# United Nations Development Assistance Framework (UNDAF)

# KENYA

**2004-2008**

## *"For Kenya's Future…"*

**March 2003**

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**EXECUTIVE SUMMARY**

The United Nations Development Assistance Framework (UNDAF) is the management tool for coordinating UN system development assistance to Kenya. The UNDAF enables UN agencies to work together for enhanced efficiency and impact, in a collective response to Kenya's national development priorities. The UN team works in pursuit of the world's Millennium Development Goals (MDGs), and in compliance with other international conventions that Kenya is signatory to.

The second UNDAF for Kenya, covering the period 2004-2008, is based on development challenges identified in the second UN Common Country Assessment (CCA) 2001, and on lessons learned from the first CCA/UNDAF experience 1999-2003. It takes into account the concerns of the government as reflected in the National Poverty Eradication Plan 1999-2015 (NPEP), the Poverty Reduction Strategy Paper 2001-2004 (PRSP) and the National Development Plan 2002-2008. It has also incorporated regional initiatives such as the New Partnership for Africa's Development (NEPAD).

> *"The UNDAF enables UN agencies to work together for enhanced efficiency and impact, in a collective response to Kenya's national development priorities"*

| The UN system in Kenya |
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**Members of the UN Development Group:**

| | | | |
| --- | --- | --- | --- |
| FAO | ILO | UNAIDS | UNDCP |
| UNDP | UNESCO | UNFPA | UN-HABITAT |
| UNICEF | UNIFEM | UNOPS | WFP |
| WHO | | | |

**As well as the following funds and specialised agencies:**

| | | | |
| --- | --- | --- | --- |
| ICAO | IFC | UNEP | UNHCR |
| UNIC | UNIDO | UNOCHA | UNON |
| WMO | | | |

**In the 2004-2008 UNDAF, the UN will concentrate on four broad priority areas of cooperation, to:**

1) **Promote good governance and the realization of rights**

2) **Reduce the incidence and socio-economic impact of HIV/AIDS, malaria and TB**

3) **Strengthen national and grassroots systems for emergency preparedness, prevention, response and mitigation**

4) **Promote sustainable livelihoods and protect the environment.**

**There are also three crosscutting themes:**

1) **Gender**
2) **Population and development**
3) **Research and information.**

The UNDAF is also based on ongoing UN Development Group and specialised agency directives, country strategies and programs. The Framework is a product of joint consultative processes between the UN, outside based specialised agencies, the government and bilateral and multilateral agencies. It is a dynamic and operational planning tool for enabling the UN to improve its services to Kenya by enhancing its collaboration with the government, development partners, and NGOs.

This UNDAF is formulated at a time of a new political dispensation in Kenya as from 2003 and provides a strong basis for the UN's support to the new government's commitment in addressing the pressing current development challenges including job creations, education, health and food security.

The UNDAF aims at coordinating strategies, consolidating information, facilitating a joint programme approach, and harmonising administrative and operational structures. By harmonizing the programme framework, and integrating UN agencies' programme activities with those of the government, the UN hopes to achieve greater strategic consistency, efficiency, effectiveness — and more importantly — enhanced impact of its assistance to Kenya.

While each UN agency will implement its own country programme according to its mandate, the UNDAF allows them to streamline their development activities within

the priority areas of cooperation as specified by the government.

To ensure a properly coordinated approach under the UNDAF, the UN will continue to make use of theme groups and inter-agency task forces. Opportunities for joint or collaborative response to development challenges will be seized, and common and/or joint response strategies developed.

Theme groups are the avenues through which programme activities are linked with the PRSP thematic groups, as well as other like-minded teams. The UN Country Team or the Kenya Country Committee (KCC) will guide the UNDAF process. Progress towards realization of MDG targets is monitored by common core indicators, which measure the collective impact of government, UN and other development partners' programs on national development priorities in key sectors.

> *"The aim is to reduce poverty, with a particular focus on the most vulnerable"*

The four areas of cooperation set forth here are in line with the UN's mission to support government efforts to create an enabling environment for the improvement of the quality of life and well-being of Kenyans, to reduce poverty, with a particular focus on the most vulnerable groups and regions, and to ensure the protection of the rights of women and children.

The UNDAF identifies 13 outcomes in total, using the following cooperation strategies:

– strengthening advocacy policy analysis in line with international commitments, including the MDGs

– supporting decentralised planning

– increasing efforts to build the capacity of national and local institutions

– strengthening partnerships with the government, the private sector and CSOs

– enhancing joint efforts at collection, analysis and dissemination of data and information

– promoting joint, parallel, or collaborative programming

– mainstreaming cross-cutting issues

– targeting vulnerable groups and regions.

A mid-term review of UNDAF will be carried out in 2006. Other individual and joint reviews will analyse progress and lessons learned.

Inter-agency committees will work towards ever-greater coordination in administration and operations (UNDP/UNON), information and communication (UNIC), and security management (Office of the Resident Coordinator). There is a secretariat to assist the Kenya Country Committee in monitoring and evaluation, as well as reporting processes. It also backstops theme groups and operational committees, and facilitates reporting and information sharing.

## INTRODUCTION AND OVERVIEW

### UN REFORM

In 1997, as part of his reform agenda to make the UN a more effective and efficient institution, the Secretary-General instituted a comprehensive plan of action. The Common Country Assessment (CCA) and the UNDAF were recommended as the primary tools to facilitate a common programming framework for all UN agencies at the country level.

The UNDAF is prepared by all UN agencies, in close collaboration with the government and with the involvement of other development partners. The UNDAF defines areas where the UN's collective interventions are likely to make a significant and strategic contribution in tackling the country's development challenges, bringing out its comparative advantage. The basis for the UN's choices is the collective diagnosis undertaken through the CCA, resulting in high-quality strategic analysis to identify the causes of a country's development challenges.

In September 2000 at the Millennium Assembly, more than 189 member states adopted the Millennium Declaration, signifying a further commitment to make the

UN a more effective instrument with a vision for pursuing global development challenges.

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**A harmonised, integrated process of programming for the UN at the country level was initiated, with four key elements:**

a) **Analysis of the development situation through the CCAs**

b) **Strategic planning for operational activities through the UNDAF**

c) **Programming of assistance through individual, parallel or joint programs**

d) **Monitoring and evaluation, particularly of the intended outcomes of the UNDAF.**

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Built into the Millennium Declaration was a set of priorities, including precise and time-bound development goals (MDGs) that have become the common policy framework for the UN. The MDGs, given a new impetus at the summit, are a product of a series of major international conferences of the 1990s convened to examine different aspects of development, including environment, children, human rights, women, population and social policy.

### CCA/UNDAF AND INTER-AGENCY COORDINATION IN KENYA

Kenya was a CCA/UNDAF pilot country and prepared its first CCA in 1998, followed by the first UNDAF a year later. These instruments allowed the UN to institute wide-ranging measures to rationalise and improve coordination among UN activities. As a result, a strong pattern of inter-agency collaboration has emerged, characterised by: regular UN country team meetings, sharing of information and experiences, theme group dialogue, development of common databases, use of common/shared services such as security, telecommunication, conference services, and the planning and execution of practical collaborative programs and projects. The coordination has also enhanced a common approach to government, which has in turn responded by articulating various strategies and frameworks that have further streamlined the UN response.

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**The Millennium Development Goals, to be achieved worldwide, 1990-2015, include:**

1 **Halving extreme poverty and hunger**

2 **Achieving universal primary education**

3 **Promoting gender equality**

4 **Reducing under-five mortality by 2/3**

5 **Reducing maternal mortality by 3/4**

6 **Reversing the spread of HIV/AIDS, malaria and TB**

7 **Ensuring environmental sustainability8 Developing a global partnership for development, with targets for aid, trade and debt relief.**

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The first CCA and the UNDAF reinforced the priorities identified by the government through its various planning and programming frameworks, and to a large extent enabled the UN to improve collaboration starting in 2000. However, it quickly became apparent that the UN family needed to re-examine its strategies vis-à-vis the programming environment. The launching of a National Poverty Eradication Plan for the period 1999-2015, and the PRSP 2002, obviated the need to re-align UN programming to match emerging government priorities.

The UN country team undertook a fresh common analysis, and updated its database. The result was a second CCA, completed in 2001, and involving widespread consultations with the government and other development partners. The CCA identified five areas requiring particular attention — maternal and child health disease patterns, access to basic education, HIV/AIDS, severity of disasters, and degradation of the environment. In order to address these problems, the CCA proposed action around four key fronts: expanding opportunities, securing empowerment, guaranteeing security and ensuring sustainability.

In June 2002, the UN began the preparation of the second UNDAF. The new CCA's five priority issues and the areas of action defined the scope and focus.

A causality analysis was used to identify areas for collaborative and joint programming. Other areas where agencies are likely to work individually or with partners were also specified, as were some of the potential partners. This was matched with the spatial distribution of human development challenges and national development priorities to align UN responses. The following sections provide an outline of the development context.

## THE PROGRAMME FRAMEWORK

### THE KENYAN CONTEXT FOR UN PROGRAMME CHOICES

The key development challenge in Kenya today is the high incidence of poverty. This is aggravated by poor governance, weak internal control systems and lack of the political will to carry out the commitments made through legislative, policy, and institutional enactment. The problem of HIV/AIDS is a new threat to Kenya's economic recovery. The CCA also identified other development challenges where UN support is needed, including: slow economic growth, declining access to basic services, poor governance and the increasing frequency and severity of disasters. A more detailed overview of these challenges is outlined below.

**Poverty:** Kenya has a high incidence of absolute poverty. It is estimated that 56% of the population is poor. The number of poor people increased from 3.7 million in 1972/73 to 11.5 million in 1994, 12.5 million in 1997, and an estimated 15 million today. According to the 1997 Welfare Monitoring Survey, poverty levels were at 53% among the rural population and 47% among urban dwellers.

The quantitative approach to measuring poverty defines the poor as those who cannot afford basic food and non-food items. In 1997, the Welfare Monitoring Survey estimated the absolute poverty line at Ksh 1,239 ($13) per month, and Ksh 2,648 ($33) respectively for rural and urban areas. Kenya's poverty crisis must be appreciated within the global context. Latest World Bank figures indicate that of the world's six billion people, 2.8 billion — nearly half — live on less than $1 a day, with 44% of them living in South East Asia and 24% in Sub-Saharan Africa.

Qualitative dimensions of poverty include the inability to meet basic needs, unemployment, inability to feed oneself and family, lack of proper housing, poor health, and inability to educate children and pay medical bills. To be poor is also to be exposed to ill treatment or

to be powerless in influencing key decisions affecting one's life.

Kenya's economic growth has been on the decline, particularly in the past decade. While economic growth (GDP) in real terms averaged 8% during 1963-72, the rate of growth declined to 4.8% during 1973-1982. It then declined further to 3.5% between 1983 and 1994. It was 2.3% in 1997, 1.8% in 1998, 1.4% in 1999, and only 0.4% in 2000. In 2001 there was a modest recovery to a growth rate of 1.2%. As economic growth declined, development partner assistance also fell, and of course the worst hit by this double blow were Kenya's poor.

**Basic social services:** Poverty has undermined the provision of basic social services and mortality rates have deteriorated against values recorded in the 1989 census. Though national immunization coverage rose from 73% in 1989 to 79% in 1993, it then dropped to 61% in 2000. Even the proportion of children under one year immunised against measles dropped from 84% in 1993 to 76% in 2000. Similarly, only 56% of Kenya's population had access to safe drinking water in 2000.

Kenya has also performed poorly in the provision of health services, and the incidence of common diseases has increased, with malaria being one of the worst killers. The onset of HIV/AIDS has greatly worsened the situation. Current estimates show an adult prevalence of 10-15%, with 2.1 million adults and children being HIV-positive (70% aged 14-25).

Enrolment in basic education has been declining since 1990, both at the primary and secondary levels. The proportion of boys and girls progressing from Form One 1 to Form Four declined from around 95% in 1996 to 76% in 1999.

**HIV/AIDS:** The pandemic is having a catastrophic social and economic impact, with a potential effect on political stability. Emphasis must also be put on social economic impact on related issues such as AIDS orphans and overburdening of the elderly population segment who need to take care of orphans. Although it was declared a national disaster in 1999, the scourge continues to spread. With an estimated two million people already infected, and with more than 700 AIDS-related deaths per day, the pandemic may already be the greatest social catastrophe in Kenya's history. Malaria and TB contribute to higher mortality and morbidity rates. Combined with HIV/AIDS, the two diseases will further exacerbate negative trends in other sectors unless corrective measures are urgently taken.

