term events, such as challenges. Many activities have been put on hold (new youth Peacebuilding component) or postponed indefinitely (2-day "Let's Talk" event on SRH for youth)"*³⁴². Online respondents agreed that the UNFPA systems, processes and procedures (particularly in terms of finance, partnerships, logistics, procurement and human resources) that sometimes fostered or, on the contrary, impeded the adaptation of the country programme to changes triggered by the COVID-19 crisis³⁴³.

SUSTAINABILITY

EQ 7. To what extent has UNFPA been able to support its partners and the beneficiaries in developing capacities and establishing mechanisms to ensure ownership and the durability of effects?

SUMMARY OF FINDINGS. Evaluation demonstrated that UNFPA was successful in developing capacities of partners and beneficiaries and ensuring the ownership in the spheres of promotion life skills for youth, developing platforms to promote the participation of young people, advancing the youth and peacebuilding agenda, combating GBV and advancing gender equality. CO achieved this due to good assessment of partners' capacities and needs, open and supportive internal communication, and skilful external communication, provision of key resources, connecting organisations and beneficiaries from different sectors to create self-sustained networks and partnerships. Little support was provided to partner organisations working in SRH. Under the **Adolecents&Youth** area, several initiatives could have durable effects: (1) Youth Well-Being Index has chances to be used continuously in municipalities that applied it for several times and saw benefits in collected evidence. Additional support and capacity building of technical specialists is still needed to ensure full ownership and durability. (2) On-line course on combating stigma and discrimination for health specialist developed by UNFPA IP was made a part of professional development curricula owned by the Public Health Centre of MOH. (3) Skills Lab approach for youth career development was transferred to CSO and now is expanded and implemented by CSO partners without support from UNFPA. (4) *ProSkills* methodology promoted by UNFPA was embedded in a network of Institutes of Postgraduate Pedagogical Education through ToT approach. (5) Gender analysis of schoolbooks by the Ministry of Education and Science has already become sustainable, and no longer supported by UNFPA. Within the **GEWE** area, the following UNFPA support was institutionalised, including i) 16 shelters, 10 day-care crisis centres, 3 crisis rooms, 17 primary care units that are already 'owned' by local authorities and financed from local budgets; ii) several online training courses and resources developed with UNFPA support are now approved and institutionalised by the Ministries of Education, Social Policy and Internal Affairs; iii) capacity of 65% of school textbooks publishing houses in creating modern free from stereotypes educational content was improved and institutionalised in practice; iv) capacity of the members of Business coalition for support of gender equality resulted in development of new GE/GBV-related policies and regulation within companies was improved; v) UNFPA supported manuals/handbooks on gender mainstreaming and combating GBV that reflect existing practices; and vi) TatoHubs movement was established. In addition, STEM-laboratory has chances to remain sustainable within territorial communities.

In the **Adolescent & Youth** programme area, the CO cooperated with national and local governments in developing their capacities and establishing mechanisms to ensure ownership and the durability of effects. At the national level, UNFPA supported development of: i) **PROSkills of the Future** training program for young people from vulnerable families and marginalized groups on essential life skills to increase their opportunities, potential and competitiveness that was approved by the Ministry of Education and Science as an extracurricular program that can be used in schools and other education institutions. UNFPA supported a series of 4 training of trainers (ToT) with 142 participants, including ToT for 16 representatives of State Institutes of Postgraduate Pedagogical Education from Eastern regions of Ukraine and ToT organized and funded by Donetsk Regional Children-Youth Center for youth workers of Donetsk and Luhansk regions. At the same time after the ToT specialists of the Institutes have been already trained 195 new ProSkills trainers at the pedagogical training courses³⁴⁴. Embeddedness of the *PROSkills* program in the network of Institutes of Postgraduate Pedagogical Education and in the network of youth centers of Donetsk, Luhansk, Zaporizhzhia and Kharkiv regions (targeted by UN RPP) ensures ownership, durability of the effect, and sustainability of the approach as well; and ii) **Career Counselling for Youth Centres course** to strengthen the capacity of Youth Centres, regional partners of the *Pact for Youth*, to provide career advice. The course program has been approved by the Ministry of Education and Science and piloted within the Dnipro Career Hub project in 2019-2020. In 2020, the course had two more training sessions online and attracted more than 30 consultants (who have provided 1000 consultations) from different regions of Ukraine. Youth Centres have full ownership of the course. In addition to this, in 2020 UNFPA updated **training module Healthy Lifestyle of Youth** under COVID-19 of the *Youth Worker Program*. This training program for municipal workers and Youth Centres is implemented by Ministry of Youth and Sport, State Institute of Family and Youth Policy and UNDP aiming to improve capacity of local specialists who develop and implement youth programs.³⁴⁵ The Youth Worker program continues operating without UNFPA support, ensuring durability of CO contribution.

At the municipal level, UNFPA actively supported and promoted **Youth Well-Being Index (YWBI)** program. UNFPA provided support and assistance to the municipalities in the development of this instrument with: integrating the Index into the municipal website, technical consultation and trainings for implementation team, provision of information materials (flyers, banners, etc. agreed with the city), information and advertising materials for local business partners,

and support of the platform in social media. Eleven partner municipalities signed the MOU and undertook to implement the YWBI. Representatives of the partner municipalities interviewed for this evaluation were satisfied with the outcomes of the YWBI and plan to use this tool in future³⁴⁶. This allowed assuming that the YWBI has all chances to get durable effect. Given complex technical nature of the YWBI and that most of the municipalities implemented the tool only once, the evaluation team concludes that further support is needed to develop technical capacities of partner cities, which will ensure ownership and regular application of this tool³⁴⁷.

The CO worked a lot to build capacities and create partnership with the national- and local-level CSOs. One of the key UNFPA partners for the implementation of the flagship **Pact for Youth 2025** program was NGO Centre of Corporate Social Responsibility (CSR Ukraine) that started this initiative together with UNFPA in 2016. Both, *Pact for Youth 2020* and *Pact for Youth 2025*, were highly assessed by the interviewed stakeholders³⁴⁸ as a successful initiative addressing the crucial need of expanding career opportunities for youth. At the same time, Pact programs were developed with the future state ownership in mind. The evaluation team did not find evidence that the Ministry of Youth and Sports or any other Ministry that signed PACT was ready to own this Program and support it after UNFPA support ends³⁴⁹. CSR Ukraine doubts that without UNFPA support Pact would continue its work, which puts at risk the durability of its effects.

On the local level, evaluation demonstrated successful cases of developing capacities and empowering organizations working with adolescents and youth in many locations across Ukraine, including the conflict-affected areas. Civil society organizations like *Women's League of Donechchyna and Youth East*, and public advisory bodies like *Donetsk Regional Youth Council*, that received UNFPA support demonstrated good ownership and expanded the scope of their work with young people significantly, utilized approaches and tools provided by UNFPA effectively (like *Skill Labs, Myropolis*), and started to transfer these tools and experience to other NGOs. Many representatives of CSOs³⁵⁰ confirmed in the interviews their capabilities and willingness to continue implementation of the initiatives that started with the UNFPA assistance after the support comes to its end, which indicates good ownership and potential for durability of the effects.

UNFPA achieved sustainability of its support through effective needs assessment of CSO implementing partners, and continuous communication and support, which most of the respondents saw as a very strong organizational feature of UNFPA. Another important aspect of UNFPA support that ensures sustainability was the ability to connect organizations and institutions with complimentary needs, creating effective partnerships and including partner organization in networks with other CSOs, national and local government institutions. One of the examples was the partnership created by UNFPA with two organizations *Special Olympics Ukraine* (work with youth with disabilities,) and *Shakhtar Social* to establish football training for young girls with intellectual disabilities. Although modest in coverage, this initiative demonstrated the skill of the CO in creating synergetic effects by connecting organizations with complementary needs for long lasting effects.

Evidence suggests that planning of interventions was done together with partners, including regional and local implementing partners, CSOs, municipalities etc. Strategies of increasing sustainability and ensuring the ownership of the projects by the local partners include technical and expert support at the first implementation stages, education in the forms of training off and online, pre-recorded readily available on-line courses, manuals and other printed / online materials.

In **Sexual and Reproductive Health** area, UNFPA had less successful examples supporting its partners and the beneficiaries in developing capacities and establishing mechanisms to ensure ownership and the durability of effects. One good example is about UNFPA support in increasing capacity of the system of postgraduate medical education by development online course *HIV: Tolerance and Hope* for family doctors or primary health care specialists who serves as an entry point to healthcare for PLHIV, aiming to reduce discrimination against the key populations and PLHIV. The online course has been officially accredited by the Ministry of Health as postgraduate course for professional development. After its completion, doctors get two accreditation points and a certificate. *The Centre for Public Health* become owner of the course, it is available on its official website ensuring durability of the effect. In addition to this, after successful completion of the course, doctors may add themselves to the *Map of Friendly Doctors*. This map is a tool specifically designed to help people living with HIV and key groups to receive quality medical care without discrimination. The map is available on the webpage of the *100% Life* organisation³⁵¹. Many interviewed stakeholders representing SRH area noted the lack of UNFPA attention to this sphere in the current Programme cycle. National organization has ownership of the problem and willing to advocate for the SRH area, but they need support from an international organisation with recognized mandate and authority.

GEWE programme area. Within this programme area, the CO cooperated with government, civil society and private partners and beneficiaries in developing capacities and establishing mechanisms to ensure their ownership and the durability of effects. UNFPA provided support for in establishment of 16 shelters, 10 daycare crisis centres, 3 crisis rooms, 17 primary care units that now are owned by local authorities and financed by local budgets³⁵². UNFPA has supported development of guidelines for implementing community special social services in GBV response and

Thanks to the UNFPA, cities have become better aware of the issue of GBV response and prevention. Local government officials began to take this issue more broadly than just establishment of a shelter. They have a comprehensive understanding of the system of GBV response and prevention: it is not only the introduction of new specialized social services, but it is also local policy, multi-sectoral coordination. That is, a qualitatively new level of understanding of the issue of GBV prevention and response has emerged in cities.

Interview with stakeholder, KII#47

prevention. Now, those guides are used actively by territorial communities when establishing a system of special social services. UNFPA developed an online training course for social workers on creation and development of special social services for GBV survivors. More than 5,300 specialists of social services centres, medical facilities and educational institutions involved in GBV response enhanced their expertise in GBV response and service provision upon completion of this 24-hour-long *comprehensive online course* supported by UNFPA. This constitutes 90% of all GBV response focal points, according to a report of the Ministry of Social Policy. Although this course was recognised by the Ministry of Social Policy, it is not yet ready to take ownership of this online course.

The CO supported training online resource for trainers working on combating domestic violence in the internal affairs system (includes the Ministry of Internal Affairs, National Police, and the Academy of Internal Affairs). Now this online resource is owned by the Ministry and is open for use to its various institutions within the internal affairs system³⁵³. To secure CSO IP ownership and durability of effects of the CO support, UNFPA trained 67 CSOs from Eastern Ukraine to develop GBV early-warning mechanisms and mobilise communities to prevent violence. UNFPA also continued to provide expert support to communities in establishing a system of GBV response services in territorial communities.

