

ANNEX 1. TERMS OF REFERENCE

1. INTRODUCTION

The Independent Evaluation Office (IEO) of the United Nations Development Program (UNDP), the Evaluation Office of the United Nations International Children's Emergency Fund (UNICEF) and the Evaluation Office of the United Nations Population Fund (UNFPA) will jointly conduct a Common Country Programme Evaluation (CCPE) of the Cape Verde Common Country Programme to capture and demonstrate evaluative evidence of the joint office's contributions to development results at the country level, as well as the effectiveness of their organizations' strategy in facilitating and leveraging national effort for achieving development results. In Cape Verde, these three agencies operate under a Joint Office modality, which entails a single Common Country Programme Document (CCPD), delivered jointly by the three agencies.

The current Cabo Verde CCPD covers the period 2018-2022 and was approved during the first regular session of UNDP and UNFPA Board January 2018 and First Regular session of the UNICEF Board in February 2018. The country programme was developed in collaboration with development partners in support of the SDGs and aligned with the UNDAF 2018-2022.

The Programme components respond directly to strategic priorities of the National Strategic Plan (PEDS, Plano Estratégico de Desenvolvimento Sustentável, 2017-2021) highlighted in the social, economic and sovereignty pillars, and to UNDAF outcomes. The CCCPD 2018-2022 pursue four priorities, in support of government partners in achieving the SDGs.

2. NATIONAL CONTEXT

The Republic of Cape Verde consists of ten islands and several islets located in the Central Atlantic Ocean. The arable land covers only 10 percent of the territory¹. With an estimated population of 556,000 in 2020², Cape Verde's population is young, with 28.1 percent below 14 years old, and 26.2 percent between 10 and 24 years old³.

Despite its structural economic vulnerability due to its isolated and fragmented territory, Cape Verde presented a sound socio-economic performance during the last decade. In 2008, Cape Verde graduated from the least-developed country category becoming a middle-income country⁴. However, in the 2009-2015 period, the country's economic growth slowed down due to the global financial crisis⁵. Since 2016, Cape Verde's economy started to recover. In 2019, the country reached a gross national income per

¹ Country Brief, Cape Verde, FAO. <http://www.fao.org/giews/countrybrief/country.jsp?code=CPV>

² UN data, Cape Verde. <https://data.un.org/en/iso/cv.html>

³ World Population Dashboard, Cape Verde, UNFPA. <https://www.unfpa.org/data/world-population/CV>

⁴ Cape Verde, A Success Story, African Development Bank, 2012.

⁵ Cape Verde overview, The World Bank. <https://www.worldbank.org/en/country/caboverde/overview>

capita of \$3,527⁶, and was categorized in the medium human development category (ranked 126th out of 189 countries)⁷.

Cape Verde is a service-oriented economy with dependence on tourism, commerce, transport, and public services accounting for about three-fourth of its GDP. By virtue of its economic activity, Cape Verde achieved a real GDP growth at 5 percent in 2019⁸. Despite its economic strides, poverty, unemployment, insufficient economic diversification, foreign direct investment, and migrant's remittances constitute a challenge for the country. Approximately 30.3 percent of the population is poor, and 10.2 percent is extremely poor⁹. In 2020, unemployment was approximately 12 percent of the labour force¹⁰ affecting particularly young people (25.7 percent) and women (11.9 percent)¹¹. Also, in 2019 Cabo Verde has registered medium human development with a Human Development Index at 0.665 in 2019, a marginal increase from its value of 0.660 in 2017¹². Inequality has decreased according to the Gini index from 53 in 2001 to 42 in 2015¹³. Life expectancy is 73 years, the highest in Sub-Saharan Africa and on a par with Mauritius and Seychelles¹⁴.

Considering these challenges, the government is supporting micro, small, and medium enterprises, and promoting entrepreneurship through start-ups programs targeted to the youth and female population¹⁵. In addition, the government, implemented the Cape Verde's Strategic Plan for Sustainable Development (PEDS, 2017-2021) and the Ambition 2030 National Strategy, which aim to transform the country in an ocean-based circular economy in the Mid-Atlantic through the diversification of its economic activities and access of export markets¹⁶.

Women face additional challenges in the context of economic and social inequality, including gender stereotypes, poverty, violence, and political participation. The Gender Inequality Index ranks Cape Verde at the 89th position out of 162 countries¹⁷. In the 2020 Global Gender Gap Report, the country ranks 52 out of 153 countries¹⁸. Violence is a systemic issue in Cape Verde. Intimate partner violence, sexual harassment, feminicide, and trafficking of women and girls have been the main forms of violence in the last years. In addition, women in Cape Verde are politically underrepresented. In 2020, only 25 percent of seats were held by women in national parliaments¹⁹. In the field of health, for every 100,000 live

⁶ UN data, Per capita GNI at current prices (US \$), Cape Verde.

<http://data.un.org/Data.aspx?q=Cape+Verde&d=SNAAMA&f=grID%3A103%3BcurrID%3AUSD%3BpcFlag%3A1%3BcrID%3A132>

⁷ UNDP, Human Development Report, Human Development Index, 2019.

⁸ Cape Verde Economic Outlook, African Development Bank. <https://www.afdb.org/en/countries/west-africa/cabo-verde/cabo-verde-economic-outlook>

⁹ Institute of Statistics of Cabo Verde (INECV), Demographic projections 2010-2030, 2019

¹⁰ UN data, Cape Verde. <https://data.un.org/en/iso/cv.html>

¹¹ Country Office Annual Report 2019, Cape Verde, UNICEF. [https://www.unicef.org/about/annualreport/files/Cabo-Verde-2019-COAR\(1\).pdf](https://www.unicef.org/about/annualreport/files/Cabo-Verde-2019-COAR(1).pdf)

¹² <http://hdr.undp.org/en/indicators/137506>

¹³ The World Bank, Gini Index. <https://data.worldbank.org/indicator/SI.POV.GINI?locations=CV>

¹⁴ The World Bank, Life Expectancy. <https://data.worldbank.org/indicator/SP.DYN.LE00.IN?locations=CV-MU-SC>

¹⁵ Voluntary National Report on the Implementation of the 2030 Agenda for Sustainable Development, Cape Verde, June 2018.

¹⁶ Strategic Plan for Sustainable Development (PEDS, 2017-2021), Government of Cape Verde.

<https://caboverde.un.org/sites/default/files/2020-02/PEDS%202017-2021%20-%20Vers%C3%A3o%20Final.pdf>

¹⁷ UNDP, Human Development Report, Gender Inequality Index, 2019.

¹⁸ World Economic Forum, Global Gender Gap Report 2020. http://www3.weforum.org/docs/WEF_GGGR_2020.pdf

¹⁹ Proportion of seats held by women in national parliaments, Cape Verde.