In human development terms, the effect of the scourge has been illustrated as follows:

*HIV/AIDS = less income = less health & education = more poverty & HIV vulnerability (Source: UNDP – Human Development Report, 2001 (Kenya) p.57).*

**Food insecurity:** The global goal is to reduce the number of chronically under-nourished by half by 2015. Kenya, however, is far from reaching its goal of food self-sufficiency. More than three million Kenyans are food

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The Crisis of Social Development in Kenya

− life expectancy down from 60 years in 1989 to 55 in 1999

− increase in under five mortality from 89 in 1990 to 105 in 1998

− immunization for infants dropped from 92% in 1990-1994 to 56% in 1995-1996

− primary school enrolment declined from 95% in 1989 to 79% in 1995

− secondary school enrolment down from 30% in 1999 to 23% in 1999

− access to safe drinking water increased from 47% in 1990 to 54% in 1998-2000

− marginal increase in food security from 1,897 calories per day per adult (1990) to 1,971 calories (1997), still well below the normative 2,250 calories

*Source: Kenya Human Development Report 2002.*

insecure and need relief supplies. It is estimated that 17% of rural and 29% of urban Kenyans were food poor in 1994.

There are glaring regional disparities, often

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**Impact of HIV/AIDS on Kenyan Human Development**

The impact of AIDS in Kenya is huge, with social, psychological, demographic and economic costs to both individuals and the entire population.

HIV/AIDS is expected to:

– lower life expectancy considerably (further)

– further raise infant & maternal mortality rates

– lower per capita incomes by 10% in the next 10 years

– lower overall enrolment as children are withdrawn from school to care for their parents

– lower the Human Development Index for Kenya from 0.339 to 0.508 by the year 2010.

*Source: Kenya Human Development Report 2001.*

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due to varying rainfall, land access, or varying traditional or cultural beliefs, all of which contribute to food insecurity. The provinces with the highest levels of absolute and food poverty (measured as a percentage of population) are in the arid and semi-arid areas of North Eastern, Rift Valley and Nyanza provinces. The percentage of children under five who were severely 'malnourished' rose from 5% in 1993 to 7% in 2000, and the percentage severely 'stunted' has risen to 13% today. These trends indicate that food security is still a major challenge.

**Population:** Kenya's population was enumerated to be 29.5 million in 1999, and is projected to increase by 30% to 36.5 million in 2010. The annual growth rate reached an all-time high of 4% in 1979, the highest in the world at the time, but has since been declining, and was 2.9% in 1999. It is projected to decline further to 2.1% by 2010. The high fertility experienced in the past has resulted in a youthful structure of the population — about half the population is below 15 years of age. This means that even if fertility rates continue to decline in the future, there will still be a strong increase in the population in the years to come, while a large number of young people reach reproductive age.

This will lead to spiralling unemployment, hence increased dependency, and also further demand for basic and higher education. The country's institutional and resource capacities may be outstripped, putting stress on financial resources, health facilities, food supplies and housing. Environmental degradation will increase, through removal of vegetation, cultivation of hillsides and riverbanks, and encroachment onto marginal lands.

**Gender inequity:** Gender disparities continue, despite some improvements. In education, the gap between the enrolment of boys and girls at primary and secondary levels is gradually narrowing. The same is true in accessing basic services, as well as in representation in the political and economic arena. Nevertheless, gender disparities persist in level of poverty among female-headed households, in the legal provisions for women in areas such as inheritance, and in laws dealing with protection of women.

**Availability of Information and data:** One of the challenges for decision-makers is lack of accurate, up-to-date and reliable data and information, which constrains effective planning. The need for accurate data, disaggregated by age and sex and analysed by gender, cannot be overemphasised, as this is vital for informed decision-making in all areas of the national economy. It helps in planning, monitoring and evaluation.

## NATIONAL DEVELOPMENT PRIORITIES

### Overall policy, politics and programming

The new Constitution will entrench the basic rights of every citizen. It will also give impetus to issues central to the UN mandate, by outlining a number of directive principles of state policy.

Principle 5 of the draft states: *"The Republic shall ensure open, transparent government and accountability of state officials and public authorities."*

Principle 12 states that *"The state shall implement the principle that one third of the members of all elective and appointive bodies shall be women."*

Principle 14 states: *"The Republic shall be committed to social justice and, through appropriate policies and measures, to providing for all Kenyans the basic needs of food, shelter, clean water, sanitation, education, health, a clean environment, and security so that they live a life of dignity and comfort and can fulfil their potential."*

Principle 16 states: *"The Republic shall recognise its responsibilities to future generations of Kenyans by pursuing policies for the sustainable management of the environment."*

As these and other principles reflected in the draft are adopted in the final constitution, they will form the basis for a development vision that secures the option of all Kenyans to enjoy not only their basic rights, but also good governance and sustainability. They will also facilitate the achievement of international obligations. The UN will assist the government to enhance access to basic social services, secure the capacities of key governance institutions, entrench a culture of openness, transparency and accountability, and ensure environmental sustainability.

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### Poverty Reduction Measures

Strategies proposed by the government to revive the economy and reduce poverty (initially under the IPRSP and re-confirmed in the full PRSP) include the following:

- facilitating sustainable and rapid economic growth

- improving governance

- raising income opportunities for the poor

- improving the quality of life

- improving equity and participation.

The government also lists a number of key policies and principles designed to stimulate growth and reduce poverty. These principles, which are outlined in the final PRSP, include:

- participation of the poor and vulnerable groups in poverty reduction programs

- transparency and accountability in planning and budgeting

- consensus building on policies for poverty reduction

- enhanced ownership of poverty reduction strategies

- a proactive action plan for poverty reduction

- support and assistance from international development partners

- transparent and collective solutions to identified problems

- a gender responsive poverty reduction strategy.

These categories correspond with the four areas of cooperation identified by the UN in the UNDAF and encompass all the MDGs.

The national authorities, well aware of the critical nature of the development challenges facing the country, have over the past five years launched major policy initiatives to overcome poverty. Key among the policy documents are the National Poverty Eradication Plan (NPEP) 1999-2015, the National Development Plan 2002-2008, and the Poverty Reduction Strategy Paper (PRSP) 2001-2004, together with the action plan for its implementation. The PRSP represents the most explicit programme yet for poverty reduction in Kenya. Its methodology included extensive grassroots and private sector consultations countrywide, with sector working groups, thematic groups, public hearings and national consultative forums.

The PRSP identifies measures to improve the economy, and priority actions to reduce poverty. Specific measures are identified and set out in the *Government Action Plan for Implementation of the PRS*P, which shows a costing of each policy measure, the implementing agencies, a specified time frame and indicators for monitoring the expected outcomes. Specific economic policies aimed at achieving a robust economy are outlined in a three-year macro-economic framework. The PRSP is the short-term plan for the long–term vision outlined in the NPEP, which has a time span of 15 years, in tandem with the MDGs.

### National priorities: key themes

**Agriculture and food security:** In the PRSP, agriculture and rural development are identified as the most important priority issues. Improvement of production for domestic consumption and export has been identified as a key area of investment. Other priority areas include: enhancement of rural social capital, community participation, enhanced economic opportunities for the rural poor, improvement of crop development for domestic consumption and export,

improvement of livestock and fisheries husbandry, production and marketing, and development of improved marketing infrastructure.

**Education:** Under the PRSP, the government has committed itself to making education accessible to all. It has launched a review and rationalization of the school curriculum, levies, and provision of textbooks. Emphasis is given to inclusive special needs education, early childhood education and education of the girl child. Measures such as sharing of facilities like laboratories, playgrounds and full utilization of teachers will be taken to enhance the use of existing institutional capacity. Strategies to address emerging issues such as HIV/AIDS in schools are already being implemented with the help of bilateral and multilateral development partners, and NGOs. Policy support and incentives to the private sector to supplement public sector efforts in increasing access have also been initiated. A new focus on technical and vocational training, and on teaching of science and information technology, is aimed at achieving industrialization by 2020.

> **The most visible post election shift in policy is the new government's efforts to implement free primary education. This is particularly important because, in addition to declining quality over the last ten years, some parts of the country, particularly the arid areas, have enrolment rates that are very poor.**

**Health:** A National Health Sector Strategic Plan has been drawn up as part of the ongoing reforms in the sector and in response to deteriorating health indicators. Health resources will be progressively shifted from curative to preventive and promotion services. More attention will be given to areas that provide maximum benefits to the majority of vulnerable groups.

The government has also set out to strengthen curative health services to manage the top 10 killer diseases,

> **An estimated 170 million working days are lost every year due to malaria.**

especially malaria, which accounts for 30% of all outpatient attendance and 19% of all admissions to health facilities countrywide. The objective of the government is to reduce the level of malaria infection and death by 30% by 2006, and to sustain that improved level of control by 2010. This corresponds well with the MDGs.

In order to increase health care, the government, through the National Hospital Insurance Fund (NHIF), has initiated measures to expand coverage and access to health insurance initiatives and packages, in collaboration with the private sector, foundations and the civil society.

**Water and environmental sanitation (WES):** Based on experience from past failures, the government has initiated a number of policy institutional reforms designed to facilitate poverty-focused WES programmes. Key among these are: (a) establishment of Water Supply and Sewerage Boards (WSBBs) to take responsibility for water services provision and training; (b) transfer of government WES schemes to WSSBs and communities; (c) implementation of private sector participation in financing and management of WES; and; (d) development of models for distribution of WSS services to the poor in both rural and urban areas.

**Population issues:** The priorities with regard to population issues include:

- full integration of population and migration concerns into development strategies and all aspects and levels of development planning;

- increasing availability, accessibility, acceptability and affordability of quality health services (including reproductive health and family planning)

- sustaining the collection, analysis and timely dissemination and utilization of demographic data, on a regular basis, for planning and other purposes, and

- stabilization of Kenya's population growth rate at 2.1% per annum by 2010.

**Gender mainstreaming:** The government has approved the National Gender and Development Policy, and a related Sessional Paper is under discussion in Parliament. The aim is to forge greater gender equity, in which the country has performed dismally thus far. Mainstreaming of gender issues in legislation, policies and programs has been spelled out. This will be pursued through education, training and affirmative action. The finalization of the National Gender Policy will be instrumental to achieving these commitments. Gender budgeting has also been discussed recently as a priority in addressing gender equity and empowering women.

**HIV/AIDS:** The overall national goal is to slow the spread of the pandemic and eventually bring it to a halt, and to adequately respond to its socio-economic impact.

The government's priorities and strategies articulated in the 2000-2005 National Strategic Plan on HIV/AIDS — which aims to reduce HIV/AIDS prevalence by 25% by 2005 — include:

- prevention and advocacy

- treatment and the continuum of care and support

- mitigation of social and economic impact

- monitoring and evaluation, as well as research

- management of programs.

> **The most serious man-made disasters in Kenya are civil conflicts.**

**Disasters:** Kenya continues to be exposed to a variety of natural and man-made disasters that pose a threat to human development. Among the most significant natural disasters are droughts, wild fires, floods and landslides. The most serious man-made disasters in Kenya are ethnic conflicts, followed by industrial and transport accidents.

Kenya is prone to recurring droughts, whose effects on food security have become

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pronounced in recent years. The 1997-2000 drought affected the North-eastern, Eastern, Rift Valley, Coast and Central provinces. In pastoral and agro-pastoral areas, the communities suffered livestock losses of 40 to 60%, and in some cases, up to 80%. During 2000-2002, up to 4.4 million Kenyans received relief assistance.

Floods are the second most frequent natural disaster. Coastal settlements, river flood plains and areas around Lake Victoria are vulnerable to floods. Although local communities have, to some extent, adapted to the frequency and intensity of flooding, they remain immensely vulnerable to such disasters. Landslides — closely associated with flooding — also occur with alarming frequency in some areas.

The burden of hosting large numbers of refugees, for over a decade, has led to the proliferation of small arms, crime, drug-trafficking, conflict

> **During 2000-02, up to 4.4 million Kenyans received relief assistance.**

among the refugees, and environmental damage. As a result there have been regional efforts to combat arms and drug trafficking. The problems persist.

**Environmental management**: Kenya has enacted important enabling legislation, the National Environmental Management and Coordination Act (NEMA) 1999, to signify its commitment to environmental conservation and sustainable development. As part of these efforts, the National Environment Management Authority has been established and is currently consolidating all relevant management functions on the

> **National development plans, in particular, seem to have suffered from high civil service turnover, as subsequent policy frameworks have tended to override and supersede earlier ones.**

environment. NEMA will work with decentralised committees at provincial and district level.

The PRSP also spells out the need for effective decentralization, community empowerment and partnerships between the

state and civil society in providing rural services and protecting the environment.

## Continuing systemic constraints

Despite all the foregoing commitments, there are gaps in the legal, policy and institutional domains that hinder fast, effective performance. These include antiquated pieces of legislation and policy documents, stalled or slow-moving legislative or policy reforms, and ineffective and inefficient institutional machinery. National policies, both central and sectoral, experience uncertainties due to frequent turnover. National development plans, in particular, have suffered from high civil service turnover, as subsequent policy frameworks have tended to override and supersede earlier ones. No effective follow-up mechanisms such as monitoring, assessment, and evaluation are entrenched in policy formulations. Consequently, it is difficult to measure progress in critical areas such as basic services, food security, environmental protection and governance.

