## COMMENTS ON THE UNFPA DRAFT COUNTRY PROGRAMME DOCUMENT FOR RWANDA

First regular session 2025

Comments by Belgium	UNFPA country and regional office response to comments
Belgium shares the context analysis made by UNFPA and supports the proposed outputs.	UNFPA would like to express its appreciation to the Government of Belgium for the positive feedback.
The Belgian bilateral cooperation invests strongly in sexual and reproductive health in Rwanda. This is mainly done through its cooperation agency Enabel, in close collaboration with the relevant Rwandan authorities. We encourage UNFPA to maintain a close cooperation, coordination and synergies with other actors in the field, in particular Enabel as well as various civil society organisations.	UNFPA is committed to building and strengthening partnerships with civil society organizations and other key partners around UNFPA's transformative results to accelerate the implementation of the ICPD Programme of Action and the 2030 Agenda for Sustainable Development. Enabel's consultations with UNFPA on their national strategy for Rwanda has paved the way for potential synergies and opportunities for future collaboration. UNFPA commends Enabel's contributions to health systems strengthening, family planning programmes and improving maternal health outcomes. UNFPA commits to sustaining collaborations with Enabel and other development partners through relevant national coordination mechanisms such as the Health Sector Working Group.
Belgium acknowledges the important added value UNFPA may bring to policy development, in particular with regards to the integration of SRHR into policies, laws and programmes (output 1).	UNFPA appreciates the Government of Belgium's recognition of its thought leadership and policy advisory role, particularly in integrating sexual and reproductive health and rights (SRHR) into policies, laws, and programmes. UNFPA is committed to partnering with the Government of Rwanda in advancing a conducive legal and policy environment instrumental in advancing SRHR and other aspects of the ICPD agenda.

Comments by Germany	UNFPA country and regional office response to comments
Germany appreciates the focus on improving access to maternal health, including emergency obstetric care, through investing in the midwifery workforce and strengthening health facility referral networks, in response to the minimal decline in maternal mortality since 2015. In addition to the support on family planning commodities, UNFPA could consider supporting the Government of Rwanda to improve the availability and quality of maternal and newborn health commodities and equipment to reduce complications from post-partum haemorrhage and unsafe abortion as main drivers of maternal mortality in the country.	UNFPA appreciates the Government of Germany for this observation that further highlights UNFPA's comparative advantage in strengthening the availability and quality of maternal and newborn health commodities, medicines and equipment. UNFPA will continue to collaborate with the Government of Rwanda to strengthen the supply chain management system and advocate for increased proportion of domestic resources for family planning and maternal health commodities, medicines and supplies.  UNFPA will also sustain efforts with the national counterparts and partners, including the Government of Germany in deepening innovative financing mechanisms that improve equitable access to life saving interventions.
Germany appreciates the focus on reducing inequalities in health and the emphasis on vulnerable groups such as adolescents and people with disabilities. To strengthen this work, UNFPA could consider adding activities for capacity development of civil society organizations that are active in this field and that are led by the target groups in question.	UNFPA takes note of the suggestion to strengthen the capacity of civil society organizations (CSOs) that focus on vulnerable groups such as adolescents and people with disabilities. UNFPA will take forward actions in this regard and purposely ensure inclusion of CSOs that represent adolescents and people with disabilities. A specific line of intervention to address this concern has been included under output 2 of the country programme document.

Comments by United States of America	UNFPA country and regional office response to comments
We congratulate UNFPA for always consulting with stakeholders, including the United States, in the process of consultation and gathering feedback on the country program documents.	UNFPA appreciates the positive feedback from the Government of the United States of America and commits to sustaining engagement through the programme implementation.
The proposed country program document (CPD) aligns well with the Government of Rwanda's health priorities, especially around sexual and reproductive health. It touches on many pillars of the new fifth Health Sector Strategic Plan, such as health workforce, quality of care based on primary health care and addresses cross-cutting enablers such as health financing and leadership and governance. The development challenges targeted in the CPD are teenage pregnancies, maternal mortality, unmet need for family planning, and gender-based violence (GBV).	UNFPA appreciates the positive feedback and reaffirmation by the Government of the United States, about the alignment of the ninth Country Programme with the Government of Rwanda's health priorities. as elaborated in the fifth Health Sector Strategic Plan (HSSP V) and the National Strategy for Transformation 2 (NST2).  UNFPA will leverage on the alignment with HSSP V to foster national ownership and leadership, optimize coordination and leverage synergies with other government and development partner initiatives, with the intention of maximizing collective impact and enabling sustainability.
Rwanda has experienced much progress; however, it has now plateaued in maternal mortality and experienced some backsliding in teenage pregnancies. Therefore, more innovative approaches are needed to reach the last mile. Much of the CPD is focused on support to the Government of Rwanda; it would be beneficial to see some detail about coordination with development partners and other stakeholders to achieve these outputs.	UNFPA takes note of the observation by the Government of the United States of America. UNFPA reaffirms its commitment to also collaborate closely with development partners, CSOs and other stakeholders to achieve the outlined outputs.  Para. 16 and 20 of the Rwanda CPD has been updated to emphasize the commitment to also collaborate with development partners and international organizations working in Rwanda to ensure coordinated efforts, sharing of knowledge and best practices, and leverage resources effectively.
Within output one, a key intervention, and where the United States has also been actively investing, is the promotion of innovative health	UNFPA welcomes the United States' recognition of the importance of promoting innovative health financing models

