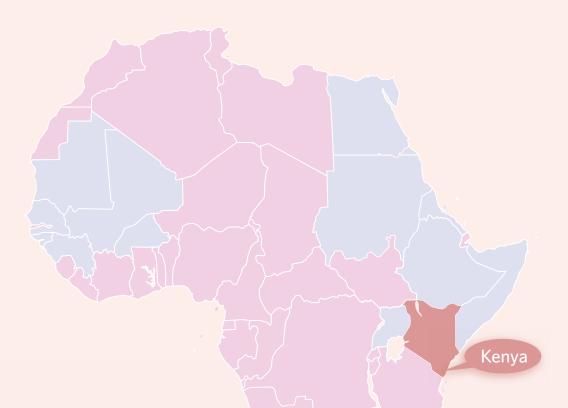
EXECUTIVE SUMMARY



JOINT EVALUATION UNFPA-UNICEF JOINT PROGRAMME ON FEMALE GENITAL MUTILATION/CUTTING: **ACCELERATING CHANGE**

2008-2012

COUNTRY CASE STUDY:

KENYA



In 2012/2013, in its fifth year of implementation, an evaluation of the United Nations Population Fund (UNFPA) and United Nations Children's Fund (UNICEF) joint programme entitled "Female Genital Mutilation/Cutting (FGM/C): Accelerating Change" was undertaken. This evaluation was conducted by Universalia under the supervision and guidance of a joint evaluation management group composed of members of the evaluation offices of UNFPA and UNICEF.

Purpose of the evaluation and the country case study

The purpose of the evaluation is to assess the extent to which and under what circumstances the UNFPA-UNICEF joint programme has accelerated the abandonment of FGM/C in programme countries during the period 2008-2012.

The evaluation includes a total of four country case studies conducted in Kenya, Burkina Faso, Senegal and Sudan. The purpose of the country case studies is to explore and illustrate key issues, while taking into account specific national and local contexts in which the joint programme was implemented. Each country case study is intended both as a stand-alone document, and as an input to the evaluation report.

Kenya was selected as the pilot country case study. Criteria for its selection included the following four facts. It is one of the eight initial countries where the joint programme was first implemented in 2008. It provides an example of an Anglophone national context. It is representative of the Eastern African sub-region. Most of the geographic areas where the joint programme has been working in Kenya were accessible at the time of the evaluation.

Methodology

The case study employs mixed methods of data collection, emphasizing participatory approaches. Key sources of data and methods of data collection used for the case study were: review of programme and related documents; consultations with stakeholders at national and community levels; and observations at the community level.

Key methods of data analysis were descriptive, content and contribution analysis. The case study involved three stages: i) preparation and planning, including logistical preparations for the country visit and document review; ii) data collection in Kenya and iii) data analysis and writing of the country case study report.

Institutions	People consulted
UNFPA/UNICEF	12
Central government	4
District	4
UN agencies/Development partners	4
Civil society organizations/ faith-based organizations	25
Final beneficiaries	193
Total	242

Findings

The joint programme has been highly relevant in light of national and international commitments of the Kenyan government as outlined in, for example, the Kenyan national planning strategy known as Vision 2030 and the 2010 Constitution. The joint programme also responded to previously identified gaps in FGM/C-related knowledge, programming, and coordination.









Joint programme activities in Kenya have been integrated into the country programmes of both UNICEF and UNFPA, and were aligned with the joint priorities and programming principles of the 2009-2013 United Nations Development Assistance Framework (UNDAF).

The design of the joint programme in Kenya was appropriate and reflected the key principles outlined for the overall (global) joint programme, i.e. approaching FGM/C as a social convention/norm, and aiming for a strategic and catalytic, holistic, human rights-based and culturally-sensitive programme.

The joint programme has made significant contributions to strengthening the national environment for the abandonment of FGM/C. In particular, it has enhanced coordination among national and international actors working on FGM/C abandonment in Kenya, and has strengthened the national legal and policy framework, especially through its contribution to the passing of the FGM/C Act in 2011. However, processes of operationalizing and implementing the FGM/C Act in the future will be challenging.