A combination of these factors has resulted in unsustainable land-use practices, corruption and frequent natural disasters, such as floods and droughts. There is no apparent logical nexus between poverty reduction and sustainable development in current policy formulations. This calls for policy integration. The role of major groups, industry, the business communities, NGOs, women, youth and local communities, is inadequately mainstreamed in leading policy and institutional formulations, resulting in widespread under- or non-achievement.

## COMPARATIVE ADVANTAGE OF THE UN SYSTEM IN KENYA

The UN has been actively involved in responding to Kenya's development challenges since independence. Its work, which involves 27 different organizations, covers a wide range of functions and agency mandates, ranging from social and economic development to governance, human rights, health provision, gender mainstreaming, management of natural or humanitarian disasters, and technical support. These are the areas in which the UN has established a special or comparative expertise, capabilities and advantages. In 1998, the combined direct and indirect benefits of the UN agencies (excluding the World Bank) to Kenya amounted to more than $350 million, second only to tea as a source of foreign exchange and equivalent to 19% of exports or 3% of gross national product. The amount, according to an article carried in London's Financial Times, "exceeded the government's combined budget allocations to roads, health and social welfare".

The UN has been at the forefront of the battle to eradicate poverty and the fight against HIV/AIDS, as well as the alleviation of food insecurity and the prevention, mitigation or response to disasters in Kenya. It has accomplished this because of its neutrality and trusted relationship with the government, which places the organization in a position of unique advantage. Over the years, the various UN agencies, funds and programs have pooled their resources to provide development assistance to Kenya in the following strategic areas:

> **In 1998, the combined direct and indirect benefits of the UN agencies (excluding the World Bank) to Kenya amounted to more than $350 million, second only to tea as a source of foreign exchange and equivalent to 19% of exports or 3% of gross national product.**

- cooperating with national authorities and relevant civil society actors in tackling national priorities and challenges, as well as other goals applicable to Kenya in line with relevant UN or other international frameworks, including the MDGs, to achieve targeted outcomes

- Building common databases and knowledge networks through support to data collection, analysis and monitoring and evaluation

- fostering joint advocacy and upstream policy advice on the implementation of global conventions, including the MDGs, with a focus on mobilization of — and provision of — financial and technical resources for national and mandated goals

- capacity building and creation of expertise among national and local institutions to deliver development programmes

- support to decentralization and

> **Key to the UN's strategy in Kenya will be the desire to see improved accountability, transparency and responsiveness in all sectors.**

local level participation, including partnerships with local level CBOs and grassroots groups

- design, implementation and monitoring of practical projects and programmes intended to test, pilot or showcase emerging policies and strategies (e.g. the PRSP or decentralised planning).

## VALUE OF A COORDINATED APPROACH

Operating under the UN Resident Coordinator mechanism, the UN country team has made substantial progress in working more closely together, strengthening opportunities for joint or common management of UN operations. Consequently, an integrated system-wide approach to development cooperation has been achieved. Through its various structures and mechanisms, the UN country team provides collective leadership to the organization's operations, approves and monitors annual Resident Coordinator system work plans, oversees the work of Theme Groups and operations committees, including

the approval of their respective work plans, and seeks and acts on ways to strengthen collaborative planning and operations of the UN in Kenya.

With the realization of harmonised programme cycles for UNDP, UNFPA, UNICEF and WFP starting in 2004, the operational activities of the UN are set to achieve even greater gains in programme coherence and complementarity. This will also more effectively define the focus of the UN and thus add further value to its comparative advantage in support of the people and the government, particularly as an honest broker and trusted partner. The UN will be able to support the government in addressing the key challenges, focusing on the following key thrusts:

- building stronger inter-sectoral coordination and integration, and regional and global networks

- effective poverty monitoring, assessment and evaluation mechanisms at the national and district levels in line with international commitments

- supporting the convergence of development and poverty reduction themes in central and sectoral policy and institutional formulations

- validation of political will at all levels and strengthening of other governance imperatives at the national and decentralised levels

- strengthening action to confront HIV/AIDS, malaria, TB and poverty, and environmental degradation in all its dimensions.

These issues will be further elaborated in the next section, which outlines the UN's response to the national priorities identified in this section.

## RATIONALE FOR UNDAF CHOICES

Based on the PRSP, the CCA and the Millennium Development Goals, the overarching goal of the UN is to support the government in its efforts to create an enabling environment for the improvement of the quality of life and the well-being of Kenyans — by reducing poverty — with a particular focus on the most disadvantaged groups and regions.

In response to this goal, and taking into account the full range of human rights, the CCA, the priorities identified by the government for reducing poverty under the PRSP, as well as the Millennium Development Goals, the UN country team has identified four strategic areas of cooperation to be the pillars of the new UNDAF:

**GOOD GOVERNANCE AND THE REALIZATION OF RIGHTS**

Key to the UN's strategy in Kenya will be the desire to see improved accountability, transparency and responsiveness in all sectors, strengthening the capacity for good governance, assisting in the development of partnerships between the public sector, civil society and the private sector in policy formulation and implementation, boosting the capacity and competence of state institutions responsible for drafting bills, law enforcement and administration. The Narc Manifesto calls for elimination of corruption, slimming of civil services, devolution of power to the regions, all in the context of a new constitution. The UN will support new initiatives to support this new resolve.

With regard to basic social services, the UN will support the Narc Government's commitment to free basic education, improved access to health care delivery to all Kenyans so as to create an educated a healthy workforce to take advantage of opportunities that present themselves in an "open economy" (Narc's Post Election Action Programme 2003).

The strategy will seek to contribute to the fulfilment and respect of human rights through the elimination of human and income poverty, increased human security, and more equal opportunity for all segments of the population. There will be a particular focus on children, women and other vulnerable

groups, including the elimination of discrimination against women, access to education and health care, including reproductive health, and the right to life, liberty and security of the person. These prerequisites are tied to the various human rights instruments and human rights programming approaches.

## REDUCED INCIDENCE AND SOCIO-ECONOMIC IMPACT OF HIV/AIDS, MALARIA AND TB

There is no simple solution to these complex diseases. People themselves must be part of the solutions to the problems. As most Kenyans live in community settings, a strategy for community capacity building to address these problems is essential. Such a strategy will focus on prevention, care, treatment, and mitigation, and will be supported by advocacy, social mobilization and the monitoring of ongoing programs at all levels of society. Kenya, with support from the UN and other partners, has achieved positive results in adopting this combination of strategies in the past 5 years. These programming experiences have become useful elements in demonstrating the value of coordinated work.

**Strengthen national systems for emergency preparedness, prevention, response and mitigation.**

The focus will be on strengthening national and local emergency coordination structures and mechanisms aimed at responding to natural calamities, such as droughts and floods, and enhancing resilience. A related aspect will be to improve the delivery systems for relief provision to ensure the most vulnerable members of communities benefit. In addition, a strategic framework for disaster preparedness and management, as well as the search for lasting solutions for refugee and IDPs problems, is necessary. This will constitute a key issue for attention under this UNDAF.

## PROMOTE SUSTAINABLE LIVELIHOODS AND PROTECT THE ENVIRONMENT

The priority will be to reinforce emerging positive trends relating to community-empowered and demand-driven adoption of pro-poor technology for food security and environmental protection. An example is the 'replicability' of the experience gained in 'Farmer Field Schools', which have broken new ground in strengthening extension work. The UN will also work with other partners to confront the institutional challenges implied by the PRSP, focusing on ways of creating institutional capacities at the district level to respond to demands (for services and funds) emerging from community based organizations. In this regard, integrated pilot projects will be initiated in Bondo District, Western Kenya.

> **80% of Kenyans derive their livelihood from land and natural resources.**

80% of Kenyans derive their livelihood from land and natural resources. Therefore, the UN will promote and support initiatives aimed at conservation, sustainable utilization and management of the environment and natural resources, especially land, water and forests, which together constitute an integral part of national planning and poverty reduction efforts.

The UN will also explore measures to create employment and raise incomes for Kenyans, through interventions in such areas as credit and finance, infrastructure provision, or marketing.

## ANALYSIS OF THE AREAS OF COOPERATION

### AREA OF COOPERATION 1: PROMOTE GOOD GOVERNANCE AND THE REALIZATION OF RIGHTS

Under this area of cooperation, the UN will achieve two key outcomes:

**Outcome 1: Increased access to basic social services**

Situation analyses undertaken by UN agencies and data collected by the Central Bureau of Statistics show that many Kenyans, especially the poor, have no access to basic social services, either because their incomes are too low or because basic social facilities are unavailable in their areas. The government accepts that the charter on social integration sets out a series of basic rights. These rights include access to literacy and numeracy for all men and women, access to health, including reproductive health, freedom from preventable diseases, sufficient food and clean water to maintain life and well

> **Many Kenyans, especially the poor, have no access to basic social services, either because their incomes are too low or because basic social facilities are unavailable in their areas.**

being, among other rights.

**Education:** The national goal is Education For All (EFA) by 2015, which will be achieved through enhancing primary school enrolment and completion rates, and through sector-enabling policies regarding teachers' deployment. This goal is similar to Millennium Development Goal number 2 — achieving universal primary education. The UN will assist the government to achieve this through the following actions:

- support access to, and completion of, free and compulsory primary education of good quality

- support girls' full and equal access to quality basic education, improved early childhood care and development, and continuing education for youths and adults

- strengthen capacity development in education planning and implementation for the provision of quality basic education for all

- support implementation of the Education Sector Strategic Plan, with a special emphasis on elimination of gender

disparities, and meeting the learning needs of vulnerable groups

- support improvement of the teaching/learning environment to make it conducive to quality education, and provide improved teaching-learning materials and methodologies

- support the development of gender responsive and quality instructional materials incorporating life skills and HIV/AIDS prevention

- support the expansion of quality services for early childhood care, development and education, especially in disadvantaged areas; strengthen school-

> **In family planning, the Kenyan Government's target is to increase the contraceptive prevalence rate from the 1998 figure of 39% to 62% in 2010.**

feeding programs in disadvantaged areas to support children's participation in education

- support training and orientation of teachers and other educational personnel, as well as school communities, to improve the management and provision of quality education

- advocate for the review of policies and provision of education and information on prevention and control of malaria and other environment-related problems.

**Health:** The government is committed to the goal of providing health for all. The targets set for the period 1998-2010 include reduction of infant mortality rate from 71 to 63 per 1000 live births, under-five mortality from 112 to 98 per 1000 live births, and maternal mortality rate from 590 to 170 per 100,000 live births. In addition, the government is committed to reducing morbidity of low income and disadvantaged groups from malaria and acute respiratory infection by 15% by 2010 and by 25% by 2015. It is also committed to increasing professionally attended deliveries from 45% to 90%, and full immunization coverage from 65% to 98% over the same period. The government intends to enhance the provision

of a comprehensive and integrated system of reproductive health that offers a full range of services, including family planning, safe motherhood and child survival, prevention and management of sexually transmitted diseases, including HIV/AIDS, promotion of adolescent and youth health and management of infertility.

In family planning, the Kenyan Government's target is to increase the contraceptive prevalence rate from the 1998 figure of 39% to 62% in 2010. Using a strategy that embraces dialogue and analysis as the basis for achieving sustainable improvements in the access to quality health, including reproductive health, safe water and environmental sanitation, the UN will:

– identify and strengthen partnerships with training institutions, civil society and NGOs on health, including rural health information and services

– support and play a catalytic role in capacity building at national level for policy formulation through advocacy for the development of supportive legal and regulatory frameworks; advocate dedication of human and financial resources to reproductive health, as well as child and adolescent health care services. A special emphasis will be given to provision of reproductive health information and services to adolescent and disadvantaged populations at the district level

– assist the government to reduce malaria infection and deaths by 30% by 2006, and sustain improved control by 2010. National efforts to eradicate polio, control measles and eliminate neonatal tetanus will also be supported

– reduce morbidity and mortality from childhood immunisable diseases, through effective and sustainable immunization services, by ensuring that coverage for under-one-year-olds is at least 90%

– advocate the review of policies and provision of

education and information on prevention and control of malaria and other environment-related problems.

**Water and Sanitation:** The government is committed to reducing the lack of access to safe drinking water by poor households by 8% in 2004, to create by 2010 universal access to safe water. The goal is also to eliminate, by 2010, the current shortfall in basic sanitation arrangements in poorest households, through an average increase of 6% per annum. Millennium Development Goal targets call upon nations to halve by 2015 the proportion of people without sustainable access to safe drinking water. This commitment was reiterated in the World Summit on Sustainable Development in Johannesburg in 2002. The Millennium Development Goals also call for improvement of the proportion of people with access to improved sanitation by 2020. The UN will:

– support government efforts to: develop better policy on sanitation and safe water, especially among the poor, in a participatory process, and to refine and implement safe water and sanitation practices.

**Outcome 2: Capacities of key national governance institutions enhanced**

Consultative processes during the preparation of the Poverty Reduction Policy Paper identified poor governance as the root cause of poverty. Poverty reduction will require the institutionalization of good governance to facilitate entrenchment of a culture of accountability, transparency and openness at all levels of society. The new government is taking a particularly vibrant approach to addressing Kenya's long-standing transparency and accountability problems.

