



**COUNTRY PROGRAMME EVALUATION (CPE) OF
THE UNITED NATIONS POPULATION FUND
(UNFPA) MALAYSIA
1st COUNTRY PROGRAMME 2022-2025**

FINAL CPE REPORT

(PERIOD COVERED BY THE EVALUATION: JANUARY 2022 – JUNE 2024)

10 February 2025

Country Map

Map of Malaysia Location of UNFPA CP1 (2022-2025) Programme Intervention Areas



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ACKNOWLEDGEMENTS

The Evaluation Team (ET) would like to thank UNFPA for the opportunity to undertake the evaluation of UNFPA's 1st Country Programme for Malaysia 2022-2025. The ET wishes to acknowledge with sincere thanks the support and contributions of various stakeholders, specifically the representatives from various Government Ministries, Implementing Partners, and related institutions, state-level representatives, various civil society organizations, UN collaborating agencies, and a wide range of other stakeholders including academia, for providing time, resources and materials for the conduct of this Evaluation. All stakeholders played a vital role in shaping the findings and recommendations of the evaluation.

We appreciate the active participation of members of the Evaluation Reference Group (ERG) in this exercise during all stages of the evaluation, which was instrumental in fostering meaningful discussions and providing valuable insights. The ET is particularly grateful to the UNFPA staff members of the Country Office led by the UNFPA Representative Dr. Julitta Onabanjo, the Assistant Representative Tengku Aira Tengku Razif and of the UNFPA Asia-Pacific Regional Office (APRO), who despite a heavy workload of other pressing commitments, remained responsive to the ET's requests for information.

Finally, we are grateful for valuable feedback by all the reviewers, specifically Ms Oyuntsetseg Chuluundorj, UNFPA APRO M&E Advisor for her guidance and constructive feedback, which was invaluable in aligning this evaluation with global standards and strategic priorities. The ET would not have been able to carry out its work without the intense engagement of the CP Evaluation Manager Ms Shiau Yun Chong, who deserves appreciation for her valuable advice and management of this exercise, ably supported by Ms Jolyn Lok who meticulously made all arrangements during the field phase. The ET highly appreciates the UNFPA HQ Evaluation Office for the production of the Evaluation Handbook which guided the conduct of this Country Programme Evaluation.

The Evaluation Team hopes that this Evaluation and the insights and recommendations presented in this report will positively contribute to building a sound foundation for the future direction of the UNFPA Country Programme and contribute to continued progress towards the Sustainable Development Goals in Malaysia.

TABLE OF CONTENTS

Section	Title	Page No.
	TABLES AND FIGURES	vii
	ACRONYMS AND ABBREVIATIONS	viii
	KEY FACTS TABLE	xi
	EXECUTIVE SUMMARY	xii
	CHAPTER 1 – INTRODUCTION	1
1.1	Purpose and objectives of the CPE	1
1.2	Scope of the evaluation: thematic, temporal, geographic	2
1.3	Evaluation approach	2
1.3.1	Contribution analysis and theory of change	4
1.3.2	Methods for data collection and analysis	8
1.3.3	Stakeholders consulted and sites visited	10
1.3.4	Limitations and mitigation measures	12
	CHAPTER 2 – COUNTRY CONTEXT	14
2.1	Development challenges and national strategies	14
2.2	The role of external assistance	18
	CHAPTER 3 – THE UNITED NATIONS AND UNFPA RESPONSE	21
3.1	United Nations and UNFPA strategic response	21
3.2	UNFPA response through the country programme	22
3.2.1	Brief description of UNFPA previous programme cycle, goals and achievements	22
3.2.2	The current UNFPA country programme	23
3.2.3	The financial structure of the UNFPA country programme	27
	CHAPTER 4 – FINDINGS	31
4.1	Answer to evaluation question 1	31
4.2	Answer to evaluation question 2	35
4.3	Answer to evaluation question 3	38
4.4	Answer to evaluation question 4	40
4.5	Answer to evaluation question 5	46
4.6	Answer to evaluation question 6	62
4.7	Answer to evaluation question 7	64
4.8	Answer to evaluation question 8	73
	Chapter 5 – CONCLUSIONS	80
5.1	Strategic level	80
5.2	Programmatic level	82
	Chapter 6 – RECOMMENDATIONS	85
6.1	Strategic (<i>in order of priority</i>):	85
6.2	Programmatic (<i>in order of priority</i>):	87
6.3	Operational:	89

LIST OF ANNEXES

Annex-1: The Evaluation Matrix

Annex-2: List of documents consulted

Annex-3: Stakeholders mapping and original list of persons to be consulted

Annex-4: List of persons consulted and their organizational affiliations

Annex-5: State-level interventions – current and planned

Annex-6: Data collection tools

Annex-7: List of UNFPA interventions

Annex-8: CPE Terms of Reference

TABLES AND FIGURES

List of Tables

Table 1.1: Evaluation Criteria and Evaluation Questions	3
Table 1.2: Sampling framework	12
Table 3.1: Comparison of Outputs of previous (2019-2021) and current (2022-2025) CP cycles	23
Table 3.2: Linkage of UNFPA CP1 outputs, UNFPA SP outcomes and UNSDCF outcomes with Malaysia's 12th Plan and ICPD-PoA priority areas	24
Table 3.3: UNFPA Financial Commitment* for CPD 2022-2025 (in USD) by outcome/output areas	27
Table 3.4: Overview of the budget allocation, expenditures and utilization rate for the programmatic areas by output for the first 2.5 years (1 Jan 2022 – 30 June 2024) of CP1, in USD	28
Table 3.5: Overview of the budget allocation, expenditure and utilization rate per year for the first 2.5 years (1 Jan 2022 – 30 June 2024) of CP1, in USD	28
Table 3.6: Overview of the budget allocation, expenditure and utilization rate per Implementing Partner for the first 2.5 years (1 Jan 2022 – 30 June 2024) of CP1, in USD	29
Table 3.7: CO Resource Mobilization and Areas of Intervention	30
Table 4.1: Progress towards programme results under indicators for UNSDCF/CPD outcomes and CPD outputs	47

List of Figures

Figure 1.1: Intervention Logic - UNFPA Malaysia CP1	5
Figure 2.1: Population pyramid, 1970 and 2021	15
Figure 2.2: Net official development assistance and official aid received (current USD)	19
Figure 2.3: Top Ten Donors of Gross ODA for Malaysia 2020-2021 average (USD million)	19
Figure 2.4: Bilateral ODA by Sector for Malaysia 2020-2021 average	20
Figure 3.1: Graphical representation of table 3.4	28
Figure 3.2: Graphical representation of table 3.5	29

ACRONYMS AND ABBREVIATIONS

12MP	Twelfth Malaysia Plan 2021-2025
13MP	Thirteenth Malaysia Plan 2026-2030
3TRs	Three Transformative Results
APPC	Asian and Pacific Population Conference
APR	Annual Progress Report
APRO	Asia-Pacific Regional Office
ASEAN	Association of Southeast Asian Nations
ASHA	Anti-Sexual Harassment Act
AWAM	All Women's Action Society
AWP	Annual Work Plan
AY	Adolescents and Youth
BOS	Business Operations Strategy
CC	Closed Caption
CCA	Common Country Assessment
CEDAW	Convention on the Elimination of all Forms of Discrimination against Women
CO	Country Office
COVID-19	Coronavirus disease 2019
CP	Country Programme
CP1	First UNFPA Malaysia Country Programme 2022-2025
CPAP	Country Programme Action Plan
CPD	Country Programme Document
CPE	Country Programme Evaluation
CRC	Convention on the Rights of the Child
CRPD	Convention on the Rights of Persons with Disabilities
CSE	Comprehensive Sexuality Education
CSOs	Civil Society Organizations
DAC	Development Assistance Committee
DHS	Demographic and Health Survey
DOSM	Department of Statistics, Malaysia
ENGENDER	Gender rights and advocacy organization
EP	Evaluation Policy (UNFPA)
EPU	Economic Planning Unit
EQAA	Evaluation Quality Assurance and Assessment
EQs	Evaluation Questions
ERG	Evaluation Reference Group
ET	Evaluation Team
FBOs	Faith Based Organizations
FGD	Focus Group Discussion
FGDs	Focus Group Discussions
FOE	Families on the Edge
FP	National Family Planning
FRHAM	Federation of Reproductive Health Associations Malaysia
GBV	Gender-based violence
GDP	Gross domestic product
GEWE	Gender Equality and Women's Empowerment
GII	Gender Inequality Index

