UNFPA Management Response to: Evaluation of Kenya Country Programme
Evaluation Coverage Time Period: 2014-2017
Year of Management Response: 2017

Recommendation Title	Recommendation	Accepted / Not Accepted	Priority	Action Title	Action Description	Estimated Implementation Date
1. The 9th CP needs to focus on advocacy, strategic partnerships and innovative resource mobilization to maximize its potential to contribute to strategic outcomes country wide, while also providing additional service support and capacity development to the most underserved and needy areas.	1. The overall focus of the 9th CP must be fully aligned to the changing international and national priorities, utilizing the comparative advantage of UNFPA. Within this framework, the next CP needs to focus primarily on upstream work in line with the lower middle income status of Kenya, declining ODA and regular resources to optimize its added value to achieving results., with additional service support and capacity development where most required. This means strategic and evidence informed advocacy, capacity to mobilise resources from existing and new sources such as public-private partnerships, ensuring high technical competence, and being bold in exploring new modalities for working. Strong attention is needed to measuring cost benefits and risks. Additionally, service support and capacity development should continue where most required. An appropriately restructured and streamlined office typology is required with a capacity development strategy for the 9th CP. Also required is a comprehensive advocacy strategy and streamlined and strengthened partnerships and strategic coordination for optimal efficiency gains. Visibility, to promote continued high focus on the UNFPA mandate, should be raised through appropriate branding, key information products, and advocacy in relevant fora.	Accepted	High	1.1 Strategic Partnerships and Resource Mobilization	1.1 Develop and implement a Resource Mobilization and Partnership Strategy	12/31/2019

2. The CO needs to avoid spreading itself too thin with financial and technical support for multiple implementation partners, and narrow down support to the most strategic programmes and projects that are demonstrating results.	2. The CO needs to narrow its support to implementing partners in a strategic manner to minimize the impact of withdrawal of resources and, where possible, assist implementing partners in identifying alternative sources of support. To maximize the benefits from the many current initiatives, especially the RMNCAH and Community Life Centre, close monitoring and evaluation of results and strong reporting are needed, and IP capacity needs to be built to achieve this. Results should be analysed to highlight efficiencies, effectiveness, challenges and potential long-term cost benefits, and be shared as lessons learned to help build capacity within the country for results based programming. In addition, it would be strategic for the CO to support resource mapping in the areas of its mandate, including for gender integration and human rights work, in order to elucidate gaps and where support is most needed.	Accepted	High	2.1 Strategic Programmes and Projects	2.1 Select a minimal number of Implementing Partners for the 9th Country Programme, in accordance to the UNFPA Policy and Procedures	12/31/2018
2. The CO needs to avoid spreading itself too thin with financial and technical support for multiple implementation partners, and narrow down support to the most strategic programmes and projects that are demonstrating results.	2. The CO needs to narrow its support to implementing partners in a strategic manner to minimize the impact of withdrawal of resources and, where possible, assist implementing partners in identifying alternative sources of support. To maximize the benefits from the many current initiatives, especially the RMNCAH and Community Life Centre, close monitoring and evaluation of results and strong reporting are needed, and IP capacity needs to be built to achieve this. Results should be analysed to highlight efficiencies, effectiveness, challenges and potential long-term cost benefits, and be shared as lessons learned to help build capacity within the country for results based programming. In addition, it would be strategic for the CO to support resource mapping in the areas of its mandate, including for gender integration and human rights work, in order to elucidate gaps and where support is most needed.	Accepted	High	2.2 Monitoring and Evaluation	2.2 Strengthen the Monitoring and Evaluation mechanism for the RMNCAH and CLC Projects	12/31/2018