<https://data.worldbank.org/indicator/SG.GEN.PARL.ZS?locations=CV>

births, 58 of women died from pregnancy related causes²⁰ and infant mortality was 13 in 2019²¹. The Cape Verdean population is young, with an average of 28.3 years in 2016²², highlighting the need to focus on adolescent and youth health, particularly sexual and reproductive health. Furthermore, social and regional inequalities persist in access to quality health services, including antenatal and perinatal care. In consideration of these issues, the government developed the National Gender Equality Plan (2019-2021) and the Gender Marker for the State Budget²³.

On 28 March 2020, owing to the outbreak of the COVID-19 pandemic, the government of Cabo Verde declared a State of Emergency, which decreed the cessation of all non-essential services, travel, gatherings, and schools. In light of the link of Cape Verde's economic development to globalization, the country is one of the most affected by the COVID-19 pandemic. Real GDP in 2020 is projected to decrease between 5 and 8 percent due to a 61.6 percent decline in tourism revenues, profit losses in fisheries, and passive manufacturing, transport, and logistics activities²⁴. Reduced private domestic investment, diminished foreign direct investment, and shrunk remittances have also hit the economy²⁵. As a result, it is estimated that the unemployment rate will increase to 19 percent, affecting mostly the informal sector and women²⁶. The government estimates that the country needs at least US\$150 million to overcome the effects of the pandemic²⁷. In this context, the government has appealed to the international community. The International Monetary Fund²⁸, the World Bank, and the European Union have responded to this appeal²⁹. The health sector has been vulnerable due to the shortage of medical staff and equipment. Cape Verde's current health expenditure is 5.2 percent of GDP close to Africa's average (5.3 percent)³⁰. A total of 13,897 confirmed cases, and 131 deaths were reported in the country by the end of January 2021³¹.

Given the disproportionate impact of the pandemic, the United Nations, the World Bank, the African Development Bank, and the European Union conducted a joint post-crisis needs assessment (PCNA+) in support to the government. The PCNA+, technically led by UNDP, built on the post-disaster needs assessment (PDNAs) framework and methodology adapted to a health crisis³². The PCNA+ provides an overview of the country context in the pre-COVID-19 stage, and presents findings, and preliminary conclusions and recommendations on the impact of the crisis. The findings under four pillars (economic, social, environmental, and governance) highlight the need to create a more resilient and inclusive

²⁰ UNDP, Human Development Report, Gender Inequality Index, 2019.

²¹ UN Inter-agency Group for Child Mortality Estimation, 2019. Number per thousand live births

²² Cape Verde Government and UN. UNDAF 2018-2022. https://cabo-verde.un.org/sites/default/files/2020-01/UNDAF_FINAL_En.pdf

²³ Cape Verde National Report, Beijing+25 on the implementation of the Beijing Declaration and Platform for Action, Republic of Cape Verde, Cape Verdean Institute for Gender Equality and Equity, April 2019.

²⁴ African Economic Outlook 2020 Supplement, Amid COVID-19, African Development Bank.

²⁵ Socioeconomic Impact Assessment, COVID-19 PCNA+, Phase 1, Government of Cape Verde, United Nations Cape Verde.

²⁶ Cape Verde, International Monetary Fund Country Report No. 20/297, November 2020

²⁷ UNDP Regional Bureau for Africa, Cape Verde, Support to the National Response to Contain the Impact of COVID-19

²⁸ International Monetary Fund, Cape Verde. <https://www.imf.org/en/News/Articles/2020/04/22/pr20184-cabo-verde-imf-exec-board-approves-us-32m-disbursement-to-address-the-covid19-pandemic>

²⁹ UNDP Cape Verde, Support to the National Response to Contain the Impact of COVID-19

³⁰ African Economic Outlook 2020 Supplement, Amid COVID-19, African Development Bank.

³¹ COVID-19 Dashboard, Government of Cape Verde, National Institute of Public Health, UNDP, 29 January 2021. <https://covid19.cv/>

³² Socioeconomic Impact Assessment, COVID-19 PCNA+, Phase 1, Government of Cape Verde, United Nations Cape Verde.

society to “Build Back Better” or “Build Forward” through institutional change, sustainable financing, decentralization, and sector diversification³³. The zero draft of the PCNA+ has been the basis for the country’s National Response and Recovery Plan, which includes a long-term vision and objectives aligned to the SDGs, and short and medium-term actions supported by the government, the United Nations, and the World Bank³⁴.

Cape Verde is a stable democracy with strong democratic institutions and public governance transparency³⁵. In 2016, the opposition *Movimento para Democracia* took government, after the 15-year government under the *Partido Africano da Independência de Cabo Verde*. The next elections will be held the first half of 2021³⁶. According to Transparency International’s 2019 Corruption Perceptions Index, Cape Verde scored 58 points/100 and ranked 41 out of 180 countries in 2019³⁷. The government has been pioneering electronic governance since 1990 to improve the efficiency of public services delivery to citizens and businesses³⁸. To advance its digitalization and increase its global connectivity, Cape Verde launched its Digital Strategy (EDCV) in 2019. On the other hand, coverage and quality of justice services for women, youth, and children are still inadequate³⁹. Decentralization is an important area due to Cape Verde’s territorial fragmentation. Decentralization through the regionalization of the PEDS and the Strategic Municipal Plans for Sustainable Development aims to ensure the participation of local stakeholders to achieve effective distribution of economic opportunities across the country⁴⁰.

Cape Verde is considered one of the world’s 11 most endangered marine biodiversity centres at a global level⁴¹. As a Small Island Development State (SIDS) with volcanic origin, Cape Verde presents a vulnerable environment system. The country is exposed to natural hazards, including extreme weather, floods, landslides, earthquakes, and volcanic eruptions⁴². In addition, climate change, rainfalls, droughts, and soil degradation negatively impact biodiversity, access to water, agriculture, food security, and nutrition. As a result, Cape Verde imports more than 80 percent of food products⁴³. Moreover, the availability, affordability, and sustainability of water and energy hinders socio-economic advancement⁴⁴. Considering these challenges, the government is transitioning to a blue economy, which constitutes a crosscutting and evolving economic development model for environmental preservation and resilience to climate change⁴⁵.

With regard to child health, a reduction in infant mortality from 24.9 (2008) to 15.8 (2017) can be

³³ Ibid.

³⁴ National Response and Recovery Plan, COVID-19, Government of Cape Verde, United Nations Cape Verde.

³⁵ Cape Verde Country Strategy Paper (2019-2024), the African Development Bank.

³⁶ Overview, The World Bank in Cape Verde. <https://www.worldbank.org/en/country/caboverde/overview>

³⁷ Transparency International the global coalition against corruption. <https://www.transparency.org/en/cpi/2019/index/cpv>

³⁸ Cape Verde, The Mid-Atlantic Gateway to the world’s economy, Techub CV Sector, The Government of Cape Verde.