Specific actions in support of this outcome

**The smooth and peaceful transition witnessed in 2002, together with the enthusiasm demonstrated by the new government to institute reforms, is occasioning a major evaluation by the donor community of the wisdom of withholding aid. We are likely to witness not only a resumption of aid in 2003 but also private investments in the medium term.**

will be tied to good governance, constitutionalism and judicial reform.

On good governance, the UN will:

- support development of governance institutions that encourage accountability, transparency and participation in decision-making processes

- assist the government to build capacity in government and civil society for implementation of the poverty reduction strategy

- initiate alliances among the poor so that they can pool their own resources towards poverty reduction

- promote entrenchment of a culture of transparency, openness and accountability of governance institutions to promote popular participation, improved justice and human rights, including free access to information.

On constitutionalism and administration of justice, the UN will:

- support popularization of the new constitution

- support review of other subsidiary laws, especially those with an immediate impact on poverty alleviation

- provide continuous civic education to all segments of society with regard to such issues as elections and human rights, in line with the new constitution

- support strengthening of the National Assembly's research and investigative capacity, its oversight function, and its interface with the East African Legislative Assembly

- support enactment and institutionalization of a comprehensive framework for resource mobilization and utilization of public financial resources through the Government's medium term expenditure framework, as well as monitoring and evaluating the application of those resources

- support processes aimed at enhancing the administration of justice and the rule of law

- provide support for the generation of information on national poverty eradication, education and communication, and capacity building for investigative journalism

- support the evolution and implementation of a national framework for monitoring of progress toward achieving international commitments, including the MDGs

- support the evolution and institutionalization of a national policy on popular participation within the context of

> **Over 90% of Kenyans are aware of the nature and transmission of HIV/AIDS. The challenge for the UN is to assist in ensuring that this awareness is translated into preventive behaviour.**

a decentralised governance system; support capacity development functions within the system

- support policy dialogue and capacity building to promote and strengthen national and decentralised governance institutions, and entrench good governance and gender mainstreaming in governance.

The detailed lines of action for Area of Cooperation 1 are in the annexed tables.

**AREA OF COOPERATION 2: REDUCE THE INCIDENCE & SOCIO-ECONOMIC IMPACT OF HIV/AIDS, MALARIA AND TB**

The national goal is to stop the spread of HIV/AIDS and reduce its impact on Kenyans through reduction of HIV prevalence by between 20 and 30% among 15-24 year-olds, by 2005. Over 90% of Kenyans are aware of the nature and transmission of HIV/AIDS. The challenge for the UN is to assist in ensuring that this awareness is translated into preventive behaviour. Cooperation strategies to be adopted include:

Supporting HIV/AIDS and TB prevention programmes — prevention interventions and strategies will seek, *inter alia*, to:

– ensure the infected do not infect others

– prevent and treat sexually transmitted infections and promote abstinence and the use of condoms

– support advocacy, communication and resource mobilization by creating awareness, as well as advocacy on the use of barrier methods such as condoms and maintaining faithfulness

– advocate and lobby for change of socio-cultural practices and beliefs that facilitate the spread of HIV/AIDS

– promote behaviour change communication, especially among the youth, particularly using the groundbreaking *"Heart and Soul"* project (a TV soap on AIDS).

– Contribute to improving the nutrition of people affected by HIV/AIDS and TB by — *inter alia* — strengthening community initiatives and home-based care, with a special focus on widows and AIDS orphans.

The UN will seek to achieve three key outcomes.

### Outcome 3: Overall HIV/AIDS and TB prevalence reduced

**The UN will**:

– intensify dissemination of generic information on RH, such as safe sexual behaviour and drug abuse prevention among youth out of school, including street children

– intensify advocacy for gender mainstreaming in programming and implement the developed communication strategies on HIV/AIDS, including production and distribution of school learning materials

– support the Ministry of Health to implement a comprehensive package for

accelerated access to HIV/AIDS care, including procurement of generic anti-retroviral drugs [for the most affected and vulnerable groups]

– intensify fundraising through mobilizing national and global resources

– support the development and implementation of a comprehensive package on voluntary counselling and testing according to the developed guidelines, including prevention of mother-to-child transmission of the disease

– support programmes and interventions that provide care and nutritional support to AIDS patients.

### Outcome4: Capacity to design, implement, monitor and evaluate programmes

Under the National HIV/AIDS Strategic Plan, 2002-05, sentinel surveillance is the primary mechanism for monitoring and evaluating interventions. The UN's strategy will be aimed at further strengthening this mechanism to increase the reliability and 'representativeness' of data, and to estimate prevalence for all regions. It will ensure that monitoring and evaluation become a core part of the fiduciary architecture of financial management, providing information on performance for all concerned. In order to attain this outcome, the UN will:

– support nationally identified capacity building needs — particularly the National AIDS Control Council (NACC) and its structures — to develop and implement a monitoring and evaluation plan, including financial utilization

– support national HIV/AIDS and TB surveillance and operations research, including yearly dissemination of data and mapping and training for cadres for different sectors involved in the national response to HIV/AIDS and drug prevention

– support extension of Directly Observed Treatment (DOT) to communities and provide food assistance to HIV/AIDS and TB patients and their families

– strengthen surveillance, data management, analysis and utilization for HIV/AIDS, and TB control.

**Outcome 5: Morbidity and mortality resulting from malaria reduced**.

The UN will:

– support implementation of the malaria control strategy developed by the Ministry of Health

– strengthen managerial capacity within the Ministry of Health Malaria Control Unit

– support monitoring, evaluation and research in order to constantly update and upgrade control strategies

– strengthen epidemic preparedness and response.

The detailed lines of action for Area of Cooperation 2 are in the annexed tables.

**AREA OF COOPERATION 3: STRENGTHEN NATIONAL & LOCAL SYSTEMS FOR EMERGENCY PREPAREDNESS, PREVENTION, RESPONSE & MITIGATION**

The UN will seek to design and implement programmatic interventions to address disaster management, conflict management, as well as the needs of refugees and internally displaced persons (IDPs). It will contribute to the achievement of five key outcomes as outlined below:

**Outcome 6: National Disaster Management Policy institutionalised at all levels**

The UN will draw up strategies to support legal reform, institutional capacity building, advocacy and policy dialogue, and development of strategies for resource mobilization and gender mainstreaming. Some of the specific actions envisaged include:

– support the government to finalise and implement institutional structures for a National Disaster Management Policy

– developa UN-integrated support to National Disaster Management Authority

– support training in the principles and methodologies of emergency and contingency planning.

**Outcome 7: Strengthened disaster management, including increased capacity for peace building, conflict resolution and reduction of small arms proliferation**

Some of the strategies to be used to achieve this outcome include:

– deepening cooperation in national and regional peace building projects and small arms proliferation prevention

– supporting the government to identify early warning indicators and in installing networks for information communication technology.

Some of the specific activities include:

– strengthen existing food security and disaster coordination structures

– develop guidelines for disaster prevention, preparedness, and management.

**Outcome 8: Enhanced capacity of national and district authorities to collect, disseminate, and utilise early warning, vulnerability assessment and needs assessment data.**

The UN will strengthen national and local authorities' capacity for disaster preparedness and prevention. Specific actions envisaged include:

– enhanc early warning capacities of national and district authorities through training, improved data collection, and improved reporting techniques

– support joint mechanisms for Early Warning and Vulnerability Assessment reporting for the government and partners.

**Outcome 9: Strengthened response to and management of refugees' and IDPs needs and rights**

Some $70 million have been earmarked for refugee protection in Kenya for the next five years. This will focus on protection, care and

maintenance, social and community services, and resettlement and repatriation. However, over this period it is predicted that there could be major — possibly fundamental — changes. Key among possible changes would be the attainment of peace, security and sustainable livelihoods in Somalia and Southern Sudan. Under these conditions, the programme would be fundamentally reoriented from its current asylum focus to supporting the safe return of refugees to their countries of origin.

Whatever the case, the UN will support the achievement of the above objectives, working under the internationally defined legal framework and policies. The UN will also support the government to formulate a national policy and ensure that relevant UN agencies and partners are made aware of IDPs' presence and their needs. The UN will build synergy with the government and all actors for more effective management, and for resolution of problems affecting refugees and IDPs.

Some of the major lines of action to operationalise this outcome include:

- assist in defining the essential protection and care principles of refugees, in accordance with international standards

- mitigate the impact of refugee presence, and strengthening environmental restoration programmes

- promote public awareness on refugee issues

- facilitate the safe return of displaced persons to their habitual residence

- promot public awareness on IDP issues, including access to basic services and rights in their temporary settlements.

The detailed lines of action for Area of Cooperation 3 are in the annexed tables.

### AREA OF COOPERATION 4: PROMOTE SUSTAINABLE LIVELIHOODS & PROTECT THE ENVIRONMENT

The UN will contribute to the achievement of four key outcomes:

**Outcome 10: Increased availability, access and utilization of quality data disaggregated by age and sex, and information analysed by gender, for planning, monitoring and evaluation.**

Under this outcome, the UN will assist the government to develop a solid base of qualitative and quantitative information to measure progress towards the MDGs on halving hunger and extreme poverty. Specifically, the UN will:

- support in-depth analysis of the 1999 census, to make available statistics for planning and monitoring purposes

- support implementation of the *Integrated Multi-sectoral Information System (IMIS)* and the *Kenya Demographic Health Survey (KDHS)* with data disaggregated by age and sex and the analysis done by gender

assist with the preparation of natural resources inventories, maps and trend analyses produced by national and local authorities.

**Outcome 11: Effective community-based management of natural resources**

The UN will support the government in developing and implementing policies and practices that contribute to sustainable management of natural resources in national, local and rural development. It will also assist in the preparation and implementation of Sustainable Natural Resource Management Plans at the local level by communities and other stakeholders. Some of the specific actions include:

- support to identify natural resource management and biodiversity knowledge gaps

- contribute to coordination of community-level training on the most appropriate technologies or approaches, such as integrated nutrient management, water harvesting, or energy-efficiency optimization.

**Outcome 12: Improved food security at household and community level**

The UN's strategy will include supporting local and district authorities to make appropriate resource allocation choices, taking into consideration women's economic security and HIV/AIDS. Assistance will be extended to women's and other community groups, empowering them to identify priority problems, implement solutions and articulate demand for relevant services.

The UN will also assist the government in the implementation of gender-balanced legislation governing private and communal land and water rights. It will also work with the government and NGOs to reverse declining trends in natural resource productivity, including forestry and other valuable ecosystems. Examples of specific actions include:

– intensify capacity building for participatory priority setting, planning and implementation of integrated projects, for example on HIV/AIDS

– support participatory learning activities for women and other groups, for example through Farmer Field Schools.

**Outcome 13: Expanded opportunities for sustainable production and income diversification.**

The UN will also support development and implementation of policies and programs to eradicate poverty in rural areas as the key to ensuring food security for all, and sustaining broad-based national economic growth.  In addition, it will support the training of local authorities and communities in natural resource inventory preparation, land use evaluation, suitability and planning techniques. It will support initiatives that ensure that women have access to — and control over — use of natural resources for food production. It will advocate ownership, access and control of land by women, and strengthen income diversification and coping mechanisms. Some of the specific actions envisaged include:

– support small agro-based industries to create employment opportunities and improve livelihoods

– strengthen production capacities in sectors with high export potential.

The detailed lines of action for Area of Cooperation 4 are in the annexed tables.

**PROGRAMME RESOURCES FRAMEWORK**

The UN is committed to realizing 13 outcomes during the 2004-2008 UNDAF cycle, working in close collaboration with government and other development partners. The estimated resource mobilization towards these outcomes is indicated in the table below. These figures are indicative as the UN agencies are still consulting with their headquarters on levels of resources expected for the next cycle of country programming. (UNFPA pointed out that this is a UNDP term)

The greatest resources are earmarked for strengthening management and resolution of refugees' and IDPs' problems ($148.4m), followed by reducing HIV/AIDS, malaria and TB prevalence (US$74.24m), and increasing access to basic social services ($57.3m). Expected resources mobilization by areas of cooperation and by agencies is indicated at the end of the document.