The joint programme has contributed to enhancing local-level commitment to the abandonment of FGM/C in the targeted geographic areas. Many of the community-level achievements recorded in joint programme reports for Kenya focus on activities rather than on results. Nevertheless, evidence suggests that the joint programme has made progress towards its envisaged results. For example, changes in individual and collective attitudes towards FGM/C have been noted, as have changes in inter-community exchange and peer influence. The evaluation also identified a number of emerging lessons learned at the community level related to

supporting public declarations of FGM/C abandonment and the use of Alternative Rites of Passage (ARP).

The evaluation found less evidence of joint programme contributions to strengthening regional dynamics to abandon FGM/C. The evaluation team found only two examples of Kenyan stakeholders engaging in direct exchange with partners from other countries.

Good coordination between UNFPA and UNICEF and the chosen approaches to managing the joint programme have contributed to the adequate use of available resources. Additional factors that positively influenced the relevance, effectiveness and efficiency of the joint programme included the strength of the joint programme design; successful strategies, like partnerships with religious and traditional groups, employed at national and community levels; government commitment to ending FGM/C; the use of data for evidence-based policy development; and establishing the position of a national FGM/C coordinator to enhance coordination of efforts among Kenyan actors. Factors that posed challenges to or hindered progress included the persistence of traditions related to FGM/C, especially in remote areas; incidents of backlash against the change to traditional/cultural practices; limited financial commitment by the Kenyan government; and stakeholder anxieties about the changed social context related to the abandonment of FGM/C.

The joint programme helped create a number of favourable conditions likely to support the sustainability of achievements. It did this by helping to strengthen partnerships among actors at national and local levels, and by supporting the use of

promising approaches capable of being replicated or scaled up at national or community levels. Various factors may, however, negatively influence the sustainability of results achieved to date. These include uncertainties related to the elections in Kenya that took place in March 2013, as well as the fact that the function of a FGM/C coordinator/body has not yet been institutionalized by the Government of Kenya.

Horizontal issues and principles of gender equality, human rights, cultural sensitivity and focus on equity are well reflected in the design and implementation of the joint programme; they are, however, less apparent in joint programme monitoring and reporting tools and mechanisms.

Conclusions

Conclusion 1: The joint programme has been highly relevant given existing commitments and priorities of the Government of Kenya and previous gaps in its efforts to abandon FGM/C. It has helped to accelerate existing change processes in social norms affecting FGM/C at national and community levels. Evaluation findings indicate that it is unlikely the Kenyan FGM/C Act would be in place without the contributions of the joint programme. The passage of the FGM/C Act is the most visible example of the joint programme having accelerated national change processes.

Conclusion 2: The long-term impact and sustainability of joint programme achievements will depend on the extent to which relevant actors can provide coordinated and systematic follow-up at both national and local levels.

The joint programme has helped create a number of favourable conditions likely to support the sustainability of achievements, but it is too early to assess the long-term effects of achievements such as public declarations of FGM/C abandonment. Continued interventions are needed at both national and community levels to sustain and expand the existing momentum for change.

Conclusion 3: Joint programme efforts to pass the FGM/C Act have produced an effective advocacy model for gender-responsive law-making that is applicable to other contexts. At the community level, long-term monitoring and additional research are required before it is possible to identify replicable models for influencing change towards the abandonment of FGM/C.

While the joint programme advocacy activities that resulted in the passage of the FGM/C Act were tailored to the Kenyan context, some of its elements such as the use of diverse national and local change agents could be replicated in other contexts. At the community level, more information is needed on the specific combinations of factors that influence progress in different settings before solid conclusions on "what works" can be identified.

Conclusion 4: Coordination efforts between UNICEF and UNFPA, and the management of the joint programme, have largely been appropriate and have contributed to the effective and efficient implementation of the programme in Kenya.