<https://peds.gov.cv/caboverdef4dev/wp-content/uploads/2018/12/TECHUB-CV-Sector-web.pdf>

³⁹ Common Country Programme Document for Cape Verde (2018-2022)

⁴⁰ Cape Verde Economic Outlook, African Development Bank. <https://www.afdb.org/en/countries/west-africa/cabo-verde/cabo-verde-economic-outlook>

⁴¹ Cape Verde, Blue Bond Note, West Africa Coastal Areas Management Program, The World Bank, July 2020

⁴² Cape Verde Emergency Preparedness and Response Diagnostic: Building a Culture of Preparedness, The World Bank.

⁴³ Voluntary National Report on the Implementation of the 2030 Agenda for Sustainable Development, Cape Verde, June 2018.

⁴⁴ Common Country Programme Document for Cape Verde (2018-2022)

⁴⁵ Cape Verde, Blue Bond Note, West Africa Coastal Areas Management Program, The World Bank, July 2020

observed. Perinatal infections continue to be the main causes of infant mortality, followed by congenital, infectious and parasitic anomalies which also suffered slight increases in the period.

The reduction in mortality in the 0-1-year range is an advance because it is the major component in terms of infant mortality (under 5 years), accounting for about 85 percent of deaths in this age group, especially in rural areas. With this, there has been a great reduction in the probability of a 1-year old child dying before reaching the age of 5 in Cape Verde, with mortality between 0-5 years of age falling from 28.1 in 2008 to 17.0 in 2018.

On the other hand, maternal mortality has fluctuated over the years. It should be noted that the small population of the country does not allow for a better sizing of the data, considering the denominator per 100,000. The improvement in these mortality indicators is partly related to free access to prenatal and vaccination services.

In the area of malnutrition, Cape Verde has made considerable progress, reflected in the reduction of the acute malnutrition rate from 5.2 percent (2009) to 4.4 percent (2018) and chronic malnutrition from 13.3 percent (2009) to 11.0 percent (2018). Still, one of the biggest challenges facing children under 5 in the field of nutrition is the high prevalence of anaemia, which affects 43 percent of children.

In the 2019/2020 school year, due to the COVID19 pandemic, about 24,644 pre-school children, 83,499 primary and lower secondary and 28,543 upper secondary, a total of 136,686, 67,727 girls were not in school between March 24 and September 30. In the country's capital, Praia, the return to school took place only in November. The students had two trimesters with evaluation and the third had administrative evaluation.

The finalization of the Child and Adolescent Protection Policy document and its action plan (2020-2021), aligned with the CRC constitute an important result achieved in 2019 and the formulation of a new national action plan to prevent and fight against sexual violence (2021 – 2023) in 2020. The reinforcement of ICCA's and other child protection stakeholders' capacities continued in 2020.

3. COMMON PROGRAMME STRATEGY IN CAPE VERDE

Relations between the Government of Cape Verde and the United Nations system were formalized in 1975. Cape Verde became the first pilot Joint Office of UNDP, UNICEF, UNFPA in 2006. The Joint Office is a unique model for the integration of United Nations programmatic and operational activities in a small country context within the framework of United Nations reform, enabling each agency to build on and complement the others' strengths; it is uniquely positioned to respond to the challenges of 2030 Agenda implementation and the Common Country Programme would function under an established governance process that preserves the mandates/core issues of all participating agencies⁴⁶. The system put in place, thus ensures that each of the UNFPA, UNICEF and UNDP programme mandates are reflected in a single

⁴⁶ Country programme document for Cabo Verde, 2018-2022 : Executive Board of the United Nations Development Programme, of the United Nations Population Fund and of the United Nations Office for Project Services, Executive Board of the United Nations Children's Fund DP/FPA/OPS-ICEF/CCPD/2018/CPV/1

Programme document and ensures the host government has access to each agency's technical expertise and services⁴⁷.

The Joint Office, which is led by the UN Resident Coordinator, has one organizational structure that entails the activities and mandates of the three participating agencies (UNDP, UNFPA, and UNICEF), and operates with a set of business processes, rules and regulations under a "support agency" arrangement⁴⁸. It was agreed among the agencies that UNDP would provide administrative, financial, and programmatic rules and procedures to the Joint Office, creating economies of scale for the representation of the three agencies⁴⁹. UNDP also provides technical assistance to national partners and their agencies' counterparts on issues related to public administration, employment, governance, environment, and climate change⁵⁰. Meanwhile, UNFPA and UNICEF provides technical expertise in sexual and reproductive health, social protection, gender equality and women's empowerment, gender-based violence, education, and children rights⁵¹. Hence, the diverse range of activities and projects of the three agencies allows the Joint Office to address the needs of the vulnerable population including children, women, and youth.

Uniquely positioned to respond to the challenges of the 2030 Agenda implementation through the jointness and simplification of activities, the Joint Office has a single Common Country Programme Document (CCPD) that serves as the primary unit of accountability to the Executive Boards of the three agencies⁵². The CCPD, which reflects the mandates of each participating agency (UNDP, UNICEF, and UNFPA) is guided by the United Nations Development Assistance Framework (UNDAF) for the period 2018-2022 and is aligned with the agencies' strategic plans. The CCPD's governance process that preserves the mandates of all participating agencies, ensures that Cape Verde government has access to each agency's technical expertise and services⁵³.

The CCPD responds to the priorities of the Cape Verde's Strategic Plan for Sustainable Development (PEDS 2017-2021), which is fully aligned with the SDGs and reflect a "national approach, with a focus on specific local interventions in selected municipalities, and a lifecycle approach, with adolescents, youth and women as the primary target groups, together with children and their caregivers"⁵⁴.

The programme, as defined in the 2018-2022 CCPD, addresses five outcomes, structured around the following thematic areas⁵⁵:

⁴⁷ Summary Brief on the Cape Verde Joint Office model, United Nations Development Operations Coordination Office, March 2016

⁴⁸ Ibid

⁴⁹ Final Evaluation of the Common Country Programme Document from UNDP, UNFPA, and UNICEF, Cape Verde, Gesaworld S.A., 2016

⁵⁰ Ibid

⁵¹ Ibid.