**ESTIMATED UNDAF PROGRAMME RESOURCES (US$)**

# Area 1

**Governance & rights**

| **Outcome 1** | **Outcome 2** | | |
|---|---|---|---|
| Increased access to basic social services | Capacities of key governance institutions enhanced | | |
| 56.8m | 13.8m | | |

# Area 2

**To contribute to the reduction of the incidences of & mitigation of the social & economic impact of HIV/AIDS, malaria & TB**

| **Outcome 3** | **Outcome 4** | **Outcome 5** | |
|---|---|---|---|
| Overall HIV/AIDS & TB prevalence reduced | Capacity to design, implement, monitor & evaluate programs strengthened | Morbidity & mortality of malaria reduced | |
| 74.2m | 9.5m | 16.2m | |

# Area 3

**To contribute to the strengthening of national & local systems for emergency preparedness, prevention, response & mitigation**

| **Outcome 6** | **Outcome 7** | **Outcome 8** | **Outcome 9** |
|---|---|---|---|
| National Disaster Management Policy institutionalised at all level | Strengthened disaster management, including increased capacity for peace building, conflict resolution and reduction of small arms proliferation | Enhanced capacity of national & district authorities to collect, disseminate & utilise Early Warning, Vulnerability Assessment & Needs Assessment Data | Strengthened response to and management of refugees' and IDPs needs and rights |
| 6.3m | 4.2m | 3.5m | 68.9m |

# Area 4

**To contribute to sustainable livelihoods & environment**

| **Outcome 10** | **Outcome 11** | **Outcome 12** | **Outcome 13** |
|---|---|---|---|
| Increased availability, access & utilization of quality data disaggregated by age and sex and information analysed by gender for planning, monitoring & evaluation | Effective community based management of natural resources | Improved food security at house-hold & community levels | Expanded opportunities for sustainable production & income diversification |
| 4.5m | 10m | 7.7m | 5.0m |

## UNDAF Implementation

### Ensuring national ownership

The UN System will promote advocacy and policy dialogue with bilateral and multilateral development partners, the private sector, civil society and NGOs, to build a common vision critical for the successful implementation of the UNDAF. The UN will support government initiatives to empower key governance institutions to facilitate accountable, transparent and open decision-making on programme implementation. This will reduce transaction costs and foster a sense of national ownership of UNDAF programme activities. 'Owners' go more out of their way to ensure a programme's success, so that they can continue enjoying the benefits.

### Collaboration and partnerships

The UNDAF offers a unique opportunity for working together through the design and implementation of joint programming, formulation and implementation of individual programs — developed within the UNDAF framework — and parallel programs. In addition, the emerging political dispensation in Kenya offers new opportunities for partners to work together in such areas as promoting MDGs, joint advocacy and analytical work that feeds into processes such as the PRSP.

Partnership building is critical for successful programme implementation. Strong partnerships not only bring additional resources to programs but also create a base for programme

sustainability because, as Kenyans have learnt in the *'harambee'*[1] spirit, in unity there is strength. The UN will support the development of partnerships between the public sector, NGOs, community-based and grassroots organizations and the private sector. The UN's track record in this regard should enhance its comparative advantage.

Partnership building can facilitate capacity-building for conflict resolution, as different actors in the development arena learn to accommodate the views and interests of others. Many community projects have failed in Kenya because protagonists had not learnt the art of conflict resolution. Implementation of UNDAF programs will create an opportunity for the UN to apply its wealth of experience in peace building and conflict resolution.

The UNDAF will advance multi-sector approaches to development in order to draw upon the comparative advantages of the UN. Currently, a number of agencies are jointly providing services in Kenya. The UN will strengthen this trend towards more integrated and collaborative service provision.

### Capacity building

Programme implementation and monitoring will focus on capacity building at national and local levels, advocacy and policy dialogue, social mobilization, policy development, strategic partnership building among actors and stakeholders, and decentralised planning. Each UN agency will prepare a country programme on the basis of the UNDAF,

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[1] *Harambee* is a Kenyan spirit of pooling resources together for the common good.

globally applying these principles. The UNCT has also put in place monitoring and evaluation structures for the UNDAF.

## MONITORING AND EVALUATION

A clear monitoring and evaluation plan is essential for effective implementation of the UNDAF as this will allow UN agencies — individually and collectively — to assess their strengths and weaknesses and make the necessary adjustments in terms of delivery, impact and results.

A set of indicators has been formulated for each of the 13 expected UNDAF outcomes under each of the four areas of cooperation. For each indicator, baseline data is either already provided or will be required, representing the situation as of 2002/2003. Against the baseline, expected outcomes for the end of the UNDAF cycle (2008) are provided (or will be required). An annual update will be prepared through the Resident Coordinator system, as well as two reports, the first midway through the UNDAF cycle (2006) and the second at the end of the UNDAF cycle. Programme reviews will be expanded to include all partners in UN programs and joint activities, including beneficiaries. This will allow for periodic dialogue, learning and feedback.

### FORMAL REVIEWS AND EVALUATION

Three formal reviews and evaluations are envisaged:

### Annual thematic reviews

These will allow for inter-agency feedback and refinement of UNDAF indicators. Mid-term programme and project reviews will be incorporated into the annual review and will feed into the Resident Coordinator (RC) Annual Report process.

### Mid-term UNDAF review

A joint mid-term evaluation involving the government, UN and other development partners will be conducted at the mid-point of the UNDAF (2006). This review will be synchronised with the respective agencies' mid-term country programme reviews. This will particularly be the case for UNDP, UNFPA, UNICEF and WFP. The mid-term evaluation will provide the opportunity for any mid-course adjustment to ensure that UN efforts remain focused on national priorities. It will also provide the opportunity for other programme refinement needed to keep the UNDAF on track.

### UNDAF end-of-cycle review

A joint evaluation of the UN system in Kenya will be undertaken with a view to obtaining substantive feedback on the progress made towards achieving stated UNDAF outcomes in each of the four areas of cooperation. The end of the UNDAF review will ensure that achievements and lessons learnt are recognised and recorded. Constraints experienced and ways and means of addressing such constraints in the future will also be determined. Any best practices emerging from the UNDAF process will be acknowledged and disseminated.

An important aspect of this review and evaluation will be to establish the extent to which crosscutting issues have been integrated and addressed, and the

resultant gains. This will start in the annual reviews and through the mid-term evaluation, so that the final review will be to assess the overall impact.

**INTERNAL REVIEW AND EVALUATION MECHANISMS**

### The three UN theme groups

The three UN theme groups — 1) Governance and rights, 2) HIV/AIDS, and 3) Disaster and sustainable livelihoods — will meet regularly and serve as the primary mechanisms for implementing and monitoring the UNDAF (see details below in 7.4.) They will do so through annual work plan reviews, with clear goals and objectives to be incorporated into the RC Annual Report. Joint field assessments and monitoring will be promoted. The RC's report and work plans will act as the key mechanisms for annual reporting on UNDAF progress to the Kenya Country Committee (KCC). Through the theme groups, the UN will derive the key indicators for monitoring and tracking progress in their area of focus, taking into account the MDGs. The latter will ensure that implementation of the UNDAF complements national efforts to monitor the MDGs. Theme groups will thus be expected to establish a clear and verifiable linkage between their indicators and the expected outcomes of the UNDAF, and how they contribute to the achievement of the MDGs.

### The UN Country Team

The KCC will be responsible for review and validation of the collaborative framework under the UNDAF, and for ensuring that individual agency country programs derive from the UNDAF. In particular, they will check to ensure that country programme documents reflect the UNDAF goals and outcomes. The team will also act to ensure the effective functioning of theme groups, through regular reporting to the KCC. Monthly KCC meetings will continue to provide high-level policy direction, facilitate information exchange, and strengthen partnerships amongst agencies. Agency work plans and reviews will also be expected to focus on inter-agency collaboration.

### The UNDAF Steering Committee

This committee will continue to act as the technical arm of the KCC. It will meet monthly, convened by the head of the Resident Coordinator Secretariat, to review progress on collaboration and make recommendations to the KCC.

### The RC Secretariat

The RC Secretariat will compile periodic reports on the work of theme groups or task forces, prepare the RC annual report, and assist the various structures to coordinate internal reviews, other analyses, and review or evaluate missions.

**OVERALL UNDAF EVALUATION AND IMPACT ASSESSMENT**

The UNDAF evaluation will be an assessment of the progress made towards achievement of the outcomes identified in the programme framework. It will — to a large extent — be a cumulative assessment of the monitoring data available from annual reviews, outcome evaluations, thematic, and programme reviews.

This is distinct from the review of progress against targets for all outcomes and impact. It will be an in-depth evaluation of the outcomes, in two principal regards: 1) The contribution of the agencies towards achieving the outcome, specifically focusing on how collaborative and joint programming by the agencies have enhanced effectiveness of the UN system, and 2) an analysis of how much the outcome and other associated outcomes together have (or have not) contributed to achieving the desired impact. This aspect of the evaluation is a mainly qualitative analysis, seeking to trace causality and attribution. The evaluation should draw out lessons that will — in addition to the next CCA — inform design of the next UNDAF.

Finally, fundamental to the UNDAF evaluation will be an evaluation of the UNDAF as a framework, asking three key questions:

- has the UNDAF contributed to more complementary and collaborative programming by agencies?

- have agency programmes taken a different shape because of the UNDAF, and has there been added value resulting from synergy?

- has effectiveness been enhanced?

### THEME GROUPS IN THE 2004-2008 UNDAF

Three broad theme groups are proposed under this UNDAF to spearhead collaboration. These groups are:

1) Governance and rights

2) HIV/AIDS

3) Disaster and sustainable livelihoods.

The key consideration in creating these groups is to ensure that they are broad enough to cover the four areas of cooperation agreed under the UNDAF, as well as to provide for more active involvement of many agencies. Three groups are therefore proposed, according to the four areas of cooperation. The groups will be at liberty to create sub-groups (task forces, etc.) to advance any specialised tasks, so long as this is clearly defined and tied to a specific time frame for completion.

### Governance and rights theme group

This group addresses the UNDAF area of cooperation *"promote and contribue to good governance and realization of rights."* The theme group will combine the work previously addressed by the *Basic Social Services and Governance*, *Livelihoods* and *Poverty Reduction* theme groups. Sub-groups on health and nutrition, education, and water and sanitation may continue to operate in support of the theme group. Focus areas are drawn from the relevant UNDAF lines of action. The group will be chaired by UNDP, with UNICEF as the alternate.

### HIV/AIDS theme group

This group will continue operating as before, but will now be informed by the UNDAF lines of action in the relevant area of cooperation (HIV/AIDS, malaria and TB.) This group will be chaired by UNFPA with UNESCO as the alternate.

### Disaster Management and Sustainable Livelihoods theme group

This group will combine the activities hitherto addressed by the *Disaster Management* and *Rural Development and Natural Resources Management* theme groups. It will cover the two relevant UNDAF areas of cooperation: a) *"contribute to the strengthening of national and local systems for emergency preparedness, prevention, response and mitigation"* and b) *"contribute to sustainable livelihoods and environment"*.

It will be chaired by WFP, with FAO as the alternate.

### Broad terms of reference (TOR) for the theme groups

– provide guidance on policy, strategy and substance relating to their areas of focus

– ensure coherence of their work with the PRSP, UNDAF itself, MDGs and other theme groups

– monitor coherence of specific indicators with agency country programs, MDGs, PRSP and UNDAF

– provide representation vis-à-vis like-minded groups within the development community (bilateral and multilateral development partners, CSOs, etc.)

– meet frequently, with an agreed annual work plan

– carry out regular briefings to the KCC on progress and constraints

– operate on the basis of chair and alternate chair

The group may invite non-UN representatives — such as the Government of Kenya, CSO or other development partner representatives — to participate.

The UNDAF requires enhanced accountability and performance of the UN System in Kenya. It will use the Millennium Development Goals in tracking Human Development Indicators. The UNCT will use the indicators developed by different theme groups. The list of indicators to be used for measuring progress towards realization of each of the expected outcomes of the UNDAF is shown at the end of this document.

**ANNEXES:**

ACHIEVEMENTS OF THE UN SYSTEM

During the 1999-2003 UNDAF cycle, there was good exchange of information between agencies. There were regular Thematic Group consultations. It was also during this period that the second Common Country Assessment for Kenya was developed. The groups were rationalised and restructured. There was collaborative programming among agencies particularly in the area of disaster response. The UN system responded jointly in offering assistance to Bondo District in Western Kenya. There was a joint UN response to government requests for assistance in responding to the HIV/AIDS.

There was a joint UN response in the development of the sanitation policy for the Ministry of Health by theme groups. The Disaster policy was developed out of UNDMT meetings. At the same time, structures and mechanism for consultation on UNDAF have helped agencies to have regular and structured dialogue, a sense of working together alongside thematic groups has been developed. The Resident Coordinators' secretariat was created.

CONSTRAINTS EXPERIENCED

There were no clear linkages between the UN system and National programming frameworks, such as involvement of the UN in the development of the current National Development Plan. The linkage between PRSP and UNDAF theme groups was undefined. Close collaboration between agencies is still not fully operational.

There was no uniform conception of UNDAF among the UN technical staff. Only UNDP and WFP were trained on UNDAF, which failed to become an organizing tool for agencies' country programs. In a number of programs, the UNDAF was mentioned only in passing. The search for common ground among UN agencies is still elusive. The UNDAF work plan was very ambitious. Very few UNDAF programme activities have been implemented so far. Resource mobilization strategies were unclear. Field offices have not been able to mobilise large amounts of resources. Changing National Development Strategies have made it difficult for the UN to keep pace with what was happening in government. While the Office of the President manages part of the coordination, other activities fell under the former Ministry of Finance and Planning. Poor governance and weak political institutions made it difficult to follow through programme implementation. Lack of analysis of roles of the collaborating partners within the UN and with other participants has made it difficult to eliminate duplication. Aid conditionality has constrained the flow of funds into the country. This has made it difficult for the government to provide program-matching funds.

