



Republic of Kenya



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Final evaluation of the Joint UN SDG Funded Programme for Social Protection in Kenya 2020-2022

Decentralized Evaluation Report

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Executive Summary

1. This is the final evaluation of the United Nations Sustainable Development Goals (UN SDG) Joint Programme of Social Protection 2020-2022. The evaluation was commissioned by World Food Programme (WFP) Country Office (CO) in Kenya, on behalf of the Joint Programme Participating UN agencies – WFP, Food and Agriculture Organisation (FAO), United Nations Children’s Emergency Fund (UNICEF), International Labour Organisation (ILO), and in collaboration with UN Resident Coordinator Office (UN RCO), including the UN SDG Partnership Platform. The evaluation was conducted by a team of three evaluators from Tana Copenhagen, between July 2022 and November 2022. The methodological approach undertaken included the review of documents, and interviews with 41 key respondents representing the Government of Kenya at both central and county levels, the UN Resident Coordinators Office and the SDG Partnership Platform, Joint Programme UN implementing Agencies, non-state actors and subject area experts. The data collected was used to respond to 22 evaluation questions on relevance, effectiveness, efficiency, coherence, sustainability as well as lessons learned.

2. The evaluation has had the dual objective of accountability and learning and has focused on the lifecycle of the programme (15th January 2020 - 15th September 2022, 32 months).

3. The primary users of the evaluation will be internal to WFP, FAO, UNICEF and ILO, the main UN agencies engaged in the Joint Programme, as well as the UN RCO. In addition, the Government of Kenya, and other actors engaged in social protection, and social protection related activities in Kenya as well as donors are also intended users.

Context

4. In Kenya, the provision of social protection is stipulated in the 2010 Constitution.¹ The implementation of a social protection programme is also outlined in the Third Medium Term Plan (MTP III) 2018-2022², Kenya’s Vision 2030³ and the Government’s ‘Big Four’ Agenda⁴ and regionally, through the African Union’s Agenda 2063⁵, and international conventions on social protection which Kenya has ratified namely Covenant on Economic, Social and Cultural Rights (CESCR)⁶ and Convention on the Rights of Persons with Disabilities (CRPD).⁷ However, despite this, there are considerable areas that require attention both at policy and programmatic levels. At the policy level, the inclusion of shock responsive social protection is currently under review as part of the revision of the National Policy on Social Protection. Until this is fully integrated, the social protection system will continue to include three pillars: social assistance, social health insurance and social security.

5. At the operational level, the available resources (both staff and funds) have been insufficient to meet the demand of all groups.⁸ The Joint Programme aimed to bridge some of these supporting the identification, and design of mechanism that could meet critical gaps in the system. The efforts of the Joint Programme are well nested within the new Government’s commitment to social protection (elected in August 2022), as well as, within existing systems and mechanism (see section 2.6 sustainability).

The Joint Programme

6. The Joint Programme had a 32-month life cycle, which included a 6 month no-cost extension granted primarily to overcome delays caused by COVID-19. The programme activities were led by WFP, UNICEF, FAO,

¹ The Kenya Constitution 2010 (<http://www.kenyalaw.org/kl/index.php?id=398>)

² The Medium-Term Plan III 2018-2022 (<https://vision2030.go.ke/publication/third-medium-term-plan-2018-2022/>).

³ Kenya Vision 2030 (<https://vision2030.go.ke/publication/kenya-vision-2030-popular-version/>)

⁴ The Big 4 Agenda is the Government of Kenya’s economic blueprint to foster economic development through four priority initiatives namely: universal healthcare, food security and nutrition, affordable housing and manufacturing (<https://big4.delivery.go.ke/>).

⁵ The African Union Agenda 2063 (<https://au.int/en/agenda2063/overview>).

⁶ International Covenant on Economic, Social and Cultural Rights (<https://www.ohchr.org/en/instruments-mechanisms/instruments/international-covenant-economic-social-and-cultural-rights>).

⁷ Convention on the Rights of Persons with Disabilities (<https://www.ohchr.org/en/instruments-mechanisms/instruments/convention-rights-persons-disabilities>).

⁸ Kenya Social Protection Sector Review 2017.

and ILO and included the engagement of a wide range of Government and non-state actors. The Government of Kenya played a critical role in determining the focus of the Joint Programme, not only through its close and direct engagement in the development of United Nations Development Assistance Framework (UNDAF), but also in its direct engagement in the Joint Programme itself.

7. A wide range of Government ministries and departments played a key role in implementation. Key among them was the Ministry of Public Service, Gender, Senior Citizens Affairs, Senior Citizens Affairs and Special Programmes; the State Department for Social Protection, Senior Citizens Affairs and Special Programmes (the Directorate of Social Assistance (DSA), the National Social Protection Secretariat (NSPS), the Directorate for Children Services – Child Protection Section, and the Directorate for Social Development – Economic Inclusion Programme), and the State Department for Gender and Affirmative Action. Other state actors instrumental in the Programme comprise of the Ministry of Labour (Directorate of Occupational Safety and Health Services, DOSHS), Ministry of Agriculture, Livestock, Fisheries & Cooperatives, Ministry of Health, The National Treasury and Planning, various county Governments, National Social Security Fund (NSSF) and National Hospital Insurance Fund (NHIF). Non-state actors involved in the Programme included Federation of Kenya Employers (FKE), Central Union of Trade Union (COTU) – Kenya, Women Fighting AIDS in Kenya (WOFAK) and Save the Children.

8. Specifically, the Joint Programme engaged in activities that served to advocate for, facilitate and prompt the implementation of aspects of social protection, through the conduct of feasibility studies, pilot activities and the training of key Government of Kenya staff on specific tools to improve the management of the social protection sector.

9. The Joint Programme budget was a total of USD 3.3 million. The Joint SDG Fund provided the main funding facility of USD 2 million, which was complemented by WFP, UNICEF and the RCO/SDG Partnership Platform. By the end of the programme period (15 September 2022), the entire grant of USD 2 million had been utilised.

10. The Theory of Change was predicated on both Government (programmatic) and donor (financial) commitment and pursued the attainment of a single outcome: by 2022, Kenya has a clear plan and fiscal options to operationalize universal social protection. This outcome was divided into two main result areas:

- Envisioned scale-up of social protection coverage, towards universalism to leave no one behind, following a sustainable financing approach through collaboration and advocacy with Government and relevant stakeholders.
- Strengthened Government leadership, capacity and coordination for social protection policy design and implementation within Government and with relevant stakeholders as element of SDG acceleration and leveraging on the Sectoral Group for Social Protection and SDG private sector platform towards achievement of SDG commitments, including a strong link to the national “Big Four” agenda towards attainment of the SDGs.

Findings

11. **Relevance:** The Joint Programme was very relevant to the needs of the Government of Kenya. It aligned to Government’s priorities, including making progress towards the SDG’s. Likewise, the activities were well nested within the UNDAF objectives, which were identified in close consultation with the Government of Kenya, and those of participating agencies. Beyond the Government of Kenya’s own priorities, the Joint Programme also aligned with the priorities of its donors.

12. A key focus of the work of the Joint Programme were vulnerable groups, such as Persons with Disabilities (PWD), children, women and informal workers were important targets groups for the activities conducted. This focus enabled the Joint Programme to support the Government of Kenya to find solutions to address the social protection needs of groups which may have been otherwise overlooked. The Jointness of the programme allowed for a more comprehensive and multifaceted approach to addressing social protection challenges, which capitalised on the unique experience and expertise of the different actors involved.

13. The Joint Programme placed particular attention on the collection of gender disaggregated data and included an examination into how gender affected access, as well as needs, of social protection support for some groups of the Kenyan population. Due to staff recruitment challenges, a comprehensive gender assessment was not conducted, but remains a key priority.

14. **Effectiveness:** The Joint Programme pursued three transformative results. Some activities have already yielded results which are transformative, while others have not yet done so, but are likely to generate such results in future. The success of the Joint Programme is largely attributed to the keen involvement and leadership provided by the Government of Kenya, a strong political will and the engagement of a wide range of actors. Still, the COVID-19 pandemic contributed to delays in implementing activities, which in turn impacts the outputs achieved. To mitigate this a six month no-cost extension was granted.

15. Through the activities conducted the Joint Programme delivered results to vulnerable groups. Support to PWD focused on support to a national mechanisms to identify their needs, as well through activities that focused on the specific needs of subgroups of the population with disabilities. These included women with HIV and children with disabilities. The support provided has been both programmatic (activities aiming to support PWD) as well as policy and strategy activities which have aimed to improve the way the needs of PWD are catered to more generally.

16. PWDs, women and children have been consulted as part of several specific activities conducted by the Joint Programme. The manner of the consultation varied from case to case, but included key informant interviews, focus group discussions and participation in stakeholder validations sessions with representatives of these groups. These consultative activities were used to refine the support provided.

17. A key contribution to identifying and being able to better respond to the needs of PWD is the support provided to the Enhanced Single Registry. This system, as a result of the Joint Programme, can capture, and configure more disaggregated data on PWD including incidence, type and severity. This and other activities conducted have served to lay the foundation for the provision of support to PWD, and specifically to ensure that in the future, PWD are able to secure a basic income, secure access to health care and rehabilitation, and are able to cover the costs that are incurred because they have a disability.

18. The activities conducted, the Joint Programme has been able to support the Government of Kenya's effort to make progress on the attainment of SDG 1 (no poverty), 2 (zero hunger), 8 (decent work and economic growth), 10 (reduced inequalities) and 17 (partnership for the goals).

19. Overall, the Joint Programme has played a catalytic role in securing the increase in Government spending on social protection, as well as in promoting high level discussions on the subject. In addition, a considerable number of activities may serve to catalyse progress in other areas as well in the future. In relation to UNDAF specifically, the Joint Programme has contributed to UNDAF strategic results area 2, outcome 6, which aimed to ensure that by 2022, marginalized and vulnerable people have increased access to and utilize social protection.

20. **Efficiency:** Key deliverables have been finalised within the programme cycle, even though there have been some delays. These delays are mainly due to COVID-19 and, in some instances, the processes to identify and contract implementors caused delays.

21. The activities of the Joint Programme were monitored by staff from the UN agency which led on the activity. This served to ensure that monitoring staff familiar with the type of intervention monitored the activities conducted.

22. The Joint Programme contributed to efficiency, and reduced duplication, in two ways: first, by capitalising on the skills of all agencies involved; and second, through the active sharing of information on approaches taken and progress made. These approaches also served to reduce duplication within the UN Country Team in Kenya, which in turn served to reduce transaction costs.

23. **Coherence:** The activities conducted by the Joint Programme were coherent with the Government's overarching policies, strategies, and programmes, and UNDAF. Efforts to avoid duplication were successful in relation to activities supported by the Joint Programme, and duplication is likely to further reduce through the use of the Enhanced Single Registry. The activities conducted under the Joint Programme have pursued the attainment of human rights of key target groups mentioned earlier.

24. **Lessons learned:** A review of lessons learned demonstrates that engaging the Government and ensuring their leadership and ownership has been a critical determinant of the success of the Joint Programme. Likewise, the multi-stakeholder coordination forums have also been a critical tool to ensure dialogue, share information and enable all participating agencies to broaden their perception/understanding of social protection and its complexities. Lastly, it is important to underline that the Joint Programme had a short life cycle, and that the social protection sector is a complex one that requires time for change to occur.

Therefore, there are several efforts undertaken by the Joint Programme which do not yet show results, but which will in the near future.

25. **Sustainability:** The Joint Programme has contributed to the sustainability of an enhanced national social protection database; linkages made between service providing agencies such as the provision of additional support for vulnerable children; expansion of health care provision and social protection systems for workers. In addition, the Joint Programme's support to develop legislation is also sustainable. As noted previously, the engagement of the Government of Kenya has been a critical element to ensuring sustainability.

26. At a more granular level, there are specific activities that are very likely to continue led by the National Social Protection Secretariat and Wajir County Government respectively. As are activities spearheaded by UN agencies and other agencies, which will continue if funds are available. Most promising is the new Government's commitment to social protection.

Conclusions

27. Conclusions are presented by evaluation criteria in order to reduce duplication and capitalise on common threads between questions under each criterion.

28. **Relevance:** The Joint Programme was relevant to the Kenyan context because it delivered in areas that were Government priorities, which reflected the need of the Kenyan population. While the Joint Programme was not expected to address or identify all social protection gaps, it did serve to highlight issues and areas which had been otherwise overlooked.

29. **Effectiveness:** The Government of Kenya leadership and strong collaboration between actors, including non-state actors; and the engagement of more than one PUNO agency in single activities contributed to improved effectiveness. Overall, activities undertaken contributed to the fulfilment of the UNDAF objectives. Overall, the review of results shows that the Joint Programme proved an effective way to catalyse progress in the social protection sector in Kenya.

30. **Efficiency:** Despite the COVID-19 pandemic, an important challenge, the programme was able to reach the vast majority of planned results, and the UNDAF goals as expected, contributing mainly Strategic Results Area 2.6. The ability to effectively reach results shows that the approach taken, which was characterised by Government leadership and regular coordination between actors facilitated efficiency.

31. **Coherence:** The extensive dialogue with the Government of Kenya during the development of UNDAF is credited with the high levels of UN coherence. Moreover, a Human Rights Based Approach (HRBA) was visible in programme objectives of Joint Programme activities. The continued coherence of the programme deliverables and target areas can be credited to the aforementioned government leadership and coordination between actors engaged in the activities.

32. **Sustainability:** Ensuring a sustainable social protection system requires a wide range of factors be in place. Ensuring the long-term sustainability of Joint Programme Activities will require continued programming to upscale activities and fill persistent knowledge gaps.

33. **Lessons learned:** There were four critical lessons. The first two focus on the value that was garnered through the active and effective engagement of Government, as a leading actor, and the positive effect of having regular coordination meetings. These two recommendations are ones that should be followed in the continuation of the Joint Programme and should be emulated by other Joint Programmes in Kenya or elsewhere. The third and fourth lesson learned have to do with the need to better ensure that the life cycle of the intervention aligns with the demands/expectations of the Joint Programme. This should be done differently in the future (see recommendations).

Recommendations

34. **Recommendation 1:** Consider the continuation of the Joint Programme through the implementation of a second phase with a duration of 5 years minimum (see recommendation 4). A continuation of the effort to address social protection challenges in Kenya would be well aligned with the priorities of the new government, which came into office in August 2022, and with Agenda 2030. This new phase should focus both on filling gaps that are currently overlooked, but also scaling up of activities based on all the foundational and catalytic work done during the phase under review here.

35. **Recommendation 2:** The development of a new Joint Programme Phase should consider the inclusion of additional government actors who are also engaged, albeit more informally, in the social protection sector. For example, the Ministries of Agriculture, Health and Trade.

36. **Recommendation 3:** The process to mobilise resources for a future phase (see recommendation 1), should actively include the different stakeholders involved in the planning and design of the intervention (see recommendation 4). The Government of Kenya should be engaged in co-funding the interventions.

37. **Recommendation 4:** Through discussion with government during the design phase, ensure that any future Joint Programme (or like effort) continues to enjoy Government leadership/buy-in. The inclusion of non-state actors early on in the process, is also critical. A time frame that allows for the Government to absorb and roll out activities is important. Ensuring a realistic time frame, that enables effective use of results (roll out and absorption), should be part of the discussion with donors during the design phase. A periodic review and evaluation of activities (and the activities roadmap) will enable time frame adaptation if needed.

38. **Recommendation 5:** Any future Joint Programme should further explore the articulation between different activities to ensure that activities conducted yield the best possible results. Inter activity articulation should be used to ensure that change created can be greater than the sum of their parts. Each activity should have a single agency lead, and include a clear articulation plan that shows how, when, and led by whom, inter activity articulation should take place.

39. **Recommendation 6:** In order to enable gender mainstreaming, a thorough gender analysis covering all relevant areas should be conducted. This will enable the implementers of activities to access gender data when/if needed. Gender disaggregated data should be consistently collected and gender mainstreaming should be reviewed periodically to ensure any necessary adaptation is made.

40. **Recommendation 7:** Continue to ensure that new programming does not accidentally overlook key groups. To do this a new programme should be, wherever possible, informed by periodic vulnerability assessment(s), that allows for disaggregation by sex and age within the different groups. In future, this will also help ensure that groups that may not be under the Government of Kenya radar are included.

41. **Recommendation 8:** The inclusion of end users should be further expanded in future activities. This will serve to ensure that a HRBA is included across the whole implementation of the programme and not only as part of specific activities. This will ensure improved ownership and legitimacy of the interventions. This could include the active representation of agencies representing end user groups in programme discussions.

Introduction

1. This is the final evaluation of the United Nations Sustainable Development Goals (UN SDG) Joint Programme of Social Protection 2020-2022. The evaluation was managed by the World Food Programme (WFP) Country Office (CO) in Kenya and conducted by a team of three evaluators representing Tana Copenhagen between July 2022 and September 2022.
2. This assignment was commissioned by WFP, on behalf of the Participating UN Organisations (PUNO) – WFP, Food and Agriculture Organisation (FAO), United Nations Children’s Emergency Fund (UNICEF), International Labour Organisation (ILO), and in collaboration with the UN Resident Coordinator Office (UN RCO), including the UN SDG Partnership Platform.
3. The evaluation is taking place at the end of the Joint Programme cycle and will serve to inform the Government of Kenya, the UN, specifically PUNO, the UN RCO, as well as non-state actors, and donors on the experience of the programme and the lessons that can be learned from it.

1.1. EVALUATION FEATURES

4. The evaluation had the dual objective of accountability and learning in relation to performance and results of the programme (15th January 2020 - 15th September 2022, 32 months).
5. Specifically, this evaluation assesses:
 - a) The project’s relevance, coherence, effectiveness, efficiency, and sustainability.
 - b) The project’s contribution to SDG acceleration, UN reforms and focus on inclusion of persons with disabilities (PWD) including accessibility, non-discrimination, participation of organisations of PWDs and data disaggregation).
 - c) The project’s contribution to gender, equity and wider inclusion objectives and integration of Gender Equality and Women’s Empowerment (GEWE) mainstreaming principles into the project’s design.
 - d) Whether the project achieved the planned results and targets.
 - e) Checked if critical assumptions hold true.
 - f) Documented lessons learned.
6. The primary intended users of this document are those engaged in social protection, and social protection related activities in Kenya generally and more specifically, those engaged in the Joint Programme directly (i.e. the Government of Kenya, PUNO and the UN RCO, specific non-state actors as well as donors).
7. The evaluation took place between July 6th, 2022, and November 14th, 2022. Field data collection was conducted in two phases. First during inception between the 25th of July and 3rd of August when the inception report was delivered; and between the 15th and 29th of August after the inception phase ended and the Evaluation Team (ET) was authorization to proceed with data collection. A discussion on preliminary findings, with the commissioner of the assignment, was held on the 6th of September 2022.
8. The evaluation process has been aligned to the United Nation’s Evaluation Network (UNEG) principles, norms, and standards.⁹ Likewise, and in accordance with the UN commitment to gender equality and empowerment, the ET has used a gender sensitive approach to guide the examination of contextual factors, data collection, data analysis, the identification of findings and their presentation. Additionally, attention to the needs of persons with disabilities (PWD) and people living in vulnerable situations has been highlighted throughout the evaluation, including data collection, analysis, and reporting.

⁹ <https://docs.wfp.org/api/documents/WFP-0000003179/download/>

1.2. CONTEXT

1.2.1 General overview

9. Kenya is classified as a Lower Middle-Income country, and has the largest economy in the East African region.¹⁰ Urbanisation is fast growing and the cornerstone of its Gross Domestic Product is the agricultural sector, but, services such as transport, retail, tourism, manufacturing, and construction comprise a considerable portion of Kenya's economy.¹¹ The informal sector, characterised by small-scale activities, self-employment and ease of entry and exit, accounts for approximately 83 percent of total employment.¹² 72 percent of the population living in rural areas, and 28 percent living in urban areas participate in the informal sector.¹³ The number of Kenyan households living below the national poverty line persists at approximately 36 percent, with children being disproportionately affected.¹⁴ Poverty is highest among rural households, women-headed households, households headed by persons with limited levels of formal education and among households headed by an older person (70+).¹⁵ The negative impacts from the economic downturn in 2019 is affecting the totality of the population.¹⁶

1.2.2 Social protection

10. The Kenyan social protection system is governed by a legal and policy framework that materialises through a series of programmes. These are described below. The activities conducted by the Joint Programme have been nested within this system.

11. The 2010 Kenya Constitution¹⁷ establishes social security as a Human Right and includes several specific articles which bestow key social protection responsibilities on the state.

12. The Constitution 2010, Article 43 provides every person with the right to social security. In addition to the Constitution, the following documents also place the responsibility of providing social protection services on the Government of Kenya: The Kenya National Social Protection Policy 2011, section 1.3,¹⁸ the Third Medium Term Plan (MTP III) 2018-2022,¹⁹ the Kenya's Vision 2030,²⁰ and the Government's 'Big Four' Agenda.²¹ Monitoring of social protection progress within the SDG goals is managed through the Voluntary National Review on Implementation of the Sustainable Development Goals (2020).²² At the regional level, the African Union's Agenda 2063,²³ the International Covenant on Economic, Social and Cultural Rights (CESCR),²⁴ and Convention on the Rights of Persons with Disabilities (CRPD),²⁵ also make demands of the Kenyan

¹⁰ Korsak, I (2017) Economies of the Eastern African Communities. Economic and commercial attaché. Brussels invest & export.

¹¹ World Bank. (2020) Turbulent Times for Growth in Kenya: Policy Options during the COVID-19 Pandemic. Kenya Economic Update.

¹² [Economic Survey 2018 - Kenya National Bureau of Statistics \(knbs.or.ke\)](https://www.knbs.or.ke/economic-survey-2018).

¹³ World Bank. (2018) Rural Population (% of total population) – Kenya. Accession on 8/9/2022 via <https://data.worldbank.org/indicator/SP.RUR.TOTL.ZS?locations=KE>.

¹⁴ World Bank 2020 – Kenya Poverty and Equity Brief (https://data.worldbank.org/data/download/poverty/33EF03BB-9722-4AE2-ABC7-AA2972D68AFE/Global_POVEQ_KEN.pdf)

¹⁵ [Economic Survey 2018 - Kenya National Bureau of Statistics \(knbs.or.ke\)](https://www.knbs.or.ke/economic-survey-2018).

¹⁶ UNICEF, Shujaaz Inc. (2021). Barometer: Tracking the impact of COVID-19 on adolescent girls in Kenya.

¹⁷ The Kenya Constitution 2010 (<http://www.kenyalaw.org/kl/index.php?id=398>).

¹⁸ Kenya National Social Protection Policy 2011

¹⁹ The Medium-Term Plan III 2018-2022 (<https://vision2030.go.ke/publication/third-medium-term-plan-2018-2022/>).

²⁰ Kenya Vision 2030 (<https://vision2030.go.ke/publication/kenya-vision-2030-popular-version/>).

²¹ The Big 4 Agenda (<https://big4.delivery.go.ke/>).

²² National Treasury and Planning, State Department for Planning (https://sustainabledevelopment.un.org/content/documents/26359VNR_2020_Kenya_Report.pdf)

²³ The African Union Agenda 2063 (<https://au.int/en/agenda2063/overview>).

²⁴ International Covenant on Economic, Social and Cultural Rights (<https://www.ohchr.org/en/instruments-mechanisms/instruments/international-covenant-economic-social-and-cultural-rights>).

²⁵ Convention on the Rights of Persons with Disabilities (<https://www.ohchr.org/en/instruments-mechanisms/instruments/convention-rights-persons-disabilities>).

Government. Kenya also follows the principles of the ILO Social Protection Floors Recommendation, 2012 (No. 202) which calls for the progressive realisation of social security, which it considers a human right.²⁶

13. In 2011, the Government of Kenya adopted the National Social Protection Policy.²⁷ The policy delineates social protection, including the following three pillars:

- a. **Social assistance:** this pillar includes a diverse set of programmes, core among them is the National Safety Net Programme (NSNP) - Inua Jamii, consisting of four cash transfer programmes that offer regular and predictable cash transfer or in-kind support. These include Older Persons Cash Transfer (OPCT) for 65 years and older, Cash Transfer for Orphans and Vulnerable Children (CT-OVC), Persons with Severe Disabilities Cash Transfers (PwSD-CT), and the Hunger Safety Net Programme (HSNP) for persons living in vulnerable situations and poor households residing in arid areas of Northern Kenya. Other social assistance programmes include school feeding programmes, general relief food distribution, food for assets, nutrition-based schemes, health voucher schemes and HIV and AIDS nutrition schemes.
- b. **Social health insurance:** this pillar is based on a programme that is implemented through a contributory scheme. The health insurance is provided through the National Hospital Insurance Fund (NHIF), and the Universal Health Care (UHC). In addition, the Linda Mama programme offers free maternal health services.
- c. **Social security:** this pillar is implemented through the National Social Security Fund (NSSF) programme, which requires registered employers and employees from both the formal and informal sectors to contribute to a pension scheme. Other schemes which form part of this pillar include a fully tax-financed Civil Service Pension Scheme, contributory occupational schemes (where employer contributes a defined amount) and individual voluntary based schemes.

14. The 2020 Kenya Social Protection Sector Annual Report noted that during the 2018/19 fiscal year 1.3 million people received regular Social Assistance support.²⁸ This support included:

- a. **Social assistance:**
 - i. 1.3 million people received regular Social Assistance support. During the 2018/19 financial year social assistance programs spending equalled Kenyan Shillings Kshs.29.5 billion.
 - ii. The National Drought Management Authority successfully delivered six regular cash transfer cycles to 97,661 HSNP households across Turkana, Mandera, Marsabit and Wajir, this support equalled Kshs. 3.3 billion. 60 percent of the regular cash transfer beneficiaries were women.
 - iii. The Social Assistance Unit supported 1.1 million beneficiaries including CT-OVC, OPCT, and PwSD. This support included 3 payment cycles and accounted for Kshs. 26 billion expenditures.
 - iv. The National School Meals Programme covers 1.6 million pupils in 26 of 47 counties in mostly arid and semi-arid lands. In 2018/2019 the programmes budget equalled Kshs. 2.4 billion.
- b. **Social health insurance:**
 - i. The programmes total budget is not reported in the official documents reviewed.
 - ii. 9,146,684 members, from both the formal and informal sectors, are enrolled in social health insurance with NHIF.
 - iii. The NHIF provided assistance to 1,791,526 members. The largest proportion of recipients of support, 1.08 million, were part of the Linda Mama Programme.
 - iv. PwSD programme provided support to 42,000 persons.
 - v. CT-OVC programme provided support to 181,000 persons.

²⁶Social Protection Floors Recommendation, 2012 (No. 202)

https://www.ilo.org/dyn/normlex/en/f?p=NORMLEXPUB:12100:0::NO::P12100_INSTRUMENT_ID:3065524

²⁷ Kenya National Social Protection Policy 2011

²⁸ Kenya Social Protection Annual Report 2020 (socialprotection.go.ke). This is the most recent published report of its kind.

- vi. OPCT programme supported 484,026 persons above 65 years of age.
- vii. In addition to these national programmes, the Social Protection annual report stated that county Governments have also designed locally focused social protection programmes. For example, the Vihiga County established the Boresha Afya ya Mama na Mtoto programme, in collaboration with UNICEF, to reduce maternal and child mortality and malnutrition; the Kakamega County Government established Imarisha Afya ya Mama na Mtoto programme to promote Family Planning and Mother and Child Health.

c. Social security

- i. The number of registered social security schemes increased from 1,018 in 2017 to 1,261 schemes in 2018.²⁹
- ii. A total of 3,640,232 individuals were covered by pension schemes. This figure demonstrates an increase from 3,240,002 individuals covered in the previous year. The largest scheme is NSSF, with approximately 2,629,689 members, followed by private occupational schemes whose contributions are either employer-based or voluntary, with 540,487 members. The Government and teachers' pension schemes have approximately 206,400 members and 313,600 respectively.³⁰ Individual contributory open schemes offered by insurance schemes have approximately 176,000 members.³¹
- iii. In 2018/19, the total contribution made to all pension schemes in Kenya equalled Kshs. 134,495,547,873 of which NSSF received Kshs. 14,036,361,000 from employers and employees combined. NSSF paid out benefits amounting to Kshs. 3,712,230,000 to its members while the cost of all benefits paid out to members of all schemes equalled Kshs. 74,466,569,354.³²
- iv. The total asset value and investments by pension schemes as of 30 June 2019 stood at Kshs.1.16 trillion of which, NSSF total asset value was Kshs. 213.3 billion. In the same year, NSSF asset value increased by Kshs.23.13billion while nationally, the total asset value from all schemes amounted to Kshs. 90.5 billion.³³
- v. The percentage of women registered in a pension scheme is unknown.

15. During 2018-2019 fiscal year the National Drought Emergency Fund (NDEF) was established. NDEF was set up to consolidate Government and external partner funding for a range of drought preparedness and response interventions under the 2018 Public Finance Management Regulations. The Hunger Safety Net Programme (HSNP), as an NDEF program, provided emergency payments to households in four counties during 2018/019 to the tune of 3.5 million Euros. Through the Crop Insurance, a program under the Kenya Agriculture Insurance Program funded by Government of Kenya, the World Bank and the private sector supported a total of 416,924 farmers of which 61 percent were women during 2018-2019. Crop insurance premiums of Kshs. 94 million were paid out of which Kshs.47 million was paid by the Government of Kenya as subsidies to support farmers who held insurance. On the same year, the compensation to farmers through the Crop Insurance scheme equalled to Kshs. 25 million. 18,120 farmers held livestock insurance in the year 2018/19.

16. In addition to the Government of Kenya's contribution to social protection, several external partners such as PUNOs, Non-Governmental Organisations (NGOs), donors and private sector support the social protection sector in Kenya. The Joint Programme is a good example of this type of intervention. While funding from external actors has remained stable in recent years, the Government of Kenya has presided over a steady increase in social protection spending³⁴ which has translated into the Government of Kenya overtaking the expenditure by external partners. This is evidenced by the data presented in Figure 1.

²⁹ Kenya Social Protection Annual Report 2020 (socialprotection.go.ke).

³⁰ Retirement Benefits Authority. 2019. *Retirement Benefits Industry Report for December 2018*.

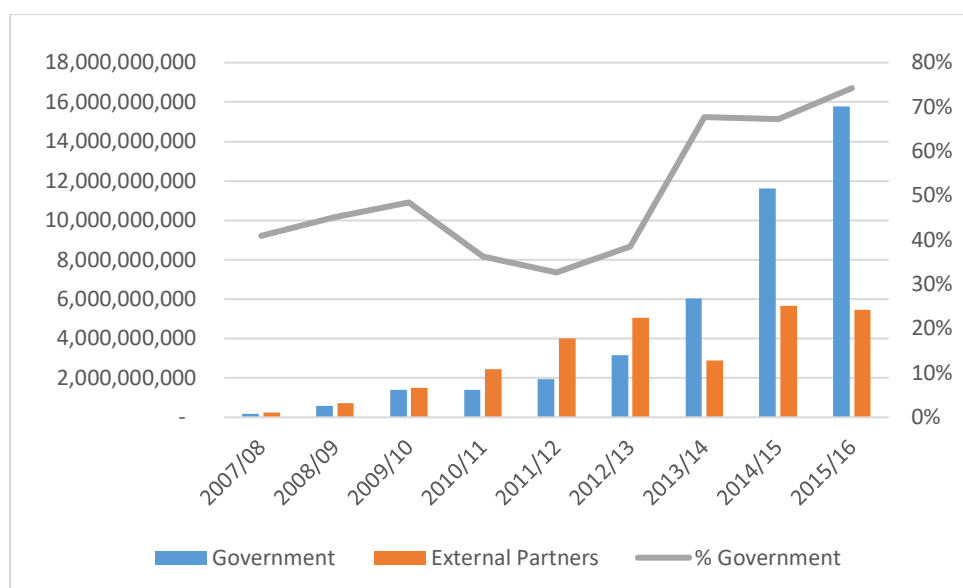
³¹ <https://thedocs.worldbank.org/en/doc/271501530116825521-0160022017/render/GroupPresentationKenya.pdf>

³² Kenya Social Protection Annual Report 2020 (socialprotection.go.ke).

³³ Kenya Social Protection Annual Report 2020 (socialprotection.go.ke).

³⁴ Kenya Social Protection Sector Review 2017.

Figure 1 Kenyan Social Assistance Programme Spending



17. Looking forward, the Kenya National Social Protection Policy was adopted by the Cabinet in 2011, but the revised version from 2019 has yet to be adopted. The revised policy includes four pillars, namely: income security, health protection, shock responsive social protection, and complementary initiatives. The revision of the policy sets the stage for the strengthening of systems, and details the implementation arrangements needed, including communication, research and Monitoring and Evaluation (M&E) reporting platforms. An Investment Plan for social protection and sustainable financing of social protection programs has been developed and regulations for the establishment of the Social Assistance Fund within the Public Finance Management Act No. 18 of 2012³⁵ also developed, but this latter effort has yet to be approved by the National Assembly.

18. The Enhanced Single Registry is a tool that will facilitate the sustainable coordination of social protection in Kenya where the data on all persons experiencing vulnerability across the country will be stored.

19. In addition, counties are expanding their policy frameworks. Examples of this include, the Mombasa County Social Protection Strategy (2018), the Wajir County Persons with Disabilities Act (2021),³⁶ the Makueni County Social Protection Policy (2016),³⁷ and the Baringo County Social Protection Policy (2021).³⁸ Other counties that have recently launched their own social protection policies include Samburu and Marsabit.

20. The Joint Programme was a unique effort in that it approached social protection in a multifaceted and universal way. This allowed the programme to contribute directly towards the attainment of the SDGs in a way that may not have been possible had the programme taken a much narrower view of what is comprised within social protection, and who the focus of the support should be. Although there are other organisations engaged in social protection in Kenya, none approached social protection in the same way, as a joint effort, nor worked on the same elements of social protection.

21. Still, it is worth noting that the World Bank works on the sector, mainly focusing on a direct cash transfer programme -*Inua Jamii*- which includes persons 70 years and above, the OVCs and PWSD. The programme aims to support the Hunger Safety Net Programme which is a shock responsive initiative targeting Northern Kenya. In addition, USAID also supports social protection by supporting the President's Emergency Plan for AIDS Relief (PEPFAR), which aims to increase sustainability of the HIV response.

³⁵ The Public Finance Management Act 2012.

³⁶ Wajir County Persons with Disabilities Act, 2021.

³⁷ [Social protection Policy - Government of Makueni County.](#)

³⁸ Baringo County Government. 2021. Social Protection Policy 2011.

1.2.3 Gender equality and women empowerment (GEWE)

22. Kenya's commitment to safeguarding gender equality and women empowerment is guided by normative international and national frameworks (see Box 1). The Government of Kenya has made some laudable progress in enacting thematic policies and legislature on GEWE including: the Policy on the Eradication of Female Genital Mutilation 2019, the Sexual Offences Act 2006, the Prevention Against Domestic Violence Act 2015, the National Land Policy 2009, the Matrimonial Property Act 2013 and the National Gender and Equality Act 2011. Affirmative action initiatives such as the Women Enterprise Fund, the Youth Enterprise Development Fund, Access to Government Procurement Opportunities, the Uwezo Fund and the National Government Affirmative Action Fund have also been introduced. Monitoring and evidence generation have also improved. For example, Kenya recently released a first-of-its-kind metric tool to measure progress in women empowerment, namely the Women's Empowerment Index.³⁹

23. Overall, Kenya's performance towards gender equality remains on a positive trajectory. In 2022, out of 146 countries, Kenya was ranked 57th in the Gender Gap Index,⁴⁰ a notable improvement from 2020 when it ranked 109.⁴¹ However, despite this improvement there is still noted gender disparity in access to the labour market and economic participation, access to education, political participation, health status and well-being, as well as levels of poverty. Moreover, the prevalence of gender-based violence (GBV) remains a pervasive threat (see Annex 10).

1.2.4 Persons with disabilities

24. According to the 2019 census, there are an estimated 0.9 million Kenyans living with some form of disability.⁴² This represents approximately 2.2 percent of the entire population. Of those with disabilities, 43 percent experience difficulties with mobility, while the rest experience sight, hearing, cognition, self-care, and/or communication difficulties.⁴³ Sex disaggregated data shows that there are more women living with disabilities than men. The data also shows that more PWD live in rural areas than in urban areas.

25. Over the last two decades, Kenya has made progress in advancing policy and legislative documents to address the needs of PWD. Key milestones include the enactment of the first-ever Persons with Disabilities Act (2003), ratification of the Convention on the Rights of Persons with Disabilities (2008), and the affirmation of the human dignity of persons with disabilities highlighted in the 2010 Kenyan Constitution.⁴⁴

Box 1: Kenya's Legislative and Policy Instruments guiding GEWE

International

- Convention on the elimination of all forms of discrimination against women
- International Conference on Population and Development
- ILO Conventions (100/1951, 101/1958 and 183/2000)
- UN Security Council Resolution 1325
- Beijing Platform for Action
- The Convention on the Right of the Child
- Sustainable Development Goals (SDG-5)

Regional

- Protocol to the African Charter on Human People's Rights on the Rights of Women in Africa (Maputo Protocol)
- African Union Agenda 2063
- The East African Community Treaty of 1999

National

- Constitution of Kenya 2010
- Vision 2030
- Medium Term Plan III (2018-2022)
- The Big Four Agenda
- The National Gender and Development Policy 2000
- County Integrated Development Plans

Source: Government of Kenya (2019) National Policy on Gender and Development

³⁹ Kenya National Bureau of Statistics, UN Women and UNICEF (2020) Women's Empowerment in Kenya.

⁴⁰ [Global Gender Gap Report 2022 | World Economic Forum \(weforum.org\)](#).

⁴¹ [Global Gender Gap Report 2020 | World Economic Forum \(weforum.org\)](#).

⁴² [Status of disabilities in Kenya: 2019 census statistics - Development Initiatives \(devinit.org\)](#).

⁴³ [Status of disabilities in Kenya: 2019 census statistics - Development Initiatives \(devinit.org\)](#).

⁴⁴ Mute, L.M. (2020) From Affirmation to Practice: Assessing a Decade of Implementing the Constitution of Kenya 2010 for Persons with Disabilities. United Disabled Persons of Kenya.

26. Disability affects people in a wide range of ways, including access to political representation, and education, access to employment and health care (see Annex 10). Available information also shows that disabilities, and their impact, are experienced differently by different genders (see Annex 10).

1.2.5 Environment and climate change

27. Environment and climate change have a considerable effect on Kenya, impacting the need for social protection services. For example, a drought in 2018 led to a reduction in agricultural production,⁴⁵ which in turn prompted a series of knock on effects. For example, 12 percent of Kenyans are food-insecure and have poor food-consumption levels and low dietary diversity mostly in arid and semi-arid regions. This is driven by shocks and crises such as drought, heavy rains and floods. Malnutrition is directly linked to poverty and remains a challenge with higher rates of stunting seen among children under the age of five. Specifically, children in rural areas (29 percent) are more prone to stunting than those residing in urban areas (20 percent).⁴⁶ Drought affected areas have experienced an increase of outbreaks of disease due to limited safe drinking water and little access to sanitation services.⁴⁷ Moreover, pastoralists, most often young men, must go farther distances in search of water and food for their livestock.⁴⁸

1.2.6 The Impact of COVID-19

28. COVID-19 affected the Kenyan population in a variety of ways including the increase of unemployment and food insecurity, reduction of education services, limitations on access to health care and general psychological welfare (see Annex 10).

1.3. SUBJECT BEING EVALUATED

29. This is an evaluation of the Kenya SDG Fund Joint Programme for Social Protection, which was implemented for a period of 32 months, between 15th January 2020 and 15th September 2022. The implementation period included a no-cost extension of six months, which was granted following delays due to the onset of the COVID-19 pandemic. Programme activities were implemented at national, county, and sub-county levels.

