United Nations Development Programme

‘Aawaaaz’- Inclusion for and by persons with disabilities

UNDP, WHO, UN Women & UNFPA

Final Evaluation Report

Timeframe of the evaluation: November 2018-November 2021

Evaluator
Birendra Raj Pokharel, PhD
Independent Evaluator and Consultant
Tel: +977-9851043399, Email: birendra.abilis@gmail.com

May 2022
### Project Information

<table>
<thead>
<tr>
<th>Project title</th>
<th>‘Aawaaz’- Inclusion for and by persons with disabilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Atlas ID</td>
<td>00112909</td>
</tr>
<tr>
<td>Corporate outcome and output</td>
<td>UNDAF outcome 4: By 2022, inclusive, democratic, accountable, and transparent institutions are further strengthened towards ensuring the rule of law, social justice, and human rights for all particularly for vulnerable people</td>
</tr>
<tr>
<td>Country</td>
<td>Nepal</td>
</tr>
<tr>
<td>Region</td>
<td>Asia Pacific</td>
</tr>
<tr>
<td>Date project document signed</td>
<td>27 July 2018</td>
</tr>
<tr>
<td>Project dates</td>
<td></td>
</tr>
<tr>
<td>Start</td>
<td>1 November 2018</td>
</tr>
<tr>
<td>Planned end</td>
<td>30 November 2021</td>
</tr>
<tr>
<td>Project budget</td>
<td></td>
</tr>
<tr>
<td>USD 636,650</td>
<td></td>
</tr>
<tr>
<td>• UNPRPD Fund:</td>
<td>USD 526,505</td>
</tr>
<tr>
<td>• Participating UN agencies Fund:</td>
<td>USD 110,145</td>
</tr>
<tr>
<td>Project expenditure at the time of evaluation</td>
<td>USD 636,650</td>
</tr>
<tr>
<td>Funding source</td>
<td>UNPRDP and Participating UN agencies</td>
</tr>
<tr>
<td>Implementing party</td>
<td>Four UN partner agencies (UN Women, UNFPA, WHO and UNDP) Nepal</td>
</tr>
<tr>
<td>Implementing partners</td>
<td>GPH/ INF, NFDN, JURI, KOSHISH, FWDN, NIDWAN, PFPIID</td>
</tr>
<tr>
<td>Evaluation information</td>
<td></td>
</tr>
<tr>
<td>Evaluation type</td>
<td>Project evaluation</td>
</tr>
<tr>
<td>Final/midterm review/other</td>
<td>Final</td>
</tr>
<tr>
<td>Period under evaluation</td>
<td></td>
</tr>
<tr>
<td>Start</td>
<td>01/11/2018</td>
</tr>
<tr>
<td>End</td>
<td>30-11-2021</td>
</tr>
<tr>
<td>Evaluator</td>
<td>Dr. Birendra Raj Pokharel</td>
</tr>
<tr>
<td>Evaluator email address:</td>
<td><a href="mailto:birendra.abilis@gmail.com">birendra.abilis@gmail.com</a></td>
</tr>
<tr>
<td>Evaluation dates</td>
<td></td>
</tr>
<tr>
<td>Start</td>
<td>09-02-2022</td>
</tr>
<tr>
<td>End</td>
<td>30-04-2022</td>
</tr>
</tbody>
</table>
Acknowledgment

I am grateful that UNDP entrusted me to conduct this evaluation. The inputs of government officials, UNDP CO and UNDP's other project's officials and local government' officials in Sudurpashchim, Gandaki and Federal level were instrumental during the field consultations. I am also grateful to project team for their support in arranging meetings and field visits.

This evaluation report has been possible because of the support of so many persons with disabilities providing their honest response during the interviews and FGDs. I would like to extend sincere gratitude to the implementing OPDs of Aawaaz projects in Sudurpashchim, Gandaki provinces and Kathmandu who contributed to this evaluation in many different ways: by sharing their experience, thoughts and opinions. Their dedication, input and willingness to share about critical issues were extremely valuable.

As importantly, I am also grateful to officials at four UN partner agencies and their representatives staff viz. Binda Magar, Santosh Acharya, Kedar Marahatha, Krishna Sunar and Kamaraj Devapitchai and other officials for their insights and constructive feedback on draft evaluation report, and contribution in filling the data gaps. The technical inputs and guidance received from UNDP CO RBM Analyst viz. Dinesh Bista helped to improve this evaluation report.

For any lapse or error in this evaluation report, the responsibility rests solely with me.

Thank you all.

Birendra Raj Pokharel, PhD
Independent Evaluator
Tel: +977-9851043399
Email: birendra.abilis@gmail.com
NEPAL
Disclaimer

The findings, interpretations, and conclusions expressed in this Evaluation Report are those of the evaluator, hence do not necessarily reflect the official views of UNDP, WHO, UN Women and UNFPA. For more information, please contact evaluator: Birendra Raj Pokharel at birendra.abilis@gmail.com.
### List of Abbreviation

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CBID</td>
<td>Community Based Inclusive Development</td>
</tr>
<tr>
<td>CO</td>
<td>Concluding Observation</td>
</tr>
<tr>
<td>CRPD</td>
<td>Convention on the Rights of Persons with Disabilities</td>
</tr>
<tr>
<td>DAISY</td>
<td>Digital Accessible Information System</td>
</tr>
<tr>
<td>FGD</td>
<td>Focus group discussion</td>
</tr>
<tr>
<td>FWDN</td>
<td>Federation of Women with Disability - Nepal</td>
</tr>
<tr>
<td>GBV</td>
<td>Gender Based Violence</td>
</tr>
<tr>
<td>GO</td>
<td>Governmental Organisations</td>
</tr>
<tr>
<td>GoN</td>
<td>Government of Nepal</td>
</tr>
<tr>
<td>GP</td>
<td>Gandaki Province</td>
</tr>
<tr>
<td>GPS</td>
<td>Green Pastures Hospital</td>
</tr>
<tr>
<td>HDPR</td>
<td>Hospital Disaster Preparedness and Response</td>
</tr>
<tr>
<td>HI</td>
<td>Humanity and Inclusion</td>
</tr>
<tr>
<td>HRBA</td>
<td>Human right based approach</td>
</tr>
<tr>
<td>HSI</td>
<td>Hospital safety Index</td>
</tr>
<tr>
<td>ICRC</td>
<td>International Committee of the Red Cross</td>
</tr>
<tr>
<td>IEC</td>
<td>Information, Education and Communication</td>
</tr>
<tr>
<td>INF</td>
<td>International Nepal Fellowship</td>
</tr>
<tr>
<td>JURI</td>
<td>Justice and Rights Institute Nepal</td>
</tr>
<tr>
<td>KAP</td>
<td>Knowledge attitude and practice</td>
</tr>
<tr>
<td>KII</td>
<td>Key Informants Interview</td>
</tr>
<tr>
<td>KOSHISH</td>
<td>National Mental Health Self Help Organization</td>
</tr>
<tr>
<td>LaST</td>
<td>Language and Speech Therapy</td>
</tr>
<tr>
<td>MoFAGA</td>
<td>Ministry of Federal Affairs and General Administration</td>
</tr>
<tr>
<td>MOHP</td>
<td>Ministry of Health and Population</td>
</tr>
<tr>
<td>MoSD</td>
<td>Ministry of Social Development</td>
</tr>
<tr>
<td>MoWCEC</td>
<td>Ministry of Women, Children and Elder Citizen</td>
</tr>
<tr>
<td>MoU</td>
<td>Memorandum of Understanding</td>
</tr>
<tr>
<td>MTO</td>
<td>Municipal Technical Officer</td>
</tr>
<tr>
<td>NFDN</td>
<td>National Federation of the Disabled-Nepal</td>
</tr>
<tr>
<td>NIDWAN</td>
<td>National Indigenous Disabled Women Association Nepal</td>
</tr>
<tr>
<td>NNDSWNO</td>
<td>Nepal National Dalit Social Welfare Organization</td>
</tr>
<tr>
<td>OSRSC</td>
<td>One Stop Rehabilitation Service Centre</td>
</tr>
<tr>
<td>PAC</td>
<td>Project Advisory Committee</td>
</tr>
<tr>
<td>PFPID</td>
<td>Parent’s Federation of Persons with Intellectual Disabilities</td>
</tr>
<tr>
<td>PSA</td>
<td>Public Service Announcement</td>
</tr>
<tr>
<td>RM</td>
<td>Rural Municipalities</td>
</tr>
<tr>
<td>SP</td>
<td>Sudurpaschim Province</td>
</tr>
<tr>
<td>SSA</td>
<td>Social Security Allowance</td>
</tr>
<tr>
<td>ToR</td>
<td>Terms of Reference</td>
</tr>
<tr>
<td>ToT</td>
<td>Training of Trainers</td>
</tr>
<tr>
<td>UNDP</td>
<td>United Nations Development Programme</td>
</tr>
<tr>
<td>UNFPA</td>
<td>United Nations Population Fund</td>
</tr>
<tr>
<td>UNPRPD</td>
<td>United Nations Partnership on the Rights of Persons with Disabilities</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organization</td>
</tr>
</tbody>
</table>
Executive Summary

Context: Four UN agencies in Nepal viz. UN Women, UNFPA, WHO and UNDP implemented the ‘Aawaaz: Inclusion for and by persons with disabilities’ project aiming to promote a policy environment that enables persons with disabilities to claim their human rights and access services. The project mainly focused on three output areas: (i) high quality disaggregated data on persons with disabilities available and in use; (ii) capacity of OPDs strengthened to lead policy advocacy, demand accountability, and address stigma and discrimination; and (iii) draft Policy on Persons with Disabilities at the Sudurpaschim province in line with international standards. The project implementation period was 33 months, but the implementation period was extended by an additional four-month no-cost extension which was agreed upon with the four participating UN agencies linking with ongoing efforts particularly on GESI component of UNDP and UNWOMEN. The UNPRPD secretariat supported with a grant of USD 526,505. WHO and UNFPA co-funded USD 75,000 and USD 35,145 respectively. JURI Nepal, NFDN, INF and local OPDs in Sudurpaschim Province (SP) were the implementing partners whereas the National level OPDs viz. FWDN, KOSHISH, PFPID and NIDWAN implemented the repurposed activities. The provincial network of NFDN and 10 OPDs in six municipalities in SP were engaged in policy advocacy. In addition, the project developed a one stop rehabilitation services centre (OSRSC) in Gadaki province (GP) which would serve as a learning centre for other provinces of Nepal.

Objectives and scope: Overall objective of the evaluation was to assess the results and approaches of the project interventions. The evaluation has therefore assessed results against output targets and project’s contribution to higher level outcome results, assess the implementation approaches, and challenges encountered as well as identified the key lessons learnt and made specific recommendations for future course of actions while designing similar programme. The primary audience or users of the evaluation report are UNPRPD, UNDP, WHO, UN Women, UNFPA, the relevant government ministries, province GOs of SP and GP, RMs, humanitarian agencies, international NGOs, OPDs and organizations providing rehabilitation/services to persons with disabilities.

Evaluation approach and method: The evaluation used the mixed method of information collection and analysis: both qualitative and quantitative data were used to analyze the findings and draw conclusions. Qualitative information was collected using participatory tools and techniques like focus group discussions (FGDs), key informant interviews (KIs), most significant change, observation, case studies, and site visits. Secondary information related to project was collected using a ‘desk review’ of the project related documents and reports. In order to acquire personal and detailed opinions about the project’s interventions, a total 21 KIs (11 KIs with women and 12 KIs with persons with disabilities), five FGDs (viz. Group of women with disabilities, Group of beneficiaries of COVID-19 response and recovery, four UN agencies, Project Advisory Committee and OPDs in SP and GP were conducted. The evaluator has assessed how and to what extent gender equality, disability inclusion and participation of under-representative groups were covered as key beneficiaries. Only the available baseline information was mapped with end-line information as an impact-level indicator. The evaluation used project generated data to provide quantitative results.
Evaluation findings
a. Relevance: The project was found relevant in terms of its overall design and approaches. The project was highly relevant to contribute to the policy environment and establishment of disaggregated data of persons with disabilities in Sudurpaschim province. The project’s repurposed activities were also found highly relevant in response to COVID-19 pandemic. 85.7% respondents agreed that the project was highly relevant in the fulfilment of Governments’ commitments towards “Rehabilitation 2030: A call for Action” 1 and building rehabilitation health systems.
b. Coherence: The project’s key interventions were found flexible and well responded to the challenges imposed by the COVID-19 pandemic which severely affected the project implementation due to travel restriction and health emergency. It has obtained additional fund for re-purposed activities. The four partner Agencies suitably selected the implementing OPDs as their long-term goals and strategies were congruent with the project’s overall goals and strategies as such the project was coherent on the UNDAF 2018-2022 results. The re-purposed activities for providing humanitarian support were coherent with Article 11 of UNCRPD, for the protection and safety of persons with disabilities in situation of risk and humanitarian emergencies and Article 28 of adequate standard of living and social protection of persons with disabilities.
c. Effectiveness: Though the project faced several challenges, it was able to deliver the majority of its activities on time without compromising quality. 100% respondents opined that the project was effective. The significant achievement of the project is the establishment of OSRSC. The project is effective for evidence-based advocacy of OPDs as such the municipalities increased annual budgets for disability issue as claimed by the OPDs in six municipalities in SP. The facility access audit of COVID-19 facilities response was carried out by OSRSC. The result established protocol of essential standards for disability inclusion and rehabilitation for persons with disabilities which was utilized immensely to advocate with Government and partners for providing basic amenities in COVID-19 facilities. Tele-rehabilitation services to persons with disabilities by OSRSC was effective in addressing the health and social needs during the lock-down period through direct provision, and networking with local government and partners. The project was also effective to increase access to information of persons with intellectual disabilities regarding disability identity card distribution guideline, violence, menstruation hygiene and COVID 19 safety measures which is also the knowledge resource for the local government that is helpful for planning process as revealed by PFPID. The project under NIDWAN was effective in building awareness on persons with disabilities from indigenous, Dalit, Madhesi community and their situation for mainstreaming from the inclusive perspectives. Despite of encouraging results, the project could have generated better results and greater effectiveness if the disaggregated data established by the project would have been used in the policy making and planning process as anticipated by the project. The disability focal person in MoSD in SP was found not aware about the report with disaggregated data established by the project. Likewise, OPDs in six local levels in SP have yet to strengthen their institutional capacity for effective advocacy despite of the grant support under UN Women partnership through JURI-Nepal.
d. Efficiency: The project utilized its human, material and financial resources to achieve results in a timely fashion despite the impacts of COVID-19 pandemic. Project’s records revealed that around 20% of project activities were completed
significantly before the onset of COVID-19 pandemic. Almost 50% of the activities were implemented by the planned date and 30% activities were implemented during the no cost extension period. Expenditure exceeded 100% by the end of the project. The project management structure was appropriate for and efficient in generating the anticipated results. The partnerships with OPDs under UNDP considerably reduced the time required by and the management costs of the project. In contrast to that, the partnership under UN Women had to cover three tiers to reach the grant to the OPDs such as the grant partnership was signed with JURI Nepal, that co-funded to NNDSWO which further funded to OPD namely API Sports Club Dhangadi, as shared by the corresponding OPD leader. This increased number of funding layers which has increased the operational cost of the project and such practice is often considered challenges on efficient management.

e. Sustainability: Sustainability was ensured by using through capacity-building measures to equip OSRSC, NFDN and implementing OPDs with the infrastructure, skills and knowledge. Local partners, OPDs in municipalities were capacitated to leverage resources from local governments. Six municipalities of SP have developed plans and approaches to continue the project’s good practices with their own budgets in providing services to persons with disabilities. Project interventions are reflected in local development plan with budget from municipalities viz. Dhangadi Sub-metropolitan, Bhajani Municipality, Shikhar Municipality, Badikedar Rural Municipality and Pokhara metropolitan city. The project effectively facilitated municipalities and wards in replicating its initiatives of providing disability ID cards such as digital printing of disability ID card in Shikhar Municipality. Consequently, the project’s good practices are being replicated in new areas without project resources for an example, the province 1 and GP were found drafting the disability policy in their corresponding provinces. Despite of its encouraging possibility of sustainability, the OPDs have very low functioning capacity without having regular fund from the municipalities for their operation and management. The local funding approach of the Government is self-executed rather providing flexibility for the need-based intervention through OPDs in all six municipalities of SP. The dis-functioning of coordination committee formed in the province and local levels is another challenge for the sustainability which need to be made functional by the Government in order to execute the disability policy and its monitoring exercise.

f. Impact: Disability inclusive development (DID)-related policies helped to mainstream persons with disabilities in development process and support fulfillment of the disability targets of 2030 agenda of SDG. The project brought a draft of disability policy in SP, that constitute milestones in opened-up the engagement of OPDs in policy making together with Provincial government. Disaggregated data on persons with disabilities has been established in SP. The OPDs have adopted evidence-based advocacy strategy to ensure that the rights of persons with disabilities are at the top of the agenda of local GOs and allocated annual budgets. Comprehensive, holistic rehabilitation services are made available by OSRSC to persons with disabilities and other rehabilitation conditions. Persons with disabilities using wheelchair have access to reception of GPH and pharmacy counter that enhanced their independent mobility to access rehabilitation services and rights to sports through refurbished basketball court still the signage and braille blocks are absence, pointed as a gap in fulfilment of universal design principles. The Government has allocated an amount equivalent of USD 8750 to enhance the rehabilitation services through GPH for persons with disabilities. The advocacy of NFDN was impactful in getting a vaccine order prioritizing person with disabilities, and in providing accessible transportation to vaccine facilities
with the support of partners and establishing accessible vaccination corner in the center where persons with disabilities using wheelchair could join the vaccination program independently. By the end of February 2022, the MoHP revealed that 350,000 persons with disabilities (150,000 women) were already vaccinated across the country. The development of IEC materials in accessible format and rehabilitation products like communication board has supported enjoyment of right to information by persons with disabilities. This intervention improved the communication between health care workers and patients with disabilities that was particularly developed and dissemination during the COVID-19 context. The project also contributed to enhancing UN inter-agency collaboration to advance the situation of persons with disabilities.

g. Cross cutting issues: The project identified GESI, human right and partnership as cross-cutting themes though the project was specifically designed for promoting disability targeted concerns following CRPD and SDG. The cross-sectional issues of persons with disabilities have seriously been taken by the project planning and implementation phase. The engagement of women with disabilities as key facilitator and trainers showcased the strengthened capabilities of women with disabilities even those with psychosocial disability to lead their issue by their own. The woman peer counselors played a crucial role in addressing GBV and specific issues related to women and girls with disabilities during the pandemic. The project strengthened networking capabilities of FWDN from all the provinces through the partnership of UNDP. The UN Women was leveraging the issue of women with disabilities within the GESI component as a mainstream program collaborating with NDWA, though this was not within the scope of this project, has a lasting impact of disability inclusive GESI. The project adopted a practiced with accessibility compliance and reasonable accommodation since the mayor and deputy mayor in Badikedar Rural Municipality visited in ground floor to meet wheelchair user persons with disabilities to render services and interacting with them. The project’s records and evidence revealed that project practiced the HRBA in its design and implementation. The FWDN carried out the review of laws/policies from the disability lens which has been a resource for making advocacy plan for the enactment of gender friendly policy as human rights instrument on disability in federal level. In the OSRSC, the participants follow the minimum accessibility guideline and risk communication materials and rehab products, though full feature of accessibility standard couldn’t be addressed for those with visual impairment, hearing impaired and those living with intellectual disability. The roles of NFDN and thematic OPDs have been well recognized by the participating UN agencies and have put optimum effort to ensure full and effective participation of persons with disabilities and their representative organizations in the implementation of the project. NFDN has been working together with all UN partner agencies and OPDs viz. PFPID, KOSHISH, NDWA, FWDN, NIDWAN were engaged as implementing partners in national level. The OSRSC established in GPH in partnership and collaboration between INF/GPH and WHO. There was partnership/collaboration with JURI-Nepal engaged in strengthen the capacity of 10 OPDs for advancing advocacy on disability rights and inclusion in municipality and sub-metropolitan level in SP under UN Women partnership. The project is an initiative in the form of developing a model centre for providing inclusive rehabilitation services for persons with disabilities which is working as usual practice as model center however in the COVID-19 context, the center provided tele-rehabilitation service to persons with disabilities. UNFPA assigned Valley Research Group and Nossal Institute, University of Melbourne, Australia for comprehensive survey on “The Situation of Persons with Disabilities in SP where OPDs were consulted in planning and enumeration. The voice
of some consulting OPDs in SP and Pokhara revealed that their partnership was governed by NGOs, and they were not aware about the engagement and role of UN partner agencies as well as the funding support of UNPRPD, these OPDs are working through JURI in SP and INF in GP.

Recommendations

1) **Utilization of established disaggregated data of persons with disabilities in policy and programs:** It is strongly recommended to mobilize OPDs to disseminate the report of disability survey, also to produce the high-quality disaggregated data in accessible and easy to read format.

2) **Applying WGQ for disability survey:** Need strengthening advocacy to fulfill the state commitments and CO concerning article 31 and build capacity of OPDs for establishing disaggregated data applying WGQ.

3) **Promoting access to justice to persons with disabilities addressing in Policy:** The drafted disability Policy in SP is not fully harmonized with the international standards of human rights as intended by the project. It is recommended the OPDs and implementing partners to strengthen advocacy to accommodate the provision of access to justice for persons with disabilities following article 13 of CRPD and SDG 16 while finalizing the draft disability policy before its endorsement by the Government in SP.

4) **Promoting universal design principles:** The OSRSC is recommended to follow universal design principles ensuring barrier free environment for all persons with disabilities and also strengthen reasonable accommodation while rendering services in the OSRSC.

5) **Strengthening the roles of OPDs in partnership:** The UN Partner agencies are strongly recommended to promote roles of OPDs in consultations process of project design and implementation, not just a third-party showcasing entity. The implementing NGOs are strongly recommended to opened up the representation of persons with disabilities in decision-making level and encourage the newly established OPDs for networking within disability rights movement. The local Municipalities are recommended to promote roles of OPDs particularly to address the concerns of people with disabilities from under-representative groups to ensure their rights within policies and programs.

6) **Strengthen UN Inter-agencies collaboration in promoting disability inclusion:** The UN partner agencies are strongly recommended to continue initiatives to increase awareness and sensitization on disabilities issues among the staff members across all UN agencies and them to focus their work and making recruitment process disability inclusive.

7) **Following the CO of CRPD committee:** The provincial Government are recommended to fulfill the state commitments to establish desegregated data of persons with disabilities that complies the Concluding Observation (CO) provided by CRPD committee to the GON.