UNFPA supported establishment of the Governmental Hotline for Combating Domestic and Gender-Based Violence. In December 2019, the Cabinet of Ministers of Ukraine adopted Resolution № 1145 *“On dissemination of a pilot project to create a “single entrance” for processing citizens' appeals and requests for public information for processing appeals and reports about/or from victims of trafficking, domestic violence, GBV, violence against children, or the threat of such violence, according to which the reception of appeals and reports about/or from victims of trafficking, domestic violence, gender-based violence, violence against children, or about the threat of such violence will be made by calling 15-47”*. Calls to the call centre from landlines and mobile phones are free. In the cases listed in the Resolution, callers were able to receive round-the-clock information assistance on existing services for victims. Crisis social and psychological assistance were provided to callers upon request. In partnership with its IP *LaStrada*, UNFPA provided support in training operators of the National Hotline to Combat Domestic and Gender-Based Violence. With UNFPA support, *LaStrada* developed and implemented a training programme for operators of both the Governmental National Hotline 1574 and the National Hotline for the Prevention of Domestic Violence, Trafficking in Human Beings and Gender Discrimination 116 123³⁵⁴. Institutionalisation of operation of the hotline for DV/GBV secured ownership of this instrument.

UNFPA supported improvement of the capacity of 65% of school textbooks publishing houses to create modern educational content free from stereotypes. As result, 2/3 of the market of publishers of educational literature has capacity to ensure that anti-discrimination standards are met in the publication of textbooks before they are submitted to the MES for anti-discrimination examination as per approved Instruction mentioned earlier. In addition to this, a training program for training experts in anti-discrimination expertise of textbooks (duration of 102 hours) has been developed by *EdCamp* and recognized by the MES by signing a memorandum with *EdCamp*. The training program included three parts: an online course, offline training lasting three days, and test expertise of one textbook. The other example of institutionalisation of the CO support includes *an online course for teachers* on a non-discriminatory approach to teaching students developed by *EdCamp* as well³⁵⁵. This course was also recognized by the MES and became a part of in system of teacher training³⁵⁶.

With the CO support, 8 TatoHubs were established at municipal level that led to creation of TatoHubs network. Now, TatoHubs collaborate closely with local authorities and receive support for their activities from local budgets. In addition, TatoHubs were trained on how to organise work and work with target groups to ensure the durability and sustainability of those institutions: *“UNFPA mentoring is an invaluable contribution to the success of our work. Our cooperation with UNFPA stimulated the cooperation and the interaction between the non-governmental sector and local authorities on the implementation of the TatoHub initiative”*³⁵⁷. In order to ensure activities of STEM-laboratory work at

a community level³⁵⁸, the CO planned to build its capacity in providing special social services for victims of domestic violence. In addition, to ensure sustainability of its IPs, the CO designed a mini-grant programme aimed at strengthening institutional capacity of partner organisations³⁵⁹

The CO supported design of a number of manuals/handbooks on gender mainstreaming and combating GBV to be used by different stakeholders and beneficiaries for developing their knowledge and skills in these areas, including: i) *Training manual and handbook on gender expertise for media*³⁶⁰; ii) *Handbook on how to organise 16 days against GBV campaign for territorial communities*³⁶¹; iii) *Handbook on STEM education* developed in partnership with the MES and CSR³⁶²; iv) *The textbook on non-discriminatory teaching*³⁶³; and v) *Methods and manuals on the organisation of GBV response services for social service centres*³⁶⁴.

UNFPA supported 40 members³⁶⁵ of *Business Coalition for Support of Gender Equality and Prevention of Domestic Violence* to become equipped in developing corporate culture of zero tolerance to violence. UNFPA led targeted advocacy campaign to encourage companies to join the Declaration and improve corporate practices to meet its resolutions. Also, a series of 7 UNFPA-led online seminars and webinars on gender equality, family-friendly policies, domestic violence and 16 days campaign has yielded a number of developed and adopted corporate policies, instruments and protocols on paternity leaves, family friendly policies, courses for childbirth and parenting preparation, women's career empowerment, zero tolerance on domestic violence, survivors' assistance (*StarLightMedia, Ferrexpo, Avon, Danone* etc.)³⁶⁶, as well as an educational learning programme with grants opportunities *TalentA* developed by *Corteva Agriscience* in partnership with UNFPA for rural women. Several large companies (*StarLightMedia, Avon, Ferrexpo, Corteva*) already piloted corporate initiatives to prevent GBV. *StarLightMedia*, one of largest media holdings in Eastern Europe, launched its first ever corporate programme on GBV response. With UNFPA support, the company conducted thematic training for employees, organised awareness-raising campaigns and integrated GBV response into the media group content.

EQ 8. To what extent have the partnerships established with ministries, agencies and other representatives of the partner government allowed the country office to make use of the comparative strengths of UNFPA, while, at the same time, safeguarding and promoting the national ownership of supported interventions, programmes and policies?

SUMMARY OF FINDINGS. UNFPA used its comparative advantages in the partnerships established with ministries, agencies and other representatives of the partner government to a great extent. To safeguard and promote the national ownership of supported interventions, programmes and policies, the CO established the following partnerships with partner government institutions. Within the **Adolescent & Youth programme area**, partnerships were established with the Ministry of Youth and Sport, the Ministry of Education and Science to allow UNFPA support its youth programming, and stay in policy dialogue, i.e. be included and co-chair the sectoral Working Group on Youth under the CMU. However, decreased opportunities for partnership with the MOH entailed decreased opportunities of SRH services promotion for youth and vulnerable groups and prevention of STD. Within the **GEWE area**, the CO established effective partnerships with the Office of the First Lady, the Ministry of Internal Affairs, the Ministry of Education and Science, the Ministry of Social Policy, National Police, regional state administrations, municipalities that allow UNFPA support its gender programming and stay in the policymaking and policy implementation process. The CO has also signed MoUs with regional state administrations and municipalities to ensure the sustainability of the initiated local policy and instruments supported by UNFPA.

In its work with development and local partners within and outside of the UN system, the UNFPA CO used its **comparative advantages** mentioned by respondents during interviews, including³⁶⁷: the important role the CO plays in traditional areas for UNFPA such as maternal health care, support to statistics, work with youth and on gender issues like GBV, producing needed data for evidence-based decisions, promoting human rights and support to most vulnerable groups of population. At the same time, it was mentioned that UNFPA used to be seen as a small and 'niche' agency without relevant ability to deliver large-scale interventions³⁶⁸ and now "*UNFPA is already a brand of quality that is trusted*"³⁶⁹. It operated in a more complex contextual environment than other UN agencies³⁷⁰ and was associated with narrow focus³⁷¹. However, the CO's achievements in resource mobilisation, ability to use 'window of opportunities' to advocate for policy frameworks in the UNFPA-related programme areas like GE/GBV/Youth, encouraging municipalities to contribute to addressing GE/GBV related challenges at local level, attracting private sector attention to socially important issues (like GBV) and facilitating public-private dialogue proved that with motivated and professional team,

strategic long-term vision with carefully designed interventions, visibility in media even a small agency like UNFPA can reach significant results. Moreover, correct selection of the UNFPA Goodwill Ambassador³⁷² can promote the UNFPA mission and work, and attract the attention of policy- and decision-makers to important social issues that often are not visible in the society such as youth issues, gender equality and GBV, etc.

Adolescent & Youth programme area. Partnerships established with the Ministry of Youth and Sport, as well as the Ministry of Education and Science allowed UNFPA to support its youth programming, and stay in policy dialogue, i.e. UNFPA CO participated actively in development of a number of national policy documents and co-chaired the sectoral Working Group on Coordination of International Technical Assistance in the Spheres of Youth and Sports under the Cabinet of Ministers of Ukraine. Positive examples of safeguarding and promoting the national ownership of supported interventions include: i) On the national level, the *HIV: Tolerance and Hope*³⁷³ online course for healthcare professionals is now officially accredited by the Ministry of Health, available on the official website of the Centre for Public Health and integrated into the doctors' accreditation process; and ii) On the municipal level, UNFPA is in the process of the YWBI ownership transfer and implementation of the index by local government partners after the completion of the initial stage of support from UNFPA. However, the potential and readiness for full ownership of some other programs, such as *Pact for Youth-2025*, by the national partners was questioned and doubted by some of the key stakeholders³⁷⁴. Decreased opportunities for partnership with the MOH entailed decreased opportunities of SRH services promotion for youth and vulnerable groups and prevention of STD.

Respondents of the online survey agreed that UNFPA established good partnerships with ministries, agencies and other representatives of the partner government³⁷⁵. It allowed them to develop long lasting effects and likely contributed to ensuring sustainability to a great extent. Partnership initiatives supported by the UNFPA CO were used to scale up and bring relevant evidence to policy-makers to adopt such approaches. In addition to this, respondents of the online survey confirmed that UNFPA provides support to its partners and the beneficiaries in developing their capacities³⁷⁶. For example, UNFPA CO conducted an assessment of OD level of implementing partner organisations. Based on the results of the assessment, support was provided in the development of internal management policies, and the staff of these organisations was trained³⁷⁷. UNFPA provided municipalities not only with financial assistance in equipping premises for the provision of specialised social services for GBV survivors, but also technical and expert assistance in preparation of technical documentation, design and estimate documentation. This help strengthened the capacity of municipalities, and they became more skilful in other competitions and in attracting public financial subventions³⁷⁸. Furthermore, according to results of the online survey the Country Office makes use of the comparative strengths of UNFPA to safeguard and promote the national partners' ownership of supported interventions, programmes and policies³⁷⁹. This was confirmed by respondents and identified examples and practices. Such comparative strengths of UNFPA as using an evidence-based and multi-sectoral approach, active and enhanced communication helped create a commitment of partners to the activities and methods of UNFPA.

GEWE programme area. Results of document analysis and interviews with KIIIs revealed the following comparative strengths of UNFPA in this programme, namely: possession of appropriate technical expertise on the GBV prevention and response system; careful study and consideration of the needs of target groups in each individual territorial community; technical support of local communities in the introduction of specialised social services for GBV survivors; recognizable brand of UNFPA as a leading institution in the field of GBV prevention and response; permanent information campaigns such as *4HH, Break the Circle*; and application of signing of MOUs with local authorities, which clearly define the obligation of local authorities to fund specialised social services for GBV survivors implemented with the UNFPA support. The CO was consistent in efforts of the WG experts to ensure that 16 DV/GBV related by-laws were adopted and came in force to complete development of the national framework for service provision for GBV survivors, which facilitated comprehensive implementation of the elaborated regulations. As a result of implementation of those regulations, first ever conviction for DV was issued on 14 November by a court in Kyiv³⁸⁰.

UNFPA supported development of 15 multi-sectoral joint action plans that outlined specific steps to improve the quality of services provision to GBV survivors: *"it is necessary to teach multi-sectoral interaction. The skills of civil servants, social workers and policemen to talk to women who have been GBV need to be developed..."*³⁸¹. Now all these plans are adopted officially. UNFPA-supported training programs for anti-discrimination experts on educational content, teachers on anti-discrimination educational content, training on specialized social services, training for police officers in responding to domestic violence were recognized by the relevant ministries and used in practice within the system of professional development of teachers, social workers, and police officers. Developed manuals on the organisation of specialised social services for GBV survivors in local communities were widely used by all local communities that evidenced by the practice of community competitive selection for a state subvention for the establishment of shelters,

day-care centres and crisis rooms. Competing communities demonstrate that they strictly follow the algorithm developed by UNFPA Ukraine experts.

Strategic partnership relations with responsible local authorities were established and entrenched by signing MoUs between UNFPA and local state administrations that ensured implementation of joint activities in building a system of multi-sectoral response to cases of GBV/DV violence; improving availability and quality of essential services for survivors of GBV/DV; and raising awareness of community members (including experts of relevant departments and agencies) on issues related to responding to GBV/DV. Planning and implementation of the projects was done jointly with partners who work directly with the beneficiaries. The joint efforts were effective. Partners' capacities were developed with a view to increasing their ownership of the UNFPA-initiated interventions. National capacity to promote the rights of women and adolescent girls with focus on prevention and response to GBV in the development and humanitarian context was strengthened³⁸².

EQ 9. To what extent have some of the results of pilot projects being used to scale up interventions and/or bring relevant evidence to policy-makers to adopt such approaches?