FACTORS THAT CONSTRAINED THE UNDAF

**Immediate causes**

Lack of preparedness at the country level: UNDAF was introduced before technical personnel at the country level were prepared for new roles and responsibilities. This led to internal resistance at agency level. In some agencies, UNDAF was perceived as a

foreign idea. Headquarters provided no budget for it. Agency priorities tended to override UNDAF priorities in resource allocation.

### Underlying causes

Limited dialogue/consensus building prior to and during the UNDAF preparatory process: UN agencies often assumed that the position stated in government documents, such as Development Plans, was the official government position. However, other policy papers that often did not build on earlier commitments were prepared. Partners were often not at par at the negotiating table, yet UN agency mandates often require them to develop their programs independently. Poor governance was also an issue. PRSP structures (theme groups) are not institutionalised within the government and are therefore difficult to link with UNDAF theme groups. There are no theme groups corresponding to the sector working groups of the PRSP. Historically, programme cycles are different. This history still constraints efforts to harmonise them. There is inadequate/lack of political will/support for collaboration — a lack of partnership.

The government's sense of ownership of programs is weak. Shifts in policy at national level limits programming and continuity. The complexity of UN bureaucracy is also an issue. It is often not easy to change/vary directives from headquarters.

### CONCLUSION ON LESSONS LEARNED

UN programs are still relevant in helping the government to address the development challenges facing the

country. There is a need to focus on UN assistance to areas where the impact will be greatest. Consultations among UN agencies in programme development ought to take place. To increase programmatic synergy, the UN ought to interact more closely with bilateral agencies. Wide divergences still remain in the degree of decentralization and delegation accorded by different UN agencies. Specialised agencies are required to take up and make decisions on minor policy and financial issues. Differences in administrative regulations and practices among agencies limit cooperation within the UN system. Systematic inter-agency cooperation and team building mechanisms such as retreats should be provided, not only at the level of heads of agencies, but across the board. Improved information sharing mechanisms and exchange of best practices will contribute to greater efficiency and increased impact of UN system activities. A good policy framework is an area of great consensus. However, consensus often collapses when organizations and perspectives over issues change. The main lesson is that continuous dialogue between partners will help to reduce resistance to policy changes and prepare all partners to accept the changes suggested in the UNDAF. The UN should identify a limited number of action areas, where the greatest impact can be realised so that its programs remain focused.

### HUMAN DEVELOPMENT INDICATORS FROM THE CCA (KENYA) 2001

#### Income poverty

1   Poverty headcount - % population <$1/day) adult equivalent (AE)

2     Poverty headcount - % of population < national poverty line

3     Population in absolute poverty: rural

3a    Hardcore poverty: rural

4     Population in absolute poverty: urban (%) (AE)

5     Poverty gap ratio (%) (AE)
       Rural (AE)
       Urban (AE)

6     Poorest fifth's share of national consumption
       - income share lowest 40%
       - highest 20%

6a    Gini coefficient (%)

### Food security and nutrition

7     % of children under 5 mildly underweight
     % of children under 5 severely underweight

8     % of children under 5 mildly stunted
       - rural (%)
       - urban (%)
     % of children under 5 severely stunted

9     % of children under 5 suffering from mild wasting
     % of children under 5 suffering from severe wasting

10    % of urban household income spent on food for the poorest quintile

11    % of undernourished in total population

12    Food poverty:
       - rural (%)
       - urban (%)

### Health and mortality

13    % of population with access to primary health care services

14    Estimated HIV adult prevalence rate
       - rural
       - urban

15    HIV prevalence in women under 25 who receive antenatal care in cities/major urban areas

I6     Infant mortality per 1000 live births
       - rural
       - urban
       - male
       - female

17    Under 5 mortality per 1000 live births
       - rural
       - urban
       - male
       - female

### Reproductive health

18    Maternal mortality ratio (per 100,000)

19    % births attended by skilled health personnel
       - rural
       - urban

20    Contraception prevalence rate
       - modern methods use — %

### Child health and welfare

21    % of 1-year-old children immunised against measles
       - urban
       - rural
     % national complete immunization coverage
       - urban
       - rural

22     % of children <15 who are working

### Education

23a   Attendance ratio in primary schools
       - boys/girls
     Net enrolment in primary schools
       - urban
       - rural
     Net enrolment in primary schools
       - urban
       - male
       - female
       - rural

- male
- female

24a  % of pupils starting std 1 who reach std 5
    - male
    - female

24b  % Form 1students reaching Form I
    - male
    - female

25  Adult (reading) literacy rate (%)
    - total
    - male
    - female

26  Literacy rate of 15-25 year olds (%)

## Gender equality and women's empowerment

27  Ratio of girls to boys in secondary education

28  Female share (%) of paid employment
    - non agricultural

29  % of seats by women in national government
    - parliament
    - national Assembly
    - local authorities
    - diplomatic/Administrative services
    - Senior Assistant. Secretary and above
      including Ambassador
    - judicial services

## Environment

30  Carbon dioxide emissions (mt per capita)

31  Biodiversity: Land area protected (%)

32  GDP per unit of formal sector energy use
    - US$/kg)

33  Arable land per capita (Ha)

34  % change in square kilometres of forestland in past 10 years
- forest plantation area ('000 Ha)

35  % population relying on traditional energy
    - firewood and charcoal
    - rural
    - urban

## Employment and sustainable livelihood

36  Employment of population of working age (%)

37  Urban employment rate (one week reference period)
    - male
    - female

38  Informal sector employment as % of total employment

39  Income share of poorest 40% of population (%)

40  Average urban formal wage (K$ annually per head)

41  % urban labour force in informal sector
    - male
    - female

## Housing and basic household amenities

42  No. persons per room

43  % of population with (sustainable) access to drinking water (dry season)
    - rural
    - urban

44  % of population with access to adequate sanitation
    - rural
    - urban

## Drug control and crime prevention

45  No. Crimes
- Penal code cases per 100,000 persons
    - Criminal cases filed in Resident Magistrate's Court
    - Criminal cases filed in High Court

| | |
|---|---|
| 46 Area under illegal cultivation<br>   - coca<br>   - opium<br>   - poppy<br>   - cannabis | **Security of Persons**<br>60 Recognition in law of the prohibition of gross violations of human rights affecting the security of person |

46 Area under illegal cultivation
- coca
- opium
- poppy
- cannabis

47 Seizures of illicit drugs
- cannabis ('000 kg)
- heroin (kg)
- cocaine (kg)
- mandrax ('000 tablets)

48 Prevalence of drug abuse

## International commitments on Human Rights

49 Status of ratifications of, reservations to and reporting obligations under international human rights instruments

50 Status of follow-up to concluding observations of UN human rights treaty bodies

## Democracy and participation

51 Periodicity of free and fair elections

52 No. political parties in elections

53 % registered voters who vote

54 Recognition in law of the right to freedom of expression, association and assembly

55 No. civil society organizations (per 100,000)
- no. women's groups (per 100,000 women)

56 No. newspapers per 1,000 people

57 No. radios per 1,000
- no. new licensed radios sold per 1,000

## Administration of Justice

58 Recognition in law guarantees for independence and impartial judiciary and fair trial

59 Recognition in law of the right to seek judicial remedies against state agencies/officials

## Security of Persons

60 Recognition in law of the prohibition of gross violations of human rights affecting the security of person

## Economy

61 GNP per capita (US$)

62 Decadal growth rate of GNP per capita (US$)

63 Share of exports in GNP (%)

64 Share of FDI Inflows in GDP

65 External debt as % of GNP

66 Domestic debt as % of GNP

67 Gross domestic savings as % of GDP

68 % of public expenditure on social services

69 Share of direct poverty reduction, government spending

## Total Public Spending

70 Incidence of benefits of public expenditure by income group, gender and region

## Demographics

71 Total fertility rate
- rural
- urban

72 Annual population growth (estimate %)

73 Estimated population size (in million)

74 Life expectancy (years)
- male
- female

TABLE 1: STRATEGIES AND ACTION — BY AREA OF COOPERATION

| AREA OF COOPERATION 1: PROMOTE GOOD GOVERNANCE AND THE REALISATION OF RIGHTS | | | | |
|---|---|---|---|---|
| **National Development Goals:** To promote and contribute to good governance and the realization of rights. | | | | |
| **Target:** Promotion of an entrenched culture of transparency, openness and accountability of governance institutions to promote popular participation, improved justice systems and human rights, including free access to information | | | | |
| **Expected outcomes** | **Brief description of cooperation strategies** | **Major lines of action** | **Contributing agencies** | **Programme modality** |
| **Outcome 1**<br><br>**Increased access to basic social services** | Support access to and completion of free and compulsory primary education of good quality, girls' full and equal access to basic education of good quality, improved early childhood care and development, and continuing education for youth and adults.<br><br>Strengthen capacity development in education planning and implementation for the provision of quality basic education for all.<br><br>Through a participatory process encompassing dialogue and analysis at all levels of society, the UN will make a targeted contribution to the achievement of sustainable improvements in the access to quality health services including reproductive health services, safe water and environmental sanitation, especially in areas populated by the poor. | − Support the implementation of Education Sector Strategic Plan and the realization of free and compulsory primary education, and Education for All (EFA) with special emphasis on elimination of gender disparities and meeting learning needs of vulnerable groups.<br>− Support for improving teaching-learning environments to make them conducive to quality education, including improved teaching-learning materials and methodologies.<br>− Support the development of gender-responsive and relevant quality instructional materials incorporating life skills and HIV/AIDS prevention.<br>− Support the expansion of quality services for early childhood care, development and education, especially in disadvantaged areas.<br>− Strengthen school feeding programmes in disadvantaged areas to support children's participation in school and learning.<br>− Support for equivalence between formal and non-formal education (alternative/complementary quality basic education programmes).<br>− Support training and orientation of teachers and other educational personnel including school communities to improve the management and provision of quality education services.<br>− Identify and promote strategies that will expand and strengthen partnerships with training institutions, civil society, and NGOs on health, including RH information and service issues. Advocate control of malaria and other environment-related health problems.<br>− Support and play a catalytic role in capacity building at national level for policy formulation through advocacy and the development of supportive legal and regulatory frameworks; advocate dedication of human and financial resources to reproductive health as well as child and adolescent health care services. | UNDP<br><br>UNIDO<br><br>UNICEF<br><br>UNFPA<br><br>UNIFEM<br><br>UN-HABITAT<br><br>UNESCO<br><br>UNDCP<br><br>WB<br><br>WFP<br><br>WHO | Collaborative and joint programming |

| | | | | |
|---|---|---|---|---|
| | | − Support national efforts to eradicate polio, control measles and eliminate neo-natal tetanus. | | |
| | | − Support national efforts to implement the water policy, refine approaches to safe water practices and facilitate the participatory development of a sound sanitation policy | | |
| | | − Support RH information and services at the national and district levels | | |
| **Outcome 2** **Capacities of key national governance institutions enhanced** | Provide support for ongoing comprehensive and other piecemeal constitutional reforms as appropriate, and promote a move towards a national culture of constitutionalism. Support strengthening of national capacity for enhanced accountability. Provide support for processes and mechanisms that would ensure popular participation at all levels. Utilise the resources of the Kenyan Diaspora to build public, private and civil sector capacities. | − Support the popularization of the new Constitution. <br>− Support review of other subsidiary laws, especially those with a direct and immediate impact on poverty alleviation, to ensure consistency with the new constitutional provision. <br>− Continue to provide on an ongoing basis, civic education to all segments of society in regard to issues, elections and human rights. <br>− Support the strengthening of National Assembly's research and investigative capacity, as well as its oversight functions <br>− Support the enactment and institutionalization of a set of policies and laws that aim to deter economic crimes and ensure transparency and accountability. <br>− In the context of the PRSP and other national poverty reduction plans, support the evolution and institutionalization of a comprehensive framework for resource mobilization and utilization of public financial resources through the MTEF, as well as monitoring and evaluating the application of those resources <br>− Support processes aimed at enhancing the administration of justice and the rule of law. <br>− Provide support for the formulation of a national poverty-focused information, education and communication (IEC) strategy, and capacity building for investigative journalism <br>− Support the evolution and implementation of a national framework for monitoring of progress towards achieving international commitments, including the MDGs. <br>− Support the evolution and institutionalization of a national policy on popular participation within the context of a decentralised governance system <br>− Support capacity development functions in this (effecting a decentralised system) regard <br>− Provide financial and other support for the matching and utilization of the skills and experience of Kenyans living abroad in organizations contributing to national development | UNDP <br>UNIDO <br>UNFPA <br>UNIFEM <br>UNEP <br>UN-HABITAT <br>UNESCO <br>UNDCP <br>IOM <br>WB <br>IMF <br>UNIC <br>WHO <br>UNICEF | Collaborative and Joint programming |
| **Crosscutting cooperation strategies: <u>Operational strategies will include the mainstreaming of gender and population issues into programming</u>.** | | | | |

