Evaluation Plan

I. Program/Project Information		
1. Name of Program/Project	Process Evaluation of the First Phase of the <i>Tutok Kainan</i> Supplementation Program and the Design of an Impact Evaluation Study	
2. Program/Project Location(s)	<u>Phase 1a - HDPRC Areas:</u> Camarines Sur, Negros Occidental, Negros Oriental, Cebu City, Siquijor, Zamboanga del Norte, Zamboanga del Sur, Bukidnon, National Capital Region (Pateros, Caloocan, Paranaque, Navotas)	
	<u>Phase 1b - Typhoon-stricken Areas:</u> Cagayan, Isabela, Rizal, Albay, and Catanduanes	
	<u>Phase 2:</u> Pangasinan, Apayao, Sorsogon, Bukidnon, North Cotabato, South Cotabato, Cotabato City, Marinduque, Occidental Mindoro, and Sultan Kudarat	
	<u>Phase 3:</u> Cavite, Negros Occidental, Iloilo, Cebu, Negros Oriental, Bohol, Leyte, Northern Samar, Western Samar, Eastern Samar, Zamboanga del Sur, Zamboanga del Norte, Zamboanga Sibugay, Lanao del Norte, Davao Occidental, North Cotabato, Sultan Kudarat, Agusan del Sur, Lanao del Sur, Sulu, Maguindanao, and Basilan	
	<u>Phase 4:</u> Camarines Sur, Negros Occidental, Negros Oriental, Cebu City, Siquijor, NCR, Masbate, Sarangani, Nueva Ecija, Quezon, Davao del Sur, Surigao del Sur, Lanao del Norte, Zamboanga City, Isabela City, and Zamboanga Sibugay	
	<u>Phase 5:</u> Pangasinan, Nueva Ecija, Cavite, Quezon, Camarines Sur, Catanduanes, Masbate, Sorsogon, Iloilo, Bohol, Cebu, Negros Oriental, Northern Samar, Eastern Samar, Siquijor, Samar, Zamboanga del Norte, Zamboanga del Sur, Zamboanga Sibugay, Lanao del Norte, Lanao del Sur, Maguindanao, Sulu, Surigao del Sur, Surigao del Norte, Occidental Mindoro, Dinagat Islands, Southern Leyte, and Leyte	
3. Program/Project Duration	October 2020 - Present	
4. Program/Project Status	Ongoing implementation	
5. Lead Government Agency	National Nutrition Council (NNC) Inter-Agency Task Force on Zero Hunger (IATF-ZH)	

6. Other Government Agencies	Department of Science and Technology – Food and Nutrition Research Institute (DOST-FNRI) Department of Agrarian Reform Local Government Units (Provincial, Municipal, City, Barangay)
7. Other Implementing Partners	NNC Regional Office

8. Program/Project Intent and Rationale

Hunger and nutrition are among the critical development challenges in the Philippines. Although the country has achieved several improvements in reducing its food insecurity levels and ranked 68th out of 116 countries in the Global Hunger Index, it still has an overall moderate hunger level, and malnutrition and chronic food insecurity are persistent. According to a study of the Integrated Food Security Phase Classification (IPC), around 64% percent of Filipinos are chronically food insecure, while the moderately and severely food insecure population accounts for nearly 22 million people. Furthermore, the 2018 - 2019 expanded National Nutrition Survey demonstrated that childhood stunting levels remain high (29.6%) while child wasting has slightly increased to 5.7 percent, and overweight/obesity is at 2.9 percent. The vulnerability to the impacts of disaster events and climate change is considered among the key drivers of food insecurity and malnutrition. The COVID-19 pandemic has further aggravated the situation.

To effectively address the growing problem of hunger and malnutrition exacerbated by COVID-19, the Inter-Agency Task Force (IATF) approved a resolution on October 2, 2020, providing a dietary supplementation program (DSP) known as *Tutok Kainan* for children 6-23 months and around 34,000 nutritionally-at-risk pregnant women as a strategy to prevent stunting in children during the first 1000 days of life. The program serves as the initial implementation of the Republic Act 11148 or the Kalusugan ng Mag-Nanay Act by ensuring the delivery of complementary early childhood care and development (ECCD) services in the first 1000 days. The program is jointly implemented by the Inter-Agency Task Force on Zero Hunger and the National Nutrition Council (NNC). It supports and contributes to the achievements of the outcomes outlined in the Philippine Plan of Action for Nutrition 2017 - 2022.