SUMMARY OF FINDINGS. During 20018-2021, UNFPA was successful in scaling up some of the key initiatives under Adolescent & Youth and GEWE programme areas. In **Adolescents & Youth area**, a number of projects and initiatives were scaled up in order to apply them at the national level or to introduce new/additional areas of focus, including the *Youth Well-Being Index*, *Pact4Youth*, *Skills Lab*, *PROskills of the Future*, *Myropolis*, and *Mentorplace*. Within the **GEWE area**: i) Publishers applied gender analysis methodology not only for school books; ii) The practice of creating shelters and crisis rooms scaled up from a few pilot municipalities to other local communities across the country; iii) An inter-municipal partnership approach to provision of GBV-related services based on the experience of partner communities was introduced; and iv) Methodological developments were used widely throughout the system of social services for GBV survivors.

Adolescent & Youth programme area. Within the A&Y area, a number of projects and initiatives were scaled up in order to apply them at the national level or to introduce new/additional areas of focus, including the following.

- **Youth Well-Being Index (YWBI)** – This initiative allows local authorities to collect and analyse information about youth in the community, provide evidence for municipal decision-making, budget allocations, and improve youth participation in local decision-making. The initiative was assessed positively by the interviewed stakeholders³⁸³. Starting from one pilot city in 2018, the initiative was extended to 11 municipalities in 2020 mentioned earlier where the YWBI was implemented at least once and the survey among youth using the YWBI platform and approach was conducted. KIs believe that the YWBI has great potential for further scaling up and adapting the tool for the CTCs and oblasts.
- **Pact4Youth** – a partnership initiative to join efforts of government, business and education to address youth unemployment. Within the framework of *Pact for Youth-2020*, 146 companies joined the Pact providing young people with 42,108 internships. In 2020, when the five-year implementation of the initiative came to an end, it was updated and new objectives were set in the *Pact for Youth-2025* focusing on promoting career mentoring for young people by businesses. Despite the challenging situation of 2020 and 2021, the new *Pact for Youth* has already been signed by more than 30 business-partners – national and international companies.
- **Skills Lab** – a series of innovative trainings on career skills and self-employment aiming to improve youth career competences and increase the level of youth employment in Ukraine. This educational project was first piloted in 2018, and since then was further modified and scaled up for the implementation. In 2020, Skills Labs were held in 13 oblasts of Ukraine and covered more than 300 young people. *Skills Lab: Skills for Successful Career* program was launched through the online platform *Impactorium*, with more than 1,200 young people from all over Ukraine registering for the course. With support of the Ministry of Education and Science of Ukraine, a comprehensive course on improving career skills aimed mainly at VET students was developed. *SkillsLab 2020: Self-employment* – a 3-month online training in starting your own business; and *SkillsLab 2020: Path to Success* – a training on how to develop a career plan, and search for a job. Both trainings were launched in the Azov region (Donetsk and Zaporizhzhia oblasts). To ensure the sustainability and quality of the programs, the online course was developed to be used by the future trainers of *Skills Labs* and a series of trainings for future trainers were held in 2020 and 2021.
- **The PROskills of the Future** – innovative curriculum for educational institutions, youth centers, summer recuperation camps, providing young people with knowledge and skills necessary to make informed decisions

and actively participate in community life. In 2019, the training of trainers (TOT) workshop *ProSkills* was organized for 31 peer-educators and leaders of 15 state summer camps. In 2020, two trainings were held for 62 educators from Donetsk, Luhansk and Zaporizhzhia oblasts. *PROSkills* program was embedded in the network of Institutes of Postgraduate Pedagogical Education from all oblasts of Ukraine.

- **Myropolis** – a youth forum launched in 2019 for young people in Donetsk and Luhansk oblasts in order to facilitate a dialogue on peacebuilding and reconciliation among young people, local communities and opinion leaders. In 2019 – 200 participants (142 young people). In 2020 – more than 200 young people participated and after receiving training successfully implemented five creative projects in their communities. Forums were supported by 25 local, national and international partners.
- **Mentorplace** – an all-Ukrainian online mentoring platform mentorplace.in.ua. This most recent initiative connects young people with volunteer mentors – experts and business professionals from different fields. Although the pilot project was only launched in July 2021, the initiative shows a good potential for scaling up as of October 2021 four follow-up mentoring programs were announced (in IT, Media and Communications, Pharmaceuticals, and Project Management).

GEWE programme area. Evaluation showed that there are several results of pilot projects used to scale up interventions and/or were adopted as policy. The CO **pilot projects** used to scale up include: Publishers started using gender analysis methodology not only for school books³⁸⁴, as well as the practice of creating shelters, crisis rooms to assist DV/GBV victims was scaled up from a few pilot municipalities to a broader number of local communities³⁸⁵. Currently, there are 12 TatoHubs in Odesa, Vinnytsia, Berdiansk, Donetsk and Lugansk regions as well as the TatoSchool in Zaporizhzhia³⁸⁶. Although the model of work of all cells is the same, each of them has its own peculiarities. A joint network of already functioning TatoHubs was established to catalyze a shift of traditional gender stereotypes in the society on child upbringing, partner relations and share of domestic chore.

UNFPA's **methodology** for creating a municipal GBV response and prevention system was used actively by municipalities that were not partners in the *Cities Free from Violence* project. That could be seen when the contest for a financial subvention from the state budget for the establishment of specialised social services for survivors of GBV was conducted³⁸⁷. Municipalities of Chernivtsi, Lutsk, Ternopil, and Uzhhorod used UNFPA-developed handbook and tools for establishment of inter-institutional coordination mechanism for GBV response and prevention³⁸⁸. Furthermore, an inter-municipal partnership approach in provision of services based on the experience of partner communities in Donetsk region was introduced³⁸⁹ as well. In addition to this, *STEM hackathon* methodology was extended to work with schoolteachers and teachers of vocational colleges to promote an anti-discrimination approach in the content of curricula³⁹⁰. The online survey confirmed that the results of pilot projects are used to scale up interventions and to bring relevant evidence to policymakers to adopt such approaches³⁹¹.

COORDINATION WITHIN THE UNCT

EQ 10. To what extent did UNFPA contribute to coordination mechanisms in the UN system (UNCT and HCT) in Ukraine?

SUMMARY OF FINDINGS. The evaluation showed that the CO contributed to functioning and consolidation of the coordination mechanisms in the UN system to a great extent. The UNFPA's positioning and contributions reflected in the 2018-2022 UNDAF and the CO contribution to the UNDAF results was based on the organisation's comparative advantages such as mandate and mission, experience and expertise. The CO acted as an effective member of several UN thematic groups and lead of the UN Youth Theme group. The CO collaborated with other UN and development agencies in designing and implementing joint programmes in purchasing the *Delivering-as-One approach*. During the COVID-19 emergency, the UNFPA provided leadership in GBV area through policy work, adjusting GBV service provision to the remote mode, and conducting information and education campaigns at national and municipal levels. The UNFPA used the COVID-19 pandemic as an opportunity to address its core programmes' goals. The CO's achievements in resource mobilisation, ability to use 'window of opportunities' to advocate for policy frameworks in the UNFPA-related programme areas like GE/GBV/Youth, encouraging municipalities to contribute to addressing GE/GBV related challenges at local level, attracting private sector attention to socially important issues (like GBV) and facilitating public-private dialogue showed ability of a small agency, like UNFPA, to reach significant results, complemented by right selecting an UNFPA Honorary Ambassador.

In Ukraine, the United Nations Development Assistance Framework (UNDAF) for the period 2018-2022 guided the work

of the Government of the Ukraine and the UN Country Team (UNCT)³⁹², as well as their partnership and cooperation for results. UNDAF contributed to the achievement of country strategic priorities³⁹³, aligned with the Sustainable Development Goals (SDGs). This programme identified an inspirational vision for changes based on the principle of ‘leave no one behind’³⁹⁴. The top three priority SDG goals identified for Ukraine were Goal 3 (Good Health and Wellbeing), Goal 8 (Decent Work and Economic Growth) and Goal 16 (Peace, Justice and Strong Institutions) with Goal 9 (Industry, Innovation and Infrastructure) identified as the third priority goal at the regional level. The priorities laid down in the UNDAF fully reflected the UNFPA’s activities in two main areas outlined in the 3rd UNFPA Country Programme for 2018-2022 and contributed to the Government – UNCT all four priorities and outcomes presented in Table 13.

Table 13. UNFPA contribution, related SDGs, and indicative resources by 2018-2022 UNDAF Results

UNDAF Priorities/Outcomes	UNFPA role/the related to UNFPA SDGs/ Indicative Resources (USD)
I. Sustainable economic growth, environment and employment.	
UNDAF outcome 1: By 2022, all women and men, especially young people, equally benefit from an enabling environment that includes a labour market, access to decent jobs and economic opportunities.	<p>UNFPA contributes to the following indicators:</p> <ul style="list-style-type: none"> 1.1.4. Proportion of youth (aged 15-24 years) not in education, employment or training (8.4.1. (UA)) together with UNDP, UNICEF, and ILO 1.1.5. Employment rate of population aged 15-70, disaggregated by sex and age (8.3.1 (G)) together with ILO and UNDP <p>SDGs: 3, 4, 5, 8, 10 \$4,500,000.00</p>
II. Equitable access to quality and inclusive services & social protection	
UNDAF outcome 2: By 2022, women and men, girls and boys, equitably benefit from integrated social protection, universal health services and quality education.	<p>UNFPA contributes to the following indicators:</p> <ul style="list-style-type: none"> 2.8. Proportion of women of reproductive age (aged 15-49 years) who have their need for family planning satisfied with modern methods (3.7.1 (G)) 2.9. Proportion of population aged 15-49 years who had more than one sexual partner in the past 12 months who reported use of condom during their last intercourse, by gender 2.13. The level of participation of adults and young people in formal and informal types of education and vocational training in the last 4 weeks, % of the population aged 15-70, by age groups (4.5.1. UA) together with IOM, UNICEF, and ILO <p>SDGs: 3, 4, 8, 10 \$4,300,000.00</p>
III. Democratic governance, rule of law and civic participation	
UNDAF outcome 3: By 2022, women and men, girls and boys participate in decision-making and enjoy human rights, gender equality, effective, transparent and non-discriminatory public services.	<p>UNFPA contributes to the following indicators:</p> <ul style="list-style-type: none"> 3.6. Proportion of sustainable development indicators produced at the national level with full disaggregation when relevant to the target, in accordance with the Fundamental Principles of Official Statistics (17.18.1 (G)) 3.7. The share of people who reported that they had personally faced discrimination or harassment based on discrimination over the last 12 months, in the total number of group, by sex, age, locality type (10.2.1 (UA)) together with IOM, OHCHR, UNDP, UN Women, ILO <p>SDGs: 4, 5, 10, 16 \$2,650,000.00</p>
IV. Human security, social cohesion and recovery with a particular focus on Eastern Ukraine	
UNDAF Outcome 4: By 2022, communities, including vulnerable people and internally displaced persons, are more resilient and equitably benefit from greater social cohesion, quality services and recovery support.	<p>UNFPA contributes to the following indicators:</p> <ul style="list-style-type: none"> 4.6. Share of survivors of physical or sexual violence who sought help together with UN Women 4.7. Proportion of women and girls subjected to physical, sexual or psychological violence in the last 12 months, by form of violence (5.2.1 (G)) together with UNDP, UNHCR, UN Women <p>SDGs: 3, 5, 8, 10, 16 \$15,700,000.00³⁹⁵</p>

The 2018-2022 UNDAF incorporated the UNFPA positioning and roles in key CO areas³⁹⁶. The UNFPA contribution to the UNDAF results was based on the organisation’s comparative advantages such as mandate and mission, experience and established reputation in Ukraine, availability of technical resources and recognized expertise as well as political neutrality and integration to the UN country system. At the time when the UNDAF was designed and approved, it reflected the interests, priorities and mandate of the UNFPA in Ukraine to a great extent.