| AREA OF COOPERATION 2: TO CONTRIBUTE TO THE REDUCTION OF THE INCIDENCE & MITIGATION OF THE PSYCHO-SOCIAL AND ECONOMIC IMPACT OF THE HIV/AIDS, MALARIA AND TB | | | | |
|---|---|---|---|---|
| **National Development Goals:  To stop the spread of HIV/AIDS and reduce the impact on Kenyans through reduction of HIV prevalence by 20 to 30%.** | | | | |
| **Expected outcomes** | **Brief description of cooperation strategies** | **Major lines of action** | **Contributing agencies** | **Programme modality** |
| **Outcome 3**<br><br>**Overall HIV/AIDS and TB prevalence reduced** | Supporting HIV/AIDS and TB prevention programs.<br><br>Supporting activities on advocacy, communication and resources mobilization.<br><br>Supporting sub-regional initiatives.<br><br>Contributing to the improvement of the nutrition and care of the people affected and infected by HIV/AIDS, TB. | − Support NACC to advocate gender mainstreaming in programming and implement the developed communication strategy on HIV/AIDS, including production and distribution of school learning materials.<br>− Support the establishment and strengthening of integrated youth friendly sexual and RH services, and drug abuse counselling within existing health facilities and youth centres.<br>− Develop mechanisms/structures for targeting HIV/AIDS/STD/drug abuse prevention activities to the refugees and other special populations (IDP, military, police, CSW, OVCs, truckers and other uniformed personnel).<br>− Support the development and implementation of a comprehensive package on VCT services according to the developed guidelines, including PMTCT.<br>− Support Ministry of Health to implement a comprehensive package for accelerated access to HIV/AIDS care including procurement of generic ARVs.<br>− Disseminate generic information on RH and safe sexual behaviour and drug abuse prevention to youth in and out of school, including street children.<br>− Support the expansion of the DOT to the community.<br>− Support the procurement and distribution and use of both male and female condoms.<br>− Provide food assistance to HIV/AIDS and TB patients and their families. | UNAIDS<br>WHO<br><br>UNFPA<br><br>WFP<br><br>UNDP<br><br>UNESCO<br>UNHCR<br><br>IOM<br>UNIFEM<br>UNDCPUNIC<br>EF<br><br>ILO<br><br>WB<br><br>UNIC | UN integrated work plan on HIV/AIDS prevention.<br><br><br>DOT strategy. |
| **Outcome 4**<br><br>**Capacity to design, implement, monitor and evaluate programs strengthened** | Supporting the nationally identified capacity building needs.<br><br>Strengthening and supporting the monitoring and evaluation of HIV/AIDS, TB programs.<br><br>Supporting the National HIV/AIDS surveillance and operational research. | − Conduct training for cadres from different sectors involved in the national response to HIV/AIDS and drug abuse prevention.<br>− Gender training and capacity enhancement in integrating gender in HIV/AIDS programming and policy development.<br>− Support the training of peer educators for HIV/AIDS/STD and drug outreach prevention programs and TB-DOT programs.<br>− Support NACC and its structures to implement the developed M & E plan, including the financial utilization.<br>− Support the operations of the existing sentinel and behavioural surveillance system, | UNAIDS<br>WHO<br><br>UNFPA<br><br>WFP<br><br>UNDP<br><br>UNESCO<br><br>UNHCR | |

| | | | | |
|---|---|---|---|---|
| | | including yearly dissemination of data and mapping. <br> − Support the identification and implementation of priority operational research on different aspects of HIV/AIDS. <br> − Support the development of systems for monitoring anti TB drug resistance within the context of DOT. | IOM <br><br> UNIFEM <br><br> UNDCP <br><br> UNICEF <br><br> ILO <br><br> WB | |
| **Outcome 5** <br><br> **Morbidity and mortality of malaria reduced** | Strengthening managerial capacity within the MOH malaria control Unit. <br><br> Supporting resources mobilization <br><br> Support social mobilization. | − Support the implementation of malaria control strategy. <br> − Provide technical assistance for proposal formulation for resource mobilization. <br> − Support operations research on the control of the vector. <br> − Support the monitoring for drug resistance <br> − (UNICEF to provide one to two lines of action | WHO <br><br> UNDP/UNV <br><br> UNICEF | National malaria control strategy. |
| **Crosscutting cooperation strategies: <u>Operational strategies will include the mainstreaming of gender and population issues into programming</u>.** | | | | |

| Area of 3 **AREA OF COOPERATION 3: CONTRIBUTE TO THE STRENGTHENING OF NATIONAL AND LOCAL SYSTEMS FOR EMERGENCY PREPAREDNESS, PREVENTION, RESPONSE AND MITIGATION** |
|---|

**National Development Goal(s) and Targets**: Fulfilment of state responsibilities with respect to protecting citizens during disasters and helping local institutions to cope with sudden and longer duration disasters caused by floods, droughts and ethnic conflicts etc.

| Expected outcomes | Brief description of cooperation strategies | Major lines of action | Contributing agencies | Programme modality |
|---|---|---|---|---|
| **Outcome 6**<br><br>**National Disaster Management policy institutionalised at all levels** | Support the development of a legal framework; institutional capacity building; advocacy and policy dialogue for a national disaster management policy, and the development of strategies for resource mobilization and gender mainstreaming. | − Assist GoK to finalise and implement institutional structures for NDMP.<br>− Develop UN-integrated support to NDM Authority<br>− Support training in the principles and methodologies of emergency and contingency planning. | FAO<br><br>UNDP<br><br>UNICEF<br><br>UNIFEM<br><br>WFP | Collaboration or joint programming and implementation |
| **Outcome 7**<br><br>**Strengthened disaster management, including increased capacity for peace building, conflict resolution and reduction of small arms proliferation** | Further inter-agency collaboration in prevention and mitigation of natural and man-made disasters and conflicts.<br><br>Collaborate in national and regional peace-building projects and small arms proliferation prevention.<br><br>Assist with identification of early warning indicators.<br><br>Support installation of EWS networks/ICT. | − Strengthen existing food security and disaster coordination structures;<br>− Develop guidelines for disaster prevention, preparedness, and management;<br>− Assist GoK in prevention of and response to disasters and coordinate appeals for international support in time of emergency.<br>− Support specific programmes to prevent and respond to inter-ethnic violence, including human rights restrictions, conflict resolution and attendant population displacements.<br>− Pay due attention to vulnerable groups, including local communities in programming and provide access to services. | FAO<br><br>UNDP<br><br>UNICEF<br><br>WFP<br><br>UNHCR<br><br>UNIFEM<br><br>SRSG/GL | Collaboration or joint programming and implementation |
| **Outcome 8**<br><br>**Enhanced capacity of national and district authorities to collect, disseminate, and utilise early** | Strengthen national and local authorities' capacity for disaster preparedness, prevention, response and mitigation. | − Enhance early warning capacities of national and district authorities through training, improved data collection; and improved reporting techniques;<br>− Joint mechanisms for early warning and vulnerability assessment reporting for GoK and partners | FAO<br><br>UNDP<br><br>UNICEF<br><br>WFP<br><br>WHO | Collaboration or joint programming and implementation |

| | | | | |
|---|---|---|---|---|
| **warning, vulnerability assessment and needs assessment data** | | | UNHCR<br><br>UNIFEM | |
| **Outcome 9**<br><br>**Strengthened response to and management of refugees' and IDPs needs and rights** | Support the establishment of refugee specific policies and legal framework.<br><br>Ensure that essential protection standards of refugee care are met in accordance with international standards and lasting solutions are sought.<br><br>Continued support for GoK to enhance emergency preparedness.<br><br>Attention for needs of vulnerable groups, host communities, HIV/AIDS and the environment.<br><br>Support for GoK to build IDP matters into national policy and ensure that relevant UN agencies and partners are made aware of IDP presence and needs. | − Continue support to refugee operations in Kenya in collaboration with the GoK and relevant agencies.<br>− Cooperate with the GoK in the fields of protection, legislation, and refugee status determination. Increase awareness of HIV/AIDS.<br>− Strengthen environment restoration programmes and mitigate impact of refugee presence.<br>− Promote public awareness of refugee issues<br>− Support efforts to mitigate internal forced displacement of Kenyans as IDPs;<br>− Facilitate the return to place of habitual residence in safety and with full rights of those displaced.<br>− Promote public awareness of IDP issues, including access to basic services and rights in their temporary settlements | UNDP<br><br>UNFPA<br><br>UNHCR<br><br>UNICEF<br><br>WFP<br><br>WHO<br><br>UNEP<br><br>IOM | Collaboration or joint programming and implementation |
| **Crosscutting cooperation strategies: <u>Operational strategies will include the mainstreaming of gender and population issues into programming</u>.** | | | | |

| AREA OF COOPERATION 4: TO CONTRIBUTE TO SUSTAINABLE LIVELIHOODS AND ENVIRONMENT | | | | |
|---|---|---|---|---|
| **National development goals: Integrate the principles of sustainable development into development programs, halt and reverse environmental degradation. Increase and sustain the capacity of the national economy to create opportunities for sustainable livelihood.**<br><br>**Target: Reduce the percentage of households living in absolute poverty by 20 per cent by 2004, and by a further 30 per cent by 2010. Reduce hunger by 50% by 2015** | | | | |
| **Expected outcomes** | **Brief description of cooperation strategies** | **Major lines of action** | **Contributing agencies** | **Programme modality** |
| **Outcome 10**<br><br>**Increased availability, access and the utilization of quality data disaggregated by age and sex and information analysed by gender for planning, monitoring and evaluation** | Over five year period to develop a solid base of quantitative information for measuring progress against the MDGs of halving hunger and extreme poverty<br><br>Natural resource inventories, maps and trend analyses produced by national and local authorities | − Targeted support to critical GoK bodies (OP, CBS, and MoARD) in developing food insecurity vulnerability information management systems and undertaking another Welfare Monitoring Survey<br>− Support research on monitoring and tracking status of key natural resources (e.g., forestry, water resources, coastal ecosystems and national parks)<br>− Support for in-depth analysis of the 1999 census, and implementation of IMIS and KDHS. | UNDP<br>FAO<br>UNESCO<br>WFP<br>UNFPA<br>UNEP<br>UNHCR<br>UNICEF<br>UNIFEM<br>WB | Collaborative and joint programming |
| **Outcome 11**<br><br>**Effective community based management of natural resources** | Sustainable natural resource management plans on local level developed and implemented by communities and other stakeholders. | − Support identification of NRM and biodiversity knowledge gaps; introduction of suitable alternative technologies for adaptation on local level<br>− Contribute to the coordination of community-level training on most appropriate technologies/approaches, e.g. integrated nutrient management, water harvesting, energy-efficiency optimization | UNDP<br>WFP<br>UNHCR<br>FAO<br>UNESCO<br>UNEP<br>UNIDO<br>ILO | Collaborative and joint programming |

| | | | UN-HABITAT | |
|---|---|---|---|---|
| **Outcome 12**<br><br>**Improved food security at household and community level** | Provide support to local and district authorities to make appropriate resource allocation choices, taking into consideration household and community food security needs, women's economic security and HIV/AIDS.<br><br>Assist women's and other community groups by empowering them to identify priority problems, implement solutions and articulate demands for relevant services | − Support capacity building for participatory priority setting, planning and implementation of integrated projects (e.g. HIV/AIDS and Bondo Farmer Field Schools))<br><br>− Support participatory learning activities for women and other groups (e.g. FFS).<br><br>− Support promotion of the use of indigenous knowledge and community innovations in addressing identified problems. | FAO<br><br>UNDP<br><br>UNIFEM<br><br>WFP<br><br>WHO<br><br>UNICEF | Collaborative and joint programming |
| **Outcome 13**<br><br>**Expanded opportunities for sustainable production and income diversification** | − Undertake high level advocacy;<br>− Providetechnical assistance<br>− Support for community training and empowerment on land and water rights<br>− Support for resource conservation to projects.<br>− Support the strengthening of policing of protected ecosystems<br>− Develop production capacities in sectors with high export potential | Implementation of fair and gender-balanced legislation governing accessibility to means of livelihood especially for women, accessibility to private and communal land and water rights with recourse mechanisms.<br><br>Reversal in declining trends in natural resource productivity, including forestry and other valuable ecosystems<br><br>Increase productivity for income generation and poverty reduction<br><br>Support government increase d productivity of sectors with high export potential<br><br>Support development of agro-industry<br><br>Support strengthening of the investment and export promotion infrastructure.<br><br>Assist industries to acquire new technology<br>− Support promotion of small-scale agro-based industries. | UNDP<br><br>UNHCR<br><br>ILO<br><br>FAO<br><br>UNIFEM<br><br>UNIDO | Collaborative and joint programming |
| **Crosscutting cooperation strategies: <u>Operational strategies will include the mainstreaming of gender and population issues into programming</u>.** | | | | |