8) **Sensitization of newly elected bodies:** It is strongly recommended to sensitize newly elected local bodies from the disability rights provisions and assimilating the need for and importance of disability-inclusion in the local decision-making levels.
# Table of content

Project Information ........................................................................................................................................... i
Acknowledgment ................................................................................................................................................ ii
Disclaimer .......................................................................................................................................................... iii
List of Abbreviation .......................................................................................................................................... 4
Executive Summary .......................................................................................................................................... 5
Table of content .................................................................................................................................................. 10
1. Introduction .................................................................................................................................................. 12
2. Description of the Interventions .................................................................................................................. 13
   2.1 Background and rationale ....................................................................................................................... 13
   2.2 Project context .......................................................................................................................................... 13
   2.3. COVID-19 disruption and project Response: ....................................................................................... 15
3. Evaluation objective, purpose and scope ...................................................................................................... 17
   3.1. Evaluation objectives ........................................................................................................................... 17
   3.2. Evaluation scope ..................................................................................................................................... 18
   3.3 Evaluation criteria and evaluation questions .......................................................................................... 18
4. Evaluation methods and approach ............................................................................................................... 19
   4.1 Data collection procedures and instruments .......................................................................................... 19
      4.1.1 Secondary data collection .............................................................................................................. 19
      4.1.2 Primary data collection ................................................................................................................ 19
   4.2 Data analysis and Synthesis ................................................................................................................... 22
   4.3 Performance standards ........................................................................................................................... 22
   4.4 Stakeholders and their nature: ............................................................................................................... 23
   4.5 Ethical consideration .............................................................................................................................. 23
   4.6 Background information on evaluator .................................................................................................. 24
   4.7 Major limitations ..................................................................................................................................... 24
5. Evaluation findings ........................................................................................................................................... 25
   5.1 Relevance .................................................................................................................................................. 25
   5.2 Coherence ................................................................................................................................................ 28
   5.3 Effectiveness ............................................................................................................................................. 30
   5.4 Efficiency .................................................................................................................................................. 36
   5.5 Sustainability ........................................................................................................................................... 39
   5.6 Impacts ...................................................................................................................................................... 41
   5.7 Cross cutting issues .................................................................................................................................. 43
      5.7.1 GESI ................................................................................................................................................... 43
      5.7.2 Disability inclusion: ......................................................................................................................... 45
      5.7.3 Human rights .................................................................................................................................... 46
5.7.4 Partnership.................................................................................................................47
6. Conclusion..........................................................................................................................49
7. Recommendations ..............................................................................................................51
8. Good practices and learning .............................................................................................53
  8.1 Good practices ...............................................................................................................53
  8.2 Learning .........................................................................................................................53
Annexes..................................................................................................................................56
  Annex-1: Terms of Reference ..............................................................................................56
  Annex-2: Evaluation matrix ..................................................................................................67
  Annex-3: FGD/ KII Tools .....................................................................................................72
  Annex-4: List of consulting persons in FGD ........................................................................77
  Annex-5: List of Key Informants Interviewees .....................................................................79
  Annex-6: Budget Utilization status .......................................................................................80
  Annex 7: UNEG Code of Conduct signed by the evaluator .................................................81
1. Introduction

This report presents the findings from the final evaluation of the “Aawaaz”-Inclusion for and by persons with disabilities’ hereinafter called “project” which was implemented by four UN partner agencies namely United Nations Development Program (UNDP), World Health Organization (WHO), UN Women and United Nations Population Fund (UNFPA) in Sudurpashchim and Gandaki Provinces of Nepal. The purpose of the evaluation was to objectively assess the results and approaches of the project interventions and its contribution to a high level of outcome results and provide specific recommendations for future programming/interventions. As the project was ended on 30th November 2021, UNDP, on behalf of UN partner agencies, has commissioned the final evaluation to assess the results achieved and lesson learnt by the project intervention. The evaluation has covered the achievements of the programme from the beginning of November 2018 to the end of November 2021. The evaluation draws the lesson learnt from the project implementation and provides specific recommendations for future programming/interventions on the rights of persons with disabilities.

The primary audience or users of the evaluation report are UNPRPD, UNDP, WHO, UN Women, UNFPA, the relevant government agencies viz. Ministry of Women, Children and Elder Citizen (MoWCEC), Ministry of Social Development (MoSD), province GOs of SP and GP, RMs, humanitarian agencies, international NGOs, OPDs and organizations providing rehabilitation/services to persons with disabilities. The key learning and results from this project will be used to design the similar projects in the future. Thus, they are particularly interested to learn lessons for future improvements, or to replicate good practices in future projects of similar kinds or for the extension of the existing programme as per the need.

This report is organized into eight sections. The first section covers brief introduction of the evaluation with rationale. The second section describes the intervention to be evaluated and the third section describes the purpose and scope of the evaluation. The evaluation approaches and methods including data collection methods, data analysis is described in section four. Detail findings are provided in section five. The section six and seven draws the conclusion of the findings and provide the specific recommendations for future course of actions. Good practices and lessons learned are captured in section eight. Finally, the report has an Annex section at the end.
2. Description of the Interventions

2.1 Background and rationale
The Project commenced in November 2018 with an end date of 31 July 2021. However, the Project implementation was directly impacted by the lockdown and travel restrictions imposed by the government to contain the spread of COVID-19. Hence, the project was granted a no-cost extension, with some repurposed activities, until 30 November 2021. Thus, the total duration of the project was 37 months, between November 2018 – November 2021. The total approved budget for the project from UNPRPD secretariat was USD 526,505 and there was co-funding from the UN partner agencies as mentioned by the representatives viz. USD 75000 from WHO and USD 35,145 from UNFPA.

As the project came to an end on 30 November 2021, UNDP, on behalf of UN partner agencies, commissioned a final evaluation to identify and document achievements of project outputs, challenges, lessons learned and best practices. The findings of the final evaluation will provide guidance for the way forward for future course of action. Thus, the final evaluation report includes specific recommendations for future interventions.

The project evaluation executed organizing small focus group discussions (FGDs) and key informant interviews (KIIs) executed in Sudurpashchim and GPs to collect information ensuring engagement of local authorities and communities.

2.2 Project context
Following the adoption of Convention on the Rights of Persons with Disabilities (CRPD) in 2010, considerable advances have seen in the protection and promotion of rights of persons with disabilities in the Global arena. The 2015 Constitution in Nepal provides strong guarantees, including the right to equality, education, right to social justice, the right to live in dignity with respect of human diversity participation in public and political life\(^2\). The Government of Nepal has adopted several progressive laws and policies to protect and promote the human rights of persons with disabilities. Despite the improvements enshrined in the Constitution and the overall legal and policy framework following CRPD principles, however, most services remain out of reach for persons with disabilities. Moreover, existing research and the concluding observation\(^3\) given by the Committee on the Rights of Persons with Disabilities (“the CRPD Committee”) raise the concern that the intersection of gender inequality and disability creates further marginalisation and social, political and economic exclusion for women and girls with disabilities.

The “Aawaaz: Inclusion for and by persons with disabilities”, hereinafter called “project” implemented by four UN partner agencies in Nepal during November 2018 until November 2021. The project was a joint effort of UN Women, UNFPA, WHO and UNDP as lead agency. Recognizing that women and girls are at greater risk of multiple forms of discrimination, the project aimed to protect and promote the rights of persons with disabilities in Nepal and enhance their capacities, in ensuring that policies are gender-responsive through a range of interlinked and reinforcing interventions. The

\(^2\) Articles 31, 39, 21 (1) and (3), 43, 84, 86 of the Constitution of Nepal, 2015

interventions under project are directly in line with the Constitution of Nepal, the provisions of the CRPD, the United Nations Development Assistance Framework (UNDAF) 2018-2022 and support the Government of Nepal’s commitments of living up to the promise of Agenda 2030 for Sustainable Development to ‘leave no one behind’.

The project was designed to align with the currently ongoing federalization process in Nepal and aimed to foster an enabling policy environment by enhancing the capacities of both rights holders and duty bearers in Sudurpashchim and Gandaki provinces, comprising 3 local levels in each of Doti and Kailali districts viz. Dhangadi Sub-metropolitan, Bhajani Municipality, Kailari Municipality in Kailali and Dipayalsilgadhi Municipality, Shikhar Municipality and Badikedar Rural Municipality in Doti district. Pokhara metropolitan covered in GP.

The total duration of the project was 37 months including four months no cost extension. Project’s interventions were designed in such a way that entire municipalities are benefitted through development of plans, policies, frameworks and guidelines. JURI Nepal, NFDN, INF and local OPDs in SP are the partner organisations in these municipalities. Out of the total budget of the project (Annex VI) USD 526,505 was supported initially from UNPRPD secretariat, whereas UN partner agencies viz.WHO and UNFPA utilized additional USD 75,000 and 35,145 respectively from internal sources.

The project outcome was “Policy environment enables Persons with disabilities claim their human rights and access responsive and quality services in Province 7”

The anticipated outputs of the project were:

Output 1.1: High quality disaggregated data on persons with disabilities available and in use.

Output 1.2: Capacity of Organizations of Persons with Disabilities (OPDs) strengthened to lead policy advocacy, demand accountability for quality services, and address stigma and discrimination.

Output 1.3: Draft Policy on Persons with Disabilities at the Province 7 in line with international standards.

As per the anticipated outputs, the project aimed to contribute by producing high quality disaggregated data on persons with disabilities; by strengthening the capacity of organizations of persons with disabilities (OPD) to lead policy advocacy, demand accountability and address stigma and discrimination; and by supporting the development of an evidence-based draft Policy on Persons with Disabilities in line with international standards in SP. Participating UN agencies aimed to promote a policy environment that enables persons with disabilities to claim their human rights and access services.

The project adopted a multi-stakeholder approach following a characteristic of UNPRPD funded projects. There was effective involvement of UN agencies, as well as governments, OPDs, and broader civil society through complementary action at country level. The voice of persons with disabilities has been taken as key factor in the implementation of project activities as well as in program planning has contributed to meet the project objectives.
The project was implemented by all four participating UN agencies linking with the respective UN agencies ongoing effort particularly on GESI component of UNDP and UN Women. UNDP has facilitated the overall project coordination as such WHO had mainly focused on rehabilitation of health in GP whereas the UN Women focused on capacity building of OPDs for policy intervention in six municipalities, integrating disability in GESI policy of municipalities in SP and the UNFPA focused on establishing disaggregated data of persons with disabilities in SP.

The project in its aim to develop a consultative, evidence-based Disability Policy for “Sudurpashchim” (Far-West) Province, with the potential for replication in other provinces, the project was executed in conjunction with the GESI component of implementing UN agencies viz. UN Women and UNDP to address which covered a broad range of disability mainstreaming within the UN partnership program. In particular, the project has tried to in build disability targeted component to ensure that the Disability Policy of SP thoroughly addresses those issues that are raised in the concluding observation of the CRPD committee to the Government of Nepal. These include the, access to Information and Statistical and Data Collection, participation in public and political life, health and accessibility.

2.3. COVID-19 disruption and project Response:
The COVID-19 pandemic had severely impacted in Nepal and Globally and the impact on persons with disabilities are the worst impacted. The rapid assessment conducted by National Federation of the Disabled Nepal with support of UNDP projected that majority of them are not aware of the COVID-19 and many do not know the measures to be safe. 46% think that the information materials are not in accessible form. Due to lockdown many has lost their livelihood, and many need the daily hygiene items. It is quite difficult to manage the persons with disabilities that are living in groups/Rehabilitation Service Centers and the students from resource room.

The activities of the project implemented in partnership with various stakeholders including the umbrella organization the National Federation of the Disabled Nepal. UN Women Nepal worked with NGO supporting 10 OPDs as third party in SP. UNDP extended collaboration with the National Federation of the Disabled Nepal (NFDN) and its province chapter and 4 other OPDs viz. FWDN, KOSHISH, NIDWAN and PFPID. Similarly, UNFPA conducted a sample survey on the situation of persons with disabilities in SP in collaboration with a national research organization (i.e. Valley Research Group) and an international research institute (Nossal Institute Limited, University of Melbourne, Australia). The consultation with NFDN has added value of engagement of OPD in planning the survey. Due to COVID-19, all the activities related to policy dialogue and other project interventions are affected due to continuous lockdown/partial lockdown in 2020-2021. When the lockdown was lifted, the focus of the government shifted to humanitarian support and requested the development partners and UN agencies to repurpose the development programmes to address the immediate need of people from COVID-19 impact. Therefore, the participating UN agencies (UN Women, UNFPA, WHO and UNDP) had re-purposed the activities planned in 2020 and some additional interventions were planned and implemented as agreed with the UNPRPD Secretariat with additional funding support. The final evaluation also has captured the impact of the re-purposed activities.

The evaluation has assessed how and to what extent gender equality, disability inclusion and participation of under-representative groups, partnership, and human rights (accessibility measures and reasonable accommodation in compliance with
CRPD and accessibility guideline) are integrated into the project’s design, participation mechanisms, benefit-sharing, and monitoring & evaluation. The evaluation questions have assessed the extent to which the project was effective in promoting gender and disability inclusion, partnership and human rights to under representative groups. The evaluation also assessed the project's performance against the existing policy provisions of the UN partner Agencies and the GoN on disability mainstreaming, partnership and human rights. In the evaluation process, data obtained are disaggregated by disability, gender and ethnicity of beneficiaries, as much as possible.
3. Evaluation objective, purpose and scope

3.1. Evaluation objectives

The overall purpose of the evaluation was objectively assessed the results and approaches of the project interventions and its contribution to a higher level of outcome results. It has tried to identify and document the results achieved through the project interventions, challenges encountered as well as document the lessons learnt and best practices. The findings of the evaluation has provided the specific recommendations for the future programmes of four UN partner agencies and stakeholders willing to contribute in promotion of the rights of persons with disabilities.

Specifically, the objectives of the evaluation were to:

- Ascertain the development of theory of change intervention to ensure the policy environment, capacity development, data and enabling environment for persons with disabilities in the selected province and Palikas.
- Ascertain the results and learnings of the project and its relevancy, effectiveness, efficiency, sustainability and impact including synergies with other similar interventions and stakeholders together – the relevant provincial ministries and their service institutions; local governing authorities; non-state agencies working for persons with disabilities; as well as federal and local chapters of OPDs - to address the rights of persons with disabilities and the duties of the mandate holders.
- The evaluation intent to assess the relevance, effectiveness, coherence, efficiency, impact and sustainability of the project interventions in project sites (SP (Far-west) province and Gandaki) for the project time period. In addition, the evaluation should indicate if the achieved results are in the right direction towards contributing to strengthening the policy environment and protecting the rights of persons with disabilities, briefly touch on how project implemented its interventions during the COVID-19 period. The evaluation shall cover but not limited to the following areas:
  - Relevance of the project: Review the progress against project outputs and contribution to outcome level results as defined in the project’s theory of change and ascertain whether assumptions and risks remain valid. Assess the alignment of the project design with national priorities and responding to the needs of the OPDs.
  - Effectiveness and efficiency of implementation approaches: Review project’s technical as well as operational approaches and deliverables, quality of results and their impact covering the results achieved; identify and assess any other intended or unintended, positive or negative results as well as the partnerships established and issues of capacity.
  - Gender Equality and Social Inclusion: Review the project’s approaches in general including mainstreaming of gender equality and social inclusion with focus on women and marginalized groups.
  - Sustainability: Review and assess the sustainability of the results, risks and opportunities (in terms of resource mobilization, synergy and areas of interventions) related to future interventions.
  - Review external factors beyond the control of the project that have affected it negatively or positively.
  - Review planning, management, monitoring and quality assurance mechanisms for the delivery of the project interventions.
  - Review coordination and communication processes and mechanisms with the stakeholders.
• Review how the implementation of project interventions is impacted by COVID-19.

3.2. Evaluation scope
The evaluation assessed the project interventions in SP and GPs between November 2018 and November 2021. The evaluation also assessed whether the project results were in the right direction towards contributing its overall goal and purpose. In addition, the evaluation has also assessed the relevancy and effectiveness of the immediate response to COVID-19. The evaluation has assessed how and to what extent gender equality and disability inclusion, partnership, and human rights (as cross-cutting themes) are integrated into the project’s design, participation mechanisms, access to services, and accessibility measures undertaken while implementing the project.

3.3 Evaluation criteria and evaluation questions
Evaluator followed the OECD-DAC’s revised evaluation criteria viz. relevance, effectiveness, coherence, efficiency, impact and sustainability along with cross-cutting criteria viz. gender equality and social inclusion and human rights including accessibility compliances. The guiding questions are outlined in annex-III in evaluation matrix.
4. Evaluation methods and approach

The evaluation was conducted in accordance with the UNDP Evaluation Guidelines 2019. Evaluator adopted a mixed approach by integrating qualitative and quantitative tools and techniques for the data collection and analysis. The evaluation stages included (i) desk review, (ii) prepare inception report, (iv) field visits to project’s provinces and municipalities, (v) data analysis and interpretation, and (vi) evaluation report writing and finalization. In order to cover the scope and spirit of the ToR, the evaluator integrated both qualitative and quantitative tools and techniques for the data collection. The focus, however, was on qualitative assessment to enrich the raw data collected and develop more insight into the project’s accomplishments and lessons learned.

4.1 Data collection procedures and instruments

4.1.1 Secondary data collection

i. Kick-off meeting: A kick off meeting, organized with UN partners’ agencies including UNDP, WHO, UN Women and UNFPA that helped to discuss on data collection plan, expectations, and tools and techniques to be adhered for collection of primary information. This meeting further helped to clarify details on describing the evaluator’s understanding and how the evaluation questions are addressed.

ii. Desk mining: As part of this evaluation, following documents were reviewed:

- Project document including project proposal, progress reports, consolidated quarterly and annual reports
- Minutes of project board meetings
- Project modification document
- Knowledge products viz. draft disability policy, data collection report and legal review reports.
- Communication and Visibility reports
- IEC Materials

4.1.2 Primary data collection

a. Qualitative information

The criteria for the selection of stakeholders and project documentation were informed by a preliminary review of project documents during the inception phase of the evaluation. Consequently, all documents that were of relevance to the project were selected for in-depth review, along with the ‘Aawaz’ project online portal. Further, to engage a wide range of project stakeholders across the project location, work streams, and activities, and to mitigate the possibility of non-response to requests for consultation as stakeholder selection has followed the purposive sampling to increase the potential for response accuracy and data reliability.

Evaluator utilized a ‘desk review template’ to identify initial findings. This data was triangulated with the data collected through consultations and interviews, which have allowed him to see information gaps and adjust in evaluation of checklist and guide questions accordingly by use of suitable data collection tools. The list of KII is given in annex V and annex VI.

Data generated using two methods, an in-depth review of relevant documents, the project and the literature and key informant consultations. In line with ToR
requirements, data generation conducted in appropriate approach both by face-to-face consultations and the remote consultation through Zoom platform annex III).

i. Sampling design and methods: Purposive sampling was used to achieve the level of rigor that is required for a robust evaluation. The process responded to the diversity that is anticipated across project documentation and stakeholder groups and conducted using a sequential approach. As the project has included a diverse as well as re-purposed activities due to COVID-19, this purposive approach followed to sampling from SP and GPs under partnership of four UN partner Agencies.

ii. Key informant interview (KII): The Evaluator used KII tool for in-depth interview based on agreed checklist and guiding questions related to relevance, coherence, effectiveness, efficiency, impact and sustainability.

These stakeholders include the members of project advisory committees in federal and province level, Government representatives both from federal and province levels, municipalities, four UN partner Agencies, implementing OPDs viz. NFDN, FWDN, PFPID, KOSHISH, implementing NGOs viz. JURI and INF and beneficiaries group including those enjoying rehabilitation service and those engaged in policy drafting exercise in SP. The Local OPDs in project municipalities in SP, network of NFDN as project implementing partner are also considered as key informants. At the level of project participation, data collection engaged the targeted project beneficiaries, viz. OPDs and other representing individual who are benefited by humanitarian assistance during COVID-19 response and reform intervention under the project. Most of the interviews were taken in-persons at provinces and municipalities. The evaluator visited some of the sites to observe the progress and impact of the intervention. Overall, purposive sampling would allow for data collection that aligns with the project work streams; stakeholder engagement in different types of project activities; and the extent to which the project has integrated the cross-cutting themes of gender and disability inclusive COVID-19 response.

The key informants were prioritized women with disabilities from under-representative group on disabilities such as Indigenous group, Tharu community and those residing in remote village of SP. A total of 21 ‘in depth interviews’, 7 each from Gandaki province, Sudurpaschim province and Kathmandu were conducted in order to gather primary data from key stakeholders. Among them, 57% respondents were women. The evaluator used the semi-structured questionnaire through computer assistive method with screen reading software since the evaluator is a person with visual disability. Prioritizing the vulnerable group of persons with disabilities, the evaluator visited the remote area of SP and consulted with persons with disabilities affected by flood and COVID-19 survivals in GP.

iii. Focused group discussions (FGDs): FGD tool was used to assess project’s progress from empirical questions. FGDs or consultation meetings were organized with project beneficiaries and other stakeholders. A total of five FGDs were conducted each with group of women with disabilities, group of beneficiaries of COVID-19 response and recovery, four UN partner agencies, project advisory committee and OPDs in SP.

iv. Field observations: Evaluator directly observed few project sites where accessibility measures were installed in the public infrastructures including one-stop rehabilitation centre in Pokhara. The field observation carried out in keeping in mind the COVID-19 situations and protocols.
v. **Case studies:** Using thematic case studies, evaluator assessed the impact of the project on the beneficiaries, particularly the benefits they accrued from the project and the visible changes in their lives, and overall well-being. Due to the time constraint for the evaluation task, the convenient case study was captured from the project completion report of NFDN as it is working as key partner from all four UN partner agencies viz. UNDP, WHO, UN Women and UNFPA. Stories of change tool was explored through ‘most significant change’ \(^4\) method and kept in the report to substantiate the qualitative findings. The views of direct beneficiaries and stakeholders were recorded and presented as ‘direct quotes’.

vi. **Approach to collect lessons learnt:** Throughout the consultation process with various stakeholders, learning was collected by using the four steps process viz. (i) introduction, (ii) assessment of the overall project approach, (iii) identify the ‘success factors’ or ‘struggle factors’, and (iv) collect recommendations for future activities.

b. **Quantitative information**

The evaluator relied on project-generated secondary data as its quantitative information. During the desk review, the evaluator analysed quantitative information by developing a relevant table and verified those with the support of project’s staff. Since the baseline data were not available in the project documents, only the end line data were used to triangulate the information and assess impacts level indicators.

In summary, following table shows project’s specific objective vs. data collection tools/approach.