The UNFPA CO participated in several UNDAF theme groups, including youth, gender, human rights, AIDS, as well as in Operation Management Team (OMT). Evaluation respondents noted the UNFPA CO as an effective chair of UN Youth Theme group³⁹⁷ with high level of organisational skills, including timely collection and dissemination of information to WG members' work; strengthening capacity of members of working groups, and avoiding duplication of UN agencies work. Along with the UN Youth Theme group, the CO co-chair sectoral working group on youth together with the Ministry of Youth where UNFPA prepared agendas for meetings and provide productive and useful input. This WG is a great example of the coordination of international technical assistance in a specific sector. Representatives of development agencies³⁹⁸ agreed that UNFPA is a lead UN agency on working with adolescents and youth and in GBV³⁹⁹. Moreover, development partners often use the UNFPA CO *to access government and open the needed door*⁴⁰⁰. For example, UNFPA together with UNDP have access to Policy Advisory Unit in the GOU where decisions are made. With active support of the UNFPA Honorary Ambassador to Ukraine Masha Yefrosinina, the First Lady of Ukraine included gender equality, GBV and barrier-free space as priorities of her activity. As result, during one year of Ukraine's participation in the Biarritz Partnership⁴⁰¹, significant outcomes were achieved, including several in the UNFPA-related areas of activities: the development of a barrier-free public space friendly to families with children and people with limited mobility; teaching the principles of equality between women and men; prevention of violence; and creating more opportunities for men to take care of children. Needless to mention that with UNFPA active support, the national framework for service provision for GBV survivors was completed⁴⁰² along with the Presidential Decree for Protection of GBV Survivors (2020).

Also, the UNFPA CO implemented together with UNICEF, UNDP, UNODC, UN Women, UNFPA several initiatives in youth/HIV and Gender/GBV areas, including: i) *Youth-friendly cities* project (together with UNICEF)⁴⁰³; *EU Support to the East of Ukraine – Recovery, Peacebuilding and Governance* project (together with UNDP, UN Women, and FAO); ii) *Re-configured service delivery and innovative partnerships on HIV testing and Enhancing HIV Services for GBV protection providers in Odesa City* projects in partnership with UNAIDS. In addition to Ukraine-level partnership initiatives, UN Women and UNFPA, together with the European Union (EU), have launched a three-year regional programme, entitled *EU 4 Gender Equality: Together Against Gender Stereotypes and Gender-Based Violence*, to tackle gender stereotypes and gender-based violence in six countries of the Eastern Partnership: Armenia, Azerbaijan, Belarus, Georgia, Moldova, and Ukraine in July of 2020. Online survey respondents agreed that UNFPA actively participate in UN working groups⁴⁰⁴, contribute to UN advocacy efforts⁴⁰⁵, participated in planning⁴⁰⁶ and implementation⁴⁰⁷ of joint initiatives.

UN institutions' cooperation and collaboration to deliver higher-level results was important in 2020 COVID-19 pandemic. UNFPA had a preparedness plan as part of the humanitarian response to the Ukraine ongoing situation. With start of COVID-19 pandemic, the CO focused its efforts on ensuring adequate and timely national and municipal response to GBV through combination of interventions, including:

- **Policy advocacy at the national level:** UNFPA advocated for and provided expert support to the Government of Ukraine in developing a President's Decree on *Urgent Measures to Protect Survivors of Domestic and Gender-Based Violence* that was signed in September 2020.
- **Service provision:** The CO recognized the need: i) to adjust approaches to service provision in adherence to the essential standards of survivor-oriented support, as well as ii) for service providers to be well versed in online tools for both service provision and day-to-day operations. UNFPA offered guidelines, provided capacity development, shared best practices with service providers on online counselling. In addition to this, the CO had enabled remote modalities of services provision such as consultations via phone, Skype and messengers by specialists from PSS MTs and daycare centres. Moreover, national toll-free hotline of GBV response extended its operation to online avenues providing support 24/7. The CO also launched an online Women Career Hub in late 2020 to develop the professional potential and financial capacity of women survivors or at risk of GBV, helping them break the circle of violence amidst the pandemic.
- **Information/education support:** UNFPA informed the society promptly about changes in services operation, supported information campaigns of national governmental partners and supports educational work of the Honorary Ambassador of UNFPA in Ukraine (whose social media posts reached over 3 million people) on GBV violence prevention within the "Break the Circle" information campaign. Furthermore, UNFPA collected and promoted stories of Ukrainian female healthcare workers who led the fight against the COVID-19 pandemic.⁴⁰⁸

The CO used available resources to adapt as well as adjust its approaches to the growing number of GBV/DV cases⁴⁰⁹ in close cooperation with national and municipal authorities to ensure that the essential DV/GBV response and prevention system is in place at the time of COVID epidemic and socio-economic downturn, and helped survivors stay safe and supported as well as communities be safe and resilient at the time of hardship. Online survey respondents agreed that UNFPA country office provided leadership in GBV and youth coordination and contributed to effective coordination and

complementarity within the framework of the United Nations Country Team (UNCT) collective response to the COVID-19 crisis⁴¹⁰. Evaluation showed that when the majority of development partners saw COVID-19 pandemic as challenge/problem, the Ukraine UNFPA CO did what it knows best and according to its mission, it had addressed GBV in a systematic and comprehensive manner to help prevent the breakdown in social fabric and major social destabilisation during the COVID-19 outbreak. In 2021, the EU and UNFPA joined their efforts to provide gender-responsive emergency support to address the COVID-19 aftermath and strengthen gender equality in Ukraine within the flagship programme 'WE ACT: Women Empowerment Action'. The Programme is aimed to protect women from gender-based violence (GBV), remove barriers for women's leadership, and support female frontline healthcare responders to COVID-19⁴¹¹.

CHAPTER 5: CONCLUSIONS

5.1 Strategic level

<p>Conclusion 1. The evaluation showed that by the end of the 3rd CP 2 out of 8 output and 2 out of 5 outcome indicators were achieved. 6 output indicators are in progress and have a very good chance to be achieved and 3 outcome indicators will be measured in 2022. When progress of achievement of GEWE related output and outcome indicators was good, there were significant delays in achievement of A&Y related indicators, including all 3 output and both 2 outcome indicators. The outcome indicators under A&Y domains capture only small part of the results in this area. Also, the ET noticed certain ambiguity in indicator terms used by the CP and ones used by Ukrainian legislation (e.g. ‘anti-discrimination v. gender review’).</p>	<p>Origin: EQ #3-4 Evaluation criteria: Effectiveness Associated recommendation: #1</p>
<p>Conclusion 2. Interventions of the 3rd UNFPA CP for Ukraine were mostly focused on A&Y and GE/GBV programme areas with relatively smaller focus on SRH and P&D. Such targeted focus on two programme areas was defined by national needs and situation, as well as priorities of the 3rd CP. The CO used ‘window of opportunity’ to promote and raise public attention to GBV issues at both national and municipal levels. Despite downshifting interventions in the SRH area, work done and achievements reached in previous CPs by the CO and its civil society and government partners were supported with focused activities. The CO interventions on sexual and reproductive health issues were important to keep them voicing as nobody else from development actors, except UNFPA, has these issues (SRH/FP/HIV) on agenda.</p>	<p>Origin: EQ # 3-4 Evaluation criteria: Effectiveness Associated recommendation: #1</p>
<p>Conclusion 3. UNFPA put significant efforts to overall improve the outreach, visibility and recognition of the brand and mandate of UNFPA in Ukraine through advance planning and ongoing monitoring of the communication activities. The CO communication and visibility activities were conducted in coordination with various governmental, non-governmental and international institutions. Also, the CO dedicated 3 full time employees responsible for communication and UNFPA visibility. As of COVID-19 pandemic the CO to swiftly adjust communications and advocacy campaigns, by moving them mostly to the digital sphere and closely working with mass media. Despite the challenges associated with pandemic, the numbers of mentions in the press and the level of audience engagement have been steadily increasing. At the same time when in A&Y domain communication activities being comparatively scarce, interventions within GBV prevention and response area was the most mentioned program that was associated with the UNFPA brand.</p>	<p>Origin: EQ #1-6 Evaluation criteria: Relevance, Effectiveness, Efficiency Associated recommendation: ##1, 7</p>
<p>Conclusion 4. The UNFPA CO succeeded in building partnerships with UN Agencies, national and local governments, civil society, research institutions and academia as well as with private sector by applying various approaches and techniques. UNFPA CO contributed to the UN GTG work, led Youth Working Group and continued coordination of work of GBV sub-cluster. When at national level ‘window of opportunity’ was used that coincided with political will to promote DV/GBV response, at local level a comprehensive GBV prevention and response mechanism was developed to ensure municipality in-kind/ financial support and ownership, including MoU and multisectoral coordination councils. Potential development donors were supplied with important information on targeted population needs and achievements of UNFPA work on an ongoing basis. CSR approach was used in working with the private sector that resulted in signing of the Declaration for GE and DV Prevention by 31 companies. The business appreciated UNFPA efforts in uniting all actors under the same sector, like it happened in GBV and GE area, and promoting public-private dialogue.</p>	<p>Origin: EQ #3-10 Evaluation criteria: effectiveness, efficiency, sustainability, UNCT coordination Associated recommendation: #1, 2, 4, 5, 7</p>
<p>Conclusion 5. The UNFPA CO made a significant achievement in resource mobilisation and analysis of financial resources for three years shows that they are overwhelmingly higher from what were envisioned for five-year committed resources that are very positive tendencies. The achievements of the Other resource mobilisation by UNFPA Ukraine have been remarkable, particularly in the areas of GBV response during the COVID-19 pandemic and in humanitarian settings. With mobilised almost \$16 millions from external sources, including private corporations, the UNFPA Ukraine became the largest UNFPA programme at regional level. This proved that UNFPA approaches, namely: design of complex programmes with right partners, ongoing communication and advocacy efforts that are evidence-based and built on targeted population group needs, were instrumental for resource mobilization.</p>	<p>Origin: EQ #6 Evaluation criteria: efficiency, sustainability, Associated recommendation: #1, 2, 5</p>

<p>Conclusion 6. The CO interventions during 2018-2021 that coincided with ongoing military conflict in Eastern part of Ukraine, the COVID-19 pandemic and political changes highlighted important factors of success used by the CO. They included: importance of strategic approach and careful strategic and operational planning (applying ‘bottom up’ approach – practical work and real results at municipal level with their followed up policy advocacy to national agenda); view on problem/ challenge as on ‘window of opportunity’ (like it happened with COVID-19 pandemic that was seen as an opportunity to promote socially inconvenient issues, like DV/GE/GBV); responsive management set up, including human and financial resource procedures and policies; adaptive management approaches and practices, ability to motivate and engage staff in result-oriented activity.</p>	<p>Origin: EQ #7-9 Evaluation criteria: sustainability Associated recommendation: ## 1, 2, 3</p>
<p>Conclusion 7. The UNFPA CO should be credited for right selection of the Honorary Ambassador, Masha Efrosinina, whose proactive activities and position in this role significantly contributed to the promotion of gender mainstreaming and GBV in the public policy agenda at national and local levels. Masha’s public image and reputation as well as her access to high political authorities made it possible to promote the topic of GE issues and GBV response to the President and Parliament policy agenda and as one of the priorities issues on the First Lady agenda. At municipal level, Masha's information campaign during the local elections to promote the topic of GBV response and prevention in the programmes of mayoral candidates influenced the further perception of this topic by the already elected mayors.</p>	<p>Origin: EQ #3, 4, 7-9 Evaluation criteria: Effectiveness sustainability Associated recommendation: #1, 3</p>