3. In the 9th CP the CO needs to address further the effective dissemination and use of evidence and data at all levels in addition to supporting research and data generation.	3. The CO needs to make optimal use of its comparative advantage in population data management to ensure data capture across all fields of development, including quantitative and qualitative research data on its areas of mandate (e.g. on socio-cultural values and norms regarding gender and adolescent SRH and on good practice), including in humanitarian situations. Beyond this, the CP need to concentrate more strongly on effective data dissemination modalities, ensuring that information is communicated in user friendly formats and building capacity for the wide utilization of data at national, county and community level to inform policy, planning and programme implementation, and to generate demand for services. Strengthening use of evidence and data will require a strategy for innovative methods of sharing information to contribute to evidence- informed policy and programming together with stakeholder capacity development.	Accepted	High	3.1 Disseminate evidence that has been gathered	3.1 Develop and implement a dissemination strategy for evidence gathered	12/31/2018
4. The CO needs to assure added value and sustainability of results through effective quality assurance over time.	4. UNFPA has clearly demonstrated adding value to the policy and strategy environment, mobilizing resources and building capacity and ownership at different levels. To assure sustainability of results the 9th CP needs to incorporate strong quality assurance measures to assess how far these developments are sustained (and sustainable), and translate into significant contributions to outcomes, identifying gaps and challenges that may be addressed.	Accepted	High	4.1 Quality Assurance	4.1 Conduct Results Based Management Capacity Building of 9th CP Stakeholders	12/31/2018
4. The CO needs to assure added value and sustainability of results through effective quality assurance over time.	4. UNFPA has clearly demonstrated adding value to the policy and strategy environment, mobilizing resources and building capacity and ownership at different levels. To assure sustainability of results the 9th CP needs to incorporate strong quality assurance measures to assess how far these developments are sustained (and sustainable), and translate into significant contributions to outcomes, identifying gaps and challenges that may be addressed.	Accepted	High	4.2 Sustainability of results of the 9th CP	4.2 Strengthen the Quality Assurance Mechanism to measure contributions to outcomes, identification of gaps and challenges in programme implementation	12/31/2018
5. The 9th CP needs to be premised on a strong theory of change underlying the results chain logic.	5. The results chain logic needs to be commensurate with the upstream focus of the CP, with SMART indicators with baseline measurements throughout, and appropriate inputs, activities, interventions and measurable outputs to contribute to measurable outcomes. This will require a strategic results and resources framework and capacity development of the relevant stakeholders, including implementing partners, and the CO in results based management and programming. The RRF should be more inclusive than that of the 8th.	Accepted	High	5.1 9th CP Theory of Change	5.1 Develop a robust Theory of Change for the 9th Country Programme	6/30/2018

6. A rights based framework needs to be more clearly articulated to inform the overall programme, with stronger integration of key gender issues also.	6. Regarding cross-cutting issues, a rights based framework (with focus on duty bearers and rights holders) needs to be elaborated with the requisite capacity development in the CO and among implementing partners for adoption throughout the programming areas of the 9th CP. Consider reverting to the thematic title 'Sexual and Reproductive Health and Rights' to reflect this. The gender focus also needs to be more thoroughly integrated throughout.	Accepted	Medium	6.1 Human Rights Based Framework	6.1 Develop a Human Rights Based Integration Framework for the 9th Country Programme	12/31/2018
6. A rights based framework needs to be more clearly articulated to inform the overall programme, with stronger integration of key gender issues also.	6. Regarding cross-cutting issues, a rights based framework (with focus on duty bearers and rights holders) needs to be elaborated with the requisite capacity development in the CO and among implementing partners for adoption throughout the programming areas of the 9th CP. Consider reverting to the thematic title 'Sexual and Reproductive Health and Rights' to reflect this. The gender focus also needs to be more thoroughly integrated throughout.	Accepted	High	6.2 Sexual and Reproductive Health and Rights	6.2 Conduct training on integration of Human Rights Based Approach in Programming for KCO staff and 9th CP Ips	12/31/2018
7. Conduct a full evaluation of the RMNCAH project to identify key lessons that should be systematically applied to the project and contribute to wider national programming for comprehensive SRH, particularly to reduce maternal mortality and teen pregnancy.	7. The CO and RMNCAH partners should commission an external evaluation of the RMNCAH project to strengthen the overall design of the project, understand its cost benefits, replicability and gaps to inform the next phase, assure sustainability, and assess the potential to expand it into further priority counties. Local capacity of health providers needs to be built to ensure they can fully utilize the available opportunities, the upkeep of equipment and facilities needs to be assured. A clear policy is needed regarding procurement of life saving commodities, and existing tools, such as the RMNCAH Score Card should be fully applied in all counties.	Accepted	High	7.1 RMNCAH Evaluation	7.1 The CO will take lead among the UN H6 to conduct the evaluation of the RMNCAH Project	12/31/2018

7. Conduct a full evaluation of the RMNCAH project to identify key lessons that should be systematically applied to the project and contribute to wider national programming for comprehensive SRH, particularly to reduce maternal mortality and teen pregnancy.	7. The CO and RMNCAH partners should commission an external evaluation of the RMNCAH project to strengthen the overall design of the project, understand its cost benefits, replicability and gaps to inform the next phase, assure sustainability, and assess the potential to expand it into further priority counties. Local capacity of health providers needs to be built to ensure they can fully utilize the available opportunities, the upkeep of equipment and facilities needs to be assured. A clear policy is needed regarding procurement of life saving commodities, and existing tools, such as the RMNCAH Score Card should be fully applied in all counties.	Accepted	High	7.2 RMNCAH Scorecard	7.2 Conduct orientation of the County Health Management Teams on RMNCAH Scorecard	12/31/2018
8. Support the scale up and linkage of SRH and GBV interventions in humanitarian responses.	8. The CO should sustain its humanitarian expertise and advocacy for integrated SRH and GBV responses in humanitarian settings, and leverage further financial and technical resources to strengthen programming on the ground through its key implementing partners.	Accepted	High	8.1.1 SRH/GBV scale up	8.1.1 The CO will work with the IPs with comparative advantage on SRH and GBV in humanitarian contexts.	6/30/2018
8. Support the scale up and linkage of SRH and GBV interventions in humanitarian responses.	8. The CO should sustain its humanitarian expertise and advocacy for integrated SRH and GBV responses in humanitarian settings, and leverage further financial and technical resources to strengthen programming on the ground through its key implementing partners.	Accepted	High	8.1.2 SRH/GBV scale up	8.1.2 Support of GBV and SRH sub-sector coordination which provides leadership platform in scaling up integration of SRH and GBV in humanitarian settings.	6/30/2018
9. Integrate obstetric fistula management and treatment in routine SRH care and services.	9. Treatment interventions should be integrated and supported through routine health care in health facilities with special support and training. They should be linked to efforts to prevent obstetric fistula, to raise community awareness and to generate demand through community mobilization and reduce stigma. Results should be closely monitored and evaluated.	Accepted	Medium	9.1.1 Integration of OF	9.1.1 Support development of Obstetric Fistula Strategic Framework	12/31/2018
9. Integrate obstetric fistula management and treatment in routine SRH care and services.	9. Treatment interventions should be integrated and supported through routine health care in health facilities with special support and training. They should be linked to efforts to prevent obstetric fistula, to raise community awareness and to generate demand through community mobilization and reduce stigma. Results should be closely monitored and evaluated.	Accepted	Medium	9.1.2 Integration of OF	9.1.2 Strengthen coordination of national obstetric fistula taskforce	6/30/2018

10. Support the scale up of interventions to address persistent family planning commodity stock-outs.	10, The CO should support the scale up interventions particularly aimed at addressing FP commodity stock-outs. This should include advocacy for county budgetary allocation for family planning, and support for implementation of FP costed implementation plans for the counties. Interventions should also include scaling up training on FP commodity quantification and forecasting, demand creation interventions, and strengthening supply chain management and data.	Accepted	High	10.1.1 Commodity stock-outs	10.1.1 Strengthen Supply chain management at national and county level- including forecasting and quantification.	12/31/2018
10. Support the scale up of interventions to address persistent family planning commodity stock-outs.	10, The CO should support the scale up interventions particularly aimed at addressing FP commodity stock-outs. This should include advocacy for county budgetary allocation for family planning, and support for implementation of FP costed implementation plans for the counties. Interventions should also include scaling up training on FP commodity quantification and forecasting, demand creation interventions, and strengthening supply chain management and data.	Accepted	High	10.1.2 Commodity stock-outs	10.1.2 Support development of County-based FP Costed implementation plans (in selected counties)	6/30/2018
11. Develop a comprehensive demand creation strategy that enhances uptake of services especially by the most vulnerable populations.	11. The CO and partners should develop a strategy to generate demand for SRH services that outlines interventions aimed at increasing access to and utilisation of SRH services and addresses barriers. Demand creation interventions that are built on community engagement and mobilise community structures should be developed and supported by innovative financing options. The needs of particularly vulnerable women and adolescent girls, sex workers, and those in humanitarian settings should take priority.	Accepted	High	11.1.1 Demand creation	11.1.1 Support development of SRH advocacy strategy	12/31/2018
11. Develop a comprehensive demand creation strategy that enhances uptake of services especially by the most vulnerable populations.	11. The CO and partners should develop a strategy to generate demand for SRH services that outlines interventions aimed at increasing access to and utilisation of SRH services and addresses barriers. Demand creation interventions that are built on community engagement and mobilise community structures should be developed and supported by innovative financing options. The needs of particularly vulnerable women and adolescent girls, sex workers, and those in humanitarian settings should take priority.	Accepted	High	11.1.2 Demand creation	11.1.2 Support development of FP advocacy tool kit	6/30/2018
12. Develop a branding and communication plan to accompany all SRH interventions in the field.	12. An information, education, and communication plan that includes UNFPA branding should be an integral part of all SRH interventions, with the aim of communicating the brand and mandate of the organisation. All facility improvements and equipment supply should be easily associated with UNFPA and, by extension, its mandate.	Accepted	High	12.1 Branding and Communication on SRH interventions	12.1 Develop protocol on UNFPA branding and messaging at CO level	6/30/2018

13. Scale up support for and measure the linkage and integration of HIV and SRH/FP/MNH, adolescent and youth, and GBV interventions.	13. The CO needs to engage more robustly with the key stakeholders to identify common ground on CSE integration and to build capacity. This should achieve some bottom-line agreements on what to include, age appropriateness of content, and on sensitive terminologies. An advocacy and stakeholder engagement plan should be developed jointly with UNESCO and other interested partners, to reach the Ministry of Education, KICD, faith based organizations and other conservative communities. Such advocacy and stakeholder engagement should be driven by UNFPA at higher leadership and strategic rather than technical level.	Accepted	High	13.1.1 SRH/HIV integration	13.1.1 Support development of SRH/HIV/GBV integration strategic framework	6/30/2018
13. Scale up support for and measure the linkage and integration of HIV and SRH/FP/MNH, adolescent and youth, and GBV interventions.	13. The CO needs to engage more robustly with the key stakeholders to identify common ground on CSE integration and to build capacity. This should achieve some bottom-line agreements on what to include, age appropriateness of content, and on sensitive terminologies. An advocacy and stakeholder engagement plan should be developed jointly with UNESCO and other interested partners, to reach the Ministry of Education, KICD, faith based organizations and other conservative communities. Such advocacy and stakeholder engagement should be driven by UNFPA at higher leadership and strategic rather than technical level.	Accepted	High	13.1.2 SRH/HIV integration	13.1.2 Support scale up of SRH/HIV/GBV integration	12/31/2018
14. Develop an advocacy and stakeholder engagement plan to address CSE and find common ground for CSE integration in the curriculum.	14. The CO needs to engage more robustly with the key stakeholders to identify common ground on CSE integration. This should achieve some bottom-line agreements on what to include, age appropriateness of content, and on sensitive terminologies. An advocacy and stakeholder engagement plan should be developed jointly with UNESCO and other interested partners, to reach the Ministry of Education, KICD, faith based organisations and other conservative communities. Such advocacy and stakeholder engagement should be driven by UNFPA at higher leadership and strategic rather than technical level.	Partially accepted	High	14.1.1 Advocacy and technical support for integration and implementation of human sexuality education	14.1.1 Support development of an advocacy plan for content integration and implementation	6/30/2018

14. Develop an advocacy and stakeholder engagement plan to address CSE and find common ground for CSE integration in the curriculum.	14. The CO needs to engage more robustly with the key stakeholders to identify common ground on CSE integration. This should achieve some bottom-line agreements on what to include, age appropriateness of content, and on sensitive terminologies. An advocacy and stakeholder engagement plan should be developed jointly with UNESCO and other interested partners, to reach the Ministry of Education, KICD, faith based organisations and other conservative communities. Such advocacy and stakeholder engagement should be driven by UNFPA at higher leadership and strategic rather than technical level.	Partially accepted	High	14.1.2 Advocacy and technical support for integration and implementation of human sexuality education	14.1.2 Provide technical support in development of appropriate materials on human sexuality	12/31/2018
14. Develop an advocacy and stakeholder engagement plan to address CSE and find common ground for CSE integration in the curriculum.	14. The CO needs to engage more robustly with the key stakeholders to identify common ground on CSE integration. This should achieve some bottom-line agreements on what to include, age appropriateness of content, and on sensitive terminologies. An advocacy and stakeholder engagement plan should be developed jointly with UNESCO and other interested partners, to reach the Ministry of Education, KICD, faith based organisations and other conservative communities. Such advocacy and stakeholder engagement should be driven by UNFPA at higher leadership and strategic rather than technical level.	Partially accepted	High	14.1.3 Advocacy and technical support for integration and implementation of human sexuality education	14.1.3 Support training of teachers on delivery of human sexuality education	12/31/2019
15. Continue the meaningful engagement of young people in all levels of adolescent and youth programming.	15. The programme should advocate for strengthened opportunities and platforms for adolescents and young people as effective advocates for their own SRH, for gender equality and to address their rights. This should involve capturing their priorities and insights in developing approaches to stimulate demand creation among their peers and could usefully incorporate a barrier based analysis.	Accepted	High	15.1.1 Advocacy for meaningful participation of adolescents and youth in SRH programmes	15.1.1 Build the capacity of youth networks and facilitate their participation in SRHR policies and programmes	6/30/2018
15. Continue the meaningful engagement of young people in all levels of adolescent and youth programming.	15. The programme should advocate for strengthened opportunities and platforms for adolescents and young people as effective advocates for their own SRH, for gender equality and to address their rights. This should involve capturing their priorities and insights in developing approaches to stimulate demand creation among their peers and could usefully incorporate a barrier based analysis.	Accepted	High	15.1.2 Advocacy for meaningful participation of adolescents and youth in SRH programmes	15.1.2 Support the development of a framework for meaningful involvement of young people in health programmes	6/30/2018

16. Build further capacity for integration of youth and gender friendly services within health facilities and closely evaluate the Community Life Centre results.	16. The programme should leverage resources for greater investment in building the capacity of health care workers and health facilities to provide integrated youth and gender friendly SRH services and to undertake effective community outreach to generate demand. The CLC needs close monitoring and evaluation to assess cost benefits over time.	Accepted	High	16.1 Capacity building of health care workers to provide adolescent and youth friendly health services which are gender responsive	16.1 Support training of health care providers on provision of adolescent and youth friendly health services (Development of training tools, training national master trainers and training of county TOTs)	12/31/2018
17. Scale up investment in innovations by young people in use of digital and online platforms and other approaches to increase access of information and uptake of SRH services by adolescents and youth.]	17. Because young people spend increasing time on digital and online platforms, including social media, these platforms should be utilized effectively to engage young people. Young people themselves need to be involved in the design of these and other approaches to youth engagement, and implementing partners should be engaged to strengthen M&E of results.	Accepted	High	17.1 Scale up investment in innovations by young people on SRH information and services	17.1 Provide mentorship and platforms for existing young innovators to improve and scale up their digital SRH information platforms; Catalyze new innovations by young people with a greater focus on SRH services	12/31/2018
18. Strengthen collaboration between actors in GBV and FGM/C.	18. There needs to be enhanced collaboration between actors implementing GBV and FGM/C interventions to allow for greater synergies and efficiency in attaining achievement of desired results, and the potential for mutual learning.	Accepted	High	18.1 Collaboration between GBV and FGM/C Actors	18.1 Strengthen collaboration between actors in GBV and FGM/C: - Share programme successes and challenges including innovations and areas of operation to avoid duplication of services Joint monitoring of programmes	12/31/2018

19. Sustain and strengthen the capacity and linkages of key actors in GBV and FGM/C and child marriage, and integrate approaches.	19. Support capacity development of key actors to build transformative community dialogues and strengthen demand for protection against GBV, FGM/C and early marriage. Invest in the formal education curriculum to contribute to long-term change in the values and belief systems of girls and boys. An integrated approach to FGM/C, early marriage and GBV interventions with the SRH and adolescent and youth programmes is recommended.	Accepted	High	19.1 GBV, FGM/C and Child Marriage Linkages	19.1 Conduct training of national and county GBV and FGM networks/working Groups on GBV, FGM/C and Child Marriage Linkages; Establish referral mechanism for GBV, FGM/C and Child Marriage cases; Institute joint monitoring of GBV, FGM/C and Child Marriage Projects	12/31/2018
20. Develop a risk and mitigation strategy to address to GBV, FGM/C and wider gender inequalities backed with a high level advocacy campaign	20. The CO should develop a risk and mitigation strategy that fully analyses the potential threats to gender and human rights. This should strengthen culturally sensitive approaches and help realise the effective implementation of existing laws and policies and community embeddedness.	Accepted	High	20.1 GBV, FGM/C Mitigation Strategy	20.1 Develop a risk and mitigation strategy to address to GBV, FGM/C and wider gender inequalities backed with a high level advocacy campaign	12/31/2018
21. Application of the gender marker should be strengthened.	21. Barriers to full implementation of the gender marker tool should be explored and resolved so that the gender marker is fully utilized to inform strategic planning and programming.	Accepted	High	21. Gender Marker	21. Strengthen capacity of staff and IPs to implement the gender marker	12/31/2018
22. While continuing to support data gathering, particularly for the 2019 census, strengthen efforts for dissemination and capacity building for effective data use.	22. Effort and resources need to be refocused towards timely packaging, dissemination, and capacity building for utilization of data among stakeholders in general and especially at county level. There is an urgent need to prepare the counties early for effective policy formulation, programming and M&E during MTP III. This includes building county capacity to use available data effectively and put in place the necessary policy, regulatory and institutional frameworks early enough to allow for improved governance and results throughout MTP III. It is essential that counties have capacity to formulate quality county integrated development plans. The CO also needs to contribute to risk management (e.g. another court case impeding release of data).	Accepted	High	22.1 Technical and financial assistance	22.1 Support in mobilization and leverage resources in support of 2019 KPHC	12/31/2019

	22. Effort and resources need to be refocused towards timely packaging, dissemination, and capacity building for utilization of data among stakeholders in general and especially at county level. There is an urgent need to prepare the counties early for effective policy formulation, programming and M&E during MTP III. This includes building county capacity to use available data effectively and put in place the necessary policy, regulatory and institutional frameworks early enough to allow for improved governance and results throughout MTP III. It is essential that counties have capacity to formulate quality county integrated development plans. The CO also needs to contribute to risk management (e.g. another court case impeding release of data).	Accepted	High	22.2 Advocacy	22.2 Conduct advocacy on data use with planners and policy makers at national and subnational levels.	12/31/2020
22. While continuing to support data gathering, particularly for the 2019 census, strengthen efforts for dissemination and capacity building for effective data use.	22. Effort and resources need to be refocused towards timely packaging, dissemination, and capacity building for utilization of data among stakeholders in general and especially at county level. There is an urgent need to prepare the counties early for effective policy formulation, programming and M&E during MTP III. This includes building county capacity to use available data effectively and put in place the necessary policy, regulatory and institutional frameworks early enough to allow for improved governance and results throughout MTP III. It is essential that counties have capacity to formulate quality county integrated development plans. The CO also needs to contribute to risk management (e.g. another court case impeding release of data).	Accepted	High	22.3 Capacity building	22.3 Build capacity on analysis and integration of population dynamics in decision making	12/31/2020
23. Increase emphasis, resources and leverage on the unique mandate and competencies of the CO in PD to support advocacy and results in all focal areas.	23. In the 9th CP, the CO should invest further in its unique mandate and competencies in PD to enhance its advocacy role and to support the achievement of results, including SRH, AY, FP and gender for its own programmes and to support those of other stakeholders.	Accepted	High	23.1 Capacity building	23.1 Build capacity to generate and translate demographic evidence into policy actions at national and sub-national levels	12/31/2020
23. Increase emphasis, resources and leverage on the unique mandate and competencies of the CO in PD to support advocacy and results in all focal areas.	23. In the 9th CP, the CO should invest further in its unique mandate and competencies in PD to enhance its advocacy role and to support the achievement of results, including SRH, AY, FP and gender for its own programmes and to support those of other stakeholders.	Accepted	High	23.2 Advocacy	23.2 Support advocacy of population issues at national and county levels.	12/31/2021

24. The CO work with other partners and increase resources and support for the strengthening of M&E at national and county levels	24. UNFPA should work with other UN agencies, multilateral and bilateral partners to strengthen national monitoring and evaluation capacities and systems for improving national and county monitoring, measurement and reporting. The CO should increase resources and strengthen its financial and technical capacity to MED so as to systematically strengthen M&E at national and county levels. In particular, there is need to follow through with the approval in Parliament of the National M&E Policy; provide technical support for the formulation of the Plan of Action to operationalize the National M&E Policy; support the formulation and enactment as early as possible of the M&E Bill; and provide advocacy support for the mobilization of resources at national and county levels for building of the requisite M&E capacities, and the implementation of the necessary institutional frameworks for improved performance and coordination within and between the two levels of government. The 9th CP should also build on the gains of the Health Data Collaborative.	Accepted	High	24.1 National M&E System	24.1 Provide technical and financial support to strengthen national and monitoring and evaluation systems	12/31/2019
24. The CO work with other partners and increase resources and support for the strengthening of M&E at national and county levels	24. UNFPA should work with other UN agencies, multilateral and bilateral partners to strengthen national monitoring and evaluation capacities and systems for improving national and county monitoring, measurement and reporting. The CO should increase resources and strengthen its financial and technical capacity to MED so as to systematically strengthen M&E at national and county levels. In particular, there is need to follow through with the approval in Parliament of the National M&E Policy; provide technical support for the formulation of the Plan of Action to operationalize the National M&E Policy; support the formulation and enactment as early as possible of the M&E Bill; and provide advocacy support for the mobilization of resources at national and county levels for building of the requisite M&E capacities, and the implementation of the necessary institutional frameworks for improved performance and coordination within and between the two levels of government. The 9th CP should also build on the gains of the Health Data Collaborative.	Accepted	High	24.2 M&E Capacities	24.2 Strengthen financial and technical capacity for monitoring and evaluation at the national level and in select counties	12/31/2019

24. The CO work with other partners and increase resources and support for the strengthening of M&E at national and county levels	24. UNFPA should work with other UN agencies, multilateral and bilateral partners to strengthen national monitoring and evaluation capacities and systems for improving national and county monitoring, measurement and reporting. The CO should increase resources and strengthen its financial and technical capacity to MED so as to systematically strengthen M&E at national and county levels. In particular, there is need to follow through with the approval in Parliament of the National M&E Policy; provide technical support for the formulation of the Plan of Action to operationalize the National M&E Policy; support the formulation and enactment as early as possible of the M&E Bill; and provide advocacy support for the mobilization of resources at national and county levels for building of the requisite M&E capacities, and the implementation of the necessary institutional frameworks for improved performance and coordination within and between the two levels of government. The 9th CP should also build on the gains of the Health Data Collaborative.	Accepted	High	24.3 M&E Policy	24.3 Advocate for the adoption and implementation of the National M&E Policy	12/31/2019
25. Consider including high level indicators in the MTP III in the 9th CP M&E Results and Resources Framework.	25. Although MTP III indicators will be at the broad outcome level and are expected to be fully aligned with those of UNDAF, there is need to include these high level indicators within the 9th CP RRF (as well as UNFPA Strategic Plan and SDG indicators, and UNDAF output indicators).	Rejected	High	25.1 MTP III Indicators	25.1 The 9th Country Programme Monitoring and Evaluation Framework will incorporate both UNDAF and MTP III indicators to which the country programme will contribute to.	12/31/2018
26. Lead in addressing data needs in humanitarian response situations.	26. The CO needs to take the lead in fully articulating the challenges related to availability of data, especially health related data, for programming and monitoring of results in humanitarian response situations; and advocating and mobilizing the resources and effort necessary.	Accepted	High	26.1 Capacity building	26.1 Build capacity to conduct rapid assessments in humanitarian settings and generate timely humanitarian data.	12/31/2020
26. Lead in addressing data needs in humanitarian response situations.	26. The CO needs to take the lead in fully articulating the challenges related to availability of data, especially health related data, for programming and monitoring of results in humanitarian response situations; and advocating and mobilizing the resources and effort necessary.	Accepted	High	26.2 Knowledge management	26.2 Support establishing a database for humanitarian settings	12/31/2020

27. Mobilize adequate resources to operationalise IMIS and e-Promis.	27. Resource mobilization and further efforts are needed fully to operationalise the two systems to achieve the desired benefits, establish demand for their outputs and facilitate ownership and sustainability. For IMIS, this requires sufficient technical support and resources to upload all the datasets and ensure the system is up to date, and then train personnel, including in counties, to access the data. For e-Promis, the CO may consider an advocacy role and assist MED to mobilize the necessary resources to fully upload projects data for optimum use of the system for monitoring and accountability.	Accepted	High	27.1 Resource Mobilization	27.1 Mobilize and leverage resources to facilitate implementation of IMIS.	12/31/2021
27. Mobilize adequate resources to operationalise IMIS and e-Promis.	27. Resource mobilization and further efforts are needed fully to operationalise the two systems to achieve the desired benefits, establish demand for their outputs and facilitate ownership and sustainability. For IMIS, this requires sufficient technical support and resources to upload all the datasets and ensure the system is up to date, and then train personnel, including in counties, to access the data. For e-Promis, the CO may consider an advocacy role and assist MED to mobilize the necessary resources to fully upload projects data for optimum use of the system for monitoring and accountability.	Accepted	High	27.2 Advocacy	27.2 Conduct advocacy on data use with planners and policy makers at national and subnational levels.	12/31/2020
27. Mobilize adequate resources to operationalise IMIS and e-Promis.	27. Resource mobilization and further efforts are needed fully to operationalise the two systems to achieve the desired benefits, establish demand for their outputs and facilitate ownership and sustainability. For IMIS, this requires sufficient technical support and resources to upload all the datasets and ensure the system is up to date, and then train personnel, including in counties, to access the data. For e-Promis, the CO may consider an advocacy role and assist MED to mobilize the necessary resources to fully upload projects data for optimum use of the system for monitoring and accountability.	Accepted	High	27.3 Capacity Building	27.3 Build capacity on analysis and integration of population dynamics in decision making	12/31/2020