<table>
<thead>
<tr>
<th>Key evaluation issues</th>
<th>Methods and tools</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ascertain the results and learnings of the project and its relevancy, effectiveness,</td>
<td>Desk review, FGDs, KIs</td>
</tr>
<tr>
<td>efficiency, sustainability and impact including synergies with other similar</td>
<td>Most significant change</td>
</tr>
<tr>
<td>interventions and stakeholders together – the relevant provincial ministries and</td>
<td>Case studies</td>
</tr>
<tr>
<td>their service institutions; local governing authorities; non-state agencies working</td>
<td></td>
</tr>
<tr>
<td>for persons with disabilities; as well as federal and local chapters of OPDs - to</td>
<td></td>
</tr>
<tr>
<td>address the rights of persons with disabilities and the duties of the mandate holders</td>
<td></td>
</tr>
<tr>
<td>Ascertain the development of theory of change intervention to ensure the policy</td>
<td>Desk review, FGDs, KIs</td>
</tr>
<tr>
<td>environment, capacity development, data and enabling environment for persons with</td>
<td>Most significant change</td>
</tr>
<tr>
<td>disabilities in the selected province and Palikas.</td>
<td>case studies, media reports</td>
</tr>
<tr>
<td>Review project’s technical as well as operational approaches and deliverables,</td>
<td>Desk review, FGDs, KIs</td>
</tr>
<tr>
<td>quality of results and their impact covering the results achieved; identify and assess</td>
<td>field observation</td>
</tr>
<tr>
<td>any other intended or unintended, positive or negative</td>
<td></td>
</tr>
</tbody>
</table>

results as well as the partnerships established and issues of capacity.

| Review the project’s approaches in general including mainstreaming of gender equality and social inclusion with focus on women and marginalized groups including under representative groups within persons with disabilities. | Desk review, KIIs, case studies, media reports |
| Review and assess the sustainability of the results, risks and opportunities (in terms of resource mobilization, synergy and areas of interventions) related to future interventions. | Desk review, KIIs |
| Review external factors beyond the control of the project that have affected it negatively or positively. | Desk review, KIIs |
| Review planning, management, monitoring and quality assurance mechanisms for the delivery of the project interventions. | Desk review, FGDs, KIIs, Case studies |
| Review coordination and communication processes and mechanisms with the stakeholders. | Desk review, FGDs, KIIs, Case studies |
| Review how the repurposed interventions is effective in response to COVID-19. | Desk review, FGDs, KIIs, Case studies |

4.2 Data analysis and Synthesis

All the process and methods discussed in the above sections helped evaluator to gather plenty of evidence about the outcomes generated by the project. For qualitative analysis, the evaluator triangulated project’s results and outcomes using a thematic approach and the content analysis method. It classified the responses and grouped similar responses together to identify the key issues and themes of concern to respondents. Quantitative data were analyzed using simple Excel tools. The primary, secondary, qualitative and quantitative data collected using the different tools and techniques were then tabulated, synthesized, and analyzed to identify conclusions. Based on the overall conclusions, a few strategic recommendations were provided for use in designing similar programs in the future.

4.3 Performance standards

The evaluator used a five-point scale against the DAC evaluation criteria to assess the performance of the project.

- Highly satisfactory (1): Project performed well overall against each of the evaluation questions.
- Satisfactory (2): Project performed well overall against the majority of the evaluation questions but there was some room for improvement.
- Moderately satisfactory (3): Project performed moderately against almost half of the evaluation questions but there was considerable room for improvement.
- Somewhat satisfactory (4): Project performed poorly overall against the majority of the evaluation questions but there were immediate and considerable steps that should have been taken for improvement.
- Not satisfactory (5): Project performed poorly in almost all the evaluation questions and there were immediate and major steps that should have been taken for improvement.

4.4 Stakeholders and their nature:
The evaluation prioritized the consultation with National and local stakeholders particularly the line Ministries including the MoWCSC, MoHP and MoFAGA, which are responsible for monitoring the project activities and support for the project implementation. The MoSD is the focal Ministry responsible for coordinating all disability-related activities within the provincial government and non-government institutions which is concerned to draft the disability policy. Besides, the local bodies including Dhangad Sub-Metropolitan, and Pokhara Metropolitan were more related to drafting gender policy, establishment of disaggregated data of persons with disabilities were consulted. The local municipalities which are responsible for providing disability ID card and social allowance were consulted viz. Bhajani Municipality in SP.

In the evaluation, NFDN and its provincial networks of SP and GP were consulted to identify and prioritize the project beneficiaries who were further consulted to collect evidence-based information. Besides, OPDs in six municipality levels in SP were also consulted as rights-holders which are engaged in local advocacy in rural municipalities. In addition, the consultation with OSRSC in GP that implemented the project and facilitated the field visit to consult with stakeholders. The rights-holders including FWDN, KOSHISH and PFPID were consulted during evaluation which implemented the repurposed activities in response to COVID-19. An effort was specifically made in evaluation to reach out to persons with disabilities from different caste/ethnic groups, for example through the NIDWAN, to understand the challenges and needs of persons with disabilities who face multiple forms of discrimination.

The concerned stakeholders were participated in this evaluation during data and information collection. They were treated as key informants. Communications were made throughout the evaluation process for their quality time, and their inputs.

Viewing the time constraint for the project evaluation and the complexity of visiting the project site particularly the rural municipalities of SP, the summarized sets of questions administered that is considered relevant to the intended interviewees.

4.5 Ethical consideration
“This evaluation conducted in accordance with the principles outlined in the UNEG ‘Ethical Guidelines for Evaluation’. The evaluator and the assigned assistant mandatorily safeguarded the rights and confidentiality of information providers, interviewees, and stakeholders through measures to ensure compliance with legal and other relevant codes overseeing collection of data and reporting on data. The evaluator also ensured security of collected information before and after the evaluation and protocols to ensure anonymity and confidentiality of sources of information where that is expected which is particularly applicable for persons with disabilities. The information and data gathered in the evaluation process were solely used for the evaluation purpose and not for other uses.
Evaluator and the assistant adhered to the highest ethical standards and signed a Code of Conduct upon acceptance of the assignment.

4.6 Background information on evaluator
Independent evaluator- Dr Birendra Raj Pokharel completed this evaluation. Dr. Pokharel is the well-recognized activist for the rights of persons with disabilities. He has been engaged in drafting the ACRPD, NPPAD and Inclusive Education Policy in Nepal who leads this evaluation. The evaluator holds over two decade long national and international experiences in evaluation, and knowledge management on disability inclusive development and human rights, engaged as expert member in the National disability direction committee under MOWCEC with extensive experiences on project/programme evaluation of different scale and scope accomplish this task. Evaluator was well acquainted of the accessibility standards (physical and ICT accessibility) and project locations and the OPDs and stakeholders which was an additional advantage to complete the task even in the difficult situation of COVID-19 pandemic.

4.7 Major limitations
In the project designing, the roles of key line ministries were found undefined and inadequate which was considered as a risk however the functioning of project advisory committee and OPD engagement facilitated to link with the policy makers. Due to the current restructuring of Nepal, an assumed risk that the local bodies may not prioritized working in disability is not found relevant because the Local Government Operation Act, 2017 granted mandatory provision of addressing disability issue in policy formation and planning. Flood and landslides linked to the monsoon season was assumed as risk and planned for mitigation measures for all activities to be implemented successfully, these measures became relevant in the pandemic since the COVID-19 was not predicted while designing the project. The foreseen risk with lack of local governance capacity, in particular for the newly elected representatives, the mitigation measures was applied by capacity development initiatives tailored to the specific needs of the local governance in conjunction with NFDN and National level OPDs. The risk assumed for delay in activities implementation and its reporting due to lack of cooperation from the concerned stakeholder wasn’t the case however the COVID-19 pandemic affected the project execution and the project had gone for no cost extension.

In the course of final evaluation, such risk factors were analyzed against the mitigation measures taken while implementing the project activities. Besides that, the risk was also associated to the evaluator while collecting primary data from the project’s beneficiaries during field evaluation due to COVID-19, but evaluator followed the safety protocols and standards of the government and collected empirical data through systematic fieldwork. Because the secondary information obtained from UN partner agencies were not fully accessible for the screen reading software, the evaluator had limitation to read the documents independently as he is a person with visual impairment. The knowledge products have not fulfilled the accessibility standards while producing them even in digital format.
5. Evaluation findings

5.1 Relevance

Responding to evaluation questions, among 21 key informants, 19 (90.5%) respondents said that the project was highly relevant to the context (Table 1). Relevance was assessed based on following points.

a. Relevant to the overall design and approaches: The evaluator’s review of the documents and consultations with project stakeholders revealed that project was relevant in terms of its overall design and approaches. As such, the Approach Paper to the 15th National Periodic Plan (2019/20-2023/24) reaffirms the GON’s commitment by adopting DID and create a conducive environment for economic and social empowerment of persons with disabilities which is governed by the Constitution, that required enabling policy environment at all levels of government, adoption of measures to address social stigmas, facilitate access to quality public services (including access to health, rehabilitation and emergency services) and guarantee social protection to persons with disabilities. Relevancy also laid on the review of policies and legal frameworks and identify the gaps and to protect rights of persons with disabilities by reforming legal framework. Besides that, government was preparing for the forthcoming National Population and Housing Census scheduled for 2021, and the urge of NFDN and its member OPDs was to adopt the questions based on the functional limitation following Washington Group Short Set of Questions on Disability (WGQ) rather than the impairment basis as per defined by ACRPD whereas the CRPD committee has provided Concluding Observation (CO) to adopt WGQ in order to establish disaggregated data of persons with disability that are comparable.

The project was relevant in a maximum extent to contribute to the policy environment and establishment of disaggregated data of persons with disabilities as expressed by a vast majority of the KIs during consultation.

b. Contributing to the policy formation and achieving disability related targets in SDG: Drafting disability policy in SP: The provincial governments are entitled for developing disability policies in line with international standards and commitments however without having full commitments and realization, of the political leaders, the policy is being hold since long time despite of being drafted in consultation of OPDs.

Inclusion of disability issue in GESI policy: The project intervening six local governments in Kailali and Doti districts viz. Dhangadi Sub-metropolitan, Bhajani Municipality, Kailari Municipality in Kailali and Dipayalsilgadhi Municipality, Shikhar Municipality and Badikedar Rural Municipality in Doti district formulated GESI policy. The OPDs got empowered and participated in the policy drafting exercise and contributed to cover disability issue which the project opened-up this opportunity of intervention thus the project was relevant in the disability inclusive GESI policy formulation.

Table 5.1. Relevancy in the GOs’ policy, commitments and OPD empowerment.

<table>
<thead>
<tr>
<th>1. To what extent the project’s activities with policy formation was relevant with the GO’s policy, international commitments towards 2030 agendas and the CRPD provisions?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total responses (n=21)</td>
</tr>
</tbody>
</table>
2. To what extent the project’s activities with establishing Disaggregated data was relevant with the GO’s policy, international commitments towards 2030 agendas and the CRPD provisions?

Total responses (n=21)

<table>
<thead>
<tr>
<th>Fully relevant</th>
<th>Partially relevant</th>
<th>To Some extent relevant</th>
<th>Not at all relevant</th>
<th>Don’t Know</th>
</tr>
</thead>
<tbody>
<tr>
<td>20 (95.2%)</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1 (4.8%)</td>
</tr>
</tbody>
</table>

3. How much the repurposed activities under COVID-19 response was relevant with the humanitarian assistance and rehabilitation services?

Total responses (n=21)

<table>
<thead>
<tr>
<th>Highly relevant</th>
<th>Relevant</th>
<th>Moderately relevant</th>
<th>Not relevant</th>
<th>Not relevant at all</th>
<th>Don’t Know</th>
</tr>
</thead>
<tbody>
<tr>
<td>19 (90.2%)</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>2 (9.5%)</td>
</tr>
</tbody>
</table>

The project was relevant in the fulfilment of Governments’ commitments towards 2030 Agenda for Sustainable Development to ‘leave no one behind’. Vast majority (85.7%) of the KII mentioned that project was fit in the country’s effort in building rehabilitation health systems as per Rehabilitation 2030 Agenda by the establishment and functioning of OSRSC since the GPH has been striving to become the model centre to demonstrate one stop rehabilitation services for health concerns of persons with disabilities in GP with the technical and financial support of WHO.

c. Addressed the needs and priorities of persons with disabilities and OPDs:

The project was aligning with the federalization process in Nepal, that fostered realization of necessity of drafting policy in SP in gender sensible manner. The capacities of both OPDs and the GOs enhanced by the series of workshop and training sessions.

Policy review: The project implemented by UNDP in partnership with Federation of Women with Disability- Nepal (FWDN) was relevant for the Empowerment of Women with Disabilities to Ensure their Rights through disability related policy review and study, capacity building of women with disabilities, orientation on self-care and stress management, organizational development and awareness raised program through media.

The project supported to enhance the capacity of women with disabilities by the intervention of UNDP in collaboration with FWDN. The legal mapping helped finding gap in legislation and designed advocacy agenda addressing such gaps in drafting disability related law and policies from the perspective of women with disabilities.
advocacy effort needs to be continued in the coming days in collaboration with the NFDN which is relevant in building synergic effect of OPDs collaboration.

The project implemented by PFPID in collaboration with UNDP was relevant in increasing access of persons with intellectual disability in local level planning and budgeting process making local government accountable towards their issues.

The project indeed helped to create an enabling environment that included the OPD and service providers, media, and Governments to coordinate at the community, local, provincial and federal levels to execute disability concerned policies and human rights instrument following CRPD with establishment of disaggregated data on persons with disabilities in SP however the task remained to open opportunity as established evidence in strengthening policy advocacy since the MoSD and Dhangadi Sub-metropolitan as well as the municipalities consulted during field visit by the evaluator were not informed or sensitized on the findings of the survey of persons with disabilities carried out in SP. The OPDs should put effort and continuous follow-up with enhanced role of NFDN SP in the province ministries for the endorsement of the disability policy. The disability focal person in Bhajani municipality expressed commitments to implement the disability inclusive provisions in the GESI policy. Likewise, the minister of social development in SP has immensely expressed commitment for taking lead to endorse the policy from the cabinet ministry within the current fiscal year, which is a successful indicator of the project and ensure relevance in maximum extent.

d. Relevancy of re-purposed activities in response to COVID-19 pandemic: The re-purposed project activities for immediate COVID-19 response were found highly relevant which was expressed by all the stakeholders interviewed.

The relevancy of one-stop approach: The project established "One-Stop Rehabilitation Service Center" (OSRSC) in Green Pastures Hospital (GPH) as an initiative in the form of developing a model centre for providing inclusive rehabilitation services for persons with disabilities. However, in the COVID-19 context, the center provided tele-rehabilitation service to persons with disabilities who required continuous rehabilitation therapy thus the OSRSC was relevant with the project objectives. The data collection applying Cobo tool was effective in identifying the needy persons for rehabilitation support and facilitated through tele rehabilitation approach.

Relevancy in sensitization of stakeholders in psychosocial trauma: The re-purposed activities were effective to sensitize members of Provincial Assembly, local government representatives, Officials of MoSD, NFDN in Province 1 on issues relating to suicide prevention and protection of persons with psychosocial disability.

The intervention was relevant in building capacity of Persons with intellectual disabilities to follow health protocol and to be protected from COVID-19 infection. The development of IEC materials in accessible format has supported enjoyment of right to information by persons with disabilities which was particularly developed and disseminated in easy-to-read format during the COVID-19 context. The project under UNDP, implemented by NIDWAN was relevant in addressing the impact of COVID-19 pandemic on the social, economic, health and other aspects of Peoples with Disabilities from underrepresented groups. The advocacy of NFDN was impactful in establishing accessible vaccination corner in the center where wheelchair user persons with disabilities could join the vaccination program independently.
Viewing aforementioned facts, it is reiterated that the re-purposed intervention addressed the emerging need of persons with disabilities in response and recovery of COVID-19 and convened interventions of 4 UN partner agencies in the project implementing area as well as the country as a whole.

5.2 Coherence

a. Interventions cohered with government policies and CRPD/ SDG: The vast majority of the stakeholders consulted (85.7%) (Table 5.2) expressed that the intervention was highly coherent with Government’s policies and fulfilment of concluding observation given by CRPD committee on the primary report of Nepal. As evidence, the MoSD in SP developed a draft Policy on the rights of Persons with Disabilities in line with CRPD and ACRPD. Besides, the project facilitated to establish database of age, sex, disability and ethnic-disaggregated data of persons with disability and rehabilitation interventions which is relevant in establishing evidence based advocacy initiatives; however the dissemination of the report and encouragement of the available data of persons with disabilities should be planned well in conjunction with OPDs and that support the fulfilment of the concluding observation of CRPD committee, applying WGQ for the disability related survey and establishment of disaggregated data. In this instant, the survey of persons with disabilities in SP applying WGQ was not owned by the Government as such the National population and housing census 2021 administered the questionnaire following the impairment-based definition given by ACRPD.

Table 5.2. Response of stakeholders concerning coherent of the project.

<table>
<thead>
<tr>
<th>1. To what extent the project’s activities were coherent with the GO’s policy, international commitments towards 2030 agendas and the CRPD provisions?</th>
<th>Total responses (n=21)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fully</td>
<td>Partially</td>
</tr>
<tr>
<td>18 (85.7%)</td>
<td>2 (9.5%)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. How much the repurposed activities under COVID-19 response is coherent with the humanitarian assistance and health services of the Government?</th>
<th>Total responses (n=21)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Highly coherent</td>
<td>Coherent</td>
</tr>
<tr>
<td>18 (85.7%)</td>
<td>1 (4.8%)</td>
</tr>
</tbody>
</table>

The advocacy of OPDs under the umbrella of NFDN was coherent with the CRPD principles of OPD engagement with various ministries, departments along with the representatives from the office of Chief Minister to build ownership on the drafted policy. OPDs have participated equally and made contributions to draft the disability related policy following the principles of "leaving no one behind" in SP. The drafted policy has addressed the core value of Goals 1, 4, 5, 8, 10, 11, and 17. OPDs are engaged in decision-making and development process in SP particularly in the
Dhangadi sub-metropolitan which is within the value of concluding observation of CRPD committee on the country report of Nepal in 2018. The project addressed the psychosocial wellbeing of those experiencing mental health problems and those under medication that support the equal recognition before law, article 12 of CRPD.

**b. Interventions exhibited internal coherence with their synergies and interlinkages:** The data and evidence collected during the evaluation consultations revealed that, together, project interventions have created synergies and interlinkages among relevant stakeholders. It was said that coordination with OPDs is effective which is coherent in the OPD engagement following CRPD principles of social participation particularly the intervention under UNDP partnership, was coherent with the internal objectives of the National level OPDs viz. NFDN, FWDN, KOSHISH, PFPID and NIDWAN.

c. **Interventions exhibited external coherence with UN partner agencies and UNDAF:**

The project was coherent on the (UNDAF) 2018-2022 that supports the Government of Nepal’s vision of living up to the promise of Agenda 2030 for Sustainable Development to ‘leave no one behind’.

The learning from re-purposed activities of COVID 19 response was coherent for policy adjustment in existing emergency response framework, and into the health systems for normal times in line with” Rehabilitation 2030: A Call for Action⁵. The engagement of four UN partner agencies was relevant as their long-term goals and strategies were coherent with the project’s overall goals and strategies for mainstreaming disability in development cooperation, however the selection of implementing partners amongst NGOs could have been prioritized based on their experiences working with OPDs and engaging in decision making and delivering active roles in the project execution. For an example, the survey for establishing disaggregated data collection and reporting could have engaged local OPDs and the NFDN provincial network in SP to promote their knowledge on the output of the survey and continue use of the data for further advocacy plan. There was a great deal of coherence between the project’s overall goals and its implementing partners working in GESI; however the disability inclusiveness has been taken only from the service approach through partnership collaboration of UN Women with JURI rather it is silent in participatory approach that contrast to article 29 of CRPD that allows OPDs to be engaged, capacitated and to lead the disability issue for the promotion of political and social participation of persons with disabilities. For instant, the partner NGO JURI could have opened up the representation of persons with disabilities in the decision-making level and encourage the newly established OPDs to be accommodated within the network of NFDN.

d. **Interventions suited the context of the COVID-19 pandemic:**

The re-purposed activities for providing humanitarian support were coherent with Article 11 of UNCRPD, for the protection and safety of persons with disabilities in situation of risk and humanitarian emergencies and Article 28 of adequate standard of living and social protection of persons with disabilities. The project has reach diverse group of beneficiaries and helped to open a discourse on the use of intersectional

---

approach within UN partner agencies and OPDs. The efforts also followed the CO of CRPD committee on Nepal’s primary report 2018.

The establishment and function of OSRSC in GPH, Pokhara under Aawaaz project has promoted realization of right to health and rehabilitation of persons with disabilities by strengthening a barrier free physical, information and services access to health and rehabilitation need of persons with disabilities which is within the scope of CRPD article 25 and 26 as well as goal 3 of the 2030 agenda of "leaving no one behind".

The OSRSC is indeed facilitating for tertiary, secondary and primary health care facilities including physical rehabilitation and effective in providing rehabilitation services to persons with disabilities, it has yet to achieve the objectives of mainstream disability in essential health services applying total accessibility measures in the OSRSC and apply holistic approach of rehabilitation for the persons with disabilities beyond the classification of persons with physical disability.

5.3 Effectiveness

The project was effective, as is illustrated below. The views of implementing partners, local level Government officers, stakeholders and field observation revealed that project’s programmatic approach and process were very effective. Out of the total key respondents, 90.5% said that the project was highly effective whereas 9.5% opined that its activities are effective (table 5.4).

Table 5.4. Effectiveness of the project in ensuring project objectives and output.

<table>
<thead>
<tr>
<th>1. How much the Aawaaz project activities were effective in achieving project objectives and output?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total responses (n=21)</td>
</tr>
<tr>
<td>Fully                                      Partially</td>
</tr>
<tr>
<td>19 (90.5%)                                  2 (9.5%)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. How much the re-purposed activities effective in supporting persons with disabilities in COVID-19 pandemic and providing rehabilitation services?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total responses (n=21)</td>
</tr>
<tr>
<td>Highly effective</td>
</tr>
<tr>
<td>18 (85.7%)                                  1 (4.8%)</td>
</tr>
</tbody>
</table>

a. Delivery of projects’ activities in terms of quality, quantity and timing: Though the project faced several challenges during its implementation, its effective approach helped it to deliver the majority of its activities on time without compromising quality.

The significant achievement of the project with establishment of OSRSC has showcased remarkable contribution in providing holistic rehabilitation services to persons with disabilities. The site observation during field visit found that the refurbishment of the required structures for OSRSC in INF, GPH has ensured the
wheelchair access to reception and pharmacy counter, laboratory and X-ray room that supported for independent mobility of persons using wheelchair. The customized wheelchair workshop and refurbished basketball court with ramps and floor smoothness provided accessibility feature in the court and that promotes the provision of CRPD article 30 with rights to sports and recreational activities of persons with disabilities.

b. Strategies and tools used in programme implementation: The integration of disability programme with larger sub-national governance initiative helped to leverage the impact of the programme towards gender and disability inclusive local governance. The OPDs in six municipalities in SP are enthusiastic to demand accountability of implementation of policy and allocation of budget in disability sector from local GOs. As such the evidenced of commitments of local GOs has been verified by the efforts of Shikhar municipality installed digital machine to print and distribute disability ID card to persons with disabilities which is also being replicated in Bhajani municipality from the current fiscal year, revealed the disability focal person in the Municipality during consultation. Besides, amongst 61 targeted districts for COVID-19 related activities, NFDN could mapped out the district stakeholders only in 59 districts since the OPDs in Manang and Mustang districts are out of reach and need the further intervention of NFDN to coordinate the self-help groups in these districts. The project has been effective in supporting to strengthen participation and representations of persons with disabilities in local planning and governance process however the provision of coordination committee in province and local level through ACRPD has not been materialized in SP since it is functional in GP. Since the project supported municipal officials in responding to the impacts of COVID-19, it was able to build a great deal of trust as such the Pokhara Metropolitan has allocated an amount of NPR. 1 Million (USD 8350) to GPH through INF for providing assistive devices and support services in OSRSC for persons with disabilities. All the municipality officials interviewed said that the project was ‘a friend indeed the friend in need, when there was great need of humanitarian assistance to persons with disabilities during COVID-19 pandemic. Pokhara Metropolitan authorities admired the project’s support to address COVID-19 crises, which including relief package and tele-rehabilitation services to persons with disabilities. MoSD in SP had no dedicated staff at the disability help desk, in consequence of the advocacy of NFDN SP office, the capacity of that desk was enhanced by assigning SLI by the ministry with the resource of Government. By the project’s continuous support and advocacy of OPDs, the Dhangadi sub-Metropolitan also established resource center and help desk by assigning relevant staff and is now effective in responding to victim persons with disabilities with trained counselors, provided support to 71 victim persons with disabilities of Human Rights violence during pandemic and lockdown. Likewise, the Shikhar municipality in SP also formed help desk and engaged person with disability to facilitate the disability related support services in the municipality which is exemplary effort of the newly formed OPD in the local level. Due to mobility restriction in COVID-19 pandemic, some project activities were re-purposed and upon approval from UNPRPD secretariat, implemented effectively.

c. Factors that contribute to achieving or not achieving the project's intended results: The re-purposed activity under COVID-19 response has been effective in providing access of healthcare services through tele-rehab program under OSRSC. As such, the project has been effective in providing technical support to the OPDs to make intervention for Disability-inclusive COVID-19 Response”, through partnership
with NFDN and other like-minded partners in close consultation, cooperation and
guidance from Leprosy Control and Disability Management Division/LCDMS (disability
focal point of MoHP) and providing essential Health & Rehabilitation Services that
benefitted 275 Persons with Disabilities based on the progress report of OPDs.