5.2 Programmatic level

<p>All programme Conclusion 8. Evaluation demonstrated that UNFPA was successful in developing capacities of partners and beneficiaries and ensuring the sustainability of the effects, through deep understanding of partner needs and potential, strategic approaches of working at national and municipal levels, open and supportive communication, providing key resources and connecting organisations and beneficiaries from all sectors to create self-sustained local networks and partnerships. At the same time, there is still the low capacity of local partners (especially authorities) to: i) identify and address challenges (like GBV), ii) assess needs of communities in services to effectively develop and deliver them, iii) identify and work with local partners (authorities, community groups, CSOs, private sector), iv) coordinate efforts at inter-municipal and multisectoral levels, and v) mobilise resources.</p>	<p>Origin: EQ #3-4 Evaluation criteria: Associated recommendation: #3</p>
<p>All programme Conclusion 9. UNFPA supported the Government of Ukraine in promoting and advocating legal framework concerning youth policies, also in building an equal society and promoting the values of gender equality and equal rights and opportunities for men and women. This particularly comprised the legislative part, ensuring equal access to parental leave for both mothers and fathers, promoting gender-sensitive learning, as well as the implementation of legislation to combat domestic violence. Moreover, development of national framework and training of multisectoral teams (local authorities, social services, police, health and legal professionals) facilitates comprehensive implementation of elaborated regulations, ensuring effective coordination, like in GBV response and prevention work, at the local level. However, there is still a lack of multisectoral communication and cooperation, especially between national and local levels as well as lack of institutionalized mechanisms and good practices needed for galvanization of implementation of approved regulations and mechanisms at national, regional and municipality levels in Ukraine.</p>	<p>Origin: EQ #3-4 Evaluation criteria: Effectiveness Associated recommendation: #1,2, 3</p>
<p>SRH Conclusion 10. Evaluation demonstrated lack of progress in increased utilisation of integrated SRH Services by those furthest behind, a limited focus on the SRH needs of adolescent girls, young people with disabilities, and key populations for HIV prevention, as well as increased the access of young people to quality SRH services and sexuality education due to constraining factors i.e. lack of political will and changes of leadership in key Ministries, shifted country priorities due to COVID-19 response.</p>	<p>Origin: EQ #3-4 Evaluation criteria: effectiveness Associated recommendation: #1, 4</p>
<p>SRH Conclusion 11. The progress in introduction of the national curricula on <i>Comprehensive Sexual Education</i> was limited, due to the change of leadership in MOES. However, there is general consensus among key stakeholders (MoES, teachers and parents) on the need and timeliness of this initiative, which should remain a priority of the CO. This was confirmed both by UNFPA survey presented in 2020, and by the results of the Evaluation.</p>	<p>Origin: EQ #3-4 Evaluation criteria: effectiveness Associated recommendation: #3, 4</p>

<p>SRH/HIV Conclusion 12. Progress on the development of policies and programs targeted at vulnerable populations and people with disabilities was quite limited. UNFPA implemented several isolated initiatives (but no less important), including an online course on combating HIV stigma and discrimination for health specialists, support of the project of <i>Friendly doctors maps</i> and chatbots allowing key populations to assess the HIV risk and refer to HIV testing services, piloted the project on HIV testing of GBV victims in Odesa oblast, and conducted several rounds online <i>Health Challenge</i> initiative for youth, and inclusive football training for girls with mental disabilities.</p>	<p>Origin: EQ #4 Evaluation criteria: effectiveness Associated recommendation: #1, 3</p>
<p>Adolescents and Youth Conclusion 13. A number of initiatives demonstrated potential to become sustainable, among them: <i>Youth Well-Being Index</i>; <i>Skills Lab</i> approach for youth career development; <i>ProSkills</i> Program. Most of them require additional support to fully transfer ownership to partners. At the same time, it is important to identify pathways of sustainability of certain partnership-based, like public-private (PPP), initiatives like one of the flagship programs <i>Pact for Youth 2025</i>.</p>	<p>Origin: EQ #4, 7-9 Evaluation criteria: Effectiveness sustainability Associated recommendation: #1, 5</p>
<p>GEWE Conclusion 14. Quick successes shown with the UNFPA support stimulated interest of local authorities in the GBV area, coincided with the ability of the local government to make financial contributions for infrastructure of shelters/ crisis and daycare centres as of decentralisation reform. UNFPA utilised the complex and conditionality approach in working with local municipalities, ensuring local government ownership and durability of the effects.</p>	<p>Origin: EQ #4, 7-9 Evaluation criteria: Effectiveness sustainability Associated recommendation: #2, 6</p>
<p>GEWE Conclusion 15. The process of creation and integration of specialised services across the country is well underway. It is expected to intensify it in the context of implementation of the state program and the President of Ukraine Order. However, the Government and territorial communities lack methodology for assessing needs of communities in specialised services to effectively develop the services network as part of GBV response and prevention systems. Moreover, ensuring the quality of special social service providers needs a systemic approach to the quality assurance process and the demand for capacity building of newly created PSS MTs, daycare centres and shelters is large. In addition, there is insufficient number of experts, and specifically of male experts in GE/GBV topics. Lack of practical experience of some experts on working with national government and local self- government impede expert's understanding or areas of public bodies' responsibilities and ways of cooperation.</p>	<p>Origin: EQ #4, 7-9 Evaluation criteria: Effectiveness sustainability Associated recommendation: #2, 6, 7</p>
<p>P&D and Knowledge Management Conclusion 16. Evaluation showed that absence of National Census for the last two decades impedes understanding of targeted population needs and interests. That is exacerbated by inconsistent terminology used in the UNFPA-related programme areas, insufficient and low-quality statistics, and a low culture of data use. In addition, low interest of youth in formal education, low civic activity of youth, and low demand for the new skills of 21 century, including critical thinking, healthy lifestyle, accompanied by increased role of social media and mobile applications require new innovative and creative solutions in working with key groups of population.</p>	<p>Origin: EQ #1, 3, 4 Evaluation criteria: Relevance effectiveness Associated recommendation: #1, 3</p>

CHAPTER 6: RECOMMENDATIONS

6.1 Strategic Recommendations

<p>Strategic Recommendation 1: Considering the new UNFPA Strategic Plan 2022-2025 and its focus on accelerating and scaling up the already achieved results in order to reach the 3 transformative results, along with opinions of evaluation respondents, it will be important for UNFPA Ukraine to focus on interventions within areas, where significant achievements were reached (GE/GBV) and disseminate them to other regions and municipalities, as situation dictates. At the same time, it is important to keep focus on SRH and P&D areas, as UNFPA has unique expertise and mandate in these areas and is the only development actor with such a focus. Also, if opportunity comes, the CO should accelerate good achievements and practices reached in partnerships with government (especially at local level), civil society, business (on specific issues like GBV), academia, and public figures (like the Honorary Ambassador, Masha Efrosinina and the Office of the First Lady) in recent years and CPs.</p> <p>Operational implication: When setting the priorities of the next CP program, it is important not to shift the focus from the current areas: youth, promotion of gender equality and the development of the GBV prevention and response mechanism. At the same time, it is important to accelerate good practice and achievements in promoting gender issues and developing/ practicing the GBV prevention and response mechanism, both at the national and local levels, while giving priority to practical implementation at the level of territorial communities/ municipalities, with scaling them up to nationally accepted instruments and policy. UNFPA should also be ready to realise its SRH and P&D agenda, when opportunity comes (for example, the President of Ukraine has announced a census to be conducted in 2023). The UNFPA <i>LNOB</i> agenda of reaching most vulnerable groups and underserved allows the CO to identify and prioritise those (and others after census and stakeholder consultation being conducted) groups (such as youth, GBV survivors, women and girls with disabilities, and elderly identified by online survey as those needed more of the CO attention) not only during CP strategic planning process, but also throughout its implementation. There are 5 Modes of Engagement used by UNFPA. Survey results showed that community empowerment and capacity building are the types of engagement with the CO partners, prioritised by most of the respondents in addition to advocacy and policy dialogue, knowledge management, communication, partnership and coordination. KIIs also confirmed the importance of building and strengthening both technical and institutional capacity of the CO partners.. Special attention should be given to acceleration of already established partnerships with: i) local level partners advancing decentralization opportunities, ii) business on specific issues such as GBV, iii) public figures (like the Honorary Ambassador, Masha Efrosinina, the First Lady) who can communicate important messages related to CO activity and influence public agenda. Furthermore, in times of emergency, like COVID – 19 pandemic, innovative solution and digital approaches play a crucial role and application of which allow to continue programme activities implementation, without compromising much such important principles as inclusion, equality and non-discrimination. The CO managed to adapt its own and IPs’ activities to ‘<i>new online reality</i>’ but with increased investment into digital transformation and interventions. Possibility of achieving much and more tangible results increase as well.</p>	<p>Priority: High To: the CO Based on conclusion(s): ##1-7, 9 – 10, 12, 13, 16</p>
<p>Strategic Recommendation 2: The UNFPA CO should continue to promote and implement its comprehensive ‘bottom up’ approach used for GBV prevention and response that proved its effectiveness, efficiency and the one that promotes ownership of municipalities/ local communities and form/ influence the national advocacy policy agenda.</p> <p>Operational implication: In a situation of political turbulence and instability at a national level, the CO approach to focus its attention and interventions at a local municipal level, proved to be the one that brings quick wins, visible results and achievements. By encouraging municipalities to provide support to the CO activities, including budget funding, UNFPA laid down ground for durability of effects of its support as well as ‘collected’ practical evidence of what works to be further advanced to national instruments and policies. The CO can apply this bottom up approach to any of its programme areas through careful strategic and operational planning as it was done for GBV programme area interventions.</p>	<p>Priority: High To: The CO Based on conclusion(s): ##4-6, 9</p>

6.2 Programmatic Recommendations

All programme areas Recommendation 3: UNFPA should strengthen national and local capacity across all programme areas, including institutional, advocacy, policy as well as culture of data use and promotion of multisectoral and inter-municipal coordination and collaboration.

Operational implication:

SRH: The CO should continue to strengthening policy advocacy capacity of key IPs and stakeholders and conduct advocacy campaign accompanying it with ‘heavy’ communication and visibility activities like it was in DV/GBV areas in 2019-2021.

GE: The CO should continue its cooperation with the Vice Prime Minister Office and Office of the First Lady to advance national GE strategy within the Biarritz Partnership that Ukraine joined in 2020.

GBV: The process of creation and integration of specialised services across the country is well underway. It is expected to intensify it in the context of implementation of the state program and the President of Ukraine Order. However, the Government and territorial communities lack methodology for assessing needs of communities in specialised services to effectively develop the services network. UNFPA offered its expertise to develop such a methodology that can become part of the national strategy on development of GBV response and prevention mechanisms. Also, ensuring quality of newly set-up social service providers needs a systemic approach to the quality assurance process. Training practices with providers, local civil servants need to be incorporated in the national training system for social servants, civil servants. Currently there is no national system of provision of such training, while the demand for capacity building of newly created PSS MTs, daycare centres and shelters is large. In addition, it is important to continue building/ strengthening the institutional capacity of TatoHubs and their network as well as branches of STEM girls.

A&Y: The evaluation showed that YWBI impact on youth health and well-being in partner municipalities is indirect and delayed. To achieve stronger impact, the YWBI initiative should become a regular instrument used by local government for evidence collection that would inform local youth programmes and policies. Most of the supported municipalities (8 out of 11) used it only once. Further UNFPA support of the partner municipalities is needed to ensure ownership and regular application of this tool.