The strong working relationship between the two joint programme focal points positively contributed to the effective coordination between UNFPA and UNICEF and the overall management of the joint programme. The annual budget cycle was, however, an impediment to the effectiveness and efficiency of the joint programme in Kenya as it limited the ability of UNFPA, UNICEF and their implementing partners to plan, implement and monitor initiatives over periods of time beyond one year.









Conclusion 5: The design and implementation of the joint programme in Kenya reflected the key theoretical foundations underlying the overall (global) joint programme and helped to validate them, including the conceptualization of FGM/C as a social norm.

While the joint programme contributed to strengthening national ownership and leadership for FGM/C abandonment, the national FGM/C coordination function requires further support. The joint programme in Kenya contributed to validating the assumption that collective rather than individual change is needed to end FGM/C by demonstrating the benefits of systematically involving local and national opinion leaders and influential groups to facilitate change within relevant social networks. One threat to the sustainability of results is that the government of Kenya has not yet matched its verbal and legal commitments to end FGM/C with allocations of financial and/or human resources.

Recommendations

Recommendation 1: UNFPA and UNICEF should encourage the Kenyan government to embed a coordination function for FGM/C in national structures to ensure the sustainability of achievements made to date and to avoid a (re) fragmentation of efforts.

Due to the on-going process of restructuring the Kenyan government and to uncertainties regarding the upcoming elections, it is not possible to make a specific recommendation regarding the type and nature of the suggested coordination function. This function does not necessarily imply the existence of a full-time

position in the Ministry of Gender, Children and Social Development (or in whichever ministry the gender equality function may eventually be located). The Anti FGM/C Board proposed under the FGM/C Act may also play a role in this process if and when it is formed. While UNICEF and/or UNFPA may wish to consider providing support for institutionalizing a coordination function in the short-term, a clear agreement and strategy should be formulated to ensure this function is sustained by the government in the longer term.

Recommendation 2: UNFPA and UNICEF should shape FGM/C programming to support operationalization and implementation of the FGM/C Act.

Operationalization and implementation of the FGM/C Act will require considerable time, effort and resources. To ensure that the Act can fully contribute to the abandonment of FGM/C, UNICEF and UNFPA should explore how future initiatives on FGM/C can support this process. This could entail: i) working with relevant government agencies to support the development of a systematic and feasible implementation plan and strategy, including measures to monitor progress made in implementing the Act; ii) ensuring that implementing partners working at national and/or community levels understand and are able to use the Act as an education and advocacy tool, thus contributing to its dissemination and implementation, and iii) supporting the creation and functioning of the Anti-FGM/C Board.

Recommendation 3: To sustain and expand the existing momentum for change, UNFPA and UNICEF should support their national partners in gathering additional information to be used in developing

evidence-based, replicable models for successful community-level interventions.

National partners at the community level indicated the need to expand anti-FGM/C-related efforts to cover greater geographic areas, including remote and inaccessible areas of Kenya. Such expansion will require future programming to be based on solid evidence of what types of approaches are likely to work in each targeted setting, and why. While a significant quantity of experiences gained by

different actors already exists, very limited data is available on the specific mid- to long-term results of promising interventions such as public declarations or ARPs. UNFPA and UNICEF should continue to support national partners in applying these promising approaches where appropriate, but they should also consider conducting systematic, long-term monitoring of related results, and targeted research to capture specific combinations of factors that influence success or failure in different contexts.





Evaluation Office

Any enquiries about this report should be addressed to: Evaluation Office, UNFPA, E-mail: evb@unfpa.org or UNICEF Evaluation Office, E-mail: <a href="mailto:evaluation-evalua

The full country case study report can be obtained from the Evaluation Office of UNFPA webpage at:

UNFPA - http://www.unfpa.org/public/home/about/Evaluation/EBIER and

UNICEF - http://www.unicef.org/evaluation/index_70518.html