The OPDs have adopted evidence-based advocacy strategy to ensure that the rights
of persons with disability are at the top of the agenda of local GOs and allocated annual
budgets. and strengthening partnership. KOSHISH, in partnership with UN Women
and UNDP intervene for suicide prevention in Sub-National level which is effective for
sensitizing policy makers and mitigating this challenge in COVID-19 pandemic.

The use of knowledge products has helped to understand disability inclusive
development and thereby to add value to the project. Stakeholders were able to
understand importance of accessibility features in the various types of IEC materials
that the project produced. The materials were developed through implementing
partner OPDs following their own theme which is align to the article 9 of CRPD. The
accessible materials developed during the first wave of the pandemic response under
the project. The consulting group revealed that approximately 78475 people including
persons with disabilities, their families and concerned stakeholders were sensitized to
take care of themselves. The video series was effective tools to facilitate the tele
rehabilitation with home care interventions during the pandemic.

Despite of such innovative approach of applying online tools by the project, the Web
Contain Accessibility Guideline (WCAG) has not been applied to ensure the digital
accessibility for an example, there was no caption in YouTube documentary for hard
of hearing persons and audio description for visual impaired persons.

This evaluation noticed some opportunities the project missed, could have generated
better results and greater effectiveness. The project has achieved one of its objectives
to collect high-quality data on different issues relating to persons with disabilities in SP,
however the use of such data by local GOs is not found so that filling the gap of data
scarcity couldn't be taken into account. As such neither MOWCEC nor MoSD of SP
are informed about the existence of the survey report. The desegregated database of
persons with disabilities establishment was a prime focus of NFDN however that
couldn't be utilized while drafting the provincial disability policy in SP” said NFDN SP
representative.

d. Monitoring and review arrangements: The project’s M&E approach and
mechanisms were instrumental in its achieving good results. The project has
showcased the effectiveness of the multi-stakeholder approach, including the ways in
which the joint UN action has been complementary and the role and contributions of
partners and stakeholders including NFDN and government has been taken with high
priority. The meeting minutes of National level project advisory committee reflects its
active role in monitoring the progress of project and provided further guidance for the
better implementation of the project. Evaluation sheets were developed applying
Google forms for the pre and post-evaluation of training organized by implementing
partner OPDs.

e. Incorporation of lessons and feedback in the project’s design and
implementation: Evidence gathered during the review phase confirmed that the
project had used earlier good practices in the disability inclusive planning and
protection of human rights of persons with disabilities and major learning from the
practices. Based on the media coverage⁶, the project is effective in building awareness on violence against PERSONS WITH INTELLECTUAL DISABILITIES and making government authorities sensible on the violence encountered by them whereas the project is effective in developing awareness among general population on the issue of Suicide through IEC materials, Podcast and Informational Videos.

The project implementation also achieved unintended positive results which is mostly associated with the re-purposed activities. The facility access audit under COVID-19 response established protocol of essential standards for disability inclusion and rehabilitation for persons with disabilities which is utilized immensely for providing tele-rehabilitation services to persons with disabilities. Besides that, the project supported OPDs to collect data on the socio-economic impacts of COVID-19 on persons with disabilities with severe conditions which was used by local GOs to prioritize the neediest persons with disabilities to cover in the humanitarian support scheme of the GOs.

The Shikhar municipality installed digital machine to print and distribute disability ID card to persons with disabilities which was not originally planned however the result is welcomed by other municipalities. For instant, the officer of Bhajani municipality shared to the evaluator that the same practice is being replicated there from the current fiscal year.

f. Enhance the capacity of local governments and under-representative groups in disability: The meaningful advocacy of NFDN at the federal level and the provincial level through the sub cluster was effective in persuading federal Ministry of Health and Population, Department of Health Services, take to issue a circular for prioritizing severe and profound persons with disabilities in vaccination against COVID 19.

g. Assessment of specific objectives and their indicators:

The expected outcome of the project was “Policy environment enables Persons with disabilities claim their human rights and access responsive and quality services in Province 7” which follows a vision of ensuring rights of persons with disabilities through enhanced advocacy capacity of OPDs for fulfillment of state commitments towards National and International human rights framework particularly CRPD and the disability inclusive targets in the 2030 agenda of SDG. The project result is heading towards ensuring quality of life of persons with disabilities with full and effective participation in decision making in SP. The Project has been able to contribute towards establishing Disaggregated data on persons with disabilities in SP and the Ministry of Social Development has been able to develop a draft Policy on the rights of Persons with Disabilities in active engagement of persons with disabilities. The review put a curiosity about the level of fulfillment of objectives by the project intervention whereas the use of established data of persons with disabilities and the endorsement of the disability policy is uncertain. Therefore, it is relevant to make an assessment base on the achievement of specific output so that the project result is mapped. The review of three anticipated output of the project and the output of the repurposed activities in response to COVID-19 are presented below:

https://hamromat.com/2021/08/05/30745.html https://ourbiratnagar.net/2021/08/147961
**i. Assessment of output 1 and its indicators:** Output 1.1 High quality disaggregated data on persons with disabilities available and in use.

<table>
<thead>
<tr>
<th>Parameter</th>
<th>Baseline</th>
<th>End-line</th>
</tr>
</thead>
<tbody>
<tr>
<td>Establishing Disaggregated data of persons with disabilities in SP for the policy formation and planning.</td>
<td>No disaggregated data on persons with disabilities available in SP</td>
<td>Disaggregated data on persons with disabilities available in SP</td>
</tr>
<tr>
<td>Disaggregated data on persons with disabilities is disseminated to relevant GOs and OPDs for use.</td>
<td>Expected to disseminate and inform the stakeholders.</td>
<td>The relevant GOs and the OPDs are not much aware about the availability of disaggregated data on persons with disabilities in SP</td>
</tr>
<tr>
<td>Disaggregated data on persons with disabilities is used by GOs and OPDs in SP.</td>
<td>Expected to be used</td>
<td>The relevant GOs and the OPDs have not using the disaggregated data on persons with disabilities.</td>
</tr>
</tbody>
</table>

Source: project documents and interview with KII.

**ii. Assessment of results 2 and its indicators:** Output 1.2: Capacity of Disabled Person’s Organizations strengthened to lead policy advocacy, demand accountability for quality services, and address stigma and discrimination.

<table>
<thead>
<tr>
<th>Parameter</th>
<th>Baseline</th>
<th>End-line</th>
</tr>
</thead>
<tbody>
<tr>
<td>Were OPDs invited to consult in drafting the disability policy?</td>
<td>OPDs were not much engaged in policy drafting.</td>
<td>NFDN and its provincial network are engaged in policy drafting as assigned by Government, and the engagement of OPDs in taskforce for drafting disability policy is facilitated by the MoSD in SP.</td>
</tr>
<tr>
<td>Project built capacity of OPDs to fight against multiple forms of discrimination.</td>
<td>Advocacy skills of OPDs was minimal, low level of knowledge about CRPD and SDG targets on disability.</td>
<td>National level OPDs are active in advocacy, strengthen network in local levels, acquired knowledge on Rights, CRPD provisions and SDG targets, implementing advocacy strategy, able to lead the issue of under-representative groups on disability. Still the OPDs in municipalities levels have low capacity, less knowledge and less understanding of rights-based approach, rather relied on welfare-based services.</td>
</tr>
<tr>
<td>Advocacy efforts of OPDs improved questions on disability in the Census 2021 applying WGQ.</td>
<td>Census 2011 had applied impairment-based definition on disability.</td>
<td>Census 2021 continued applying impairment-based definition on disability following disability classification under ACRPD 2017, The WGQ was not applied which was initially accommodated in the pilot census.</td>
</tr>
</tbody>
</table>
Are OPDs effective in advocating for budget allocation in disability in local municipalities?

The local municipalities allocate budget for disability sector in tokenistic support

The budget allocation in disability sector in local municipalities is remarkably increased, an average of USD 6000 annually.

Source: project documents and KII.

iii. Assessment of results 3 and its indicators: Output 1.3 Draft Policy on Persons with Disabilities at the Province 7 in line with international standards.

<table>
<thead>
<tr>
<th>Parameter</th>
<th>Baseline</th>
<th>End-line</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disability policies drafted in SP</td>
<td>No disability policy available in SP</td>
<td>The MoSD of SP drafted Disability policies in close consultation with OPDs in leading role of NFDN, opened for feedback to general public and concerned stakeholders, planning to endorse from the cabinet ministries within the FY 2021/22 (Within June 2022)</td>
</tr>
<tr>
<td>GESI policy of local Government include concerns of persons with disabilities</td>
<td>The local GESI are in the drafting process in Municipalities</td>
<td>The GESI policy in 6 local bodies included concerns of women and girls with disabilities and under representative groups.</td>
</tr>
<tr>
<td>The policy on persons with disabilities replicated in other provinces</td>
<td>No disability policy in SP available.</td>
<td>The disability policy drafting exercise in SP influenced to other provinces and GP and the province one are exercising to draft the disability policy.</td>
</tr>
<tr>
<td>Identified the perspectives of women and girls with disabilities in existing legal framework in Nepal</td>
<td>No comprehensive mapping of latest legislation from the perspectives of women and girls with disabilities.</td>
<td>Established report of comprehensive mapping of latest legislation from the perspectives of women and girls with disabilities.</td>
</tr>
<tr>
<td>Establishment of module Rehabilitation structure in form of OSRSC in GPH.</td>
<td>INF has established and functioning GPH for providing rehabilitation services to persons with disabilities.</td>
<td>OSRSC established, made accessible with wheelchair workshop and accessible wheelchair basketball following Universal health services.</td>
</tr>
<tr>
<td>The re-purposed intervention addresses the emerging need of persons with</td>
<td>No COVID-19 pandemic expected, repurposed activities approved by UNPRPD secretariat and no cost extension.</td>
<td>Persons with disabilities are enjoying tele-rehabilitation service even in lockdown, persons with disabilities are enjoying humanitarian assistance and safeguard with health protocol/equipment, psychosocial wellbeing</td>
</tr>
</tbody>
</table>
disabilities in response and recovery of COVID-19 and suicide prevention, developed accessible IEC materials both in easy reading text for persons with intellectual disability, established district level help desk in response, prioritized persons with disabilities in Vaccination, accessible digital materials developed, disseminated the rapid assessment reports of NFDN and NIDWAN amongst under-representative groups)

Source: project documents and reports.

5.4 Efficiency
The desk mining and consultation with corresponding representatives of UN partner agencies revealed that the fund flow through Grant Agreement was efficient which provided flexibility to OPDs to implement the project activities based on the immediate need particularly supporting OPDs in six municipalities of SP. The Programme cost is efficient in achieving expected results though the consulting OPDs frankly highlighted that the no cost for regular staff and small amount of operational cost put them in low performance since the cost for transportation for participating OPDs was insufficiently allocated for those require accessible vehicle. The resource needs for the activation of the project advisory committee in federal and SP was not allocated thus the engagement of relevant entities in the committee was not fully functional.

a. Aligning the project activities into project result: Responding to questions about the alignment of project’s activities with expected results, 85.7% of informants said that activities were fully aligned with the expected results and 4.8% said partially aligned. Similarly, in terms of the efficiency of building OPDs’ capacity through funding partnership, (71.4% key informants rated the project as highly efficient and 19% said efficient whereas 9.5% have no idea (refer Table 5.3). Evaluation of efficiency was made in the following heads:

<table>
<thead>
<tr>
<th>Table 5.3: Key informant's responses on efficiency</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. To what extent the project’s activities were aligned with the expected results?</td>
</tr>
<tr>
<td>Total responses (n=21)</td>
</tr>
<tr>
<td>Fully</td>
</tr>
<tr>
<td>18 (85.7%)</td>
</tr>
<tr>
<td>2. How much the project activities is efficient in engaging OPD as funding partner and building capacity in making intervention for policy change and establishing desegregated data?</td>
</tr>
<tr>
<td>Total responses (n=21)</td>
</tr>
<tr>
<td>Highly Efficient</td>
</tr>
<tr>
<td>15 (71.4%)</td>
</tr>
</tbody>
</table>
The resources were allocated and managed efficiently for the implementation of the activities as found from the review of the reports of implementing OPDs; however, the financial management processes and procedures affected programme implementation which was followed by the financial procedure of the partner organizations as per the concerns of participating OPDs.

b. **Timeliness of the project’s achievement of its results:** Evidence gathered during the evaluation consultations revealed that the project successfully utilized its human, material and financial resources to achieve results. Good coordination and collaboration among the UN partner agencies, Ministries, implementing partners, implementing OPDs, project province GOs, municipalities and wards, and PAC in GP helped to achieve results in a timely fashion despite the impacts of the pandemic. Project’s records revealed that around 20% of project activities were completed significantly before the planned date in 2019, almost 50% by the planned date despite of COVID-19 pandemic and restriction and 30% activities during the four months' extension period. Delays were attributed to the pandemic, the fact that there were repurposed activities carried out in the concluding phase of the project period within the no-cost extension period. Consultations with project staff revealed that the types of activities, the expertise required, and the human resources should be made available and the time were all very tightly matched. The number of activities and the project’s tenure were not well correlated. The implementing OPDs managed human resources logically and efficiently. In the lead role of Project Coordinator in INF, the program coordinator effectively supported communication, knowledge management and making disability inclusion visible and provided technical backstopping for structural and non-structural activities within the rehabilitation management through OSRSC. The PAC in GP admired the role of OPDs by strengthening advocacy to accommodate the disability inclusion in the GESI policy of Pokhara Metropolitan city which is also observed in SP while visiting to the Bhajani municipality. The OPDs were effective in establishing data of needy persons with disabilities during COVID-19 response and reform plan, also effectively advocating to municipal staff for disability inclusive planning. Project stakeholders in GP acknowledged the high quality and prompt provision of tele-rehab even though they were not able to physically presence in the OSRSC due to the pandemic.

The added value of the Aawaaz project is that the MoHP vaccinated around 86,000 persons with disabilities comprising 39,500 women with disabilities according to the project reports, with priority in Governments’ vaccine scheme as urged by NFDN & partners. Since the OPDs advocated to established dedicated vaccine corners for persons with disabilities both at Dhangadi (SP) and Pokhara (GP) which is highly valued more than money.

Consultations with stakeholders revealed that the project faced several challenges during implementation such as the OPDs in the consultation meeting expressed their minimized role in the overall process of disability survey. The use of disaggregated data on gender and disability has been one of the output of the project however most of the local GOs have no information about the present report as such they are awaiting for the Census report of 2021.

c. **Implementation strategy and cost effectiveness:** The project’s approach and strategies were efficient because they were executed through the partner OPDs that they ensured (i) the participation of OPDs in policy drafting and data collection during COVID-19 response activities. With limited funding available through the project, WHO
was able to bring together like-minded partners and programmes to attain the planned objective/outcome at the federal and provincial level. Linkages with partners like HI, ICRC and INF who are working in the field of disability and rehabilitation enabled to work towards common objective by pooling in and sharing of resources.

The project’s fund-flow mechanism contributed to the effectiveness of the project. The information provided by partner agencies revealed that funds flowed from UNPRPD to the implementing partners on time. UNDP received a grant of USD 176,505 from UNPRPD and expended USD 175,955. Expenditure includes an amount of USD 85,663 through implementing OPD partners viz. NFDN, KOSHISH, FWDN, PFPID and NIDWAN. Out of the UNPRPD grant of USD 150,000 to WHO, USD 43,359.04 was expended through NFDN and USD 4865 channeled to OPDs (as a third party) through INF/GPH, USD 101,776 was utilized by INF and NGO partners. UN Women administered USD 100,000 under UNPRPD grant, out of that, USD 70,309 was expend through implementing partners. The NGO partner viz. JURI implemented USD 48,678 whereas KOSHISH, a OPD of self-help Group of Psychosocial survivors, implemented USD 19,255. Beyond that, OPDs in SP were granted USD 9730 (NPR. 100,000 each of 10 OPDs) through JURI. Likewise, UNFPA expended USD 100,000, out of that, USD 93,569 through NGO partners and USD 6431 through OPDs.

The project achieved value for money by mobilizing resources strategically, sharing costs equitably, and employing a competitive procurement process. The project allocated only 5% as management costs to implementing partners (excluding the costs of human resources and office operation). The co-funding of UN partner agencies not only increased the efficiency of resource use but also fostered local ownership of the project. Where applicable, leaders of partner OPDs and the relevant Government officers were used as resource persons in various capacity-building trainings, a practice which helped to build new connections between local OPDs and municipality officials. In order to avoid program duplication and foster managerial efficiency, the project maintained a good relationship with Government officials, service delivering organizations and development actors. The consulting OPDs in SP revealed that the project rants of NPR. 100,000 provided in response to emerging need of OPDs in the COVID-19, was utilized for the institutional capacity building with payment of renewal cost in the Government, office establishment and meeting cost. The evaluator perceives the challenges in sustainability of the OPD without linking with the Government grant system. In GP, the Disability Coordination Committee (a 13 membered committee under ACRPD provision) has covered multi-sectorial representation to coordinate the effective implementation of the project activities in GP which is entitled for monitoring of the disability related programmes. The allocation of NPR. 1 million to the INF/ GPH for the distribution of assistive devices and quality rehabilitation services to persons with disabilities is evidence of positive response of MoSD in GP.

The project has initiated discourse of sustainable solution by promoting participation of Persons with intellectual disabilities and their families at the local level planning and budgeting process which helped the municipalities to be accountable towards rights of persons with intellectual disabilities. The efficiency of the project intervention is showcased by the continuous follow-up of self-advocates, Nepalgunj sub metropolitan allocated NPR 200,000 (USD 1660) for the issues of persons with disability. Likewise, NPR. 100,000 (USD 830) has been allocated by Tokha Municipality of Kathmandu district and the parents of person with intellectual disability has been assigned as an
advisor of “Disability coordination Committee”. Likewise, Belaka municipality has allocated NPR. 200,000 (USD 1660) for the assistive devices and health and disability card distribution camp for persons with disability as a result of the advocacy conducted by parents and Persons with intellectual disabilities, followed by Triyuga Municipality by allocating NPR. 700,000 for programs related to persons with disability. In SP, the six municipalities allocated an average of USD 7500 each for the assistive devices, capacity building training and disability ID card management.

**d. Allocation of resources to achieve outcomes and outputs:** The project allocated resources such as funds and expertise strategically to achieve its anticipated results. Only the existing staff of the implementing partner was assigned, there was no additional staff recruitment under the project. As the project’s human resources had several years of experience in policy advocacy and were very familiar with disability inclusive issues, the project had good results in providing policy support to province government in active engagement of experienced OPDs. The project’s internal planning was also realistic in that all its majority of the activities were completed within the timeframe laid out by UNPRPD secretariat and all were of high quality. The repurposed activities under COVID-19 response having a no-cost extension was also logical given the impacts of the pandemic as the project had struggled to act as well as evaluated the demand of persons with disabilities with humanitarian assistance package and tele-rehab services. The project provided repurposed activities and budgets to the implementing partner to meet the objectives in the pandemic context.

The project intervention contributed to build on existing programmes by four partner UN agencies by designing the implementation plan in conjunction of GESI component. The Project intervention is also scaled up providing additional funding beyond Aawaaz project such as the WHO has utilized around USD 75000 for strengthening the health services and rehabilitation services through the OSRSC and OPDs. This intervention showcases that UN partner organizations are committed to promote disability friendly environment that program and project level that promotes human rights of persons with disabilities and access services.

**5.5 Sustainability**

While it may be too early to claim for sure that the project is sustainable, the following initiatives made a considerable contribution to its likely sustainability. Of the total KII interviewed during this evaluation process, 71.4% KII during interview expressed that the structures either the physical structure of OSRSC in GPH or the new OPDs in SP as physical structure and the policy framework, committees and tools are instrumental mechanism created by the project will be fully maintained, and (66.7%) expressed that project’s outcomes will be sustained after the project (Table 5.5).

Table 5.5: Key informant's responses with respect to the sustainability of schemes

<table>
<thead>
<tr>
<th>To what extent is it likely that the structures (physical/ mechanism) created by the project will be maintained after the programme?</th>
<th>Total responses (n=21)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Will be fully maintained</td>
<td>Maintained to some extent</td>
</tr>
<tr>
<td>15 (71.4%)</td>
<td>4 (19%)</td>
</tr>
</tbody>
</table>
What is your assessment of the overall sustainability of the project outcomes after the project?

Total responses (n=21)

<table>
<thead>
<tr>
<th>Fully sustainable</th>
<th>Partially sustainable</th>
<th>Will not be sustained</th>
<th>Don’t know</th>
</tr>
</thead>
<tbody>
<tr>
<td>14 (66.7%)</td>
<td>4 (19%)</td>
<td>0</td>
<td>3 (14.2%)</td>
</tr>
</tbody>
</table>

**a. Sustaining the benefits of the projects:** The Government in Federal level, provincial and local level are aware of the disability-inclusion concept which drew attention of the issue of disability-inclusive concept among the provincial ministers, high-level bureaucrats, local level leaderships and the partners which is a major prospect of sustainability of the project

i. **Policy instruments are in final shape:** The drafting of disability policy in SP is a major sustainable impact of the project realizing within the Government mechanism.

ii. **Disability issues have been integrated in the GESI:** Besides the drafting of disability specific policy in SP, the project intervention supported OPDs to make intervention in drafting the GESI policy which was endorsed by six local GOs, that has covered the issue of persons with disabilities as one of the target groups which is a sustainable solution for the rights of women with disabilities in the community.

iii. **Knowledge products are in place for policy advocacy:** The project’s key components have been establishing disaggregated data of persons with disabilities in SP. OPDs are equipped with skills and knowledge about advocacy however the practice is yet to be strengthen.: Evidence gathered during interviews revealed that the project’s benefits are likely to be sustained and continue even after the project is complete. The capacities of both OPDs and the GOs enhanced by the series of workshop and training sessions in SP that include consultation meeting with representatives of various ministries, departments along with the representatives from the office of Chief Minister as well as advocacy dialogues with province parliamentarians. The project has built capacity of 10 OPDs in the project area of SP to facilitate the services to persons with disabilities in coordination with local GOs. Implementing partners both NGO and OPDs are locally based so they can leverage resources from local governments. One of the beauties of the project is that each partner is well linked with project municipality its, connected for several years of experience in the disability inclusive development plan, and has built excellent rapport with municipal stakeholders particularly the provincial network of NFDN, this institutional capital ensures leverage resources from the concerned municipality and thereby promote sustainability. As such the Networking OPD should support the local OPDs bringing within the network, mentoring, and providing advice required to sustain the project’s initiatives and leverage external resources for disability service.

iv. **The capacities strengthened of women led OPDs:** The KII from the municipalities expressed that local government build on the project learning on gender and disability inclusion and work towards gender and disability response governance by the accommodation within the GESI policy, is considered a sustainable solution for disability inclusion in annual program of local Governments. The capacity building of the newly established federation of women with disabilities is relevant by development of the five years’ strategy plan and website. The project has ensured a great impact by mobilizing the trained Woman
peer counselors at the district level who addressed psycho-social issues related to women and girls with disabilities during the pandemic including gender-based violence. Based on the project report of KOSHISH, there are 35 persons with mental health conditions comprising 22 Female in coordination with Biratnagar Metropolitan City were benefitted. Knowledge transformation on Gender, Disability and social inclusion for women with disabilities is another important aspect of sustainability of the project result. Advancing use of digital technology and promoting accessible Information and communication technology (ICT) for women with disabilities is the recent learning from the COVID-19 pandemic.