The overall goal of the *Tutok Kainan* is to contribute to the prevention of stunting among children 0-23 months old by (a) improving the quality and quantity of food and nutrient intakes and (b) utilization of related ECCD F1KD services among nutritionally at-risk pregnant women and children 6-23 months old in the target Tutok Kainan program areas. To do this, the *Tutok Kainan* program has been organized into five components: Social Preparation, Dietary Supplementation, Maternal Nutrition Education, Micronutrient Supplementation, and SMS reporting. Under the program, the beneficiaries received food commodities, including an improved NutriBun, ready-to-eat lipid-based nutritional supplements, and hot meals for three months. Additionally, nutrition education is one of the essential components of the program. The beneficiaries received daily text messages called Nutri-text to inform them of the benefits of the food they consume.

9. Alignment with the Philippine Development Goals

The program to be evaluated is aligned with:

- **Chapter 10 Accelerating Human Capital Development**, particularly on the strategies to improve nutrition and health for all to guarantee care at all life stages, ensure access through functional service delivery, sustain health financing, and cross-cutting strategies for health.
- **Chapter 11 Reducing Vulnerability of Individuals and Families,** particularly to mitigate risks faced by vulnerable groups, and, achieve universal social protection.

10. Alignment with the Sustainable Development Goals

The evaluation subject is strongly linked to SDG 2 on Zero Hunger.

11. Results Framework

Given that the program does not have an existing results framework and theory of change (TOC), an evaluability assessment will be conducted where the firm will facilitate the development of the TOC, results framework, and process document for the monitoring plan. Although the program does not have an official results framework, the program's outcome targets (reduced wasting among children under five years old; reduced stunting among children under-five years old; reduced micronutrient deficiencies; and improved situation in overweight and obesity) may be obtained from available program documents/reports. Said measurable outcomes could guide the design of the impact evaluation of the program.

12. Program/Project Financing

The total budget of the program is PHP 527.04 million. Table below shows the budget breakdown per Phase.

Phase	No. of Municipalities	Budget (PhP)
1A	152	94,807,427.50
1B	59	44,234,956.00
2	26	62,000,000.00
3	195	100,000,000.00
4	104	110,000,000.00
5	194	116,000,000.00

(Source: PPT Presentation for Updates for NEDA-EDC).

II. Information on the Evaluation

13. Key Evaluation Stakeholders

World Health Organization (WHO), Food and Agriculture Organization (FAO), World Food Programme (WFP), and United Nations Children Emergency Fund (UNICEF)

14. Purpose of the Evaluation

The assignment aims to carry out the following in three stages:

Phase 1: Evaluability Assessment

- Conduct an Evaluability Assessment of the TK program and facilitate a participatory session to develop the Program's Theory of Change (ToC), Results Frameworks, and Monitoring Plan to address the evaluability gap. The workshop/consultation sessions should be conducted onsite within Metro Manila in a venue (e.g. hotel) that can accommodate a maximum of fifty participants involving key offices and stakeholders of the program.
- The Firm, through consultation sessions with the lead implementing agencies, shall produce an evaluability assessment report and provide actionable recommendations to ensure that the Program is evaluable.

Phase 2: Process Evaluation of Phase 1 implementation

- Undertake a process evaluation of its Phase 1 implementation focusing on its planning, monitoring, implementation processes, and institutional arrangements;
- Document good practices, strategies, innovations that can be replicated and/or adopted in succeeding phases; including other lessons that will guide the improvement of processes and technology involved for succeeding phases of the program implementation;
- Provide recommendations to improve implementation arrangements, M&E systems and processes, and evaluation planning; and,
- Assess the program's progress to date and produce IEC materials to support communication/dissemination of Program's accomplishments.