⁵² Common Country Programme Document for Cape Verde (2018-2022)

⁵³ Summary Brief on the Cape Verde Joint Office model, United Nations Development Operations Coordination Office, March 2016

⁵⁴ CCPD para 19

⁵⁵ The Common Country Programme Document for Cape Verde (2018-2022) has 5 UNDAF Outcomes (1, 2, 3, 4.1, 4.2) included in the "Results and resources framework for Cabo Verde (2018-2022)" (pages 8-12 of this TOR) and 4 Programme Priorities: a) Sustainable development of human capital; b) Sustainable management of natural resources; c) Economic transformation and sustainable and inclusive growth; d) Governance, public policies, partnerships and justice (pages 5-6 of this TOR).

a) Sustainable development of human capital (SDGs 1, 3, 4, 5, 8, 10): The programme addresses multidimensional poverty and inequality following the “leave no one behind” principle. The programme promotes the use of and access to high-quality, gender-sensitive, integrated and complementary education, health, social, and children-protection services. The programme also focuses on enhancing national and local capacity to provide access and promote effective use of integrated and high-quality, gender-responsive sexual and reproductive health services, including comprehensive sexuality education for adolescents and youth. Further, the programme aims to strengthen the national health information system for maternal, child and adolescent health, including sexual and reproductive health.

b) Sustainable management of natural resources (SDGs 1, 2, 3, 6, 7, 9, 11, 12, 13, 14, 15): The programme focuses on implementing the national disaster-risk reduction strategy; enhancing institutional mechanisms and community capacities to implement best practices in climate-change adaptation and mitigation; and enforcing the integration of biodiversity conservation and supporting green and blue economic growth.

c) Economic transformation and sustainable and inclusive growth (SDGs 1, 2, 5, 8, 9, 10): The programme supports the development and implementation of gender-sensitive and child-centred policies and programmes that promote inclusiveness, economic growth, and the creation of decent jobs. The programme aims to generate disaggregated evidence through the in-depth analysis of population dynamics to inform public policy making including implications of harnessing the potential of its youthful population in driving the country’s development efforts.

d) Governance, public policies, partnerships and justice (SDGs 1, 5, 10, 16, 17): The programme focuses on enhancing the capacity of civil society and public administration to support the use of resources; promote citizen participation in governance processes, including young people and adolescents; combat gender inequalities and gender based violence; and improve the response of the justice system. Further, the program supports the integration of population dynamics and strategies to harness the demographic dividend into national and selected sectoral development.

The principal focus of the CCPD is to support the government in achieving the SDGs and it’s aligned with the principles of gender equality, human rights fulfilment, and “leaving no one behind”. The principal focus of the CCPD is to support the enabling policy environment with achieving the national priority goals, protect development gains and reduce risks that could affect their progress towards the SDGs. Cross-sectoral approaches to SDGs achievement, and enhanced planning, monitoring, and evaluation systems are emphasized in this programme. In terms of Sustainable Development Goals, the country programme 2018-2022 is expected to contribute to all SDGs in a “Delivering as one” context.

See table 1 below for budget and expenditures from 2018 – April 2021, by agency and by UNDAF outcome. See table in Annex 1 for the estimated resources for the four-years CCPD amounted to \$41,050,800. The data indicates that the Joint Office mobilized around 67 percent of the financial resources estimated to deliver the CCPD work program.

Table 1 – Budget and Expenditures 2018 – April 2021

Outcome	UNDP Budget	UNDP Expenditure	UNFPA Budget	UNFPA Expenditure	UNICEF Budget	UNICEF Expenditure	Total Budget	Total Expenditure
Outcome 1	\$75,633	\$75,072	\$1,474,278	\$1,080,744	\$2,956,013	\$2,143,116	\$4,505,924	\$3,298,932
Outcome 2	\$6,810,125	\$4,017,816	\$0	\$0	\$0	\$0	\$6,810,125	\$4,017,816
Outcome 3	\$8,252,744	\$7,090,614	\$269,646	\$179,153	\$872,731	\$593,727	\$9,395,121	\$7,863,494
Outcome 4	\$6,011,179	\$3,713,185	\$170,767	\$133,155	\$175,047	\$143,440	\$6,356,993	\$3,989,780
Outcome 5	\$190,413	\$131,009	\$126,275	\$75,531	\$80,000	\$53,580	\$396,688	\$260,120
Total	\$21,340,094	\$15,027,695	\$2,040,966	\$1,468,583	\$4,083,791	\$2,933,863	\$27,464,851	\$19,430,141

Source: UNDP, UNICEF and UNFPA data provided by Joint Office – April 2021

4. PURPOSE, SCOPE, OBJECTIVE OF THE EVALUATION AND KEY EVALUATION QUESTIONS

The purpose of the Common Country program evaluation is twofold. On one hand, to determine the extent to which the Country Program has achieved its intended results, in an efficient, well-coordinated, coherent, and economical way while maintaining relevance; on the other hand, it is about learning whether the Joint Office Model has been an enabler to support the effective and timely delivery of the CCPD, with increased effectiveness and efficiency, as well as capacity to leverage resources. The evaluation aims at compiling evidence of Joint Office contributions to development results in facilitating and leveraging national effort. The intended use of the CCPE is to:

- Support the development of the next Cape Verde Common Country Programme Document;
- Strengthen accountability of Joint Office to national stakeholders;
- Strengthen accountability of Joint Office to the Executive Boards of the three agencies.

The CCPE is an independent evaluation carried out within the overall provisions contained in the respective agencies Evaluation Policy.

The evaluation will focus on the CCPD including on the implementation modalities as operationalised with the Joint Office modalities during its current programme cycle, 2018-2022, with a view to contributing to the preparation of the next common country programme starting in 2023. The geographical and temporal scope is aligned with the CCPD 2018-21.

The Global COVID-19 pandemic has presented the Joint Office with considerable challenges in implementing its ongoing programme of work in line with the CCPD. Even more so than usual, the UN has been required to be adaptable, refocusing and restructuring its development work to meet the challenges of the pandemic and country's need to effectively prepare, respond and recover from the wider COVID-19 crisis, including its socio-economic consequences. Thus, this CCPE will also consider the degree to which the Joint Office has been able to adapt to the crisis and support the country's preparedness and response to the pandemic, and its ability to recover while meeting the new development challenges that the pandemic has highlighted, or which may have emerged. Thus, the objectives of the CCPE are:

1. To identify whether the Common Country Programme results have been/are likely to be delivered as planned (both quantitatively and qualitatively) and explanatory factors in achieving these results or not;
2. To identify whether the Common Country Programme has contributed to the intended and planned national results, including SDG-focused results, in the context of UNSDCF outcome(s);
3. To determine the extent to which the Joint Office Model has achieved programmatic and operational coherence and what can be improved in supporting government partners;
4. To determine to what extent the Joint office was able to adapt to the COVID-19 pandemic, respond to the needs of the emergency and to what extent it was possible to effectively adapt and implement the CCPD to minimize regress of results.

The Joint evaluation will focus on the common country programme approved by the Executive Boards of the three agencies for the period 2018-2022 as well as the Joint Office modalities. The Joint CCPE will also pay close attention to common response of the three agencies to the COVID19 pandemic in the country to assess both its contribution and how the pandemic may have affected its planned programme

implementation to support the development of the future CCPD and how it was handled by the Joint Office modality.

In addition, the CCPE will cover cross-cutting issues, such as human rights; Leaving No One Behind, gender equality; disability; and transversal functions, such as coordination, coherence, monitoring and evaluation (M&E); innovation; resource mobilization; strategic partnerships, etc.