**b. Plans or approaches for the continuation of project’s initiatives:** The OSRSC is being institutionalized to be functional in a sustainable way so that the practice of comprehensive rehabilitation package are made available in the province, as such the GP Government has allocated grant for such purpose. The six municipalities in SP have developed plans for or approaches to continuing the project’s good practices with their own budgets.

**c. Replication of initiatives at the local level:** The project effectively facilitated municipalities and wards in replicating its initiatives. It developed a synergy with municipalities and the OPDs to promote the continuation of the project’s good practice. For instance, Dipayalsilgadhi municipality has prioritized data collection of persons with disabilities in the fiscal year 2021/22. Learning from the changes from the project also created the conditions for scalability of results and successful approaches. The process of drafting disability policy replicated in other provinces, for instance, the GP government has also drafted the disability policy and has a plan to endorse from the cabinet ministry by the end of current FY (2021/2022, according to the GESI officer of the MoSD of GP).

**d. Potential new areas of work and innovative measures for sustaining the results:** The development and strengthening of disaggregated data of persons with disabilities in SP, drafting of disability policy documents, allocation of local budget by municipalities and wards for specific DID-related activities and establishment and functioning of OSRSC are the major new area of work through this project.

**e. Document and share lessons learned:** The project successfully documented key lessons generated during implementation and sharing with project stakeholders. The provincial media committed to explore disability issues as wider level in the province and support work of OPDs in SP which is considered as a part of sustainability of the advocacy initiatives of OPDs in SP (Newson Nepali language can be access here) 7.

5.6 Impacts

The following qualitative evidence of effects and impacts was gathered during the evaluation process.

**a. Mainstreaming disability in policy and program:** The advocacy effort of NFDN brought the Secretary, Women Development Officer and Legal Officer of MoSD by signing the concept paper for the development of disability policy that guaranteed the commitments of the Government towards rights of persons with disabilities and

---

recognize OPD engagement in decision making process which was a result-based advocacy of NFDN. The hospital disaster preparedness and response plan (HDPR) has covered the health issue of persons with disabilities. The initiatives have been taken for developing a rehabilitation strategic plan in line with WHO Global initiative - Rehab 2030 which is being used as basis of integrating rehabilitation services into health systems in the federal government structure. The drafted Policy on the rights of Persons with Disabilities in SP follows CRPD principles and captured the essence of ACRPD. The drafted legislation on in SP is gender-responsive through a range of interlinked in line with the Constitution of Nepal, and the provision the CRPD. The project has built synergy with UNDAF 2018-2022 that supports the vision of living up to the promise of Agenda 2030 for Sustainable Development ‘leaving no one behind’.

b. Adoption of WGQ in disability survey: The Data gap of persons with disabilities in SP is mitigated, however the information dissemination has to be collectively done by the GOs and the OPDs together for ensuring the proper use of available data of persons with disabilities, helping policy and program planning and formulation. The immediate purpose of the project to use the data to inform the development of a Disability Policy in SP which was overlooked by the policy makers to address the concerns of persons with disabilities. in data gap while developing policy. According to the concerned authority in the province ministry, “The report was not transferred to my desk while I started working for the policy drafting process, still the draft is in decision making process, it would be relevant if the report is shared...”. It is required to share the report and disseminate widely for program planning and advocacy purpose. Thus, the disaggregated data on persons with disabilities has been established in SP that opened opportunity for establishing evidence in strengthening policy advocacy of OPDs. Dipayal Silgadhi municipality has prioritized data collection of persons with disabilities in the fiscal year 2021/22 that is one of the project impacts to make the local GOs following the CO, the success in this municipality is yet to transformed into reality though.

c. Allocation of local fund from municipalities: The annual plans and budgets of four municipalities covered with dedicated grant of NPR 2,330,000 (USD 19,000 for persons with disabilities in 2020 which was continued in 2021 as well. These funds were allocated in six municipalities for the distribution of assistive devices to persons with disabilities. The project has built up the engagement of OPDs to enhanced advocacy on gender and disability responsive planning and budgeting in project municipalities of Kailali and Doti where an increase of 45 percent in the budget for persons with disabilities was reported in five local levels.

d. Persons with disabilities are rendering Government services: Persons with disabilities are enjoying Government services by the support of help desk established in Dhangadi Sub-Metropolitan city. Deaf persons are enjoying rights to communication following article 21 of CRPD through Sign Language Interpretation (SLI) service and accessing the local government services. Persons with disabilities are easily obtaining disability ID card from the municipality that installed digital machine to print and distribute disability ID card.

e. Increased synergy in rehabilitation services among Government and GPH: The disability-inclusion and rehabilitation has been instrumental for mitigating stress of women with disabilities in COVID-19 and built self-care. OSRSC is instrumental to bring a direct impact on health and rehabilitation of persons with disabilities including
women and girls with disabilities. The data collection applying Cobo tool has been applied by OPDs in identifying the Persons with disabilities who are in need.

f. Increased confidence about advocacy initiatives: It is the project’s efforts, OPDs claimed that they would be able to manage upcoming advocacy initiatives using the knowledge and skills they had learned. Such confidence was derived from project interventions such as the strong coordination and network of NFDN has been built with the stakeholders including bureaucrats from the ministry, Civil Society Organizations, Members of Province Parliament, OPDs and media that has strengthen the advocacy effort. The newly established Federation of Women with Disability in Nepal (FWDN) is functioning as a capacitated organization of Women with Disabilities, strengthen network in province levels of women with disabilities and promoted their issues in policy and program. The OPDs have adopted evidence-based advocacy strategy to ensure that the rights of persons with disability are at the top of the agenda of local GOs and allocated annual budgets. and strengthening partnership. The OPDs are capable to demand accountability from local GOs and elimination of stigma and discrimination towards persons with disabilities.

g. COVID-19 response and reform: The Ministry of Health and Population, Department of Health Services decided to prioritize severe and profound persons with disabilities in vaccination against COVID 19. As a result, The MoHP has vaccinated around 86,000 persons with disabilities with priority in Governments' vaccine scheme as urged by NFDN & partners. Since the OPDs advocated to established dedicated vaccine corners for persons with disabilities both at Dhangadi (SP) and Pokhara (GP) which is highly valued more than money. The advocacy of NFDN was impactful in establishing accessible vaccination corner in the center where persons with disability using wheelchair could join the vaccination program independently. The development of IEC materials in accessible format has supported enjoyment of right to information by persons with disabilities that is particularly developed and dissemination during the COVID-19 context.

Despite of its positive aspect, the consolidated reports of the assessment of adverse effect of COVID-19 on the lives of persons with disabilities would have been a tools for sensitization to a larger audience and as an evidence-based advocacy. This effort may push Government stakeholders understanding situation of Persons with disabilities in emergency situation and needful allocation of resources to make disability-inclusive policies.

5.7 Cross cutting issues
The project identified GESI, disability, human right and partnership as cross-cutting themes though the project was specifically promoting disability targeted concerns following CRPD and SDG, the cross-sectional issues of persons with disabilities has seriously been taken by the project planning and implementation phase which is triangulated in this section.

5.7.1 GESI
a. Gender and inclusion of persons with disabilities in the project’s design, implementation and monitoring: Since gender, age, impairment level, ethnicity, culture and poverty are key factors that affect person with disability in vulnerability and exclusion, the project addressed both gender issues and the issues of marginalized groups while designing, implementing and monitoring the project. The project also developed criteria for selecting beneficiaries group prioritizing women, girls and under-
representative communities of persons with disabilities. Review-and-reflection meetings resulted in the development of actions for mainstreaming GESI in the project’s plans and programs. 69.5% men and 30.5% women were involved in trainings, orientations, meetings and workshops (refer Annex VII). Affirmative approaches were used to promote the inclusion of women with disabilities in various services and facilities. These initiatives also influenced decision-making and leadership in OPD, local community and wider society as women with disabilities are in the leadership positions in many OPDs at federal level. There is still systematic discrimination due to gender, caste, ethnicity, social class, sexual orientation or gender identity that perpetuates certain patterns of disability and neglect in planning and decision making in local levels. Project has promoted participation and engagement in project activities from marginalized groups. The project addressed the issues of highly marginalized persons with disabilities, including 11.9% indigenous people, 9.5% Madhesee, 8.5% Dalits and 0.4% Muslim. The project also addressed the representation of the LGBTQ community.

The intersection of gender inequality and disability further exacerbates discrimination and creates unique challenges for women and girls with disabilities particularly in accessing SRHR which the OSRSC intend to provide solution however due to the pandemic, the concept has not been fully applied until the date.

b. Alignment of GESI policy of UN partner agencies with the project’s management structure: Despite the efforts to ensure GESI, the proportion of men and women staff at implementing partners is 67% and 33% respectively. The men and women presence in the executive board of partner OPDs is 40% and 60% respectively as described by the implementing partners. Although the GESI diversity of the executive boards and staff members was assessed before selecting implementing partners, the number of women-staff was still limited. The institutional capacity, human resource management, financial and technical capacity of implementing partners were also properly analyzed before they were selected to ensure alignment with UNDP’s GESI policy (2017).

Due to practical barriers and stigma, persons with disabilities, in particular women and girls, are socially, politically and economically excluded and deprived of opportunities in local communities even though the elected bodies are being positive in their issues. Most services are out of reach for persons with disabilities. Among other services, awareness of and access to health services is low in SP. The project treated both men and women equally and gave them the same opportunity to participate in discussions, processes and activities. It was said that the gap between men and women regarding their knowledge about disability rights issues diverse which was also observed during the evaluation consultations. The partnership of UNDP with FWDN has been a great endeavor of the project to build capacity of women with disabilities.

KOSHISH has made efforts to ensure maximum representation of female participants in all of the events carried out in this project and all the other projects as well. Of the 162 participants in the virtual and in-person events, 56 participants were female and of the 35 participants who received relief materials, 22 were female. The progress report revealed that suicide is the leading cause of death among women of age group 15-49 and of the 7141 individuals who lost their life to suicide in fiscal year 2077/78, 2919 are women and girls. Therefore, even though suicide affects people of all age group and gender, women are particularly vulnerable. Groups of women with disabilities claimed that project had promoted positive changes among them and that,
as a result, the issue of women with disabilities has been covered within the disability policy of SP and the GESI policy of project municipalities. The women with disabilities in the consultation meeting said that they earned more social recognition and felt more empowered once they had got involved in committees and groups and learned advocacy skills from the project. In SP, 179 women with disabilities are empowered, despite of pandemic, the project built the confidence, leadership qualities and power of women with disabilities to negotiate with duty bearers. Despite the project’s tireless efforts, however, stereotypes to view disability are still ingrained in society and in social norms and traditions. Many communities in the project areas are still patriarchal and with negative mindset towards persons with disabilities. Disparity towards persons with disabilities have not been eliminated but disability inclusive practice is now immersed as an evolving concept of inclusive development.

5.7.2 Disability inclusion:

a. Involvement of Persons with disabilities in program planning and implementation: The needs assessment stage explored the issues and concerns of Persons with disabilities and program designing, planning and subsequent implementation addressed them. The project acknowledged the roles of Persons with disabilities by facilitating their participation in project designing.

The project supported building mass awareness on disability, employment, GBV, SRHR, menstrual hygiene through information, communication and educational (IEC) materials. The project capacitated the target beneficiaries, viz. persons with disabilities with particular focus to women with disabilities, OPDs, self-advocates and other civil society organizations, by engaging them in planning and implementation of project activities and further capacitated to design the similar projects and the lead the disability issue in future.

The engagement of women with disabilities as key facilitator and trainers showcased the capabilities of women with disabilities even those with psychosocial disability to lead their issue by their own. The project build-up networking capabilities of FWDN from all the provinces.

The New OPDs in six municipalities in SP understood the importance of effective networking platform which provides support through knowledge transformation and broader advocacy plan to influence the Government. and desired to be accommodated within the umbrella of NFDN for strengthen advocacy strategy.

b. Barriers faced by Persons with disabilities to participate in and benefit from the project: The participation of Persons with disabilities in meetings and trainings was essential however that was rather challenging because the majority of meeting venues were upstairs, the venue inaccessible to persons with disability using wheelchair. The project and municipalities recognize the barriers that Persons with disabilities face. The ramp building in Bhajani municipality is constructed in the back entrance and without fulfilling the minimum standard as prescribed by the accessibility guideline of the Government. However, the project helped to identify barriers that Persons with disabilities face and their mitigation measures.

In SP, there is and limited mobility and access to social services is still challenge which the project yet to address. Because I reside in the flood affected area of Bhajani municipality, I had limited access to services in Municipality before having this ramp…” expressed a man with physical disability. In other municipalities, several trainings and
meetings, as well as COVID-19 related services, have been moved to the ground floor to increase their access and that provided opportunity of participation for persons with disabilities in the service provisions.

5.7.3 Human rights

a. Human Rights Based Approach of project: The project’s records and evidence revealed that project practiced the human right based approach (HRBA) in its design and implementation. Its resources were used efficiently to address human rights during implementation in the forms such as the participation of targeted stakeholders and collection of disaggregated data. Consultation with project stakeholders and beneficiaries revealed that Dalits, ethnic minorities, Persons with disabilities, women and other marginalized groups benefitted from the project's services. The project employed affirmative action measures in some cases. It prioritized activities which benefitted persons with disabilities from marginalized communities. The project’s monitoring system designed by the implementing OPD also ensure that persons with disabilities from disadvantaged communities would benefit from the project's support which is reflected in the project completion report of OPDs. Through implementing partners, the project also indirectly influenced local governments to include HRBA in their planning processes. The bottom-up and participatory approaches promoted by the project helped to foster ownership among rights holders and enabled them to influence duty bearers to claim their rights and entitlements.

The FWDN carried out the review of laws/policies on from the disability lens which has been a resource for making advocacy plan for the enactment of gender friendly policy as human rights instrument on disability in federal level. The project has made the stakeholders realization a need of address the concerns of people with disabilities from under-representative groups to ensure their rights within policies and programs at local, province and federal level.

The Follow-up carried out by NFDN in the second wave of the COVID 19 in Madhessee Province. NFDN human rights team captured violation of human rights of persons with disabilities which was then mitigated providing affirmative action to the victims (person affected by leprosy ostracized and sexual violence against 21-year-old woman with multiple disabilities).

b. Accessibility standards and reasonable accommodation for persons with disabilities followed by project implementation: The accessibility measures applied in conducting activity of knowledge transformation on Gender, Disability and social inclusion for persons with disabilities introducing sign language interpreters and real time captioning while implementing training, workshop and meeting under project activities either in face-to-face mode or in the virtual platform. Training on digital technology and ICT for Women with disabilities has capacitated 46 beneficiaries to get information from social sites and different Google platform including Email and promoted digital literacy amongst women and girls with disabilities.

PFPID developed 9 flyers in easy-to-read format so that Persons with intellectual disabilities can easily access the information. The flyer is posted in the digital media via Facebook and messenger groups so that parents and PERSONS WITH INTELLECTUAL DISABILITIES could easily access the information about COVID 19. The project report revealed that the average reach of each poster in social media page is 15,000 and the aggregated engagement in the posts is 2000. The IEC materials are developed in easy-to-read format which enabled Persons with intellectual disabilities
in terms of posters, handbook and radio jingle, which are more effective in building knowledge of Persons with intellectual disabilities in violence, menstruation hygiene, disability Identity card distribution and COVID-19 safety protocol. The social media of PFPID shows that above 35000 people including Persons with intellectual disabilities and their parents accessed ICT materials and gained knowledge on the COVID-19, related information including its symptoms, safety measures and vaccination schedule.

Education and Communication (IEC) materials in Nepali languages have been developed, printed and disseminated to the concerned stakeholders however the accessibility feature for the persons with visual impairment has not been considered either in Braille or in the accessible digital feature in DAISY or Epub format.

In the OSRSC, the participants follow the minimum accessibility guideline and risk communication materials and rehab products (Communication board, anxiety thermometer, calm down dice and clock and calming and engaging toolkit) in fulfilling accessibility features. Despite of the accessibility feature for physical disability, full feature of accessibility standard couldn’t be addressed such as accessibility with voiceover and audio description that again deprived persons with visual impairment yet to planned, in absence of accessibility measures for persons with visual impairment and in absence of sign-language for Deaf persons, reasonable accommodation should be provided.

5.7.4 Partnership
The NFDN, as an umbrella organisation of OPDs in Nepal was on board from the beginning of designing phase of the project. The roles of thematic OPDs have been well recognized by the participating UN agencies and have put optimum effort to ensure full and effective participation of persons with disabilities and their representative organizations in the implementation of the project. The OPDs were massively included in consultations process of project design as such NFDN, PFPID, Koshish, NDWA, FWDN, NIDWAN etc. are engaged as implementing partners. Besides, NFDN has been collaborating together with all UN partner agencies under this project. As such, advocacy for Province Policy on Disability in SP was administered by NFDN in partnership collaboration with UNDP where the engagement of various range of stakeholders such as Government authorities, Parliamentarians and leaders of political parties, local Authorities, media, OPDs and NGOs were engaged in drafting the provincial legislation on rights of persons with disabilities. KOSHISH implemented the activities in partnership collaboration with UN Women and UNDP in Sub-National Government engagement for suicide prevention interventions in policies and programs in Province 1, that sensitized duty bearers (Sub-National Government) in PFPID in partnership collaboration with UNDP was relevant in increasing access of persons with intellectual disability in local level planning and budgeting process making local government accountable towards their issues in Province 1. PFPID is the parent’s federation of persons with intellectual disabilities and engaged as implementing partner with UNDP for increasing access of persons with intellectual disability in order to make local government accountable. The newly established Federation of Women with Disability- Nepal (FWDN) has been engaged in the project representing organisation of Women with Disabilities, strengthen network and policy review from the perspectives of women and girls with disabilities. NIDWAN was engaged in repurposed activity to disseminate the COVID-19 related information to persons with disabilities focusing under-representative community.
The OSRSC established in GPH in partnership collaboration between INF and WHO, as an initiative in the form of developing a model centre for providing inclusive rehabilitation services for persons with disabilities which is working as usual practice as module center however in the COVID-19 context, the center provided tele-rehabilitation service to persons with disabilities. Besides, the INF extended third party collaboration with OPDs in GP in repurposed activities.

UN Women implemented the project activities in SP in partnership collaboration with NGO namely JURI-Nepal which was engaged in strengthen the capacity of 10 OPDs for advancing advocacy on disability rights and inclusion in municipality and sub-metropolitan level in SP.

UNFPA carried out a comprehensive survey on ‘The Situation of Persons with Disabilities in SP assigning national research organization (namely Valley Research Group) and an international research institute (Nossal Institute Limited, University of Melbourne, Australia). It is said that persons with disabilities were actively involved in all stages of the survey for detailed design and planning however the consulting OPDs and the SP provincial committee of NFDN were not sure about the role they fulfilled. The representatives from the NFDN were engaged as resource persons in the training of field researchers for the survey however that was only the part of disability sensitization, not the technical aspect of survey tools and procedure since NFDN has no such technical expertise in designing survey tools. The survey also engaged at least ten percent of the field enumerators amongst persons with disabilities.

The project advisory committees were formed in federal and the province level where representatives of persons with disabilities has been a priority where the representation of GOs, UN partner agencies, Service delivering organisations, NGOs and relevant stakeholders is structured which is entitled to provide strategic guidance to advance disability issues at all levels. Likewise, the Disability Inclusion Coordination Committee formed at the provincial level is structured by the representation of provincial OPDs, implementing partners, province level GOs and representative of UN partners that provides guidance in sub-national level. The representation of OPDs is also prioritized in the advisory committee formed to provide the technical leadership to OSRSC that provides advice the provincial and local government on disability inclusion and rehabilitation in GP. The provincial chapter of NFDN in GP had taken lead in creating awareness on disability rights, advocate and support the provincial and local Governments in policy formulation, action plan and its implementation. Persons with disabilities were also assigned as knowledge expert to conduct the training session. Moreover, under the capacity building output, the project closely engaged 10 OPDs to strengthen their capacity for policy advocacy and participation in local decision-making process in six municipalities of SP.

Under the re-purposed activities in response to COVID-19, The OPDs were engaged in Data collection by using kobo apps in the form of CSO mapping in 59 districts. The OPDs pledge to use the recommendation of the rapid assessment of the adverse impact of COVID-19 on the lives of persons with disabilities collectively with different stakeholders and put those recommendations into practice through policies at all levels.

The project also provided an opportunity to work in partnership with the key government at federal, provincial and local level on the disability issues in Nepal.
6. Conclusion

This project, which ran for 37 months, brought a draft of disability policy in SP, that constitute milestones in the provision of stronger guarantees to ensure rights of persons with disabilities which is considered as a commendable step since the provisions are very much in line with Nepal's support for Agenda 2030’s to 'leave no one behind'. The project opened-up the engagement of OPDs in policy making together with Provincial government, Members of Parliament, NPC, NFDN, Journalists and CSOs on development of province level policy making endeavor that provided well recognition of OPDs and potential roles of persons with disabilities in decision making. Disaggregated data on persons with disabilities has been established in SP that opened opportunity for establishing evidence in strengthening policy advocacy of OPDs. The OPDs have adopted evidence-based advocacy strategy to ensure that the rights of persons with disability are at the top of the agenda of local GOs and allocated annual budgets and strengthening partnership. The Significant achievement of the project with establishment of a model One-Stop Rehabilitation Service Centre (OSRSC) which aimed to have a direct impact on empowerment of women and girls with disabilities has showcased remarkable contribution in providing holistic rehabilitation services to persons with disabilities. The project is effective in building mental health and psychosocial wellbeing within under-representative groups.

The contribution of the project to enhance UN inter-agency collaboration to advance the situation of persons with disabilities is significant. As part of the project, the Un partner agencies implemented a number of inception activities that contributed to increased awareness and sensitization on disabilities issues among the staff members across all UN agencies. The UN agencies have realized the need to focus their work equalization of opportunities for persons with disabilities which follows CRPD principles. One of the most important concerned areas where the UN agencies have worked together is the accessibility followed by article 9 of CRPD with accessible technologies, in particular information and communications technologies, as well as to the physical environment. For instance, as a result of the sensitization and internal advocacy efforts, the UN office premises have audited for its accessibility feature and the premises are featured to be accessible for persons with disabilities.