P&D: The CO should provide capacity and, if needed, advocacy policy support in building/ strengthening stakeholders’ culture and ability to use data. Intensify work with the National Statistics Agency on census 2023 that will be digitally implemented. Also, the CO should accelerate achievements made and address concept of demographic stability.

Priority: Medium
To: The CO
Based on
conclusion(s): ##6-9,
11, 12, 16

SRH/GE area Recommendation 4: It is important to continue and accelerate work on promoting the formed unified vision of the main priorities and consolidated actions to ensure introduction of a Comprehensive Sexual Education and gender component in non-formal and formal education in Ukraine.

Operational implication: As the unified vision of the main priorities and consolidated actions to ensure introduction of a CSE and gender component in non-formal and formal education in Ukraine through open dialogue among senior officials in the area of education, teachers, researchers, health professionals and young people has been formed, it is important to finalize formation of the multisectoral working group on the development of the CSE Concept and development and implementation of the national curricula on Comprehensive Sexual Education. Evaluation confirmed high interest and importance on establishing the working group within the Ministry and advancing the CSE curricula as this initiative remains highly relevant (despite the sensitivity of the topic) and there is a potential of achieving the expected results within the CP timeframe.

Priority: high
To: The Co
Based on
conclusion(s): ##4,
10, 11, 14, 15

GEWE/ A&Y Recommendation 5: It is crucial to invest more effort in engaging the business community in response to GBV, gender inequality, and challenges faced by youth as it has huge

Priority: Medium
To: The CO

<p>potential though the problem itself is insufficiently dealt. At the same time, it is important to promote the interaction of business campaigns and CSOs and public-private dialogue, particularly business engagement and cooperation in UNFPA-related programme areas, especially at local and community levels.</p> <p>Operational implication: Some companies face a challenge on how to translate the declaration principles into practical instruments of supporting GBV survivors, introducing family friendly policies and gender equality principles, for which an increased UNFPA expert support in capacity building and online course for the corporate sector employees would be beneficial.</p>	<p>Based on conclusion(s): ##4, 5, 13</p>
<p>GBV Recommendation 6: It is recommended to continue GBV-related prevention work in 4 key areas: 1) strengthening the national system for combating gender-based violence; 2) expanding the access of survivors of gender-based violence to specialised services; 3) raising awareness on the possibilities of obtaining specialised services; and 4) expanding the circle of male GBV experts and experts in anti-discrimination (inclusivity of services and support mechanisms).</p> <p>Operational implication: UNFPA’s continuing support to the GBV-related issues with focus on prevention will confirm CO leadership role in this area as well as ensure sustainability and ownership of its activities. UNFPA should continue advocacy efforts towards expansion of the access of survivors of gender-based violence to specialised services throughout the country. Moreover, UNFPA should continue and multiply its best practices to other regions of Ukraine as well as to local level, including through the Police Academy, and cooperation with religious leaders. In addition, ‘prevention’ focus should prevail in raising awareness of the possibilities of obtaining specialised services.</p>	<p>Priority: Medium To: The CO Based on conclusion(s): ##14, 15</p>
<p>Cross-cutting issues Recommendation 7: To accelerate good practices gained by the CO in communication, partnership building and resource mobilisation in GE/DV/GBV related areas and adjust them to other socially significant areas, such as: SRH, HIV, Family planning, P&D.</p> <p>Operational implication: Taking into account the concept of communication in the field of gender equality defined by the Government of Ukraine and the acquired positive practice of UNFPA the CO, can envisage/ reinforce/ strengthen communication activities in the next program cycle aimed at:</p> <ul style="list-style-type: none"> ● refutation / transformation of gender stereotypes about professions, social roles, types of behaviour, etc. with the involvement of ‘change agents’, opinion leaders, etc.; ● disseminating information about challenges faced by men and ways to solve them; ● promoting parent-child communication about SRH in families; ● a multi-media approach for SRH/ FP advocacy and for creating demand for SRH services; ● disseminating SRH information through mother groups/ faith leaders; youth/parents open day incorporated with sporting events, etc. 	<p>Priority: High To: The CO Based on conclusion(s): ##3, 4, 15</p>

- ¹ <https://www.un.org/Depts/Cartographic/map/profile/ukraine.pdf> /
- ² State Statistic Service of Ukraine. Statistical Collected Book. Number of Present Population of Ukraine, as of January 1, 2021. <https://cutt.ly/bmC7RG3>
- ³ Population growth (annual %) <https://cutt.ly/CmVqcll>
- ⁴ <https://www.ipu.org/parliament/ua>
- ⁵ World Development Indicators database, World Bank <https://cutt.ly/JmVuhes>
- ⁶ World Bank national accounts data <https://cutt.ly/TmV1NCu>
- ⁷ International Labour Organization, ILOSTAT database. Data retrieved on June 15, 2021 <https://cutt.ly/xmV9m4t>
- ⁸ World Population Dashboard <https://cutt.ly/ZmV9Z18>
- ⁹ Estimates developed by the UN Inter-agency Group for Child Mortality Estimation (UNICEF, WHO, World Bank, UNDESA Population Division) <https://cutt.ly/WmV95Mm>
- ¹⁰ UNICEF Data Warehouse <https://cutt.ly/ZmV3VES>
- ¹¹ World Development Indicators database, World Bank <https://cutt.ly/kmV8LAm>
- ¹² UNICEF <https://cutt.ly/imNdygl>
- ¹³ Demographic and Health Surveys. <https://cutt.ly/4mNdbdD>
- ¹⁴ Trends in Contraceptive Use Worldwide 2015 <https://cutt.ly/JmMzBLm>
- ¹⁵ Household surveys, including Demographic and Health Surveys and Multiple Indicator Cluster Surveys. Largely compiled by United Nations Population Division. <https://cutt.ly/UmMflid>
- ¹⁶ UNAIDS <https://cutt.ly/nmNDtDR>
- ¹⁷ UNESCO Institute for Statistics <https://cutt.ly/wmNDV87>
- ¹⁸ World Population Dashboard World Population Dashboard <https://www.unfpa.org/data/world-population/UA>
- ¹⁹ [Information support of SDGs monitoring](#), metadata (the State Statistic Service of Ukraine)
- ²⁰ Data exclude the temporarily occupied territory of the Autonomous Republic of Crimea, the city of Sevastopol and a part of temporarily occupied territories in the Donetsk and Luhansk regions and was taken from the official sources
- ²¹ This is official data from Unified registry on Criminal Proceedings, and the real rate is much higher due to the high underreporting of the issue
- ²² The OECD-DAC evaluation criterion, the impact, is not considered in UNFPA country programme evaluations, due to the nature of the interventions of the Fund, which can only be assessed in terms of contribution and not attribution.
- ²³ i) Is GEEW integrated in the evaluation scope of analysis and indicators designed in a way that ensures GEEW-related data to be collected? ii) Is a gender-responsive methodology used, including gender-responsive methods and tools, and data analysis techniques? iii) Do the evaluation findings, conclusions and recommendations reflect a gender analysis?
- ²⁴ UNFPA Evaluation Office. Guidance on disability inclusion in UNFPA evaluation, 2020
- ²⁵ Evaluation Handbook: How to Design and Conduct a Country Programme Evaluation at UNFPA, UNFPA Independent Evaluation Office, February 2019. Downloaded from www.unfpa.org/evaluation
- ²⁶ Approved on April 30, 2021
- ²⁷ Detailed description of each methods used were described in the Inception Report, April 2021
- ²⁸ Complete list of observations presented in Annex 9
- ²⁹ Ruzvidzo, T. May 2007. *Measuring Gender Equality: Taking Stock – Looking Forward*. OECD Development Centre. <https://www.oecd.org/dev/38640915.pdf>.
- ³⁰ Handbook on How to Design and Conduct a Country Programme Evaluation at UNFPA, UNFPA Independent Evaluation Office, February 2019
- ³¹ Annex 5 of the *Evaluation of the 3rd UNFPA CP for Ukraine (2018 – 2022): Design Report*, approved in September 2021
- ³² *The Design Report* envisioned 76 person to interview that was exceeded
- ³³ One individual can be interviewed for several programme areas
- ³⁴ 147 v. 76 names
- ³⁵ Includes HIV and SRH as integrated components
- ³⁶ Identified in stakeholder map and planned number of KIs to interview (I/P)
- ³⁷ One respondents could select several UNFPA programme components
- ³⁸ *ibid*
- ³⁹ <https://undocs.org/DP/FPA/CPD/UKR/3>
- ⁴⁰ <http://hdr.undp.org/en/content/latest-human-development-index-ranking>
- ⁴¹ <https://www.worldbank.org/en/country/ukraine/overview>
- ⁴² <https://data.worldbank.org/indicator/SP.DYN.TFRT.IN?locations=UA>
- ⁴³ <http://www.ukrstat.gov.ua>
- ⁴⁴ http://database.ukrcensus.gov.ua/PXWEB2007/ukr/publ_new1/2020/zb_nas_2019.pdf
- ⁴⁵ <https://www.who.int/data/gho/data/themes/mortality-and-global-health-estimates/ghe-leading-causes-of-death>
- ⁴⁶ <http://www.ukrstat.gov.ua>
- ⁴⁷ <http://hdr.undp.org/en/content/gender-inequality-index-gii>
- ⁴⁸ <https://childmortality.org/data/Ukraine>
- ⁴⁹ https://www.unaids.org/sites/default/files/country/documents/UKR_2019_countryreport.pdf
- ⁵⁰ <https://www.msp.gov.ua/timeline/Vntrishno-peremishcheni-osobi.html>
- ⁵¹ <https://www.amnesty.org/en/latest/news/2020/11/ukraine-epidemic-of-violence-against-women-in-conflictorn-east/>
- ⁵² <http://hdr.undp.org/en/content/gender-inequality-index-gii>
- ⁵³ <http://www.ukrstat.gov.ua>
- ⁵⁴ <https://eeca.unfpa.org/en/publications/well-being-and-safety-women>
- ⁵⁵ <https://www.unfpa.org/news/ukraine-steadfast-tackling-gender-based-violence-despite-pandemic-related-increases>
- ⁵⁶ https://www.everycrsreport.com/files/20200429_R45008_e3102e65e35cca059be6ffecbe255f6174a8f006.pdf
- ⁵⁷ <https://institutdelors.eu/wp-content/uploads/2018/01/ukrainekoenigchromiecjdienoct2015.pdf?pdf=ok>
- ⁵⁸ https://www.everycrsreport.com/files/20200429_R45008_e3102e65e35cca059be6ffecbe255f6174a8f006.pdf
- ⁵⁹ https://ec.europa.eu/echo/where/europe/ukraine_en
- ⁶⁰ <https://onlinelibrary.wiley.com/doi/full/10.1111/jcms.13137>