financing models, including health financing for strengthening the health system as a whole. We would welcome collaboration as we both work in this space.	in the country. UNFPA welcomes further collaboration with the United States, which will greatly advance the scale and reach of financing interventions and further contribute to strengthening the health system in Rwanda.  UNFPA Rwanda looks forward to engaging the mission in Rwanda on ongoing innovative financing interventions, aimed at increasing equitable access to integrated SRHR services through the lowest levels of service delivery, such as Health Posts.
Within output two, which focuses on service delivery, the CPD mentions working with youth-led networks and other vulnerable population led organizations, including people with disabilities. One suggestion is to clarify who the intended implementing partners are, including for localization efforts, and proactively strengthen the capacity of local entities towards sustainability.	UNFPA thanks the Government of the United States for the feedback and request for clarification regarding intended implementing partners.  In accordance with UNFPA policies and procedures, the specific implementing partners will be determined through a competitive process during programme implementation based on capacity, to ensure the highest quality of service, including the ability to apply innovative strategies to meet the needs and strategic direction of the programme, in the most efficient and cost-effective manner. This process ensures transparency, accountability, and the selection of partners best suited to achieve program objectives.  It's important to highlight that UNFPA policies give first consideration to country government entities and national NGOs in the selection of implementing partners in keeping with the principle of national ownership and capacity building, and ensures that programmes are sustainable within the given context.
The CPD highlights multiple times throughout the document the integration of SRH, HIV and GBV services. However, within the	UNFPA appreciates the comment by the Government of the United States of America and underscores the crucial

programme rationale it is highlighted that rates of HIV are highest
among vulnerable populations such as female sex workers and men who
have sex with men, as well as noting the need to strengthen the
prevention of sexual transmission of HIV in an integrated manner with
SRH programs. However, the document fails to mention one key
population in this section, which is adolescent girls and young women
(AGYW), who are disproportionately affected by HIV compared to their
male counterparts, and who represent the group with the highest rate of
new HIV infections. There may be a missed opportunity to work with
this group.

connection between adolescent girls and young women's vulnerability and the heightened risk of HIV transmission. The country programme prioritizes adolescents and young people as a key target group.

Rwanda already has policies and frameworks for SRHR; however, there are some observed gaps between the policy and action (e.g., CSE). Could UNFPA revise some of the "create a policy/framework" targets of technical support to MIGEPROF to better coordinate non-clinical DP investments in GBV/SRHR and to better coordinate and streamline the fragmented programming being conducted by CSOs, which is not easily tracked and understood in order to eliminate resource waste, inefficiencies, and parallel systems?

UNFPA appreciates the comment emphasising the importance of coordinated action under the leadership of the Ministry of Gender and Family Promotion (MIGEPROF). Discussions are actively underway with the MIGEPROF as they lead the efforts to establish a comprehensive coordination mechanism for all partners in this sector. This mechanism will foster synergy and harmonized action among key stakeholders, including government agencies, civil society organizations, and development partners, ensuring a unified and impactful approach to addressing the multifaceted challenges faced by adolescents.

We would like to see a target percentage of domestic resources dedicated to GBV.

UNFPA values the comment from the United States and wishes to highlight that the country programme's Results Framework includes a dedicated indicator focused on measuring the domestic resources leveraged through innovative financing instruments.

The relevant indicator will be further elaborated in the results framework metadata, including disaggregation by sources of funding per sector and programme area. This detailed approach will enable UNFPA to accurately assess the impact

	of innovative financing mechanisms on stimulating domestic resource allocation and utilization across various programmatic areas, including on GBV.
We would also like to see a goal for the percent of resources coming from the private sector disaggregated by domestic, regional, and international contributions.	UNFPA appreciates the feedback and the comments provided by the Government of the United States of America.  UNFPA would like to confirm that disaggregation of the data collected to report against the referenced indicator will also include disaggregation by domestic, and external sources, including international contributions. This will be clearly highlighted in the result framework metadata.