Despite these positive developments, there were some missed opportunities. More could have been done in terms of bringing the policy endorsed from the SP parliament. the constitutional mandate delegated to provincial governments to draft policies under three autonomous tiers of government provide a unique opportunity to support provincial governments in developing disability policies in line with international standards and commitments however without having full commitments and realization, of the political leaders, the policy is hold since long time despite of being drafted in consultation of OPDs. The short duration of the project that couldn't compromise with the delay response of Ministries and political Leaders. The NFDN and partner OPDs under the project jointly pledged to endorse the provincial level disability related policy in Sudurpaschim has still not been addressed, though the project objective of drafting the disability policy in Sudurpaschim has been marked. Likewise, the commitments of the Minister of Social Development to form a committee to study about mental health issues in the province is yet to materialized. The project helped strengthening advocacy for establishing disability-disaggregated data in all public health and hospital management information system (HMIS); however, the policy makers have not addressed such essential demand to provide mainstream and disability-specific
services to persons with disabilities. The OPDs pledge to use the recommendation of the rapid assessment of the adverse impact of COVID-19 on the lives of persons with disabilities collectively with different stakeholders and put those recommendations into practice through policies at all levels.

The census 2021 has still covered questionnaire based on individuals’ ‘impairment’ rather than ‘functionality’. The project established disaggregated data on persons with disabilities applying WGQ which opened opportunity for establishing evidence in strengthening more comprehensive data on disability and a resource of advocacy. However, the WGQ adoption has been overlooked in the census, that neglected the concluding observation of CRPD committee concerning article 31. NFDN has yet to build capacity of OPDs and engage them for establishing and dissemination of desegregated data since the Concluding Observations expressed concerns on the lack of data on disabilities, in particular disaggregated data, in the Census and other surveys which can’t be achieved without applying WGQ.

The situation assessment of rehabilitation services in Nepal has been a resource for developing a rehabilitation strategic plan in line with WHO Global initiative - Rehab 2030 a call for action, however the knowledge transformation to GOs is yet to enforce for the development of a strategic plan to integrate rehabilitation services into health systems in the federal government structure. In OSRSC, Standard Protocols development has been initiated however the required signage for accessibility measures yet to be installed.

Due to practical barriers and stigma, persons with disabilities, in particular women and girls, are socially, politically and economically excluded and deprived of opportunities in local communities in Sudurpaschim though the elected bodies are being positive in their issues. Most services are out of reach for persons with disabilities. Among other services, awareness of and access to health services is low in SP to ensure that there are holistic benefits from the project in the long run, there is a need to employ a multi-sector approach, building mass awareness on disability, employment, gender-based violence, SRHR, menstrual hygiene through information, communication and educational (IEC) materials.

In a nutshell, the project enhanced understanding of the disability inclusion at community and municipal levels, strengthened and/or established systems at all levels for effective planning and inclusive mechanism, and increased stakeholder’s realization a need of address the concerns of people with disabilities from under-representative groups to ensure their rights within policies and programs at local, province and federal level.

The Advocacy with province parliamentarians helped building awareness on the human rights of persons with disabilities, still their commitments need to be reflected within the policy, which is yet to be materialized from the provincial parliament.

The highest risk of the project is that the election of local bodies may change the leadership of municipalities and need further intervention to sensitize them from the disability rights provisions and make stakeholders sensitized in assimilating the need for and importance of disability-inclusion in the local decision-making levels.
7. Recommendations

Based on the overall findings and conclusions, the evaluation makes the following recommendations for developing future similar project.

1. Utilization of established disaggregated data of persons with disabilities in policy and programs: The project flourished by producing disaggregated data on persons with disabilities in SP, however it hasn’t contributed for strengthening the capacity of OPD to lead policy advocacy, demand accountability and address stigma and discrimination following anticipated output. Most of the stakeholders consulted were not informed or sensitized on the findings of the survey of persons with disabilities. Besides that, the accessibility feature of the disaggregated data is not available following Web Content Accessibility Guideline (WCAG), as such, persons with disabilities are not benefited particularly those using screen reading software and those require easy to read format. It is strongly recommended to mobilize OPDs to disseminate the report of disability survey with disaggregated data of persons with disabilities, providing reference to the local GOs for further collecting baseline data and allocate local budget to benefit all persons with disabilities irrespective of gender and caste/ethnicity. It is also strongly recommended to produce the high-quality disaggregated data in accessible and easy to read format so that it could benefit to all.

2. Applying WGQ for disability survey: It is strongly recommended to the partner OPDs to strengthen advocacy to fulfill the state commitments and concluding observation of CRPD committee concerning article 31 and to build capacity of OPDs and engage them for establishing disaggregated data applying WGQ in the disability surveys in future.

3. Promoting access to justice to persons with disabilities addressing in Policy: The project has reached its third output of drafting Policy on Persons with Disabilities at SP; however, the provisions related to access to justice has not followed the international standards. It is strongly recommended the OPDs and implemented partners to strengthen advocacy to address the article 13 of CRPD and SDG 16 for providing access to justice for persons with disabilities, guarantee their protection from HR violence and discrimination as well as enhancing SRHR and empowerment of persons with disabilities in the drafted policy before it is endorsed by the Government in SP.

4. Promoting universal design principles: The OSRSC is however made accessible in physical infrastructure, full feature of accessibility standard hasn’t been addressed for those with visual impairment, hearing impaired and those living with intellectual disability. It is recommended to follow universal design principles while implementing the project activities making it compatible to article 9 of CRPD and the SDG 11 for ensuring barrier free environment for all persons with disabilities also strengthen reasonable accommodation while rendering services in the OSRSC. It is also recommended to follow the accessibility feature for the persons with visual impairment either in Braille or in the accessible digital audio format in DAISY or Epub.

5. Strengthening the roles of OPDs in partnership: The UN Partner agencies are recommended to promote roles of OPDs in consultations process of project design and deliver key role as implementing partners. The province level networks of NFDN should be engaged with all UN partner agencies in the disability specific project as well as the GESI related project for mainstreaming disability as a cross-cutting issue. It is strongly recommended that the OPDs are strengthen through
the network of NFDN to make them capable to follow-up for the endorsement of the disability policy which is in the pipeline of the provincial Government in SP.

Since, partnership collaboration of UN Women with JURI is silent in OPD participation that contrast to article 29 of CRPD that embrace OPDs to be engaged, capacitated and to lead the disability issue for the promotion of political and social participation of persons with disabilities in local decision-making process. The implementing NGOs are strongly recommended to opened up the representation of persons with disabilities in the relevant decision-making process and encourage the newly established OPDs to be accommodated within the network of National provincial umbrella organisation for their sustainable functioning and strengthening advocacy initiatives in Human Rights Based Approach.

The local Municipalities are recommended to promote roles of OPDs particularly to address the concerns of people with disabilities from under-representative groups to ensure their rights within policies and programs.

6. Strengthen UN Inter-agencies collaboration in promoting disability inclusion:
The contribution of the project to strengthen UN inter-agency collaboration is encouraging, the UN partner agencies are strongly recommended to continue initiatives to increase awareness and sensitization on disabilities issues among the staff members across all UN agencies and them to focus their work and recruitment process in making disability inclusive which follows CRPD principles. Besides, it is recommended to follow the accessibility standards following article 9 of CRPD with accessible technologies, in particular information and communications technologies, as well as to the physical environment making workplace environment accessible to persons with disabilities.

7. Following the CO of CRPD committee: The Advocacy with province parliamentarians helped building awareness on the human rights of persons with disabilities, it is strongly recommended for the provincial Government to fulfill their commitments within the policy. The local Municipalities are recommended to promote roles of OPDs particularly to address the concerns of people with disabilities from under-representative groups to ensure their rights within policies and programs to fulfill their commitments within the policy following concluding observation of CRPD committee.

8. Sensitization of newly elected bodies: Because the election of local bodies is declared in middle of May 2022, that may change the leadership of municipalities. It is strongly recommended to plan for further intervention to sensitize newly elected local bodies from the disability rights provisions and make stakeholders sensitized in assimilating the need for and importance of disability-inclusion in the local decision-making levels.
8. Good practices and learning

8.1 Good practices
GON include persons with disabilities (especially severe and profound persons with disabilities) in priority for vaccination.

NFDN Bagmati province committee already has appointed two district focal persons by mobilizing their internal resources to run the virtual help desks in those districts not covered by the YES WE CAN project.

The recording of gender/disability-wise segregated data has been initiated from the Health Care Department/Urban Health Clinics run by the Dhangadhi Sub-Metropolitan City, Kailali SP.

The project has sensitized, build skills and advocating for COVID 19 response related knowledge sharing through mobilizing the district focal persons as virtual help desk in 59 districts. The 5 months’ project from April to August 2021 has fostered best effort to implement the project.

The formulation of disability policy and legal instruments, standards and guidelines for municipalities to win the trust of municipal authorities and encourage them to allocate more of their budgets to DID related activities.

The construction of ramps with safety railings in public structures with safety bar to serve Persons with disabilities and senior citizens and the organization of ear camps to help persons with disabilities with hearing impairments.

Despite the adverse situation of COVID-19, all the partner OPDs were able to complete all the activities under the project within the timeline agreed with the corresponding UN partner agencies. As such, KOSHISH held series of coordination meetings with key stakeholders (Local and Provincial government, Ministry officials, CSOs, and other key actors) on the issue of suicide prevention and the need to work together in sensitizing key stakeholders. The budget has been utilized in each of the headings as planned. There were some of the activities which were not carried out at the time stipulated especially in relation to distribution of relief materials as the Rural Municipalities had imposed prohibitory orders. Moreover, some of the virtual events had to be postponed multiple times at the request of the stakeholders. Likewise, there were some technical constraints while the events were carried out through zoom, but the participants have been able to address them in the event itself.

The social awareness on mental health and suicide prevention are well covered by media 8.

8.2 Learning
The project entitled “Yes We Can Do” by persons with disabilities under NFDN partnership and WHO covered six provinces such as province 1, Madhesee province,

8 https://hamromat.com/2021/08/13/31128.html?fbclid=IwAR3H3b0vCndmNRW5E_V3DiMuFOV6-Yjvlm54ADHQq/72retICckh6obwaw

https://www.koshionline.com/newsdetails/3486

https://hamromat.com/2021/08/05/30745.html https://ourbiratnagar.net/2021/08/147961;
https://koshisandesh.com/2021/08/06/69023/?fbclid=IwAR0g2gOCr5y3Dz18SZN35xOw7etngH32rV8qQlQaPHrO8m3-d1r8uktEk
Bagmati Province, GP, Lumbini Province and SP and 61 districts of Nepal, indeed a large area coverage within a short period of project duration, such earnestness may impose them hard to trace the project result and follow the sustainable plan.

The tele rehabilitation intervention has been effective approach to ‘Call to Care’ initiative as pilot program for preparedness, physical, mental and social wellbeing of persons with disabilities and their caregivers during the restriction of COVID-19. "The Tele-Rehab approach has been effective in facilitating for essential rehab services in the resident and further continuation of PRT for people with disabilities in the restricted circumstances of COVID-19 which is an important learning for the policy formation for the situation of pandemic and the emergency situation in the country..." expressed the physiotherapist in the GPH during consultation.

Dissemination of accessible risk communication materials, rehab products & home care interventions package intent to promote quality of life of persons with disabilities, was not found sufficient as demanded by the beneficiary’s group.

The Data Collection for COVID facilities Accessibility Audit, the training in Kobo tool was effective in the urban area however was hard for District focal persons in rural part. Besides, it was challenging to record data since several features in Cobo tool is not accessible for screen readers.

A participatory audit of the physical, information and barriers for accessing service for persons with disabilities carried out with a larger safety assessment of the hospitals, the successful approach of establishing Hospital Safety Index(HIS) helped to adopt toolkit for access audit of health facilities which aims to replicate in SP however the learning is yet to be integrated into the hospital disaster preparedness and response plan (HDPR) in SP as such the province GOs are not aware about such toolkit.

The project provision clearly speaks about the provision of sign language interpreter, support person and needful assistive devices during meeting/workshop/seminar with persons with different kinds of disabilities.

The project with short period of implementation has insufficient impact in policy making levels since the Province Level Policy in SP” which was started by NFDN as a part of past project of Advocacy for the inclusion of person with disability, couldn’t be materialized within the project period which was ended up before endorsement from the province parliament.

The advocacy of NFDN succeed for getting the concept paper signed for the development of disability policy in SP. This intervention was a best practice by bringing Secretary, Women Development Officer and Legal Officer of MoSD, that guaranteed the commitments of the Government towards rights of persons with disabilities and recognition of OPD engagement in decision making process which was a result-based advocacy of NFDN.

The consolidated reports of the assessment of adverse effect of COVID-19 on the lives of persons with disabilities would have been a tool for sensitization to a larger audience and as an evidence-based advocacy though the different perspectives have been covered within the specified report of different OPDs from their own perspectives.

The project implementing OPDs should carry out risk analysis and mitigation strategy to overcome any unforeseeable crisis or to identify any possible risk and mitigate its adverse impact to the project objective.
The time allocated for Project implementation was inadequate for preparation and consultation which was bit challenging for almost all OPDs.

Coordination meetings and contingency plans: It was learned that project’s coordination meetings with senior authorities of municipalities helped to (i) integrate the project’s plans with those of municipalities, (ii) leverage municipal resources, and (iii) involve the public sector in disability inclusive development plan.

Selection criteria for trainees and implementing partners: The effectiveness of capacity-building initiatives is high if participants are selected based on agreed-upon criteria including interest, age, proven knowledge, and willingness to share major learning with others.

Use of existing social platforms: The use of existing social platforms such as women’s groups, OPDs, Guthis, SMCs, Cooperatives and PTAs, and health management committees helps save time, effort and resources.

Need of further research: The OPDs are concerned to have more comprehensive and extensive research with intersectional approach on underrepresented groups with disabilities and targeted intervention for their organizations.
1. Background:
The Government of Nepal has adopted several progressive laws and policies to protect and promote the human rights of persons with disabilities. The 2015 Constitution of Nepal provides strong guarantees, including the right to education, right to social justice, participation in public life, and the right to live in dignity and honor⁹. Despite the improvements enshrined in the Constitution and the overall legal and policy framework, however, most services remain out of reach for persons with disabilities. Moreover, existing research and the recommendations given by the Committee on the Rights of Persons with Disabilities ("the CRPD") raise the concern that the intersection of gender inequality and disability creates further marginalization and social, political and economic exclusion for women and girls with disabilities.

With this facts, UN in Nepal is implemented the “Aawaaz: Inclusion for and by persons with disabilities” project. The project is joint effort of UN Women, UNFPA, WHO and UNDP as lead agency. Recognizing that women and girls are at greater risk of multiple forms of discrimination, the project aims to protect and promote the rights of persons with disabilities in Nepal and enhance their capacities, in ensuring that policies are gender-responsive through a range of interlinked and reinforcing interventions. The proposed interventions are directly in line with the Constitution of Nepal, the provisions of the CRPD, the United Nations Development Assistance Framework (UNDAF) 2018-2022 and support the Government of Nepal’s vision of living up to the promise of Agenda 2030 for Sustainable Development to ‘leave no one behind’.

Also project aims to contribute by producing high quality disaggregated data on persons with disabilities; by strengthening the capacity of OPDs (OPD) to lead policy advocacy, demand accountability and address stigma and discrimination; and by supporting the development of an evidence-based draft Policy on Persons with Disabilities in line with international standards in SP, participating UN agencies aim to promote a policy environment that enables persons with disabilities to claim their human rights and access services. The programme aims to particularly promote the realization of the 1) right to health, 2) right to participation in public and political life, and 3) right to information.

The project is designed to align with the currently ongoing federalization process in Nepal and aims to foster an enabling policy environment by enhancing the capacities of both rights holders and duty bearers in SP. The project development phase has been greatly influenced by consultations held with OPDs, some of which are proposed as implementing partners throughout the project.

---

⁹ Articles 31, 39, 42 (1) and (3), 43 of the Constitution of Nepal, 2015
Programs funded by UNPRPD adopt a multi-stakeholder approach, involving two or more UN agencies, as well as governments, OPDs, and broader civil society through complementary action at country level. The voice of persons with disabilities in the planning and implementation of UNPRPD-funded programs as well as in program activities is a key factor to success. Program activities must focus on advancing structural changes to implement the CRPD at country level, such as concrete changes to laws, policies, systems, or services. Key learnings on the approaches used in UNPRPD-funded programs should be collected and shared to inform wider UNPRPD programming.

The Aawaaz project in its aim to develop a consultative, evidence-based Disability Policy for Province 7, with the potential for replication in other provinces, the project aims to address a broad range of rights. In particular, the project seeks to ensure that the Disability Policy of SP thoroughly addresses those issues that are raised in the recommendations of the CRPD to the Government of Nepal. These include the following:

- Access to Information and Statistical and Data Collection
- Participation in public and political life
- Health and accessibility

The project was implemented by all four participating UN agencies linking with the respective UN agencies ongoing effort on disability with a focus on:

Outcome 1: Policy environment enables Persons with disabilities claim their human rights and access responsive and quality services in Province 7

Output 1.1 High quality disaggregated data on persons with disabilities available and in use (UNFPA)

Output 1.2: Capacity of Disabled Person’s Organizations strengthened to lead policy advocacy, demand accountability for quality services, and address stigma and discrimination (UN Women)

Output 1.3 Draft Policy on Persons with Disabilities at the Province 7 in line with international standards

(UNDP and WHO). WHO had mainly focused on rehabilitation of health in GP
Country | Nepal  
Region | Asia Pacific  
Date project document signed | 27 July 2018  
Project dates |  
Start | 1 November 2018  
Planned end | 30 November 2021  
Project budget | US $530,005  
Funding source | UNPRDP and Participating UN agencies  
Implementing party | UN Women, UNFPA, WHO and UNDP Nepal

Impact of COVID-19 in project implementation:
The COVID-19 pandemic had severely impacted in Nepal and Globally and the impact on persons with disabilities are the worst impacted. The rapid assessment conducted by NFDN with support of UNDP projected that majority of them are not aware of the COVID-19 and many do not know the measures to be safe. 46% think that the information materials are not in accessible form. Due to lockdown many has lost their livelihood, and many need the daily hygiene items. It is quite difficult to manage the persons with disabilities that are living in groups/rehabilitation centers and the students from resource room.

The activities of the Aawaaz- Inclusion for and by persons with disabilities are being implemented in partnership with various stakeholders including with the umbrella organization the NFDN. UN Women Nepal worked with 10 Disability Persons Organisations in SP. UNDP works with the NFDN and its province chapter and 4 other Organizations of the Persons with Disabilities. Due to COVID-19, all the activities related to policy dialogue and other activities is affected due to continuous lockdown/partial lockdown in 2020-2021. And even after the lockdown is lifted the focus of the government had requested the development partners and UN UNDP to repurpose the development programmes to address the immediate need of the COVID19 impact in Nepal. Therefore, the participating UN agencies (UN Women, UNFPA, WHO and UNDP) had re-purposed the activities planned in in 2018 and some additional interventions were planned and implemented as agreed with the UNPRPD secretariat with additional funding support.

2. Evaluation Purpose, scope and Objectives:
The overall objective of the evaluation is objectively assessing the results and approaches of the project interventions and its contribution to a higher level of outcome results. It will identify and document the results achieved through the project interventions, challenges encountered as well as document the lessons learnt and best practices. The findings of the evaluation will provide the specific recommendations for the future programmes of UN in Nepal and stakeholders willing to contribute to promotion of the rights of persons with disabilities.

Specifically, the objectives are to:
• Ascertain the development of theory of change intervention to ensure the policy environment, capacity development, data and enabling environment for persons with disabilities in the selected province and Palikas.

• Ascertain the results and learnings of the project and its relevancy, effectiveness, efficiency, sustainability and impact including synergies with other similar interventions and stakeholders together – the relevant provincial ministries and their service institutions; local governing authorities; non-state agencies working for persons with disabilities; as well as federal and local chapters of OPDs - to address the rights of persons with disabilities and the duties of the mandate holders.

• Assess the scalability of results and successful approaches tested through project activities to strengthening capacities of OPDs in SP and GP, coordination, convening and policy dialogue opportunities of the UN partners with the provincial ministries will be effectively utilized with the advocacy leverage of the NFDN, NDWA and NIDA etc.

• Assess the extent to which the target beneficiaries, i.e., persons with disabilities with special regard to women with disabilities, Disabled People’s Organisations (DPOs), self-advocates and other civil society organizations, have been included in planning and implementation of project activities and the extent to which they benefited from the project activities;

• Review and assess the risks and opportunities (in terms of resource mobilization, synergy and areas of interventions) for future.

• Assess how the project fit into the national policy agenda, and the structural or systemic changes that were made to advance the implementation of the CRPD as a result of project activities.

• Assess the effectiveness of the multi-stakeholder approach, including the influence of the project on mainstreaming of disability within the work of UN entities involved.

3. Scope of Work:

The evaluation should assess the relevance, effectiveness, coherence, efficiency, impact and sustainability of the project interventions in project sites (SP and Gandaki) for the project time period. In addition, the evaluation should indicate if the achieved results are in the right direction towards contributing to strengthening the policy environment and protecting the rights of the persons with disabilities, briefly touch on how project implemented its interventions during the COVID-19 period. The evaluation should cover but not limited to the following areas:

• Relevance of the project: Review the progress against project outputs and contribution to outcome level results as defined in the project’s theory of change and ascertain whether assumptions and risks remain valid. Assess the alignment of the project design with national priorities and responding to the needs of the OPDs.

• Effectiveness and efficiency of implementation approaches: Review project’s technical as well as operational approaches and deliverables, quality of results and their impact covering the results achieved; identify and assess any other intended or unintended, positive or negative results as well as the partnerships established and issues of capacity.

• Gender Equality and Social Inclusion: Review the project’s approaches in general including mainstreaming of gender equality and social inclusion with focus on women and marginalized groups.
• Sustainability: Review and assess the sustainability of the results, risks and opportunities (in terms of resource mobilization, synergy and areas of interventions) related to future interventions.
• Review external factors beyond the control of the project that have affected it negatively or positively.
• Review planning, management, monitoring and quality assurance mechanisms for the delivery of the project interventions.
• Review coordination and communication processes and mechanisms with the stakeholders.
• Review how the implementation of project interventions is impacted by COVID-19.

4. Evaluation Criteria and Key Questions:

The evaluation will follow the Organization of Economic Cooperation Development (OECD), Development Assistance Committee (DAC)’s evaluation criteria – relevance, coherence, effectiveness, efficiency, impact and sustainability. Partnership, Gender Empowerment and Social Inclusion (GESI) and human rights will be added as cross cutting criteria. The guiding questions outlined below should be further refined by the evaluator and agreed with UNDP prior to the commencement of the evaluation:

Key Questions

I. Relevance

• To what extent the project was able to contribute to the policy environment – including the data, capacity development, other enabling factors on rehabilitation etc. for the rights of the persons with disabilities in targeted province?
• Was the strategy adopted, project interventions and inputs identified, realistic, appropriate, and adequate for achievement of the results?
• Does the Programme continue to be relevant to the GoN and UN priorities?
• To what extent the reprogramming of project activities for immediate COVID-19 response are relevant to meet the local needs?