- ⁶¹ https://ec.europa.eu/info/business-economy-euro/economic-and-fiscal-policy-coordination/international-economic-relations/enlargement-and-neighbouring-countries/neighbouring-countries-eu/neighbourhood-countries/ukraine_en
- ⁶² <https://www.oecd.org/dac/financing-sustainable-development/development-finance-data/aid-at-a-glance.htm>
- ⁶³ Approved by the Executive Board of the UNDP, UNFPA, and the UN Office for Project Services on 3 July 2017
- ⁶⁴ Results and Resources Framework for Ukraine, DP/FPA/CPD/UKR/3
- ⁶⁵ *ibid*
- ⁶⁶ \$50,000 less than amount mentioned in CP approved document
- ⁶⁷ *ibid*
- ⁶⁸ Annex 3
- ⁶⁹ Key informants interviews, Sept. - Oct., 2021
- ⁷⁰ September 2021
- ⁷¹ KIIs#8, 32, 86
- ⁷² KIIs#2
- ⁷³ Q3 Online survey, N=35, Average score 4.53 out of 5
- ⁷⁴ Q1 Online survey, N=35, Average score 4.15 out of 5
- ⁷⁵ Q2 Online survey, N=35, Average score 4.53 out of 5
- ⁷⁶ Q7 Online survey, N=35, Average score 4.48 out of 5
- ⁷⁷ UNFPA Strategic Plan, 2018-2021 https://www.unfpa.org/sites/default/files/resource-pdf/DP.FPA_2017.9_-_UNFPA_strategic_plan_2018-2021_FINAL_-_25July2017_-_corrected_24Aug17.pdf
- ⁷⁸ The State Of Youth In Ukraine 2019. <https://ukraine.un.org/en/51418-state-youth-ukraine-2019>
- ⁷⁹ Awareness and attitudes of teachers and parents to comprehensive sexuality education, 2020 <https://healtheducationresources.unesco.org/library/documents/awareness-and-attitudes-teachers-and-parents-comprehensive-sexuality-education>
- ⁸⁰ UNFPA Annual Report 2020
- ⁸¹ UNFPA Annual Report 2018
- ⁸² *ibid.*
- ⁸³ <https://ukraine.unfpa.org/uk/l-share-ii-questionnaire>
- ⁸⁴ <https://linktr.ee/LNOBUkraine>
- ⁸⁵ <https://ourlife.in.ua/na-zlobu-dnya/actualnaya-tema/3205-na-nklyuzivny-diskusy-schastya-bez-mezh.html>
- ⁸⁶ For Violence no Excuses. Studying the Problem of Violence Against Women Living with HIV in Eastern Europe and Central Asia, 2019 http://www.ewna.org/wp-content/uploads/2019/11/EWNA_Report_EN_preview_v5.pdf
- ⁸⁷ UNFPA Annual Report 2018, 2019, 2020
- ⁸⁸ KIIs#4, 24, 86
- ⁸⁹ KIIs#4, 20, 48
- ⁹⁰ KIIs#15, 81
- ⁹¹ Decree of the President of Ukraine on the Sustainable Development Goals of Ukraine until 2030 - <https://zakon.rada.gov.ua/laws/show/722/2019#Text>
- ⁹² The State Social Program for Ensuring Equal Rights and Opportunities for Women and Men for the period until 2021 - <https://zakon.rada.gov.ua/laws/show/273-2018-%D0%BF#Text>
- ⁹³ The National Action Plan on the Implementation of Recommendations set out in the Concluding Observations of the UN Committee on the Elimination of Discrimination against Women to the Eighth Periodic Report of Ukraine on the Implementation of Convention on the Elimination of All Forms of Discrimination against Women for the period until 2021 - <https://zakon.rada.gov.ua/laws/show/634-2018-%D1%80#Text>
- ⁹⁴ The State social program to prevent and combat domestic violence and gender-based violence until 2025 - <https://zakon.rada.gov.ua/laws/show/145-2021-%D0%BF#Text>
- ⁹⁵ Masculinity Today: Men's Attitudes To Gender Stereotypes And Violence Against Women <https://ukraine.unfpa.org/en/publications/masculinity-today-mens-attitudes-gender-stereotypes-and-violence-against-women>
- ⁹⁶ Gender Equality and Response to Domestic Violence in the Private Sector of Ukraine: Call for Action <https://ukraine.unfpa.org/en/BADV2019eng>
- ⁹⁷ The first Voluntary National Review of the achievement of the Sustainable Development Goals in Ukraine - <https://sustainabledevelopment.un.org/vnrs/>
- ⁹⁸ *The SDGs 2020 Monitoring Report for 2015-2019* http://www.ukrstat.gov.ua/csr_prezent/ukr/st_rozv/publ/SDGs_Ukr_2020_Monitoring_Report_eng.pdf
- ⁹⁹ Ukraine's 2021 Common Country Analysis (CCA) - <https://ukraine.un.org/uk/node/126017>
- ¹⁰⁰ KIIs# 2, 12, 71, 73
- ¹⁰¹ Q5 Online survey, N=35, Average score 4.47 out of 5
- ¹⁰² Q6 Online survey, N=35, Average score 4.63 out of 5
- ¹⁰³ *"achieve universal access to sexual and reproductive health, realize reproductive rights, and reduce maternal mortality to accelerate progress on the agenda of the Programme of Action of the International Conference on Population and Development, to improve the lives of women, adolescents and youth, enabled by population dynamics, human rights and gender equality".*
- ¹⁰⁴ Annex 3 – Documents consulted
- ¹⁰⁵ National Strategy of State Youth Policy in Ukraine until 2030 <https://zakon.rada.gov.ua/laws/show/94/2021#Text>
- ¹⁰⁶ State Programme "Youth of Ukraine 2021-2025" <https://zakon.rada.gov.ua/laws/show/1669-2020-%D1%80#Text>
- ¹⁰⁷ Law of Ukraine 1718 "On the Foundations of Youth Policy" <https://zakon.rada.gov.ua/laws/main/1414-20#Text>
- ¹⁰⁸ Sociological Surveys "Youth of Ukraine, 2018, 2019" <https://mms.gov.ua/molodizhna-politika/baza-doslidzhen/sociologichni-doslidzhennya>
- ¹⁰⁹ KIIs#3, 34
- ¹¹⁰ UNFPA-Ukraine Annual report 2020, p 1.
- ¹¹¹ UNFPA-Ukraine Annual report 2020, p 3.
- ¹¹² KIIs#16, 17
- ¹¹³ Kremenchuk, Lviv, Mykolaiv, Mariupol, Dnipro, Melitopol, Lutsk, Ternopil, Kherson, Odesa, Kyiv
- ¹¹⁴ KIIs#16, 17, 20, 23
- ¹¹⁵ KIIs#70
- ¹¹⁶ UNFPA Annual Report 2018