**TABLE 2: PROGRAMME RESOURCES FRAMEWORK — BY AGENCY AND OUTCOME (US$M)**

| Outcome | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | TOTAL |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Estimated total cost** | | 15.0 | | | | | | | 80 | | | | | |
| **FAO** | | | | .2 | | | | | | .8 | | 3.0 | 1.0 | 5.0 |
| **UNAIDS Secretariat** | | | .2 | .3 | | | | | | | | | | 0.5 |
| **UNDP** | | 6.5 | 1.5 | 1.5 | | | | | | | 2.0 | | | 11.5 |
| **UNESCO** | 1 | | | | | | | | | | | | | 1.0 |
| **UNFPA** | 2.5 | 3.3 | 2.5 | .5 | | | | | 1.0 | 2.2 | | | | 12.0 |
| **UNHCR** | | | | | | | | | 60 | | | | | 60.0 |
| **UNICEF** | 25.3 | 4.0 | 70.0 | 7 | 16.2 | 2.5 | 1.0 | 3.5 | 7.9 | 1.5 | 8.0 | 4.7 | 2.5 | 154.1 |
| **UNIDO** | | | | | | | | | | | | 1.5 | | 1.5 |
| **WFP** | 28.0 | | | | | 3.8 | 3.2 | | | | | | | 35.0 |
| **Estimated total allocation** | 56.8 | 13.8 | 74.2 | 9.5 | 16.2 | 6.3 | 4.2 | 3.5 | 68.9 | 4.5 | 10.0 | 7.7 | 5.0 | **280.6** |
| **Estimated Resource Gap** | | | | | | | | | | | | | | |

**TABLE 3: MONITORING AND EVALUATION FRAMEWORK**

| Expected Outcomes | Indicators | Sources |
|---|---|---|
| **Outcome 1**<br><br>**Increased access to basic social services** | − Net enrolment ratio at primary level by province, district and sex<br>− Repetition rates by province, district and sex<br>− Drop-out rates by province, district and sex<br>− Primary completion rates for boys and girls<br>− Net intake ratio into first grade for girls<br>− Transition rate from ECD to primary level by province, district and sex<br>− Average pupil-teacher ratio by level of education<br><br>− Government spending on education<br>− Share of education budget for primary education (pro-rated for length of cycle)<br><br>Institutional capability<br>− Composite indicator (on a scale of 1-5) to assess the benchmarks achieved in building the capacities of key GoK ministries to tackle specific basic social service issues (Baseline: TBD 2003)<br>Adequate financing<br>− Proportion of public expenditure on primary health care<br>− Per capita public expenditure on social services<br>− Numbers of sectors with separate budget lines on population, gender and environmental issues<br>Ownership<br>− Composite indicator (on a scale of 1-5) to assess the capacities of target communities to articulate and/or basic social service issues<br>Demonstrated effectiveness of Interventions<br>− Progressive and sustained achievement of national targets in the following areas:<br>− Basic education<br>− Vaccine preventable and other childhood diseases<br>− Access to clean, safe drinking water and adequate sanitation<br>− Contraceptive prevalence rate<br>− % women attending antenatal care at least 4 times during pregnancy<br>− % births taking place in health facilities | Education Management and Information Systems (EMIS)<br><br>Surveys Reports<br><br><br><br>GoK Financial Printed Estimates<br><br><br><br>KDHS<br><br>Project Reports |

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| **Outcome 2**<br><br>**Capacities of key national governance institutions enhanced** | − Existence of popular version(s) of the new Constitution (Baseline: None exist)<br><br>− Number of constitutional reviews effected (Baseline: Drafts Bills of various reviews exist, most of which will need to be revised.<br><br>− National voter education strategy. No. of institutions using the strategy. No. of community based voter educators (Baseline: No national voter education strategy, each institution using own strategy, community based voter educators, % of eligible population registered as voters)<br><br>− No. of appropriate training given to research assistants<br><br>− No. of committees being supported (Baseline: No research assistants in place, no training, work only with two committees on ad-hoc basis)<br><br>− National IEC strategy (Baseline: No strategy in place)<br><br>− National Human Rights Plan of Action (Baseline: No plan exists)<br><br>− Policy on popular participation (Baseline: No Policy in place)<br><br>− Established decentralization secretariat. Curriculum for management of local authorities. No. of courses given to local authorities (Baseline: No secretariat in place, no need–based curriculum and training conducted on ad hoc basis) | Reports<br><br>Surveys<br><br>Records - Laws enacted by Parliament<br><br>Special surveys<br><br>Spot checks<br><br>Training reports/records<br><br>House committee reports<br><br>Strategy report<br><br>Published plan of action<br><br>Special surveys/spot checks<br><br>Records – Policy document |
| **Outcome 3**<br><br>**Overall HIV/AIDS and TB prevalence reduced** | − HIV prevalence in young men and women in the age group 15 to 24 years reduced by 20- 30%. (Baseline 13%.)<br><br>− Number of children orphaned by HIV/AIDS<br><br>− Drug abuse prevalence rate decreased. | Sentinel surveillance and special studies with a drug abuse component included in both.<br><br>Programme and project reports<br><br>The KDHS survey 2003<br><br>Health facility based data. |
| **Outcome 4**<br><br>**Capacity to design, implement, monitor and evaluate programs strengthened** | − Number and categories of people and geographic distribution | Special manpower surveys<br><br>Programme and project reports<br><br>Health based data |
| **Outcome 5**<br><br>**Morbidity and mortality of malaria reduced** | − Prevalence and death rates associated with malaria<br><br>− Proportion of population at risk using effective malaria prevention and treatment | Health facility and community based data |

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| **Outcome 6**<br><br>**National Disaster Management policy institutionalised at all levels** | − Establishment of NDMP institutional structure (Baseline: not yet in place or active)<br>− Standard operating procedures for DM, with clear assignment of roles responsibilities and resources. (Baseline: Do not yet exist)<br>− Number of public sector and civil society staff trained nationally and per district<br>− Regionally established gender-disaggregated data (Baseline: gender disaggregated data do not exist) | Responsible GoK Department<br><br>Authority established by GoK<br><br>Institution providing training<br><br>National & district departments |
| **Outcome 7**<br><br>**Strengthened disaster management, including increased capacity for peace building, conflict resolution and reduction of small arms proliferation** | − Policy changes made to improve UNDMTG performance and cooperation methods (Baseline: ineffective UNDMTG system)<br>− Guidelines for disaster prevention, preparedness, and management (Baseline: No guidelines)<br>− Increased disaster response efficiency along clear guidelines (Baseline: slow and inadequate response)<br>− Increased conflict awareness | UNDMTG and involved agencies |
| **Outcome 8**<br><br>**Enhanced capacity of national and district authorities to collect, disseminate, and utilise early warning, vulnerability assessment and needs assessment data** | − Specific hazards and vulnerabilities identified and mapped geographically (Baseline: Few maps of areas at risk of disaster or conflict)<br>− Types, models and processes for emergency planning and response created (Baseline: Unavailability of these types, models and processes for planning divisions)<br>− Monthly early warning situational report releases (Baseline: Do not exist) | National and district departments |
| **Outcome 9**<br><br>**Strengthened response to and management of refugees' and IDPs needs and rights** | − Legislation on refugees promulgated providing for predictable and effective management of refugee problems (Baseline: No legislation)<br>− Signing and implementation of Refugee Bill (Baseline: No bill)<br>− Improvement of female safety; placement of unaccompanied minors in foster care; attend to needs of vulnerable people<br>− Reduction in sexual and gender based violence statistics<br>− Number of unaccompanied minors placed with families<br>− Number of individuals from vulnerable groups receiving extra care<br>− Increased awareness of HIV and AIDS; environment; refugee issues.<br>− Predictable effective management of IDP problems<br>− Mitigation of internal displacement, reclamation of property and other legal rights by IDPs, and return to their original place of residence (Baseline: Number of IDPs not returned to their original place of residence)<br>− Reduced teenage birth rate among IDPs and refugees | Relevant GoK Department<br><br>UNHCR<br><br>Other relevant UN agencies<br><br>Rapid assessment surveys of IDPs<br><br>Refugee camps' health statistics<br><br>Project reports |

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|---|---|---|
| | − Contraceptive use increases among IDPs and in refugee camps | |
| **Outcome 10**<br><br>**Increased availability, access and utilization of quality data disaggregated by age and sex and information analysed by gender for planning, monitoring and evaluation** | − Number of GoK institutions/staff trained and using data/information (EW, drought, population, disease)<br>− Number of inventories, analyses and maps produced by national and local authorities<br>− Number of GoK, private sector and NGO institutions using data and information | Training manuals<br><br>Project reports<br><br>KDHS report<br><br>IMIS maps & guidelines<br><br>GoK, UN and other development partners' sectoral and strategic plans |
| **Outcome 11**<br><br>**Effective community based management of natural resources** | − Number of NRM plans developed and implemented by communities<br>− Number of groups trained and implementing appropriate technologies and approaches (water harvesting, integrated nutrient management) | NRM plans; implementation reports<br><br>Records/lists of people trained<br><br>Project reports |
| **Outcome 12**<br><br>**Improved food security at household and community level** | − Number of local multi-sectoral groups trained in participatory planning and implementation of integrated projects (HIV/AIDS etc)<br>− Number of people, particularly women, involved in learning (new technologies etc) | Project plans and reports<br><br>Manuals<br><br>Attendants' records |
| **Outcome 13**<br><br>**Expanded opportunities for sustainable production and income diversification** | − Number and type of workshops held and number of women, men and youth participating (land and water rights, cleaner industrial production)<br>− Number of conservation projects and ecosystems protected | Workshop reports<br><br>Attendants' lists<br><br>Project reports |

## LIST OF ACRONYMS

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|---|---|---|---|
| **AIDS** | Acquired Immune Deficiency Syndrome | **TOR** | Terms of Reference |
| **BWIs** | Bretton Woods Institutions | **UN** | United Nations |
| **CBS** | Central Bureau of Statistics | **UNCT** | United Nations Country Team |
| **CCA** | Common Country Assessment | **UNCED** | United Nations Conference on Environment and Development |
| **CEDAW** | Convention on Eradication of All Forms of Discrimination against Women | **UNDAF** | United Nations Development Assistance Framework |
| **DOT** | Directly Observed Treatment | **UNDCP** | United Nations International Drug Control Program |
| **EFA** | Education for All | | |
| **FAO** | Food and Agricultural Organization of the United Nations | **UNEP** | United Nations Environment Program |
| **GoK** | Government of Kenya | **UNESCO** | United Nations Educational, Scientific and Cultural Organization |
| **HIV** | Human Immuno-deficiency Virus | **UNDGO** | United Nations Development Group Office |
| **HOA** | Heads of Agencies | | |
| **ICAO** | International Civil Aviation Organization | **UNDP** | United Nations Development Program |
| **IFC** | International Finance Corporation | **UNICEF** | United Nations Children Fund |
| **ILO** | International Labor Organization | **UNIDO** | United Nations Industrial Development Organization |
| **IMF** | International Monetary Fund | | |
| **IOM** | International Organization for Migration | **UNFPA** | United Nations Population Fund |
| **IPRSP** | Interim Poverty Reduction Strategy Paper | **UN-HABITAT** | **United Nations Centre for Human Settlements** |
| **IUCN** | International Union for Conservation of Nature and Natural Resources | **UNHCR** | United Nations High Commissioner for Refugees |
| **KACA** | Kenya Anti-Corruption Authority | **UNIC** | United Nations Information Centre |
| **KCC** | Kenya Country Committee | **UNIFEM** | United Nations Fund for Women |
| **KEPI** | Kenya Expanded Programme on Immunization | **UNON** | United Nations Office at Nairobi |
| **MDG** | Millennium Development Goals | **UNOPS** | United Nations Office for Project Services |
| **NACC** | National AIDS Control Council | **UNSO** | United Nations Development Office to Combat Desertification and Drought |
| **NASCOP** | National AIDS/STD Control Program | | |
| **NGOs** | Non-Governmental Organizations | | |
| **OCHA** | Office for Coordination of Humanitarian Affairs | **UPE** | Universal Primary Education |
| **PRA** | Participatory Rural Appraisal | **WB** | World Bank |
| **PRSP** | Poverty Reduction Strategy Paper | **WFP** | **World Food Programme** |
| **RC** | Resident Coordinator | **WHO** | World Health Organization |
| **STD** | Sexually Transmitted Diseases | | |

## SIGNATORIES TO THE UN DEVELOPMENT ASSISTANCE FRAMEWORK IN KENYA

**We, the United Nations Country Committee, while respecting each organization's mandates, competence and decision-making process, pledge our commitment to collaborative programming as a means to foster co-operation and coordination among all of our agencies and so as to enhance the performance and impact of our joint response to development assistance in Kenya.**

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