II. Effectiveness

• To what extent the project activities were delivered effectively in terms of quality, quantity, and timing?
• Were there any unintended positive or negative results?
• Are the strategies and tools used in programme implementation effective?
• What were the lessons and how were feedback/learning incorporated in the subsequent process of planning and implementation?
• How effective was the project in integrating the GESI concerns in its approach?
• To what extent the project contributes to the Sustainable Development Goals, the agenda 2030.
• Evaluate the effectiveness of the multi-stakeholder approach, including the ways in which the joint UN action was complementary and the role and contributions of partners and stakeholders, including OPDs and government

III. Coherence

• To what extent the intervention is coherent with Government’s policies?
• To what extent the intervention addressed the synergies and interlinkages with other interventions carried out by UN and other development partners?

IV. Efficiency

• Is the Programme cost-effective i.e. could the expected results have been achieved at lower costs by adopting a different approach and/or using alternative delivery mechanisms?
• To what extent was the fund flow mechanism (Micro Capital Grant, Letter of Agreement, Low Value Grant Agreement and Responsible Party Agreement) appropriate?
• Were efficient mechanisms adopted to leverage the resources to community?
• How did AAWAAZ's financial management processes and procedures affect programme implementation?
• To what extent the joint programme approach was effective and efficient in achieving the intended results?

V. Sustainability

• To what extent are the benefits of the programme likely to be sustained after the completion of AAWAAZ?
• How effective are the exit strategies and approaches to phase out assistance provided by the programme including contributing factors and constraints?
• What are the key factors that will require attention to improve prospects of sustainability of the Programme result and the potential for replication of the approach?
• How are capacities strengthened at the individual and organizational level (including contributing factors and constraints)?
• Describe the main lessons that have emerged.

VI. Impact:

• To what extent the project outputs were achieved and what were the contribution, if any, to outcome level results?
• To what extent can the program contribute capacity building, linking persons with disabilities with the local authorities, access to identity cards, right to health, participation in public and political life, and access to information for persons with Disabilities, in particular women and girls with disabilities?
• Capture key learnings on approaches used in the project to inform other UNPRPD-funded programs

VII. Partnership:

• Have the ways of working with the partner and the support to the partner been effective and did they contribute to the project’s achievements?
• How has been the partnership with national/local partners including coordination at federal level, provincial level, local level, UN agencies, NFDN and other OPDs? Does it create synergies or difficulties? What type of partnership building mechanism is necessary for future partnership?

VIII. Gender equality and Social Inclusion
• To what extent have the issues of gender equality and inclusion of marginalized communities been addressed in the design, implementation, and monitoring of the project?
• To what extent the project approach was effective in promoting gender equality and social inclusion - particularly focusing on women and socially disadvantaged groups?
• To what extent has the project promoted positive changes of women and marginalized communities? Were there any spillover effects?
• Assess the extent to which the target beneficiaries, i.e., persons with disabilities with special regard to women with disabilities, Disabled People’s Organizations (DPOs), self-advocates and other civil society organizations, have been included in planning and implementation of project activities and the extent to which they benefited from the project activities

IX. Human rights

• To what extent have Dalit, ethnic minorities, women, and other disadvantaged and marginalized groups living with disabilities benefitted from the work of the project?
• To what extent has the project integrated Human Rights based approach in the design, implementation, and monitoring of the project? Have the resources been used in an efficient way to address Human Rights in the implementation (e.g. participation of targeted stakeholders, collection of disaggregated data etc.)?

5. Methodology:
The individual evaluator should propose a detail methodological framework in the inception report. The evaluation should undertake a quantitative and qualitative assessment. The consultant/evaluator will be responsible for designing and conducting the evaluation including proposing appropriate methodology, designing tools, developing questionnaire and other instruments for data collection and analysis. The consultant is responsible (but not limited) to:

• Desk review and review of all relevant project documentation including project documents, plans, progress report etc.
• In depth interviews to gather primary data from key stakeholders.
• Focus group discussion/consultation with project beneficiaries and other stakeholders.
• Field observations (keeping in mind the COVID-19 situations and protocols).
• Triangulation of various data sources to maximize the validity and reliability of the information.

6. Expected Outputs/ Key Deliverables

Key deliverables include:

• Inception report detailing the reviewer’s understanding of what is being evaluated, why it is being evaluated, and how (methodology) it will be evaluated. The inception report should also include a proposed schedule of tasks, evaluation tools, activities, and deliverables.
• **Evaluation matrix** that includes key criteria, indicators, and questions to capture and assess them.

• **Evaluation debriefing** - immediately after completion of data collection, the evaluator should provide preliminary debriefing and findings to the UNDP.

• **Draft Evaluation report** for review and comments.

• **Evaluation Audit Trail** – The comments on the draft report and changes by the evaluator in response to them should be retained by the consultant to show how the comments were addressed.

• **Final report** within stipulated timeline with sufficient detail and quality by incorporating feedback from the concerned parties.

• An **exit presentation** on findings and recommendations.

7. **Consultant/expert required competencies**

An individual national consultant/evaluator is envisaged to undertake this final evaluation. He/she will be responsible for overall lead and management of the final evaluation. S/he should be responsible for ensuring a gender and social inclusion perspective is incorporated throughout the evaluation work and report.

**Major roles and responsibilities include:**

- Finalizing and designing the detailed scope and methodology for the evaluation
- Ensure GESI perspectives are incorporated throughout the evaluation process and final report
- Gathering and review of relevant documents
- Prepare inception report, evaluation matrix including the evaluation questions, data collection instruments, etc.
- Conduct field visits in selected communities and conduct interviews with the selected target groups, partners, and stakeholders
- Facilitate stakeholders’ discussion and focus groups to collect, collate and synthesize information
- Analyze the data and prepare a draft evaluation report in the prescribed format
- Incorporate the feedback and finalize the evaluation report
- Coordinate with UNDP CO for evaluation related information

**Qualification:**
At least a Master’s degree in social science, disability studies, gender studies, public administration, law, social science, international development cooperation or humanitarian action, or any other relevant subjects.

**Experience and competencies:**
- Proven demonstrated experience in designing and leading similar kinds of evaluation of development projects
- At least 5 years of work experience in formulation of programs/proposals, designing and conducting rigorous project assessments with both desk and field research on inclusion and preferably on disability issue.
- Adequate knowledge on gender responsive evaluation
- Excellent analytical and report writing skills in English,
• Strong knowledge and experience in national and international strategies, frameworks, and policies in relation to disability inclusion and human rights.
• Experience and knowledge of gender equality, intersectionality, and Sustainable Development Goals (SDGs)
• Knowledge of the regional and national political, cultural, and economic context and knowledge of the Convention on the Rights of Persons with Disabilities and experience in working with OPDs.
• A good understanding of development and/or humanitarian processes at country level, (including UN-led processes).
• Understanding of human rights-based approach and its application in project/programme design.

8. Evaluation ethics

“This evaluation will be conducted in accordance with the principles outlined in the UNEG ‘Ethical Guidelines for Evaluation’. The consultants must safeguard the rights and confidentiality of information providers, interviewees, and stakeholders through measures to ensure compliance with legal and other relevant codes governing collection of data and reporting on data. The consultant must also ensure security of collected information before and after the evaluation and protocols to ensure anonymity and confidentiality of sources of information where that is expected. The information knowledge and data gathered in the evaluation process must also be solely used for the evaluation and not for other uses without the express authorization of UNDP and partners.”

Consultants will be held to the highest ethical standards and are required to sign a Code of Conduct upon acceptance of the assignment.

9. Management and institutional arrangement

The principal responsibility for managing this evaluation resides with the UNDP CO in Nepal. The UNDP CO will contract the consultant and ensure the timely implementation of the evaluation. The evaluator will directly report to Evaluation Manager i.e. RBM Analyst in this case. The Evaluation Manager/RBM Analyst will assure smooth, quality and independent implementation of the evaluation with needful guidance from UNDP’s Senior Management. The project team will provide required information for evaluation in leadership of GESI Advisor. The project team will arrange all the field visits, stakeholder consultations and interviews as needed.

The consultant will maintain all the communication related to the evaluation through Evaluation Manager. The Evaluation Manager should clear each step of the evaluation. The final evaluation report will be signed off by DRR. The evaluation team will be briefed by UNDP upon arrival on the objectives, purpose and scope of the Final evaluation.

The evaluation will remain fully independent. A mission wrap-up meeting during which comments from stakeholders including others participating UN agencies will be collected for incorporation in the final report.
10. Time frame

The evaluation is expected to start in January 2022 for an estimated duration of 20 days. This will include desk reviews, primary information collection, field work, and report writing.

<table>
<thead>
<tr>
<th>Planned Activities</th>
<th>Tentative Days</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Desk review and preparation of design (home based)</td>
<td>2 days</td>
<td></td>
</tr>
<tr>
<td>Finalizing design, methods &amp; inception report and sharing with reference group for feedback (home based)</td>
<td>2 days</td>
<td>UNDP needs at least 3 days to review and provide feedback on the inception report</td>
</tr>
<tr>
<td>Stakeholders’ meetings and interviews in Field and Kathmandu (Virtual and/or field base)</td>
<td>8 days</td>
<td></td>
</tr>
<tr>
<td>Analysis, preparation of draft report and shares for review</td>
<td>5 days</td>
<td></td>
</tr>
<tr>
<td>Incorporate suggestions and comments to finalize the report and submit final report to UNDP</td>
<td>3 days</td>
<td>UNDP needs at least 10 days to review and finalize the report</td>
</tr>
<tr>
<td>Total</td>
<td>20 days</td>
<td></td>
</tr>
</tbody>
</table>

11. Use of evaluation report

The findings of the evaluation will be used to analyze the lessons learned and design future interventions. Therefore, the evaluation report should provide critical findings and specific recommendations for future interventions.

12. Copyright of Publication and Production of Materials

All data, information and product received for this assignment are to be treated confidentially and are only to be used in connection with the execution of these Terms of Reference. UNDP will have the copyright of all developed products and reports under this ToR and the consultant will not have any right to publish or share them in full or in part in any form.

13. Annexes

(i) List of relevant documents: Project Documents, Concept papers submitted to donors, Annual Work Plans, Annual Progress Reports, LVGs, meeting minutes, Donor Reports, Financial Reports, Knowledge products etc.

(ii) List of key agencies, stakeholders and partners for review

**UN agencies**
• UNDP
• WHO
• UNWOMEN
• UNFPA

**Stakeholders:**
• Provincial ministries
• Relevant local governments
• Federal and local chapters of OPDs
• NFDN, NDWA and NIDA etc.

(iii) Inception Report Contents Outline
(iv) Evaluation matrix
(v) Format of the evaluation report
(vi) Evaluation Audit Trial Form
(vii) UNEG Code of Conduct

*Note: UNDP is committed to achieving diversity within its workforce, and encourages all qualified applicants, irrespective of gender, nationality, disabilities, sexual orientation, culture, religious and ethnic backgrounds to apply. All applications will be treated in the strictest confidence.*
### Key questions: Relevance

<table>
<thead>
<tr>
<th>Data sources</th>
<th>Data collection methods/ tools</th>
<th>Indicators/ success standards</th>
<th>Methods for data analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td>• To what extent the project was able to contribute to the policy environment – including the data, capacity development, other enabling factors on rehabilitation etc. for the rights of persons with disabilities in targeted province?</td>
<td>In-depth Interview with OPD leaders in Province, FGD with relevant implementing partners and Project reports of UN agencies. Project steering committee (FGD), Project reports of partners.</td>
<td>• Sudurpachim province Government Access the Information and Statistical Data of persons with disabilities established by Aawaaz project and facilitated social and health services.</td>
<td>Quantitative and Qualitative data triangulation</td>
</tr>
<tr>
<td>• Was the strategy adopted, project interventions and inputs identified, realistic, appropriate, and adequate for achievement of the results?</td>
<td>primary/ secondary (project reports, drafted policy, news publication)</td>
<td>Gender and disability responsive policies drafted in local level</td>
<td></td>
</tr>
<tr>
<td>• Does the Programme continue to be relevant to the GoN and UN priorities?</td>
<td>• Aawaz project supported the Governments’ commitments towards SDG</td>
<td>• The re-purposed intervention address the emerging need of persons with disabilities in response and recovery of Covid-19.</td>
<td></td>
</tr>
<tr>
<td>• To what extent the re-purposed project activities for immediate COVID-19 response are relevant to meet the local needs?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Key questions: Coherence

<table>
<thead>
<tr>
<th>Data sources</th>
<th>Data collection methods/ tools</th>
<th>Indicators/ success standards</th>
<th>Methods for data analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td>• To what extent the intervention is coherent with Government’s policies? And program?</td>
<td>primary/ secondary (project reports/ Government reports/ UN partner agencies reports) KIlis</td>
<td>The concluding observation given by CRPD committee on the primary report for Nepal contributed the SDGs localization in Sudurpachim province. The project is coherent with the UNDAF 2018-2022 and helped strengthening the implementation of GESI framework developed by donors group.</td>
<td>Quantitative and Qualitative data triangulation</td>
</tr>
<tr>
<td>• To what extent the intervention addressed the synergies and interlinkages with other interventions carried out by UN and other development partners?</td>
<td>FGD with four UN partner agencies, Project steering committee in province and federal level/ in-depth interview with Gos</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Key questions: Effectiveness

<table>
<thead>
<tr>
<th>Data sources</th>
<th>Data collection methods/ tools</th>
<th>Indicators/ success standards</th>
<th>Methods for data analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td>• What extent the project activities were delivered effectively in terms of quality, quantity, and timing?</td>
<td>primary/ secondary (project report/ UN</td>
<td>Project help ensuring services in gender-sensitive manner by capacity building of OPDs in promoting human rights,</td>
<td>Quantitative and Qualitative</td>
</tr>
<tr>
<td>• Were there any unintended positive or negative results?</td>
<td>In-depth Interview with Women led OPDs FWDN/</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
- Are the strategies and tools used in programme implementation effective?
- What were the lessons and how were feedback/learning incorporated in the subsequent process of planning and implementation?
- How effective was the project in integrating the GESI concerns in its approach?
- To what extent the project contributes to the Sustainable Development Goals, the agenda 2030.
- What is the assessment the effectiveness of the multi-stakeholder approach, including the ways in which the joint UN action was complementary and the role and contributions of partners and stakeholders, including organizations of persons with disabilities and government agencies?

<table>
<thead>
<tr>
<th>Key questions: Efficiency</th>
<th>Data sources</th>
<th>Data collection methods/ tools</th>
<th>Indicators/ success standards</th>
<th>Methods for data analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the Programme cost-effective i.e. could the expected results have been achieved at lower costs by adopting a different approach and/or using alternative delivery mechanisms?</td>
<td>primary/ secondary (project report of implementing partners/ comprehensive report of UN Partner Agencies KII)</td>
<td>FGD with UN partner agencies/ Implementing, OPDs/ Steering committee</td>
<td>The resources allocated and managed efficiently during the project activities.</td>
<td>Quantitative and Qualitative data triangulation</td>
</tr>
<tr>
<td>To what extent was the fund flow mechanism (Micro Capital Grant, Letter of Agreement, Low Value Grant Agreement and Responsible Party Agreement) appropriate?</td>
<td></td>
<td></td>
<td>The resource needed for networking and partnerships between OPDs and CSOs? is effectively executed and achieved result.</td>
<td></td>
</tr>
<tr>
<td>Were efficient mechanisms adopted to leverage the resources to community?</td>
<td></td>
<td></td>
<td>There are several added value of the Aawaaz project? and created value for money with effective and result orientated project result.</td>
<td></td>
</tr>
<tr>
<td>How did AAWAZ’s financial management processes and procedures affect programme implementation?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- Services are provided to persons with disabilities in Covid-19 recovery and response plan.
- Provincial Working Group on Disability are functional as provincial coordination mechanism relating persons with disabilities
- UN partner’s project address the multiple forms of discrimination faced by persons with disabilities.
- Policy are in place to protect persons with disabilities from the discrimination in gender, caste, ethnicity, sexual orientation and gender identity.
- The draft Policy on Persons with Disabilities in Sudurpachim province follows CRPD and National Policy and Plan of Action on Disability (NPPAD) is in place.
- Budget allocation in disability sector in local and provincial level is increasing by the advocacy efforts of OPDs, also disability issue addressed in the Census 2021.

Key questions: Efficiency

<table>
<thead>
<tr>
<th>Data sources</th>
<th>Data collection methods/ tools</th>
<th>Indicators/ success standards</th>
<th>Methods for data analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td>primary/ secondary (project report of implementing partners/ comprehensive report of UN Partner Agencies KII)</td>
<td>FGD with UN partner agencies/ Implementing, OPDs/ Steering committee</td>
<td>The resources allocated and managed efficiently during the project activities.</td>
<td>Quantitative and Qualitative data triangulation</td>
</tr>
</tbody>
</table>
- To what extent the joint programme approach was effective and efficient in achieving the intended results?

- The project financial mechanism effective for the Capacity building of OPDs and Women led organisations.

- The project intervention contributes to build on existing programmes by the four partner UN agencies, one-stop center in Gandaki province provide value for money.

<table>
<thead>
<tr>
<th>Key questions: Sustainability</th>
<th>Data sources</th>
<th>Data collection methods/ tools</th>
<th>Indicators/ success standards</th>
<th>Methods for data analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td>To what extent are the benefits of the programme likely to be sustained after the completion of AAWAAZ?</td>
<td>primary/ secondary (project report) KII</td>
<td>FGD with UN partner agencies/ Implementing OPDs. In-depth interview with implementing OPDs (NFDN, NDWA, FWDo, Koshish/ INF/ GPH)</td>
<td>The engagement of OPDs contributed for sustainability of project result. Project created the conditions for scalability of results and successful approaches beyond project. The process of drafting local level policy on persons with disabilities replicated in other provinces. The one-stop-centre of Gandaki Province contribute for policy development engaging OPDs during drafting the local policy related persons with disabilities. Main risks for sustaining the results is political instability, weak implementation of adopted policy and low allocation of Budget by the Government towards persons with disabilities.</td>
<td>Quantitative and Qualitative data triangulation</td>
</tr>
<tr>
<td>How effective are the exit strategies and approaches to phase out assistance provided by the programme including contributing factors and constraints?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>What are the key factors that will require attention to improve prospects of sustainability of the Programme result and the potential for replication of the approach?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>How are capacities strengthened at the individual and organizational level (including contributing factors and constraints)?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Describe the main lessons that have emerged.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Key questions: Impact</th>
<th>Data sources</th>
<th>Data collection methods/ tools</th>
<th>Indicators/ success standards</th>
<th>Methods for data analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td>To what extent the project outputs were achieved and what were the contribution, if any, to outcome level results?</td>
<td>primary/ secondary (project report)</td>
<td>In-depth interview with local authority in SP/</td>
<td>The newly elected local representatives are capacitated to understand the pertinent issue of persons with disabilities</td>
<td>Quantitative and Qualitative data</td>
</tr>
<tr>
<td>To what extent can the program contribute capacity building, linking persons with disabilities with the local</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

69
<table>
<thead>
<tr>
<th>Key questions: Partnership</th>
<th>Data sources</th>
<th>Data collection methods/ tools</th>
<th>Indicators/ success standards</th>
<th>Methods for data analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have the ways of working with the partner and the support to the partner been effective and did they contribute to the project's achievements?</td>
<td>primary/secondary (project/policy documents report) KII</td>
<td>FGD with local OPDs in Province/In-depth interview with NFDN/UNFPA.</td>
<td>OPDs aware about the Data collected by Aawaz project and use it for advocacy purposes.</td>
<td>Quantitative and Qualitative data triangulation</td>
</tr>
<tr>
<td>How has been the partnership with national/local partners including coordination at federal level, provincial level, local level, UN agencies, NFDN and other OPDs? Does it create synergies or difficulties? What type of partnership building mechanism is necessary for future partnership?</td>
<td>KII</td>
<td></td>
<td>The local Government consult with OPDs in Province 7 building partnership for mainstreaming strategies.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Key questions: Gender equality and social inclusion</th>
<th>Data sources</th>
<th>Data collection methods/ tools</th>
<th>Indicators/ success standards</th>
<th>Methods for data analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td>To what extent have the issues of gender equality and inclusion of marginalized communities been addressed in the design, implementation, and monitoring of the project?</td>
<td>primary/secondary (project report)</td>
<td>FGD with local Women led OPDs in Province/In-depth interview</td>
<td>The local level group of women with disabilities are engaged in the National and province level network of women with disabilities as the project contributed built capacity of duty bearers.</td>
<td>Quantitative and Qualitative data triangulation</td>
</tr>
<tr>
<td>To what extent the project approach was effective in promoting gender equality and social inclusion - particularly focusing on women and persons with disabilities?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
disabilities? OPT 1.2, Do Aawaaz project promote coordination, dialogue and discussion among disability related stakeholders to promote the principle of “nothing about us without us” and “leaving no one behind” OPT1.2?

- To what extent has the project promoted positive changes of women and marginalized communities focusing persons with disabilities? Were there any spillover effects?
- What is the assessment of extent to which the target beneficiaries, i.e., persons with disabilities with special regard to women with disabilities, Organizations of Persons with Disabilities (OPDs), self-advocates and other civil society organizations, have been included in planning and implementation of project activities and the extent to which they benefited from the project activities?

<table>
<thead>
<tr>
<th>Key questions: Human rights</th>
<th>Data sources</th>
<th>Data collection methods/ tools</th>
<th>Indicators/ success standards</th>
<th>Methods for data analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td>To what extent have Dalit, ethnic minorities, women, and other disadvantaged and marginalized groups living with disabilities benefitted from the work of the project?</td>
<td>Memorandum submitted by OPDs (project report) KIlS</td>
<td>In-depth interview with NFDN/ OPDs/ KOSHISH/ NIDWAN FGD with local OPDs in Province/ UN partner Agencies/</td>
<td>Women and girls are able to demand their rights and access responsive quality services in Province 7</td>
<td>Quantitative and Qualitative data triangulati on</td>
</tr>
<tr>
<td>To what extent has the project integrated Human Rights based approach in the design, implementation, and monitoring of the project? Have the resources been used in an efficient way to address Human Rights in the implementation (e.g. participation of targeted stakeholders, collection of disaggregated data etc.)?</td>
<td></td>
<td></td>
<td>Project help to take appropriate measures to ensure access for persons with disabilities to health services in gender-sensitive.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>The role of the organisations of women with disabilities in participation in public and political life is increased.</td>
<td></td>
</tr>
</tbody>
</table>
Tools for FGD and KII

Step: 1: Introduction
(10 Minutes)

1.1 Getting started (3 minutes)

Namaskar, we are from the consultant team of Awaaz project final evaluation under UNDP and are pleased to have you for this interview today. We are here to do an In-depth Interview for the Final Evaluation of the project. We are the Evaluators from UNDP and are pleased to have you for this discussion today. UNDP is doing final evaluation of “AAWAAZ” project and wish to do an in-depth interview. We would like to learn from you, and to understand about how you are engaged in policy formation for persons with disabilities, Women and Girls with disability at local level, enjoyment the services and inclusion in Covid-19 response and recovery intervention under Aawaaz project. We would also like to hear about the changes that were brought in your personal life or in the community. We want to see the parameters of quality of life after execution of this project that you are realizing. This will help us to evaluate the project impact and also design further program for Enjoyment of human rights and participation in society in the future.