The CCPE will address the following key evaluation questions, which are fully aligned with the Joint Evaluation objectives. These questions will also guide the presentation of the evaluation findings in the report. The Evaluation questions also refer to several important criteria such as: Effectiveness, Relevance, Coherence, Coordination, Sustainability and Gender, Equity and Human Rights Responsiveness. More detail questions and sub-questions are presented in the evaluation matrix in annex.

1. What results did the Common country programme achieve during the period under review and what were the enabling factors or barriers?
 - a. To what extent was the Joint Office able to overcome barriers, and/or capitalise on enabling factors?
 - b. To what extent have the results achieved were equitable, integrated human right and gender equality in support of the achievement of the SDGs?
 - c. To what extent do the needs of the most vulnerable and marginalized populations including children, women and adolescents, and those with disabilities were addressed and met?
 - d. To what extent does the joint work of UNDP, UNFPA and UNICEF supported national monitoring, evaluation and data/statistical systems, specifically on SDG integration to support policy analysis and planning?
2. To what extent does the Joint Office Modalities in the context of UNDS reform ensure the advancement of the 3 agencies mandates?
 - a. To what extent were operations (e.g. finance, supply and procurement, IT, monitoring and reporting systems) integrated and efficiently conducted?
 - b. To what extent was each agency able to build on each other's comparative advantage in delivering together?
 - c. To what extent does the Joint Office conduct joint planning, monitoring, evaluation and reporting activities?
 - d. To what extent was the coordination between the Joint Office and the Regional Offices of three agencies (UNDP, UNFPA and UNICEF) coherent, effective and timely?
 - e. Were accountabilities clear and understood by staff at all levels for the three agencies?
3. To what extent has the Joint Office coordination modality been cost-effective with respect to the three agencies UNDP, UNFPA and UNICEF's mandate and resources?
 - a. To what extent has the Joint office uniquely positioned itself to implement the CCPD components such as strategies, programme components and activities in support of SDGs, including resource mobilization?
 - b. To what extent has the Joint office managed accountabilities and risks across the joint office structure and the participating UN agencies, when it comes to representation, and to policy, program, advocacy work or partnership building?

- c. To what extent has the planning, monitoring and evaluation systems of the three agencies been integrated?
4. To what extent has UNDP, UNFPA and UNICEF been able to adapt to the COVID-19 pandemic especially under the Joint Office modality in support of country's preparedness, response and recovery process?
 - a. To what extent has the Joint office been flexible, innovative and agile in delivering its programme to adapt to the Covid-19 pandemic?
 - b. How can the current Common Country Programme objectives, approaches and modalities be most relevant and adapted to the post Covid-19 country context for the next Common Country Programme?

5. METHODOLOGY

The evaluation methodology will adhere to the United Nations Evaluation Group (UNEG) Norms & Standards.⁵⁶ The evaluation will adhere to the principle of 'do no harm' and will refrain from any activity that may place either a team member, a stakeholder or respondent at risk of being infected by the virus. The CCPE will cover all outcome areas.

The overall approach and methodology will be using a theory-based approach with mix quantitative and qualitative methodology to address evaluation questions as the implementation – connecting agency input to result - and result level. Thus, a Theory of Change (ToC) approach will be used in consultation with stakeholders, as appropriate, to define the intended results, risks and assumptions. Discussions of the ToC will focus on mapping and testing the risks and assumptions behind the programme's desired change(s) and the linkages between the Joint delivery modality, the intervention(s) and the intended country programme results. As part of this analysis, the CCPD's progression over the review period will also be examined. In assessing the CCPD's evolution, the Joint Office capacity to adapt to the changing context and respond to national development needs and priorities will be reviewed.

The relevance and result achievements of the common country programme will be analysed under key questions 1 and 2. This will include an assessment of the CCPD achieved results and the extent to which these outputs have contributed to the intended outcomes and are relevant to national priorities and to the beneficiaries. In this process, both positive and negative, direct and indirect unintended outcomes will also be identified.

The Joint Office modalities will be analysed under key questions 3 and 4, which will look more in depth of the coherence of the intervention and support, as well as effective coordination and modalities as envisioned originally and in light of the UNDS reform.

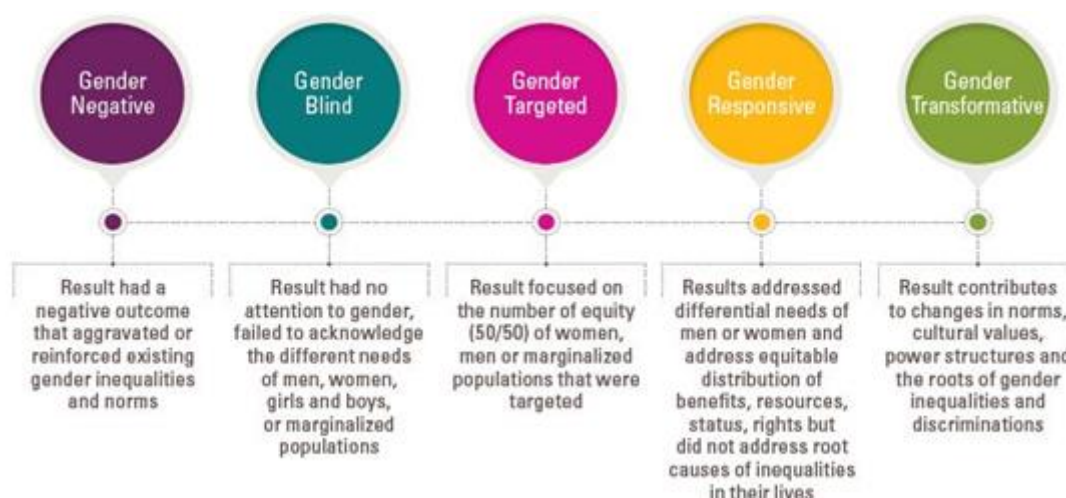
Lastly, the support to country's preparedness, response and recovery process to the COVID-19 pandemic will be addressed in key question 5 by analysing the Joint Office programme responsiveness to the COVID-19 situation, the relevance of CCPD's support to the country including its alignment to national policies and other UN agencies and donors' interventions as well as by assessing the effectiveness of the support provided and the sustainability of results achieved. To better understand CCPD's and the Joint Office arrangement performance, the specific factors that have influenced - both positively or negatively - CCPD's performance and eventually, the sustainability of results in the country will be examined under evaluation

⁵⁶ <http://www.uneval.org/document/detail/1914>

question 4. The utilization of resources to deliver results (including managerial practices); the extent to which the Joint Office fostered partnerships and synergies with other UN agencies and actors (i.e. through south-south or triangular cooperation); and the integration of gender equality and women’s empowerment and disability inclusion in design and implementation of the CCPD are also some of the aspects that will be assessed under this question.

Special attention will be given to integrate a gender-responsive and intercultural focus to the evaluation approach to data collection methods. In this context, the evaluation will analyse the extent to which UNDP, UNICEF and UNFPA support was designed and did contribute to gender equality. This analysis will be conducted considering the gender marker⁵⁷ and potentially UNDP IEO’s gender results effectiveness scale (GRES). The GRES classifies gender results into five categories as indicated in the schematic below. In addition, gender-related questions will be incorporated in the data collection methods and tools, such as the interview questionnaire, and reporting.

It is expected that the team develop and refine the methodology and data analysis plan in its inception report based on consultation with key stakeholders and a preliminary desk review.



6. DATA COLLECTION AND ANALYSIS

Assessment of data collection constraints and existing data. The evaluation will gather and analyse all relevant previous evaluations available from the three agencies.

The CCPD Outcomes, UNDP, UNICEF and UNFPA Annual Reports, and the corporate planning system (CPS) associated with it provide indicators, baselines and their status of progress. To the extent possible, the CCPE will use these indicators and data, as well as other alternative indicators which may have been used by the Joint Office, to interpret the CCPD goals and to measure and assess progress toward the intended outcomes. However, the CCPD indicators try to assess aspects of performance that are well-outside of the

⁵⁷ A corporate tool to sensitize programme managers in advancing GEWE by assigning ratings to projects during their design phase to indicate the level of expected contribution to GEWE. It can also be used to track planned programme expenditures on GEWE (not actual expenditures).

three agencies' direct sphere of control, and for which the programme has limited influence. To mitigate these limitations, the evaluation will work with Theories of Change to try to understand goals and map assumptions against the expected and achieved results. Due to Covid-19 induced travel restrictions, the primary data collection will be conducted virtually. In response to these constraints, the evaluation team will expand the number of interviews with key informants, select a team with previous experience in the country, and draw on an expanded support of the Joint Office for arranging interviews.

Data collection methods. The evaluation will use primary and secondary data sources, including desk review of corporate and project documentation, data surveys from stakeholders and beneficiaries as relevant. A multi-stakeholder approach will be followed, and telephone/zoom interviews will include government representatives, civil-society organizations, private-sector representatives, UN agencies, multilateral organizations, bilateral donors, the Joint Office and Regional Offices/Bureau, and beneficiaries of the programme. Efforts will be made to collect views from a diverse range of stakeholders on the JO's performance as well as to reach out to beneficiaries, while maintaining do no harm approach and ethical responsive data collection in the context of Covid-19 pandemic and thus using remote data collection. At the start of the evaluation, a stakeholder analysis will be conducted with the support of the Joint Office to identify relevant partners and beneficiaries to be consulted, as well as those who may not work directly with the three agencies but play a key role or help the evaluation assess Joint Office contributions to the CCPD outcomes. This stakeholder analysis will serve to identify key informants for interviews during the main data collection phase of the evaluation, and to examine any potential partnerships that could further improve Joint Office's contribution to the country.

The proposed criteria for selecting projects may include the following and will be further refined by the evaluation team:

- Programme coverage (projects covering various components/outcomes, joint projects and cross-cutting areas);
- Financial expenditure (projects/interventions of large sizes, will be prioritised);
- Urban-Rural coverage;
- Maturity (covering both completed and active projects);
- Programme cycle (coverage of projects/intervention from the current cycle);

The Evaluation Management Group (EMG) and the Joint Office will identify an initial list of background and programme-related documents and post it on an CCPE SharePoint website⁵⁸. Document reviews will include: background documents on the national context, documents prepared by international partners and other UN agencies during the period under review; programmatic documents such as workplans and frameworks; progress reports; monitoring self-assessments such as the annual reports; and evaluations conducted by the three agencies and partners, including quality assurance reports where available.

All information and data collected from multiple sources and through various means will be triangulated to ensure its validity before the evaluation reaches conclusions and recommendations. An evaluation matrix will be used to guide how each of the questions will be addressed to organize the available evidence by key

⁵⁸ A list of project and strategic documents of UNDP, UNFPA, and UNICEF (e.g. Work Plans, Annual Reports) have been uploaded in the CCPE SharePoint and Teams.

evaluation question. This will also facilitate the analysis process and will support the evaluation team in drawing well-substantiated conclusions and recommendations.

In line with the UNEG Guidance on Integrating Human Rights and Gender Equality in Evaluations, the CCPE will examine the level of gender mainstreaming across all the programme and operations. Gender-related data will be collected by using corporately available sources (e.g. the Gender Marker) and programme/project-based sources (e.g. through desk reviews of documents and interviews), where available, and assessed against its programme outcomes and the GRES. It is expected that the work of the team be in conformity with UNEG Ethical Code of Conduct⁵⁹.

7. MANAGEMENT ARRANGEMENTS

The Independent Evaluation Office of UNDP, the Evaluation Office of UNFPA and the Evaluation Office of UNICEF: will each designate an evaluation manager responsible for the joint evaluation. The managers, and associated staff, will form an Evaluation Management Group (EMG). The regional offices of UNICEF and UNFPA will also nominate a staff as part of the management group which will be responsible for leading the evaluation in consultation with the respective agencies' stakeholders. UNDP IEO will serve as focal point for administrative purpose related to contracting, and the EMG will coordinate the evaluation team of independent consultants and engage with them as necessary, provide quality assurance, review the deliverables, and approve them.

Joint Country Office in Cape Verde: The Joint Country Office will support the evaluation team to liaise with key partners and other stakeholders, make available to the team all necessary information regarding the three agencies' programmes, projects and activities in the country and provide factual verifications of the draft report on a timely basis. In addition, the Joint Country Office will provide support in kind (e.g. scheduling of interviews with project staff, stakeholders, and beneficiaries). The Joint Country Office staff will also be interviewed. To ensure the independence of the exercise and the anonymity of interviewees, the Joint Country Office staff will not participate in the stakeholders' interviews. Once a final report has been prepared, the Joint Office will prepare a management response to the evaluation recommendations, in consultation with the three agencies' country and regional offices. It will support the use and dissemination of the final CCPE report at the country level. The Joint Country Office and the EMG will jointly organize the final stakeholder debriefing, ensuring participation of key government counterparts, through a videoconference, where findings, conclusions and recommendations of the evaluation will be presented.

Stakeholder consultation: Government partners will be consulted, along with other stakeholders during the key milestone of this evaluation, namely TORs, inception Phase, draft final report. The consultations will be led by the Evaluation Management Group, with support from JCO.

UNDP Regional Bureau for Africa and UNICEF and UNFPA Regional Offices: will support the evaluation through information sharing and will participate in the final stakeholder debriefing.

Evaluation Team: The EMG will constitute an evaluation team to undertake the CCPE, composed of a total of 3 external consultants with expertise in the programme areas of the CCPD, including a Team Leader,

⁵⁹<http://www.unevaluation.org/document/detail/102>

responsible for the overall coordination of the team workstream into the delivery of a consolidated evaluation report and to whom each team member will report. The EMG will be responsible for the selection of the team of consultants, with a priority given to national consultants for equal competency, *ceteris paribus*.

Deliverables: Under the guidance of the EMG, the external consultants will prepare an **inception report (1)** as first deliverable. This report will also include a clear design, and evaluation matrix based drawing from the evaluation purpose, objectives and key evaluation questions that will inform the data collection and data analysis phases. This report will include analysis of key risks and a mitigation strategy to ensure the timely delivery of the report and the conduct of data collection and analysis according to the design and plan, approach and methods to produce the final evaluation report incorporating comments from the EMG.

Upon completion of the data collection and data analysis phases the team will prepare a **draft final report (2)**, documenting the findings (what they found); and analysed the key findings and transformed into conclusions (the most direct answer to the evaluation questions). The report will contain draft recommendations, indicating what they recommend, to whom and by when. Each recommendation should mention what without addressing the how, should flow logically from the findings, be cost effective, make sense on their own.

Upon reception of the comments from EMG and the stakeholders, the team will revise the draft final report, indicated how they addressed the comments, one way or another, and submit the **final report (3)** to the EMG for approval.

A PowerPoint presentation (4): a standalone PowerPoint will be submitted to the EMG as part of the evaluation deliverables

All Datasets (qualitative and quantitative) (5) will be submitted to the EMG as part of the evaluation deliverables, in soft and, if needed, hard copies.

Payment shall be made upon approval by the EMG for each of the three (5) deliverables.

The roles of the different members of the evaluation team can be summarised in Table 2 and will be further refined at inception stage.

Table 2: Data collection responsibilities (tentative)	
Outcome/Area	Data collection and report
Outcome 1	Consultant 1
Outcome 2	Consultant 2
Outcome 3	Consultant 1
Outcome 4	Consultant 3
Outcome 5	Consultant 3
Gender equality and disability	All team members
Strategic positioning issues	All team members
Operations and management issues	Team Leader
Overall consolidation of Evaluation Report	Team Leader

8. EVALUATION PROCESS

There are five key phases to the evaluation process, as summarized below, which constitute the framework for conducting the evaluation.

Phase 1: Preparatory work. Following the initial consultation with the Joint office, the EMG prepares the ToR and the evaluation design, including a preliminary evaluation matrix with potential evaluation questions and sub-questions. Once the TOR is approved by the Evaluation Offices of UNDP, UNICEF, UNFPA, additional evaluation team members with relevant skills and expertise across the different outcome areas will be recruited. The EMG, with the support of the JO, collects all relevant data and documentation for the evaluation.

Phase 2: Inception phase. Evaluation team members will conduct a preliminary desk review and consultation with key stakeholders, to identify refine evaluation questions, assess the data gaps, develop an evaluation matrix and plan. Based on this, the team will prepare an inception report, for which a template and guidance will be provided by the EMG. The report will also identify any potential risks and limitations in the conduct of the evaluation and propose mitigation measures.

Phase 3: Data collection. The evaluation team will engage in data collection activities virtually, cognizant of COVID-19 related restrictions, in respect with ethical guidance and do no harm principle. The estimated duration of the data collection period will be around three weeks. Data will be collected according to the approach outlined in the inception report and evaluation matrix with responsibilities outlined in Section 7. At the end of the data collection phase, the evaluation team may hold a debriefing presentation of the key preliminary findings to the Joint Office when all additional data gaps and areas of further analysis should be identified for follow-up.

Phase 4: Analysis, report writing, quality review and debrief. Based on the analysis of data collected and triangulated, the Team Leader will undertake a synthesis process to write the draft CCPE report, based on the contributions by the team members. The individual contributions of the team members, as well as the draft evaluation report will be subject to review by the EMG. The draft report(s) will then be circulated to the Joint Office for factual corrections. The second draft, having taken into account any factual corrections, will be shared with national stakeholders for further comments. Any necessary additional corrections will be made, and the Cape Verde Joint Country Office and other Offices as relevant will prepare the management response to the CCPE. The report will then be shared at a final stakeholder debriefing (via videoconference) where the results of the evaluation will be presented to key national stakeholders. Ways forward will be discussed with a view to creating greater ownership by national stakeholders in taking forward the recommendations and strengthening national accountability of the Joint Office. Considering the discussion at the stakeholder event, the final evaluation report will be produced.

Phase 5: Publication and dissemination. The CCPE report, including the management response, and evaluation brief will be widely distributed electronically. The evaluation report will be made available to UNDP, UNICEF and UNFPA Executive Board at the time of the approval of a new Common Country Programme Document. It will be distributed by the three evaluation offices and to the evaluation units of other international organisations, evaluation societies/networks and research institutions in the region. The Cape Verde Joint Country Office will disseminate the report to stakeholders in the country.

9. TIMEFRAME FOR THE CCPE PROCESS

The timeframe and responsibilities for the evaluation process are tentatively⁶⁰ as follows:

Table 3: Timeframe for the CCPE process going to the Board in September 2021 (tentative)		
Activity	Responsible party	Proposed timeframe
Phase 1: Preparatory work		
TOR – approval by the Evaluation Offices of UNDP, UNICEF, UNFPA	EMG	June 2021
Selection of other evaluation team members	EMG	July 2021
Phase 2: Inception phase		
Production of inception <u>report</u>	Evaluation team	July- August 2021
Phase 3: Data collection		
Virtual data collection phase	Evaluation team	September 2021
Phase 4: Analysis, report writing, quality review and debrief		
Analysis and Synthesis report writing	Evaluation Team	September 2021
Zero draft CCPE for clearance by EMG	Team Leader	October 2021
First draft CCPE for Joint office for comments	Team leader/EMG	End of November 2021
Second draft shared with the national counterparts for comments	Team leader/EMG	December 2021
Management response	Joint Office	December 2021
Final debriefing with national stakeholders	Joint Office/EMG/Team Leader	December 2021
Phase 5: Production and Follow-up		
Editing and formatting	UNDP with EMG review	January 2022

⁶⁰ The timeframe is indicative of process and deadlines and does not imply full-time engagement of the team during the period.

Table 4: UNDAF⁶¹ outcomes to which the CCPD planned to contribute in the period 2018-2022⁶²

UNDAF outcome	UNDP, UNFPA, UNICEF Common Country Programme outputs	Indicative resources (\$) ⁶³		
		Regular	Other	Total
<p>UNDAF Outcome 1: By 2022, Cape Verdeans, particularly the most vulnerable, have improved access to, and use more quality health and education services, and benefit more from social and child protection and social inclusion, which are gender-sensitive, throughout their life cycle.</p>	Output 1.1. National and local capacity enhanced to provide access and promote effective use of integrated and high-quality, gender-responsive health services, including sexual and reproductive health, especially for adolescents and youth.	UNDP: \$0	UNDP: \$0	UNDP: \$0⁶⁴
		UNFPA: \$990,000	UNFPA: \$900,000	UNFPA: \$1,890,000
		UNICEF: \$2,000,000	UNICEF: \$2,696,000	UNICEF: \$4,696,000
	Output 1.2. National and local capacity for maternal, perinatal and child-health services strengthened.			
	Output 1.3. Educational learning outcomes for girls and boys enhanced and relevant to the country's development potential.			
	Output 1.4. Access to inclusive and equitable child protection services enhanced.			

⁶¹ UNDAF for Cape Verde 2018-2022. https://en.unesco.org/sites/default/files/undaf.cabo_verde.pdf

⁶² Source: UNDP, UNFPA, UNICEF CPD for Cape Verde (2018-2022)

⁶³ Indicative resources from the CPD 2018-2022 results and resources framework

⁶⁴ UNDP resources have been allocated to this outcome for COVID response

UNDAF outcome	UNDP, UNFPA, UNICEF Common Country Programme outputs	Indicative resources (\$) ⁶³		
		Regular	Other	Total
<p>UNDAF Outcome 2: By 2022, all people, particularly the most vulnerable, benefit from enhanced national and local capacity to apply integrated and innovative approaches to the sustainable and participative management of natural resources and biodiversity, climate change adaptation and mitigation, and disaster-risk reduction.</p>	<p>Output 2.1. Selected institutions have strengthened technical and operational capacities to mainstream child and gender-sensitive disaster-risk reduction into national and local development policies.</p> <p>Output 2.2. Selected government institutions and local communities have enhanced technical capacity to implement climate change adaptation and mitigation measures.</p> <p>Output 2.3. Enhanced legal, policy and institutional frameworks are in place for conservation, sustainable use and access, and benefit-sharing of natural resources, biodiversity and ecosystems.</p>	<p>UNDP: \$1,020,000</p> <p>UNFPA: \$0</p> <p>UNICEF: \$225,000</p>	<p>UNDP: \$12,815,000</p> <p>UNFPA: \$0</p> <p>UNICEF: \$250,000</p>	<p>UNDP: \$13,835,000</p> <p>UNFPA: \$0</p> <p>UNICEF: \$475,000</p>

UNDAF outcome	UNDP, UNFPA, UNICEF Common Country Programme outputs	Indicative resources (\$) ⁶³		
		Regular	Other	Total
<p>UNDAF Outcome 3: By 2022, all Cape Verdeans of working age, particularly women and youth, benefit from decent work through economic transformation in key sectors, which leads to more sustainable and inclusive economic development.</p>	Output 3.1. The Ministries of Finance, Economy and Employment have strengthened institutional capacity for the formulation and implementation of policies and programmes that harness the demographic dividend for inclusive and sustainable economic growth.	UNDP: \$480,000	UNDP: \$5,000,000	UNDP: \$5,480,000
	Output 3.2. Young people and women have enhanced ability to secure employment, including self-employment.	UNFPA: \$200,000	UNFPA: \$625,000	UNFPA: \$825,000
	Output 3.3. Municipalities have strengthened technical capacities to develop integrated and SDG-aligned territorial development strategies that promote local employment opportunities particularly for youth and women.	UNICEF: \$600,000	UNICEF: \$250,000	UNICEF: \$850,000
	Output 3.4. The Ministry of Family and Social Inclusion has enhanced technical capacity to ensure access to the social protection system by the most vulnerable groups, particularly women and children.			

UNDAF outcome	UNDP, UNFPA, UNICEF Common Country Programme outputs	Indicative resources (\$) ⁶³		
		Regular	Other	Total
<p>UNDAF Outcome 4.1: By 2022, Cape Verdean citizens benefit from a system of democratic governance and public administration that is more effective, transparent, and participative.</p>	<p>Output 4.1. Young people and women have enhanced capacities to engage in critical development issues and decision-making processes.</p> <p>Output 4.2. Public administrations at central and local levels are equipped with innovative strategies, capacities and tools to adequately implement and monitor the country's commitments to sustainable development.</p> <p>Output 4.3. The Government has enhanced technical capacity to establish and manage a partnership framework to mobilize financial and technical resources and to engage civil society and the private sector in the implementation of the SDGs.</p>	<p>UNDP: \$550,000</p> <p>UNFPA: \$500,000</p> <p>UNICEF: \$300,000</p>	<p>UNDP: \$4,800,000</p> <p>UNFPA: \$400,000</p> <p>UNICEF: \$350,000</p>	<p>UNDP: \$5,350,000</p> <p>UNFPA: \$900,000</p> <p>UNICEF: \$650,000</p>

UNDAF outcome	UNDP, UNFPA, UNICEF Common Country Programme outputs	Indicative resources (\$) ⁶³		
		Regular	Other	Total
<p>UNDAF Outcome 4.2: By 2022, Cape Verdeans, particularly women, youth and children, benefit from increased human security, improved social cohesion and a responsive and inclusive justice system that leads to the fulfilment of human rights.</p>	<p>Output 4.4. Institutions at central and local levels have enhanced capacity to effectively implement national instruments for the promotion of gender equality and combating gender-based violence.</p> <p>Output 4.5. The justice system has enhanced capacity to promote human rights, with a focus on women and children in contact with the law, and greater efficiency in the judicial process.</p>	<p>UNDP: \$450,000</p> <p>UNFPA: \$435,000</p> <p>UNICEF: \$300,000</p>	<p>UNDP: \$2,500,000</p> <p>UNFPA: \$700,000</p> <p>UNICEF: \$250,000</p>	<p>UNDP: \$2,950,000</p> <p>UNFPA: \$1,135,000</p> <p>UNICEF: \$550,000</p>
Support to programme/cross-sectoral costs		<p>UNFPA: \$375,000</p> <p>UNICEF: \$900,000</p>	<p>UNFPA: \$0</p> <p>UNICEF: \$189,800</p>	<p>UNFPA: \$375,000</p> <p>UNICEF: \$1,089,800</p>
Subtotal (by agency)		Regular		<p>UNDP: \$2,500,000</p> <p>UNFPA: \$2,500,000</p> <p>UNICEF: \$4,325,000</p>
		Other		<p>UNDP: \$25,115,000</p> <p>UNFPA: \$2,625,000</p> <p>UNICEF: \$3,985,800</p>

UNDAF outcome	UNDP, UNFPA, UNICEF Common Country Programme outputs	Indicative resources (\$) ⁶³		
		Regular	Other	Total
Subtotal		Regular		\$9,325,000
		Other		\$31,725,800
Common Country Programme Total				\$41,050,800