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

Comments by Belgium	UNFPA country/regional office response to comments
We regret that our delegation in Dakar, as representative of a core funding partner, was not involved in the drafting of this CPD despite several requests.	UNFPA sincerely thanks the Government of Belgium for taking the time to review the draft CPD and share its valuable comments. During the development of the draft CPD, UNFPA made a very strong attempt, in coordination with the Government of Senegal, to engage a broad spectrum of partners and stakeholders. It is UNFPA's intention to ensure that this consultative and inclusive approach, including with key development partners such as Belgium, is maintained and strengthened throughout implementation of the CPD. The UNFPA Senegal Country Office has reached out and will continue to reach out to the Belgium delegation in Dakar to discuss the CPD as well as the partnership between UNFPA and the Government of Belgium.
The three outputs respond entirely to the UNFPA mandate and the needs of Senegal. However, we see a clear stagnation over the years regarding the human development indicators related to mother and child mortality, SGBV, SRHR, etc. Despite the results of previous programmes both by UNFPA and others, it is necessary to reflect on this challenge and to identify innovative approaches and solutions. How will UNFPA integrate this challenge in the next programme? Which innovative approaches will be applied in order to improve the indicators?	UNFPA thanks Belgium for these comments. Indeed, the challenge indicated is accurate and has been mentioned in paragraphs 10 and 13 of the draft CPD. One of the major causes of slow progress and change over the years in key indicators related to maternal and child mortality, SGBV, SRHR, are related to deeply-rooted harmful socio-cultural norms. Given this context, the CPD has a strong focus on promoting social norms is clearly indicated in paragraphs 15, 17, 18, 21, 22, 23 and 24 of the CPD.
	In its work to address this issue, UNFPA will, for example, mobilize youth as agents of change, religious and traditional leaders and influencers to shift harmful social norms and promote positive masculinities while also scaling up impactful innovative interventions such as l'Épargne Communautaire pour accélérer l'atteinte des 3

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	Résultats transformateurs de l'UNFPA (Eco.3.0 ) and supporting the digitalization of services.
	One key lesson from the previous CPD was to "involve youth in the eradication of GBV and harmful practices to achieve total elimination of FGM in future generations". This recommendation has informed the current CPD, and is reflected in the focus on involving youth and key stakeholders in shifting harmful social norms.
	Finally, two indicators in the results framework from the UNSDCF have been updated in the CPD, as per decision of the Government and UN working group:
	(i) "Universal health coverage index for essential health services"
	(ii) "Modern contraceptive prevalence rate"
	In addition, for output 2, the targets for the indicators have now been included.
	Also, the following sub-indicator "girls and women (15-24) (25-34) years", which is a component of the main indicator "proportion of women and girls 15 years and older subjected to physical or sexual violence in the previous 12 months by type and author", has been removed in alignment with the latest version of the UNSDCF.
	Further, the following indicator has been removed as the baseline is not yet available: "proportion of the population satisfied with the quality of services and political process". The baseline will be determined at a later stage by the 2023 Afrobarometer of the Agence Nationale de la Statistique et de la Démographie.
	To see all these changes, please refer to the RRF on pages 9, 10 and 11.
Senegal is going this year through a population census, a process accompanied by UNFPA. The collection of data presents therefore an important opportunity not only for activities for data gathering and information systems but also for analysis and public policy development. How does UNFPA see its role in accompanying the Senegalese government	UNFPA thanks Belgium for the comment. UNFPA in Senegal has played a key role in the preparation of the 5th census that was carried out from 15 May to 15 June 2023. As outlined in paragraph 25 of the draft CPD, UNFPA in Senegal will strengthen its leadership position in relation to data collection, analysis, and dissemination. As outlined in

in reinforcing its competencies in this matter and elaborate social policies on the basis of this newly gathered data?	the paragraphs 18 b and d, 25 and 26, this will be done through quality capacity building of government and partners on data collection, analysis, dissemination, and utilization to produce and inform evidence-based social policies, strategies, and sectoral action plans. three indicators of the third output of the CPD are related to population dynamics.
The public space for debate on gender seems to be narrowing in Senegal, mainly because in the public opinion it is linked with issues as LGBTQI. This implies a sensible approach to activities focussing on gender equality, social norms and gender roles, especially in relation to certain traditional, cultural or religious traditions and taboos. How does UNFPA see its role in advocating for gender equality and women's and girls' rights in this context?	UNFPA thanks Belgium for the comments. UNFPA Senegal is playing an influential role in advocating for gender equality, women's and girls' rights while being aware of sensitivities and dynamics around certain topics such as LGBTQI in the context of Senegal. UNFPA in Senegal has been supporting the development and implementation of several national policies on gender equality and women's rights, especially gender equity and equality, the elimination of FGM and harmful practices, and the Agenda of the Young Girl. To advance gender equality and women's rights in Senegal, UNFPA is adopting both a human rights-based and gender-transformative approach. This will be done using gender responsive analysis and advocacy campaigns on gender equality and shift in harmful social norms. Those interventions are outlined in paragraphs 18a, 23 and 24. UNFPA is also leveraging gender related terminologies, which are culturally accepted, to address harmful social norms driving gender inequality. UNFPA is furthermore strengthening its collaboration and partnership with religious and traditional leaders, women's networks, parliamentarians, men and boys community representatives as well as youth as change agents to address harmful social norms (please see paragraphs 17, 23 and 24). Finally, UNFPA will also undertake interventions at several levels: - At the systemic level, UNFPA is supporting advocacy efforts and interventions for the adoption and development of laws and policies in

	<ul> <li>favour of gender equality (see paragraphs 23 and 24).</li> <li>- At the community level, UNFPA has launched several initiatives aimed at changing harmful social norms and promoting socio-cultural approaches in favour of gender equality; such as the husband schools, girls' clubs, etc.) (see paragraphs 18 and 24).</li> </ul>
<b>Comments by United States</b>	UNFPA country/regional office response to comments
The UNFPA CPD is appropriately focused to address challenges in-country. We appreciate the acknowledgement of the main challenges of reducing maternal and neonatal mortality, and reducing unmet need for FP. Nonetheless, the achievement of the three transformative results remains a major challenge, given the high rates of maternal mortality, unmet need for family planning and GBV, FGM and child marriage in Senegal. The priority of the new country programme is to accelerate the implementation of high- impact interventions to achieve the transformative results.	UNFPA thanks the United States for the comment and welcome this important observation. UNFPA is committed to accelerating progress towards the three transformative results, and in this regard looks forward to strengthening partnership with the United States. UNFPA is also pleased to note that a number of high impact innovative interventions (e.g. New Deal, 'Eco 3.0', Ndiatigué, midwifery mentorship, husband schools, grandmother project, Guindima, village solidarity fund, use of mobile clinics, among others) are included in the CPD as key drivers for achieving the three transformative results (see paragraphs 15, 17, 18, 21, 22, 23 and 24).
We also note the important linkages between the draft country program document's alignment with the U.S. in country approach and its intermediate results: health status improved, lifelong learning improved and Sub IR Strengthened systems, including increased access to services, improved quality of services, and increased participation by communities & other stakeholders. A focus is done on preventing and responding to GBV harmful practices through the output2.	UNFPA is grateful for the comment and observation. The areas mentioned are key to our mandate and respond strongly to the priorities of the host Government and needs on the ground. Moreover, UNFPA likewise recognizes the alignment between the CPD and the approach of the U.S. in Senegal and looks forward to strengthening collaboration to achieve common objectives.
We greatly value the strong relationship between the US and UNFPA in- country. The technical teams have several discussions about our respective programs to discuss collaboration, challenges faced during the implementation of RMNCAH/FP interventions, and how to work together to advocate to find a solution.	UNFPA thanks the United States for the comments, and likewise greatly value the strong partnership between UNFPA and the United States. UNFPA looks forward to continuing and strengthening its interactions and synergies with the U.S. in Senegal to achieve greater impact in achieving the three transformative results in Senegal.