Please tell us your full name, age, disability, occupation and your education, and let us know if you want to participate in this discussion and that it will be okay to record your reflections and suggestions.

1.2 Informed Consent (Verbal– 2 minutes):

I understood well the provided information by evaluation team members. We had a chance to ask questions and any questions we have raised were clarified. We prove voluntarily our verbal consent to record the discussion and use information provided by us only for the Final evaluation purposes.

1.3 Attendance: (within the interview)

<table>
<thead>
<tr>
<th>Name of Interviewee:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Place:</td>
</tr>
<tr>
<td>Date:</td>
</tr>
<tr>
<td>Start Time:</td>
</tr>
<tr>
<td>End Time:</td>
</tr>
<tr>
<td>Name of Interviewer:</td>
</tr>
<tr>
<td>Name of Observer:</td>
</tr>
<tr>
<td>Interview Code</td>
</tr>
</tbody>
</table>

Step: 2 – Discussion
(30 minutes)
Use the interview questions for specific individual (Persons with Disabilities, Children with Disabilities or parents), HR victims, and administer the following open-ended questions:

Relevance:

1. Are the social services interventions including the social and health insurance scheme in place? OPT1.3,
2. Are the policies drafted in local level, gender and disability responsive? OPT1.3,
3. Do the drafted policy specifically address 1) right to health, 2) right to participation in public and political life, and 3) right to information? OPT1.3,
4. How much the Aawaz project supported the Governments’ commitments towards 2030 Agenda for Sustainable Development to ‘leave no one behind’?
5. How did the re-purposed intervention address the emerging need of persons with disabilities in response and recovery of Covid-19 and convened interventions of 4 UN partner agencies in local levels?

Coherence:

6. How does the Aawaaz project intervention contribute to the SDGs localization in Sudurpachim province?
7. Did the project build synergy in working with the National Human Rights Commission?

Effectiveness:

8. How the Aawaaz project help to take appropriate measures to ensure access to timely and quality services for persons with disabilities in gender-sensitive manner? OPT 1.2,
9. In your experience in working in building capacity of OPDs in promoting human rights, policy intervention and Covid-19 recovery and response, did you face any unintended positive or negative results?
10. Do Provincial Working Group on Disability exist? If yes, how do it functioning? Is it considered as a provincial coordination mechanism relating persons with disabilities? OPT1.3,
11. Which areas of the project need to be strengthened in future phases or future similar projects and how can this be done?
12. How the intersection of gender and social inclusion addressed in the project intervention? OPT1.2, How did the Aawaz project address the multiple forms of discrimination faced by persons with disabilities, including gender, caste, ethnicity, sexual orientation and gender identity? OPT1.2,
13. Do the draft Policy on Persons with Disabilities follows international human rights standards in Province 7? OPT1.3
14. Is National Policy and Plan of Action on Disability (NPPAD) is in place? What is the status of its drafting/ implementation? OPT1.3,
15. What is the trends of budget allocation in disability sector in local and provincial level? OPT1.3, How did the Aawaz project support advocacy efforts of OPDs to advocate for improved questions on disability in the Census 2021? OPT1.2,

Efficiency

73
16. What were the main resource needs of the project during the activation of the project steering committee in federal and Sudurpachim province? Were resources allocated and managed efficiently during this activity? Please explain your response, OPT 1.2.

17. What were the main resource needs of the project for networking and partnerships between OPDs and CSOs? In your opinion were resources allocated and managed efficiently during these activities? Please explain your response, OPT 1.2.

18. What has been the added value of the Aawaaz project? Has the project created value for money? Has it been managed efficiently? Please give examples to support your response.

19. Did the project financial mechanism effective for the Capacity building of OPDs and Women led organisations enhancing results achievement For Policy formation and implementation in Sudurpachim? Please explain your response, OPT 1.2.

**Sustainability**

20. What was the value added of the engagement of organisation of persons with disabilities in sustainability of Aawaaz project? Please explain your response, OPT 1.2.

21. How did the project create the conditions for scalability of results and successful approaches tested through project activities?

22. Are the process of drafting local level policy on persons with disabilities replicated in other provinces? OPT1.3,

23. Do you believe that the one-stop-centre of Gandaki Province contribute for policy development, guidelines and standard operating procedures for replication in other Provinces? OPT1.1,

24. Were Organisations of Persons with disabilities invited to consult during drafting the local policy related persons with disabilities? OPT1.2,

25. What are the main risks for sustaining the results of the project moving forward? How, if at all, did the project manage risk and unforeseen challenges during the advocacy intervention for policy change in Sudurpachim? OPT 1.3,

26. What is the structure of project steering committee? Is it in function? What is its role? OPT1.2,

27. To further validate the Theory of Change, how the findings of both primary and secondary information and data can be used in triangulation of the analysis? OPT 1.2.

**Impact:**

28. Did the newly elected local representative’s capacitated to understand the pertinent issue of persons with disabilities from Human rights prospective? OPT1.2, In which area, the effort of Aawaaz project on capacity development of OPDs specifically concentrated? OPT1.2,

29. Do you believe that the Aawaaz project intervention contributed establishing networks between OPDs and other civil society organisations? If yes, how? And if not, why? OPT1.2,

30. How did the Aawaaz project intervention support persons with disabilities to participate in public and political life? OPT1.2,
31. How persons with psychosocial disabilities build their capacity by the project intervention? OPT1.2,
32. How do the Aawaaz project intervention support Essential Services Package on Violence Against Women, Access to Justice Programme? OPT1.2,
33. What was the function and result of one-stop-centre of Gandaki Province particularly during Covid-19 pandemic?
34. Based on your engagement in the project to date, what are the main lessons that have been emerging, and what are your recommendations for future project phases?, What is your perception on the institutional capacity building by the Aawaaz project on leadership and policy advocacy, fostering citizens engagement and accountability? OPT1.2,
35. For what purpose, the Data of persons with disabilities established by Aawaz project is being utilized by OPDs? Or Local levels? Or by the concerned stakeholders? OPT1.1,
36. How do the four partner UN agencies enhance voice and participation of women and girls with disabilities on their agenda? OPT1.2,

**Partnership:**
37. Are the OPDs aware about the Data collected by Aawaz project? If yes, do they use it for advocacy purposes? OPT1.1,
38. How often the local Government consult with OPDs in Province 7? OPT1.1,
39. How did the Aawaaz project mix targeting and mainstreaming strategies in order to generate structural transformation of partnership amongst OPDs and its network in National and Sudurpachim province? OPT1.3,

**Gender equality and Social Inclusion**
40. Do the local level group of women with disabilities engaged in the National and province level network of women with disabilities? If yes, what are they? OPT1.2,
41. Do you believe that the Aawaaz project contributed built capacity of duty bearers (Mayor, Deputy Mayor, Judiciary Committee) to fulfil their obligations by supporting the participatory development of an evidence-based gender-responsive Disability Policy? If yes, how? And if not, why? OPT1.2,
42. How do women and girls are able to demand their rights and access responsive quality services in Province 7? OPT1.2,
43. How the Aawaaz project help to take appropriate measures to ensure access for persons with disabilities to health services that are gender-sensitive? OPT1.2,
44. How do you define the role of the organisations of women with disabilities in participation in public and political life? OPT1.2,

**Human rights**
45. How does the project create the conditions for the long-term sustainability of the project results by mainstreaming persons with disabilities representing cross-section in the society? OPT1.2,
46. Do you think that the Aawaaz project supported in strengthening voice and networks of OPDs to address stigma and discrimination in province 7? If yes, why? And if not, why not? OPT1.2,
47. How did the Aawaaz project support ensuring health centres follow universal design, and providing information about services in accessible formats? OPT1.2,  
48. Are there any further comments or suggestions you wish to make?  

Thank you
Annex-4: List of consulting persons in FGD

<table>
<thead>
<tr>
<th>S.N.</th>
<th>Name and position of representative</th>
<th>Name of Agency (OPD/partner/RM/Government Entity)</th>
<th>Gender</th>
<th>Disability (If any)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Aakash Lohar</td>
<td>Sign Language Interpreter, MoSD/SP</td>
<td>M</td>
<td>None</td>
</tr>
<tr>
<td>2</td>
<td>Anita Bhujel</td>
<td>Programme Focal Point, JURI-Nepal</td>
<td>F</td>
<td>None</td>
</tr>
<tr>
<td>3</td>
<td>Anita Budhaair</td>
<td>Dhangadi Metropolitan</td>
<td>F</td>
<td>None</td>
</tr>
<tr>
<td>4</td>
<td>Anjana KC</td>
<td>CIL-Pokhara (PA)</td>
<td>F</td>
<td>Physical</td>
</tr>
<tr>
<td>5</td>
<td>Bhawendra Singh</td>
<td>Secretary, NFDN, Sudurpaschim Province</td>
<td>M</td>
<td>Blind</td>
</tr>
<tr>
<td>6</td>
<td>Bhim B. Shah</td>
<td>OPD/ ILC, Kailali</td>
<td>M</td>
<td>Wheelchair/Physical</td>
</tr>
<tr>
<td>7</td>
<td>Bishnu Giri</td>
<td>Coordinator, INF. Nepal-GPH</td>
<td>M</td>
<td>None</td>
</tr>
<tr>
<td>8</td>
<td>Bishnu Maya Poudel</td>
<td>WCO, PKr. Metropolitan</td>
<td>F</td>
<td>None</td>
</tr>
<tr>
<td>9</td>
<td>Dan Bahadur Sunar</td>
<td>Legal Officer, MoSD/SP</td>
<td>M</td>
<td>None</td>
</tr>
<tr>
<td>10</td>
<td>Dandapani Dhakal</td>
<td>Apangata Maitri Samaj Gandaki</td>
<td>M</td>
<td>Blind</td>
</tr>
<tr>
<td>11</td>
<td>Devi Ram Jaisi</td>
<td>Beneficiary, OPD/ Bhajani municipality-3</td>
<td>M</td>
<td>Physical</td>
</tr>
<tr>
<td>12</td>
<td>Devi Sharma</td>
<td>Women Development Assistant, MoST, GP</td>
<td>F</td>
<td>None</td>
</tr>
<tr>
<td>13</td>
<td>Dharma Ojha</td>
<td>NDO, Dhangadi Metropolitan</td>
<td>M</td>
<td>None</td>
</tr>
<tr>
<td>14</td>
<td>Durgamaya Timilsina</td>
<td>DIDA-Nepal</td>
<td>F</td>
<td>None</td>
</tr>
<tr>
<td>15</td>
<td>Fanindra Prasad</td>
<td>CDS(Pokhara) Kaski</td>
<td>M</td>
<td>Blind</td>
</tr>
<tr>
<td>16</td>
<td>Gaurilal Parki</td>
<td>Treasurer-NFDN, Sudurpaschim Province</td>
<td>M</td>
<td>Blind</td>
</tr>
<tr>
<td>17</td>
<td>Giridhari Subedi</td>
<td>DIDA-Nepal</td>
<td>M</td>
<td>Blind</td>
</tr>
<tr>
<td>18</td>
<td>Hari Ram Chaudhary</td>
<td>OPD, Tribeni Disability Organisation member</td>
<td>M</td>
<td>Physical</td>
</tr>
<tr>
<td>19</td>
<td>Hem Bahadur Gurung</td>
<td>CIL-Pokhara (PA)</td>
<td>M</td>
<td>Wheelchair/Physical</td>
</tr>
<tr>
<td>20</td>
<td>Indra Bahadur Pavi</td>
<td>API Sport Club</td>
<td>M</td>
<td>Physical</td>
</tr>
<tr>
<td>21</td>
<td>Jamuna Paudel</td>
<td>Chief Women Development Officer, MOST, GP</td>
<td>F</td>
<td>None</td>
</tr>
<tr>
<td>22</td>
<td>Jamuna Poudel</td>
<td>NDWA Kaski</td>
<td>F</td>
<td>Physical</td>
</tr>
<tr>
<td>23</td>
<td>Joukala Kumari Sharki</td>
<td>Disability Focal Person, Bhajani Municipality</td>
<td>F</td>
<td>None</td>
</tr>
<tr>
<td>24</td>
<td>Kalpana Nepal Acharya</td>
<td>NHRC</td>
<td>F</td>
<td>None</td>
</tr>
<tr>
<td>25</td>
<td>Karuna Tamang Gurung</td>
<td>Physiotherapist, INF. Nepal-GPH</td>
<td>M</td>
<td>None</td>
</tr>
<tr>
<td>No.</td>
<td>Name</td>
<td>Organization/Role</td>
<td>Gender</td>
<td>Disability</td>
</tr>
<tr>
<td>-----</td>
<td>-------------------------------</td>
<td>--------------------------------------------------------</td>
<td>--------</td>
<td>--------------</td>
</tr>
<tr>
<td>26</td>
<td>Khadga Singh Gurung</td>
<td>INF. Nepal-GPH</td>
<td>M</td>
<td>Wheelchair/ Physical</td>
</tr>
<tr>
<td>27</td>
<td>Khom Raj Sharma</td>
<td>NFDN, Gandaki</td>
<td>M</td>
<td>Blind</td>
</tr>
<tr>
<td>28</td>
<td>Laxman Subedi</td>
<td>NAB Gandaki</td>
<td>M</td>
<td>Blind</td>
</tr>
<tr>
<td>29</td>
<td>Lok Bahadur Gurung</td>
<td>Deaf Blind Association Nepal</td>
<td>M</td>
<td>None</td>
</tr>
<tr>
<td>30</td>
<td>Matrika Devkota</td>
<td>Chair, Koshish</td>
<td>M</td>
<td>Psychosocial</td>
</tr>
<tr>
<td>31</td>
<td>Mitralal Sharma</td>
<td>Chair, NFDN</td>
<td>M</td>
<td>Visual Impaired</td>
</tr>
<tr>
<td>32</td>
<td>Nand Rajbhatta</td>
<td>API Sport Club</td>
<td>M</td>
<td>Physical</td>
</tr>
<tr>
<td>33</td>
<td>Nimpana Pokharel</td>
<td>OSRSC In Charge/ INF. Nepal-GPH</td>
<td>F</td>
<td>None</td>
</tr>
<tr>
<td>34</td>
<td>Nirmala Dhital</td>
<td>Chair, FWDN</td>
<td>F</td>
<td>Physical</td>
</tr>
<tr>
<td>35</td>
<td>Nita Bista</td>
<td>Project officer-NFDN, Sudurpaschim Province</td>
<td>F</td>
<td>None</td>
</tr>
<tr>
<td>36</td>
<td>Parbati Sharma</td>
<td>Project Focal point, NFDN</td>
<td>F</td>
<td>None</td>
</tr>
<tr>
<td>37</td>
<td>Pratima Gurung</td>
<td>Chair, NDWAN</td>
<td>F</td>
<td>Physical</td>
</tr>
<tr>
<td>38</td>
<td>Priya Khadka</td>
<td>Program Officer-NFDN, Sudurpaschim Province</td>
<td>F</td>
<td>None</td>
</tr>
<tr>
<td>39</td>
<td>Puspa Raj Rimal</td>
<td>Deafblind Association Nepal</td>
<td>M</td>
<td>Deafblind</td>
</tr>
<tr>
<td>40</td>
<td>Radha Devi B.K</td>
<td>PKr.Metropolitan</td>
<td>F</td>
<td>None</td>
</tr>
<tr>
<td>41</td>
<td>Raju Basnet</td>
<td>Chair, PFPID</td>
<td>M</td>
<td>Parent of ID boy</td>
</tr>
<tr>
<td>42</td>
<td>Renuka Gautam</td>
<td>PKr.Metropolitan</td>
<td>F</td>
<td>None</td>
</tr>
<tr>
<td>43</td>
<td>Riju Chukaha Chaudhary</td>
<td>GESI Focal person, Bhajani Municipality</td>
<td>F</td>
<td>None</td>
</tr>
<tr>
<td>44</td>
<td>Rupa Rai</td>
<td>Federal member,NFDN</td>
<td>F</td>
<td>Blind</td>
</tr>
<tr>
<td>45</td>
<td>Sangita Karki</td>
<td>CIL-Pokhara (PA)</td>
<td>F</td>
<td>None</td>
</tr>
<tr>
<td>46</td>
<td>Santosh P. Chaudhary</td>
<td>OPD, DHDSON, Kailali</td>
<td>M</td>
<td>Physical</td>
</tr>
<tr>
<td>47</td>
<td>Saraswati Adhikari</td>
<td>Police Insp, Dhangadi</td>
<td>F</td>
<td>None</td>
</tr>
<tr>
<td>48</td>
<td>Saraswati Budhathoki</td>
<td>Province Advocacy Coordinator (NFDN Sudurpaschim)</td>
<td>F</td>
<td>Physical</td>
</tr>
<tr>
<td>49</td>
<td>Shreekanta Sapkot</td>
<td>Kaski Association of Blind</td>
<td>M</td>
<td>Blind</td>
</tr>
<tr>
<td>50</td>
<td>Sisir Khanal</td>
<td>OPD/ NAB</td>
<td>M</td>
<td>Blind</td>
</tr>
<tr>
<td>51</td>
<td>Upendra Kadayat</td>
<td>President, NFDN (Sudurpaschim)</td>
<td>M</td>
<td>Physical</td>
</tr>
<tr>
<td>52</td>
<td>Urmila Bhatt</td>
<td>Accountant-NFDN, Sudurpaschim Province</td>
<td>F</td>
<td>None</td>
</tr>
</tbody>
</table>
### Annex-5: List of Key Informants Interviewees.

<table>
<thead>
<tr>
<th>S.N.</th>
<th>Name and position of representative</th>
<th>Name of Agency (OPD/partner/RM/ Government Entity)</th>
<th>Gender</th>
<th>Disability (If any)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Anita Bhujel</td>
<td>Programme focal point, JURI-Nepal</td>
<td>F</td>
<td>None</td>
</tr>
<tr>
<td>2</td>
<td>Anjana KC</td>
<td>CIL-Pokhara</td>
<td>F</td>
<td>Physical</td>
</tr>
<tr>
<td>3</td>
<td>Bishnu Maya Poudel</td>
<td>WCO, Pokhara, Metropolitan</td>
<td>F</td>
<td>None</td>
</tr>
<tr>
<td>4</td>
<td>Dan Bahadur Sunar</td>
<td>Legal officer, MoSD/ SP</td>
<td>M</td>
<td>None</td>
</tr>
<tr>
<td>5</td>
<td>Devi Ram Jaisi</td>
<td>Beneficiary, OPD/ Bhajani municipality-3</td>
<td>M</td>
<td>Physical</td>
</tr>
<tr>
<td>6</td>
<td>Dharma Ojha</td>
<td>NDO, Dhangadi Metropolitan</td>
<td>M</td>
<td>None</td>
</tr>
<tr>
<td>7</td>
<td>Jamuna Paudel</td>
<td>Chief women development officer, MOST, GP</td>
<td>F</td>
<td>None</td>
</tr>
<tr>
<td>8</td>
<td>Khadga Singh Gurung</td>
<td>INF. Nepal-GPH</td>
<td>M</td>
<td>Wheelchair/ Physical</td>
</tr>
<tr>
<td>9</td>
<td>Khom Raj Sharma</td>
<td>NFDN, Gandaki</td>
<td>M</td>
<td>Blind</td>
</tr>
<tr>
<td>10</td>
<td>Matrika Devkota</td>
<td>Chair, Koshish</td>
<td>M</td>
<td>Psychosocial</td>
</tr>
<tr>
<td>11</td>
<td>Khadak Bohara</td>
<td>OPD, Badikedar Municipality</td>
<td>M</td>
<td>Low Vision</td>
</tr>
<tr>
<td>12</td>
<td>Nand Rajbhatta</td>
<td>API Sport Club</td>
<td>M</td>
<td>Physical</td>
</tr>
<tr>
<td>13</td>
<td>Nimpana Pokharel</td>
<td>OSRSC In Charge/ INF. Nepal-GPH</td>
<td>F</td>
<td>None</td>
</tr>
<tr>
<td>14</td>
<td>Nirmala Dhital</td>
<td>Chair, FWDN</td>
<td>F</td>
<td>Physical</td>
</tr>
<tr>
<td>15</td>
<td>Parbati Sharma</td>
<td>Project Focal point, NFDN</td>
<td>F</td>
<td>None</td>
</tr>
<tr>
<td>16</td>
<td>Pratima Gurung</td>
<td>Chair, NDWAN</td>
<td>F</td>
<td>Physical</td>
</tr>
<tr>
<td>17</td>
<td>Radha Devi B.K</td>
<td>Pokhara.Metropolitan</td>
<td>F</td>
<td>None</td>
</tr>
<tr>
<td>18</td>
<td>Raju Basnet</td>
<td>Chair, PFPID</td>
<td>M</td>
<td>Parent of ID boy</td>
</tr>
<tr>
<td>19</td>
<td>Riju Chukaha Chaudhary</td>
<td>GESI Focal person, Bhajani Municipality</td>
<td>F</td>
<td>None</td>
</tr>
<tr>
<td>20</td>
<td>Saraswati Budhathoki</td>
<td>Province Advocacy Coordinator (NFDN Sudurpaschim)</td>
<td>F</td>
<td>Physical</td>
</tr>
<tr>
<td>21</td>
<td>Upendra Kadayat</td>
<td>President, NFDN (Sudurpaschim)</td>
<td>M</td>
<td>Wheelchair/ Physical</td>
</tr>
</tbody>
</table>
### Annex-6: Budget Utilization status

<table>
<thead>
<tr>
<th>UN Partner Agencies</th>
<th>Grant received from UNPRPD (USD)</th>
<th>Expenditure (USD)</th>
<th>Total Expenditure (USD)</th>
<th>Self-expenditure</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Through NGO partners/direct</td>
<td>Through OPD partners</td>
<td>OPD through third party</td>
</tr>
<tr>
<td>UNDP</td>
<td>176,505</td>
<td>90,842</td>
<td>85,663</td>
<td>176,505</td>
</tr>
<tr>
<td>WHO</td>
<td>150,000</td>
<td>101,776</td>
<td>43,359.04</td>
<td>4865</td>
</tr>
<tr>
<td>UN Women</td>
<td>100,000</td>
<td>70309</td>
<td>19961</td>
<td>9730</td>
</tr>
<tr>
<td>UNFPA</td>
<td>NR 100000</td>
<td>NR93569</td>
<td>NR 6431</td>
<td>NR</td>
</tr>
<tr>
<td><strong>Total Grant</strong></td>
<td><strong>526,505</strong></td>
<td><strong>356,496</strong></td>
<td><strong>155,414</strong></td>
<td><strong>14,595</strong></td>
</tr>
</tbody>
</table>

Source: E-mail communication with UN Partner Agencies.
Evaluation Consultants Agreement Form

To be signed by all consultants as individuals (not by or on behalf of a consultancy company) before a contract can be issued.

Agreement to abide by the Code of Conduct for Evaluation in the UN System, 2008

Name of Consultant: Dr. Birendra Raj Pokharel

Name of Consultancy Organisation (where relevant): Independent Evaluator and Consultant

I confirm that I have received and understood and will abide by the United Nations Code of Conduct for Evaluation in the US System, 2008.

Signed at (Place) on (date): 12th February, 2022, Kopundole, Lalitpur

Signature: