UNFPA Management Response to: Evaluation of the UNFPA Country Programme for Liberia

**Evaluation Coverage Time Period: 2013-2017** 

Year of Management Response: 2016

Recommendation Title	Recommendation	Accepted / Not Accepted	Priority	Action Title	Action Description	Estimated Implementation Date
1.1. BEmONC compliant health facilities at county level	1.1 UNFPA Liberia should support the strengthening of at least two fully BEmONC compliant health facilities per county before the end of this programme cycle (December 2018).	Accepted	High	1.1 Increase health facilities that are BEmONC complaint in counties	1.1 CO will increase number of health facilities that are BEmONC compliant at county level to at least 2 in at least 6 focus counties with resources from the World Bank. The two main factors for compliance are – availability of drugs as well as MVA Kit and Manual Vacuum Extractor. These will be provided and monitored quarterly.	6/30/2018
1.2 Fifth LINEPA CP to	1.2. The 5th UNFPA CP should continue the current mix of programme activities with a focus on maternal and new-born mortality reduction and FP, adolescent health and MNDS&R in a manner consistent with the 2016-2020 RMNCAH Investment Case.	Accepted	High	1.2. Align 5th UNFPA CP to 2016-2020	1.2. The CO will mobilize and generate additional resources and be in a position to channel resources in a way that aligns with the RMNCAH Investment case of 2016-2020 Investment Case.	12/31/2019
UNFPA staff to compliment and respond to outcomes of regular	2. UNFPA should adopt a more flexible policy to permit and encourage UNFPA staff interventions to resolve NEX bottlenecks that hinder EmONC services, such as transport, fuel, RHCS and data for decision-making.	Accepted	High	2.1 UNFPA to intervene where IP needs assistance	2.1 Although it may be a bit difficult when the concerned IP is the MoH, however, CO will work closely with IPs to ensure early and prompt response where necessary; and also retain some amounts in UNFPA work plan to respond to such events when necessary.	12/31/2018

3. Support Innovation for Maternal Mortality Reduction	3. UNFPA should continue to support incentives for TTMs and support and expand its placement of Obs/Gyns at the county level, as well as expand efforts to train non-physicians to conduct CS.	Accepted	High	3.1 Encourage Appropriate Factors for Maternal Mortality Reduction	3.1.1 The Task-shifting for midwives to conduct CS will continue to be encouraged as it will allow availability of middle level human resources as substitute for the doctors; 3.1.2 Recruitment and placement of Obstetricians will be tied to ability to mobilize additional resources especially in high volume facilities; 3.1.3 While financial incentives may not be sustainable, TTM support will continue as it will be tied to other community initiatives to ensure timely referral.	12/31/2018
4. MNDSR Review at County level	4. UNFPA should support efforts by CHTs to increase the proportions of maternal deaths that are reported.	Accepted	High	4.1 Enhancing MNDSR at county level	4.1 Using both the Field Associates and the Obstetricians where available, CO will promote review of every maternal death using the government health facility OIC, RH Supervisor.	6/30/2018
5. Avoid Stock-outs	5. Develop protocols to avoid stock-outs through sharing of commodities within county clinics as well as among counties.	Accepted	High	5.1 Management of Stock-Outs at facility level	5.1 The CO will utilize available Field Associates and the Youth volunteers to critically monitor stock levels in health facilities and respond to stock-outs .It may not be practical to use PPAL warehouse as those are also based in Monrovia.	12/31/2018
6. Resource Mobilization for Geographical mapping for the Census	6. UNFPA should mobilize sources of funding for the geographic mapping exercise to ensure the timely commencement of activities for the 2018 census	Accepted	High	6.1 Mobilization of Resources for the 2018 Census	6.1 UNFPA in consultation with the government counterpart is organizing resource mobilization exercise with key partners such as Embassy of Sweden, EU, Germany and the US.	12/31/2018
7. Revitalization of PPCU	7. UNFPA should provide support to revitalize the PPCU unit through human and institutional capacity building.	Accepted	medium	7.1 Resource Mobilization	7.1 Additional resources to be mobilized from key donor partners in support of PPCU.	12/31/2019