Phase 3: Design an Impact Evaluation for the Program and Conduct a Baseline Survey

- Prepare a design for a future impact evaluation preferably using the randomized-controlled trial (RCT) model towards the target outcome of reducing hunger and malnutrition, especially stunting prevalence in the country. At the minimum, this should include evaluation questions following the OECD-DAC criteria, recommendations on selection criteria, sample size, treatment and comparison group identification, methods for randomization, key activities, timelines, estimated budget, and implementation strategy.
- Based on the proposed design of RCT, design and implement a baseline survey of clearly defined indicators to be collected for the future Impact Evaluation of the Program. The methodology, sampling strategy, scope, and timeline should be in line with the developed Theory of Change, Results Framework and Monitoring Plan of the program, as well as key results of the process evaluation.

15. Key Evaluation Questions

Evaluability Questions:

- <u>Clarity of the intervention</u>. Does the subject of evaluation have a clear logical framework or ToC? Are the objectives, outcomes, and outputs clearly defined? Are the indicators clearly stated? Are the links between program activities and outcome established?
- <u>Availability of data.</u> Is sufficient data collected against the indicators? Is there baseline data? What methodology can be used given the available data? The in-depth evaluability assessment is expected to delve into this evaluability criterion in detail, assessing the robustness of administrative data collection and M&E systems and how these link to broader national and agency-level planning and budgeting processes. This also includes assessing the appropriateness and adequacy of data sets and data management system or competencies of those managing this system.

- <u>Stakeholder interest and intended use.</u> How can decision-makers and other stakeholders use the evaluation to improve *Tutok Kainan* Supplementation Program design, implementation, and resource allocation? Are there socio-political factors that could hinder the conduct of the assessment (e.g. context of Mandanas Ruling implementation where implementation and resource allocation will eventually be within the purview of the LGUs)?
- <u>Availability of resources for the evaluation</u>. Are there enough financial, human, and knowledge resources (national and sub-national levels) to conduct any planned/future evaluations of the Program? How much is required? Is there a policy that will support provision of sufficient resources for conducting M&E activities? What is the extent of evaluation expertise available to conduct different types of evaluation within the organization? Is there enough or increasing support from the institutions, community, and various actors to conduct the evaluation?

Process Evaluation Questions:

On Program Planning/Design

- What were specific interventions put in place by the program to prevent stunting among 0-23 months old children in the target areas?
- What are the characteristics of the organizations, implementers and actors involved in the delivery of program components/interventions?
- How do program activities align and/or address intended program objectives?
- Are the roles and responsibilities of different implementers from the national to barangay level clearly articulated? How well have they performed their roles in accordance to the program guidelines? What was the degree of participation of the intended participants in the design and planning of the program?
- How well has the program been established? How was the program received by concerned stakeholders from regional to barangay level?

On Program Implementation

- How is the program being implemented? To what extent have implementation activities met target milestones, outputs, and immediate outcomes?
- What are the implementation arrangements in place? Is the program being implemented according to the guidelines and protocols?
- Are Phase 1 activities being delivered as intended and in accordance to target schedule?
- What is the extent to which beneficiaries were reached? Are beneficiaries being reached as intended? How satisfied are the beneficiaries with the implementation of the program? How can the program meet increasing accountability demands and responsiveness?
- What is the degree of participation by intended participants/beneficiaries?
- What are the facilitating and hindering factors/barriers to optimal delivery and uptake of the intervention? What were the kinds of problems encountered in delivering the program were there enough resources from the beginning to do it well?
- What are good practices that can be replicated and/or adopted in succeeding phases of the program?
- Were there intended or unintended implementation characteristics that may have positively or negatively affected program delivery of Phase 1 implementation?
- What are necessary actions for the program owners at national and regional levels to implement continuous improvement?

On Monitoring and Reporting

- What kind of monitoring and reporting system is in place to keep track of the program's progress?
- How are data collected, managed, and stored? How is data quality and accuracy ensured?
- Are data being collected timely and relevant to the program, and in line with the program's guidelines on M&E?
- Are standard periodic reports prepared correctly and submitted timely following the program's M&E guidelines? How are these reports utilized?
- How does progress reporting influence improvement of intervention delivery to beneficiaries?