30. The strategic framework for the Joint Programme was anchored on the Joint SDG Fund, a development cooperation mechanism supporting sustainable development activities through integrated and multidimensional Joint Programmes. Global outcome 1 of the Joint SDG Fund aims to achieve integrated multi-sectoral policies to accelerate SDGs achievement, implemented with greater scope and scale. The Joint Programme, under review here, was nested within the Kenya UNDAF (2018-2022). Specifically, the Joint Programme was intended to support the achievement of the UNDAF strategic results area 2, outcome 6, which aimed to ensure that, by 2022, marginalized and vulnerable people have increased access to and utilize social protection. The outcome also focuses on the provision of services for prevention and response to gender-based violence and violence against children.

31. The Joint Programme was well nested within existing structures, mentioned above (see 1.2.2 Social protection), and did not benefit from additional needs assessments or evaluations to determine its design.

32. Planning and implementation responsibility at overarching level was overseen by four UN implementing agencies: WFP, UNICEF, ILO, and FAO. The RCO oversaw execution and ensured alignment with the overall UN agenda. WFP served as the convening agency. The implementing UN agencies were guided by a common results framework, with clearly defined deliverables. Implementation adopted one of three approaches: individual agencies took lead for delivering individual work streams; two or more agencies engaged in a single activity; or instances where all four agencies jointly participated in an activity. In all these instances, lead agencies were identified and assigned the responsibility to oversee delivery of results and/or conduct of activities. Collaboration between partners, and information sharing on activities conducted, was managed through monthly coordination meetings which included all participating organisations, not only PUNO and the RCO.

⁴⁵ KNBS (2018). Economic Survey 2018. Kenya National Bureau of Statistics.

⁴⁶ <https://www.wfp.org/publications/kenya-zero-hunger-strategic-review>

⁴⁷ World Bank (2021). Employment in agriculture, female (% of female employment) (modelled ILO estimate) - Kenya.

⁴⁸ World Bank (2021). Employment in agriculture, female (% of female employment) (modelled ILO estimate) - Kenya.

33. The Joint Programme had a planned budget of USD 2 million in contributions from the Joint SDG Fund, and an additional USD 1.3 million from WFP, UNICEF and RCO/SDG Partnership Platform.⁴⁹ As per the ToR, the SDG Fund comprises of pooled resources from 12 donors namely: EU, Denmark, Germany, Ireland, Luxembourg, Monaco, The Netherlands, Norway, Portugal, Spain, Sweden, and Switzerland. By June 2022, the total estimated financial commitments equalled USD 1,701,440, and expenditures amounted to USD 1,240,208 (see Table 1). By the time of completion of the programme period, the entire Joint SDG Fund grant of USD 2 million had been fully utilised. The financial data available does not permit the presentation of funds distributed/allocated to each activity conducted.

Table 1 Budgetary overview⁵⁰

Financial Commitments for the whole JP (USD)	Overall budget (with co-funding) (USD)	Total Estimated Financial Commitments for the whole JP		
		(By 31 Dec 2021)	(By 30 June 2022)	(By 15 September 2022)
1. Joint SDG Fund contribution (2,000,000)	3,300,000	1,228,865.12	1,701,440.00	2,000,000.00
2. Co-funding 1 – UNICEF (650,000)				
3. Co-funding 2 – WFP (600,000)				
4. Co-funding 3 – RCO/SDG Partnership Platform (50,000)				
Total estimated expenditures		691,508.01	1,240,208.00	2,000,000.00

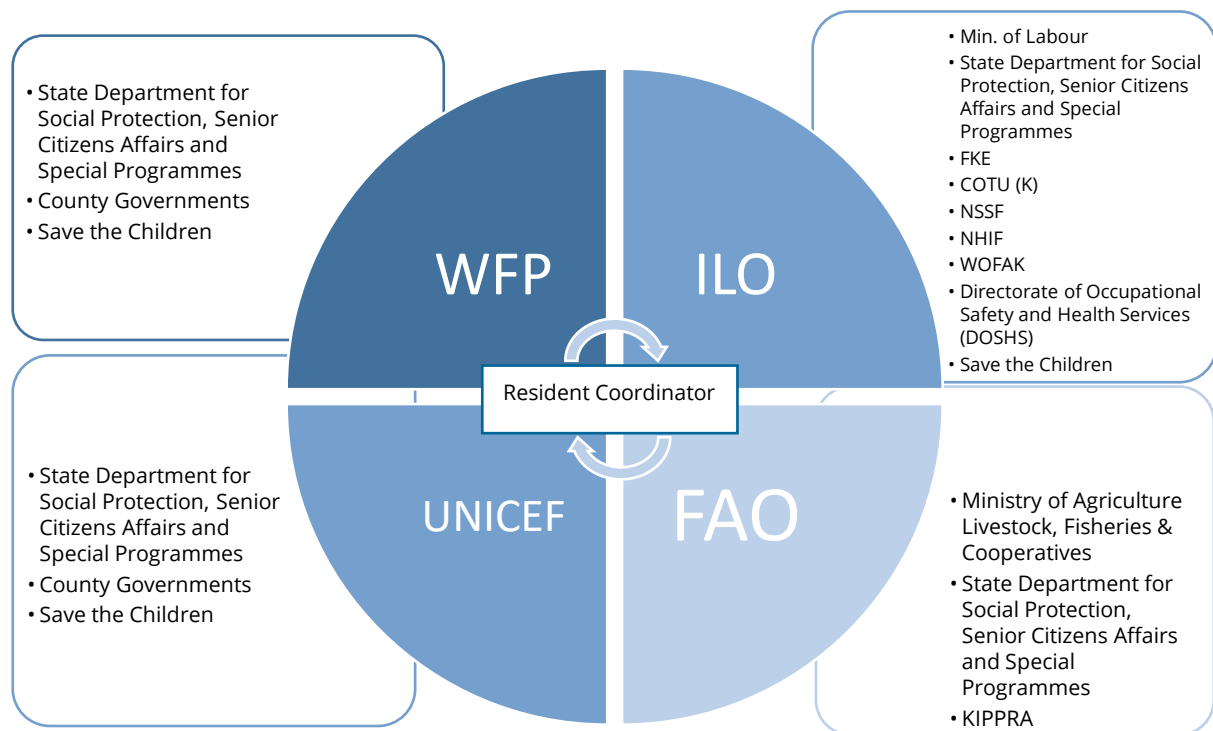
34. The Joint Programme endeavoured to provide support to the Government of Kenya to facilitate an accelerated transition from a poverty-focused approach to social protection towards a more inclusive-focused model that could enhance access to and utilization of social protection and address critical barriers. This focus was aligned with supporting the Government to meet policy and legal priorities highlighted in the draft National Social Protection Policy 2019 strategy.

35. During implementation, PUNO agencies collaborated with a range of stakeholders (see Figure 2). The Government of Kenya played a leading role in identifying areas of focus and was the primary beneficiary of the Joint Programme. The Government of Kenya was represented by Government ministries, state departments, agencies, and county level Governments. Other stakeholders engaged in the Joint Programme included organisations representing employers and workers, as well as civil society organisations (CSO). All actors engaged had existing relationships with one or more PUNO agencies.

⁴⁹ Joint Programme Annual Reports 2020, 2021 and 6-month progress update.

⁵⁰ Joint Programme Annual Reports 2020, 2021 and 6-month progress update.

Figure 2 Stakeholder Mapping⁵¹

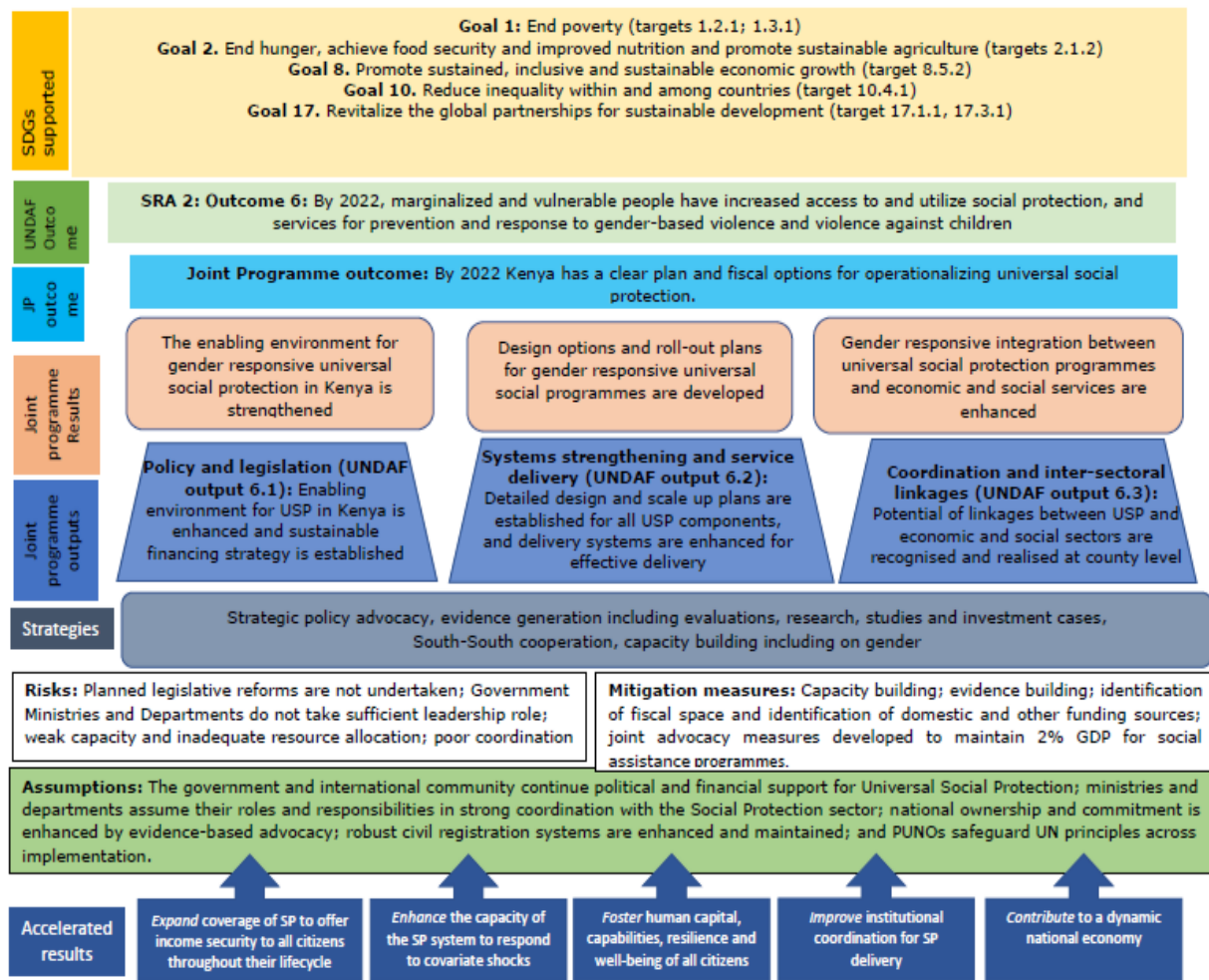


36. The Joint Programme’s intervention logic is depicted in the Theory of Change (ToC) (see Figure 3). The programme was relatively short and therefore it did not experience considerable amendment in scope or programming. The only activity as envisioned by the Joint Programme which was not achieved was the gender analysis due to challenges selecting appropriate external experts to implement the study (see Table 3 below).

37. The ToC was predicated on the assumption that both the Government of Kenya, and by extension all relevant departments and ministries, as well as the donor community, would remain fully committed at an operational and financial level to the furthering of a social protection system. The ToC did not reflect assumptions made in relation to the achievement of products that were more granular, or which may have highlighted the time frames required for specific changes (see Figure 3 below).

⁵¹ Abbreviated stakeholders include Federation of Kenya Employers (FKE), Central Organisation of Trade Unions in Kenya (COTU - K), National Social Security Fund (NSSF), National Hospital Insurance Fund (NHIF), Women Fighting AIDS in Kenya (WOFAK) and Kenya Institute of Kenya Institute of Public Policy Research and Analysis (KIPPRA).

Figure 3 Theory of Change



38. The Joint Programme’s programmatic results framework highlighted the pursuit of a single outcome: by 2022, Kenya has a clear plan and fiscal options to operationalize universal social protection. This outcome was divided into two main result areas:

- **Result area 1:** Envisioned scale-up of social protection coverage, towards universalism to leave no one behind, following a sustainable financing approach through collaboration and advocacy with Government and relevant stakeholders.
- **Result area 2:** Strengthened Government leadership, capacity and coordination for social protection policy design and implementation within Government and with relevant stakeholders as element of SDG acceleration and leveraging on the Sectoral Group for Social Protection and SDG private sector platform towards achievement of SDG commitments, including a strong link to the national “Big Four” agenda towards attainment of the SDGs.

39. These result areas were pursued through three main output areas and several activities (see Table 2 below). Originally the implementation of activities was planned to take place over a two-year period - 2020 and 2021. However, as a result of delays arising from COVID-19 restrictions, the implementation of activities was delayed. This led to the simultaneous, rather than sequential originally planned, implementation of some activities. The delay also meant that some activities were implemented close to the end of the programme cycle. One activity was not implemented during the programme period due to challenges in identifying a suitable technical expert to undertake the assessment. According to respondents, the no-cost extension

period allowed for the delayed activities to be conducted and finalised within the extended programme cycle.⁵²

Table 2 Planned outputs and activities⁵³

Output	Annual Targets		Corresponding activities
	2020	2021	
Output 1: Enabling environment for gender-responsive universal social protection in Kenya is strengthened.	<ul style="list-style-type: none"> • Draft USP action plan, cost-benefit and feasibility studies done • Business case for USP developed, costed roadmap/action plan on progressive realization of USP • Capacity building activities on gender carried out • Learning and sharing events for private sector partner engagement 	<ul style="list-style-type: none"> • Costed, finalized and approved action plan for USP • Innovative financing mechanisms for USP identified • Sustainable mechanism finalised • Learning and sharing events for private sector engagement 	<ul style="list-style-type: none"> • Business cases (costing, cost-benefit and affordability/fiscal space analyses) • Policy advocacy and learning to support decision-making
Output 2: Design options and roll out plans for gender responsive universal social protection programmes are developed.	<ul style="list-style-type: none"> • Feasibility/actuarial studies on social insurance • Assessment of social protection in the informal economy • MIS/M&E framework review 	<ul style="list-style-type: none"> • Design options for i) social insurance programmes and ii) extending social protection to informal economy workers • Enhanced MIS/M&E system 	<ul style="list-style-type: none"> • Develop design parameters/options and roll-out plans for universal social programmes: <ol style="list-style-type: none"> a. Design options and roll-out plans for: i) universal child grant, ii) social security, iii) enhanced linkages between social protection mechanisms in support of the Big 4 agenda and iv) roll out plan for universal pension b. Review delivery system infrastructure and enhancement plan to accommodate universal programmes: i) MIS/registry review and ii) M&E framework review
Output 3: Enhanced gender responsive integration between universal social protection programmes and economic and social services.	<ul style="list-style-type: none"> • Integrated models targeting PWD/PLHIV 	<ul style="list-style-type: none"> • Systems (MIS and admin system) in place to facilitate linkages between universal social protection and socioeconomic sectors • County mapping and coordination of the social protection mid-UNDAF review 	<ul style="list-style-type: none"> • Mapping best practices and lessons on linkages between social protection programmes and complementary economic and social services • Policy and technical support at all levels to design and implement complementary services to meet the needs of the most vulnerable populations • Tools, guidance and targeted capacity strengthening investments for inefficient integration between social and economic services.

40. Activities conducted fell under one of four main categories: Advocacy and engagements; Feasibility Studies and Assessments; Pilots Programmes and Trainings and Capacity Building. Each of the four PUNO

⁵² JP – SNOB 6-month progress overview.

⁵³ Kenya-UNSDG Joint Programme for social protection programme document.

agencies taking lead for specific activities. Table 3 below presents activities by category, as well as the lead agency and implementation status, based on a review of documentation.⁵⁴

Table 3 List of implemented activities and corresponding lead agencies⁵⁵

Name of planned activity	Lead agency	Finalised	Not implemented
Advocacy and engagements aimed at enhancing stakeholder coordination and dialogue to raise awareness, strengthen partnerships and support policy uptake, implementation and dissemination, with donor, public and private partners. Components of these activities also aimed to increase effective coordination mechanisms, through the development of social protection networks and the sharing of best practices.			
Establishing and implementation of a Kenya Community of Practice (CoP for social protection)	UNICEF	X	
Engagements on disability data disaggregation on the Enhanced Single Registry	WFP	X	
Advocacy for the linkage of Enhanced Single Registry and other databases	WFP	X	
Engagement with the NHIF on expansion of social health protection coverage for uncovered groups	ILO	X	
Engagement on establishment of an occupational diseases and illness compensation system	ILO	X	
Development of an advocacy and communication strategy to create awareness on the Government programme on maternal and child health (Linda Mama)	UNICEF	X	
Dialogue on Cash Plus for agriculture dependent households in Kenya	FAO	X	
Establishment and launch of the Kenya Business Disability Network	-	X	
Feasibility studies and assessments included a range of targeted data collection and analyses with the aim of informing key social protection sectors and supporting an improved understanding of key elements of inclusivity and on universal provision of social protection. Specifically, the analyses focused on i) universal child grant, ii) social security, iii) enhanced linkages between social protection mechanisms in support of the Big 4 agenda and iv) roll out plan for universal pension . Each activity was based on tailor-made set of terms of reference and followed a case specific approach.			
Feasibility study to inform the design of the Universal Child Benefit (UCB).	UNICEF	X	
A Cost-Benefit Analysis to inform the long-term design of the UCB.	WFP	X	
Baseline survey for the UCB pilot programme	WFP	X	
Fill the Nutrient Gap (FNG) - Cost of the Diet (COtD) assessment under UCB pilot to inform establishment of nutrition -sensitive cash transfers.	WFP	X	
Feasibility study for a Community-Based Health insurance in Garissa, linking to NHIF	UNICEF	X	
Feasibility study on the introduction of a maternity benefit.	ILO	X	
Costing exercise on the introduction of a maternity benefit	ILO	X	
Assessment on social protection coverage for rural and informal economy workers;	FAO and ILO	X	
Costing of policy options for extending social protection coverage for rural and informal economy workers	ILO	X	
Assessment and option for design of linkages and referral mechanisms within the social protection sector in Kenya	UNICEF	X	

⁵⁴ Programme reports (quarterly, bi-annual and annual), feasibility and scoping studies and assessments, and interviews with PUNOs.

⁵⁵ Programme reports (quarterly, bi-annual and annual), feasibility and scoping studies and assessments reports, and interviews with PUNOs.

Midline impact evaluation of the 70+ cash transfer programme	WFP	X	
Comprehensive social security gap analysis	ILO	X	
Assessment for design and costing of an unemployment insurance scheme	ILO	X	
Gender assessment of existing social protection programmes to inform a gender strategy for social protection in Kenya	UNICEF		X ⁵⁶
Assessment of the inclusion of refugees and migrant workers into existing social security systems, with particular focus on NSSF Haba⁵⁷ product	ILO	X	
Issues Paper on improving Occupational Injury and Illness Compensation System	ILO	X	
Programmes included the testing of innovative and integrated socio protection models developed to target specific groups of the population, which were deemed particularly vulnerable.			
Piloting of the UCB in three counties	UNICEF	X	
Development of an Integrated Disability Inclusive programme design for Wajir County	WFP	X	
Empowerment of women living with and affected by HIV	ILO	X	
Pilot Kenya Integrated Agriculture Management Information System (KIAMIS) for identification and registration of farmer and management of agricultural subsidies and cash transfers in two counties (Nyandarua and Uasin Gishu)	FAO	X	
Training and capacity building – in this category, the Joint Programme aimed at supporting capacity building of social partners and officers from the Government of Kenya working at national level and county level, in the roll out of pilot projects and other activities.			
Training of officers from the Kenya National Bureau of Statistics on disability-inclusion in statical data collection and analysis.	Not applicable	X	
Training of county clerks, involved in the pilot beneficiary registrations, on disability-inclusion in statical data collection and analysis.	Not applicable	X	
Training of women living with and affected by HIV on business skills and linkage to financial service providers using the ILO GET Ahead Tool for Women in Enterprise Training Package Resource Kit, and training of WOFAK staff.	ILO	X	
Training of community health workers and volunteers in the roll out of the UCB pilot.	UNICEF/WFP	X	
Training of 15 Government officials at national and county level on applied policy research for socio-economic interventions towards promoting Cash Plus for agriculture dependent households.	FAO	X	
Training and skills transfer on Information Management Systems (IMS) management to in-house technical teams at the National Social Protection Secretariat, and Directorate of Social Assistance.	WFP	X	

41. The activities mentioned in Table 3 intended to support the access to/provision of social protection efforts for women; children; PWD; older persons; informal, rural and unemployed workers and persons living with HIV/AIDS. The objective of the Joint Programme was a broad systemic one. Still, some activities conducted, by their nature, were able to tangibly and specifically reach a select groups of persons from within the Kenyan population. These are summarised in Table 4 .

⁵⁶ Implementation of this activity was delayed due to challenges identifying a suitable technical expert to undertake the assignment within the programme period.

⁵⁷ A NSSF savings product launched in November 2019 to expand social security coverage to include members in the informal sector. [NSSF Kenya » Growing you for good » Haba.](#)

Table 4 Number of additional persons covered by national social protection services by activity⁵⁸

Number of additional persons covered by national social protection services	Activity	Aggregate number reached
Number of women	Pilot Universal Child Benefit programme	4,025 caregiver women
Number of children	Pilot Universal Child Benefit programme	8,204 children under 3 years
Number of persons with disabilities	Activity not specified in documents	49
Number of new-born babies	Activity not specified in documents	714
Number of women living with HIV	Economic empowerment for women living with and affected by HIV	202 women

42. The focus of the Joint Programme was derived from UNDAF and the considerable work that had been conducted between the UN and the Government of Kenya to establish the UNDAF priorities. The focus of the Joint Programme was on issues and areas which were known to be challenging or where limited information was available. The Joint Programme has, itself, been able to serve as a knowledge base for several areas of social protection.

1.4. EVALUATION METHODOLOGY, LIMITATIONS AND ETHICAL CONSIDERATIONS

43. In this sub section, issues that affected the evaluation, as well as how the evaluation was conducted are introduced. At an overarching level, this evaluation has conformed to WFP and UNEG ethical standards and norms. Tana Copenhagen and ET have been responsible for safeguarding and ensuring ethics at all stages of the evaluation cycle. This includes, but has not been limited to, ensuring informed consent, protecting privacy, confidentiality, and anonymity of participants, ensuring cultural sensitivity, respecting the autonomy of participants, ensuring fair recruitment of participants (including women and socially excluded groups) and ensuring that the evaluation results in no harm to participants or their communities. The full evaluation was guided by human rights-based principles and gender responsiveness.

1.4.1. Evaluation Criteria and Evaluation Questions

44. The evaluation focused on the following criteria: relevance, effectiveness, efficiency, coherence, and sustainability, and included the following 21 EQs under said criterion. In addition, one question focused on specifically on lessons learned (see Table 5). See Annex 1: Terms of Reference.

Table 5 Evaluation questions

Relevance
1.1 To what extent is the programme in line with the needs of beneficiaries and partners, including Government, people living with disability, male and female?
1.2 How relevant were the Joint Programme to priorities/policies at the national level and to the needs of the main vulnerable groups?
1.3 How relevant was the jointness in programme design, implementation, and management for addressing the country's development priorities and challenges?
1.4 To what extent are the activities aligned with partner UN agency and donor policies and priorities?
1.5 To what extent is the intervention based on a sound gender analysis? To what extent is the design and implementation of the intervention gender-sensitive?
Effectiveness

⁵⁸ Kenya Joint UN SDG Fund (ed.), 2022. LNOB portfolio questionnaire final

2.1 To what extent did the Joint Programme contribute to achieving its development objectives, especially around the 3 transformative results?
2.2 What are the major factors that influenced progress in achievement or non-achievement of the outcomes/objectives of the intervention?
2.3 To what extent did the intervention deliver results for the target groups
2.4 To what extent did the program target persons with disabilities? <ul style="list-style-type: none"> • Not specifically targeted • One of the groups of direct beneficiaries targeted • Main target group for the program
2.5 To what extent did the design and implementation of activities of the joint program supported include disability-related accessibility and non-discrimination requirement? <ul style="list-style-type: none"> • No requirements • General reference • Specific requirements
2.6 To what extent have persons with disabilities, in particular children and women with disabilities, been consulted through their representative organizations? <ul style="list-style-type: none"> • Not invited • Invited • Specific outreach
2.7 To what extent did support to data collection and analysis, registries, and information system feature disability? <ul style="list-style-type: none"> • No reference to disability • Disability included via Washington group short set or similar but no analysis • Disability included via Washington group short set or similar • Part of general analysis with specific analysis
2.8 To which extent did the program contribute to support inclusion of persons with disabilities via: <ul style="list-style-type: none"> • Ensuring basic income security • Coverage of health care costs, including rehabilitation and assistive devices • Coverage of disability-related costs, including community support services • Facilitate access to inclusive early childhood development, education, and work/livelihood
2.9 To what extent has the Joint Programme contributed to accelerating the SDGs at the national level?
2.10 To what extent the Joint Programme produced a catalytic effect in terms of generating systems change across sectors to leave no one behind?
2.11 To what extent has the Joint Programme contributed to achievement of UNDAF/CF outcome/s and national development priorities?
Efficiency
3.1 Was the programme implemented in a timely way?
3.2 Were the activities cost-efficient? Was the programme implemented in the most efficient way compared to alternatives? Were the project strategies efficient in terms of financial and human resource inputs as compared to outputs?
3.3 Did the monitoring system efficiently meet the needs and requirements of the project?
3.4 Was the Joint Programme intervention more efficient in comparison to what could have been done through a single agency intervention?
3.5 To what extent did the Joint Programme contribute to enhancing UNCT coherence and UNCT efficiency (reducing transaction costs)?
Coherence
4.1 To what extent are PUNO's activity coherent with key policies/programming of other partners operating in the context?
4.2 To what extent are human rights taken into account?
Lessons Learned
5.1 What are lessons learned from the project up to this point? Are there any recommendations to improve the project's relevance, efficiency, effectiveness?

Sustainability
6.1 To what extent has the strategy adopted by the Joint Programme contributed to sustainability of results, especially in terms of LNOB and the social protection system?
6.2 To what extent has the Joint Programme supported the long-term buy-in, leadership and ownership by the Government and other relevant stakeholders?
6.3 How likely will the results be sustained beyond the Joint Programme through the action of Government and other stakeholders and/or UNCTs?

1.4.2 Evaluability assessment

45. The factors that have affected the extent to which the Joint Programme could be evaluated, and the degree to which the evaluation questions responded to, are discussed here.

46. **Timeframe covered by the evaluation.** This evaluation has covered the period from January 15, 2020, to September 15, 2022. Notably, interviews conducted during inception phase of the evaluation revealed that all deliverables have been completed or were nearing completion, therefore conducting data collection in August appears to not have impeded the inclusion of documentation and interviews on all activities conducted.

47. **Time for data collection and analysis:** In order to capitalise on available time, the ET conducted data collection and analysed in real time.

48. **Triangulation:** The findings in the report are, where possible triangulated, however, there are instances where the number of sources and respondents is limited and therefore triangulation has not always been possible. Where this is the case is either self-evident or highlighted in the text. The ET does not believe that limitations on triangulation had a considerable impact because respondents were asked to substantiate their positions in depth and the number of instances where triangulation was not possible was limited.

49. **Kenyan population benefiting from social protection and county representatives.** In order to present information on the implementation of activities, in agreement with and with the assistance of PUNO, the ET engaged with county Government representatives in counties where activities were conducted, some in their pilot phase. In addition, subject area experts with experience from working with the targeted population were interviewed. Those interviewed provided an improved understanding of the experiences that different groups within the Kenyan population may experience (see Annex 5). The direct engagement that the Joint Programme had with the Kenyan general population was limited to a select number of activities. Specifically, on the ground activities (see Table 4). Therefore, based on discussions between PUNO and the ET, it was agreed that the most efficient approach to capture the experiences of the activities implemented on the ground would be through a focus on data collection from the Government of Kenya representatives, including county Government representatives from locations where on the ground activities were conducted. As noted above, subject area experts from NGOs were also included.

50. **Output, outcome, and impact.** Documents reviewed and interviews conducted have documented Joint Programme activities at the output level, this information has been used to document the contribution made to UNDAF Strategic Result Area (SRA) 2.6. The UNDAF evaluation has included a review of the outcome indicators relevant to SRA 2.6.⁵⁹

51. **Evaluation questions:** A few comments regarding the questions and the ability the team had to respond to these:

- a. EQ 2.2 What are the major factors that influenced progress in achievement or non-achievement of the outcomes/objectives of the intervention? This question has been responded to in relation to the UNDAF SRA 2.6. In addition, respondents were systematically asked to provide insights into the outcomes they have witnessed, perceive, or expect to emerge from specific activities conducted by the Joint Programme. This data has also been included in the report where it was found to be relevant.
- b. EQ 3.2 Were the activities cost-efficient? Was the programme implemented in the most efficient way compared to alternatives? Were the project strategies efficient in terms of financial and human

⁵⁹ UNDAF Kenya. 2022. *Final UNDAF Kenya Evaluation Report 2018-2022 January 2022*.

resource inputs as compared to outputs? EQ 3.4 Was the Joint Programme intervention more efficient in comparison to what could have been done through a single agency intervention? And EQ 3.5 To what extent did the Joint Programme contribute to enhancing United Nations Country Team (UNCT) coherence and UNCT efficiency (reducing transaction costs)? Reflecting the scope, focus and limited timeframe of the Joint Programme, it was agreed with PUNO during inception that cost-effectiveness would be addressed at a broad level focusing on elements of E.Q. 3.4 and 3.5, specifically on timeliness and reduced duplication only and that EQ 3.2 would not be addressed individually (see Annexes 4. Evaluation Matrix).

- c. EQ 2.4 To what extent did the program target persons with disabilities? It is worth noting that this question, includes aspects of both relevance and effectiveness. In the ToR, the question is raised under effectiveness, therefore, the ET has answered it there. Treating it in this way has served to preserve alignment with the order of the evaluation questions (see Table 5).

1.4.3. Methodological approach

52. This evaluation has been anchored on the following principal approaches, Utilization Focused Evaluation (UFE) and Respondent Driven Analysis Approach (RDA), which is anchored on Theory Based Evaluation (TBE). These approaches and their role and purpose during the evaluation are presented below:

53. First, UFE, was used to ensure clear ownership and increased utility of the evaluation by the commissioners, and expected end users, of the assignment. UFE can be an extensive process⁶⁰ that starts with the development of the ToR and extends until dissemination of the products emerging from the evaluation. For this assignment, the ET has focused on ensuring discussion and inclusion of key stakeholders during inception, data collection and analysis processes, including a presentation of preliminary findings, conclusions, and recommendations, by holding evaluation phase relevant discussions with WFP and other PUNO members throughout the evaluation process. These have included discussions during inception which focused on targeting of respondents generally; the inclusion of Kenyan population members benefiting or standing to benefit from pilot activities such as the UCB; evaluation questions, and specifically costs-efficiency; as well as key terms including the meaning and usage of the words such as “catalytic” and “foundational.” Towards the end of the data analysis process, PUNO members were engaged in a discussion on main results and on their implications for the future, including what type of recommendations could be meaningful and realistic. Lastly, the comments received to this report, while in draft format, have been integrated into the final document.

54. Second, RDA, in a modified format has been used to discuss early findings with stakeholders and secure a common collective understanding of their interpretation. This process was integrated at two levels: first, during the interview process itself, where particular emphasis was placed on interpretation of information provided. This means that the interviewer focused on a) securing a response to the evaluation question; and b) exploring the interpretation of the response with the respondent his/herself. Second, PUNO members were invited to a meeting with the ET which focused on interpretation of findings. The ET provided very broad results and requested feedback/explanatory interpretation by participants.

55. **Gender and human rights considerations:** This evaluation targeted respondents based on their knowledge base and not characteristics, therefore while gender was recorded, it was not a respondent identification determining factor. However, how a gender and a human rights-based approach has been integrated into the Joint Programme was examined through document review and discussed during interviews. Specifically, a focus on the degree to which gender and inclusion were considered during different activities and phases of the Joint Programme, and the implications of these considerations was explored. The evaluation assessed the various approaches through which the Joint Programme paid attention to the provision of disaggregated contextual data, engagement (and participation) of women and PWD groups, and engagement with Government of Kenya in building the capacity levels on gender matters.

1.4.4. Data collection and analysis methods

56. Data collection and analysis were guided by the evaluation questions listed in the ToR, and an evaluation matrix developed during the Inception period. See Annexes 4. Evaluation Matrix.

⁶⁰ See Quinn-Patton, Michael. 2021. Utilization Focused Evaluation. Fifth Edition. Sage: Saint Paul.

57. More specifically, the following data collection tools were used:

58. **Desk-based research.** The team collected and reviewed data from UN Implementing agencies, the Government of Kenya, partners, and secondary online sources as well as written documentation provided by interviewees. Documentation was systematically analysed and is referenced in the Bibliography. See Annex 12.

59. **Semi-structured interviews (individual or group).** A total of 41 respondents, as part of 25 interviews were interviewed (see Table 6). These interviewees include all relevant respondents, meaning all those who were engaged in the intervention and included all relevant government representatives, who were the beneficiaries of the Joint Programme activities. These interviews were conducted in groups or individually and focused on key questions identified for the relevant respondent category. Questions asked were selected from the master interview guide (see Annex 5) based on expected knowledge or experience. All interviewees were voluntary, and data collected has not been shared with anyone outside the ET. Respondents were given the assurance of anonymity to facilitate candid responses. Efforts were made to ensure that respondents included both men and women and if possible, representing other groups as well, such as PWD.

Box 2: The Joint Programme Beneficiary and data collection

The main beneficiary of the Joint Programme was the government of Kenya. Therefore, although in some instances Kenyan citizens benefited from some of the activities conducted, they are not, for the purposes of this assignment, considered the end-beneficiaries.

Activities which targeted members of the Kenyan population were conducted to explore mechanism of service and types of support that could be used as part of the social protection system.

Given the aforementioned the main target for information were those that had been engaged in Joint Programme activities rather than the limited number of individual Kenyan's who may have directly benefited from model testing.

60. Respondent selection was purposive, and knowledge driven. This means that all respondents were identified because they had a unique viewpoint or experience from having engaged in one or more elements of the Joint Programme. The ET aimed to speak with all types of actors who have been directly engaged in the Joint Programme. That includes management/representatives of UN agencies, representatives from relevant Government agencies at national level, county Government officials from Wajir, Embu, Kajiado and Kisumu, representatives from partner organisations, as well as subject area experts from NGOs familiar with the population that individual activities were targeting. Table 6 presents respondents interviewed across respondent categories.

Table 6 Stakeholder distribution per category

Stakeholder Category	No. of Respondent(s) Interviewed
Resident Coordinator's Office/SDG Partnership Platform	2
Joint Programme UN Implementing Agencies	10
Select Government Partners (National Level)	12
Select Government Partners (County Level)	7
Non-state actors	7
Subject area experts	3
Total	41

61. **Databases confirmation:** Databases which were improved with the support of the Joint Programme were accessed to assess/verify the existence of additional functionality which is attributed to the Joint Programme. Where documentation or interviewees mention that an additional function was added to a particular database, the existence of this addition was visually verified.

62. **Financial data** was reviewed, and results included in this report to provide an overview of what resources were made available to the programme and how these were spent.

63. **Quantitative data:** The ET examined available data on Kenyan population reached through Joint Programme Activities (e.g., pilot studies), and coverage of studies conducted to assess their reliability as foundational documents/pilots.

64. **Theory of change:** The ET reviewed the existing Theory of Change (see Figure 3) and based on the findings from the evaluation produced a Theory in Use (TiU) (See Annex 9).

1.4.5. Risks, assumptions, and limitations

65. **Bias from the evidence base:** The evaluation has relied on staff from Government of Kenya representatives, UN and partners other than Government. In addition, the team has sourced data from implementers receiving SDG Fund funding. The heavy reliance on people who either come from UN or have depended on its funding provide for potential bias in the dataset. To mitigate this, the team has sought to ensure that its findings are complemented by desk evidence and other respondents, where possible. See Table 6.

66. **Evaluation questions:** The evaluability assessment identified how a number of questions could be best answered given the nature of the Joint Programme and the role of this evaluation. These explanations are critical in order to accurately frame the findings. See 1.4.2 Evaluability assessment.

67. **Triangulation:** as noted earlier some data cannot be triangulated because the sources of information are very few (e.g., few documents and few people with intimate knowledge of the activity).

1.4.6. Quality Assurance

68. The Quality Assurance process includes both an internal (within Tana) and an external (the client) QA process.

69. Quality has been assured by having a clear organization and distribution of roles and responsibilities among team members as well as with the client and stakeholders. The Team Leader has had the responsibility of ensuring that deliverables and process correspond to the highest quality standards, to submit all deliverables to the appointed Quality Assurance Expert and is required to act on all matters raised by the expert.

70. In addition, two external quality assurers, not part of the core team, were engaged at different stages of the evaluation; the first expert oversaw the whole process and reviewed all outputs, and the second expert reviewed the final draft of the final report. These experts, who are senior evaluators in their fields, have reviewed the draft documents prior to their delivery and provided advice and comments. Their comments have been integrated into the submitted deliverables.

71. WFP has developed a Decentralized Evaluation Quality Assurance System (DEQAS) based on the UNEG norms and standards and good practice of the international evaluation community (the Active Learning Network for Accountability and Performance (ALNAP) and the OECD Development Assistance Committee. (OECD-DAC)). It sets out process maps with in-built steps for quality assurance and templates for evaluation products. It also includes checklists for feedback on quality for each of the evaluation products. DEQAS has been applied to this report.

Evaluation findings

72. The Joint Programme focused on a wide range of activities⁶¹ which have aimed to support the attainment of two specific results, which in turn were to contribute to UNDAF SRA 2.6. The specific activities conducted were introduced in Table 3. In this section, the ET responds to each of the evaluation questions in sequential order.

2.1 Relevance

2.1.1 Evaluation Question 1.1: To what extent is the programme in line with the needs of beneficiaries and partners, including Government, people living with disability, male and female?

Key finding: The Joint Programme was aligned with Government of Kenya's needs as described in their own policy documents, reflected in the UNDAF document and confirmed by respondents. Several activities focused specifically on the needs of PWD in general, both women and men, as well as persons experiencing other forms of vulnerability.

73. Consistently, interviews with Government officials confirms that the areas where the Joint Programme focused on were areas of keen importance for the Government of Kenya, the principal beneficiary of the Joint Programme. This is also supported by the review of policy documents (see EQ 1.2). Clearly the efforts under the Joint Programme were also well aligned with UNDAF and with supporting SRA 2.6 (see Evaluation Questions 1.4 and 2.11)

74. More specifically, the relevance of different activities for different specific groups of Kenyan population is detailed below. A critical point is that all of these activities have aimed to be catalytic. Therefore, the individual achievement during the Joint Programme life cycle is less important than what the activities can achieve in the long term.

75. **Enhanced Single Registry:** Interviewees across categories and organisations agreed that by supporting the enhancement of the Single Registry (an information management system focused on persons experiencing vulnerability), the Joint Programme aimed to ensure that its work was responsive to the needs of the Kenyan population. The Enhanced Single Registry was developed to support the development and strengthening of social protection efforts in Kenya and ensure that social protection programmes can be responsive to the needs of the Kenyan population. The system is still being refined. The enhancement of the Single Registry system included capabilities to disaggregate data by gender and by different types of disabilities. So far, socioeconomic data for vulnerable households from 16 counties has been collected and is now available in the Enhanced Single Registry. This expanded capability enables the Government of Kenya to align its priorities to the needs of the Kenyan population. The disaggregated data has been utilised in Makueni and Vihiga counties to inform emergency drought response and enrolment of vulnerable households into the universal health coverage.⁶² Further, as identified by respondents, integration of the Enhanced Single Registry with the NHIF system is also ongoing, as a result of the support from the Joint Programme. The enhanced data has been shared with NHIF to undertake validation and biometric registration. Linkages between the Enhanced Single Registry and service provider systems is anticipated to reduce on manual reporting processes as coverage of beneficiaries will be accessible in real time.

76. In addition, several feasibility studies conducted with the support of the Joint Programme identified important areas in the social protection sector that needed specific attention. These studies included:

⁶¹ Programme reports (quarterly, bi-annual and annual), feasibility and scoping studies and assessments reports, and interviews with PUNOs.

⁶² Final SP-LNOB 6-month progress update 2022.

77. **Feasibility study for the design of Universal Child Benefit (UCB) in Kenya:**⁶³ This study was commissioned by the Government of Kenya with financial and technical assistance from UNICEF and WFP and conducted in collaboration with CSO partners including Save the Children. The study explored the feasibility of introducing a UCB and Universal Child Disability Benefit (UCDB) into the Social Protection system in Kenya. The study also provided options for how a UCB programme, a cash payment or tax transfer made on a regular basis to all children, independently of their socioeconomic or other characteristics, could be introduced. The study was conducted through a series of consultations and analysis of national datasets, including the 2014 Demographic and Health Survey and the 2015/16 Kenya Integrated Household Budget Survey.

78. The study concluded that coverage of child benefits should include all households. The study demonstrated that while targeting the poorest children only would be cheaper, it would be much less effective than having a UCB which included, but was not solely focused on, the poorest children. It also noted that in order to effectively address the needs of children with disabilities, disability should be a key element of the UCB.⁶⁴ The study presented several implementation alternatives demonstrating the impact a UCB could have by 2030 in relation to inequality, poverty, health, and education.⁶⁵

79. **Community Based Health Insurance (CBHI) in Garissa County feasibility study:**⁶⁶ This study, commissioned by UNICEF, assessed the feasibility of the CBHI pilot in Garissa County, and explored the mainstreaming of NHIF membership among beneficiaries of the NSNP. The study considered aspects such as the overall willingness and ability of community members to contribute to the CBHI and the specific health needs of pregnant and lactating women enrolled in the NSNP. The overarching goal of the study was to assess the degree of support the CBHI enjoys and explore opportunities for how benefit packages could be developed/composed. Stakeholders were mapped as part of the study to ensure that the proposals emerging from the study included all relevant stakeholders. The proposed CBHI design was validated together with the County Government and community representatives, and an implementation plan was developed. The study included limited attention to concerns that may be gender specific.

80. The study concluded that a Universal coverage for Garissa County – entirely or partly through CBHI – was both feasible and financially sustainable, if additional funding was provided for primary healthcare, and social assistance programmes were enhanced simultaneously. Such a scheme would not only support primary health initiatives but also increase equity in access to health care and equity in financing.

81. Furthermore, the scenario modelled in the feasibility study suggested that the CBHI would require additional financial support (Government subsidies - from the NSNP, Linda Mama and HISP), and from development partners and other agencies. The feasibility study also concluded that any effort to expand the pilot to the rest of the country would require careful and slow-paced design to ensure that the architecture of the CBHI scheme does not incorporate institutional contradictions that would make the scheme unfeasible.

82. **Study on extension of social protection coverage to workers in the informal and rural economy sectors in Kenya:**⁶⁷ the FAO and the ILO jointly conducted a study to assess barriers to, and gaps within, the social protection system with the aim of informing the development of concrete policy recommendations that could serve to extend the social protection available to workers who are part of the informal or rural economy sectors. Groups living in situations that increase their vulnerability, and specifically PWD, were targeted to explore how the design and costing of an unemployment insurance could be affected by a disability or specific vulnerability. Aspects such as maternity cash benefits, occupational injuries, diseases and ill health compensation system for PWD were also explored. The study included a social protection gap analysis⁶⁸ to establish the barriers to access social protection schemes faced by PWD and identify the degree to which PWD were excluded from social protection schemes.

⁶³ Feasibility study for the design of a universal child benefit in Kenya, Development Pathways.

⁶⁴ Feasibility study for the design of a universal child benefit in Kenya, Development Pathways.

⁶⁵ Kenya Vision 2030 (<https://vision2030.go.ke/publication/kenya-vision-2030-popular-version/>).

⁶⁶ Feasibility study for the introduction of a CBHI in Garissa County, Fadhili Marwa.

⁶⁷ Study on extension of social protection coverage to workers in the informal and rural economy in Kenya, FAO & ILO.

⁶⁸ Social Security Gap analysis in Kenya, 2021, COTU.

83. The study found that 31 percent of informal sector workers were enrolled as contributors to the NHIF, and 14 percent were enrolled in the NSSF system. The key impediment to enrolment was reported to be lack of awareness of the systems as well as sufficient income (income surplus) to cover the contribution costs.

84. **Maternity benefit feasibility study:**⁶⁹ The NHIF and ILO commissioned a study to explore the feasibility of introducing a maternity cash benefit into the National Hospital Insurance Fund in Kenya. The study included the design of new maternity benefits based on an assessment of the institutional capacity to deliver the proposed new benefits, the financial impact of the introduction of the new benefit would have, and the findings from a forum on maternity protection which included Government representatives, employees and employer representatives, including those in the informal and rural economy, as well as civil society.

85. The study confirmed that maternity leave was not accessed equally by different workers, the income level of the person entitled to the leave was a critical factor determining whether or not leave was taken. Four options for financing maternity leave benefits were identified by the study:

- a. Employment-based social insurance or social security (where the funding comes from a co-contribution from the employer and the employee and may or may not include a Government subsidy).
- b. Employer liability (the employer pays all maternity leave obligations).
- c. A mixed system (combination of the two methods), and
- d. A non-contributory social assistance programme, through Government funds.

86. Some of these activities focused more exclusively on one gender than another, while others facilitated gender disaggregation. How gender, and the needs/experiences of men and women more broadly, are addressed under EQ 1.5.

2.1.2 Evaluation Question 1.2: How relevant was the Joint Programme to priorities/policies at the national level and to the needs of the main vulnerable groups?

Key finding: The support provided by the Joint Programme is relevant to key Government of Kenya policy priorities where vulnerable groups, such as PWD, Children, and persons working in the informal sector are specifically highlighted as warranting particular attention.

87. The Vision 2030,⁷⁰ Medium Term Plan (MTP) III⁷¹ and Big 4 Agenda⁷² identified the protection of people who are living in the most vulnerable circumstances as a key priority. Specifically:

- a. PWD require access to health, nutrition and may also need the support of a care provider. Their ability to secure this type of support may be hampered by economic resources, and is, according to respondents, made more difficult by stigma associated with disabilities.
- b. Child nutrition, access to health and education have also been highlighted as key priorities for the Government.
- c. Informal workers also face challenges accessing health care and social security at the time of their retirement.

88. These groups, as detailed in EQ 1.1. were at the core of the Joint Programme's efforts. Moreover, the support provided by the Joint Programme, specifically to the Enhanced Single Registry, may serve to identify additional vulnerable groups in future. Further, the Joint Programme aimed to capture the needs of refugees

⁶⁹ Introduction of a maternity cash benefit, ILO & NHIF.

⁷⁰ Kenya Vision 2030 (<https://vision2030.go.ke/publication/kenya-vision-2030-popular-version/>)

⁷¹ The Medium-Term Plan III 2018-2022 (<https://vision2030.go.ke/publication/third-medium-term-plan-2018-2022/>)

⁷² The Big 4 Agenda (https://monitoring.planning.go.ke/wp-content/uploads/2020/10/Big-Four-Agenda-Report-2018_19.pdf)

as an additional vulnerable group which was explored in the assessments aiming to capture the extension of social protection coverage to informal workers and the assessment of the NSSF Haba Haba scheme.⁷³ The scope of the Joint Programme, during this phase, did not allow for a nation-wide assessment that could permit the identification of additional vulnerable groups, for example, by exploring the experiences of young mothers, sexual minorities, etc.

2.1.3. Evaluation Question 1.3: How relevant was the jointness in programme design, implementation, and management for addressing the country's development priorities and challenges?

Key finding: The Joint Programme facilitated an opportunity for different actors to come together and experience/better understand the role that different entities play, and work towards addressing the broad range of issues and challenges that are covered by social protection initiatives. This process was valuable to Joint Programme members generally and specifically to the Government of Kenya. The benefit of working together extended from the conduct of activities where single issues were addressed in a multifaceted way, to the sharing of information which served to broaden the way different actors understood different social protection challenges.

89. Respondents highlighted that the Joint Programme brought together four UN agencies with unique experiences, capacities, and expertise; which enabled it to capitalise on collective knowledge and respond to social protection needs in a more comprehensive way. The programme was managed by WFP but undertaken individually or jointly by different agencies depending on their core competencies. The Joint Programme aimed to capitalise on the collective experience of different agencies and provide a set of products that covered a wider range of social protection activities which would have otherwise not been possible.

90. Different agencies worked together on specific products, or activities which enabled them to explore specific issues from multiple angles, which individually would not have been feasible. In sum, together, agencies part of PUNO could address a wide range of issues in a multifaceted way. All issues targeted were, and are, of relevance to the Government of Kenya.

91. Collaboration among PUNOs and the Government in activities included:

a. **Specific activities where more than one PUNO agency contributed to include**⁷⁴:

- i. The UCB pilot programme, where UNICEF, WFP and ILO co-funded different components and provided technical assistance. The three agencies formed the technical working group for this activity.
- ii. In the assessment of social protection coverage for rural and informal workers which was co-funded by FAO and ILO with participation from WFP and UNICEF.
- iii. In the midline impact evaluation of the 70+ cash transfer programme where WFP took lead and the other four agencies, WFP, UNICEF, FAO and ILO, provided technical assistance, and formed part of the technical working group.
- iv. Work on the enhancement of the Enhanced Single Registry, which was led by WFP, but received inputs from the other PUNOs.
- v. Institutionalisation of social protection trainings within the Kenya School of Government, which had participation from WFP, UNICEF and ILO.

⁷³ Ngigi, S. 2022. *Report on the assessment of the National Social Security Fund's (NSSF) Haba Product's Design and Possibilities for Inclusion of Refugees and Migrant Informal Sector Workers in Kenya*. International Labour Organisation.

⁷⁴ An assessment of activity-based reports

vi. In the linkages and referral mechanisms assessment which was led by UNICEF, included other agencies, WFP, FAO and ILO, as part of the technical implementation committee.

- b. **Cross sectoral engagement through monthly coordination meetings:** Multiple respondents across categories highlighted that the programme meetings with Government and civil society, which occurred monthly, were very beneficial. According to interview respondents, such meetings provided an opportunity to secure an improved understanding of the wide scope of activities and initiatives that encompass social protection and of how different activities can relate to each other. It was also a platform to disseminate reports and provide activity updates. This is regarded as important knowledge in the pursuit of addressing development objectives in a comprehensive way. These meetings also facilitated more specific engagement with efforts such as the UN UNDAF Child and Social Protection Coordination Meeting.⁷⁵
- c. **Joint technical working groups:** as identified earlier, the technical working groups were formed within the framework of implementation. These technical working groups included representatives from the Government of Kenya's relevant ministries, agencies and departments, participating PUNOs, civil society and representatives from trade unions. Each actor played an instrumental role in monitoring progress of activities, the review of deliverables such as ToRs for specific activities, inception and draft reports and monitoring the engagement with sub-contracted experts.

92. The UNDAF provided an overarching strategic framework, through which specific activities within the Joint Programme were delivered. Analysis of this has been captured in several sections (see 1.4 and EQ 2.11).

2.1.4. Evaluation Question 1.4: To what extent are the activities aligned with partner UN agency and donor policies and priorities?

Key finding: Ability to meet donor priorities is implicit given the desire of donors to fund the programme. Alignment between the Joint Programme and UN agencies is explicit and clear as the programme is well nested within UNDAF, which is the framework within which all UN agencies operate.

93. A review of the activities conducted under the Joint Programme (see section 1.3) were well nested (aligned with) the priorities and policies pursued by the different UN agencies, and indeed UNDAF. Likewise, these were well supported within donor objectives.

94. UNDAF, which is codeveloped with the Government, determines the UN priorities at the country level (see EQ 2.11), and by extension agency level. Additionally, each agency has their own plan for the country that includes further detail.

95. The ILO has focused attention on social protection in Kenya for considerable time preceding the Joint Programme. Indeed, their efforts on the subject are documented back to 2010 with the paper published in that year focusing on the subject.⁷⁶ UNICEF also identified social protection as a key area of support in its 2017-2022 Country Strategy for Kenya. Specifically, UNICEF's focus was on enrolment and attendance to schools. Notably, the work done through the Joint Programme also supports this aim.⁷⁷ WFP's 2018-2023 country strategic plan for Kenya also identifies social protection, and specifically disaster preparedness, and the strengthening of a Government social protection system as key priorities.⁷⁸ FAO too identified the strengthening of social protection specifically in relation to preparedness as a key priority.⁷⁹

96. Donors have been less involved in the Joint Programme itself, but their support for the programme suggests a clear alignment with the programmes' objectives. More specifically, the Sectoral Group of Social

⁷⁵ An assessment of minutes for the UNDAF Child and Social Protection Coordination Meetings

⁷⁶ ILO. 2010. Kenya: Developing a National Social Protection Policy.

⁷⁷ UNICEF. 2017-2022. Kenya Country Strategic Plan.

⁷⁸ WFP. 2018-2023. Country Strategic Plan.

⁷⁹ See: www.fao.org/kenya .

Protection (SGSP) comprises of bilateral and multilateral donors, and development partners.⁸⁰ An assessment of Joint Programme documents highlights that several engagements with donors were held: The first activity which included donors and provided them with visibility was held on 15 July 2020 to launch the Joint Programme.⁸¹ Representatives of the Joint Programme and other relevant institutions were in attendance. These included the Ministry of Labour, PUNOs, RCO, private sector, COTU-K, FKE, the World Bank and donors such as the EU, Finland, UK, USA and Sweden. The second like event was held in February 2021. Its aim was to officially introduce the SGSP to the Cabinet Secretary of the Ministry of Labour and Social Protection. The third and most recent event was held with the Ministry of Public Service, Gender, Senior Citizens Affairs and Special Programmes in December 2021. An additional donor event to update stakeholders on the milestones and achievements of the Joint Programme took place on 25th January 2022.⁸² Representatives from the donor community, the RCO, PUNOs, international NGOs, academia and the Cabinet Secretary for the Ministry of Public Service, Gender, Senior Citizens Affairs and Special Programmes were among the participants.

2.1.5. Evaluation Question 1.5: To what extent is the intervention based on a sound gender analysis? To what extent is the design and implementation of the intervention gender-sensitive?

Key finding: Different UN agencies integrated aspects of gender-sensitivity into the implementation of individual Joint Programme activities; collected sex disaggregated data and contextual information on the needs of women and girls and focused on how gender stereotypes materialise. A comprehensive gender analysis of the social protection sector did not inform the Joint Programme's gender mainstreaming strategy and gender targeted actions. However, the efforts conducted under the Joint Programme contributed to an improved understanding of how gender dynamics interact with social protection needs, and influence access to social protection services. These efforts contributed to the development of a gender responsive social protection system.

97. Within the UN system, mainstreaming of a gender perspective into all policies and programmes is considered fundamental for all UN activities.⁸³ The concept of gender mainstreaming is defined as "... a strategy for making women's, as well as men's concerns and experiences an integral dimension of the design, implementation, monitoring and evaluation of policies and programmes in all political, economic and societal spheres so that women and men benefit equally, and inequality is not perpetuated. The ultimate goal is to achieve gender equality."⁸⁴ This is achieved by ensuring that all policies, strategies, regulations, methodologies and outcomes are gender responsive.⁸⁵

98. At a strategic level, the Joint Programme strived to integrate gender into its programming by acknowledging that gender concerns are deeply rooted in the social protection sector. The Joint Programme made a call for action to integrate gender equality into social protection, by addressing critical barriers to

⁸⁰ SP LNOB Annual Report 2021

⁸¹ JP Quarterly Check period Q3/2020; Kenya Joint UN SDG Fund. 2022. *Summary Report JP SDG Donor Engagement Event 25 January 2022*

⁸² Minutes of the SDG Fund Joint Programme Progress Meeting held in Nov and Dec 2021, Kenya Joint UN SDG Fund. 2022. *Summary Report JP SDG Donor Engagement Event 25 January 2022*

⁸³ UN ECOSOC. 1997. Agreed Conclusions. 1.B. Principles for mainstreaming a gender perspective in the United Nations system-

⁸⁴ UN ECOSOC. 1997. Agreed Conclusions. 1.B. Principles for mainstreaming a gender perspective in the United Nations system.

⁸⁵ Gender-responsive is defined as 'Gender-responsive describes processes or outcomes that explicitly take gender equality into account, for example through research, data collection, analyses, consultation and other processes. Gender responsiveness implies consistent and systematic attention to gender-based differences and inequalities between women and men, with a view to addressing systemic and structural constraints to gender equality, as well as underlying causes of gender inequality, discrimination, and exclusion' - UN Women. 2019. *Handbook on gender mainstreaming for gender equality results*.

accessing social protection in Kenya.⁸⁶ By doing this, the Joint Programme aimed to contribute to the development of a gender responsive universal social protection system.

99. Moreover, a gender marker matrix was developed to guide the Joint Programme’s efforts to achieve gender results. The Joint Programme reports that this approach allowed programme management to mainstream gender across the programme.⁸⁷ Within this matrix, three main output areas are identified where gender could be integrated into the work of the Joint Programme.⁸⁸ These are further sub-divided into six indicators. The evaluation used these gender markers to assess how the Joint Programme pursued gender integration⁸⁹ in its activities and the degree to which the Programme was able to realise gender responsiveness or gender sensitivity.⁹⁰

100. From an overall standpoint, although the Joint Programme did not materialise a global/overarching gender analysis of the social protection sector, it has included a number of approaches which provide valuable contributions to an improved understanding of gender dynamics and how these interact with social protection services. This has enabled the Joint Programme to be responsive to gendered needs, and at a minimum provide disaggregated evidence on the enhancement of systems and policies.

101. Specifically, the findings from the assessment of activities as these relate to the gender marker are listed below.

Table 7 Gender integration approaches within the Joint Programme

Indicator	Approaches to gender integration
<p>1.1 Context analysis integrating gender analysis</p> <p><i>at a minimum level, some gender issues, including sex disaggregated data are integrated in the context analysis, including efforts to strengthen Government of Kenya’s capacity on gender.</i></p>	<p>1.1.1 Overarching gender analysis - a ‘Gender assessment of existing social protection programmes to inform a gender strategy for social protection in Kenya’ was originally included in the workplan. The study was initially commissioned during the first year of implementation.⁹¹ However, respondents confirmed that, several failed attempts to recruit qualified gender specialist(s) to conduct the study led to the non-implementation of this activity. Despite this experience, the activity is still a priority for the PUNOs, and plans are being outlined to ensure its implementation through other programmes.</p> <p>1.1.2 The reporting of sex-disaggregated data, and context analysis highlighting the conditions of women, men, and girls, was incorporated the following ways:</p> <ol style="list-style-type: none"> i. Midline impact evaluation of the 70+ cash transfer programme (Inua Jamii)⁹² - the evaluation aimed to understand the impact of the social pension programme on older women and men as recipients, since its introduction. Sex – disaggregated beneficiary data was collected on 13 indicators including: number of beneficiaries; education levels, sources of income, frequency of meals and quantity of food, self-reported happiness and life satisfaction, participation in household financial decisions, participation in community groups, self-reported health perceptions including monthly health expenditures, type of disabilities and incidence of severity, frequency of violent disagreements, perceptions of value for older person and accessibility of local authorities. The report presents a brief discussion on the gender dynamics within these indicators, including varied experiences and challenges for the older women and men accessing the social pension, as well as the gendered impact for adults and children co-residing with the study targets. These specific discussions focus on the following five themes: i) material wellbeing and economic security ii) subjective wellbeing, iii) care and support, iv) health and iv) perceptions of citizenship and social contract.

⁸⁶ Kenya Joint UN SDG Fund (ed.) n.d Joint Programme for Social Protection Revised final.

⁸⁷ Kenya Joint UN SDG Fund. n.d. Joint SDG Fund Kenya Programme for Social Protection - Progress Update

⁸⁸ Kenya Joint UN SDG Fund (ed.) n.d Joint Programme for Social Protection Revised final. (Annex 4.)

⁸⁹ The term gender integration has been used in the context of gender mainstreaming.

⁹⁰ The term gender sensitive is used interchangeably with gender responsive, as part of the gender mainstreaming or gender integration mandate.

⁹¹ Kenya Joint UN SDG Fund. 2020. Joint Programme 2020 Annual Progress Report - SP LNOB KEN 919 - Final (003).

⁹² Ministry of Public Service, Gender, Senior Citizens and Special Programmes (2021) Midline Impact Evaluation of Kenya’s Inua Jamii 70 Years and Above Cash Transfer Programme.

	<p>II. The UCB pilot programme - Baseline Survey Report for the UCB pilot programme⁹³ the study collected sex-disaggregated data on several indicators across the three study counties including: head of household, caregiver's profile (including details on marital status, level of education, source of livelihood and pregnancy or lactating status), details of the youngest child and levels of malnutrition. Further, through FGDs with female caregivers, the study considered the needs and concerns based on traditional gender perceptions of traditional care giving roles, often attributed to the female caregivers. It captured data on infant and young child feeding practices, drivers of child malnutrition, awareness of nutrition knowledge and practices and sources of livelihoods and income. As such, it was gender sensitive, but did not address strategic interests of women or challenge gender norms.</p> <p>III. Study on extension of social protection coverage to workers in the informal and rural economy sectors in Kenya⁹⁴ - Sex disaggregated data was collected on respondent distribution, type of employment, risks to main income or livelihood sources, and registration with NHIF and NSSF. Some gender dimensions are briefly discussed in the report including: the impact of COVID-19 pandemic for workers, and specifically women. A complementary report on Strategy, extension of social protection coverage to workers in the informal and rural economy in Kenya⁹⁵ highlights additional sex-disaggregated data related to income sufficiency, savings, informal social safety nets, registration and contributions to NHIF and NSSF. The different dynamics on these indicators are explored within this document. This situational analysis forms the background in which the strategic recommendations related to extending coverage for maternity benefits in case of income loss, are outlined.</p> <p>IV. Study on Optimizing Cash Plus Interventions to Improve Household Resilience and Food Security⁹⁶ sought to provide sex-disaggregated data on participation in decision-making, including extent of decision-making in agriculture activity, access to information, consumption and spending on agriculture income. The dynamics affecting the resilience of female-headed households have also been explored in this study. Among the study participants, women formed the majority of the sample involved.</p>
<p>1.2 Gender equality is mainstreamed in proposed outputs</p> <p><i>at a minimum level, gender equality and the empowerment of women is visibly mainstreamed across some output areas in line with SDG priorities.</i></p>	<p>1.2.1 Technical assistance - The Joint Programme provided technical assistance to the Government of Kenya to support the review and validation of the National Social Protection Policy, which outlines provisions for cross-cutting gender mainstreaming work on social protection in relation to health, agriculture, labour and devolution.⁹⁷</p> <p>1.2.2 Empowerment of women living with and affected by HIV⁹⁸ - the project reached 202 women living with and/or affected by HIV, in three target counties (Nairobi 140, Homabay 30 and Kilifi 30). Women Fighting Aids in Kenya (WOFAK)⁹⁹ was the lead implementer. The project target group, which included young women, received training sessions to improve their knowledge and skills on income generating activities, utilising the GET Ahead for Women in Enterprise Training Package and Resource Kit. Start-up kits comprising of revolving funds of KShs 80,000 were offered to 8 women groups in the target counties (Nairobi 6, Homabay 1, and Kilifi 1). More on this activity is described in section 2.2.3. Evaluation Question 2.3: To what extent did the intervention deliver results for the target groups?</p> <p>1.2.3 Maternity Benefit Feasibility Study Draft Report: Introduction of a Maternity Cash Benefit¹⁰⁰ - Is an activity that solely targeted pregnant women, and featured</p>

⁹³ Ministry of Public Service, Gender, Senior Citizen Affairs and Special Programmes. 2022. Universal Child Benefit (UCB) pilot programme on integrating cash transfer, nutrition and parenting interventions in Kenya. Baseline Survey Report.

⁹⁴ Study on extension of social protection coverage to workers in the informal and rural economy in Kenya, FAO & ILO.

⁹⁵ Bergthaller, M. 2022. Strategy: extension of social protection coverage to workers in the informal and rural economy in Kenya Second draft (03/10/22). International Labour Organisation

⁹⁶ KIPPRA. 2022. *Optimizing Cash Plus Interventions to Improve Household Resilience and Food Security: Evidence from Selected Counties in Kenya First Draft Report*. Food and Agriculture Organisation.

⁹⁷ Kenya Joint UN SDG Fund (ed.), 2022. LNOB portfolio questionnaire final

⁹⁸ WOFAK, n.d. Empowerment of Women Living With and affected by HIV as a Mechanism for Building back better from the adverse effects of the COVID-19 Pandemic.

⁹⁹ WOFAK is a national non-Governmental organisation with a focus on empowering, and providing care and support to women, youth and children infected and affected by HIV and AIDS.

¹⁰⁰ ILO and NHIF. n.d. *Introduction of a Maternity Cash Benefit Preliminary Report – Draft*.

	<p>options to identify and include sub-categories of pregnant women such as, working women and non-working women. The specific areas explored included barriers that exclude workers in the informal economy from maternity income protection, how to extend maternity cash benefits to uncovered workers to improve their economic conditions and contribution levels for the maternal income protection in the formalization of the informal economy. The assessment highlights that policy recommendations will need to incorporate issues affecting women in the formal and informal economy, as a fundamental aspect of maternity protection.</p> <p>1.2.4 The Universal Child Benefit System Requirements Specification report¹⁰¹ and the Universal Child Benefit Pilot Operations Manual¹⁰² provides guidance on how the enhancement of the Consolidated Cash Transfer Management Information System¹⁰³ could support collection of sex disaggregated data. The aforementioned documents recommend that the current modules on the system be customised to enable the generation of key performance indicators. Therefore, it is currently foreseen that the modules will include sex-disaggregated data on geo-locations, the number of registered caregivers and children, number of enrolled beneficiary families, credit profiles of beneficiaries, and beneficiaries with arrears or back payments. In addition, the Universal Child Benefits (UCB) beneficiary registration tool for use during at-home registration of children under 36 months old enables the collection of data on sex of both the child and the parent/caregiver. Moreover, training on gender and disability for service providers has been identified as a necessary strategy to ensure that the dignity of target persons is maintained.</p>
<p>1.3 Programme output indicators measure changes on gender equality</p> <p><i>at a minimum level, a number of indicators at output level are gender responsive</i></p>	<p>1.3.1 Number of additional women and men accessing social protection</p> <p>Joint Programme documents note that 8,204 persons indirectly benefited from social protection as a result from the support provided by the Joint Programme through the UCB. Among these, 4,025 female caregivers were reached through the piloted UCB programme.</p>
<p>2.1 PUNO collaborates and engages with Government of Kenya on gender equality and the empowerment of women</p> <p><i>at a minimum level, activities will include specific efforts to strengthen gender equality and improve the responsiveness of policies and programmes to gender.</i></p>	<p>2.1.1 Stakeholder consultations with Government of Kenya</p> <ol style="list-style-type: none"> I. Inception meetings for the Joint Programme¹⁰⁴ – PUNOs held several joint meetings with Government officials from the State Department of Social Protection, including the National Social Protection Secretariat. Reflections on gender issues and ways to improve relative coherence among the PUNOs were included as part of the agenda. II. Advocacy for the UCB¹⁰⁵ – several workshops were held on the feasibility study of the UCB. A dialogue session with the National Treasury, led by the Ministry and State Department of Social Protection was also conducted. During these engagements, attention to gender equality and the empowerment of women was recognised as a key element of efforts focused on enhancing human capital development within the UCB. Additionally, respondents highlighted that gender officials, at county level, were included in various stakeholder advocacy engagements as part of the UCB.

¹⁰¹ Ministry of Public Service, Gender, Senior Citizens Affairs, and Special Programmes. 2022. Universal Child Benefit System Requirements Specification. World Food Programme.

¹⁰² Ministry of Public Service, Gender, Senior Citizens Affairs, and Special Programmes. 2022. Universal Child Benefit Pilot Operations Manual. UNICEF, WFP, Save the Children, Embassy of Sweden and Joint SDG Fund.

¹⁰³ A consolidated cash transfer system, under the Inua Jamii Cash Transfer Programme

¹⁰⁴ Minutes from: Action items from kick-off meeting - Joint SDG Fund – Minutes for 17 Jan 2020; Inception Workshop - Presentation January 2020

¹⁰⁵ Minutes from: Feasibility study on design for the Design of a UCB for Kenya – Workshop held on 26 April 2022; Notes from online meeting on Universal Child Benefit in Kenya – April 22, 2020, and UCB Key points for meeting with National Treasury on 30th July 2021.

<p>2.2 PUNO collaborates and engages with women's/gender equality CSOs</p> <p><i>at a minimum level, women's groups and associations are listed in the groups to be engaged by PUNO</i></p>	<p>2.2.1 Stakeholder consultations with women's groups and associations</p> <ul style="list-style-type: none"> i. Study on the extension of social protection coverage to workers in the informal and rural economy in Kenya - during this study three FGDs were conducted with women's self-help groups across the target areas. ii. Wajir County disability inclusion programme design¹⁰⁶ - 10 women with disabilities from Griftu, participated in an FGD session. Additional key informant interviews were held with officials from the Ministry of Gender, Senior Citizens and Special Programs in Wajir town, as well as the Wajir County Gender and Social Services Department. iii. ILO collaborated with WOFAK as the lead implementer of the empowerment of women living with and affected by HIV project.
<p>3.1 Program proposes a gender responsive budget</p> <p><i>at a minimum level, activities to strengthen gender capacities and mainstreaming of gender to improve the gender responsiveness of the sector</i></p>	<p>3.1 Capacity – building activities on gender – Elements of gender-related topics were integrated into capacity-building activities such as:</p> <ul style="list-style-type: none"> i. Training of Government officers from the Kenya National Bureau of Statistics on disability data disaggregation which was aligned with the Washington Group on Disability Statistics guidelines.¹⁰⁷ Although this training was not on gender, the training module incorporated some gender elements within the context of disability-focused data collection and management. ii. Awareness sessions on social protection rights, where social workers, community health workers, local Governments and communities were engaged, also included elements of relevance to gender discussions.¹⁰⁸ Respondents confirmed that sensitization sessions have been held on topics such as nutrition, literacy, child feeding and parenting practices, child protection and disability inclusion. The Baby Friendly Community Initiative training has been introduced in the roll-out of the UCB, which focuses on training Mother to Mother Support Groups. iii. Data from respondents highlighted that during data collection exercises, enumerators were trained on ensuring data collection incorporated a gender lens. This lens was understood as collecting sex disaggregated data.

2.2. EFFECTIVENESS

2.2.1. Evaluation Question 2.1: To what extent did the Joint Programme contribute to achieving its development objectives, especially around the 3 transformative results?

Key finding: The Joint Programme pursued three clear transformative results and conducted activities which provide a solid foundation for their attainment. The degree to which Joint Programme activities have already generated transformative results was debated by different respondents, but all agreed that the Joint Programme has either achieved transformative results or has the potential to do so in future. All agreed that the work conducted by the Joint Programme has established solid foundations for future work to be continued.

102. The Joint Programme pursued three specific transformative results: a) strengthening the legislative and policy frameworks; b) strengthening systems for delivery of social protection; c) enhanced coordination and intersectoral linkages.

103. **Strengthening the legislative and policy frameworks.** This transformative objective was pursued through the following activities:

¹⁰⁶ Mworira, n.d. *Wajir County Disability Inclusion Programme Design Draft*.

¹⁰⁷ Kenya Joint UN SDG Fund. 2021. Annual Progress Report 2021 - SP LNOB Kenya JP final Submitted

¹⁰⁸ Kenya Joint UN SDG Fund (ed.), 2022. LNOB portfolio questionnaire final

- a. Providing technical support to develop the Wajir County Persons with Severe Disability Act.¹⁰⁹
- b. Review of the National Social Protection Policy. It is worth noting this policy has not been adopted yet.
- c. Advocating for the inclusion of informal sector workers into the health and social security programmes through conduct of a study.
- d. Development of a strategy focusing on extension of social protection coverage to the informal economy.
- e. Feasibility and cost-benefit analysis for the UCB, which informed the design of the UCB and subsequent milestones such as the baseline survey and the Fill the Nutrient Gap - Cost of the diet assessment whose findings will inform the long term UCB.
- f. Support to the midline impact evaluation of the 70+ cash transfer programme (Inua Jamii).

104. Strengthening systems for delivery of social protection. This transformative objective was pursued through the following activities:

- a. Support provided to the review of the delivery system infrastructure and enhancement plan to accommodate universal programmes.
- b. Contributing to the development of the Enhanced Single Registry which enables the collection and recording of data on households which experience vulnerability.
- c. In collaboration with Swedish International Development Cooperation Agency (SIDA), the Joint Programmes facilitated the collection of data on households that experience vulnerability across 16 counties. This data is now available in the Enhanced Single Registry, which will facilitate future efforts to expand the timely support provided during emergencies and food insecurity. This effort has also served to launch a general expansion of data collection. Indeed during 2022/23, the National Social Protection Secretariat aims to collect data from a further 12 counties.
- d. Support to the development of social security benefit options including: 1) the unemployment insurance fund; 2) the maternity cash benefit; 3) the work injury and illness compensation system; and 4) The inclusion of refugees in social security with particular focus on the NSSF Haba Haba product.¹¹⁰

105. Enhanced coordination and intersectoral linkages. This transformative objective was pursued through the following activities:

- a. A study on linkages and referral mechanisms within the social protection system.¹¹¹ The study provided eight recommendations focused on creating linkages: 1) acceleration of integration of the MIS; 2) establishing singular coordination mechanisms for SP; 3) enrolling all NSNP beneficiaries in NHIF; 4) linking the Enhanced Single Registry to the Civil Registration and Vital Statistics; 5) taking advantage of potential social and economic multipliers of stacking social protection benefits and services; 6) investing in workforce capacity, case management mechanism and a regulatory system; 7) strengthening the National Council for Persons with Disabilities (NCPWD) as a central authority for making social protection linkages; 8) and leveraging the UCB pilot to make links to case management, enrolment in the HISP and lifecycle access to social protection.
- b. The support to intersectoral integration through the provision of technical support to enable the design and implementation of complementary services which could be nested within the social protection, agricultural and overall rural development policies.

¹⁰⁹ Persons Living with Disabilities Act 2021

¹¹⁰ An NSSF savings product launched in November 2019 to expand social security coverage to include members in the informal sector. [NSSF Kenya » Growing you for good » Haba.](#)

¹¹¹ Assessment and options for the design of linkages and referral mechanisms within the social protection sector in Kenya, 2022, Development Pathways.

- c. In addition, integrated innovative models on universal social protection/socio-economic interventions have been developed. These models target populations which experience vulnerability, such as people living with disability, including people living with HIV.

106. According to interview respondents across categories, the above activities taken in conjunction have laid the foundation for the development and implementation of more robust policy frameworks, improved systems for delivery of social protection support and a stronger and more coordinated effort to support Kenya's population which is more integrated across sectors. Some Government and PUNO respondents have noted that these results are already transformative since based on their assessment and experience they constitute considerable steps forward. This is also highlighted in Joint Programme reporting.¹¹²

107. Other interview respondents were more reserved in the degree to which they saw changes can be considered transformative already. They felt that the final test on the degree to which the results of the Joint Programme are transformative depends on a) how revised or new legislative frameworks are used; b) the degree to which social protection systems which were enhanced are continued to be implemented; c) and whether the intersectoral linkages established during the Joint Programme are maintained. These respondents consistently agreed that the work conducted by the Joint Programme has been foundational and can lead to considerable transformation in the way social protection is managed and provided to the Kenyan population. These respondents felt that the ability that the activities have to generate further results is predicated on several assumptions. Those most often mentioned by respondents included:

- a. The Government and international community must continue to support Universal Social Protection both politically and financially.
- b. Ministries and departments must assume all their social protection related roles and responsibilities.
- c. Robust civil registration systems are maintained and expanded.
- d. The economy continues to grow alongside development of tax revenues to enable the resourcing of a tax-based social protection system.

2.2.2 Evaluation Question 2.2: What are the major factors that influenced progress in achievement or non-achievement of the outcomes/objectives of the intervention?

Key finding: The Joint Programmes ability to reach expected outputs benefited from strong political will, the Government's leading role within the programme and the engagement of a wide range of actors. The 2-year time frame for the programme, COVID-19 and the UN's own administrative systems proved challenging.

108. Factors that facilitated the implementation of the Joint Programme and the attainment programme objectives included:

- a. **Political will/timeliness:** The political climate in Kenya was very favourable when the Joint Programme started. The Government of Kenya had expressed its commitment to adopting a universal social protection system. This was highlighted in the Vision 2030,¹¹³ MTP III¹¹⁴ and the National Social Protection Policy,¹¹⁵ as well as in the 2010 constitution.¹¹⁶

¹¹² Kenya Joint UN SDG Fund. n.d. *Joint SDG Fund Kenya Programme for Social Protection - Progress Update*

¹¹³ Kenya Vision 2030 (<https://vision2030.go.ke/publication/kenya-vision-2030-popular-version/>)

¹¹⁴ The Medium-Term Plan III 2018-2022 (<https://vision2030.go.ke/publication/third-medium-term-plan-2018-2022/>)

¹¹⁵ Kenya National Social Protection Policy 2011

¹¹⁶ The Kenya Constitution 2010 (<http://www.kenyalaw.org/kl/index.php?id=398>)

- b. **Working with the Government:** The Joint Programme was consistently lauded by all respondents as having provided a good opportunity to bring together Government agencies, foster discussion and learning across actors in the social protection sector. Critically, the Government played a leading role in the Joint Programme activities. All activities conducted were nested within the UNDAF, which in turn had resulted from extensive dialogue with the Government of Kenya. In addition, the implementation of activities was, by and large, done with or alongside Government agencies, which has also served to ensure that the opportunities for sustainability are capitalised upon.
- c. **Working with non-state actors:** The Joint Programme included the participation of the COTU-K and FKE. This inclusion enhanced the opportunities for different parties to advocate for a comprehensive social security benefit; and for their different views to be put on the table alongside each other. In turn, this process of open discussion, according to interview respondents, improved ownership of the programme.

109. It is worth highlighting that a wide range of respondents across categories noted that the above elements are critical in ensuring positive outcomes. This suggests that additional outcomes that may not yet be visible will also benefit from the above-mentioned factors.

110. The Joint Programme was able to conduct the majority of its activities within the specified timeframe (see Table 3 List of implemented activities and corresponding lead agencies). Several factors have, however, impacted the programmes' ability to achieve objectives.

- a. **Programme initial timeframe:** The scope and the expected outcomes of the Joint Programme are considerable given the 2-year time frame for the programme's implementation. Multiple activities conducted are, according to interview respondents across categories, ones that require considerably longer time to achieve. For example: the development, approval and implementation of policies; the conduct of feasibility studies and relevant follow up to secure the findings are used; the conduct of pilot studies and follow up to explore opportunities for their expansion and ensure that no key gaps emerged during an expansion; the capacity development of Government staff and subsequent monitoring to ensure the knowledge is fully used.
- b. **COVID-19:** An already short intervention period (see previous point) was further challenged, according to interview respondents and project documents, by COVID-19. While an effort to mitigate the impact of the pandemic was made through a six month no-cost extension, the pandemic did have an impact on the momentum of the programme and the sequence of activities.¹¹⁷ In addition, the delays means that some activities were initiated late and by extension were finalised just before the closing of the Joint Programme.
- c. **Internal procedures:** Multiple respondents noted that the starting of activities was often slowed down by cumbersome administrative processes within different PUNO agencies. These processes further delayed the start-up of activities (see previous point). For example, the processes to develop, and approve terms of Reference; the processes to select a candidate, as well as contracting procedures.

¹¹⁷ Kenya SP LNOB Joint Programme No Cost Extension Request Note.

2.2.3. Evaluation Question 2.3: To what extent did the intervention deliver results for the target groups?

Key finding: The Joint Programme delivered results to particularly vulnerable groups: PWD, children, women and informal workers (work injury benefit, maternity protection, unemployment benefit). The needs of these groups were addressed through a combination of policy and programmatic efforts that covered a wide range of specific vulnerabilities. Different activities had different levels of coverage ranging from CSO beneficiary level to county and national coverage.

111. The Joint Programme focused on delivering results to four specific groups. These groups included PWD, children, women in vulnerable situations and informal workers (work injury benefit, maternity protection, unemployment benefit). The results delivered to each of these groups and the particularities of said delivery are listed below.

112. **PWD** - This group was supported in the following ways:

- a. Wajir County Social Services department rolled out a program for cash transfer for PwSD. The program was implemented in partnership with WFP. Specific activities included the preparation of a County Disability Bill,¹¹⁸ which served as a legal framework to enable access to Government resources. The bill was enacted into law as the Wajir County Disability Act 2021.
- b. WFP also provided capacity building for the County technical staff on management of social protection issues as well as monitoring and evaluation of program activities.
- c. WFP supported the Wajir County Government to design a Disability Inclusion Program¹¹⁹ that aims to bring together all actors currently working with PWD to ensure a coherent and comprehensive support structure for all PWD in the county.
- d. The Kenya Business Disability Network was established to enhance inclusion of PWDs in decent work as a means to ensure their economic inclusion.¹²⁰
- e. Data on disability was disaggregated in the Enhanced Single Registry.
- f. The Directorate of Occupational Safety and Health Services (DOSHS) was supported to enable the improvement of the work injury and illness compensation system through the introduction of a social insurance-based system.¹²¹ The ILO supported the DOSHS in organising a benchmarking study mission to Tanzania to examine the Tanzanian Workers Compensation Fund experience, with the aim of enhancing learning and information exchange. The mission took place from 1st to 6th August 2022.¹²²
- g. The Joint Programme trained officers from the Kenya National Bureau of Statistics on how to incorporate disability-inclusion into the collection and analysis of statistical data. This training facilitated the Government's roll out of a survey that aimed to determine the type of support needed by PWD and their primary care givers.¹²³

¹¹⁸ Wajir County Persons with Disabilities Act, 2021

¹¹⁹ Draft Wajir County Disability Inclusion Programme [WCDIP] – Programme Design (2022)

¹²⁰ <https://www.internationaldisabilityalliance.org/content/disability-advocates-stress-need-change-ensure-decent-inclusive-work>

¹²¹ Report on design model formulation and legal framework workshops on social work injury insurance scheme held at Tom Mboya Labour College - Kisumu on 17-21 may, 2021 and Machakos university - Machakos on 24-28 may, 2021

¹²² ILO. 2022. Report on ILO support towards improving occupational injury, diseases and ill-health compensation system in Kenya. September 2022.

¹²³ The survey itself was not funded by the Joint Programme.

113. **Children** - This group was supported in the following ways¹²⁴:

- a. The needs assessment and provision of options on how to implement a UCB was an important contribution. Likewise, the inclusion of children with disabilities into the UCB was also important. In addition to the feasibility study, the support also targeted individuals through a pilot. The pilot UCB programme directly benefited children under 3 years of age through a cash-based transfer (CBT) programme. Under the UCB, Kshs. 800 CBT were provided to each child every month. Beneficiary children were also part of a cash-plus programmes which focused on nutrition, provided referrals to disability services where needed and provided child protection counselling to children, from Kisumu, Embu and Kajiado counties, who experience severe vulnerability. The UCB programme also served to support the attainment of other services. For example, the UCB was able to identify the lack of birth certificates and support their attainment, as well as missing the death certificates of the parents of orphan children. The support to attain the latter enabled orphaned children to be linked to the CT-OVC benefit.

114. **Women**-This group was supported in the following ways:

- a. The conduct of a pilot programme targeting women living with and affected by HIV which aimed to empower them economically. According to respondents, the intervention served to enhance dialogue on social protection among key stakeholders including programme implementors. This dialogue led to the identification of barriers to access and advocate for HIV-sensitive social protection support. The data does not delve into if and how particularities within the target group may lead to further forms of vulnerability beyond that which results from their HIV status. For example: age, civil status, mother's vs women without children, economic markers, etc. The intervention also served to develop partnerships with entrepreneurs' associations, social protection systems and financial services providers. Women living with and affected by HIV were provided capacity on business development/income generating activities and business start-up kits.¹²⁵
- b. Introduction of a maternity benefit. Under the Joint Programme, the maternity benefit was implemented through NHIF and as of 2021 the benefit covered 76,071 women in the formal sector and 61,980 in the informal economy. Through the Linda Mama initiative in 2021, 797,282 women working in the informal sector living in Kenyan slums and rural areas received free maternity benefits. The Joint Programme also covered a further 582,772 pregnant women who were not covered by neither the NHIF or Linda Mama.¹²⁶ NHIF, with Joint Programme support, has improved its efforts on advocacy and communication related to access to free maternity care.

115. **Informal workers and the workers who are involved in precarious employment**¹²⁷ -This group was supported in the following ways:

- a. The Joint Programme facilitated the conduct of a study that identified main challenges and needs of this group. Based on the information collected, the Joint Programme was able to increase awareness around the challenges faced by workers in the informal sector, as well as highlight the rights of these individuals as stipulated in labour laws.

Box 3: Persons targeted by interventions

PwSD: 262 persons were targeted. 140 were female and 122 were males. All those targeted lived in Wajir county and received Kshs.4,000 per month per household. The Wajir data is unclear regarding whether all those who qualified were covered.

Children: as part of the UCB 7,400 caregivers and 8100 children under 3 years were provided with support.

Women living with HIV: 200 women (Nairobi 140; Homabay 30; Kilifi 30) were supported through the programme.

¹²⁴ Universal child benefit Baseline report (2022)

¹²⁵ Report on empowerment of women living with and affected by HIV as a mechanism for building back better from the adverse effects of the COVID-19 pandemic in Nairobi, Kilifi & Homa Bay, WOFAK.

¹²⁶ Introduction of a Maternity Cash Benefit, Preliminary Report – Draft, 2021

¹²⁷ Study on extension of social protection coverage to workers in the informal and rural economy in Kenya (2022)

- b. Stipulations in labour laws and the constitution were also disseminated through Joint Programme activities. The programme trained trade union leaders on how to better advocate for universal social protection coverage, with a specific focus on the needs of the informal economy workers.
- c. The programme, through advocacy, supported the development of a policy which could underpin unemployment insurance. A new scheme resulting from this process has now been adopted by NHIF. The financing of this new scheme is currently being reviewed.
- d. The Joint Programme also provided support in the design and costing of an Unemployment Insurance scheme.¹²⁸
- e. ILO and FAO commissioned a study related to 'a strategy on extension of social protection to the Informal Economy' though this strategy not yet adopted.¹²⁹

116. Specific numbers of Kenyan population who benefited directly from the activities conducted are listed in Box 3.

2.2.4 Evaluation Question 2.4: To what extent did the program target persons with disabilities?

Key finding: The Joint Programme targeted persons with disabilities through a number of interventions. Specifically, support for PwSD, and their care providers, Children with disabilities through UCB, women affected by HIV/AIDS, and at a national level the support for the Enhanced Single Registry.

117. At a programmatic level, PWD were specifically targeted through a number of activities. These included:

118. First, support provided to PWD in Wajir. Secondly, although UCB was focused on all children, particular attention was placed on ensuring that children with special needs received targeted support. Lastly, the support provided to Women with HIV/AIDS is also a demonstration of work focused on PWD (see EQ 2.3 and EQ 2.5).

119. In addition to pilots and smaller programmes listed above, the support for the Enhanced Single Registry is also a key example of support for PWD as the function of the registry will enable the identification of persons with disability. This is a critical step in efforts to strengthen the Kenyan Government's ability to provide effective support to all its population.

2.2.5 Evaluation Question 2.5: To what extent did the design and implementation of activities of the joint program supported include disability-related accessibility and non-discrimination requirement?

Key finding: Accessibility and non-discrimination of PWD has been a key element for the support of a number of programmatic activities. In addition, the Joint Programme has also supported policy development and capacity building which has aimed to ensure that PWD have unhindered access to social protection and are not discriminated against.

¹²⁸ Assessment for an unemployment insurance scheme - Design and costing, 2022

¹²⁹ Study on extension of social protection coverage to workers in the informal and rural economy in Kenya, 2022

120. At a programmatic level, disability related accessibility and non-discrimination were issues focused upon in specific activities. These included:

121. **First, the finalisation of the Wajir County Disability Bill.** As part of this activity, several consultations and dialogue sessions were held. These consultations included stakeholders from the Social Protection Secretariat, and Kenya Law Reform Commission, and focused on identifying the legal needs of PWD as related to their rights and privileges within the county. More specifically the consultation explored issues such as the right not to be discriminated against in relation to employment or education, access to information on job placement, and health and mobility challenges.¹³⁰ Approval of this Bill, provided the legal framework for the development of the Disability Inclusion Action Plan which has a strategic focus on, among others, ensuring that food assistance reaches everyone in a non-discriminatory and inclusive manner by facilitating a meaningful participation of persons with disability in programme design and implementation.

122. **Second, the support provided for the development and enhancement of the Enhanced Single Registry.** This support directed considerable attention on the inclusion of disaggregated data on disabilities as a basis to reduce discrimination and accessibility challenges.

123. **Third, within the UCB pilot design,**¹³¹ specific reference to the principles of accessibility, equality and non-discrimination were made in an effort to ensure that 'no one was left behind.' These principles are replicated in the operations manual¹³² which recognises that for delivery of complementary services, the programme needs to adhere to the principles of equal access of services to all. This principle is intended to ensure that all participants are treated with dignity. Special attention is paid to the needs of PWD by enhancing access to the service delivery points and proper documentation of their status. Respondents with knowledge of the programme highlighted by working with the Department of Civil Registration to fast-track the registration of births and attainment of birth certificates, and particularly documents for children living with disabilities, has facilitated access to services. Additionally, it is highlighted in the UCB operations manual that all persons are to be treated with dignity and that special attention should be given to the needs of PWDs in relation to expanding their range of rights in order to improve access to service delivery. Further, the component of disability inclusion in the program ensured children with a disability were referred to, and linked with, the National Council for Persons with Disability (NCPWD) to facilitate their ability to access supplementary services.

124. In addition, the Joint Programme also focused on the development of capacity to support PWD or improve legislative/strategic frameworks. Examples of these efforts include the establishment of the Kenya Business Disability Network, which multiple respondents from different categories highlighted provides a platform for disability inclusion engagement; as well as trainings for staff from the DOSHS and the National Bureau of Statistics on issues related to PWD and how best to address their needs. The degree to which these efforts were gender focused is not fully documented.

¹³⁰ Minutes of: Finalisation of the Wajir County Government Disability Bill, 2020. 16-22nd February workshop.

¹³¹ Ministry of Public Service, Gender, Senior Citizens Affairs, and Special Programmes. 2021. High-level design of a pilot for a universal child benefit for Kenya. World Food Programme and UNICEF.

¹³² Ministry of Public Service, Gender, Senior Citizens Affairs, and Special Programmes. 2022. *Universal Child Benefit Pilot Operations Manual*. UNICEF, WFP, Save the Children, Embassy of Sweden and Joint SDG Fund.

2.2.6. Evaluation Question 2.6: To what extent have persons with disabilities, in particular children and women with disabilities, been consulted through their representative organizations?

Key finding: PWD, and specifically women and caregivers of children with disabilities have been consulted in connection with some activities. In some instances, these groups have been consulted through representatives familiar with the circumstances of PWD, specifically women and children. There is evidence that consultations conducted have had implications for the conduct of social protection activities, particularly in Wajir County.

125. Evidence shows that PWDs were consulted in the following ways:

126. An example of particular prominence because a greater number of PWD were engaged is the rapid assessment study conducted in April 2022.¹³³ This assessment informed design of the Wajir Disability Inclusion programme and included consultation with PWD. The study aimed to address issues of inclusivity and non-discrimination through the use of a purposive sampling strategy that focused on data collection in urban and peri-urban areas. The data shows that efforts were made to capture the views of women with disabilities, and guardians of children with disabilities.

127. The inclusion of PWD occurred alongside wider consultations with local stakeholders including community leaders, elders and representatives of organisations and institutions that provided services or worked in social protection, such as, the WFP office in Wajir County, County and National Government departments, and faith-based organisations. Table 8 Groups consulted in the Wajir County rapid assessment study provides an overview of the categories, and number of representatives per category included in the consultation process.

Table 8 Groups consulted in the Wajir County rapid assessment study¹³⁴

Participants		Number of participants	Location
Focus Group Discussions			
1	Leaders of Organisations for People with Disabilities	14	Wajir Town
2	Men with Different disabilities	9	Wajir Town
3	Parents of Children with Severe Disabilities	21	Habaswein
4	Women with Different disabilities	10	Griftu
Stakeholder workshops			
1	Organisations of Persons with disabilities, County Government of Wajir, National Government, WFP, Due process consulting	19	Wajir Town
2	Organisations of Persons with disabilities, County Government of Wajir, National	26	Habaswein
Key Informant Interviews			
1	Chiefs	4	Habaswein
2	Ward Administration, Assistant County	6	Habaswein
3	Public health officer and Ministry of Agriculture	6	Habaswein

¹³³ County Government of Wajir. 2022. Wajir County Disability Inclusion Programme [WCDIP] – Programme Design

¹³⁴ Mworira, n.d. *Wajir County Disability Inclusion Programme Design Draft*.

4	Town Administrator, Senior Chief and Religious leaders	3	Griftu
5	Director of Bursaries and scholarships	1	Wajir Town
6	Orthopaedic officer and senior medical social workers	2	Wajir Town
7	Special need education teachers	3	Wajir Town
8	County Representative, Ministry of Gender,	1	Wajir Town
9	SUPKEM representative	1	Wajir Town
10	Wajir county gender and social services	3	Wajir Town
11	WFP Wajir field office team	2	Wajir Town

128. From the above engagement the following findings and subsequent responses emerged:

- a. Nomadic dwellers were expected to face challenges accessing the Programme's services. As a response to this, the Wajir County Government agreed to have disability inclusion officers in each sub-county and focal points (disability inclusion representatives) in each ward who can be contacted by persons with disabilities. An effort to develop a volunteer programme to train individuals who can then offer their services for free to persons with disabilities will also be made.
- b. Widespread illiteracy in the County challenges the ability that beneficiaries must complete the necessary paperwork. As a response, the Wajir County Government agreed to make forms available in local languages and hire persons who can speak local language and can be available when needed to translate relevant forms.
- c. Lack of disability cards may hinder PWDs access to the Programme's services if the card is made mandatory: As a response, the Wajir County Government agreed that PWDs who held a medical assessment report and those with visible disabilities can be included into the Programme even if they do not hold a card.
- d. The health care and rehabilitation challenges of persons with disability were also highlighted.¹³⁵ Specifically, difficulty accessing health services due to long distances between their homes and health facilities, costs of health services, as well as lack of resources (funds and staff) to provide effective therapies. The latter was highlighted as a general concern, as well as a concern specific to children. Trepidations regarding the inability to share patient data for care and treatment among hospital facilities were also raised. Specifically, how lack of assured data protection may influence the use of health care services by PWD. The degree to which any of these factors affected one gender more than another was not explored.

129. In addition, the Joint Programme pursued consultations with PWD representatives, through KIIs and FGDs, during the conduct of the following activities:¹³⁶ a) the study to examine extension of social protection coverage included KIIs with officials from the NCPWD,¹³⁷ b) during the assessment of options for the design of linkages and referral mechanisms, officials from the NCPWD and local authorities were consulted,¹³⁸ c) during the UCB pilot programme, and d) the Wajir disability inclusion pilot programme, officials from the NCPWD, local authorities, including county coordinators for PWD were consulted.¹³⁹

¹³⁵ Wajir County Disability Inclusion Programme [WCDIP], Programme Design, 2022.

¹³⁶ LNOB portfolio questionnaire (final results)

¹³⁷ Ministry of Public Service, Gender, Senior Citizens Affair and Special Programmes. 2022. Study on extension of social protection coverage to workers in the informal and rural economy in Kenya Final Report.

¹³⁸ Development Pathways. 2022. Assessment and options for the design of linkages and referral mechanisms within the social protection sector in Kenya: Final Synthesis Report.

¹³⁹ Mworira, n.d. Wajir County Disability Inclusion Programme Design Draft.

2.2.7 Evaluation Question 2.7: To what extent did support to data collection and analysis, registries, and information system feature disability?

Key finding: The Enhanced Single Registry, and specifically the support provided to it through the Joint Programme is an important step forward in the collection, and analysis of data on PWD. The Enhanced Single Registry is now able to process data on disability, including types of disability, a feature which is a direct result of the Joint Programme's intervention.

130. The two instances where disability has been a prominent element in data collection, and analysis include the Wajir Disability Inclusion Programme case study, which focused on providing support to PwSD and in the Enhanced Single Registry, which is now able to register disabilities. The latter is an important example of an information management system which can now, as a result of the work conducted by the Joint Programme, feature disability.
131. The way that the Wajir Disability Inclusion Programme featured disability in data collection and analysis is detailed in EQ 2.6, therefore here the focus is more on the Enhanced Single Registry. The Enhanced Single Registry is particularly important in relation to this question because, according to multiple respondents across categories, it will enable the compilation of information not only of PWD but more specific data on the type of disability. This feature is, according to respondents across categories an important step forward.
132. The Joint Programme partially supported the roll-out of the Harmonized Targeting Tool, a component of the Enhanced Single Registry, which has enabled a broader registration exercise. This exercise has enhanced the Government of Kenya's ability to report on a wider scope of household-level data from a set of 12 counties, including Makueni, Vihiga, Kisumu and Taita Taveta.¹⁴⁰ A review of the web portal shows that some 54 indicators on household demographics are now captured. These include age, gender, location at sub-county level, type and severity of disability, economic indicators such as types of household dwelling, electronic or livestock assets, main energy sources for cooking and lighting, perception of poverty levels, levels of sanitation and water access, chronic illnesses, to name but a few. For the Government stakeholders such as NSSF, NHIF, and the State Department of Social Protection, the expansion of data collected is seen as a progressive step forward from the traditional, and limited, age-focused disaggregation. Based on interviews conducted and a verification of the system (live demo in Government offices) it was found that the Joint Programme has improved the accessibility to, and monitoring of data found in the management systems. The Joint Programme has supported the integration of existing schemes, such as NHIF and NSSF, with the Enhanced Single Registry in an effort to improve the accessibility to data by different stakeholders and service providers such as banks. Within the Enhanced Single Registry, the enhanced monitoring module allows users with system rights to access an extensive set of statistical reports that have been customised using a range of predefined parameters.
133. Overall interview respondents agreed that the Enhanced Single Registry is an important step towards improving the general understanding of the prevalence of disability within Kenya, which will, in turn, enable a comprehensive assessment of the type of social protection services needed to address them.

¹⁴⁰ Joint Programme 2021 Annual Progress Report, interviews with respondents

2.2.8 Evaluation Question 2.8: To which extent did the program contribute to support inclusion of persons with disabilities via: ensuring basic income security, coverage of health care costs, including rehabilitation and assistive devices, coverage of disability-related costs, including community support services and facilitate access to inclusive early childhood development, education, and work/livelihood

Key finding: The Joint Programme has laid the foundation, through pilots and other interventions, to ensure that the needs for basic income, health and rehabilitation, the costs incurred due to disability and early childhood development for PWD are met.

134. The Joint Programme has been able to respond to the specific needs listed in this question in the following ways:

- a. **Basic income:** The provision of support to PWD in the Wajir County – has supported the attainment of a basic income. This provided a stipend (Kshs. 4,000) to the care providers of persons with disability. The objective of the stipend was two-fold: first, to enable care providers to better care for the PWD, and second, to enable care providers to improve their ability to engage in society (for example secure the support of a replacement carer so that the principal care provider can participate in elections). This support contributed to the generation of a basic income for care providers of PwSD. In addition, the UCB also contributed to the attainment of basic income of families with children by providing caregivers with a monthly cash stipend.
- b. **Health care costs and disability related costs:** The provision of health care in Kenya is part of the general health care provision service, which PWD as others, may have access to. The Enhanced Single Registry, mentioned earlier in this report, will add value to the health care provision process for PWD.
- c. **Disability related costs including community support services:** The Wajir County Persons with Disabilities Act,¹⁴¹ which identifies funding sources to cover the costs of disability related costs and community support services was one way by which the Joint Programme aimed to address the needs of PWD.
- d. **Inclusive early childhood development, education and work/livelihood:** The UCB has been designed to include all children irrespective of their ability/disability status. The plus services component that was implemented as part of the UCB pilots included a specific focus on facilitating access to support services for those children who needed them, including children who had specific needs and or disabilities.

135. Taken together, the above-mentioned activities supported different Joint Programme target groups to ensure basic income security, cover health care costs, including rehabilitation and assistance devices; cover disability related costs, including the support services needed by persons with disabilities and facilitated inclusive early childhood development, and education. These specific activities have laid the foundation from where the Government of Kenya can expand its coverage. This and other initiatives which support the inclusivity of PWD, including children, access to education; access to the physical environment; waiver of fees and charges are critical introductions availed through the Wajir County Persons with Disabilities Act 2021, which also identifies funding sources to cover the costs of these activities.

¹⁴¹ <https://www.wajir.go.ke/pages/Downloads.htm?Lpgid=64&pgid=>

2.2.9 Evaluation Question 2.9: To what extent has the Joint Programme contributed to accelerating the SDGs at the national level?

Key finding: The Joint Programme has contributed to the Government of Kenya's ability to accelerate progress in relation to the SDG in a number of ways. Specifically, the activities conducted by the Joint Programme supported the attainment of SDG 1 (no poverty), 2 (zero hunger), 8 (decent work and economic growth), 10 (reduced inequalities) and 17 (partnership for the goals).

136. The Joint Programme has focused in integrating components of the SDG targets, by contributing to foundational platforms through which these issues can be addressed (see Table 9 below). Different categories of stakeholders interviewed noted that these contributions are relevant in realising universal social protection and expanding on how beneficiaries are profiled and targeted.

Table 9 Joint Programme contributions towards SDG impact¹⁴²

SDG target areas	Joint Programme contributions
<p>Goal 1 End poverty in all its forms everywhere</p> <ul style="list-style-type: none"> 1.2.1: Proportion of population living below the national poverty line, by sex and age 1.3.1: Proportion of population covered by social protection floors/systems, by sex, distinguishing children, unemployed persons, older persons, persons with disabilities, pregnant women, new-borns, work-injury victims, and the poor and the vulnerable 	<p>Expanded coverage in the number of beneficiaries covered by the social protection system</p> <p>Piloted UCB which currently covers 8,100 children under 3 years and 7,400 caregivers with monthly cash transfers and complementary benefits on nutrition, child protection, and disability inclusion counselling and referrals.</p> <p>The introduction of the Wajir County Disability Inclusion Programme which has a strategic focus in ending poverty</p>
<p>Goal 2 End hunger, achieve food security and improved nutrition and promote sustainable agriculture</p> <ul style="list-style-type: none"> 2.1.2: Number of people requiring food assistance because of drought emergencies (millions) 	<p>Collaborative effort towards emergency response by the Government of Kenya and PUNOs through procurement and distribution of certified seeds, fertilizers, and livestock range cubes to affected households as informed by findings from a commissioned study to determine levels of livelihood losses from shocks such as COVID-19 and desert locust invasion.</p> <p>The UCB programme focused on ending hunger as a result of interventions focusing on improved food security in beneficiary households.¹⁴³</p> <p>A recent study by FAO presents a clear understanding of key challenges to the food security sector and its implication for food security across different groups, including by gender, and offer some solutions for how these may be mitigated.¹⁴⁴</p>

¹⁴² Joint Programme progress reports for 2020, 2021 and 2022 (quarterly, bi-annual, and annual); Kenya Joint UN SDG Fund. n.d. *Joint SDG Fund Kenya Programme for Social Protection - Progress Update*

¹⁴³ The impact of the UCB on nutrition is considerable and well documented in Ministry of Public Service, Gender, Senior Citizen Affairs and Special Programmes. 2022. *Fill the Nutrient Gap – Cost of the Diet Assessment: Kenya Universal Child Benefit Draft Report September 2022*. World Food Programmes, UNICEF, Save the Children.

¹⁴⁴ KIPPRA. 2022. *Optimizing Cash Plus Interventions to Improve Household Resilience and Food Security: Evidence from Selected Counties in Kenya First Draft Report September 2022*. Food and Agriculture Organisation.

<p>Goal 8 Decent Work and Economic Growth</p> <ul style="list-style-type: none"> ○ 8.5.2: Unemployment rate, by sex, age, and persons with disabilities 	<p>Enhanced dialogues with Government of Kenya on the parameters of establishing a range of social security benefits in areas such as occupational injury and illness compensation mechanisms, unemployment benefits, maternity benefits, and coverage of the rural and informal economy, guided by actuarial and costing exercises.</p>
<p>Goal 10 Reduce inequality within and among countries</p> <ul style="list-style-type: none"> ○ 10.4.1 Labour share of GDP, comprising wages and social protection transfers 	<p>Advancement of high-level dialogues to advance inclusivity of informal and rural economy workers to narrow the inequality gap, as well as make visible the specific needs of children, PWDs and older persons through studies and assessments commissioned by the Joint Programme.</p>
<p>Goal 17 Strengthen the means of implementation and revitalize the Global Partnership for Sustainable Development</p> <ul style="list-style-type: none"> ○ 17.1.1 Total Government revenue as a proportion of GDP, by source ○ 17.3.1 Foreign direct investments (FDI), official development assistance and South-South Cooperation as a proportion of total domestic budget 	<p>Strengthening of partnerships towards the enhanced collaboration and dialogue with Government ministries, departments and agencies and private sector, workers, and employer organizations.</p> <p>Collaboration between DoSHS, COTU (K), FKE and Treasury to undertake a benchmarking mission to the Tanzania Workers Compensation Fund to enhance learning and information exchange. The Fund has been in existence since 2015.</p>

2.2.10 Evaluation Question 2.10: To what extent the Joint Programme produced a catalytic effect in terms of generating systems change across sectors to leave no one behind?

Key finding: The Joint Programme reports having played a catalytic role in securing the increase in Government spending on social protection; as well as in the high-level engagement by Government of Kenya actors on social protection discussions. These experiences are highlighted by interview respondents from both Government and PUNOs. In addition, a wide range of activities have the potential of playing a catalytic role in future.

137. The Joint Programme is well nested within the existing Government efforts and UNDAF and this means that activities conducted already had a platform from where they could be developed. Moreover, discussions with UN agency representatives highlighted the interest of the Joint Programme to play a catalytic role in the development of the social protection sector in Kenya.¹⁴⁵

138. According to some respondents and Joint Programme progress reports, the following results are catalytic:

- The Joint Programme's contribution to an increase in public spending on social protection.¹⁴⁶ This, according to the Joint Programme's own reporting, was a result of support provided to the Government. Specifically, the provision of technical assistance to support the development and coordination of the COVID-19 response plan was instrumental in increasing allocation of resources.¹⁴⁷
- The Joint Programme's own reporting also notes that the high-level stakeholder engagements involving senior Government of Kenya officials and key agencies, such as the national treasury,

¹⁴⁵ Kenya Joint UN SDG Fund. n.d. Joint SDG Fund Kenya Programme for Social Protection - Progress Update

¹⁴⁶ Kenya Joint UN SDG Fund (ed.), 2022. *LNOB portfolio questionnaire final*

¹⁴⁷ Kenya Joint UN SDG Fund. 2021. Annual Progress Report 2021 - SP LNOB Kenya JP final Submitted.

which were initiated by the Joint Programme as a way to identify sustainable solutions, is also an example of a catalytic result.¹⁴⁸

139. In addition, according to interview respondents, other Joint Programme activities are well placed to enable catalytic results later. For example, feasibility studies and pilots that have yet to be used to expand or develop social protection can serve as key foundational steps to enable the expansion of the social protection system in the country, and as such may play a critical role in future. Their inability to reach a catalytic result already is a result of a short lifecycle of the Joint Programme. Suggesting that like programmes require more time if they are expected to reach all possible transformative results in full.

140. The efforts conducted under the Joint Programme also highlight the need for, and importance of social protection programmes. It was mentioned by several respondents that the pandemic served to further highlight the significance and importance of a robust and functional social protection system. Respondents also emphasised the importance of the advocacy work conducted by the Joint Programme which pushed for the development of an Enhanced Single Registry, and for the expansion of the NHIF. These two efforts could be critical to catalysing how the social protection system develops in future.

141. Likewise, interviewees highlighted the UCB as particularly important and that the work done under the Joint Programme could catalyse how UCB is handled nation-wide in the future. Documents such as the UCB operations manual provide guidance on the operationalisation of the programme and future roll-out.¹⁴⁹ Indeed, all pilot studies were noted by interview respondents as important tools to lay the foundation of a robust social protection system.

2.2.11 Evaluation Question 2.11: To what extent has the Joint Programme contributed to achievement of UNDAF/CF outcome/s and national development priorities?

Key finding: UNDAF reflects national development priorities, and included a specific outcome focused on social protection. The Joint Programme has contributed to the attainment of this outcome.

142. The UNDAF 2018-2022¹⁵⁰ is nested within important Government priorities (see EQ 1.1 and EQ 1.2) and specifically outlines a focus on social protection in outcome 2.6, which states: *Social Protection, and Prevention and Response to violence against women and children*. UNDAF sought to meet three critical elements including increased coverage, increased budgetary allocation and better birth registration statistics. The outcome goes on to identify a series of 17 specific activities which are expected to contribute to the overarching outcome, which range from support to legal and policy reform, the strengthening of M&E mechanism, as well as the expansion and scale of a range of individual activities.¹⁵¹

143. A review of the specific activities listed clearly shows that all activities under the Joint Programme respond to a specific activity type listed in the UNDAF reporting tools. Therefore, the Joint Programme has contributed to the achievement of UNDAF. The evaluation of UNDAF¹⁵² lists the following indicators of progress (see Table 10).

Table 10 Results achievement for UNDAF Outcome 2.6¹⁵³

Outcome indicator	Baseline	Achievement		Target
		2018/19	2019/20	2021/22

¹⁴⁸ Kenya Joint UN SDG Fund. 2021. Annual Progress Report 2021 - SP LNOB Kenya JP final Submitted

¹⁴⁹ Ministry of Public Service, Gender, Senior Citizen Affairs and Special Programmes. 2021. *Universal Child Benefit Pilot – Operations Manual*. World Food Programme, UNICEF, Save the Children, Embassy of Sweden, Joint SDG Fund

¹⁵⁰ United Nations Development Assistance Framework (UNDAF) 2018-2022.

¹⁵¹ United Nations Development Assistance Framework (UNDAF) 2018-2022.

¹⁵² UN. 2022. UNDAF 2018-2022 Final Evaluation report.

¹⁵³ UN. 2022. UNDAF 2018-2022 Final Evaluation report.

Proportion of population covered by social protection floors/systems	12%	15%	18%	25%
Proportion of total Government spending on social protection	0.5% of GDP	0.6%	0.7%	1%
Proportion of children under 5 years of age whose birth have been registered (SDG 16.9.1)	60%	60	65	75%

144. The evaluation of UNDAF notes that the UN has supported the development of policies, of information management systems and conducted activities that have contributed to the strengthening of the social protection system and to meeting the demands of this outcome.¹⁵⁴ This is supported by interviews conducted for this assignment. The specific contribution of the Joint Programme to the results reported in Table 10 is not specified. From the data available to the ET, it is not possible to determine the proportion of overall achievement that can be attributed to the Joint Programme versus other activities, but all respondents familiar with UNDAF and the Joint Programme agree that the Joint Programme played an important role in the achievement of this outcome. Further, it is noted that the Joint Programme has played a role in expanding coverage of UCB by 8,100 children who were included in the pilot UCB activity (see Table 9).

2.3. EFFICIENCY

2.3.1 Evaluation Question 3.1: Was the programme implemented in a timely way?

Key finding: Key deliverables have been finalised within the programme cycle, despite some challenges imposed by COVID-19 which caused implementation delays. In some instances, administrative procedures also delayed the contracting of teams to conduct specific activities.

145. COVID-19 had a severe impact on Kenya, its people and on the need for, and ability to deliver, social protection services. The lockdowns and limits on travel and person-to-person engagement rendered several Joint Programme activities hard or impossible to conduct. Therefore, donors granted a 6 month no cost extension.

146. In addition to COVID-19, several respondents highlighted administrative challenges, highlighted earlier in the text (see EQ 2.2), slowed down processes to recruit and contract teams to conduct feasibility studies. The consequence of this has been that several Joint Programme activities were delayed. Still the vast majority of activities were conducted during the programme cycle (see Table 3 above).

2.3.3 Evaluation Question 3.3:¹⁵⁵ Did the monitoring system efficiently meet the needs and requirements of the project?

Key finding: All Joint Programme activities have been monitored by the staff from the leading PUNO agency which were most familiar with each activity.

147. Monitoring and reporting of activities was done in the following ways:

148. First, through the UNDAF and UNCT mechanism. The UNDAF provided reporting templates (for quarterly and six-month progress reports and annual surveys which were filled by the Joint Programme PUNOs jointly to provide more information on progress of Joint Programme implementation) and tools for joint

¹⁵⁴ UN. 2022. UNDAF 2018-2022 Final Evaluation report.

¹⁵⁵ Elements EQ 3.2 are addressed here and as part of EQ 3.4 as agreed during inception.

reporting by the PUNOs. These templates and tools also served as a gender equality and inclusion outcome reporting mechanism. Within the UN system, the gender marker also helped to define gender parameters for specific activities (see EQ 1.5). Interview respondents highlighted that, in the design and implementation of activities, PUNO agencies collectively relied on gender focal points from WFP and UNICEF for technical guidance as well as the UN Gender Working Group platform. The UNDAF platform also provided a mechanism for coordinated meetings with UNCT, Government and key partners working in the social protection and child protection space. These meetings served as a platform for information sharing and advocacy planning to enhance social protection, as well as GEWE and human rights considerations.¹⁵⁶

149. Second, the outputs of some activities were monitored by the UN agency that was lead in the respective activity. Each organisation used their own country system to monitor relevant activities. In some cases, joint monitoring occurred bilaterally for activities that were jointly implemented. The Joint Programme did not document any alternative system/opportunity; therefore, the ET cannot determine if an alternative approach would have been more efficient. However, it was noted that the staff that were charged with monitoring activities were those most familiar with the activity being monitored, which suggest an efficient use of resources (staff competence).

150. The focus on activities, rather than outcomes, was appropriate, according to some interview respondents. Said respondents felt that the testing of systems and mechanism, and studies conducted, and their respective yielding of results (outputs) translated into the enhancement of social protection in broad terms, and therefore met the outcome requirement established in UNDAF (see EQ 2.11).

2.3.4 Evaluation Question 3.4: Was the Joint Programme intervention more efficient in comparison to what could have been done through a single agency intervention?

Key finding: The Joint Programme interventions were able to benefit from joint programming and inter-agency engagement (sharing of information). Both allowed the Joint Programme to reduce duplication by a) facilitating joint work where complementary skill sets were capitalised on; b) sharing of information on activities, approaches and progress.

151. Multiple respondents interviewed noted that the Joint Programme was able to effectively reduce duplication and ensure sharing of information and cross institutional learning. This extended to both programming and inter-agency engagement.

152. **Programming:** The Joint Programme engaged in a number of activities (see EQ 1.3). These activities permitted the use of a multi-faceted approach where each agency brought their own experiences, perspectives and skillsets to the table in an effort to jointly address an area of concern.

153. **Inter-agency engagement:** Respondents across categories underlined that what set the Joint Programme apart from single agency intervention were the monthly coordination meetings. Interview respondents across categories stressed that the opportunity to share information on activities conducted and experiences with implementation had added a considerable value, which could not be secured otherwise. Some respondents noted that these meetings provided them with knowledge they would not have otherwise secured and enabled them to view the social protection sector as a much wider and all-encompassing sector than what they understood previously.

154. In addition, the conduct of joint meetings as opposed to bilateral ones served to reduce time used for coordination and in turn reduced financial costs (personnel time used up for coordination).

¹⁵⁶ Sets of minutes from the UNDAF Child and Social Protection Coordination Meeting

2.3.5 Evaluation Question 3.5: To what extent did the Joint Programme contribute to enhancing UNCT coherence and UNCT efficiency (reducing transaction costs)?

Key finding: The Joint Programme served to reduce duplication between UN agencies, which in turn reduced transaction costs which would have been incurred by multiple efforts aiming to address different aspects of a common challenge.

155. According to respondents across categories, the Joint Programme provided an opportunity for sharing information between UN agencies and by doing so served to ensure that duplication among UN agencies was reduced and thereby enhanced the UNCT coherence and reduced the costs that would have been incurred by multiple activities aiming to address a common issue.

156. Beyond the aforementioned, a study on transaction costs and areas of reduction of these has not been conducted. Therefore, it is not possible to know if transaction costs have been reduced beyond those associated with the previously mentioned joint meetings, which would have otherwise occurred bilaterally if all activities had been independently led by single UN agencies.

2.4. Coherence

2.4.1 Evaluation Question 4.1: To what extent are PUNO's activity coherent with key policies/programming of other partners operating in the context?

Key finding: The activities conducted by the Joint Programme were coherent with overarching policies, strategies, and programmes. The Joint Programme activities included steps to reduce or mitigate potential duplication. In the long term, the Enhanced Single Registry will play a crucial role in ensuring coherent delivery of social protection services.

157. The Joint Programme has contributed to the achievement of UNDAF. UNDAF is well aligned with Government priorities both at national and county levels as outlined in the national development framework.¹⁵⁷ Moreover, the Joint Programme project design is aligned with Government commitments, policies and strategies in social protection as noted under EQ 1.1 and 1.2.

158. The Joint Programme included the engagement of a wide number of Government actors and non-state actors in an effort to ensure complementarity and comprehensiveness. For example, the COTU-K, a federation of trade unions promoting social protection coverage of workers in the informal sector who are not in any trade union; the FKE, an entity that represents private sector employers; WOFAK, a local CSO that focuses on providing support against discrimination and stigma to those affected by HIV and AIDS, especially women and children; the NHIF which is tasked with implementing the Government of Kenya UHC programme; the NSSF; the Kenya Institute of Public Policy Research and Analysis (KIPPRA) were all engaged in the Joint Programme.

159. The aforementioned engagement served to ensure considerable coherence with key policies and programming of other partners. According to the interviews conducted, the support in Wajir was additional or identified individuals who had not yet received other support. Indeed, it was noted that the cash transfer support provided by the National Government is limited and excludes many vulnerable individuals. To mitigate this challenge, counties are encouraged to develop legal frameworks, as did Wajir County, which enables them to establish interventions to complement those run by the National

¹⁵⁷ United Nations Development Assistance Framework (UNDAF) 2018-2022.

Government. To ensure no duplication, before enrollment into the programme, the Wajir County team cross-checked their beneficiaries against the national Government database. Indeed, as noted in the evaluation of UNDAF, clear steps were taken to reduce/eliminate the potential for duplication.¹⁵⁸ However, in general there is the potential for overlap between national and county efforts, which is why the approach taken in Wajir was valuable, as well the Enhanced Single Registry, are valuable efforts to improve registration.

160. In addition, the Joint Programme has, through its activities, and specifically through support to the National Social Protection Secretariat, enhanced the national database (Enhanced Single Registry) of persons that are poor and experience vulnerability. According to respondents, this activity will play an important role in reducing duplication in the social protection sector in the future. The Enhanced Single Registry will serve as the central mechanism to target poor people and people who experience vulnerability. So far, data has been collected from 16 counties and there are plans to expand to a further 12 counties during the current financial year.

2.4.2 Evaluation Question 4.2: To what extent are human rights taken into account?

Key finding: The activities conducted under the Joint Programme have pursued the attainment of the human rights of key groups, who are particularly vulnerable.

161. According to UN guidelines, the inclusion of a human rights approach can manifest, at two levels: outcome and process (see Box 4).

162. In relation to the Joint Programme, the human rights-based approach was manifested as follows:

163. **Outcome:** The overarching objective of the Joint Programme was securing the access to fundamental rights as a constitutional right by the totality of the Kenyan population, in so far as these have to do with social protection. In this regard, the Government of Kenya at both national and county levels, are understood as the primary duty bearers, where the Joint Programme aimed at enhancing the capacity of the Government to meet its obligations. The Joint Programme places a specific focus on particularly vulnerable groups and advocating for the universality of social protection programme/scheme delivery. The documents, including the programme document itself,¹⁵⁹ and interviews with respondents across categories stressed this. This is also highlighted in the Joint Programme's own reporting.¹⁶⁰

¹⁵⁸ UNDAF Kenya. 2022. Final UNDAF Kenya Evaluation Report 2018-2022 January 2022.

¹⁵⁹ Kenya Joint UN SDG Fund (ed.) n.d. *Joint Programme for Social Protection Revised final*.

¹⁶⁰ Kenya Joint UN SDG Fund. n.d. Joint SDG Fund Kenya Programme for Social Protection - Progress Update

164. **Process:** The inclusion of human rights in the way activities were implemented was activity specific. The degree to which different feasibility studies or pilots have been implemented with a human rights-based approach in mind varied. The study where participation and inclusion were most evident was the rapid assessment study that preceded the implementation of the Wajir county programme design (see section 2.2.6). Non-discrimination was at the core of the work with women living with HIV/AIDS, and also in the work on UCB. The participation of right holders in the conduct of assessments and feasibility studies was explored through KIIs and FGDs. Assessments and studies such as work on the extension of social protection coverage to informal and rural workers, the establishment of a social insurance-based work injury and illness compensation system, and the introduction of maternity benefit cash transfer are examples of this. Sampling techniques were adopted in the identification of the participants. These are defined in the methodologies of corresponding studies/reports. All activities which supported the introduction of policies, strategies, plans or operational activities aligned with accountability and the rule of law. Overall, the Joint Programme reports a consistent effort to ensure that Human Rights were consistently considered.¹⁶¹

Box 4: UN Common understanding of Human Rights-Based Approach (HRBA)

1. All programmes of development co-operation, policies and technical assistance should further the realization of human rights as laid down in the Universal Declaration of Human Rights and other international human rights instruments.
2. Human rights standards contained in, and principles derived from, the Universal Declaration of Human Rights and other international human rights instruments guide all development cooperation and programming in all sectors and in all phases of the programming process.
3. Development cooperation contributes to the development of the capacities of 'duty-bearers' to meet their obligations and/or of 'rights-holders' to claim their rights.

HRBA thus focuses on human rights both as an end goal and as a process that should guide all phases of the programme process grounded in the following principles:

- universality and inalienability.
- indivisibility; inter-dependence and inter-relatedness.
- non-discrimination and equality.
- participation and inclusion.
- accountability and the rule of law.

Source: The Human Rights Based Approach to Development Cooperation Towards a Common Understanding Among UN Agencies (2003)

2.5. LESSONS LEARNED

2.5.1 Evaluation Question 5.1: What are lessons learned from the project up to this point? Are there any recommendations to improve the project's relevance, efficiency, effectiveness?

165. **Lesson 1: The role of the Government, and indeed Government leadership and ownership is critical.** This element was consistently lauded by respondents across categories as a key element responsible for the success of the Joint Programme. This suggests that ensuring Government participation in similar programmes is critical to their longer-term success.

166. **Lesson 2: Multi-stakeholder coordination forums can provide a valuable platform towards achievement of progress.** Several stakeholders attributed positive outcomes in their respective activities due to accountability to peers, a shared alignment of interests and resources, and increased dialogue based on the tripartite nature of the participants i.e., Government, UN, and non-state actors. Additionally, the meetings promoted knowledge-sharing among participants and in so doing reduced the potential for duplication of efforts.

167. **Lesson 3: The timing of programme needs to carefully align to the number and type of activities, with the time needed to secure verifiable results.** The lifespan of the programme was limited to start

¹⁶¹ Kenya Joint UN SDG Fund. n.d. Joint SDG Fund Kenya Programme for Social Protection - Progress Update

with, which, according to some respondents, made the attainment (and documentation) of some verifiable outcomes difficult, which in turn means that some of the achievements are not well known yet. Some respondents felt that there was a misalignment between the number of activities pursued by the Joint Programme and the time available to carry these out. Specifically, some respondents noted that the time needed for contracting processes should be carefully considered during planning phases so that more realistic workplans can be developed.

168. **Lesson 4: Realistic alignment between activities and administrative processes.** The time required to identify a task, select a contributor and issue a contract can be considerable. These processes can lead to delays if time to effectively carry them out is not factored into the programme life cycle.

2.6. SUSTAINABILITY

2.6.1 Evaluation Question 6.1: To what extent has the strategy adopted by the Joint Programme contributed to sustainability of results, especially in terms of LNOB and the social protection system?

Key finding: The Joint Programme has contributed to the sustainability of an enhanced national social protection database; linkages made between service providing agencies such as the provision of additional support for vulnerable children; expansion of health care provision and social protection systems for workers. In addition, the Joint Programme has also supported the development of legislation which stands to have a long-term impact on relevant segments of the Kenyan population. These efforts are both sustainable and contribute to the development of a social protection system that does not leave anyone behind.

169. The strategy adopted for the following activities has contributed to the sustainability of results:

- a. **National Social Protection Data:** The Joint Programme improved the enhancement of national social protection data and generation of evidence. The partial support towards roll-out of the Harmonized Targeting Tool and linkage between the Enhanced Single Registry and the NHIF and NSSF platforms are examples of support that is well nested within existing system. This support, according to interview respondents, will likely be sustainable because the Joint Programme was able to support the development of relevant capacity to ensure that system enhancements could be absorbed by the already existing structure.
- b. **Building and reinforcing the legal and policy framework:** The Wajir County Social Services department cash transfer for PwSD programme contributed to the development of the Wajir County Disability Act,¹⁶² which is a legal framework that will permit the accessing of funding from the county office. Additionally, efforts by the Joint Programme towards expanding policy and strategic options for informal workers is perceived to increase numbers of informal economy workers contributing to NSSF and NHIF, and further enhance risk pooling and a wider resource base. Focus has also been on social insurance-based schemes such as work injury and illness compensation which is also expected to enhance social solidarity and sustainable financing options.
- c. **Linkages with other key services:** The UCB pilot targeting children under 3 years created linkages to other Government departments, specifically the birth certificate Civil Registration Services department. Respondents interviewed confirmed that orphaned children can now get death

¹⁶² Persons Living with Disabilities Act 2021

certificates of their deceased parent(s) which in turn enables their access to OVC support. The approach taken for this activity has led to a sustainable result.

- d. **Health insurance for people who experience vulnerability:** Access to medical insurance plans, including the NHIF, was enhanced through the Universal Health Coverage programmes for excluded groups in informal sector as confirmed during interviews with ILO and NHIF. Since this is an existing programme, the activities that were conducted under the Joint Programme, according to interview respondents, enjoy all the hallmarks of being sustainable.
- e. **Social protection workers' capacity building:** As part of the Joint Programme's activities, interviews with PUNOs and Government representatives confirmed that a social protection curriculum was developed and is now embedded within the Kenya School of Government curriculum making it accessible to all civil servants. Additionally, through support by the Joint Programme, a Training of Trainers programme on Social Protection was developed and launched at the same institution. Respondents interviewed in relation to this activity stressed that the curriculum itself is expected to be sustainable and its use expected to continue.

170. The above underlines that the Joint Programme has been able to contribute to efforts to leave no one behind and several of its efforts have been sufficiently well anchored within existing Government efforts that they can be sustainable.

2.6.2 Evaluation Question 6.2: To what extent has the Joint Programme supported the long-term buy-in, leadership and ownership by the Government and other relevant stakeholders?

Key finding: The Government of Kenya played a leading role in the Joint Programme. The Joint Programme was designed and implemented in a way that ensured said role was maintained throughout. In addition, the capacity of key actors was strengthened during the Programme as a way to further ensure/consolidate buy-in and improve the ability different agencies had of playing a leading role on relevant issues.

171. The Government, at different levels and represented by different agencies, played a leading role in the different activities conducted. Ensuring buy in-leadership and ownership of the Government was a key objective of the Joint Programme. This objective guided the way the Joint Programme was designed, managed, and activities conducted identified.

172. According to respondents across categories, the activities conducted by the Joint Programme have been able to promote Government buy-in by demonstrating the importance and value of different aspects of social protection. At the same time, some respondents noted that enabling different actors to come together to discuss and share perspective around different social protection issues served to highlight the complexities social protection responses (identification of issues and effective delivery of support).

173. The Government leadership and buy-in was manifested in the role played by Government. Specifically in the efforts made by different Government agencies to utilise the technical support from the Joint Programme to spearhead key policy change processes. Tangible examples of this include, the updating of the Social Protection Policy, 2022, and the development of the National Economic Recovery Plan, which calls for the Government to prioritise social protection.¹⁶³ Additionally, according to respondents interviewed, substantive efforts have been directed by different Government of Kenya agencies towards the institutionalisation of benefits within Government structures, particularly on social health insurance, social protection in the informal economy, maternity benefits, child benefit grant and disability inclusion programme, among others. These are hailed by different categories of respondents as considerable steps forward and as having important roots in the work done by the Joint Programme.

¹⁶³ Joint Programme 6-month progress update, 30 June 2022; interviews with respondents from PUNO and Government.

174. In addition to concrete feasibility studies and pilots, the Joint Programme made deliberate efforts to encourage knowledge and capacity development of Government officials and non-state actors on social protection elements. This effort also, according to interview respondents, supported buy-in by key stakeholders as they felt they were both included and better informed. Capacity development was mainly achieved through on-the-job skills transfer, Training of Trainers, and direct training of technical staff.¹⁶⁴ These efforts included:

- a. Training of officers from the Kenya National Bureau of Statistics on disability-inclusion in statical data collection and analysis and county clerks involved in the pilot beneficiary registrations.
- b. Training of women living and affected by HIV on entrepreneurship and social protection.
- c. Training of community health workers and volunteers in the roll out of the UCB pilot. This included Information Management Systems support, continuous skills transfer of in-house technical teams at the National Social Protection Secretariat, and Directorate of Social Assistance was prioritised.
- d. Training of key IT staff, support attaining software licensing, servers, and ensuring consistent system maintenance, and daily administration of the system. As a result of these efforts, technical teams based in the different Government departments can manage the day-to-day operations of the systems, in collaboration with the Ministry of Information, Communication and Technology (ICT).

2.6.3 Evaluation Question 6.3: How likely will the results be sustained beyond the Joint Programme through the action of Government and other stakeholders and/or UNCTs?

Key finding: Activities that are spear headed by specific offices (e.g., the National Social Protection Secretariat and Wajir county Government) will likely continue. Other agencies, including the UN and non-state actors, may also continue working in the sector if funds are secured. The new Government prioritising of Social Protection is detailed in the Kenya Kwanza manifesto, hence, there is a possibility that all activities started by the Joint Programme will reach sustainable results.

175. The new Government is committed to establishing a universal social security system which includes a pension, occupation hazard and unemployment insurance. Specifically, for children, the Government is committed to eradicating malnutrition within the next five years. In relation to education and development, the Government of Kenya has pledged to increase access to early childhood education and prioritise an integrated package of services for children that can improve learning outcomes. The said package is predicated on all schools having internet access. The Government of Kenya has also made a commitment to respond to the needs of PWDs and vulnerable senior citizens by achieving 100 percent NHIF coverage, providing cash transfers, delivering on business opportunities, education, and training.¹⁶⁵

176. At the time of data collection, which was before the new Government took office, and therefore the above commitments were not yet known, respondents interviewed for this assignment noted that the degree to which progress made by the Joint Programme would be sustained could, in certain instances, depend on the new Government's priorities and degree to which the new Government agenda focuses on social protection. Interviewees across categories noted, at the time of the interview which took place prior to the elections, that if the new Government focuses on a Universal Social Protection as both a legislative and policy priority the chances of sustainability of all efforts supported by the Joint Programme was very high.

¹⁶⁴ Joint Programme 6-month progress update, 30 June 2022; interviews with respondents from PUNO and Government.

¹⁶⁵ The Kenya Kwanza Plan. The Bottom-Up Economic Transformation Agenda 2022-2027.

177. Respondents also noted that even if the new Government did not prioritise social protection at a national level some activities would be sustainable none the less. For example: the registration of all vulnerable persons into the social registry, including PWDs, which was started under the joint programme would continue to roll out, irrespective of political decisions, because it is led by the National Social Protection Secretariat which already had plans to roll out the data collection to a further 12 counties during the 2022/2023 period irrespective of election outcomes. Other sustainable results are listed under EQ 6.1.
178. In relation to interventions which focused on specific regions, progress made would be maintained irrespective of central Government changes. For example, work conducted at the county level was expected to continue if county Government put a focus on their continuation in terms of legislation and policy. For example, the County Assembly of Wajir enacted a law, Wajir County PWDs Act 2021, meaning that sustainability was guaranteed irrespective of regime changes.
179. Likewise, the engagement of non-Government actors and UN efforts were also set to continue. Each of these entities can continue implementing activities which were started during the Joint Programme, if funds are available, and or make use of material (knowledge) generated by the Joint Programme.

Conclusions and recommendations

180. This section presents both conclusions and recommendations that have emerged from the data collected and analysed during this assignment.

3.1. CONCLUSIONS

181. Conclusions are presented by criteria in order to reduce duplication and capitalise on common threads between questions under each criterion.

182. **Conclusion 1 - Relevance:** The Joint Programme was very relevant to the Kenyan context because it supported the Government of Kenya to further its ability to respond to social protection needs of specific groups within society who had particular needs that had not yet been met or had been neglected. By working jointly, the PUNO agencies were able to include in the Joint Programme a wide range of activities that covered a diverse set of priorities and needs, which also served to expand the relevance of the programme. While the Joint Programme was not expected to address or identify all social protection gaps, it did serve to highlight issues and areas which had been otherwise overlooked.

183. Specifically, as relates to GEWE, the Joint Programme met some predefined markers, but was not able to conduct a thorough gender assessment. Not having a full gender assessment limited the Joint Programme's ability to mainstream gender across all activities conducted. Overall, the Joint Programme was relevant to the Government of Kenya, UN agencies and donors, and supported achievement of the UNDAF objectives.

184. **Conclusion 2 - Effectiveness:** The Joint Programme proved an apt approach to effectively deliver results to specific target groups: specifically, PWD, children and women living in vulnerable situations and informal workers (work injury benefit, maternity protection, unemployment benefit). Support to these groups was pursued through a range of activities, some of which are likely to be rolled out (expanded) and sustained.

185. The effectiveness of the intervention was also credited to the strong collaboration between actors, including non-state actors. Likewise, the engagement of more than one PUNO agency in individual activities appear to have contributed to improved effectiveness.

186. Representatives from different vulnerable groups targeted were included in some activities. The insights that emerged from these inclusions suggests that participatory engagement by the population which stands to benefit from the support can be highly meaningful. At a broader level the inclusion of more granular data points (specificities about disabilities, and gender) into existing databases has also served to improve the effectiveness of social protection responses.

187. Overall, the conduct of the Joint Programme appears to have been a positive way to support the Government of Kenya to reach key SDG, specifically SDG 1, 2, 8, 10 and 17, and has served a catalytic and/or foundational role in expanding or enabling the expansion of the social protection sector in Kenya.

188. **Conclusion 3 - Efficiency:** The efficiency of the Joint Programme has been mainly affected by COVID-19 and internal UN administrative mechanism. Despite these challenges the programme was able to reach the vast majority of outputs planned, and the UNDAF goals expected, mainly SRA 2.6

189. The approach taken within the Joint Programme to engage in regular coordination meetings has served to reduce duplication between UN agencies, as well as more broadly, and also served as an efficient way to communicate and inform with relevant actors on key social protection issues. Likewise inter agency engagement in pursuit of single activities has served to capitalise on the collective knowledge and experience of PUNO. In turn, this has facilitated the development and conduct of multifaceted activities.

190. The monitoring process was done by the different agencies who led on the individual activities. This approach proved valuable as it enables the use of staff familiar with the intervention type but may not have been the most efficient approach in terms of resources needed for monitoring as multiple individuals needed to be engaged. An alternative would have been to have a specific person dedicated to monitoring the whole programme, but this would have limited their agency knowledge.

191. **Conclusion 4 - Coherence:** The extensive dialogue with the Government of Kenya during the development of UNDAF is credited with the high levels of UN coherence.

192. A HRBA was visible in programme objectives of Joint Programme activities. Ensuring that all programmatic aspects of the Joint programme included an HRBA would have needed more specific attention to the principles that guide the approach.

193. **Conclusion 5 – Sustainability:** Ensuring a sustainable social protection system requires a wide range of factors be in place. Ensuring the long-term sustainability of Joint Programme, activities will require continued programming to upscale activities and fill persistent knowledge gaps. This is the case even though, the Joint Programme supported the achievement of a sustainable social protection system by contributing to the enhancement national systems that were already operational, supporting the development of the capacity of the Government of Kenya staff and engaging at the county level with Governments to develop and operationalise specific programmes.

194. **Lesson learned:** It is critical that any future engagement continue to include the Government of Kenya as a critical actor. This proved seminal. Likewise, the multi-stakeholder forums can also play an important role, so this approach should be an important take away. Lastly, any future engagement should have a longer time span that takes into consideration the time needed for specific tasks and also ensures that the number of tasks for which any one organisation is responsible is aligned with the time provided for it.

3.2. RECOMMENDATIONS

#	Recommendation	Responsibility	Other contributing entities (if applicable)	Priority: High/medium	By when
1	Recommendation 1: Consider the continuation of the Joint Programme through the implementation of a second phase with a duration of 5 years minimum (see recommendation 4). A continuation of the effort to address social protection challenges in Kenya would be well aligned with the priorities of the new government, which came into office in August 2022, and with Agenda 2030. This new phase should focus both on filling gaps that are currently overlooked, but also scaling up of activities based on all the foundational and catalytic work done during the phase under review here.	<u>UN RCO, SDG Partnership Platform and participating agencies</u>		High	<u>Pre-programme design</u>
2	Recommendation 2: The development of a new Joint Programme Phase should consider the inclusion of additional government actors who are also engaged, albeit more informally, in the social protection sector. For example,	<u>UN RCO, SDG Partnership Platform and participating agencies</u>		High	<u>Pre-programme design</u>

	the Ministries of Agriculture, Health and Trade.				
3	Recommendation 3: The process to mobilise resources for a future phase (see recommendation 1), should actively include the different stakeholders involved in the planning and design of the intervention (see recommendation 4). The Government of Kenya should be engaged in co-funding the interventions.	<u>UN RCO, SDG Partnership Platform and participating agencies</u>		High	<u>Pre-programme design</u>
4	Recommendation 4: Through discussion with government during the design phase, ensure that any future Joint Programme (or like effort) continues to enjoy Government leadership/buy-in. The inclusion of non-state actors early on in the process, is also critical. A time frame that allows for the Government to absorb and roll out activities. Ensuring a realistic time frame, that enables effective use of results (roll out and absorption), should be part of the discussion with donors during the design phase. A periodic review and evaluation of activities (and the activities roadmap) will enable time frame adaptation if needed.	<u>UN RCO, SDG Partnership Platform and participating agencies</u>		High	<u>In the design of the programme</u>
5	Recommendation 5: Any future Joint Programme should further explore the articulation between different activities to ensure that activities conducted yield the best possible results. Inter activity articulation should be used to ensure that change created can be greater than the sum of their parts. Each activity should have a single agency lead, and include a clear articulation plan that shows how, when, and led by whom, inter activity articulation should take place.	<u>UN RCO, Participating agencies</u>		High	<u>In the design of the programme</u>

6	<p>Recommendation 6: In order to enable gender mainstreaming, a thorough gender analysis covering all relevant areas should be conducted. This will enable the implementers of activities to access gender data when/if needed. Gender disaggregated data should be consistently collected and gender mainstreaming should be reviewed periodically to ensure any necessary adaptation is made.</p>	<p><u>UN RCO, Participating agencies</u></p>		High	<p><u>In the design of the programme</u></p>
7	<p>Recommendation 7: Continue to ensure that new programming does not accidentally overlook key groups. To do this a new programme should be, wherever possible, informed by periodic vulnerability assessment(s), that allows for disaggregation by sex and age within the different groups. In future this will also help ensure that groups that may not be under the Government of Kenya radar are included in future.</p>	<p><u>UN RCO, and participating agencies</u></p>		High	<p><u>In the design of the programme</u></p>
8	<p>Recommendation 8: The inclusion of end users should be further expanded in future activities. This will serve to ensure that a HRBA is included across the whole implementation of the programme and not only as part of specific activities. This will ensure improved ownership and legitimacy of the interventions. This could include the active representation of agencies representing end user groups in programme discussions.</p>	<p><u>UN RCO, and participating agencies</u></p>		High	

Annexes 1. Summary Terms of Reference

1. Background

1. These terms of reference (ToR) were prepared by the World Food Programme (WFP) Monitoring and Evaluation (M&E) unit in consultation with the Resident Coordinator's Office (RCO) and the Project's Participating UN Organizations (PUNOs) based upon an initial document review and consultation with relevant stakeholders and following a standard template. The purpose of these terms of reference is to provide key information to stakeholders about the evaluation, to guide the evaluation team and to specify expectations during the various phases of the evaluation.

1.1. INTRODUCTION

2. These terms of reference are for the final joint evaluation of Kenya Joint Sustainable Development Goals (SDG) Fund for social protection in Kenya; *progressive pathway towards a Universal Social Protection System in Kenya to accelerate the achievement of the SDGs*. This evaluation is commissioned by WFP Kenya in collaboration with the participating UN organizations and will cover the implementation period from 15th January 2021 to 15th September 2022.
3. The Joint Programme aims at supporting the Government of Kenya (Government of Kenya) to move from a poverty targeted approach which excludes 78 percent of the vulnerable population, to a more inclusive approach to social protection. It has been supporting the Government to operationalize commitments articulated in its updated Social Protection Policy. The Joint Programme aims to strengthen the enabling environment for social protection in Kenya including greater integration of social protection with economic and social services and work with the Government to create design options for fiscally affordable roll-out of universal social protection, including in rural areas.

1.2. CONTEXT

4. The Joint Sustainable Development Goals (SDG) Fund is a development cooperation mechanism created in 2014 to support sustainable development activities through integrated and multidimensional Joint Programmes. It is an innovative instrument to incentivize the transformative policy shifts and stimulate the strategic investments required to get the world back on track to meet the SDGs. The Joint SDG Fund is supporting the Government of Kenya (Government) to move from a poverty targeted approach for social protection to a more inclusive system. It is assisting the Government to operationalize commitments articulated in the Kenya Social Protection Policy (2010). It is also strengthening the enabling environment for social protection in Kenya including greater integration of social protection with economic and social services and work with the Government to create design options for fiscally affordable roll-out of universal social protection.
5. Kenya's third Medium Term Plan (MTP III) 2018-2022¹⁶⁶ aims to achieve sustainable socio-economic transformation and development and has designated social protection as a focus

¹⁶⁶ <https://vision2030.go.ke/publication/third-medium-term-plan-2018-2022/>

area in this context. MTP III is aligned with Government's 'Big Four' agenda¹⁶⁷ aiming to achieve universal health coverage, improved food security and nutrition, increased access to affordable housing, and enhanced manufacturing. Recent studies and analyses undertaken by Government i.e. Social Protection Sector Review (2017)¹⁶⁸ and the draft Investment Plan show that:

- Kenya has made significant progress in building a social protection system. Spending for social protection grew from 0.38 percent in 2017 to 0.42 percent of GDP in 2018/2019.
 - Government expanded the coverage of its national cash transfer programmes to reach 1.3 million poor households in 2019 with regular and predictable transfers while also expanding the coverage of social security with 10 to 15 percent of formal and informal sector workers enrolled in contributory schemes for old-age cover.
 - Despite positive economic growth and sectoral achievements, poverty persists in Kenya with 36 percent of Kenyan citizens living under the national poverty line. Children are disproportionately affected (41.5%)¹⁶⁹. This has been worsened by the COVID-19 pandemic. According to the World Bank, "Kenya has made considerable progress with poverty reduction over the last years, but COVID-19 has destroyed the livelihoods of many Kenyans, pushing an estimated two million people into poverty"¹⁷⁰.
 - 12 percent of Kenyans are food-insecure and have poor food-consumption levels and low dietary diversity. The most hunger-prone areas being in the arid and semi-arid regions which tend to be rural. Food-insecurity levels escalate significantly during periods of shocks and crises such as drought, heavy rains and floods. This compromises the access to food increasing the vulnerability of affected persons. Malnutrition is directly linked with poverty and remains a challenge with higher rates of stunting seen in children under the age of five in rural areas (29%) as opposed to urban areas (20%)¹⁷¹
 - The sector review¹⁷² also shows that only 12 percent of households are benefiting from social protection. However, the coverage is increasing with the roll out of a universal pension.
6. Geographical coverage of social assistance is strongly correlated with poverty rates (see figure 2 below) and levels of acute malnutrition at county level. However, coverage is only moderately correlated with total households living in poverty in each county (see figure 3 below). Counties with a larger share of the poor people do not typically receive a larger share of total beneficiaries.

¹⁶⁷ <https://www.president.go.ke/>

¹⁶⁸ <https://www.developmentpathways.co.uk/wp-content/uploads/2019/10/Kenya-Social-Protection-Sector-Review-Report-1.pdf>

¹⁶⁹ World Bank 2020 – Kenya Poverty and Equity Brief
(https://databank.worldbank.org/data/download/poverty/33EF03BB-9722-4AE2-ABC7-AA2972D68AFE/Global_POVEQ_KEN.pdf)

¹⁷⁰ <https://www.worldbank.org/en/country/kenya/publication/kenya-economic-update-covid-19-erodes-progress-in-poverty-reduction-in-kenya-increases-number-of-poor-citizens>

¹⁷¹ <https://www.wfp.org/publications/kenya-zero-hunger-strategic-review>

¹⁷² <https://www.developmentpathways.co.uk/wp-content/uploads/2019/10/Kenya-Social-Protection-Sector-Review-Report-1.pdf>

Figure 2¹⁷³: Correlation between coverage of social assistance programmes, number of households and number of households below the poverty line

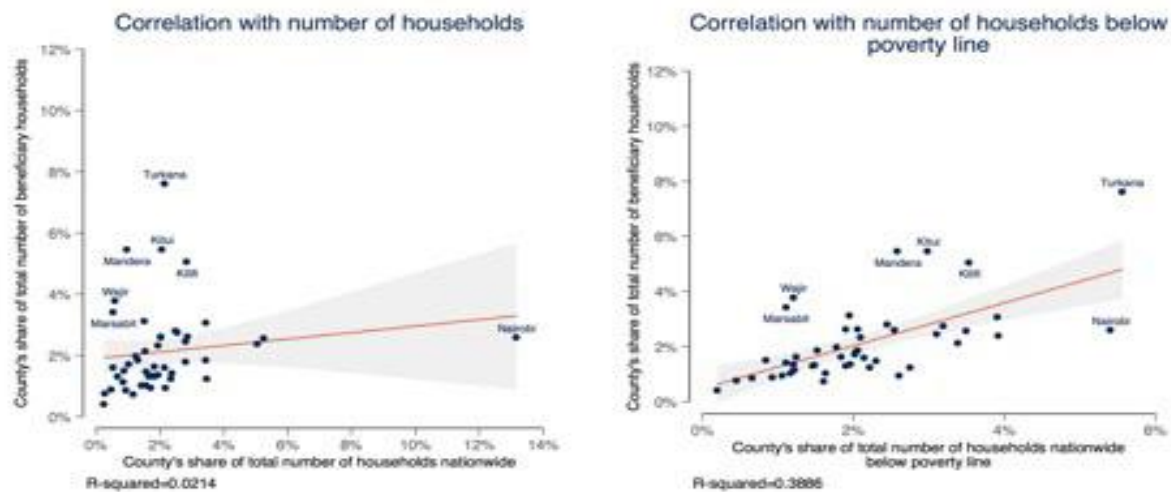


Figure 2 Correlation social assistance with poverty rates

Figure 3 Correlation social assistance with number of households below the poverty line

7. Social Protection in Kenya is provided for by the Constitution of Kenya. Article 43 postulates social protection as one of the economic and social rights. At global level the Sustainable Development Goal target 1.3 requires member states to implement appropriate social protection systems to fight extreme poverty and reduce inequalities. This right is equally provided for under the African Union's (AU) agenda 2063¹⁷⁴ which is the Africa's blueprint and master plan for transforming Africa into the global powerhouse of the future and whose priority areas are aligned with the UN SDGs. The AU agenda 2063 mandates the member states to prioritize inclusive social and economic development amongst other issues aimed at repositioning Africa to becoming a dominant player in the global arena.
8. Social Protection in Kenya, according to the National Social Protection Policy (NSPP), is structured along three main pillars of Social Assistance, Social Security and Health Insurance. Programmes across the three pillars have been implemented by different agencies, both state and non-state actors across different sectors. Prominent amongst these programmes is the National Safety Net Programmes (NSNP) under the social assistance pillar which consists of four cash transfer programmes (Older Persons Cash Transfer, Cash Transfer for Orphans and Vulnerable Children, Persons with Severe Disabilities Cash Transfers, Hunger Safety Net Programme).
9. The Social Protection Sector in Kenya is working towards a lifecycle approach to social protection. Figure 1 maps the national social security systems across the lifecycle. The Government has increased funding to the social protection sector through its social

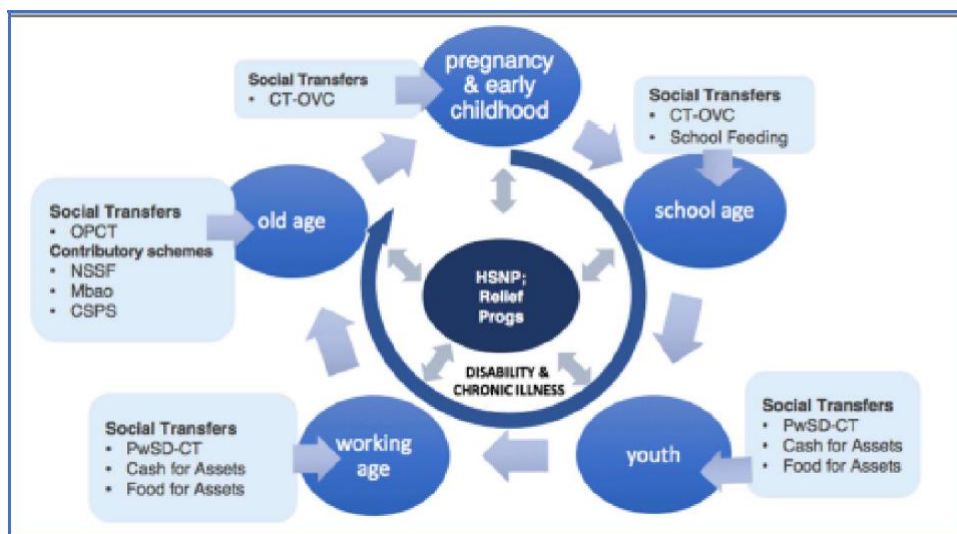
¹⁷³ ibid

¹⁷⁴ <https://au.int/agenda2063/overview>

assistance programmes. This is seen in the expanded transfers to older persons through the development of the 'Inua Jami' universal pension which is the first individual entitlement cash transfer scheme. Alongside, is an increase in the caseload of the Cash Transfer for Orphans and Vulnerable Children (CT-OVC) and the planned pilot for a Universal Child Benefit (UCB) pilot programme.

10. According to the Economic Survey 2019, contributory schemes have also expanded with National Hospital Insurance Fund (NHIF) reaching 7.7 million people in 2017/18. Membership from the formal sector rose by 4.3 percent compared with a 23.3 percent rise in the informal sector from 2015/16 period. This represents about 39 percent of the population covered by the NHIF as per the Social Protection Sector Review, 2017. The number of registered employers and employees with the National Social Security Fund (NSSF) increased by 6.8 percent and 3 percent to 143,300 and 4,068,400 respectively in 2017/18 from both the formal and informal economy. Coverage of social security and benefit levels remain limited and need to be addressed.
11. Kenya has made significant progress in improving the availability of data on social assistance schemes, as evidenced by the development and commissioning of the Enhanced Single Registry, a management information system for social protection. However there remains, several challenges in estimating the share of households or the share of the population that is benefiting from social protection schemes¹⁷⁵.

Figure 1 Kenya's national social security system, mapped across lifecycle



12. Leaving no one behind (LNOB) is the central, transformative promise of the 2030 Agenda for Sustainable Development and its Sustainable Development Goals (SDGs). It represents the commitment of all UN Member States to eradicate poverty in all its forms, end discrimination and exclusion, and reduce the inequalities and vulnerabilities that leave people behind and undermine the potential of individuals and of humanity as a whole. This joint programme aimed to help the Government operationalizes a universal approach to social protection

¹⁷⁵ <https://www.developmentpathways.co.uk/wp-content/uploads/2019/10/Kenya-Social-Protection-Sector-Review-Report-1.pdf>

which will provide a key framework for the Kenyan Government to ensure that it not only leaves no one behind but also takes on board the unique concerns and realities of women and men of all ages. Currently many Kenyans are left behind by a system that fails to reach all the vulnerable persons who need social and economic support¹⁷⁶. Operationalizing a universal approach - including a system that has stronger integration between universal social protection programmes and economic and social services - will enable the Kenya population, especially the vulnerable and marginalized, to participate more fully and realize their potential.

13. Gender, disability and age are key barriers for citizens in accessing social protection services. Kenya has made strides in realizing equality, but a lot more needs to be done. The Kenya Constitution has progressive articles that indicate commitment with international and regional obligations arising from treaties and conventions and other commitments signed and or ratified. For instance, Kenya has ratified both the Convention on Elimination of All forms of Discrimination Against Women and the Protocol to the African Charter on Human and People's Rights. Despite this, the 2016 Human Development Report¹⁷⁷ indicates that Kenya's Gender Development Index is at 0.919, placing it among countries with medium to low equality between women and men in human development achievements. Women continue to bear the brunt of the high poverty levels in Kenya. According to Kenya Economic Report of 2020¹⁷⁸, Women own 1 percent of agricultural land and receive 10 percent of available credit even though they provide 80 percent of farm labour and manage 40 percent of Kenya's smallholder farms. The 2015, Gender Inequality Index ranked Kenya 135 of 159 countries with a score of 0.565, illustrating significant gender gaps in human development. Gender-based violence, female genital mutilation and violence against children and child marriage are some of the most pervasive human rights violations in Kenya. There is recognition of the value of unpaid care and domestic work (UCDW) which is indispensable in contributing to the well-being of individuals, families and societies. Female workers spend more time in UCDW than male counterparts. Overall access to sex-disaggregated data for social protection is limited and this accentuated the need for the programme to include more efforts to build capacities on gender mainstreaming in the sector which will contribute to addressing some of these gaps in the future.
14. In order to facilitate implementation of gender equality and freedom from discrimination and advance protection of the vulnerable and marginalized populations, the Government has put in place the State Department of Gender; and the State Department for Social Protection, Senior Citizens Affairs and Special Programmes under the Ministry of Public Service, Gender, Senior Citizens Affairs & Special Programmes. This Ministry has the mandate to institutionalize gender mainstreaming in ministries, departments and agencies with emphasis on affirmative action and gender responsive budgeting in all programmes. The joint programme aimed to include a gender-based capacity needs assessment and studies of key issues and trends to ensure evidence-based policymaking.
15. Mainstreaming of the needs of persons with disabilities continues to face attitudinal, institutional, cultural and physical barriers in Kenya¹⁷⁹ despite public awareness and outreach work done by the National Council of Persons with Disability (NCPWD). The Council has the mandate of registering and empowering person with disabilities and working with the State Department for Social Protection, Senior Citizens Affairs and Special

¹⁷⁶ Kenya Social Protection Sector Review 2017 (<https://www.developmentpathways.co.uk/publications/kenya-social-protection-sector-review-2017>)

¹⁷⁷ http://hdr.undp.org/sites/default/files/2016_human_development_report.pdf

¹⁷⁸ <https://kippra.or.ke/wp-content/uploads/2021/02/Kenya-Economic-Report-2020.pdf>

¹⁷⁹ <http://www.kenyadisabilityresource.org/Disability-Overview>

Programmes to provide social assistance and access to sustainable livelihoods while promoting the representation and civic participation of PWDs in decision-making processes.

2. Rationale for the evaluation

2.1. RATIONALE

16. The evaluation is being commissioned as part of a mandatory monitoring and evaluation process for the Joint SDG Fund. The evaluation findings will be used by the Government of Kenya and the UN system in Kenya towards improving social protection programming in the country, strengthening UN reforms, to contribute to the acceleration of SDGs and to inform learning from results of this programme. In addition, the Fund managers and its donors require this evaluation to be completed before the project end date of 15 September 2022 in order to inform next steps of the grant.

2.2. OBJECTIVES

17. The Evaluation will serve the dual and mutually reinforcing objectives of accountability. The evaluation will provide an evidence-based, independent assessment of the performance of the joint project. Specifically, this final evaluation will (1) assess project's relevance, effectiveness, efficiency, sustainability and coherence (2) Assess the projects contribution to SDG acceleration, UN reforms and focus on disability, (3) assess whether the project achieved the planned the results and targets; (4) Check if critical assumptions hold true (5) document lessons learned.

2.3. STAKEHOLDER ANALYSIS

18. The evaluation will seek the views of, and be useful to, a broad range of implementing agencies of internal and external stakeholders under the leadership of the State Department for Social Protection, Senior Citizens Affairs and Special Programmes. A number of stakeholders will be asked to play a role in the evaluation process in light of their expected interest in the results of the evaluation and relative power to influence the results of the programme under evaluation. Table 1 provides a preliminary stakeholder analysis, which should be deepened by the evaluation team as part of the inception phase.
19. Accountability to affected populations is key and the evaluation will be committed to ensuring gender equality, equity and inclusion in the evaluation process, with participation and consultation in the evaluation of women, men, boys and girls from different groups (including persons with disabilities, the elderly and persons with other diversities such as ethnic and linguistic).

Table 1: Preliminary stakeholder analysis

Stakeholders	Interest and involvement in the evaluation
Internal stakeholders	

Resident Coordinator or his nominee	Key informant and UN system's lead – The Country's lead for the UN reform agenda within which this facility is availed to Kenya. The RC plays the lead role in the execution of the planned activity. In the evaluation process, the RC will co-chair the Evaluation internal committee and provide oversight services.
Joint SDG Fund implementing agencies in Kenya (WFP, FAO, UNICEF, ILO)	Key informants and primary stakeholder – Responsible for the planning and implementation of the intervention in country level. The UN agencies have an interest in learning from experience to inform decision-making. They are also called upon to account internally as well as to their beneficiaries and partners for performance and results of this programme. The UN agencies will be involved in using evaluation findings for programme implementation and/or in deciding on the next programme and partnerships.
Government of Kenya including Ministry of Public Service, Gender, Senior Citizen Affairs and Special Programmes, The National Social Security Fund (NSSF), National Hospital Insurance Fund (NHIF) and other national authorities¹⁸⁰	Key informant and primary stakeholder – Responsible for overall design of the programme and the day-to-day implementation of activities. In addition, the Government has a direct interest in knowing whether that the programme was aligned with its priorities, harmonized with the action of other partners and has the expected results.
Select County Governments	Key informant and primary stakeholder – Responsible for day-to-day programme implementation. In addition, the County Governments have a direct interest in knowing whether that the programme was aligned with their priorities, harmonized with the action of other partners and has the expected results.
Regional Bureau (RB) for Nairobi	Key informant and primary stakeholder – Responsible for both oversight of country offices and technical guidance and support, the regional bureau management has an interest in an independent/impartial account of operational performance as well as in learning from the evaluation findings to apply this learning to other country offices. The regional evaluation officers support country office/regional bureau management to ensure quality, credible and useful decentralized evaluations.
WFP Office of Evaluation (OEV)	Primary stakeholder – The Office of Evaluation has a stake in ensuring that decentralized evaluations deliver quality, credible and useful evaluations respecting provisions for impartiality as well as roles and accountabilities of various decentralized evaluation stakeholders as identified in the evaluation

¹⁸⁰ Ministry of Agriculture, Livestock & Fisheries, Ministry of Health, Ministry of Education, State Department for Gender, The National Treasury and Planning, Ministry of Devolution, State Department for ASALs, National Drought Management Authority

	policy. It may use the evaluation findings, as appropriate, to feed into centralized evaluations, evaluation syntheses or other learning products.
United Nations country team (UNCT)	Primary stakeholder - The harmonized action of the UNCT should contribute to the realization of the Government developmental objectives. It has therefore an interest in ensuring that this programme is effective in contributing to the United Nations concerted efforts.
External stakeholders	
NGOs: Africa Platform for Social Protection (APSP) Federation of Kenya Employers (FKE) Central Organization of Trade Unions (COTU) in Kenya	Key informants and primary stakeholder – NGOs are involved in the implementation of some activities within the JP. The results of the evaluation might affect future implementation modalities, strategic orientations and partnerships. Non state actors such as COTU and FKE will certainly use the findings to among other things plan and put in place better social protection schemes for the workers.
Donors: The Joint SDG Fund receives resources centrally from 12 donors namely: EU, Denmark, Germany, Ireland, Luxembourg, Monaco, The Netherlands, Norway, Portugal, Spain, Sweden, and Switzerland	Primary stakeholders – The joint programme was funded through a multi-partner trust fund. This means contributions are not entity- specific but aim to support broader UN system-level function. The donors have an interest in knowing whether the funds have been spent efficiently and if the work has been effective and contributed to their own strategies and programmes.
Beneficiaries ¹⁸¹	Primary stakeholders – As the ultimate recipients of assistance, have a stake in determining whether the assistance is appropriate and effective. As such, the level of participation in the evaluation of women, men, boys and girls from different groups will be determined, at inception phase when developing the evaluation design, and their respective perspectives will be sought. Direct interviews with beneficiaries will be done to seek their perspectives on the programme.

¹⁸¹ Government (Ministry of public service, gender, senior citizen affairs and special programmes, Ministry of Labour, NHIF, NSSF, Ministry of Agriculture),

3. Subject of the evaluation

3.1. SUBJECT OF THE EVALUATION

20. The UNSDG joint program for social protection, with a value of USD 2M supplemented with a further USD 1.3M from PUNOs, started on 15th January 2020 and it is scheduled for completion on 15th September 2022 after receiving a 6-month no cost extension. The Program aims at accelerating a progressive pathway towards a Universal Social Protection System in Kenya, in order to accelerate the achievement of SDGs targets relevant to Social Protection. The project targets capacity and systems strengthening as well as strengthening the enabling environment for integration with economic and social services. As such, the key beneficiary is the Government of Kenya.
21. The joint programme (JP) is focusing on Joint SDG fund outcome 1 on Integrated multi-sectoral policies to accelerate SDGs achievement implemented with greater scope and scale. Implementation of the Fund's activities is undertaken within the Kenya UNDAF of 2018-2022 focusing on strategic results area 2, outcome 6 which aims to ensure that by 2022, marginalized and vulnerable people have increased access to and utilize social protection, and services for prevention and response to gender-based violence and violence against children. To achieve this outcome the JP has been focusing on the following UNDAF outputs:
 - Output 6.1: Policy and Legislation: Government and partners have financial and technical capacity to review, develop and implement policies, legislation and strategies on Social Protection
 - Output 6.2: Systems strengthening and Service Delivery – Social and Child Protection systems have enhanced technical and financial capacity to develop and manage programmes at scale
 - Output 6.3: Coordination and intersectoral linkages – functional coordination at the national and county levels for intersectoral linkages enhanced.
22. The Kenya JP expected Outcomes are:
 - By 2022, marginalized and vulnerable people have increased access to and utilize social protection, and services for prevention and response to gender-based violence and violence against children (UNDAF outcome 6).
 - By 2022 Kenya has a clear plan and fiscal options for operationalizing universal social protection (Joint Programme Outcome).
23. The Kenya JP expected Outputs are:
 - Enabling environment for gender-responsive universal social protection in Kenya is strengthened.
 - Design options and roll out plans for gender responsive universal social protection programmes are developed.
 - Enhanced gender responsive integration between universal social protection programmes and economic and social services.
24. Within each output area, the PUNOs provide support to the Government of Kenya to ensure they have enhanced financial and technical capacity to develop the necessary policies and systems for the social protection sector. To strengthen the enabling environment for universal social protection, PUNOs have been capitalizing on the existing political will to

increase the financing for social protection and to make a comprehensive business case for universal social protection in Kenya. This includes cost-benefit and feasibility analyses with accompanying policy advocacy with stakeholders to garner support for universal protection.

25. Developing design options and rollout plans for universal social protection builds on the existing programmes and lifecycle approach adopted by Government of Kenya. The Joint Programme complements ongoing work around the expansion of the universal Inua Jamii programme for the elderly, the universal child grant and universal health coverage. Central to the design options work is building of consensus for the extension of social protection to the informal economy, strengthening the social security M&E system to track social security benefits and enable accurate monitoring. Through the matched PUNO funds, the JP has contributed to enhancement of the existing management information systems (Enhanced Single Registry and Consolidated Cash Transfer Programme MIS) as part of the technical assistance provided to the Ministry of Public service, Gender, Senior Citizen Affairs and Special Programmes to deliver its social assistance programmes effectively and link to complementary programmes in the education, health and agriculture sectors.
26. To fully realize UNDAF output three which seeks to enhance coordination and intersectoral linkages between social protection and other social and economic sectors, the joint programme work rely on the progression of outputs one and two with adequate and appropriate policies and systems developed. The PUNOs support Government of Kenya in enhancing knowledge sharing by mapping best practices and lessons on linkages to other social and economic sectors. This is done through dedicated advocacy with policy makers and technical decision makers and communication channels such as the Community of Practice.
27. The JP also focuses on activities to strengthen gender capacities and mainstreaming of gender to improve the gender responsiveness of the social protection sector, engaging gender experts in policy, strategic documents development and evidence building. In addition, there has been emphasis across activities in being gender responsive. Investment in this area through the JP aims to take the first steps in addressing the existing gap on availability of sex disaggregated data for the social protection sector as well as inadequacy of coverage.
28. The SDG Targets directly addressed by the Kenya Joint Programme are as follows:
 - **Goal 1:** End Poverty in all its forms everywhere
 - ✚ 1.2.1 Proportion of population living below the national poverty line, by sex and age. End programme target 29 percent.
 - ✚ 1.3.1 Proportion of population covered by social protection floors/systems, by sex, distinguishing children, unemployed persons, older persons, persons with disabilities, pregnant women, new-borns, work-injury victims and the poor and the vulnerable. End programme target 25 percent.
 - **Goal 2:** End hunger, achieve food security and improved nutrition and promote sustainable agriculture
 - ✚ 2.1.2 Number of people requiring food assistance as a result of drought emergencies (millions). End programme target 2.2 million.
 - **Goal 8:** Decent Work and Economic Growth
 - ✚ 8.5.2 Unemployment rate, by sex, age and persons with disabilities. End programme target to be determined.

- **Goal 10:** Reduced inequality within and among countries
 - ✦ 10.4.1 Labour share of GDP, comprising wages and social protection transfers. End programme target to be determined.
- **Goal 17:** Strengthen the means of implementation and revitalize the Global Partnership for Sustainable Development
 - ✦ 17.1.1 Total Government revenue as a proportion of GDP, by source. End of programme target to be determined.
 - ✦ 17.3.1 Foreign direct investments (FDI), official development assistance and South-South Cooperation as a proportion of total domestic budget. End of programme target to be determined.

29. The following SDG targets have been the focus of this joint programme. The table illustrates the selected goals and indicators alongside targets and methods of measurement.

SDG Target	Selected indicator	Baseline data 18/2019	Expected progress by 2022	Methods for measurement
Goal 1: End in all its forms everywhere	1.2.1 Proportion of population living below the national poverty line, by sex and age.	32 percent	29 percent	UNDESA Statistics/Kenya Integrated Household Budget Survey (KIHBS)
	1.3.1 Proportion of population covered by social protection floors/systems, by sex, distinguishing children, unemployed persons, older persons, persons with disabilities, pregnant women, new-borns, work-injury victims and the poor and the vulnerable.	12 percent	25 percent	Enhanced Single Registry
Goal 2: End hunger, achieve food security and improved nutrition and	2.1.2 Number of people requiring food assistance as a result of drought	2.4 million	2.2 million	Food security assessment reports

Promote sustainable agriculture	Emergencies (millions)			
Goal 8: Decent Work and Economic	8.5.2 Unemployment rate, by sex, age and	Unemployment rate 7.4percent	Tbd*	KIHBS

30. **Expected SDG impact:** This joint programme seeks to catalyze the role of the Government to achieve the SDGs and contribute to at least five of the SDG targets. In addition, the programme aims to support the Government to operationalize universal social protection through the generation of evidence, advocacy and policy and the development of specific plans and financing strategies to make social protection for all Kenyans a reality. It is supposed to identify and address critical gaps and bottlenecks in this process and prioritize integration between universal social protection and economic and social services while leveraging on partnerships for scale up. Investing in social protection leads to greater stability, reduced vulnerability of women and men, increased prosperity and a more dynamic and competitive society as well as a more resilient and productive workforce. As Kenya becomes a middle-income country, its social sectors of health, education and social protection must evolve to ensure that growth is shared. This joint programme is supporting the Government to move from a poverty-targeted approach to social protection, which excludes 78 percent of vulnerable people, towards a more inclusive and universal approach. Key to the programme is positioning the Government to scale up initiatives that will play a fundamental role in the achievement of the SDGs in Kenya. This was to be enabled through accompanying efforts to explore financing in this area whereby the programme aimed to learn from other sectors that have successfully mobilized public private partnerships and innovative financing strategies.

Expected JP results and impact:

31. The Kenya JP expected main results are:

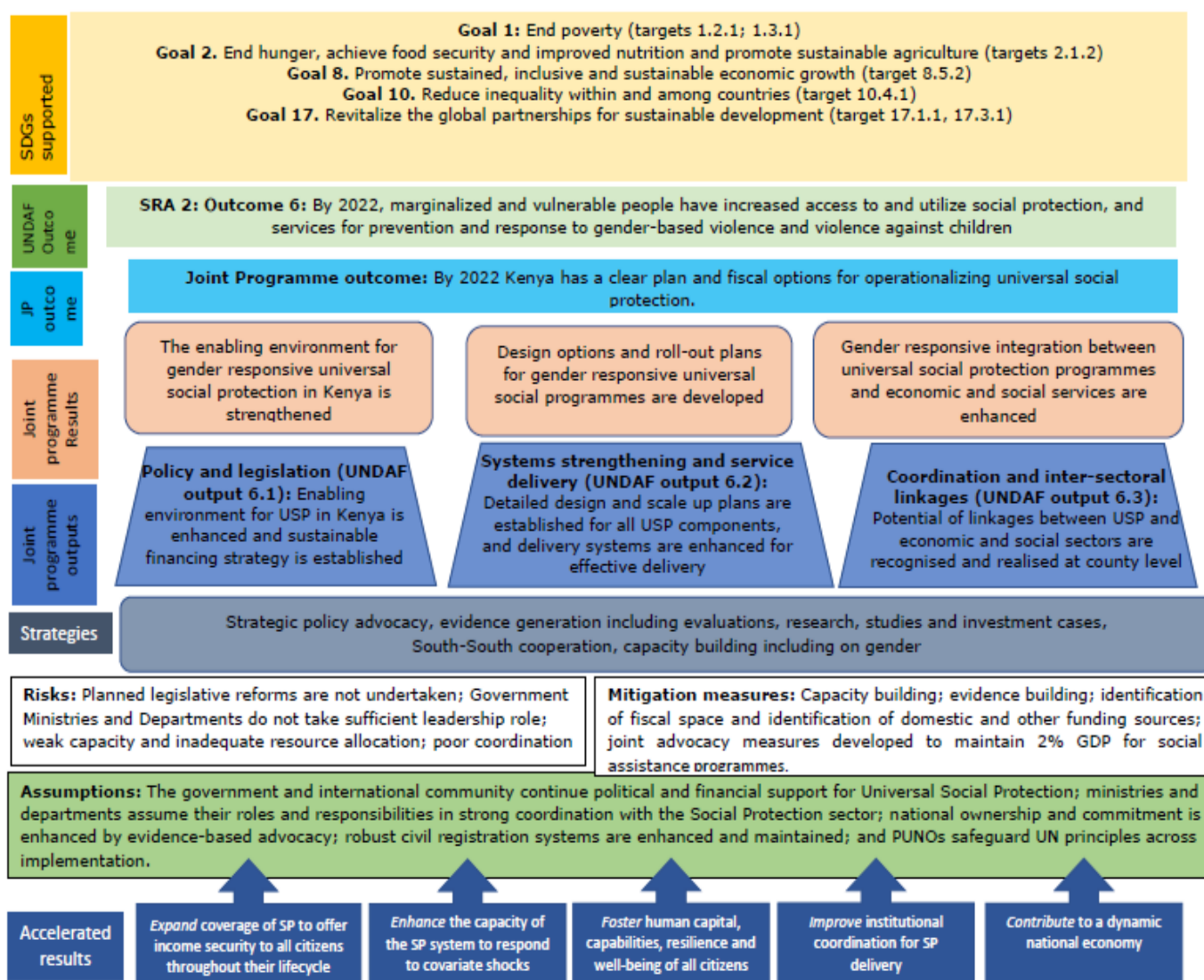
- Envisioned scale-up of social protection coverage, towards universalism to leave no one behind, following a sustainable financing approach through collaboration and advocacy with Government and relevant stakeholders.
- Strengthened Government leadership, capacity and coordination for Social Protection policy design and implementation within Government and with relevant stakeholders as element of SDG acceleration and leveraging on the Sectoral Group for Social Protection and SDG private sector platform towards achievement of SDG commitments, including a strong link to the national “Big Four” agenda towards attainment of the SDGs.

32. **The Theory of Change** for this joint programme as shown in figure 1 below is based on the UNDAF (United Nations Development Assistance Framework) results framework and consultations with the Government, employer organizations and trade unions. The joint programme aims to accelerate the existing work of the United Nations Country Team (UNCT) in support of UNDAF Outcome 2.6 and its corresponding outputs. Through intensifying

efforts across a range of national social protection result areas and multiple targets across five SDGs, this programme sought to address critical barriers to the realization of universal access to social protection. Pathways to this include improving the enabling environment, developing evidence-based and gender responsive policy, strategies and legal frameworks with sustainable financing options that demonstrate that universal social protection is a valuable and achievable investment for the future of the country. The joint programme was to provide social insurance options and innovative approaches that support extension of social protection to the rural and informal economy workers towards achieving universal social protection for the working age. It was further meant to establish the buy-in and political will required to support the Government's ambitious social protection system plans. Building on this foundation, practical and applicable designs for each of the necessary sub-elements of a universal social protection model with concrete plans towards national coverage will provide the roadmap required for the Government to turn its aspirations into reality. Furthermore, the programme was to identify complementarities between universal social protection provision and other social and economic sectoral interventions. For the effectiveness of the programme, gender was to be integrated as a means and as an objective in achieving the SDG goals.

33. Whilst a TOC is alluded to in the UNDAF, it has not been represented pictorially nor the assumptions related to the UNJP specified. The evaluation team will be expected to reconstruct the TOC and make a visual specific to the joint programme. The following are the key assumptions that this joint programme is founded on:
- The Government and international community continue their political and financial support for Universal Social Protection.
 - Ministries and departments assume their roles and responsibilities in strong coordination with the social protection sector.
 - National ownership and commitment are enhanced by evidence-based advocacy.
 - Robust civil registration systems are enhanced and maintained; and PUNOs safeguard UN principles across implementation.
 - The economy continues to grow alongside development of tax revenues to enable the resourcing of a tax-based social protection system.

Figure 1: Theory of Change graphic



3.2. SCOPE OF THE EVALUATION

34. This evaluation will focus on Joint SDG Fund’s programme implemented from January 2020 to September 2022. The evaluation will use mixed methods approach. The evaluation focus will be at national level in addition to covering select counties where some of the programme activities have been implemented.
35. The evaluation will also focus on the implementation of the program with the evaluation findings targeted at informing future programming. As such, the evaluation will look at achieved results, partnerships, implementation arrangements and systems, and any factors affecting the results achieved. The evaluation will be conducted from April 2022.

4. Evaluation approach, methodology and ethical considerations

4.1. EVALUATION QUESTIONS AND CRITERIA

36. The evaluation will address the key questions listed in the table below, which will be further developed and tailored by the evaluation team in a detailed evaluation matrix during the inception phase. Collectively, the questions aim at highlighting the key lessons and performance of the Joint SDG Fund with a view to informing future strategic and operational decisions.
37. The evaluation should analyse how gender, equity and wider inclusion objectives and Gender Equality and Women's Empowerment (GEWE) mainstreaming principles were included in the intervention design. The gender, equity and wider inclusion dimensions should be integrated into all evaluation criteria as appropriate.
38. The evaluation will also focus on disability in line with leaving no one behind principle: As persons with disabilities are among the most vulnerable and marginalized groups across countries and considering the critical role that social protection can play in supporting their inclusion, the joint programs had identified them as direct or indirect beneficiaries. In line with the Leaving No One Behind principle and the obligations stemming from the Convention on the Rights of Persons with Disabilities, even programs that do not target directly persons with disabilities should ensure that persons with disabilities within targeted population can access the program without discrimination. The evaluation will therefore assess to what extent:
 - The Joint programme design, implementation, and monitoring have been inclusive of persons with disabilities (accessibility, non-discrimination, participation of organizations of persons with disabilities, data disaggregation)
 - Has the Joint programme effectively contributed to the socio-economic inclusion of persons with disabilities by providing income security, coverage of health care, and disability-related costs across the life cycle?

Table 2 Evaluation questions and criteria

Evaluation questions		Criteria [
EQ1 : Relevance		
1.1.	To what extent is the programme in line with the needs of beneficiaries and partners, including Government, people living with disability, male and female?	Relevance
1.2	How relevant were the JP to priorities/policies at the national level and to the needs of the main vulnerable groups?	

1.3	How relevant was the jointness in programme design, implementation and management for addressing the country's development priorities and challenges?	
1.4	To what extent are the activities aligned with partner UN agency and donor policies and priorities?	
1.5	To what extent is the intervention based on a sound gender analysis? To what extent is the design and implementation of the intervention gender-sensitive?	
EQ2 : Effectiveness		
2.1	To what extent did the JP contribute to achieving its development objectives, especially around the 3 transformative results?	Effectiveness
2.2	What are the major factors that influenced progress in achievement or non-achievement of the outcomes/objectives of the intervention?	
2.3	To what extent did the intervention deliver results for the target groups	
2.4	To what extent did the program target persons with disabilities? <ul style="list-style-type: none"> • Not specifically targeted • One of the groups of direct beneficiaries targeted • Main target group for the program 	
2.5	To what extent did the design and implementation of activities of the joint program supported include disability-related accessibility and non-discrimination requirement? <ul style="list-style-type: none"> • No requirements • General reference • Specific requirements 	
2.6	To what extent have persons with disabilities, in particular children and women with disabilities, been consulted through their representative organizations? <ul style="list-style-type: none"> • Not invited • Invited • Specific outreach 	
2.7	To what extent did support to data collection and analysis, registries, and information system feature disability? <ul style="list-style-type: none"> • No reference to disability 	

	<ul style="list-style-type: none"> Disability included via Washington group short set or similar but no analysis Disability included via Washington group short set or similar <ul style="list-style-type: none"> Part of general analysis with specific analysis 	
2.8	<p>To which extent did the program contribute to support inclusion of persons with disabilities via:</p> <ul style="list-style-type: none"> Ensuring basic income security Coverage of health care costs, including rehabilitation and assistive devices Coverage of disability-related costs, including community support services Facilitate access to inclusive early childhood development, education, and work/livelihood 	
2.9	To what extent has the JP contributed to accelerating the SDGs at the national level?	
2.10	To what extent the JP produced a catalytic effect in terms of generating systems change across sectors to leave no one behind?	
2.11	To what extent has the JP contributed to achievement of UNDAF/CF outcome/s and national development priorities?	
EQ3 : Efficiency		
3.1	Was the programme implemented in a timely way?	Efficiency
3.2	Were the activities cost-efficient? Was the programme implemented in the most efficient way compared to alternatives? Were the project strategies efficient in terms of financial and human resource inputs as compared to outputs?	
3.3	Did the monitoring system efficiently meet the needs and requirements of the project?	
3.4	Was the JP intervention more efficient in comparison to what could have been done through a single agency intervention?	
3.5	To what extend did the JP contribute to enhancing UNCT coherence and UNCT efficiency (reducing transaction costs)?	
EQ4 : Coherence		
4.1	To what extent are PUNO's activity coherent with key policies/programming of other partners operating in the context?	Coherence
4.2	To what extent are human rights taken into account?	

EQ : Lessons Learned		
5.1	What are lessons learned from the project up to this point? Are there any recommendations to improve the project's relevance, efficiency, effectiveness?	Lessons
EQ 6: Sustainability		
6.1	To what extent has the strategy adopted by the JP contributed to sustainability of results, especially in terms of LNOB and the social protection system?	Sustainability
6.2	To what extent has the JP supported the long-term buy-in, leadership and ownership by the Government and other relevant stakeholders?	
6.3	How likely will the results be sustained beyond the JP through the action of Government and other stakeholders and/or UNCTs?	

39. The evaluation will apply the international evaluation criteria of relevance, effectiveness, efficiency and coherence. The evaluation will also review and document lessons learnt. Gender, equity and wider inclusion will be mainstreamed across the evaluation.

4.2. EVALUATION APPROACH AND METHODOLOGY

40. The methodology will be designed by the evaluation team with consultation with the evaluation manager and internal committee during the inception phase. It should:

- Employ the relevant evaluation criteria above
- Apply an evaluation matrix geared towards addressing the key evaluation questions taking into account the data availability challenges, the budget and timing constraints
- Ensure through the use of mixed methods that women, girls, men and boys from different stakeholder's groups participate and that their different voices are heard and used

41. The methodology chosen should demonstrate attention to impartiality and reduction of bias by relying on mixed methods (quantitative, qualitative, participatory etc.) and different primary and secondary data sources that are systematically triangulated (documents from different sources; a range of stakeholder groups, including beneficiaries; direct observation in different locations; across evaluators; across methods etc.). It will take into account any challenges to data availability, validity and reliability, as well as any budget and timing constraints. The evaluation questions, lines of inquiry, indicators, data sources and data collection methods will be brought together in an evaluation matrix, which will form the basis of the sampling approach and data collection and analysis instruments (desk review, interview and observation guides, survey questionnaires etc.).

42. The methodology should be sensitive in terms of GEWE, equity and inclusion, indicating how the perspectives and voices of diverse groups (men and women, boys, girls, the elderly, people living with disabilities and other marginalized groups) will be sought and taken into account. The methodology should ensure that primary data collected is disaggregated by sex and age; an explanation should be provided if this is not possible.
43. Looking for explicit consideration of gender and equity/inclusion in the data after fieldwork is too late; the evaluation team must have a clear and detailed plan for collecting data from women and men in gender and equity-sensitive ways before fieldwork begins.
44. The evaluation findings, conclusions and recommendations must reflect gender and equity analysis. The findings should include a discussion on intended and unintended effects of the intervention on gender equality and equity dimensions. The report should provide lessons/challenges/recommendations for conducting gender and equity-responsive evaluations in the future.
45. The following mechanisms for independence and impartiality will be employed. a) an internal Evaluation Committee (EC) will be established to manage and make decisions on the evaluation. The committee will review and approve the Terms of Reference, budget, evaluation team, and inception and evaluation reports, to help maintain distance from influence by programme implementers, while also supporting management of the evaluation; b) a Reference Group (RG) including external stakeholders will be set up to steer the evaluation process and further support the relevance, utility and independence of the evaluation.
46. The Evaluation team will be required to expand on the methodology presented in the ToR and develop a detailed evaluation matrix in the inception report.
47. The selected evaluation team will be expected to undertake a risk assessment as part of the inception process. COVID-19 should be identified as a risk and accompanied by a mitigating measure.

4.3. EVALUABILITY ASSESSMENT

48. The main sources of information for the evaluation team will be: The joint programme documents, quarterly, semi-annual and annual reports, Kenya integrated household survey 2015-2016, Kenya UNDAF 2018-2022 plan and annual reports, social protection sector review of 2017, Kenya Economic Survey 2020, Kenya Social Protection Sector annual report 2020.
49. Key data and information is available. During the inception phase, the evaluation team will be expected to perform an in-depth evaluability assessment and critically assess data availability, quality and gaps expanding on the information provided in paragraph 45. This assessment will inform the data collection and the choice of evaluation methods. The evaluation team will need to systematically check accuracy, consistency and validity of collected data and information and acknowledge any limitations/caveats in drawing conclusions using the data during the reporting phase.

4.4. ETHICAL CONSIDERATIONS

50. The evaluation must conform to [UNEG ethical guidelines for evaluation](#). Accordingly, the selected evaluation firm is responsible for safeguarding and ensuring ethics at all stages of the evaluation process. This includes, but is not limited to, ensuring informed consent, protecting privacy, confidentiality and anonymity of respondents, ensuring cultural sensitivity, respecting the autonomy of respondents, ensuring fair recruitment of

participants (including women and socially excluded groups) and ensuring that the evaluation results do no harm to respondents or their communities.

51. The evaluation firm will be responsible for managing any potential ethical risks and issues and must put in place, in consultation with the evaluation manager, processes and systems to identify, report and resolve any ethical issues that might arise during the implementation of the evaluation. Ethical approvals and reviews by relevant national and institutional review boards must be sought where required.
52. The team and evaluation manager will not have been involved in the design, implementation or monitoring of the joint programme nor have any other potential or perceived conflicts of interest. All members of the evaluation team will abide by the [2020 UNEG Ethical Guidelines](#), including the Pledge of Ethical Conduct as well as the WFP technical note on gender. The evaluation team and individuals who participate directly in the evaluation at the time of issuance of the purchase order are expected to sign a confidentiality agreement and a commitment to ethical conduct. These templates will be provided by the country office when signing the contract.

4.5. QUALITY ASSURANCE

53. The WFP evaluation quality assurance system sets out processes with steps for quality assurance and templates for evaluation products based on a set of [Quality Assurance Checklists](#). The quality assurance will be systematically applied during this evaluation and relevant documents will be provided to the evaluation team. This includes checklists for feedback on quality for each of the evaluation products. The relevant checklist will be applied at each stage, to ensure the quality of the evaluation process and outputs. Given that this is an evaluation for a joint programme, the role of the PUNOs and the RCO will be essential.
54. The WFP Decentralized Evaluation Quality Assurance System (DEQAS) is based on the UNEG norms and standards and good practice of the international evaluation community and aims to ensure that the evaluation process and products conform to best practice. This quality assurance process does not interfere with the views or independence of the evaluation team but ensures that the report provides credible evidence and analysis in a clear and convincing way and draws its conclusions on that basis.
55. The WFP evaluation manager will be responsible for ensuring that the evaluation progresses as per the [DEQAS Process Guide](#) and for conducting a rigorous quality control of the evaluation products ahead of their finalization.
56. To enhance the quality and credibility of decentralized evaluations, an outsourced quality support (QS) service directly managed by the WFP Office of Evaluation reviews the draft ToR, the draft inception and the evaluation reports, and provides a systematic assessment of their quality from an evaluation perspective, along with recommendations.
57. The evaluation manager will share the assessment and recommendations from the quality support service with the team leader, who will address the recommendations when finalizing the inception and evaluation reports. To ensure transparency and credibility of the process in line with the [UNEG norms and standards](#),^[1] a rationale should be provided for comments that the team does not take into account when finalizing the report.
58. The evaluation team will be required to ensure the quality of data (reliability, consistency and accuracy) throughout the data collection, synthesis, analysis and reporting phases.

^[1] [UNEG Norm #7](#) states “that transparency is an essential element that establishes trust and builds confidence, enhances stakeholder ownership and increases public accountability”

59. The evaluation team should be assured of the accessibility of all relevant documentation within the provisions of the directive on disclosure of information. This is available in the [WFP Directive CP2010/001 on information disclosure](#).
60. If a firm is contracted WFP expects that all deliverables from the evaluation team are subject to a thorough quality assurance review by the evaluation firm in line with the WFP evaluation quality assurance system prior to submission of the deliverables to WFP.
61. All final evaluation reports will be subject to a post hoc quality assessment (PHQA) by an independent entity through a process that is managed by the Office of Evaluation. The overall PHQA results will be published on the WFP website alongside the evaluation report.

5. Organization of the evaluation

5.1. PHASES AND DELIVERABLES

62. Table 4 presents the structure of the main phases of the evaluation, along with the deliverables and deadlines for each phase. Annex 1 presents a more detailed timeline.

Table 4: Summary timeline – key evaluation milestones			
Main phases	Indicative timeline	Tasks and deliverables	Responsible
1. Preparation	November 2021 to March 2022	Preparation of ToR Selection of the evaluation team & contracting Document review	Evaluation manager/ Evaluation committee
2. Inception	May 2022	Inception mission Inception report	Evaluation team
3. Data collection	June -July 2022	Fieldwork Exit debriefing	Evaluation team
4. Reporting	July - August 2022	Data analysis and report drafting Comments process Evaluation report	Evaluation team
5. Dissemination, including a learning a workshop and follow-up	September-October 2022	Management response Dissemination of the evaluation report	Evaluation team/Evaluation committee

5.2. EVALUATION TEAM COMPOSITION

63. The evaluation team is expected to include at least 3 team members, including the team leader. A mix of national and international evaluator(s) will be required should an international firm be awarded the contract. To the extent possible, the evaluation will be conducted by a gender-balanced and geographically and culturally diverse team with appropriate skills to assess gender dimensions of the subject as specified in the scope, approach and methodology sections of the ToR. At least one team member should have UN and Government experience.
64. The team will be multi-disciplinary and include members who, together, include an appropriate balance of technical expertise and practical knowledge in the following areas:
- Social protection
 - Institutional capacity strengthening
 - Good knowledge of gender, equity, disability and wider inclusion issues
 - At least 7 years' experience in conducting evaluations of similar development programmes
 - Ability to deal with multi-stakeholder groups
 - Ability to write focused evaluation reports
 - Wide experience in quantitative and qualitative data collection methods
 - Willingness and ability to travel to the different programme sites in the country
 - All team members should have strong analytical and communication skills, evaluation experience with a track record of written work on similar assignments, and familiarity with Kenya.
 - Team members should have good command of oral and written English language.
65. The team leader will have expertise in one of the key competencies listed above as well as demonstrated experience in leading similar evaluations, including designing methodology and data collection tools. Special training in Monitoring and Results-Based Management is considered an asset. She/he will also have leadership, analytical and communication skills, including a track record of excellent English writing, synthesis and presentation skills. Her/his primary responsibilities will be: i) defining the evaluation approach and methodology; ii) guiding and managing the team; iii) leading the evaluation mission and representing the evaluation team; and iv) drafting and revising, as required, the inception report, the end of field work (i.e., exit) debriefing presentation and evaluation report in line with DEQAS.
66. Team members will: i) contribute to the methodology in their area of expertise based on a document review; ii) conduct field work; iii) participate in team meetings and meetings with stakeholders; and iv) contribute to the drafting and revision of the evaluation products in their technical area(s).
67. The evaluation team will conduct the evaluation under the direction of its team leader and in close communication with the evaluation manager and the evaluation committee. The successful firm will need to have the right team composition as detailed above.

5.3. ROLES AND RESPONSIBILITIES

68. **A PUNO-specific internal evaluation committee** is formed to help ensure the independence and impartiality of the evaluation. The committee will include representatives from WFP, UNICEF, ILO, FAO, and Resident Coordinator's Office. The key role of evaluation committee will be to overseeing the evaluation process, making key decisions and reviewing and approving the evaluation products. Annex 3 provides further information on the composition of the evaluation committee. The key roles will include:

- Assign an evaluation manager for the evaluation of Kenya Joint SDG Fund's programme
- Approve the final ToR, inception and evaluation reports
- Approve the evaluation team selection
- Ensure the independence and impartiality of the evaluation at all stages, including establishment of an evaluation committee and a reference group
- Participate in discussions with the evaluation team on the evaluation design and the evaluation subject, its performance and results with the evaluation manager and the evaluation team
- Organize and participate in two separate debriefings, one internal and one with external stakeholders
- Oversee dissemination and follow-up processes, including the preparation of a management response to the evaluation recommendations.

69. **The evaluation manager** manages the evaluation process through all phases including: drafting this ToR; identifying the evaluation team; preparing and managing the budget; setting up the evaluation committee and evaluation reference group; ensuring quality assurance mechanisms are operational and effectively used; consolidating and sharing comments on draft inception and evaluation reports with the evaluation team; ensuring that the team has access to all documentation and information necessary to the evaluation; facilitating the team's contacts with local stakeholders; supporting the preparation of the field mission by setting up meetings and field visits, providing logistic support during the fieldwork and arranging for interpretation, if required; organizing security briefings for the evaluation team and providing any materials as required; and conducting the first level quality assurance of the evaluation products. The evaluation manager will be the main interlocutor between the team, represented by the team leader, the evaluation committee, to ensure a smooth implementation process.

70. **An evaluation reference group (ERG)** is formed as an advisory body with representation from Government of Kenya, WFP, UNICEF, ILO, FAO. The evaluation reference group members will review and comment on the draft evaluation products and act as key informants in order to contribute to the relevance, impartiality and credibility of the evaluation by offering a range of viewpoints and ensuring a transparent process.

71. **The regional bureaus of PUNO agencies:** will take responsibility to:

- Advise the evaluation manager and provide support to the evaluation process where appropriate
- Participate in discussions with the evaluation team on the evaluation design and on the evaluation subject as required
- Provide comments on the draft ToR, inception and evaluation reports
- Support the preparation of a management response to the evaluation and track the implementation of the recommendations.

While the regional evaluation officers will perform most of the above responsibilities, other regional bureau-relevant technical staff may participate in the evaluation reference group and/or comment on evaluation products as appropriate.

72. **Relevant WFP Headquarters divisions will take responsibility to:**

- Comment on the evaluation TOR, inception and evaluation reports, as required.

73. **The Office of Evaluation (OEV):** OEV is responsible for overseeing WFP led decentralized evaluation function, defining evaluation norms and standards, managing the outsourced quality support service, publishing as well submitting the final evaluation report to the PHQA. OEV also ensures a help desk function and advises the Regional Evaluation Officer, the Evaluation Manager and Evaluation teams when required. Internal and external stakeholders and/or the evaluators are encouraged to reach out to the regional evaluation officer and the Office of Evaluation helpdesk (wfp.decentralizedevaluation@wfp.org) in case of potential impartiality breaches or non-adherence to UNEG ethical guidelines.

5.4. SECURITY CONSIDERATIONS

74. Security clearance where required is to be obtained from WFP Kenya
75. Consultants hired by WFP are covered by the United Nations Department of Safety & Security (UNDSS) system for United Nations personnel, which covers WFP staff and consultants contracted directly by WFP. Independent consultants must obtain UNDSS security clearance for travelling from the designated duty station and complete the United Nations basic and advance security trainings (BSAFE & SSAFE) in advance, print out their certificates and take them with them.
76. As an “independent supplier” of evaluation services to WFP, the contracted firm will be responsible for ensuring the security of the evaluation team, and adequate arrangements for evacuation for medical or situational reasons. However, to avoid any security incidents, the evaluation manager will ensure that the WFP country office registers the team members with the security officer on arrival in country and arranges a security briefing for them to gain an understanding of the security situation on the ground. The evaluation team must observe applicable United Nations Department of Safety and Security rules and regulations including taking security training (BSAFE & SSAFE), curfews (when applicable) and attending in-country briefings.

5.5. COMMUNICATION

77. To ensure a smooth and efficient process and enhance the learning from this evaluation, the evaluation team should place emphasis on transparent and open communication with key stakeholders. These will be achieved by ensuring a clear agreement on channels and frequency of communication with and between key stakeholders during the inception period.
78. The dissemination plan will be agreed on with the internal committee and will include a GEEW responsive dissemination strategy, indicating how findings including GEEW will be disseminated and how stakeholders interested or those affected by GEEW issues will be engaged. It will include but not limited to a policy brief summarizing the key findings and recommendations and a workshop to disseminate the findings to key stakeholders for all processes. This will be clearly spelled out in the contract. It will also be sensitive to those with disabilities. The deliverables will not be required to be translated.
79. Based on the stakeholder analysis, the communication and knowledge management plan (in Annex 5) identifies the users of the evaluation to involve in the process and to whom the report should be disseminated. The communication and knowledge management plan indicates how findings including gender, equity and wider inclusion issues will be disseminated and how stakeholders interested in, or affected by, gender, equity and wider inclusion issues will be engaged.
80. As part of the international standards for evaluation, the PUNOs requires that all evaluations are made publicly available. It is important that evaluation reports are accessible to a wide audience, thereby contributing to the credibility of WFP, FAO, ILO and UNICEF – through transparent reporting – and the use of evaluation.

5.6. BUDGET

81. The evaluation will be financed from the Joint SDG Fund evaluation budget.
82. The offer will include a detailed budget for the evaluation, including consultant fees, travel costs and other costs (interpreters, etc.). The proposals will be assessed according to technical and financial criteria. Firms are encouraged to submit realistic, but competitive

financial proposals. The budget is inclusive of all travel, subsistence and other expenses; including any workshops or communication products that need to be delivered.

83. Please send any queries to:

a) Beatrice Mwangela, Head of M&E, Kenya Country Office, beatrice.mwangela@wfp.org,
+254 722241488

b) Copying David Kamau, David.kamau@wfp.org

ToR Annex 1: Evaluation Timeline

	Phases, deliverables and timeline	Key dates
Phase 1 - Preparation		Up to 9 weeks
EM	Desk review, draft ToR and quality assurance (QA) by EM and REO using ToR QC	15 th January 2022
EM	Share draft ToR with quality support service (DEQS) and organize follow-up call with DEQS	20 th January
EM	Review draft ToR based on DEQS and REO feedback and share with ERG	25 th January
EM	Start identification of evaluation team	4 th February
ERG	Review and comment on draft ToR	11 th February
EM	Review draft ToR based on comments received and submit final ToR to EC Chair	18 th February
EC Chair	Approve the final ToR and share with ERG and key stakeholders	25 th February
EM	Assess evaluation proposals and recommends team selection	4 th March
EM	Evaluation team recruitment/contracting	18 th March
EC Chair	Approve evaluation team selection and recruitment of evaluation team	25 th April
Phase 2 - Inception		Up to 7 weeks
EM/TL	Brief core team	4 th May
ET	Desk review of key documents	11 th May
	Inception mission in the country (if applicable)	18 th May
ET	Draft inception report	25 th May
EM	Quality assurance of draft IR by EM and REO using QC, share draft IR with quality support service (DEQS) and organize follow-up call with DEQS	2 nd June
ET	Review draft IR based on feedback received by DEQS, EM and REO	9 th June
EM	Share revised IR with ERG	
ERG	Review and comment on draft IR	16 th June
EM	Consolidate comments	
ET	Review draft IR based on feedback received and submit final revised IR	23 rd June
EM	Review final IR and submit to the evaluation committee for approval	
EC Chair	Approve final IR and share with ERG for information	23rd June

Phase 3 – Data collection		Up to 3 weeks
EC Chair/EM	Brief the evaluation team at CO	27 th June
ET	Data collection	27 th June -8 th July
ET	In-country debriefing (s)	11 th July
Phase 4 - Reporting		Up to 11 weeks
ET	Draft evaluation report	25 th July
EM	Quality assurance of draft ER by EM and REO using the QC, share draft ER with quality support service (DEQS) and organize follow-up call with DEQS	5 th August
ET	Review and submit draft ER based on feedback received by DEQS, EM and REO	13 th August
EM	Circulate draft ER for review and comments to ERG, RB and other stakeholders	
ERG	Review and comment on draft ER	
EM	Consolidate comments received	
ET	Review draft ER based on feedback received and submit final revised ER	27 th August
EM	Review final revised ER and submit to the evaluation committee	
EC Chair	Approve final evaluation report and share with key stakeholders for information	10th September
Phase 5 - Dissemination and follow-up		Up to 4 weeks
EC Chair	Disseminate findings and Prepare management response	September - October 2022
EM	Share final evaluation report and management response with the REO and OEV for publication and participate in end-of-evaluation lessons learned call	

ToR Annex 2: Role and Composition of the Evaluation Committee

Purpose and role: The purpose of the evaluation committee (EC) is to ensure a credible, transparent, impartial and quality evaluation in accordance with WFP evaluation policy. It will achieve this by supporting the evaluation manager in making decisions, reviewing draft deliverables (ToR, inception report and evaluation report) and submitting them for approval by the Country Director/Deputy Country Director (CD/DCD) and the Resident Coordinator who will be the co-chairs of the committee.

Composition: The evaluation committee will be composed of the following staff:

- WFP Deputy Country Director and Resident Coordinator (Chair of the Evaluation Committee)
- Evaluation manager (Evaluation Committee Secretariat)
- Heads of Programme or programme officer(s) from the respective PUNOs directly in charge of the subject(s) of evaluation
- Regional evaluation officers from PUNO agencies (REO)
- WFP Kenya Country office head of programme support services
- WFP Country office procurement officer (if the evaluation is contracted to a firm)
- Other staff considered useful for this process from the respective PUNOs.

TOR Annex 3: Role and Composition of the Evaluation Reference Group

Purpose and role: The evaluation reference group (ERG) is an advisory group providing advice and feedback to the evaluation manager and the evaluation team at key moments during the evaluation process. It is established during the preparatory stage of the evaluation and is mandatory for all decentralized evaluations.

The overall purpose of the evaluation reference group is to contribute to the credibility, utility and impartiality of the evaluation. For this purpose, its composition and role are guided by the following principles:

- **Transparency:** Keeping relevant stakeholders engaged and informed during key steps ensures transparency throughout the evaluation process
- **Ownership and Use:** Stakeholders' participation enhances ownership of the evaluation process and products, which in turn may impact on its use
- **Accuracy:** Feedback from stakeholders at key steps of the preparatory, data collection and reporting phases contributes to accuracy of the facts and figures reported in the evaluation and of its analysis.

Members are expected to review and comment on draft evaluation deliverables and share relevant insights at key consultation points of the evaluation process.

The main roles of the evaluation reference group are as follows:

- Review and comment on the draft ToR
- Suggest key references and data sources in their area of expertise
- Participate in face-to-face or virtual briefings to the evaluation team during the inception phase and/or evaluation phase
- Review and comment on the draft inception report
- Participate in field debriefings (optional)
- Review and comment on the draft evaluation report and related annexes, with a particular focus on: a) factual errors and/or omissions that could invalidate the findings or change the conclusions; b) issues of political sensitivity that need to be refined in the way they are addressed or in the language used; c) recommendations
- Participate in learning workshops to validate findings and discuss recommendations
- Provide guidance on suggested communications products to disseminate learning from the evaluation.

The evaluation reference group will be composed of representatives from the main government counterparts i.e. Ministry of Public Service, Gender, Senior Citizen Affairs and Special Programmes; National Social Security Fund (NSSF); National Hospital Insurance Fund (NHIF); Ministry of Labour; Selected Counties and representatives from the four implementing United Nations agencies (UNICEF, FAO, WFP, and ILO), UNRCO and the funder (secretariat of Joint SDG Fund).

Composition

Country office	Name
<p>Core members:</p> <ul style="list-style-type: none"> • WFP Deputy Country Director and the Resident Coordinator (Chair) • Evaluation Manager (secretary or delegated chair) (WFP head of M&E) • Respective PUNO heads of social protection and technicians • WFP Head of programme support services • Other PUNO staff members with relevant expertise e.g. nutrition, resilience, gender, school feeding, partnerships • Government, NGOs and donor partner(s) (with knowledge of the intervention and ideally an M&E profile) <ul style="list-style-type: none"> • Secretary for Social Development at the State Department for Social Protection, Senior Citizen Affairs and Special Programmes • Directorate of Social Protection representatives • Directorate of Social Assistance representatives • Directorate for Children's Services • NHIF representative • NSSF representative • Ministry of Labour representative • Ministry of Agriculture representative • Federation of Kenya Employers representative • Central Organization of Trade Unions representative 	<p>Emmanuel Bigenimana/Stephen Jackson/Jane Oteba Beatrice Mwongela David Kamau/Susan Momanyi/Joy Mulema/Hellen Magutu Evaline Dian'ga TBD</p>
WFP Regional bureau	Name
<p>Core members:</p> <ul style="list-style-type: none"> • Regional Evaluation Officers • Regional Monitoring Advisors • A member of the Regional Programme Unit • Regional Gender Adviser 	<p>TBD</p>

ToR Annex 4: Communication and Knowledge Management Plan

The final evaluation report will be uploaded to the Joint SDG Fund online global monitoring platform and thus be accessible globally and will be disseminated through other Joint SDG Fund channels. In Kenya, the final evaluation report will be disseminated through all members of the reference group, and it will thus be ensured that all stakeholders that were involved in the implementation of the JP will be informed about the results achieved and lessons learned. In terms of sustainability, it will be especially ensured that the final findings and recommendations will be disseminated to the Government of Kenya, which will primarily happen through them being members of the reference group and thus being closely involved in the evaluation process from the beginning. Below table shows key communication products, to whom, from whom, the how and the purpose.

When Evaluation phase	What Product	To whom Target audience	From whom Creator lead	How Communication channel	Why Communication purpose
Preparation	Draft TOR	Evaluation Reference Group	Evaluation manager	Email	To request review of and comments on TOR
	Final TOR	Evaluation Reference Group; WFP Management; Evaluation community;	Evaluation manager	Email; WFPgo; Joint SDG Fund online global monitoring platform	To inform of the final or agreed upon overall plan, purpose, scope and timing of the evaluation
Inception	Draft Inception report	Evaluation Reference Group	Evaluation manager	Email	To request review of and comments on IR
	Final Inception Report	Evaluation Reference Group;	Evaluation manager	Email; WFPgo; Joint SDG Fund online global monitoring platform	To inform key stakeholders of the detailed plan for the evaluation, including critical dates and milestones, sites to be visited, stakeholders to be engaged etc.
Data collection	Debriefing power-point	Evaluation reference group, management and programme staff;	Team leader (may be sent to EM who then forwards to the relevant staff)	Meeting	To invite key stakeholders to discuss the preliminary findings
Reporting	Draft Evaluation report	Evaluation Reference Group	Evaluation manager	Email	To request review of and comments on ER
	Validation workshop	Evaluation Reference Group; partners	Evaluation manager and Team Leader	Meeting	To discuss preliminary conclusions and recommendations

	Final Evaluation report	Evaluation Reference Group; donors and partners; Evaluation community; general public	Evaluation manager	Email; WFP go; WFP.org; Evaluation Network platforms (e.g. UNEG, ALNAP); Joint SDG Fund online global monitoring platform	To inform key stakeholders of the final main product from the evaluation and make the report available publicly
Dissemination & Follow-up	Draft Management Response	Evaluation Reference Group;	Evaluation manager	Email	To discuss actions to address the evaluation recommendations and elicit comments
	Final Management Response	Evaluation Reference Group	Evaluation manager	Email; WFP go; WFP.org; Joint SDG Fund online global monitoring platform	To ensure that all relevant staff are informed of the commitments made on taking actions and make the Management Response publicly available

Annexes 2. Timeline

195. An agreed revised schedule, following feedback from the evaluation managers.

	Phases, deliverables, and timeline	Key dates
Phase 1 – Preparation		Up to 9 weeks
EM	Desk review, draft ToR, and quality assurance (QA) by EM and REO using ToR QC	15th January 2022
EM	Share draft ToR with quality support service (DEQS) and organize follow-up call with DEQS	20th January
EM	Review draft ToR based on DEQS and REO feedback and share with ERG	25th January
EM	Start identification of evaluation team	4th February
ERG	Review and comment on draft ToR	11th February
EM	Review draft ToR based on comments received and submit final ToR to EC Chair	18th February
EC Chair	Approve the final ToR and share with ERG and key stakeholders	25th February
EM	Assess evaluation proposals and recommends team selection	4th March
EM	Evaluation team recruitment/contracting	18th March
EC Chair	Approve evaluation team selection and recruitment of evaluation team	25th April
Phase 2 – Inception		Up to 7 weeks
EM/TL	Brief core team	23 rd July
ET	Desk review of key documents	From 23 rd July
ET	Inception (and in-depth data collection) by TL	25 th July- 2 nd August
ET	Draft inception report	5 th August
EM	Quality assurance of draft IR by EM and REO and ERG using QC, share draft IR with quality support service (DEQS) and organize follow-up call with DEQS	11 th August
ET	Review draft IR based on feedback received by DEQS, EM, ERG and REO	17 th August
EM	Consolidate comments	11 th August
ET	Review draft IR based on feedback received and submit final revised IR	19 th August
EM	Review final IR and submit to the evaluation committee for approval	22 nd August
EC Chair	Approve final IR and share with ERG for information	22nd August
Phase 3 – Data collection		Up to 3 weeks
EC Chair/EM	Brief the evaluation committee	
ET	Data collection	15 th -23 rd August
ET	Sharing of preliminary findings	5 th September
Phase 4 – Reporting		Up to 11 weeks
ET	Draft evaluation report	15 th September
EM	Quality assurance of draft ER by EM, REO and EC and submission of comments to the ET.	21 st September
ET	Submit revised report-based feedback received from EM, REO and EC	28 th September
EM	Submit revised draft report for DEQS review	29 th September
EM	Submit DEQS and RG comments to ET	7 th October
ET	Review draft ER based on feedback from DEQS and submit a final report	14 th October
Phase 5 – Dissemination and follow-up		
	Disseminate findings and Prepare management response	October onwards

Annexes 3. Methodology

196. In addition to the suggested tools, approaches and methodology as presented section 1.4 of the main document, the following needs to be understood regarding the methodology and approach taken.

197. **Data collection and timeline.** As is apparent from the timeline of the assignment (see Annex 2), and in-response to the General Elections that took place August 9th, 2022, and the potential disturbances that these could cause, the ET modified the data collection approach. Specifically, the ET developed data collection tools early on during inception and used these tools to collect preliminary original data from respondents during the inception phase. This demanded that the team focus considerable attention to data collection during inception, rather than focus solely on inception tasks.

198. Following the submission of the inception report and in response to comments, the ET modified the data collection tools and where needed collected further data from previously interviewed respondents or new ones.

199. The above approach allowed the ET to make the best use of the very limited time available for this assignment and secure the best possible opportunities to collect all the data needed.

200. **Sampling.** Given the nature of the programme, there was no sampling in relation to stakeholders. Rather, representatives from all direct stakeholders were engaged. General population that benefited from activities conducted during the Joint Programme were not engaged with. In discussion with the commissioners of the evaluation it was determined that the resources needed to engage this group, group did not warrant the added data that would be generated from such as an exercise. Therefore, persons with direct experience working with the groups targeted by Joint Programme Activities were engaged with as expert respondents.

201. **Theory of change.** The time limitations imposed on this assignment by the imminent closure of the task meant that being able to bring key stakeholders together to conduct a Theory of Change recreation workshop was not possible. Therefore, the ET recreated the ToC based on an assessment of the original TOC found in the ToR and made adaptations based on the data collected during the assignment. The revised figure and text represent a Theory in Use (TiU). This means that it is a reflection of both what happened, and the results of the activities conducted (see Annex 9).

Annexes 4. Evaluation Matrix

202. Below the evaluation matrix is presented. Critically the documents that were reviewed are official documents and hence these will be treated as reliable and accurate. Any error in documentation reviewed will therefore be reflected in the evaluation. This is an important observation because the number of documents is limited.

Evaluation Question				Criteria
Relevance				
Sub questions	Indicators	Data collection methods	Sources of data/information and comments on what may be available	Data analysis methods/ triangulation
1.1 To what extent is the programme in line with the needs of beneficiaries and partners, including Government, people living with disability, male and female?	<ul style="list-style-type: none"> Needs of end-beneficiaries based on interviews and documents (these will include the views of respondents used as proxy representatives of end- beneficiaries) Policy gaps based on interviews and document Continued relevance throughout (design-implementation) 	<ul style="list-style-type: none"> Literature review Semi-Structured Interviews with key stakeholders (except beneficiaries) 	<ul style="list-style-type: none"> Project documents Government of Kenya Policy documents Interviews with stakeholders 	<ul style="list-style-type: none"> ToC development and review TiU development and review Systematic review and triangulation of data – Use of the RDA
1.2 How relevant were the Joint Programme to priorities/policies at the national level and to the needs of the main vulnerable groups?	<ul style="list-style-type: none"> Needs of end-beneficiaries based on interviews and documents (these will include the views of respondents used as proxy representatives of end- beneficiaries) Policy gaps based on interviews and documents 	<ul style="list-style-type: none"> Literature review Semi-Structured Interviews with key stakeholders (including actors engaged as proxy for beneficiaries) 	<ul style="list-style-type: none"> Project documents Government of Kenya Policy documents Interviews with stakeholders 	<ul style="list-style-type: none"> ToC development and review TiU development and review Systematic review and triangulation of data – Use of the RDA

<p>1.3 How relevant was the jointness in programme design, implementation, and management for addressing the country's development priorities and challenges?</p>	<ul style="list-style-type: none"> • Factors that suggest sharing of information • Factors that suggest more efficient activities • Factors that suggest more coordinated efforts 	<ul style="list-style-type: none"> • Literature review • Semi-Structured Interviews with key stakeholders (including actors engaged as proxy for beneficiaries) 	<ul style="list-style-type: none"> • Project documents • Government of Kenya Policy document • Interviews with stakeholders <p>Note: this question will be answered as a hypothetical -re: potential. The evaluation will not be able to examine the real-world priorities of the Government and or degree to which the activities conducted will in fact lead to Government action and change.</p>	<ul style="list-style-type: none"> • ToC development and review • TiU development and review • Systematic review and triangulation of data – Use of the RDA
<p>1.4 To what extent are the activities aligned with partner UN agency and donor policies and priorities?</p>	<ul style="list-style-type: none"> • Alignment between activities and UN agency strategies • Alignment with UNDAF • Alignment with donor strategies 	<ul style="list-style-type: none"> • Literature review • Semi-Structured Interviews with key stakeholders (except beneficiaries) 	<ul style="list-style-type: none"> • Project documents • Interviews with stakeholders • UN agency policies and strategies • Donor policies and strategies <p>Note: the level of specificity will depend on the specificity detailed in the documents listed.</p>	<ul style="list-style-type: none"> • ToC development and review • TiU development and review • Systematic review and triangulation of data – Use of the RDA
<p>1.5 To what extent is the intervention based on a sound gender analysis? To what extent is the design and implementation of the intervention gender-sensitive?</p>	<ul style="list-style-type: none"> • Existence of a gender analysis • Alignment with indicators found in gender analysis 	<ul style="list-style-type: none"> • Literature review • Semi-Structured Interviews with key stakeholders (including actors engaged as proxy for beneficiaries) 	<ul style="list-style-type: none"> • Project documents/Gender analysis • Government of Kenya Policy documents • Interviews with stakeholders 	<ul style="list-style-type: none"> • ToC development and review • TiU development and review • Systematic review and triangulation of data – Use of the RDA
Effectiveness				
<p>2.1 To what extent did the JOINT PROGRAMME contribute to achieving its development objectives, especially around the 3 transformative results?</p>	<ul style="list-style-type: none"> • Alignment between end results and 3 main objectives 	<ul style="list-style-type: none"> • Literature review • Semi-Structured Interviews with key stakeholders (except beneficiaries) 	<ul style="list-style-type: none"> • Project documents • Government of Kenya Policy documents • Interviews with stakeholders 	<ul style="list-style-type: none"> • ToC development and review • TiU development and review • Systematic review and triangulation of data – Use of the RDA

2.2 What are the major factors that influenced progress in achievement or non-achievement of the outcomes/objectives of the intervention?	<ul style="list-style-type: none"> Political will Administrative factors affecting timeliness Timely funding Impact of shocks (COVID-19) Aspects of programme design which inhibited progress 	<ul style="list-style-type: none"> Literature review Semi-Structured Interviews with key stakeholders (including actors engaged as proxy for beneficiaries) 	<ul style="list-style-type: none"> Project documents Government of Kenya Policy documents Interviews with stakeholders 	<ul style="list-style-type: none"> ToC development and review TiU development and review Systematic review and triangulation of data – Use of the RDA
2.3 To what extent did the intervention deliver results for the target groups	<ul style="list-style-type: none"> Evidence that policies are relevant Evidence that tools are relevant and used (ex M&E tools) Evidence that pilots are useful to beneficiaries (this will be limited to the perceptions, opinions and arguments made by third parties) Evidence that activities can be sustained and or policies will lead to action 	<ul style="list-style-type: none"> Literature review Semi-Structured Interviews with key stakeholders (including actors engaged as proxy for beneficiaries) 	<ul style="list-style-type: none"> Project documents Government of Kenya Policy documents Interviews with stakeholders <p>Note: this assessment will be anchored on expert opinion (data from actors serving as proxy-for beneficiaries)</p>	<ul style="list-style-type: none"> ToC development and review TiU development and review Systematic review and triangulation of data – Use of the RDA
2.4 To what extent did the program target persons with disabilities? <ul style="list-style-type: none"> Not specifically targeted One of the groups of direct beneficiaries targeted Main target group for the program	<ul style="list-style-type: none"> Evidence that PWD are mentioned in documents Evidence that PWD were targeted by pilots 	<ul style="list-style-type: none"> Literature review Semi-Structured Interviews with key stakeholders (except beneficiaries) 	<ul style="list-style-type: none"> Project documents Government of Kenya Policy documents Interviews with stakeholders 	<ul style="list-style-type: none"> ToC development and review TiU development and review Systematic review and triangulation of data – Use of the RDA
2.5 To what extent did the design and implementation of activities of the joint program supported include disability-related accessibility and non-discrimination requirement? <ul style="list-style-type: none"> No requirements General reference Specific requirements	<ul style="list-style-type: none"> Evidence that PWD were included in the design and implementation of activities Evidence that entities which represent the views and perspectives of PWD were included in the design and implementation of the programme. 	<ul style="list-style-type: none"> Literature review Semi-Structured Interviews with key stakeholders (including actors engaged as proxy for beneficiaries) 	<ul style="list-style-type: none"> Project documents Interviews with stakeholders 	<ul style="list-style-type: none"> ToC development and review TiU development and review Systematic review and triangulation of data – Use of the RDA
2.6 To what extent have persons with disabilities, in particular children and women with disabilities, been consulted through their representative organizations? <ul style="list-style-type: none"> Not invited 	As above but focus on women and children	<ul style="list-style-type: none"> Literature review Semi-Structured Interviews with key stakeholders (including actors engaged as proxy for beneficiaries) 	<ul style="list-style-type: none"> Project documents Interviews with stakeholders 	<ul style="list-style-type: none"> ToC development and review TiU development and review Systematic review and triangulation of data – Use of the RDA

<ul style="list-style-type: none"> • Invited • Specific outreach 				
<p>2.7 To what extent did support to data collection and analysis, registries, and information system feature disability?</p> <ul style="list-style-type: none"> • No reference to disability • Disability included via Washington group short set or similar but no analysis • Disability included via Washington group short set or similar • Part of general analysis with specific analysis 	<ul style="list-style-type: none"> • Evidence that the registries record PWD • Evidence that the information is extracted and used 	<ul style="list-style-type: none"> • Literature review • Semi-Structured Interviews with key stakeholders (except beneficiaries) 	<ul style="list-style-type: none"> • Project documents • Review of databases • Interviews with stakeholders 	<ul style="list-style-type: none"> • ToC development and review • TiU development and review • Systematic review and triangulation of data – Use of the RDA
<p>2.8 To which extent did the program contribute to support inclusion of persons with disabilities via:</p> <ul style="list-style-type: none"> • Ensuring basic income security • Coverage of health care costs, including rehabilitation and assistive devices • Coverage of disability-related costs, including community support services • Facilitate access to inclusive early childhood development, education, and work/livelihood 	<ul style="list-style-type: none"> • Evidence that there are programmes that target PWD • Evidence that these programmes will be continued (Sustained) 	<ul style="list-style-type: none"> • Literature review • Semi-Structured Interviews with key stakeholders (including actors engaged as proxy for beneficiaries) 	<ul style="list-style-type: none"> • Project documents • Government of Kenya Policy documents • Interviews with stakeholders <p>Note: the degree to which the perspectives of beneficiaries are included will depend on the knowledge of proxy respondents identified.</p>	<ul style="list-style-type: none"> • ToC development and review • TiU development and review • Systematic review and triangulation of data – Use of the RDA

<p>2.9 To what extent has the Joint Programme contributed to accelerating the SDGs at the national level?</p>	<ul style="list-style-type: none"> • Is there evidence of progress in SDGs which can be used as benchmark • Perception that the Joint Programme contributed to SDG 	<ul style="list-style-type: none"> • Literature review • Semi-Structured Interviews with key stakeholders (except beneficiaries) 	<ul style="list-style-type: none"> • Project documents • Government of Kenya Policy documents • Interviews with stakeholders <p>Note: this can only be addressed in so far as it is expected that results from the Joint Programme will contribute to the implementation of SDG's. It is not possible for the ET to assess the degree to which this effort has accelerated progress relative to any other effort.</p>	<ul style="list-style-type: none"> • ToC development and review • TiU development and review • Systematic review and triangulation of data – Use of the RDA
<p>2.10 To what extent the Joint Programme produced a catalytic effect in terms of generating systems change across sectors to leave no one behind?</p>	<ul style="list-style-type: none"> • Evidence that activities by the Joint Programme will lead to tangible change Evidence that documentation will be used to implement tangible activities on the ground • Are elements necessary for systems change to take place present (e.g., political will, buy-in from different stakeholders, available/allocated resources) 	<ul style="list-style-type: none"> • Literature review • Semi-Structured Interviews with key stakeholders (except beneficiaries) 	<ul style="list-style-type: none"> • Project documents • Government of Kenya Policy documents • Interviews with stakeholders <p>Note: it will not be possible to effectively address catalytic effect because the Joint Programme is young, and results have not materialised. Therefore, the focus will shift towards "has the Joint Programme generated foundational knowledge that can be catalytic"</p>	<ul style="list-style-type: none"> • ToC development and review • TiU development and review • Systematic review and triangulation of data – Use of the RDA
<p>2.11 To what extent has the Joint Programme contributed to achievement of UNDAF/CF outcome/s and national development priorities?</p>	<ul style="list-style-type: none"> • Evidence that the Joint Programme aligns with UNDAF priorities • Evidence that Joint Programme activities have contributed to UNDAF priorities (clear outcomes). 	<ul style="list-style-type: none"> • Literature review • Semi-Structured Interviews with key stakeholders (including actors engaged as proxy for beneficiaries) 	<ul style="list-style-type: none"> • UNDAF evaluation • Interviews with stakeholders <p>Note: the focus will be on the degree to which the Joint Programme has helped meet the relevant indicators in UNDAF.</p>	<ul style="list-style-type: none"> • ToC development and review • TiU development and review • Systematic review and triangulation of data – Use of the RDA
Efficiency				
<p>3.1 Was the programme implemented in a timely way?</p>	<ul style="list-style-type: none"> • Evidence that there was a clear timeline and workplan • Evidence that the workplan was kept (note: depending on the 	<ul style="list-style-type: none"> • Literature review • Semi-Structured Interviews with key stakeholders (including 	<ul style="list-style-type: none"> • Project documents • Interviews with stakeholders 	<ul style="list-style-type: none"> • ToC development and review • TiU development and review

	availability of this, the team will either focus on the degree to which this was kept to or comments on perception of timeliness.	actors engaged as proxy for beneficiaries)	Note: the team will focus on the degree to which activities were implemented during the time period in which they were planned; and any explanatory deviation	<ul style="list-style-type: none"> • Systematic review and triangulation of data – Use of the RDA
3.2 Were the activities cost-efficient? Was the programme implemented in the most efficient way compared to alternatives? Were the project strategies efficient in terms of financial and human resource inputs as compared to outputs?				
3.3 Did the monitoring system efficiently meet the needs and requirements of the project?	<ul style="list-style-type: none"> • Evidence that monitoring activities by each agency was efficient <p>Evidence that individual monitoring was reported upon at the Joint Programme level</p>	<ul style="list-style-type: none"> • Literature review • Review of monitoring data and its use • Semi-Structured Interviews with key stakeholders (except beneficiaries) 	<ul style="list-style-type: none"> • Project documents • Interviews with stakeholders 	<ul style="list-style-type: none"> • Development of monitoring data use pathway (assessment) • Systematic review and triangulation of data – Use of the RDA
3.4 Was the Joint Programme intervention more efficient in comparison to what could have been done through a single agency intervention?	<ul style="list-style-type: none"> • Evidence that the Joint Programme led to time saving • Evidence that the Joint Programme led to financial savings • Evidence that the Joint Programme led to financial savings • Evidence that the joint programme led to reduced duplication 	<ul style="list-style-type: none"> • Literature review • Statistical analysis of resource base and expenditure • Assessment of cost expenditure of alternatives • Semi-Structured Interviews with key stakeholders (except beneficiaries) 	<ul style="list-style-type: none"> • Project documents • Interviews with stakeholders <p>Note: depending on data in documents it is possible that this response will be focused on perceptions of respondents only.</p>	<ul style="list-style-type: none"> • Resource analysis, alternative model development • Systematic review and triangulation of data – Use of the RDA
3.5 To what extent did the Joint Programme contribute to enhancing UNCT coherence and UNCT efficiency (reducing transaction costs)?	<ul style="list-style-type: none"> • Evidence that the programme reduced duplication 	<ul style="list-style-type: none"> • Literature review • Statistical analysis of resource base and expenditure • Assessment of cost expenditure of alternatives • Semi-Structured Interviews with key stakeholders (except beneficiaries) 	<ul style="list-style-type: none"> • Project documents • Interviews with stakeholders <p>Note: depending on data in documents it is possible that this response will be focused on perceptions of respondents only.</p>	<ul style="list-style-type: none"> • Resource analysis, alternative model development • Systematic review and triangulation of data – Use of the RDA
Coherence				

4.1 To what extent are PUNO's activity coherent with key policies/programming of other partners operating in the context?	<ul style="list-style-type: none"> Evidence that Joint Programme programmes were aligned with Government needs/priorities 	<ul style="list-style-type: none"> Literature review Statistical analysis of resource base and expenditure Assessment of cost expenditure of alternatives Semi-Structured Interviews with key stakeholders (except beneficiaries) 	<ul style="list-style-type: none"> Project documents UN documents Interviews with stakeholders <p>Note: The ET will focus on alignment (coherence) with other documents and the views presented by respondents.</p>	<ul style="list-style-type: none"> ToC development and review TiU development and review Systematic review and triangulation of data – Use of the RDA
4.2 To what extent are human rights taken into account?	<ul style="list-style-type: none"> Evidence that HR elements were considered as part of all Joint Programme activities in both design and implementation stages. 	<ul style="list-style-type: none"> Literature review Semi-Structured Interviews with key stakeholders (except beneficiaries) Group interviews with beneficiaries using semi structured and case history approaches with a specific focus on human rights and how these were/were not integrated into programming 	<ul style="list-style-type: none"> Project documents Government of Kenya Policy documents Interviews with stakeholders 	<ul style="list-style-type: none"> ToC development and review TiU development and review Systematic review and triangulation of data – Use of the RDA
Lessons learned				
5.1 What are lessons learned from the project up to this point? Are there any recommendations to improve the project's relevance, efficiency, effectiveness?	<ul style="list-style-type: none"> Lessons identified by respondents and by the evaluators 	<ul style="list-style-type: none"> Data review with key stakeholders (different stakeholder groups are engaged separately) 	<ul style="list-style-type: none"> Interviews with stakeholders 	<ul style="list-style-type: none"> Systematic review and triangulation of data – Use of the RDA Development of Theory of Implementation
Sustainability				
6.1 To what extent has the strategy adopted by the Joint Programme contributed to sustainability of results, especially in terms of LNOB and the social protection system?	<ul style="list-style-type: none"> Evidence that Joint Programme support sustainability better than individual activities 	<ul style="list-style-type: none"> Literature review Semi-Structured Interviews with key stakeholders (except beneficiaries) Group interviews with beneficiaries using semi structured and case history approaches 	<ul style="list-style-type: none"> Interviews with stakeholders Government of Kenya policy or strategy documents <p>Note: This will rely on expected sustainability of results and reasoning behind these argumentations, as well as Government of Kenya</p>	<ul style="list-style-type: none"> Systematic review and triangulation of data – Use of the RDA Development of Theory of Implementation

			documents that may attest to this.	
6.2 To what extent has the Joint Programme supported the long-term buy-in, leadership and ownership by the Government and other relevant stakeholders?	<ul style="list-style-type: none"> Evidence that the Government system prioritises Social Protection as an agreed element 	<ul style="list-style-type: none"> Literature review Semi-Structured Interviews with key stakeholders (except beneficiaries) Group interviews with beneficiaries using semi structured and case history approaches 	<ul style="list-style-type: none"> Interviews with stakeholders Government of Kenya policy or strategy documents 	<ul style="list-style-type: none"> Systematic review and triangulation of data – Use of the RDA Development of Theory of Implementation
6.3 How likely will the results be sustained beyond the Joint Programme through the action of Government and other stakeholders and/or UNCTs?	<ul style="list-style-type: none"> Evidence that documents produced (studies) will be used for tangible progress Evidence that pilots will be rolled out Evidence that the monitoring systems are being used 	<ul style="list-style-type: none"> Literature review Semi-Structured Interviews with key stakeholders (except beneficiaries) Group interviews with beneficiaries using semi structured and case history approaches 	<ul style="list-style-type: none"> Interviews with stakeholders Government of Kenya policy or strategy documents <p>Note: This will rely on expected sustainability of results and reasoning behind these argumentations, as well as Government of Kenya documents that may attest to this.</p>	<ul style="list-style-type: none"> Systematic review and triangulation of data – Use of the RDA Development of Theory of Implementation

Annexes 5. Data collection Tools

203. The following table presents all the questions asked to the different respondent groups. The ET identified the questions which were targeted to specific respondent groups, but in some instances, questions were amended or removed based on the knowledge of the respondent.

204. Critically, not all questions were asked of all respondents, but since each respondent has specific areas of knowledge and expertise, including aspects of the Joint Programme they participated in, the questions were adapted to their knowledge base. It was not possible to make an interview guide for each group, because it would mean one guide per participant, and the ET needed the flexibility that these questions allowed. Mainly that during the interview, depending on responses, the ET determined what was most relevant to that respondent.

Evaluation Question(s)	Key Stakeholders				
	Resident Coordinator Office	Joint Programme Participating UN Organisations	Government National Level (Ministries, Parastatals, Agencies, and NGOs engaged in the programme)	Government County Level	Proxy for beneficiaries - representatives from CSOs working directly with beneficiaries or subject area experts who have worked directly with beneficiaries (depending on the proxy (e.g., organisation or individual) used some questions may not be relevant)
EQ1: RELEVANCE					
Master Question: 1.1 To what extent is the programme in line with the needs of beneficiaries and partners, including Government, people living with disability, male and female?	X	X	X	X	X
How were the needs of the Government assessed? What type of data/studies/ were used?		X	X	X	X
How were the needs of beneficiaries assessed? What type of data/studies/ were used?		X	X	X	X
To what degree do you think the needs of the Government and of beneficiaries are aligned?	X	X	X	X	X
What were the conclusions of the assessment?		X	X	X	X
In the processes that you previously described, how were vulnerable groups, including women and persons with disabilities specifically targeted?		X	X	X	X
Master Question: 1.2 How relevant were the Joint	X	X	X		

Programme to priorities/policies at the national level and to the needs of the main vulnerable groups?					
Which national policies did the Joint Programme (and specifically your engagement in the Joint Programme ... i.e., UNICEF, ILO, WFP, or FAP elements) try to address?	X	X	X		
Are these gaps there because the Joint Programme could not address them, or because the Joint Programme fail to address them?		X	X		
What was the expectation that your contribution to the Joint Programme would have in relation to meeting policy objectives (reaching beneficiaries)?	X	X	X		
Do any of these gaps affect the relevance of the Joint Programme? (Make it less relevant because it is not possible to effectively address key needs?)	X	X	X		
Are there key gaps that beneficiaries experience that remain unmet?		X	X		
Master Question: 1.3 How relevant was the jointness in programme design, implementation, and management for addressing the country's development priorities and challenges?	X	X	X		
What was the added value of having a joint programme in terms of making it more/less relevant?	X	X	X		
Please explain how the Joint Programme would have been different if it had not been joined (i.e., if each agency would have done their own thing separately, or if some agencies had worked on their elements and other elements had been overlooked?)	X	X	X		
Master Question: 1.4 To what extent are the activities aligned with partner UN agency and donor policies and priorities?	X	X			
How do you think the activities that you are engaged with align with UN priorities?	X	X			
Are there key priorities that should have been addressed, but were not?	X	X			
For the Resident coordinator: How do you think the collection of activities under the Joint Programme answer to the objectives of the UNDAF?	X				

Are there areas that were addressed which are outside the priority objectives of The UN in Kenya?	X				
What role has the resident coordinator played in ensuring that the activities align with UN priorities?	X				
Master Question: 1.5 To what extent is the intervention based on a sound gender analysis? To what extent is the design and implementation of the intervention gender-sensitive?		X	X		
What type of gender analysis has been done by the UN to ensure that the overall priorities of the UN are gender sensitive?		X	X		
What type of gender analysis has been done to ensure that each activity under the Joint Programme is gender sensitive?		X	X	X	
What type of data was collected as part of M&E) to ensure gender sensitivity?		X	X	X	
Were the aforementioned gender assessments robust (good quality)		X	X		
EQ2: EFFECTIVENESS					
Master Question: 2.1 To what extent did the Joint Programme contribute to achieving its development objectives, especially around the 3 transformative results?		X	X	X	
Do you feel that the Joint Programme (and specifically the activities you have been involved in) supported the achievement of the development objectives? Which development objective specifically? And why/how do you think it supported this objective?		X	X	X	
What kind of examples of transformative results have you seen/have evidence for?		X	X	X	
Could you describe the Theory of Change elements of your intervention and specifically how different elements are articulated to lead to the results (transformative results) you feel have been attained?		X			
Master Question: 2.2 What are the major factors that influenced progress in achievement or non-achievement of the outcomes/objectives of the intervention?		X	X	X	
What do you think have been the critical factors (positive/negative that have influenced results?		X	X	X	

How have these factors influenced results?		X	X	X	
Were these factors expected or not (elaborate which)?		X	X	X	
Master Question: 2.3 To what extent did the intervention deliver results for the target groups		X	X	X	X
What results were delivered by the intervention, and to which groups?		X	X	X	
Which groups do you think have been most neglected or stand to be neglected?		X	X	X	
Master Question: 2.4 To what extent did the program target persons with disabilities? (Not specifically targeted / One of the groups of direct beneficiaries targeted /Main target group for the program		X	X	X	
How did the program (intervention you are involved with) target persons with disabilities?		X	X	X	X
Did a specific subgroup of persons with disabilities benefit more than others?		X	X	X	X
What was the result of the targeting? (Did they benefit? How?)		X	X	X	X
Master Question: 2.5 To what extent did the design and implementation of activities of the joint program supported include disability-related accessibility and non-discrimination requirement? (No requirements/General reference/ Specific requirements)		X	X	X	X
During the design of the intervention, how were persons with disability included?		X	X	X	X
Was the inclusion of persons with disabilities at design the right approach?		X	X	X	X
Was it an appropriate level of inclusion? Yes/No, why?		X	X	X	X
Master Question: 2.6 To what extent have persons with disabilities, in particular children and women with disabilities, been consulted through their representative organizations? Invited/not invited/ specific outreach		X	X	X	X
Have organisations representing children and women with disabilities been consulted during the intervention implementation? If yes, when, and how? If no, why not.		X	X	X	X

Have other organisations representing person with disabilities more broadly been consulted during the implementation of the intervention? If yes, how, and when? If no, why not?		X	X	X	X
What have been the results of the inclusion if it happened?		X	X	X	X
What have been the drawbacks of not including these groups, if they were excluded?		X	X	X	X
Master Question: 2.6 To what extent have persons with disabilities, in particular children and women with disabilities, been consulted through their representative organizations? Invited/not invited/ specific outreach		X	X	X	X
Have organisations representing children and women with disabilities been consulted during the intervention implementation? If yes, when, and how? If no, why not.		X	X	X	X
Master Question: 2.7 To what extent did support to data collection and analysis, registries, and information system feature disability? No reference to disability/ disability included via Washington group short sector similar, but no analysis/ disability included via Washington group short set part of general analysis or part of specific analysis		X	X	X	
What systems that feature persons with disabilities (registries) been used?		X	X	X	
If none, what was used instead?		X	X	X	
If no, what was the drawback of not using these systems?		X	X	X	
If no, why were they not used?		X	X	X	
If they were used, what was the gain of using them? (Examine reliability and validity of data used)?		X	X	X	
How was the data, if used, analysed? What were the results of the analysis and what modifications were made as a result of the analysis?		X	X	X	
Master Question: 2.8 To which extent did the program contribute to support inclusion of persons with disabilities via: ensuring basic income security? Coverage of health care costs rehabilitation and assistance devices/ cover of disability related costs including		X	X	X	

community supporting services/ facilitating access to early childhood development, education, and work/livelihood					
Do you think the programme has been able to support persons with disabilities to secure a basic income security?		X	X	X	
Do you think the programme has been able to support persons with disabilities to access health care including rehabilitation?		X	X	X	
Do you think the programme has been able to support persons with disabilities to secure community support services?		X	X	X	
Do you think the programme has been able to support persons with disabilities to access early childhood education and or work/livelihood?		X	X	X	
Do you think the programme has been able to support persons with disabilities to secure a basic income security?		X	X	X	
Do you think the programme has been able to support persons with disabilities to access health care including rehabilitation?		X	X	X	
Master Question: 2.9 To what extent has the Joint Programme contributed to accelerating the SDGs at the national level?	X	X	X		
Do you think the activities, and the Joint Programme have accelerated attainment of the SDGs?	X	X	X		
If yes, why do you think this? (Provide concrete examples?)	X	X	X		
If no, why not?					
Master Question: 2.10 To what extent the Joint Programme produced a catalytic effect in terms of generating systems change across sectors to leave no one behind?		X	X		
Do you think the Joint Programme, and activities therein helped support the "leave no one behind" objective? If yes, do you think it had a catalytic role? If yes, why do you think this? What was the catalytic role. If no, why not?		X	X		
Master Question: 2.11 To what extent has the Joint Programme contributed to achievement of UNDAF/CF outcome/s and national development priorities?	X	X	X	X	

Do you think the Joint Programme has helped to ensure the attainment of UNDAF? If yes, please provide concrete examples. If no, why not? What was lacking?	X	X	X		
Do you think the Joint Programme and activities therein supported the attainment of key gov policies? If yes, which ones and how? If no, why don't you think it was possible for activities to reach this level?	X	X	X	X	
EQ3: EFFICIENCY					
Master Question: 3.1 Was the programme implemented in a timely way?		X	X	X	
Were activities implemented at the time it was expected? If no, why were there delays (causes and detailed explanations of causes and the effect of these)?		X	X	X	
If not on time, what was the effect of delays?		X	X	X	
Did delays (if any existed) affect the overall achievement of the activities?		X	X	X	
Master Question: 3.2 Did the monitoring system efficiently meet the needs and requirements of the project?		X			
How was the monitoring system designed (what factors, assessments, background data contributed to its design)?		X			
Please describe the monitoring system?		X			
Do you think the monitoring system was efficient/effective?		X			
If yes, what makes you get to this conclusion? If no, why not/what lacked?		X			
Master Question: 3.3 Was the Joint Programme intervention more efficient in comparison to what could have been done through a single agency intervention?	X	X	X		
Is there any evidence that the TP was more efficient because it was joint? Pls explain /detail your response	X	X	X		
What do you think would have been an alternative (plus and minus of an alternative)?	X	X	X		
Master Question: 3.4 To what extent did the Joint Programme contribute to enhancing UNCT coherence and UNCT efficiency (reducing transaction costs)?		X			

What transactional costs existed because the programme was joint?		X			
What costs were reduced because the programme was joint?		X			
Do you think there were opportunities to increase the efficiency through joint programming (ex-having a single M&E effort)? Or not? Was anything that should have been utilised overlooked?		X			
EQ4: COHERENCE					
Master Question: 4.1 To what extent are PUNO's activity coherent with key policies/programming of other partners operating in the context?		X			
How did PUNO make sure that its efforts were complementary to other efforts in the sector? Please list any and assessments done to ensure this?		X			
If no effort was made, are there any indications that there was replication or overlap?		X			
If no, are there any indications that coherence/lack of coherence influenced results, including possibility for sustainability?		X			
Master Question: 4.2 To what extent are human rights taken into account?		X	X	X	X
How were human rights taken into account in the design of the intervention?		X	X	X	X
How were human rights taken into accounts in the implementation of the activities?		X	X	X	X
How are human rights taken into consideration in the sustainability of the activities?		X	X	X	X
If human rights were not taken into account, then, what has been the cost (if any) of this omission).		X	X	X	X
EQ5: LESSONS LEARNED					
Master Question: 5.1 What are lessons learned from the project up to this point?	X	X	X	X	X
Please list the lessons that you feel have been learned. Or which have emerged from the intervention? And interpret the lessons (what do they say/mean for the future?	X	X	X	X	X
Master Question: Are there any recommendations to improve the project's relevance, efficiency, effectiveness?	X	X	X	X	X

See above Questions					
EQ6: SUSTAINABILITY					
Master Question: 6.1 To what extent has the strategy adopted by the Joint Programme contributed to sustainability of results, especially in terms of LNOB and the social protection system?	X	X	X	X	X
How have the activities contributed to the sustainability of the system?	X	X	X	X	X
What challenges to sustainability exist?	X	X	X	X	X
At what level is the system sustainable (level of Government)?	X	X	X	X	X
What does the sustainability mean for beneficiaries?	X	X	X	X	X
What is the sustainability contingent on for the future? (ex-continued funding)	X	X	X	X	X
Master Question: 6.2 To what extent has the Joint Programme supported the long-term buy-in, leadership and ownership by the Government and other relevant stakeholders?	X	X	X	X	
Do you think the Government owns the intervention? If yes, what factors lead you to believe this?	X	X	X	X	
If no, what do you think hampers ownership?	X	X	X	X	
How do you think electoral process may affect ownership?	X	X	X	X	
Aside from political changes, what other factors may affect ownership?	X	X	X	X	
Master Question: 6.3 How likely will the results be sustained beyond the Joint Programme through the action of Government and other stakeholders and/or UNCTs?		X	X	X	X
Which stakeholders can sustain the intervention in the long term?		X	X	X	X
Are these actors able to sustain the intervention now (have the resources)?		X	X	X	X
Are these actors willing to sustain the intervention?		X	X	X	X
Do you think the intervention will be sustained? What makes you think this?		X	X	X	X
If no, what do you think would be required for this to be sustained in the long term?		X	X	X	X

Annexes 6. Findings Conclusions

Recommendations Mapping

Recommendation	Conclusions	Findings
<p>Recommendation 1: Consider the continuation of the Joint Programme through the implementation of a second phase with a duration of 5 years minimum (see recommendation 4). A continuation of the effort to address Social Protection Challenges in Kenya would be well aligned with the priorities of the new government, which came into office in August 2022, and with Agenda 2030. This new phase should focus both on filling gaps that are currently overlooked, but also scaling up of activities based on all the foundational and catalytic work done during the phase under review here.</p>	<p><u>All conclusions</u></p>	<p><u>All findings</u></p>
<p>Recommendation 2: The development of a new Joint Programme Phase should consider the inclusion of additional government actors who are also engaged, albeit more informally, in the Social Protection sector. For example, the Ministries of Agriculture, Health and Trade.</p>	<p><u>All conclusions</u></p>	<p><u>All findings</u></p>
<p>Recommendation 3: The process to mobilise resources for a future phase (see recommendation 1), should actively include the different stakeholders involved in the planning and design of the intervention (see recommendation 4). The Government of Kenya should be engaged in co-funding the interventions.</p>	<p><u>Conclusions 1 and 2</u></p>	<p><u>1.1, 1.2, 1.4, 2.1, 2.8</u></p>

<p>Recommendation 4: Through discussion with government during the design phase, ensure that any future Joint Programme (or like effort) continues to enjoy Government leadership/buy-in. The inclusion of non-state actors early on in the process, is also critical. A time frame that allows for the Government to absorb and roll out activities is also important. Ensuring a realistic time frame, that enables effective use of results (roll out and absorption), should be part of the discussion with donors during the design phase. A periodic review and evaluation of activities (and the activities roadmap) will enable time frame adaptation if needed.</p>	<p><u>Conclusions 1 and 2</u></p>	<p><u>1.1, 1.2, 1.4, 2.1, 2.8</u></p>
<p>Recommendation 5: Any future Joint Programme should further explore the articulation between different activities to ensure that activities conducted yield the best possible results. Inter activity articulation should be used to ensure that change created can be greater than the sum of their parts. Each activity should have a single agency lead, and include a clear articulation plan that shows how, when, and led by whom, inter activity articulation should take place.</p>	<p><u>Conclusion 1, 2, 3, 4, 5</u></p>	<p><u>1.3, 1.4, 2.1, 2.2, 2.7</u></p>
<p>Recommendation 6: In order to enable gender mainstreaming, a thorough gender analysis covering all relevant areas should be conducted. This will enable the implementers of activities to access gender data when/if needed. Gender disaggregated data should be consistently collected and gender mainstreaming should be reviewed periodically to ensure any necessary adaptation is made.</p>	<p><u>Conclusions 1</u></p>	<p><u>1.5, 2.6</u></p>
<p>Recommendation 7: Continue to ensure that new programming does not accidentally overlook key groups. To do this a new programme should be, wherever possible, informed by periodic vulnerability assessment(s), that allows for disaggregation by sex and age within the different groups. In future, this will also help ensure that groups that may</p>	<p><u>Conclusions 1</u></p>	<p><u>1.5, 2.4, 2.5, 2.6, 2.8</u></p>

<p>not be under the Government of Kenya radar are included.</p>		
<p>Recommendation 8: The inclusion of end users should be further expanded in future activities. This will serve to ensure that a HRBA is included across the whole implementation of the programme and not only as part of specific activities. This will ensure improved ownership and legitimacy of the interventions. This could include the active representation of agencies representing end user groups in programme discussions.</p>	<p><u>Conclusions 1, 2</u></p>	<p><u>1.5, 4.2</u></p>

Annexes 7. Evaluation Field Mission Schedule

205. The field mission for this evaluation was conducted in two phases:

206. First phase: the evaluation undertook in-person key informant interviews during the inception phase where data collection commenced from July 25th, 2022 to August 3rd, 2022. A total of 25 participants from Government of Kenya, and non-state social protection partners participated within this period.

207. Second phase: Additional data collection activities took place starting August 15th, 2022 and were finalised on August 29th, 2022. In this phase, a combination of physical and virtual interviews were conducted to allow for participants who had travelled upcountry for electoral voting purposes to participate.

Annexes 8. List of People Interviewed

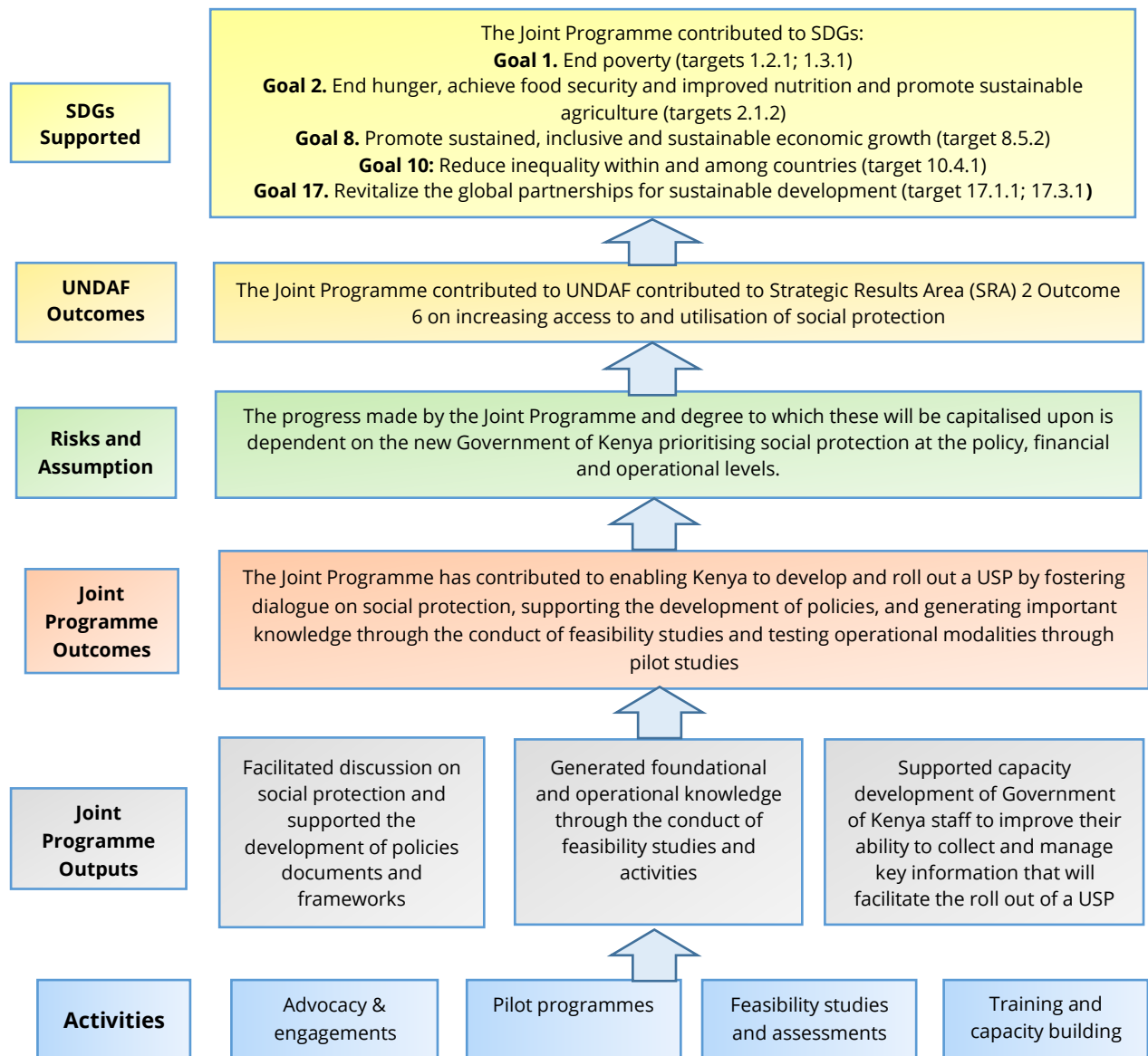
208. In total 41 people were interviewed. 24 of the interviewees were women and 17 were men.

No.	Gender	Name	Title	Interview
1.	F	Jane Njoroge	Development Coordination Officer (DCO) - Data Management and Results Monitoring & Reporting	Resident Coordinator's Office
2.	F	Marianna Osipova	Partnerships and Youth Officer	Resident Coordinator's Office/SDG Partnership Platform
3.	M	David Kamau	Programme Policy Officer (Social Protection/Safety Nets)	World Food Programme
4.	F	Eunice Mailu	Social Protection	World Food Programme
5.	F	Judith Otieno	Gender Officer	World Food Programme
6.	F	Hellen Magutu Amakobe	National Programme Coordinator	International Labour Organisation
7.	M	Barack Okoba	Head of Unit	Food and Agriculture Organisation
8.	F	Kaari Miriti	Monitoring and evaluation	Food and Agriculture Organisation
9.	F	Willy Mwasiaji	National Social Protection Specialist	Food and Agriculture Organisation
10.	F	Husna Mbarak	Gender Officer	Food and Agriculture Organisation
11.	F	Susan Momanyi	Social Policy Specialist	United Nations Children's Fund
12.	M	Yu Tsukioka	Consultant	United Nations Children's Fund
13.	F	Juliet Maara	Social Protection Expert	National Hospital Insurance Fund
14.	F	Damaris Muhika	Programme Manager	Central Organisation of Trade Unions
15.	M	John Gachigi	Head, DSA	Directorate of Social Assistance
16.	F	Diana Munyala	Social Development Officer and Head of M&E	Directorate of Social Assistance
17.	F	Evelyn Mwangi	Head of MIS	Directorate of Social Assistance
18.	M	Stephen Obiro	Head of Advocacy, Consulting & Partnerships	Federation of Kenya Employers
19.	M	William Wandera	Project Officer	Federation of Kenya Employers
20.	M	Peter Ombasa	Assistant Director	National Social Protection Secretariat
21.	F	Jacynter Omondi	Deputy Head, NSPS	National Social Protection Secretariat
22.	F	Stefanie Bitengo	Assistant Director, Head of M&E and MIS	National Social Protection Secretariat
23.	M	Richard Obiga	Senior Programme Officer	National Social Protection Secretariat

24.	M	Shadrack Meme	Dept of M&E	National Social Protection Secretariat
25.	F	Millicent Awiti	Manager, Strategy	National Social Security Fund
26.	F	Winnie Karingithi	Director, Planning	Ministry of Labour
27.	M	Samuel Mburu	Research and Learning Manager	Save the Children
28.	M	Enock Nyakundi	Child Poverty Technical Specialist	Save the Children
29.	F	Nancy Nafula	Principal Policy Analyst	Kenya Institute of Public Policy Research
30.	F	Mary Mwale	Senior Officer	Ministry of Agriculture, Livestock, Fisheries and Cooperatives
31.	M	Mohamed Osman Jehow	Director, Social Services	Wajir County Government
32.	M	Ahamed Mohamed	Deputy Director, Social Services	Wajir County Government
33.	M	Davelyne N. Mundi	Child Protection Coordinator	Embu County Government
34.	F	Mercy Kithinji	County Nutrition Coordinator	Embu County Government
35.	M	Samwel Masese	Child Protection Coordinator	Kajiado County Government
36.	M	Humphrey Wandeoh	Child Protection Coordinator	Kisumu County Government
37.	F	Rael Mwando	County Nutrition Coordinator	Kisumu County Government
38.	F	Jackie Okinyi	Programme Manager	Women Fighting AIDS in Kenya
39.	M	Stephen Kalungu	Country Director, Kenya	Give Direct
40.	F	Violet Magoba	Government Relations Manager	Give Direct
41.	F	Wanjiru Nduati	Partnerships Manager	Give Direct

Annexes 9. Theory in Use

209. Here the TIU is presented. This diagramme reflects the findings of the evaluation explored alongside the original ToC presented (see Annex 1 - ToR). The main differences between the two is on the degree of notable progress (documented outcomes). Claims made in the ToC could not be materialised, in part due to the timeframe for the Joint Programme.



Annexes 10. Additional Context Analysis

210. This annex provides additional contextual information, as part of section 1.2.

Gender equality and women empowerment (GEWE)

211. This section provides an additional overview into the status of women and girls in different socio-economic components.

212. The **economic and labour participation** of women in Kenya is relatively progressive. In 2022, Kenya ranked 6th globally in narrowing gender gaps, specifically for women occupying senior positions.¹⁸² The participation of women in the labour market is, however, not yet equal to that of men, as evidenced by the proportion of women working part-time which is nearly double that of men. Moreover, women are overrepresented in low wage sectors, with numbers nearly double to that of men;¹⁸³ likewise women are more likely work in business that have lower returns.¹⁸⁴

213. There is also a gender gap in **education** levels which influence economic participation and labour outcomes. Overall, women are less likely to receive post-secondary levels compared to men, where representation of women who have attained some form of secondary education is 31.1 percent compared to 37.7 percent of men.¹⁸⁵ This affects their ability to participate in formal employment in sectors requiring technical skills and are generally underrepresented in science, technology, engineering, or manufacturing sectors.¹⁸⁶ Gender parity levels at primary school are much higher. This has been a result attributed to the introduction of the free primary education programme in 2013.

214. The above-mentioned means that women are more likely to experience of **poverty** as they are likely to earn lower-incomes or have limited access to credit. Many women-headed households in Kenya are poorer than those headed by men, a pattern that is replicated in both urban and rural areas.¹⁸⁷ Challenges faced in securing continuous paid employment alongside lower levels of education contribute to poverty and to the disempowerment of adult women.¹⁸⁸ Empowerment is closely attributed to the woman's ability to participate in household decisions such as household purchases, healthcare and accessing family planning, etc. Empowerment levels are likely to be higher for women living in urban areas due to variations in income levels and attainment of post-secondary educational, as compared to those in rural areas. Women living in the poorer households are more likely to have lesser decision-making power, compared to those in richer households.¹⁸⁹

215. Women's **political participation** has progressed considerably. The August 9, 2022, elections recorded the highest number of women elected to senior positions since the introduction of a decentralised Government, which bestow considerable responsibility and power to the country Governments. Indeed, 7 governors, 8 deputy governors, 3 senators and 30 Members of Parliament elected are women.¹⁹⁰ However, gender equality remains a challenge to effective participation, as most political structures and platforms are male dominated. Women candidates are subjected to high levels of scrutiny on aspects such as place of birth, marital status, or culture background as a measure of acceptance in political positions.

216. The **health status and wellbeing** remain a significant challenge to achieving gender equality. Although the Government of Kenya has made some progress, for example, the introduction of free maternity services which was initiated in 2013, maternal morbidity and mortality remains high, at 342 deaths per 100,000 live

¹⁸² [Global Gender Gap Report 2022 | World Economic Forum \(weforum.org\)](https://www.weforum.org/reports/global-gender-gap-report-2022).

¹⁸³ [Economic Survey 2018 - Kenya National Bureau of Statistics \(knbs.or.ke\)](https://www.knbs.or.ke/economic-survey-2018).

¹⁸⁴ Agwaya, R., and Mairura, S., (2020) Policy Brief: Closing the Gender Productivity Gap in Kenya's Informal Sector. No.94/2019-2020. Kenya Institute for Public Policy Research and Analysis.

¹⁸⁵ United Development Programme (2021) Human Development Report 2021-2022.

¹⁸⁶ Kenya National Bureau of Statistics, UN Women and UNICEF (2020) Women's Empowerment in Kenya.

¹⁸⁷ [Economic Survey 2018 - Kenya National Bureau of Statistics \(knbs.or.ke\)](https://www.knbs.or.ke/economic-survey-2018).

¹⁸⁸ Kenya National Bureau of Statistics, UN Women and UNICEF (2020) Women's Empowerment in Kenya.

¹⁸⁹ Kenya National Bureau of Statistics, UN Women and UNICEF (2020) Women's Empowerment in Kenya.

¹⁹⁰ [Commission Lauds Record SIGs Elected in the 2022 General Elections \(ngeckkenya.org\)](https://www.ngeckkenya.org/Commission-Lauds-Record-SIGs-Elected-in-the-2022-General-Elections).

births¹⁹¹ compared to the SDG 3.1 target of 70 deaths per 100,000 live births.¹⁹² Further, between 2016 and 2021, there was an estimated 2 million adolescent pregnancies, translating into one in five girls likely to give birth before attaining age 19 years.¹⁹³ This reality is considered detrimental to the overall reproductive health of young girls and a barrier to the girls' education.

217. Additionally, the prevalence of GBV remains a pervasive threat. An estimated 39.4 percent of Kenyan women are likely to experience sexual and gender-based violence (SGBV) incidences in their lifetime. Women and girls, especially those in the informal settlements and urban slums, face increased risk of sexual violence whenever local insecurity rises in public spaces. The main perpetrators of physical violence against women and girls involve male relatives such as husbands, fathers, and stepfathers.¹⁹⁴ Closely interlinked, the prevalence of SGBV cases is a key driver of HIV infections, which is highest among women at 5.5 percent, compared to 2.9 percent among men, and highest for young women aged 15-24 years.

Persons with disabilities

218. In this section, more detail is provided on how disability affects different aspects of a person's life.

219. **Political representation and participation** of PWD is embedded in the Constitution. In practise, participation in democratic and electoral processes has not been consistent, impacted by multiple barriers including weak legislation driving inclusion at both national and county levels, limited political will, negative cultural attitudes and stereotypes, and inadequate prioritisation towards registration of national Identity Cards for PWD to enable them to participate as voters have contributed to this.¹⁹⁵ Moreover, the Government has been slow in ensuring that the minimum requirement of 5 percent of elected positions are filled by PWD. The 2022 general elections demonstrate this as PWD only filled five elected positions (four men and 1 woman).¹⁹⁶ None of these positions are at the upper governor or senate.

220. Access to **education** is limited among children with disabilities. Overall, school enrolment of children with disabilities proportionally lower. Proportion of enrolment differs between disabilities, as well. While children with visual impairments and hearing impairments have comparably high numbers of school enrolment (88,9 percent and 85,8 percent), the proportion of children other disabilities is lower. For example, children with physical disabilities (70,1 percent), children with intellectual disabilities (76,7 percent), children with speech and language disabilities (60,4 percent), and children with self-care disabilities (and 48 percent).¹⁹⁷ Children with disabilities require special education centres that are designed to meet their needs, including school infrastructure that is adept to their needs.¹⁹⁸ Such schools are few in Kenya and often located in urban centres. The cost of special needs education is very high, creating challenges for children from poorer families.¹⁹⁹ Although there are funds to subsidize education expenses through the National Development Fund for Persons with Disabilities, there is limited awareness of their existence and they are only available for PwSD.²⁰⁰ Across the country, many institutions face a deficit of resources necessary to recruit special needs educators and provide learning support for the students who need it. School infrastructure is often not adapted to the needs of children with disabilities.²⁰¹

221. Access to **health care** services is challenging for PWD who may require specialised medical attention due to underlying conditions. Due to low education among PWDs, awareness of how to access these services

¹⁹¹ United Development Programme (2021) Human Development Report 2021-2022.

¹⁹² Sustainable Development Goal target 3.1 <https://sdgs.un.org/>.

¹⁹³ Ministry of Health (2021) Kenya World AIDS Day Progress Report 2013-2021; <https://nacc.or.ke/wp-content/uploads/2022/02/WAD2021Report.pdf>.

¹⁹⁴ <https://www.knbs.or.ke/kenya-demographic-and-health-survey-kdhs>.

¹⁹⁵ National Gender and Equality Commission (2016) Status of Equality and Inclusion in Kenya.

¹⁹⁶ <https://www.ngeckkenya.org/news/8270/commission-lauds-record-sigs-elected-in-the-2022-general-elections>.

¹⁹⁷ Ministry of Education. 2018. *National Survey on Children with Disabilities and Special Needs in Education*

¹⁹⁸ Ministry of Education, Science & Technology (2014). Kenyan National Special Needs Education Survey Report. Retrieved from https://www.vsointernational.org/sites/default/files/SNE_percent20Report_Full_percent20-2.pdf.

¹⁹⁹ Lenjo. 2020. *Access to Education for Persons with Disabilities*

²⁰⁰ Aga Khan University. 2020. *Kenya must prioritise persons with disabilities*

²⁰¹ Ministry of Education, Science & Technology (2014). Kenyan National Special Needs Education Survey Report. Retrieved from https://www.vsointernational.org/sites/default/files/SNE_percent20Report_Full_percent20-2.pdf.

is disproportionately low.²⁰² Those living in the rural areas are disproportionately affected by lower concentration of, and at times distant, health facilities. Additionally, health facilities often lack processes and infrastructure adapted to the needs of PWD such as nearby parking, washrooms, and access ramps. Clinics often lack sufficient medical personnel and have deficient knowledge and equipment to consult PWDs.²⁰³

222. PWD have fewer **employment** opportunities leading to greater poverty incidences within this group. More limited access to education, equating to lower literacy and skill levels, makes it more difficult for persons with disabilities to effectively access the labour market. Due to deficient education they also encounter challenges accessing information about job vacancies and in cases of loss of employment, have difficulty accessing Government benefits.²⁰⁴ Moreover, during pandemic restrictions, 68 percent of PWD reported being unable to work, while 65 percent felt insecure in their current jobs.²⁰⁵ PWDs were often the first to be dismissed as they were regarded to spread the virus faster than those without disabilities and because sanitation facilities were not adapted to them. The national COVID-19 response has underprioritized the needs of PWDs when supporting those who have lost employment.²⁰⁶ Besides this, persons with disabilities often encounter physical and environmental barriers in the work environment, such as inaccessible buildings or transport, or poor light and acoustic conditions.²⁰⁷

223. **Gender** also determines aspects of the lives of PWD. Women and girls with disabilities have lower literacy and employment rates than men and boys.²⁰⁸ While there is little research on the prevalence of SGBV among women and girls with disabilities, the high prevalence of SGBV in the country means that they are also susceptible to similar risks of violation. SGBV is mostly experienced by mentally challenged women, followed by the blind, deaf and physically challenged GBV.²⁰⁹ These vulnerabilities were heightened through the pandemic, due to the nature of the lockdowns and social distancing measures. COVID-19 accentuated the difficulties that women with disabilities had accessing healthcare prior to the pandemic. Accessing healthcare imposed additional risk to infection of COVID-19 which could further accentuate existing conditions. Many people dependent on family or caregivers lost them to COVID-19 or were unable to secure their services due to restrictions on movement and face-to-face engagement. Some people reported that COVID-19 information messaging was not accessible to persons with disabilities, as many of them are visually impaired, deaf, or cannot read or write and do not own radios or television.²¹⁰

The Impact of COVID-19

224. COVID-19 affected the Kenyan population in various ways:

225. **Unemployment** levels nearly quadrupled from levels recorded prior to the pandemic.²¹¹ Strict containment restrictions introduced by the Government of Kenya in March 2020 impacted many livelihoods through reduced or lost labour income, and general lack of employment opportunities. Impact was experienced disproportionately as higher unemployment rates were recorded in urban areas compared to rural areas in the earlier periods of the pandemic. This was credited to the emergence of 'newly poor' urban households who were predominantly reliant on the services industry such as retail trade, food and accommodation, which were among the worst affected sectors from the restrictions.⁶ Impact was also gendered and unequal, whereby over one-fifth of women in employment had stopped working by September 2020, compared to 16 percent of men.²¹² Additionally, restricted movement and limited logistical services had

²⁰² Ongoru. 2020. *Barriers to Access Quality Healthcare Services among Physically Challenged Persons in Gem Sub County, Siaya County*

²⁰³ Ongoru. 2020. *Barriers to Access Quality Healthcare Services among Physically Challenged Persons in Gem Sub County, Siaya County*

²⁰⁴ Opuko (2017). *Access to employment in Kenya: the voices of persons with disabilities.*

²⁰⁵ Innovation2Inclusion. 2020. *Impact of COVID-19 on the lives of people with disabilities*

²⁰⁶ Innovation2Inclusion. 2020. *Impact of COVID-19 on the lives of people with disabilities*

²⁰⁷ Opuko. 2017. *Access to employment in Kenya: the voices of persons with disabilities.*

²⁰⁸ UNESCO (2018). *Education and Disabilities: Analysis of Data from 49 countries.* Retrieved from <http://uis.unesco.org/en/news/education-and-disabilities-analysis-data-49-countries>.

²⁰⁹ Aloo. 2015. *Study on Gender Based Violence against Women and Girls with Disabilities in Kenya*

²¹⁰ International Union for the Scientific Study of the Population. 2020. *The COVID-19 Pandemic and Sexual & Reproductive Health in Africa.* IUSSP Webinar

²¹¹ World Bank. (2021). *Socio-economic Impact of COVID-19 in Kenya – On Households.* World Bank Poverty and Equity Group.

²¹² World Bank. (2021). *How COVID-19 Continues to Affect Livelihoods in Kenya.* World Bank Poverty and Equity Group.

adverse effects on women-owned micro, small and medium-enterprises.²¹³ By mid-2021, economic recovery and increased job creation fostered recovery to pre-pandemic levels, although this was experienced in a different way by different sub-groups. Rural areas were able to recover at a quicker pace, as rural households and what would be termed as 'existing poor' continued to rely on agriculture as their primary source of income and employment.²¹⁴ Additionally, women dependent on agriculture and wage employment, managed to recover quicker than men dependent on formal employment.²¹⁵

226. **Food insecurity** levels became aggravated following the lockdowns which hampered food availability in local markets, coupled with extensive drought that reduced the overall crop and livestock production. Additionally, financial hardships experienced in many households meant that many resorted to skipping meals, eating less, or going without food, as a coping mechanism. By the second lockdown of April-June 2021, over 41 percent of adults and 11 percent of children were assessed as having to skipped at least one meal a day, which was similar among both urban and rural households.²¹⁶ More women (45 percent) than men (41 percent) had to either eat less or skip a meal, and others had to go without food as they were adversely impacted by losses on income and disrupted livelihoods.²¹⁷ Above-average food prices for staples such as maize continue to be experienced in many agricultural parts of the country including the Arid and Semi-Arid Lands, where over 3.1 million people are said to be facing high levels of acute food insecurity in the second quarter of 2022.²¹⁸ Acute food insecurity levels have impacted malnutrition in these counties resulting in an increased rate of acute malnutrition in over 700,000 children under five years and 103,000 pregnant and lactating women.²¹⁹

227. **School closures** were experienced between March 2020 and January 2021. Schools had to adapt to remote and alternative forms of learning including self-directed and community-based learning, and remote education through online, radio, and TV programs. During this period, educational outcomes were unequal for different sub-groups as only 22 percent of children could access digital tools such as laptops. Access to digital learning was higher for children in private schools and in households whose head had a tertiary education.²²⁰ Access to digital learning was also gendered in that only 40 percent of girls had access to mobile phones, internet cafés or computers, compared to 60 percent of boys.⁵ Within this period, learning for girls with poor backgrounds was also threatened by domestic obligations, as they spent over 50 percent of classroom time doing household chores.²²¹ The extended period of school closures also increased food insecurity particularly for children who were already living in vulnerable circumstances and who could, as a result of school closures, no longer access complementary meals provided under school-feeding programmes. For the households, school closures increased the time caregivers and guardians spent on both unpaid care and domestic work as most children had to stay at home resulting in a higher percentage of women being unable to work outside the home or having more responsibilities.²²² Up to 40 per cent of unpaid care and domestic work roles are taken up by women compared to 37 per cent for men; also, 53 per cent of women had to become involved in teaching activities compared to 15 per cent for men; and 41 per cent for women compared to 39 per cent for men had to care for children.²²³

228. **The health system** focused their attention on combating the burden of COVID-19. At the onset of the pandemic, there was a decline in routine check-ups or medical services due to varying factors including general travel restrictions, loss of income limiting individual's purchasing power, decline in health insurances able to cover COVID-19 infections, and a sense of concern over infection risks at health care facilities. The hospitals and medical centres were under focused on responding to COVID-19 infections and therefore attention on essential healthcare for women, including sexual and reproductive health were not

²¹³ S, Kabeira and S, Muathe. (2020). Effect of COVID-19 Pandemic on Performance of Women Owned Micro, Small and Medium Enterprises in Kenya. School of Business, Kenyatta University Kenya.

²¹⁴ World Bank. (2021). How COVID-19 Continues to Affect Livelihoods in Kenya. World Bank Poverty and Equity Group.

²¹⁵ World Bank. (2021). How COVID-19 Continues to Affect Livelihoods in Kenya. World Bank Poverty and Equity Group.

²¹⁶ World Bank. (2021). How COVID-19 Continues to Affect Livelihoods in Kenya. World Bank Poverty and Equity Group

²¹⁷ UN Women, COVID-19 Gender Assessment. 2020.

²¹⁸ [IPC Kenya Acute Food Insecurity Malnutrition 2022FebJun Report.pdf](#).

²¹⁹ [IPC Kenya Acute Food Insecurity Malnutrition 2022FebJun Report.pdf](#).

²²⁰ B, Abuya. (2022) Deeper Divide: What Kenya's pandemic school closures left in their wake. The Conversation.

²²¹ World Bank. (2021). How COVID-19 Continues to Affect Livelihoods in Kenya. World Bank Poverty and Equity Group.

²²² Unpaid domestic work entails cleaning, collecting water, preparing food & shopping for the household

²²³ Government of the Republic of Kenya and UN-Women 2020, An Assessment of the Gendered effects of the COVID-19 Pandemic on Households. Gender Perspectives 2020 Report. Nairobi

prioritised.²²⁴ Women who sought out medical services for cancer related issues, HIV, and pregnancy related services were among the most overlooked clients.²²⁵ It is noteworthy that since 2020, there has been a 56 percent reduction in the use of HIV prevention and treatment services in counties that are most affected by HIV.²²⁶

229. **Isolation** affected the elderly due to restrictions to in-person contact and lack of access/ability to digital communication platforms.²²⁷ Anyone who relied on the support of family experienced less care, and loss of income had a considerable effect on nutrition overall.

²²⁴ UN Kenya. 2020. COVID-19 Gender Assessment : Gender Perspective.

²²⁵ UN Kenya. 2020. COVID-19 Gender Assessment : Gender Perspective.

²²⁶ S. Muhula, Y. Opanga, V. Oramisi, C. Ngugi, C. Ngunu, J. Carter, E. Marita, J. Osur, P. Memiah. (2021). Impact of the First Wave of the COVID-19 Pandemic on HIV/AIDS Programming in Kenya: Evidence from Kibera Informal Settlement and COVID-19 Hotspot Counties. PubMed Central. Accessed via <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8199875/#:~:text=This%20study%20indicated%20a%2056.uptake%20significantly%20increased%20by%2024%25>.

²²⁷ UNFPA. (2020). COVID-19 and the Elderly: The Story of the 72-year Old Granny on Rusinga Island, accessed on 9/9/2022 via <https://kenya.unfpa.org/en/news/COVID-19-and-elderly-story-72-year-old-granny-rusinga-island>.

Annexes 11. Results Framework

Result/Indicator	Baseline	2020 Target	2021 Target	Means of Verification	Responsible Partner
Outcome 1 – By 2022, marginalized and vulnerable people have increased access to and utilize social protection, and services for prevention and response to gender-based violence against children (UNDAF outcome 6)					
Outcome 1 indicator – Proportion of population covered by social protection systems/floors	12%	16%	23%	SAU caseload/annual reports/economic survey	GoK
Outcome 1 indicator – Proportion of total government spending on social protection	0.42%	0.6%	0.8%	Budget/spend/economic surveys/annual reports	GoK
Output 1 – Enabling environment for gender responsive universal social protection (USP) in Kenya is strengthened					
Output 1.1 indicator – Costed action plan/business case for gender aware USP inclusive of social assistance and security	Social Protection Policy & Strategy	Draft USP action plan CBA and feasibility studies done Business case for USP developed Costed roadmap/action plan on progressive realization of USP Capacity building activities on gender carried out	Costed, finalized & approved action plan for USP	Documents	FAO, ILO, UNICEF, WFP
Output 1.2 indicator – Sustainable financing mechanism developed	Investment plan for social protection	Financing studies Draft Social assistance fund legislation	Innovative financing mechanisms for USP identified Sustainable financing mechanism finalised	Documents	UNICEF, WFP, ILO
Output 2 – Design options & roll-out plans for gender responsive universal social protection are developed					
Output indicator 2.1 – Finalized design options for gender aware universal programmes including on social security benefits and extension of coverage developed	NSSF benefits package	Feasibility/actuarial studies on social insurance. Assessment of social protection in the informal economy	Design options for social insurance programmes Design options for extending SP to informal economy workers	Annual Social Protection Reports, Progress milestones reporting	ILO, FAO
Output indicator 2.2 – A Universal Child Grant designed	Nothing in place	Feasibility studies for the rollout and roadmap to UCG	Design options for the UCG are developed and validated	Studies and plans SP annual report	UNICEF, WFP, ILO
Output indicator 2.3 – Gender sensitive social assistance	Single registry MIS exists but on a targeted approach	MIS/ M&E framework review	Action plan for enhancement of management & delivery	Operationalized System in use	WFP, FAO, UNICEF

management and delivery system reviewed			system & M&E framework developed		
Output indicator 2.4 - Strengthened Social Security M&E system to track contributions and benefits and enhanced reporting	Scheme specific MIS	Review/develop MIS/M&E to accommodate enhanced benefits	Enhanced MIS/M&E system tracking additional benefits	Annual/periodic reports	ILO
Output 3 - Enhanced gender responsive integration between universal social protection and economic and social interventions and delivery systems					
Output indicator 3.1 - Integrated models on USP/socio-economic interventions that are gender sensitive are developed	5 programmes in place but no system for linkages between sectors.	-Integrated models targeting PWD, PLHIV	Integrated models /socio-economic interventions targeting PWD, PLHIV not in place Kenya Business Disability Network Developed.	Systems (MIS and admin system) in place to facilitate linkages between UPS and socioeconomic sectors	GoK, FAO, ILO, WFP
Output indicator 3.3 - Effective coordination mechanisms for social protection that are gender sensitive	Coordination mechanisms exist at national level but linkages with county levels are weak	-	County mapping and coordination of the social protection mid- UNDAF review	Annual Social Protection report	FAO, ILO, WFP, UNICEF

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Acronyms

AIDS	Acquired Immunodeficiency Syndrome
ALNAP	Active Learning Network for Accountability and Performance
ASAL	Arid and Semi-Arid Lands
CBHI	Community Based Health Insurance
CESCR	Covenant on Economic, Social and Cultural Rights
CO	Country Office
COtD	Cost of the Diet
COTU (K)	Central Organisation of Trade Unions in Kenya
CRPD	Convention on the Rights of Persons with Disabilities
CSOs	Civil Society Organisations
CT-OVC	Cash Transfer for Orphans and Vulnerable Children
DEQAS	Decentralized Evaluation Quality Assurance System
EQ	Evaluation Question
ET	Evaluation Team
EU	European Union
FAO	Food and Agriculture Organisation of the United Nations
FDI	Foreign Direct Investments
FKE	Federation of Kenya Employers
FNG	Fill the Nutrient Gap
GBV	Gender-Based Violence
GDP	Gross Domestic Product
GEWE	Gender Equality and Women Empowerment
HIV	Human Immunodeficiency Virus
HSNP	Hunger Safety Net Programme

HRBA	Human-Rights Based Approach
ICT	Information, Communication and Technology
ILO	International Labour Organisation
IT	Information Technology
JP	Joint Programme
KIAMIS	Kenya Integrated Agriculture Management Information System
KIPPRA	Kenya Institute of Public Policy Research and Analysis
KSPS	Kenya Social Protection Strategy
LNOB	Leave No One Behind
M&E	Monitoring and Evaluation
MTP	Medium Term Plan
NCPWD	National Council for Persons with Disability
NDEF	National Drought Emergency Fund
NGO	Non-Governmental Organisation
NHIF	National Hospital Insurance Fund
NSNP	National Safety Net Programme
NSPS	National Social Protection Secretariat
NSSF	National Social Security Fund
OECD-DAC	Organisation for Economic Co-operation and Development Assistance Committee
OEV	Office of Evaluation
OPCT	Older Persons Cash Transfer
PUNO	Participating United Nations Organisations
PWD	Persons with Disability
PwSD	Persons with Severe Disability
PwSD-CT	Persons with Severe Disabilities Cash Transfers

QA	Quality Assurance
RB	Regional Bureau
RCO	Resident Coordinator's Office
RDA	Respondent Driven Analysis Approach
SDG	Sustainable Development Goals
SGBV	Sexual and Gender-based Violence
SGSP	Sectoral Group of Social Protection
SP	Social Protection
SRA	Strategic Result Area
SUPKEM	Supreme Council of Kenya Muslims
TBE	Theory Based Evaluation
ToR	Terms of Reference
UCB	Universal Child Benefit
UCDB	Universal Child Disability Benefit
UFE	Utilization Focused Evaluation
UHC	Universal Health Coverage
UN	United Nations
UNCT	United Nations Country Team
UNDAF	United Nations Development Assistance Framework
UNEG	United Nations Evaluation Group
UNICEF	United Nations Children's Fund
WEI	Women's Empowerment Index
WFP	World Food Programme
WOFAK	Women Fighting AIDS in Kenya

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