8. Enhance the National Population Council	8. Provide support to review and revise the National Population Policy and develop an action plan (operational Plan) to ensure implementation of population policy.	Accepted	medium		8.1. Conduct a sector analysis of the Population Policy environment and framework in the country; conduct a desk review of the current policy; have an in-depth review and provide technical assistance in support of the review, and finalize the policy framework.	12/31/2018
9. Enhanced training of Demographers in Liberia	9. The IPS (UL) should be given resources (hardware, software and expertise) as soon as possible to adequately train undergraduates for demographic data collection and analysis.	Accepted	High	9.1 Renew undergraduate training in demography	9.1 Mobilize additional resources in order to fully engage UL to train new demographers.	12/31/2018
10. Relocation of the LISGIS (the Census house in Liberia)	10. Discussions need to be held with GoL on the impact of current location on equipment to be supplied for the coming census. Additionally, there will be issues of access to the current headquarters once the Executive Mansion is in full swing with the President of the Republic of Liberia occupying the premises after elections.	Accepted	High	Census house	10.1 We will plan to meet with the new administration to determine if a portion of the newly constructed Government secretariat can be used for the Census house or when government offices vacate their premises the Census house can move into one of those vacant buildings.	12/31/2018

11. Maintain CSE in government curriculum	11. UNFPA should maintain its technical and financial support for the integrated CSE strategy for the long-term in the next CP.	Accepted	High	11.1 CSE in the government education reform	11.1 Continue technical and financial support to MoE to ensure that CSE integration in integral to government education reform exercise. The subsequent rollout of the revised curriculum will require UNFPA support for capacity building for teachers for the delivery of CSE through Instructional materials, training workshops, study tours, etc. Continued advocacy with the new administration to ensure that the gains are maintained.	12/31/2021
12. Support to Youth Ips	12. UNFPA should continue to support NGOs that serve the needs of young, most-at-risk key populations.	Accepted	High	12.1 Increased resource mobilization for Key populations	12.1 CO will mobilize additional resources for this part of work in the next CP; CO will also renew engagement with UN Joint team on AIDS.	12/31/2021
13. Establish more Safe homes	13. The next UNFPA CP should look at extending support to the establishment of safe homes to complete the support to women and girls.	Accepted	High	13.1 Refurbish more Safe homes	13.1 Two safe homes will be completed during the current CP with resources from the Joint SGBV program; five others will be refurbished and maintained for operationalization in the next CP. One other will be supported in Monrovia that is currently owned by a CSO as a priority.	12/31/2021
14. Focus SGBV messages on Human Rights	14. UNFPA should focus campaign messages on the results and focus more energy on SGBV as a rights issue rather than as just a health issue	Accepted	High	14.1 Advocacy with data for decision-making	14.1 This year, GBV IMS (Information Management System) will be developed and will assist in getting organized data on cases of SGBV including incidence, cases going to court, etc. (and not only limited to clinical cases only.	12/31/2018
15. Awareness for the Rape law	15. UNFPA should support projects that raise awareness of Rape laws especially in rural communities.	Partially accepted	High	15.1 Repeal amended Rape Law	15.1 Advocacy for the newly amended Rape law to be repealed.	12/31/2018

16. Development of APA and designation of humanitarian focal point	16. UNFPA Liberia should develop an APAP and designate a humanitarian focal person before the end of 2017.	Accepted	High	16.1 Development of APAP and designation of a Humanitarian Focal person in the CO	16.1 CO has identified Dr. Philderald Pratt as the Humanitarian Focal Point and APAP developed in November 2017. However, he is yet to present the Concept Note for gender mainstreaming.	12/31/2018
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