16. **Data**

The following are data requirements for the proposed evaluation:

- Program documents (e.g., briefers, policy documents and supplemental guidelines, accomplishment reports)
- Monitoring data on receipt, distribution, and actual consumption of commodities
- Monitoring data related to nutrition assessment (e.g., baseline weight, nutritional status)
- Data on beneficiaries
- Data related to outcomes monitoring (e.g., reduced wasting among children under five years old; reduced stunting among children under-five years old; reduced micronutrient deficiencies; and improved situation in overweight and obesity)
- Information on implementation (e.g., M&E systems and reporting processes, institutional arrangements, challenges and lessons learned)

Data collection methods shall include desk review of program documents, analysis of secondary data, and gathering of both qualitative and quantitative data through consultations/workshops, key informant interviews, focus group discussions, and surveys from relevant stakeholders.

17. Relevant Literature

- Executive Order No. 101 Creating an Inter-Agency Task Force on Zero Hunger
- Republic Act 11148 or the <u>Kalusugan at Nutrisyon ng Mag-Nanay Act</u> and its <u>Implementing</u> <u>Rules and Regulations</u>
- Philippine Plan of Action for Nutrition 2017 2022
- Tutok Kainan Supplementation Program
- UNICEF Conceptual Framework on Maternal and Child Nutrition, 2020

18. Risk Identification and Analysis

The following are key risks facing the proposed evaluation:

- Changes in priorities due to transition in senior management officials brought about by elections
- Interest and availability of government agencies and LGUs to participate in the proposed evaluation during and post national and local elections.
- Difficulties in carrying out an evaluation assignment and research activities in general given the new normal context
- Availability, accuracy, and reliability of data.

19. **Evaluation Timeline**. The proposed evaluation has a duration of 13 months. Attached in Annex A is the Gantt chart for the detailed timelines.

20. Evaluator Profile

The evaluation team from an institution or firm will be contracted through open competitive bidding. Below outlines the required team composition and competencies.

The evaluation team is expected to be composed of three to four team members, including the team leader. The team may include international experts and is also encouraged to be gender-balanced. The team should include specialists in health and nutrition with expertise in maternal and young child nutrition and multi-sectoral programming aimed towards stunting reduction. The team should also include strong quantitative and qualitative methods expertise. To the extent possible, the evaluation will be conducted by a gender-balanced, geographically and culturally diverse team with appropriate skills to assess dimensions of the subject as specified in the scope, approach, and methodology sections of the Terms of Reference (TOR). At least one team member should have INGO and National Government experience, preferably the team leader.

The team will be multi-disciplinary and include members who together have an appropriate balance of expertise and practical knowledge in the following areas:

- Demonstrated experience in designing and leading complex evaluations.
- Highly experienced in a range of evaluation approaches including approaches that mix quantitative, qualitative, randomized controlled trial (RCT) and participatory methods, face-to-face and remote approaches.
- Strong data analysis skills for both qualitative and quantitative data.
- Excellent report writing skills.
- Technical competence in the development field with a good understanding of the health and nutrition sectors, including strong gender orientation or Gender and Development expertise, in the Philippines.
- At least one team member should have experience evaluating health and nutrition programs.

The Team leader will have technical expertise in one of the technical areas listed above, design methodology and data collection tools, and demonstrated experience in leading similar evaluations. The Team Leader must have a master's degree or higher in education and/or in a relevant field with at least ten years of experience in the Public Health/Nutrition/Social Development/Public Policy/Development Studies sector. She/he will also have leadership, analytical, and communication skills, including a track record of excellent writing and presentation skills.

Her/his primary responsibilities will be:

- Refining the evaluation approach and methodology
- Guiding and managing the team
- Leading the evaluation mission and representing the evaluation team
- Drafting and revising, as required, the inception report, the end of fieldwork (i.e., exit), debriefing presentation, and evaluation report

The team members will combine the technical expertise required and have a track record of written work on similar assignments. Evaluation Team Members must have a bachelor's degree in a relevant field with at least five years of relevant experience in monitoring and evaluating development programs and projects. Team members will:

- Contribute to the methodology in their area of expertise based on a document review,
- Conduct fieldwork if necessary
- Participate in team meetings and meetings with stakeholders,
- Contribute to the drafting and revising of the evaluation products in their technical area(s).

21. Indicative Resource Requirements

The evaluation will be funded by the NEDA M&E Fund through the Strategic M&E Project in partnership with the United Nations and Development Programme (UNDP). The UNDP project management team will manage and facilitate the development of the TOR, procurement of evaluation team, coordination activities with different stakeholders, and implementation of the study.