- 117 KII#81
- 118 *ibid.*
- 119 KII#8
- 120 UNFPA Annual Report 2018
- 121 UNFPA Annual Report 2019
- 122 UNFPA Annual Report 2020
- 123 UNFPA Annual Report 2020
- 124 KII#17
- 125 UNFPA Annual Report 2019
- 126 KII#79
- 127 UNFPA Annual Report 2020
- 128 <https://ukraine.unfpa.org/en/topics/programs-youth>
- 129 KIIs#17, 20, 46, 58
- 130 KIIs#39, 48
- 131 UNFPA Annual Report 2019
- 132 UNFPA Annual Report 2018
- 133 UNFPA Annual Report 2020
- 134 KIIs#3, 4, 15
- 135 KIIs#4, 24, 78
- 136 KIIs#6, 14, 86
- 137 The Oder of MES, #1183, October 31, 2018, On the statement of Instructional and methodical materials for carrying out by experts of examinations of electronic versions of projects of textbooks. - See [link](#); The Oder of MES, #1002, July 17, 2019, On the statement of the Order of competitive selection of textbooks (except electronic) for applicants of full general secondary education and pedagogical workers
- 138 UNFPA-Ukraine Annual reports for 2019, 2020
- 139 Non-discriminatory teaching. A guide for educators. - See [link](#); Online course – See [link](#); web-platform #ОСБИТАБЕЗДИСКРИМІНАЦІЇ – See [link](#); KIIs #2; #40; #41
- 140 The Oder of MES, #1183, October 31, 2018, On the statement of Instructional and methodical materials for carrying out by experts of examinations of electronic versions of projects of textbooks. - See [link](#)
- 141 The Order of MES On the procedure for providing stamp signature textbooks and curriculum. – See [link](#)
- 142 The Oder of MES, #1183, October 31, 2018, On the statement of Instructional and methodical materials for carrying out by experts of examinations of electronic versions of projects of textbooks. - See [link](#); The Oder of MES, #1002, July 17, 2019, On the statement of the Order of competitive selection of textbooks (except electronic) for applicants of full general secondary education and pedagogical workers
- 143 KIIs##40, 2
- 144 UNFPA-Ukraine Annual reports for 2019, 2020; KIIs ##40, 41
- 145 Final Conference of the “Best Gender Sensitive Online STEM Lesson” Competition. – See [link](#); KIIs ##2, 40, 41
- 146 Online-EdCamp 2020 - EDUCATION WITHOUT STEREOTYPES. – See [link](#); KIIs ##40, 41
- 147 *ibid*
- 148 UNFPA-Ukraine Annual reports for 2019, 2020; KIIs##40, 2
- 149 KIIs ##40, 41, 43
- 150 KIIs ##40, 41
- 151 UNFPA-Ukraine Annual report for 2020
- 152 *ibid*
- 153 UNFPA-Ukraine Annual report for 2020; KII #57
- 154 UNFPA-Ukraine Annual report for 2020; KIIs ##22, 57
- 155 Near \$14,037 (exchange rate \$1=27UAH)
- 156 Near \$81,482 (exchange rate \$1=27UAH)
- 157 Near \$13,000 (exchange rate \$1=27UAH)
- 158 KII#34
- 159 See [link](#)
- 160 See [link](#)
- 161 See [link](#)
- 162 See [link](#)
- 163 See [link](#)
- 164 https://ukraine.unfpa.org/uk/BADVGE_rate
- 165 KII#34
- 166 See [link](#)
- 167 https://ukraine.unfpa.org/uk/sexual_harassment_survey2020
- 168 https://ukraine.unfpa.org/uk/GBV_survey2021
- 169 Vinnytsya, Dnipropetrovsk, Zaporizhzhya, Donetsk, Kyiv oblast, Luhansk, Mykolaiv, Odesa, Poltava, Rivne, Ternopil, Kharkiv, Kherson, Transcarpatia oblasts.
- 170 KII#1
- 171 During the decentralization process, a significant part of the authority to GBV prevention and response was transferred to the level of local communities. This is why after 2019 UNFPA has shifted its focus from working with regional authorities to local communities.
- 172 Vinnytsya, Dnipro, Kyiv, Kremenchuk, Lviv, Mykolaiv, Odesa, Poltava, Kharkiv, Kherson, Kropyvnytsky, Mariupol, Ternopil, Cherkasy
- 173 KII#1; UNFPA-Ukraine Annual reports for 2020
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- 175 KIIs ##1, 58, 60, 61, 63, 66, 68, 71, 72, 73, 74
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- 177 <https://www.youtube.com/playlist?list=PLV4zy1apmIUZAZopjdYWKFMBEK-xCyAK6>
- 178 <https://www.youtube.com/playlist?list=PLV4zy1apmIUZAZopjdYWKFMBEK-xCyAK6>
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- 181 Q43 Online survey, N=38
- 182 ibid
- 183 KII#81
- 184 UNFPA-Ukraine Annual report 2019, p 26.
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- 186 HIV infection in Ukraine. Newsletter of the Center for Public Health of the Ministry of Health of Ukraine. 2019
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- 188 Health and Behavioral Orientation of Student Youth in Ukraine, 2014, 2018
- 189 Health and Behavioral Orientation of Student Youth in Ukraine, 2014, 2018
- 190 Mentioned earlier in the report
- 191 Katerina Bezginska, Deputy Head of Luhansk regional state administration at the opening of an SDP in Shchastia, Luhansk region, in 2021.
- 192 Mentioned earlier in the report
- 193 Ihor Ieriomin, family doctor of one of the mobile clinics.
- 194 UNFPA-Ukraine Annual report 2020, p 2.
- 195 UNFPA-Ukraine Annual report 2018, p 3.
- 196 KIIs#32, 4, 15
- 197 UNFPA-Ukraine Annual report 2020, p 3
- 198 KII#70, 86, 15, 4
- 199 Q8 Online survey, N=35, Average score 2.81 out of 3
- 200 KII#81
- 201 <https://ukraine.unfpa.org/en/topics/programs-youth>
- 202 KII#2
- 203 2018 UNFPA Research Masculinity Today: Men's Attitudes To Gender Stereotypes And Violence Against Women, 2021 survey - What Ukrainians are driven by when choosing a profession
- 204 What Ukrainians are driven by when choosing a profession: the results of national public opinion survey on key factors and stereotypes. – See [link](#)
- 205 KIIs ##40, 41, 42
- 206 Masculinity Today: Men's Attitudes To Gender Stereotypes And Violence Against Women. – See [link](#)
- 207 Citizens' attitudes towards gender-based and domestic violence. – See [link](#)
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- 211 ibid
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- 215 UNFPA-Ukraine Annual reports for 2018, 2019 , 2020
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- 219 UNFPA-Ukraine Annual report for 2018
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- 221 UNFPA-Ukraine Annual reports for 2018, 2019, 2020; KIIs ##1, 19
- 222 KIIs#1, 3, 43
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- 224 KIIs#3, 13
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- 234 KII #2
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- 241 KII #3
- 242 KIIs #1; #2; #3; #12
- 243 KIIs #1; #2
- 244 KII #1
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- ²⁴⁷ KII #18
- ²⁴⁸ <https://ukraine.unfpa.org/en/topics/program-%D1%81ombating-gender-based-violence>
- ²⁴⁹ Avdiivka and Kostiantynivka (Donetsk region GCA), Novoaidar and Shchastia (Luhansk region GCA).
- ²⁵⁰ KIIs #18; 3; 8; 16; 17; 24; 67
- ²⁵¹ KII#69, 24, 25
- ²⁵² KII#75
- ²⁵³ KIIs #18; #43;
- ²⁵⁴ KIIs #1; #3;
- ²⁵⁵ KIIs #68;
- ²⁵⁶ KIIs #12; #60; #61; #62
- ²⁵⁷ KIIs #1; #2
- ²⁵⁸ KIIs #1; #58; #60; #64
- ²⁵⁹ UNFPA-Ukraine Annual report for 2020
- ²⁶⁰ KII#86
- ²⁶¹ KII#4
- ²⁶² KII#14
- ²⁶³ UNFPA Annual Report 2019 p.2
- ²⁶⁴ KII#70
- ²⁶⁵ Q11 Online survey, N=35, Average score 2.59 out of 3
- ²⁶⁶ The law “On amendments to some legislative acts of Ukraine to ensure equal opportunities for mother and father in childcare”. – See [link](#)
- ²⁶⁷ President’s Decree “On Urgent Measures to Prevent and Combat Domestic and Gender-Based Violence and Protect the Rights of Survivors”. – See [link](#)
- ²⁶⁸ The State Social Program for Ensuring Equal Rights and Opportunities for Women and Men for the period until 2021. – See [link](#)
- ²⁶⁹ The statement of the Order of interaction of the subjects which are carrying out actions in the field of prevention and response to domestic violence and violence on the basis of sex. – See [link](#)
- ²⁷⁰ The National Action Plan on the Implementation of Recommendations set out in the Concluding Observations of the UN Committee on the Elimination of Discrimination against Women to the Eighth Periodic Report of Ukraine on the Implementation of Convention on the Elimination of All Forms of Discrimination against Women for the period until 2021. – See [link](#)
- ²⁷¹ The State Social Program for Prevention and Counteraction to Domestic Violence and Gender-Based Violence until 2025. – See [link](#)
- ²⁷² The action plan for the implementation of the commitments of the Government of Ukraine undertaken in the framework of the international initiative "Biarritz Partnership". – See [link](#)
- ²⁷³ UNFPA Annual Report 2019
- ²⁷⁴ KII #1
- ²⁷⁵ KIIs #1; #45; #58; #61; #68; #71; #74
- ²⁷⁶ KII#56
- ²⁷⁷ Instructional and methodological materials for conducting expert examinations of electronic versions of draft textbooks. – See [link](#)
- ²⁷⁸ The Order of MES On the procedure for providing stamp signature textbooks and curriculum. – See [link](#)
- ²⁷⁹ KII #41
- ²⁸⁰ KII #34
- ²⁸¹ Q10 Online survey, N=35, 4-point scale, where 1- no, 2 – partly, 3 – in full, 0 – do not know
- ²⁸² National Strategy of State Youth Policy in Ukraine until 2030 <https://zakon.rada.gov.ua/laws/show/94/2021#Text>
- ²⁸³ State Programme “Youth of Ukraine 2021-2025” <https://zakon.rada.gov.ua/laws/show/1669-2020-%D1%80#Text>
- ²⁸⁴ KII #40
- ²⁸⁵ COAR 2019, page 41
- ²⁸⁶ Qs17-21 Online survey, 4-point scale, where 1- no, 2 – partly, 3 – in full, 0 – do not know
- ²⁸⁷ 4-point scale, where 1- no, 2 – partly, 3 – in full, 0 – do not know
- ²⁸⁸ The Ministry of Social Policy report, COAR 2020
- ²⁸⁹ Hotline, MTs, daycare centres
- ²⁹⁰ <https://ukraine.unfpa.org>
- ²⁹¹ <https://ukraine.unfpa.org/en/publications>
- ²⁹² United Nations Development Group
- ²⁹³ KIIs## 14, 19, 33, 35, 36, 43, 49, 75, 76, 81
- ²⁹⁴ ibid
- ²⁹⁵ Online survey, N=35
- ²⁹⁶ KIIs##4, 7, 12, 35
- ²⁹⁷ KII#14
- ²⁹⁸ KIIs##1, 4, 5, 6, 8
- ²⁹⁹ KIIs##13, 14, 15, 21, 24, 51, 75
- ³⁰⁰ KII#32
- ³⁰¹ KII#7
- ³⁰² KII#5
- ³⁰³ CP, Evaluation Design Report, approved in September 2021
- ³⁰⁴ Table 6 in the Evaluation Design Report, approved in September 2021
- ³⁰⁵ The Evaluation Design Report, approved in September 2021
- ³⁰⁶ Financial data for 2018-2020 was provide by the CO for analysis
- ³⁰⁷ ibid
- ³⁰⁸ ibid
- ³⁰⁹ Financial data for 2018-2020 was provide by the CO for analysis
- ³¹⁰ Table 6 in UNFPA CPE Design Report approved in September 2021
- ³¹¹ KII#17
- ³¹² KIIs##5, 18

- 313 KIIs##75, 76
 314 ibid
 315 KII#12
 316 <https://ukraine.unfpa.org/en/publications>
 317 <https://ukraine.unfpa.org/en/annualreport2019eng>
 318 ibid
 319 COAR 2018, page 2
 320 COAR 2020, page 7
 321 ibid, page 8
 322 ibid, page 14: PSS services include hotline, mobile teams, daycare centres
 323 ibid, page 23
 324 KII#19
 325 Online survey, Q22, N=35, Average score 4,65 out of 5
 326 KII#5
 327 COAR 2018, page 37
 328 KII#24
 329 KII#8
 330 KII #27
 331 KII #40
 332 KII #24
 333 KII #23
 334 KII #40
 335 KII #19
 336 KIIs #6, 9, 13; Q18 Online survey, N=30, Average score 4.7 out of 5
 337 Q46 Online survey
 338 Q19 Online survey, N=35, Average score 4.55 out of 5
 339 Q17 Online survey, N=35, Average score 4.53 out of 5
 340 Q18 Online survey, N=35, Average score 4.52 out of 5
 341 Q20 Online survey, N=35, Average score 4.43 out of 5
 342 KII#8
 343 Q21 Online survey, N=35, Average score 4.56 out of 5
 344 KII#79
 345 UNFPA-Ukraine Annual report 2020, p 3.
 346 KIIs#16, 17, 20, 23
 347 KIIs#20
 348 KIIs#3, 34
 349 KIIs#4, 14, 34
 350 KIIs #24, 25, 26, 48, 67, 69
 351 KII#32
 352 KIIs##1, 63, 68, 71, 74
 353 KII #1
 354 KII #30
 355 KII #40
 356 KIIs #40; #79; #80
 357 KII#35
 358 KII #2
 359 KII#2
 360 KII #31
 361 ibid
 362 KII#34
 363 ibid
 364 KIIs ##61, 63, 58, 68, 73
 365 As of end 2021
 366 KIIs #2; #34
 367 KIIs, May – June 2021
 368 COAR 2018, page 35
 369 KII#64
 370 ibid
 371 USAID, OSCE, GIZ
 372 Masha Yefrosinina
 373 <https://courses.phc.org.ua/courses/course-v1:PHC+22+2021/about>
 374 KIIs#4, 34
 375 4.67 of max 5. Q23 Online survey, N=35 4-point scale, where 1 – Strongly Disagree and 5 - Strongly Agree and 0 – do not know
 376 4.64 of max 5. Q24 Online survey, N=35, 4-point scale, where 1 – Strongly Disagree and 5 - Strongly Agree and 0 – do not know
 377 KIIs #2; #52; #53; #54; #57
 378 KIIs #1; #2
 379 4.48 of max 5. Q28 Online survey, N=35 4-point scale, where 1 – Strongly Disagree and 5 - Strongly Agree and 0 – do not know
 380 UNFPA-Ukraine Annual report for 2019
 381 KII#67
 382 KII #1
 383 KII#45

³⁸⁴ KIIs #40; #41: #42

³⁸⁵ KIIs #1; #63; #68

³⁸⁶ <https://zags.org.ua/tatokhaby/>

³⁸⁷ KII #1

³⁸⁸ Ibid

³⁸⁹ KIIs #1; #63; #68; #71; #73

³⁹⁰ KII #2

³⁹¹ Q30 Online survey, N=35, Average score 4.6 out of 5; Q31 Online survey, N=35, Average score 4.68 out of 5

³⁹² Include UN resident and non-resident agencies, funds, and programmes. In total 18 entities signed this document

³⁹³ The EU-Ukraine Association Agreement; The Government's mid-term priorities articulated in the CMU Action Plan that comprises 11 priorities and action points

³⁹⁴ UNDAF, page 12

³⁹⁵ This amount is mentioned in the 2018-2022 UNDAF and is suspiciously high for UNFPA

³⁹⁶ Adolescents and youth, gender equality and women's empowerment

³⁹⁷ KIIs##77, 81

³⁹⁸ UNDP, UNICEF, USAID, OSCE, UNAIDS

³⁹⁹ KIIs##14, 77,

⁴⁰⁰ KI #12

⁴⁰¹ At the initiative of First Lady Olena Zelenska, on September 11, 2020, Ukraine became a full member of the international Biarritz Partnership. It was initiated by the G7 leaders – Canada, France, Germany, Italy, Japan, the United Kingdom and the United States. The main goal is to strengthen the responsibility of the G7 and consolidate the efforts of other states to achieve equal rights and opportunities in society and the absence of restrictions on any grounds.

⁴⁰² UNFPA public annual report 2019, page 57

⁴⁰³ COAR 2018, page 35

⁴⁰⁴ Q34 Online survey, N=35, Average score 4.7 out of 5

⁴⁰⁵ Q35 Online survey, N=35, Average score 4.7 out of 5

⁴⁰⁶ Q36 Online survey, N=35, Average score 4.7 out of 5

⁴⁰⁷ Q37 Online survey, N=35, Average score 4.7 out of 5

⁴⁰⁸ <https://ukraine.unfpa.org/en/news/leading-fight-against-covid-19-pandemic-stories-ukrainian-female-healthcare-workers>

⁴⁰⁹ Three time growth of GBV cases, COAR 2020, page 16

⁴¹⁰ Q34 Online survey, N=35, Average score 4.74 out of 5

⁴¹¹ <https://ukraine.unfpa.org/en/weactlaunch>