GLCs	Government-Linked Companies
GNI	Gross National Income
GoM	Government of Malaysia
GRG	Gender Results Group
GTA	Gender Transformative Approach
HDI	Human Development Index
HIC	High-Income Country
HIV	Human immunodeficiency viruses
HUMS	Hospital Universiti Malaysia Sabah
ICPD	International Conference on Population and Development
IDEVAW	International Day for the Elimination of Violence against Women
IFIs	International Finance Institutions
IPs	Implementing Partners
IPV	Intimate Partner Violence
IRCIEF	International Research Centre of Islamic Economics and Finance
ISIS	Institute of Strategic and International Studies (Malaysia)
JAG	Joint Action Group
JFS	Justice for Sisters (advocacy group)
LFPR	Labour Force Participation Rate
LGBTQI+	Lesbian, Gay, Bisexual, Transgender, Queer, and Intersex, “+” stands for all of the other identities not encompassed in the short acronym.
LNOB	Leaving-No-One-Behind
LPPKN	Lembaga Penduduk dan Pembangunan Keluarga Negara in Malay
LTAs	Long Term Agreements
M&E	Monitoring and Evaluation
MCCBCHST	Malaysian Consultative Council of Buddhism, Christianity, Hinduism, Sikhism and Taoism
MOE	Ministry of Education
MISP	Minimum Initial Service Package
MOH	Ministry of Health
MOU	Memorandum of Understanding
MPFS-5	Fifth Malaysian Population and Family Survey
MSC	Multimedia Super Corridor
MWFC	Ministry of Women, Family and Community Development
MWGF	Malaysia Women and Girls Forum
MyAgeing	Malaysian Research Institute on Ageing
MYS	Ministry of Youth and Sports
NFP	National Family Policy
NFPB	National Family Planning Board
NGDs	Nominal Group Discussions
NGO	Nongovernmental Organization
NPFDB	National Population and Family Development Board
NPOP	National Policy for Older Persons
NTA	National Transfer Accounts
ODA	Official Development Assistance
OECD	Organisation for Economic Co-operation and Development ¹
OMT	Operations Management Team
OSCC	One Stop Crisis Centre
PCA	Programme Coordination and Assistance

PD	Population and Development
PEERS	Empowering reproductive and social health education elements
PEKERTI	National Reproductive Health and Social Education Policy
PERKKS	Proceedings of the National Population Conference
PHC	Primary Health Care
PLHIV	People Living with HIV
PNC	Post-Natal Care
PoA	Programme of Action (of ICPD)
PSEA	Prevention of Sexual Exploitation and Abuse
PSU-UM	Population Studies Unit-Universiti Malaya
PWDs	Persons with Disabilities
RCO	Resident Coordinator's Office (UN)
RH	Reproductive Health
RRAAM	Reproductive Rights Advocacy Alliance Malaysia
SDGs	Sustainable Development Goals
SERP	Socio-Economic Recovery Plan
SGBV	Sexual and Gender-based Violence
SIF	Strategic Investment Facility
SIS	Sisters in Islam
SOP	Standard Operating Procedure
SP	(UNFPA) Strategic Plan
SPV	Shared Prosperity Vision
SRH	Sexual and Reproductive Health
SRHE	Social and Reproductive Health Education
SRHR	Sexual and Reproductive Health and Rights
SSTC	South-South and Triangular Cooperation
SUHAKAM	Human Rights Commission of Malaysia
SWWS	Sarawak Women for Women Society
TOC	Theory of Change
TOT	Training of Trainers
TOR	Terms of Reference
TVET	Technical and Vocational Education and Training
UHC	Universal Health Coverage
UIS	Islamic University Selangor
UMIC	Upper Middle-Income Country
UMS	University Malaysia Sabah
UNAIDS	United Nations Programme on HIV/AIDS
UNCT	United Nations Country Team
UNDP	United Nations Development Programme
UNEG	United Nations Evaluation Group
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
UNITGSE	United Nations International Technical Guideline on Sexuality Education
UNSDCF	United Nations Sustainable Development Cooperation Framework
UNU-IIGH	United Nations University International Institute for Global Health
UPR	Universal Periodic Review
WAO	Women's Aid Organisation

KEY FACTS TABLE

Land	
Geographical location	Southeast Asian
Land area	330,803 km ²
Demographics	
Total population size ¹ [Bumiputera / Chinese / Indians / Others]	34,308,525 [70.1% / 22.6% / 6.6% / 0.7%]
Population size by sex composition ² [Males/Females]	50.7% / 49.3%
Population size by rural / urban ³	21% / 79%
Population growth rate ³	1.06%
Life expectancy at birth by ⁴ [both sexes/Males/Females]	75.2 years/73 years/77.8 years
Human Development Index (HDI) index/rank [Out of 193 Countries] ⁶	0.807/63th
Gender Inequality Index (GII) index/rank [Out of 146 Countries] ⁷	0.681 / 103rd
Young people	
Proportion of population ⁸ [aged 0-14 / 10-19 / 10-24 / 15-64 / 65 and above]	22% / 15% / 23% / 70% / 8%
School Enrolment rate ⁹ [Primary - Male/Female, Secondary - Male/Female]	98%/98%, 82%/87%
School completion rate ⁹ [Primary - Male/Female, Secondary - Male/Female]	98%/98%, 82%/87%
Teenage pregnancy rate ¹⁰ (Prop. of women aged 15-19 yrs who began childbearing, per 1000 women)	9.13%
Health and fertility	
Total fertility rate ¹¹ (For women aged 15-49 years) [births per woman]	1.6
Adolescent birth rate ¹² [per 1,000 women, aged 10-14/15-19 years]	0.1 / 6.0
Under five mortality rate (Number of deaths per 1000 Live Births) ⁵	7.8
Contraceptive prevalence rate ¹³ (modern methods)	34.00%
Unmet need for family planning ¹⁴	26.7%
Proportion of births attended by skilled health personnel ¹⁵	99.60%
Institutional deliveries ¹⁶ [%]	98.00%
Maternal mortality ratio ¹⁶ [per hundred thousand live births]	26
HIV prevalence rate, 15-49 ¹⁷ , Male:Female ratio	0.40%, 7.5 : 1
Economic	
Gross National Income (GNI) ¹⁸ [per capita]	US\$ 11970.00
Gross domestic product (GDP) ¹⁸ [per capita]	US\$ 11648.70
GDP growth rate ¹⁸	3.70%
Unemployment rate ¹⁹ (Overall, Urban - Male/Female, Rural - Male/Female)	3.3% ~ 3.4%, 3.2% / 3.5% , 2.5% / 3.0%
Inflation rate ²⁰	2.49%
Gini index ²¹	40.7
Major economic activity ²²	Primary Production
Gender equality	
Proportion of aged 20-24 years who were married or in union before age 18 ²³ (child marriage)	1 in 5 Young Women / 1 in 30 Young Men
Proportion of ever- partnered women and girls aged 15– 49 years subjected to physical and/or sexual violence by a current or former intimate partner in their lifetime ²⁴ (%)	19%
Political	
Type of government ²⁵	Parliamentary Democracy and Constitutional Monarchy
Key political events ²⁶ (during period being evaluated)	General elections 2022

¹Population Malaysia, Department of Statistics Malaysia. https://open.dosm.gov.my/data-catalogue/population_malaysia

²World Population Prospects, United Nations Population Division. <https://population.un.org/wpp/>

³Rural/Urban Population, World Bank. <https://data.worldbank.org/indicator/SP.RUR.TOTL.ZS?locations=MY>

⁴Life Expectancy, Department of Statistics Malaysia. <https://open.dosm.gov.my/dashboard/life-expectancy>

⁵Malaysia Country Data, UNICEF. <https://data.unicef.org/country/mys/>

⁶Human Development Index, UNDP. <https://hdr.undp.org/data-center/country-insights#ranks>

⁷Gender Equality, UNDP. <https://www.undp.org/malaysia/gender-equality>

⁸World Population, UNFPA. <https://www.unfpa.org/data/world-population/MY>

⁹School Enrollment, World Bank. <https://data.worldbank.org/indicator/SE.PRM.ENRR?locations=MY>

¹⁰Teenage Pregnancy, Bernama. <https://www.bernama.com/en/news.php?id=2313558>

¹¹World Population Prospects, United Nations Population Division. <https://population.un.org/wpp/>

¹²Adolescent Birth Rate, World Health Organization. <https://data.who.int/indicators/i/24C65FE/27D371A>

¹³Contraceptive Prevalence, Key Findings of the Fifth Malaysian Population and Family Survey (MPFS-5) 2014. National Population and Family Development Board https://familyrepository.lppkn.gov.my/index.php/database_stores/store_view_page/18/488?link=Ij9taWQ9MTU3JmFscGhhYmV0PVli

¹⁴Family Planning, MPFS. <https://iku.gov.my/images/nhms-2022/TRNHMSmch2022.pdf>

¹⁵Skilled Birth Attendance, World Bank. <https://liveprod.worldbank.org/en/indicator/sh-sta-brtc-zs>

¹⁶Maternal Health, UNICEF. https://data.unicef.org/wp-content/uploads/country_profiles/Malaysia/Maternal_MYS.pdf

¹⁷HIV Prevalence, AIDS Data Hub. <https://www.aidsdatahub.org/resource/malaysia-country-slides>

¹⁸GNI per Capita, World Bank. <https://data.worldbank.org/indicator/NY.GNP.PCAP.CD?locations=MY>

¹⁹Labour Market, Department of Statistics Malaysia. <https://open.dosm.gov.my/dashboard/labour-market>

²⁰Inflation, The Star. <https://www.thestar.com.my/business/business-news/2024/01/22/malaysia039s-inflation-maintained-at-15-in-dec-2023>

²¹Gini Index, World Bank. <https://data.worldbank.org/indicator/SI.POV.GINI?locations=MY>

²²Country Overview, World Bank. <https://www.worldbank.org/en/country/malaysia/overview>

²³Child Marriage, UNICEF. https://www.unicef.org/malaysia/media/1801/file/Child_marriage_brief_factsheet_%28ENG%29.pdf

²⁴Violence Against Women, World Health Organization. <https://data.who.int/indicators/i/BEDE3DB/E0D4E17>

²⁵Introduction to Parliament, Parliament of Malaysia. <https://www.parlimen.gov.my/pengenalalan.html?&uweb=p&view=23&lang=en>

²⁶General Elections 2022, DOI. <https://doi.org/10.1525/as.2023.63.2.2>

EXECUTIVE SUMMARY

Purpose and scope of the evaluation, intended audience

1. This report presents the results of the Country Programme Evaluation (CPE) of UNFPA Malaysia's First Country Programme (CP1) 2022-2025¹. The CPE was commissioned by UNFPA Malaysia, with the **purpose** of demonstrating accountability to stakeholders on achieving development results, supporting evidence-based decision-making, and contributing important lessons learned to the existing knowledge-base of the organization, and in turn, informing the next country programme cycle. It provides an independent assessment of **relevance, coherence, effectiveness, efficiency** and **sustainability** of UNFPA support provided to the Government of Malaysia within the currency of CP1, as well as an analysis of the various enabling and inhibiting factors influencing programme implementation.

2. The CPE covers the period January 2022 to June 2024 and includes all national and sub-national level initiatives which were planned and/or implemented during this period under all outcomes and outputs of CP1. While CP1 is primarily implemented at the national level and interventions are largely focused in the capital city of Kuala Lumpur due to the nature of the work focusing on policy advocacy, interventions have also been spread to other geographic locations, with sub-national state-level interventions implemented in Sabah, Sarawak and Selangor via partners, given the needs of the populations located in these areas.

3. The evaluation covers the programmatic areas of sexual and reproductive health and rights (SRHR), adolescents and youth (AY), population and development (PD), and gender equality and women's empowerment (GEWE). To complement the assessment of programme components, the CPE also assessed the M&E systems of the CO as well as some operational aspects. The evaluation also reviewed the CP1 programme logic, including an analysis of the intended outputs, activities and contextual factors. An assessment of the CO's strategic positioning within the United Nations Country Team (UNCT) and national partners was made, along with drawing key lessons from past and current cooperation while providing actionable recommendations for the next programming cycle. The **audience** of this evaluation is the UNFPA Country Office (CO), relevant entities of the Government of Malaysia, the implementing partners of UNFPA Malaysia, rights holders involved in UNFPA interventions and the organizations that represent them, the UNFPA Asia-Pacific Regional Office (APRO), UNFPA Headquarters and the UNFPA Executive Board, as well as the UN Country Team in Malaysia.

Methodology

4. The CPE adhered to UNEG (UN Evaluation Group) Norms and Standards, and closely followed the methodology prescribed in the *UNFPA Evaluation Handbook 2024*. Centred around the five criteria of relevance, coherence, effectiveness, efficiency and sustainability, with a Gender, Human Rights-Based and LNOB approach, the evaluation used purposive sampling method, while applying a mixed method approach for data collection both from secondary and primary sources. The evaluation was transparent, inclusive, and participatory, and followed the "do-no-harm approach". The exercise was conducted by a four-person team comprising of an international Team Leader, two national Evaluators (thematic experts), and a national Young and Emerging Evaluator.

5. The evaluation was divided into **design** (July 2024), **field** (August -September 2024), **data analysis and reporting** (October-December 2024) **phases**. Using both secondary and primary sources, the collection of evaluation data was implemented using the following mixed methods: (i) desk review of documents, financial and other pertinent programme data, including from the UNFPA corporate information and finance systems; and (ii) key informant individual and group interviews using a semi-structured qualitative questionnaire guide. The analysis is based on the synthesis and triangulation of information obtained from the above-mentioned activities. A total of 52 individuals (of which 71 percent were females) belonging to ten stakeholder categories were

¹ UNFPA has been working in Malaysia for over fifty years and has used a CPAP (Country Programme Action Plan) modality of which currently the 6th cycle is underway. This is the first CP document for UNFPA Malaysia that underwent the formal route of a UNDP/UNFPA/UNOPS Executive Board approved CP.

covered during primary data collection, based on the purposive sample drawn. The UNFPA CO staff, APRO staff, Implementing Partners (IPs), other national and local partners, UNCT, all contributed their input to this evaluation. All interviews followed informed consent procedures, as per UNEG guidelines.

6. The evaluation design was validated by APRO, the Evaluation Reference Group (ERG) and the CO. For validation of the preliminary findings and emerging recommendations, a presentation was made to the ERG and the CO at the conclusion of the field phase, and further guidance and additional input was sought. Version 1 of the Evaluation Report was circulated for detailed review of the CO, APRO and the ERG. All feedback received has been incorporated in this Final Evaluation Report.

Summary of key findings

7. The CP was adapted to a significant extent to the needs of diverse populations, including vulnerable and marginalized groups. However, the “leaving no-one behind” and “reaching the furthest behind first” principles are not fully applied. The CP design was in alignment with priorities articulated in national and international frameworks/agreements, and UNFPA’s strategic directions. For the CP to be fully adapted to address the effects of emerging megatrends of ageing, demographic transition and climate change, more forward-looking perspectives are needed, and the next CP needs to be reconceptualized and developed more holistically, giving due consideration to the country’s evolving needs and priorities in a UMIC context.

8. UNFPA is considered as a credible and reliable partner by most of the national stakeholders and United Nations entities. It has effectively played its role as an intermediary between research entities and the Government in sensitive areas of work. More efforts are needed for increasing awareness and evidence-based advocacy, and for enhancing UNFPA’s visibility through strategic outreach.

9. Access to SRHR and service delivery was provided to diverse groups of communities, and contraceptive needs of women were addressed. Support was provided to strengthen the technical capacity of the health system to provide rights-based integrated SRHR services including increased demand for family planning. UNFPA is expanding the reach of its programme in Sabah and Sarawak to address SRHR needs of vulnerable and marginalized populations. Technical support to national and sub-national institutions helped to harmonize the design, implementation and monitoring of CSE programmes in training and vocational institutes. Use of technology and innovation was promoted to support teacher training and engagement of young people and parents. Technical assistance was provided for capacity building of religious leaders and faith-based organizations to advocate for implementation of CSE in schools. Diverse groups are, however, not adequately considered in CSE programmes and mainstreaming of CSE in the national curriculum remains limited. UNFPA provided consistent support to academia on population and ageing, which enabled them to engage policymakers to influence them. Challenges remain with regard to accessibility of population data, and its use to inform policies and programmes. UNFPA has effectively provided life-saving support for GBV survivors, and its interventions are complementary to those of women’s rights organizations.

10. UNFPA is credited to have delivered well on its mandate despite limited in-house staff capacity. Human resource constraints perpetuate the need for the CO to strengthen its capacities. There is also the need for additional and more flexible funding being mobilized, and for planning, monitoring and reporting systems to be more robust. Mobilizing Islamic finance deserves recognition as a good example of innovation.

11. UNFPA has been an active participant in key UNCT undertakings and coordination mechanisms. It is acknowledged as the lead UN agency for pursuing the UN’s gender equality and women’s empowerment agenda through its leadership of the Gender Results Group, and helped strengthen UN coordination on GEWE and promoted gender equality. More can be done to leverage UN system resources through joint approaches, while taking advantage of existing opportunities for synergies. UNFPA has built capacities at institutional and individual levels, especially in the context of its implementing partners. There is room for NGOs/CSOs’ capacities to be enhanced through technical support and knowledge-sharing. Establishment of mechanisms for durability of effects need further focus, as sustainability is integrated into programme design to an extent, but a more structured approach needs to be adopted.

Main conclusions

A. Strategic Level

Conclusion 1 → The CO strategies need to be adapted to the context of a UMIC by strengthening financial models, leadership, policy influence, and broadening the partnership base. Though CPI's approach of using advocacy, dialogue and evidence-generation for policymaking, remains a valid programming strategy, **further work is needed to strengthen the knowledge and uptake of UNFPA interventions into policies and national frameworks.** Parliamentarians, think tanks and academics could serve as strong advocates for addressing UNFPA's mandate to improve the SRHR and gender inequalities of vulnerable and marginalized populations, and influence policymakers towards more inclusive policies. To drive further progress, UNFPA is uniquely positioned to leverage and strengthen the country's capacities for broader regional impact, particularly through **South-South and Triangular Cooperation, policy dialogues, and knowledge exchanges on good practices and lessons learned**, while fostering collaboration and achieving mutual gains in areas of common interest amongst participating countries.

Conclusion 2 → UNFPA CO is well-recognized for its positive contribution to the functioning of the UNCT, and for its institutional commitment for UN Reform. Its leadership of the UN Gender Results Group is well recognised and acknowledged. UN agencies have benefited from UNFPA's positive contribution in bringing in technical expertise in areas related to its mandate, and in strengthening advocacy in several areas leveraging on its good communication pathways established with national partners. By virtue of **UNFPA's mandate and technical expertise being particularly relevant to the UNCT to help navigate sensitive issues**, UNFPA can use this added value it brings to the UNCT to its advantage, and strengthen its development footprint, while benefiting from more **joint programming**, and establishing **programmatic and operational synergies**.

Conclusion 3 → UNFPA made efficient use of its human, financial and administrative resources, and strategically worked with partners to deliver, despite limited human resources at hand. **Flexibility in accommodating programme demands with a small staff has been duly recognized**, also in terms of efficiently and reliably delivering in emergency situations, addressing the needs of the most vulnerable. Staff shortage on the technical side has been supplemented by the use of consultants to help the CO deliver on its mandate, due to which there is lack of continuity. With increasing demands on UNFPA to bring to bear more thought leadership, intellectual engagement, transformative approaches, and an enhanced convening role, **the CO's human resource capacity needs to be augmented**, along with investment in **a more robust monitoring and results-reporting system**. Additionally, increasing awareness and visibility of the work of UNFPA with its partners and the change it brings to the communities, is important.

Conclusion 4 → UNFPA interventions have **good potential of being sustainable** as they are in line with Government priorities and country needs, are funded by the Government, bring knowledge, expertise, training and research, are timely, have a policy focus, and demonstrate empowerment-oriented activities. UNFPA's contribution in building capacities at institutional and individual levels, especially in the context of IPs, presents positive prospects for sustainability, though there is scope for strengthening NGOs/CSOs' capacities through technical support and knowledge-sharing. UNFPA's **continued push will be needed for translating commitments made at international fora into budgetary allocations, and advocating for sensitive issues to remain integrated in Government programmes**. Hence moving forward more effective strategies for ensuring sustainability of interventions for wider replication and adaptation will be needed, for impact to continue after UNFPA support is withdrawn.

Conclusion 5 → For UNFPA's relevance to be maintained in Malaysia, and for it to be a partner of choice, building on its comparative advantage of being an established and nationally well-recognized entity addressing sensitive issues that are inherent in Malaysia's socio-cultural and religious context, **the Theory of Change (TOC) for the upcoming programming cycle will need to be reconceptualized with a forward-looking lens through a holistic and integrated approach**, while taking into account the evolving needs of an Upper Middle Income Country. Given the significant demographic shifts Malaysia will be encountering, particularly ageing and low fertility rates, and their intersection with climate change challenges, UNFPA's focus on supporting the country navigate these megatrends through adoption of **strategic, inclusive, sustainable, and human rights-based responses** will be vital.

B. Programmatic Level

Conclusion 6 → The **needs of diverse populations**, including vulnerable and marginalised groups **were taken into account to a significant extent** in the design and implementation of the programme. UNFPA has **advocated for inclusion of vulnerable populations** in its programming and in the national public policy agenda. It has demonstrated effectiveness in expanding access to SRHR and GBV services, providing critical support to a number of communities, vulnerable and marginalized populations, including those with disabilities, in select geographical areas in the country. However, inclusion of those left behind needs more focus, as addressing intersectionality and inclusivity among diverse and most vulnerable groups will help address systemic inequalities and barriers faced by them.

Conclusion 7 → UNFPA has contributed to improving **SRHR information and services** for diverse groups of communities, generated data for policy-makers, and partnered with CSOs and faith-based organizations, while generating evidence on SRHR investments. However, competing interests and priorities of various stakeholders hinder programme execution and effectiveness, which needs UNFPA's attention. Addressing the issue of unmet needs for contraception among young people, and raising SRHR awareness remains essential.

Conclusion 8 → The CO has **advanced GEWE programmes** to a certain extent, with interventions being largely gender-sensitive and responsive, but did not focus on efforts to identify and address gender norms or focus on men and masculinities, which holds enormous potential to address the root causes and catalyse change. Achieving **transformative change using a well-designed Gender Transformative Approach** requires resources and collaborative efforts, for which UNFPA's leadership of the UN Gender Results Group can be used as a strategic entry point to influence change at country level. Furthermore, developing a gender and social inclusion M&E framework can help to assess and evaluate programmes from a gender and social inclusion perspective.

Conclusion 9 → UNFPA has supported its IPs on PD and ageing to **generate data, analyse, share/disseminate findings, and engage policy-makers and other stakeholders to influence evidence-based decision-making**, which is essential for designing and implementing responsive policies. The country faces challenges due to limited/lack of specialised expertise in the areas of PD (including on NTA - National Transfer Account) and ageing, which are crucial for understanding, preparing, and responding to its ageing population and demographic transition. There is a need for UNFPA to continue this engagement and provide further support for **building expertise on PD and ageing, and promoting a life-course approach** in policy and practice, while mainstreaming ageing into national policies and programmes for long-term impact.

Conclusion 10 → UNFPA's support for the **use of technology and innovation** through advocacy campaigns, forums and dialogues, helped national and sub-national institutions to **promote CSE, train teachers and engage young people and parents**. Although the CO has placed importance on building the capacity of religious leaders and members of faith-based organizations on CSE, further work is needed to upscale the promising approach. CSE mainstreaming and its best practices utilizing technology and innovation in schools, TVET institutes, and higher education institutions is crucial, especially for the diverse groups of vulnerable young people that have not been adequately focused on.

Key Recommendations

A. Strategic Level

Recommendation 1: **Capitalize on the partnership base developed, expand it further by adopting a strategic approach to partnerships, and mobilize more flexible funding.** Given that age structural transition is the backbone of future development programming in Malaysia, UNFPA having built a relationship of trust with key stakeholders, should capitalize on the partnership base developed, form new and strengthened partnerships with national and international entities and play a key role in Malaysia's progress towards SDGs and ICPD-PoA. A mapping of the partnership landscape would help, keeping in perspective various entities that can be tapped, which could include the private sector, academia and think tanks, foundations, network of CSOs, humanitarian donors, IFIs, with Islamic finance continuing to be pursued for advancing the SRHR agenda and addressing GBV, while expanding the partnership mapping to also explore future collaborations from the

financing perspective, including domestic resources.

Recommendation 2: Institutionalize more systematic mechanisms for the effective management of the Country Programme, including forward planning, costing/budgeting, monitoring and reporting of results, and integrate sustainability in the design and implementation of interventions. such that the achievement of results is better recognized, as well as outreach to the most vulnerable populations, can be overseen. Systematic discussion upfront with national partners/IPs to determine their needs and identifying barriers, enhancing inclusiveness by ensuring the representation of diverse population groups in programme planning and implementation, providing an exit strategy for continuation of the activity once UNFPA support ends, are all key elements for overall effectiveness and long-term impact of interventions. The COM&E and reporting system should be enhanced, and reporting templates should include communication initiatives, shifting focus from the completion of activities to that of a results chain approach, with analysis of risk factors for sustainability and risk mitigation. Showcasing and demonstrating the impact of successful interventions will help give a push for the needs of the vulnerable to be made part of public policy priorities. Effectively capturing lessons learnt and highlighting key achievements while demonstrating end-user satisfaction, can positively complement resource mobilization efforts.

Recommendation 3: With a well-resourced and well-capacitated Government machinery in place, UNFPA as part of the UN system in Malaysia needs to collectively strategize on joint approaches and joint initiatives with UN entities to seize opportunities and maintain continued relevance in Malaysia. UN entities are keen to build upon and expand their partnership with UNFPA, given the complementarity of mandates, capacities and know-how; and value it as an important partner in Malaysia, having a mandate that is particularly relevant to help navigate sensitive issues. UNFPA should make use of this as an opportunity for strengthening these partnerships through more joint approaches, joint planning and programming, and mobilize more resources. It should establish itself as a thought-leader within the UNCT by bringing UNFPA's technical expertise to bear in areas of its mandate (*for example: application of gender transformative approaches, addressing demographic transition*) that can support UN programming, and give further impetus to its leadership of the Gender Results Group through continued engagement and enhanced investment to this responsibility.

B. Programmatic Level

Recommendation 4: UNFPA to advocate for and influence policies, while building evidence from studies, that investing in SRHR and AY and the prevention of GBV and harmful practices across the life course through increased budgetary allocations, can yield significant returns in terms of improved health outcomes, gender equality and socio-economic development. To remain responsive to the evolving needs of the country, it is essential to prioritize further investments and focus on SRHR and AY through a life course approach, that is crucial for achieving long-term societal benefits. A targeted approach can lead to substantial improvements in public health, promote gender equality, and reduce GBV, while adopting a rights-based approach to CSE. UNFPA's normative role is vital in making use of research and project level evidence from Malaysia as well as SRHR information and services, Family Planning and GBV experiences in other parts of the world for technical arguments around population health, needs, cost effectiveness and fairness as well as adapting to the country's socio-economic, political, cultural and religious context.

Recommendation 5: Build partnerships and national capacities in PD and ageing to increase the expertise and the use of data/evidence in policies and programmes. To bridge the existing gap in policies and programmes that addresses the needs of the populations in the country and an ageing society, strong partnerships and enhanced national capacities and expertise are increasingly needed. By building collaborations among Government agencies, academic institutions, and relevant stakeholders, expertise in PD and ageing can be strengthened, while fostering a culture of evidence-based policy-making, ensuring that decisions are responsive to demographic shifts and the specific needs of an ageing population. The CO should bring to bear UNFPA's global/regional PD expertise to advocate for policies addressing demographic transitions, low fertility, ageing population, and climate change, as strategic use of evidence and data is crucial for influencing policy in these areas and translating it to implementation.

Recommendation 6: Develop the next CP with a holistic, overarching TOC for the full programme with an integrated approach, taking into account the emerging megatrends, with strategies for targeting those

who have been left behind in the development continuum. UNFPA's role in advocating for integrated policy responses and supporting community-level adaptations is crucial for fostering a resilient society equipped to handle demographic and environmental shifts effectively, and for boosting sustainable strategic, inclusive, human rights-based responses and adaptations to these emerging priorities and megatrends as articulated in the Thirteenth Malaysia Plan. This would be important also from an integrated programming perspective, which is how the new programme should be perceived, given Malaysia's UMIC status and related factors at play. These include: addressing inequalities in gender dynamics for supporting the socio-economic progress that Malaysia is aspiring for; and integrating intersectionality principles and including diverse groups across various geographical locations in the country's development paradigm. With UNFPA being uniquely positioned to strengthen Malaysia's capacities for regional and global knowledge-sharing, the SSTC mechanism should be institutionalized through strategic dialogue with Government at the time of CP development.

C. Operational Level:

Recommendation 7: Strengthen CO human resource capacity for implementation of its programme, enabling UNFPA to use to its advantage, its established and nationally well-recognized role in addressing issues that are inherent in Malaysia's socio-cultural and religious context, to become a partner of choice. Given the country's needs in the context of existing gender gaps in the political and governance systems, while undergoing a significant demographic transition towards becoming an aged nation, there are increasing demands on UNFPA to bring to bear more thought leadership, enhanced intellectual engagement, adoption of transformative approaches, and an enhanced convening role. These factors perpetuate the need to strengthen the CO's human resource capacity in the following areas: Gender, PD, partnerships/resource mobilization and M&E. The CO should work out in discussion with APRO and the Government of Malaysia ways in which these capacities can be augmented on a more sustainable basis.

CHAPTER 1 – INTRODUCTION

1. The United Nations Population Fund (UNFPA) is the lead United Nations agency for delivering a world where every pregnancy is wanted, every childbirth is safe and every young person's potential is fulfilled. The strategic goal of UNFPA is to achieve universal access to sexual and reproductive health, realize reproductive rights, and accelerate progress on the implementation of the Programme of Action (PoA) of the International Conference on Population and Development (ICPD). With this call to action, UNFPA contributes directly to the 2030 Agenda for Sustainable Development in line with the Decade of Action, seeking to ensure increasing focus on “leaving no one behind”, and emphasizing “reaching those furthest behind first” and contributing to the achievement of the Sustainable Development Goals.²

2. UNFPA has been operating in Malaysia in collaboration with the Government of Malaysia (GoM) since 1973. Key areas of support in line with UNFPA's mandate include: sexual and reproductive health, adolescents and youth, population and development, gender equality and gender-based violence. The support that the UNFPA Malaysia Country Office (CO) provides to the GoM under the framework of the First Country Programme 2022-2025 (CP1), is implemented in cooperation with national and local government partners and partner organizations. It builds on national development needs and priorities articulated in the Twelfth Malaysia Plan (12MP) 2021-2025, the United Nations Sustainable Development Cooperation Framework (UNSDCF) 2021-2025 and the Malaysia Madani. CP1 has an approved budget of USD 4.4 million of which USD 2.0 million is from regular resources and an additional USD 2.4 million was to be mobilized through co-financing modalities or other sources over the 4-year period (2022-2025) of the programme cycle.

1.1 Purpose and objectives of the CPE

3. The Country Programme Evaluation (CPE) commissioned by UNFPA Malaysia, is undertaken in accordance with UNFPA 2024 Evaluation Policy (EP), and is meant to serve four main purposes:

- i) Demonstrate accountability to stakeholders on performance in achieving development results and on invested resources;
- ii) Support evidence-based decision-making to inform development, humanitarian response and peace-responsive programming;
- iii) Aggregating and sharing good practices and credible evaluative evidence to support organizational learning on how to achieve the best results; and
- iv) Empower community, national and regional stakeholders.

4. The CPE is also in accordance with Section IV of the Country Programme Document (CPD) on “monitoring and evaluation” indicating that a CPE will be conducted in the penultimate year of the CP. It will provide an independent assessment of **relevance, coherence, effectiveness, efficiency** and **sustainability** of UNFPA support provided to the Government of Malaysia and partners over the January 2022 to June 2024 period, and will broaden the evidence-base to inform the design of the next programme cycle.

5. The specific objectives of the evaluation are:

- i) To provide an independent assessment of the relevance, coherence, effectiveness, efficiency and sustainability of UNFPA support.
- ii) To provide an assessment of the role played by the UNFPA Malaysia CO in the coordination mechanisms of the UNCT, with a view to enhancing the United Nations collective contribution to national development results.
- iii) To draw key conclusions from past and current cooperation, including the strategic direction and business model that the CO has adopted and provide a set of clear, forward-looking, strategic and actionable recommendations for the next programme cycle for continued relevance of UNFPA in Malaysia's Upper Middle Income Country context.

6. The primary users of this evaluation are the decision-makers within the UNFPA Malaysia CO, other country offices and the organization as a whole, government counterparts in the country, other national stakeholders and rights-holders, UNFPA Executive Board, and other development partners. The UNFPA Asia Pacific Regional

² [UNFPA Strategic Plan 2022-2025](#)

Office (APRO) and UNFPA Headquarters will also use the evaluation as an objective basis for programme performance review and decision-making.

1.2 Scope of the evaluation: thematic, temporal, geographic

7. The CPE covers the period January 2022 to June 2024 and includes all initiatives under all outcomes and outputs of CP1. The CPE covers all national and sub-national level initiatives which were planned and/or implemented during this period. While CP1 is primarily implemented at the national level and interventions are largely focused in the capital city of Kuala Lumpur due to the nature of the work focusing on policy advocacy, interventions have also been spread to other geographic locations via partners, given the needs of the populations located in these areas. The geographical scope of the evaluation encompasses national level interventions in UNFPA's thematic areas of support, as well as sub-national state-level interventions implemented in Sabah, Sarawak and Selangor³. Annex 7 provides details of UNFPA interventions and Implementing Partners (IPs), covering the scope of the evaluation.

State coverage of the Evaluation:

Sabah: Interventions focus on SRH and GBV Advocacy, with support being designed for strengthening work on SRHR, CSE, gender equality, GBV prevention and addressing ageing.

Sarawak: Interventions focus on SRHR Advocacy, Adolescents and Youth, Population Change and Data, Gender and Social Norms

Selangor: Interventions focus on SRHR Advocacy, Adolescents and Youth, Population Change and Data, Gender and Social Norms

8. The evaluation also assessed CP1's focus on UNFPA Strategic Plan's inter-connected output areas including: (i) policy and accountability; (ii) adolescents and youth; (iii) population change and data; and (iv) gender and social norms. In addition, the evaluation covers cross-cutting issues including the UNFPA Strategic Plan's six accelerators⁴ and transversal functions, such as coordination; monitoring and evaluation (M&E); resource mobilization; advocacy and strategic communications, and strategic partnerships including under the South-South and Triangular Cooperation modality.

9. The evaluation covers the programmatic areas of sexual and reproductive health (SRH), adolescents and youth (AY), population and development (PD), and gender equality and women's empowerment (GEWE), including gender-based violence (GBV). To complement the assessment of programme components, the CPE also assessed the operational (finance, administration, procurement) structures of the CO. The evaluation also reviewed the CP1 programme logic, or how the programme is designed to achieve the said outcomes, including an analysis of the intended outputs, activities and the contextual factors that may have had an effect on the implementation of the Programme. The evaluation covers interventions planned and/or implemented within the time period of the current CP, starting from January 2022 through June 2024.

1.3 Evaluation approach

10. The evaluation utilized a theory-based approach taking into consideration the CP planning documents which reflect the design of the programme including its intervention logic and the results framework. The CPE drew on contribution analysis to help analyse the link between observed changes and UNFPA interventions, and provide a credible cause-and-effect assessment. The analysis of the programme's TOC and unpacking the intervention logic played a central role in the design of the evaluation, and was the basis for assembling reliable information, analysis of the data collected, for the reporting of findings in terms of how the UNFPA interventions produced the desired changes (while considering other factors that may also influence the CP outcomes), and for the development of conclusions and of relevant recommendations.

11. While using a participatory approach, the evaluation adhered to UNEG Norms and Standards for Evaluation in the UN System, and UNEG Ethical Guidelines for Evaluation. Elements such as gender and leaving-no-one-behind (LNOB) principles were integrated into the methodology, and addressing the needs of marginalized populations featured in evaluation questions. The evaluation was guided by UNFPA's Evaluation Handbook, 2024, and was conducted in an ethical, transparent, inclusive, and participatory manner, following the "do-no-harm" approach. Stakeholders were selected in line with the criteria as prescribed in the Handbook. In addition to national-level stakeholders, the evaluation also covered selected stakeholders at the sub-national/state levels

³ Annex-5 provides a listing of current and planned interventions in the states of Sabah, Sarawak and Selangor

⁴ 1. Human rights-based and gender-transformative approaches, 2. Innovation and digitalization, 3. Partnership, South-South and triangular cooperation, and financing, 4. Data and evidence, 5. Leaving no one behind (LNOB) and reaching the furthest behind first (RFBF), 6. Resilience and adaptation and complementarity among development, humanitarian and peace-responsive efforts

(in Sabah, Sarawak and Selangor). Stakeholders who work directly with the beneficiaries / vulnerable groups that are furthest behind were included in the sampling framework, for example local organizations, NGOs, and community leaders who have access to these vulnerable groups were consulted, to ensure that their perspectives are included.

12. The evaluation of programmatic areas follows the OECD-DAC criteria of **relevance, coherence, effectiveness, efficiency, and sustainability**. These criteria were applied to each of the outcome areas to ascertain the performance of each area, as well as facilitating and constraining factors. All evaluation questions (EQs) proposed in the CPE ToR were reviewed by the ET, and were refined in formulation. The basic premise of the EQs proposed by the CO was maintained, while some elements⁵ were merged to bring down the number of EQs, as prescribed in UNFPA guidelines. Agreement was reached with the CO regarding the final eight EQs, covering the five criteria mentioned above, and endorsement was subsequently secured from the Evaluation Reference Group. A lead person from the ET was assigned for each question, based on relevance of the EQ to their respective area of expertise. Given the cross-cutting nature of the EQs, inputs from each ET member were solicited for finalizing the set of EQs.

Table 1.1: Evaluation Criteria and Evaluation Questions

No.	Evaluation Criteria and Evaluation Questions
RELEVANCE	
EQ1	To what extent is the country programme adapted to: (i) the needs of diverse populations , including vulnerable and marginalized groups (e.g. young people, women and persons with disabilities, etc.); (ii) priorities articulated in relevant international and national frameworks and agreements , including the ICPD PoA, SDGs, CEDAW, and UPR; (iii) the strategic direction and objectives of UNFPA , and (iv) the effects of megatrends , particularly but not limited to ageing, low fertility and climate change, and how can UNFPA boost sustainable strategic, human rights-based responses and adaptations to these megatrends?
EQ2	To what extent has the country office been able to respond to changes in national priorities, strategies and policies , or to shifts caused by crisis or major political changes?
EQ3	To what extent should UNFPA reconceptualize the Theory of Change for the next CP given the state of progress towards the SDGs and the three transformative goals (3TRs) in the country and to ensure continued relevance?
COHERENCE	
EQ4	To what extent has UNFPA leveraged strategic partnerships with national, local and grassroots organizations (e.g. women's rights activists, youth-led groups, advocacy groups of persons with disabilities, religious groups, parliamentarians, academia and think tanks, private sector) to address its mandate to improve the sexual and reproductive health and rights and gender inequalities of vulnerable and marginalized populations?
EFFECTIVENESS	
EQ5	To what extent have interventions supported by UNFPA delivered intended results contributing towards achievement of country programme outcomes? In particular: (i) increased access to and use of integrated SRH services , especially for the most vulnerable groups, such as women and girls, young people, older persons, PWDs; (ii) empowerment of adolescents and youth to access SRH services and exercise their sexual and reproductive rights;; (iii) increased use of population data in the development of evidence-based national development plans, policies and programmes; and (iv) advancement of gender equality and the empowerment of all women and girls? What have been the enabling and inhibiting factors in the implementation of these interventions and the UNFPA Strategic Plan's accelerators, and how can the CP be further strengthened to accelerate progress on 3TRs and ICPD PoA?
EQ6	To what extent have the country programme strategies been adapted to the context of an Upper Middle Income Country , particularly in terms of normative role, financing models, policy influence and strategic partnerships, including through South-South and Triangular Cooperation?
EFFICIENCY	
EQ7	To what extent have human, financial and administrative resources been sufficient, adequately allocated and managed, including on aspects of strategic communication, knowledge management, innovation and digitalization, and to what extent have efforts been made to leverage joint UN system resources , including possible common back office services, to achieve the country programme results?
SUSTAINABILITY	
EQ8	To what extent has UNFPA been able to support implementing partners and rights-holders (notably, women, adolescents and youth) in developing capacities and establishing mechanisms to ensure the durability of effects?

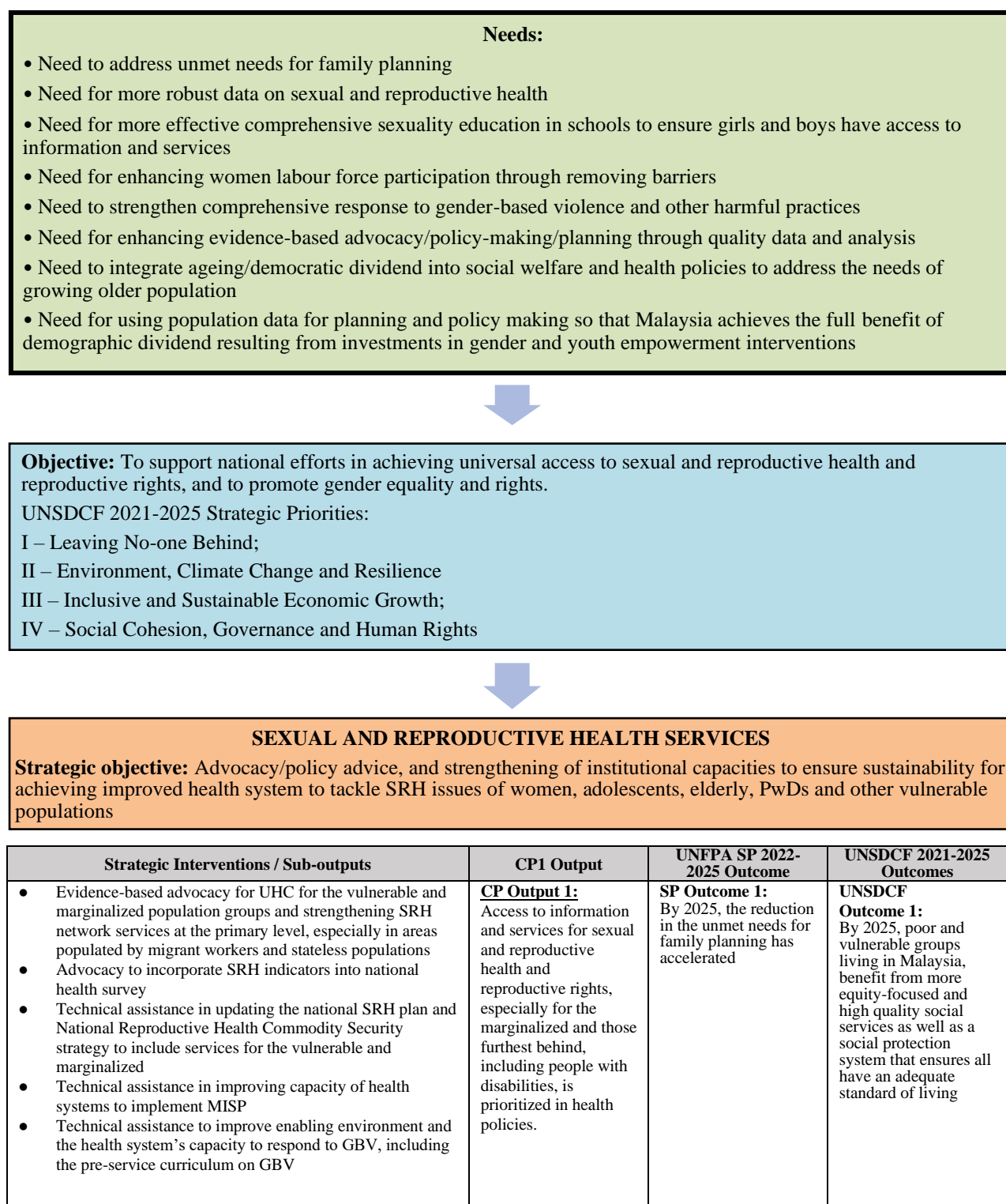
⁵ EQs 1 and 10 from the original TOR were merged under EQ1 and EQs 5 and 6 from the original TOR were merged under EQ5.

13. In order to ensure that the collection and recording of data and information is done systematically, an **Evaluation Matrix** was developed as part of the Design Phase, to help consolidate in a structured manner all collected information corresponding to each EQ and to identify data gaps and collect any outstanding information before the end of the field phase. The matrix includes the EQs, their respective assumptions, indicators to be assessed, and methods of data collection, which served as a useful tool for data analysis and reporting, enabling the conduct of the analysis systematically and transparently by showing a clear association between the evidence collected and the findings and conclusions derived on the basis of this evidence.

1.3.1 Contribution analysis and theory of change

14. In an effort to assess the methodological approach to undertaking the CPE, the Evaluation Team unpacked the Theory of Change underlying the development of CP1. As an initial step, a review of the country context was undertaken by the ET that helped assess the needs prevalent at the time of CPD development. A logic model was drawn up to show the links between causes and effects, and establish the chain of results that led from inputs to activities to sub-outputs to outputs that would finally contribute to CP1 outcomes. The Intervention Logic as presented schematically in figure 1.1, fleshes out the needs as assessed at the time of CPD formulation, and the sub-outputs resulting from activities required to be undertaken through CP1 interventions to address these needs, and contribute to the achievement of CP1 outputs and outcomes. The ET considers the four expected outputs of CP1 to be realistic in the context of the 4-year programme cycle, subject to availability of sufficient financial and human resources to implement the programme. The potential risk areas as articulated in the CP's TOC were realistic, and remain valid. However, the lack of linkage to the TOC during the quarterly monitoring for CP milestones and indicators, prevents the validation of the TOC, learning further along the programme implementation period as to what works and what does not in the various contexts and outputs/thematic areas.

Figure 1.1: Intervention Logic⁶ - UNFPA Malaysia CP1



⁶ This logic model was drawn up by the ET as a reconstruction of the TOC to show the links between causes and effects, and establish the chain of results. The Intervention Logic fleshes out the needs as assessed at the time of CPD formulation, and the sub-outputs resulting from activities required to be undertaken through CP1 interventions to address these needs, and contribute to the achievement of CP1 outputs that would finally contribute to CP1 and UNSDCF outcomes

ADOLESCENTS AND YOUTH

Strategic objective: Advocacy/policy advice, and strengthening of institutional capacities to ensure promotion of adolescent sexual and reproductive health and reproductive rights

Strategic Interventions / Sub-outputs	CP1 Output	UNFPA SP 2022-2025 Outcome	UNSDCF 2021-2025 Outcomes
<ul style="list-style-type: none"> Evidence-based advocacy to the Ministry of Education and other actors to strengthen the implementation of CSE according to international standards Technical support to MoE, training and vocational institutions to strengthen capacity to design, implement and monitor CSE as per international standards Advocacy and technical support to develop online platforms for CSE teacher trainings, CSE for young people and parents to gain their support to CSE Advocacy and capacity development of religious leaders and FBOs to gain their support in implementation of CSE in government and Sunday schools Strengthen multi-sectoral partnerships to advocate for increased investments in CSE and mainstreaming ASRH in the national policy dialogues Establish a working group between the Government and UN Agencies to advocate for CSE strengthening Evidence generation on importance of investing in youth through a life-cycle approach, with linkages between CSE, ageing, GEWE, SRH and RR (especially with teenage pregnancies) Promote Forums to share best experiences on CSE in countries with similar context 	<p>CP Output 2: Strengthened national and subnational capacity to design, implement and monitor policies and programmes, including comprehensive sexuality education programmes that promote adolescent sexual and reproductive health and reproductive rights</p>	<p>SP outcome 1: By 2025, the reduction in the unmet needs for Family Planning has accelerated</p>	<p>UNSDCF Outcome1: By 2025, poor and vulnerable groups living in Malaysia, benefit from more equity-focused and high-quality social services as well as a social protection system that ensures all have an adequate standard of living</p>

POPULATION DYNAMICS

Strategic objective: Advocacy/policy advice, and strengthening of institutional capacities to ensure sustainability for achieving enhanced utilization of demographic and socio-economic data to address population aging and capitalize on opportunities provided by the age structural transition through life-cycle approach

Strategic Interventions / Sub-outputs	CP1 Output	UNFPA SP 2022-2025 Outcome	UNSDCF 2021-2025 Outcomes
<ul style="list-style-type: none"> Promote an inter-institutional coordination body for the generation, analysis and use of demographic data in policies (with UNDP and other development partners) Capacity building on analysis and use of disaggregated population data Conduct analysis of population data linked with rapid ageing and costed differentiated needs of women and men Technical assistance to generate evidence on ageing and urban development with a gender and rights perspective Piloting of the Active Ageing Index Analysis and policy advice on the care economy, including in the context of rapid aging and the impact on older women Development of policy briefs based on the above evidence to inform population policies Policy advocacy for gender mainstreaming in policies, e.g. National Policy on Ageing and other national and sectoral policies 	<p>CP Output 3: Strengthened policy environment to address population ageing and its linkage to gender equality, through life-cycle and rights-based approaches.</p>	<p>SP Outcome 1: By 2025, the reduction in the unmet needs for family planning has accelerated.</p>	<p>UNSDCF Outcome 1: By 2025, poor and vulnerable groups living in Malaysia benefit from more equity-focused and high-quality social services as well as a social protection system that ensures all have an adequate standard of living</p> <p>UNSDCF Outcome 3: By 2025, Malaysia is making meaningful progress towards an economy that is inclusive, innovative and sustainable across all income groups and productive sectors</p>

GENDER EQUALITY AND WOMEN'S EMPOWERMENT

Strategic objective: Advocacy/policy advice, and strengthening of institutional capacities to advance gender equality, and women's empowerment, and prevent gender-based violence and other forms of discrimination.

Strategic Interventions / Sub-outputs	CP1 Output	UNFPA SP 2022-2025 Outcome	UNSDCF 2021-2025 Outcomes
<ul style="list-style-type: none"> Generate evidence on <ul style="list-style-type: none"> barriers and discriminatory labour practices investments in GBV prevention, especially in vulnerable areas the value of investment in gender/SRH in economy Advocacy and technical assistance for gender and social norms and harmful practices Advocacy for gender equality laws and policies, e.g. GE Act, non-discriminatory labour norms Advocacy for establishing a mechanism of tracking gender-related investment Advocacy to establish a working group to coordinate multi-sectoral GBV response and protection Strengthen one stop crisis centers to fully implement integrated response package for survivors of gender-based violence Advocacy to promote access to SRH services at work place Organizing national dialogues to raise awareness on gender-based violence including on work place GBV Sharing best practices on gender equality (e.g. promoting the incorporation of women into the workforce) among Muslim countries (with UNU, UNDP, UNICEF) Establishing a multi-stakeholder advocacy platform to promote women's economic empowerment and GBV prevention and response Supporting men and boys engagement for GEWE 	<p>CP Output 4: Strengthened national capacities for the design, implementation and monitoring of legal frameworks, policies, plans and programmes to advance gender equality, empower and increase the economic participation of women and girls and prevent gender-based violence and other forms of discrimination.</p>	<p>SP Outcome 3: By 2025, the reduction in gender-based violence and harmful practices has accelerated</p>	<p>UNSDCF Outcome 1: By 2025, poor and vulnerable groups living in Malaysia, benefit from more equity-focused and high quality social services as well as a social protection system that ensures all have an adequate standard of living.</p> <p>UNSDCF Outcome 3: By 2025, Malaysia is making meaningful progress towards an economy that is inclusive, innovative and sustainable across all income groups and productive sectors</p>

RISKS:

- Political upheaval can undermine the progress.
- Social instability, changing cultural norms and attitudes against the ICPD agenda can affect progress.
- Sensitivity of issues such as GBV and migration.
- Increased conservatism.
- Major political change in the next five years.
- Failure to produce evidence linkage to population dynamics and gender equality.
- Lack of willingness to coordinate amongst institutions to generate, analyze, and use data.
- Social and cultural norms place low value on women and girls, perpetuating harmful practices and patriarchal social systems.
- The State continues to maintain reservations to CEDAW

15. Though the conceptual framework and logic model behind the development of CP1's TOC was considered as being valid by the ET at the time of CPD development, given the country's evolving needs in light of the emerging megatrends, the over-arching issues of low fertility, ageing population, and climate change impacts, the ET with a forward-looking approach, looked into possible elements for reconceptualizing the TOC for the next programming cycle, such that resilience and adaptability take a front seat in preparation for facing emerging challenges in UNFPA's mandated areas of work. These considerations were kept in perspective while drawing up the evaluation questions (EQs) and EQ3 of this report specifically focuses on this aspect, and presents recommendations in this context.

16. CP1 is designed to demonstrate commitment and contribute to UNFPA's long-term goal of achieving universal access to sexual and reproductive health and rights and reducing gender-based violence to accelerate progress on the ICPD agenda, among other goals. It commits to providing the Government of Malaysia with access to high-quality evidence and innovative policy and delivery models that are relevant, or can be adapted to the Malaysian context to support national efforts in achieving universal access to SRHR, and to promote gender equality and rights, thereby accelerating the policy-making process to achieve the country's national development targets. Through provision of advocacy, policy support, knowledge management and capacity development, the CP aims to enable women, adolescents and young people, disadvantaged, marginalized and

excluded population groups, to develop their full potential, taking advantage of the demographic dividend and contributing to achieve two UNFPA transformative results which seek to accelerate the reduction of unmet needs for family planning and address gender-based violence (GBV) and harmful practices. Advocacy and policy dialogue are primary modes of engagement with human rights, gender equality and women's empowerment, resilience, sustainability, accountability, multiculturalism and life-cycle approaches as foundations of the programme.

17. CP1's chain of results is based on UNFPA's 2022-2025 Strategic Plan, and the four outputs of the CP directly link to two outcomes of the UNFPA SP, as well as to two outcomes of the UNSDCF. The four outputs of the CP are structured around the areas of Sexual and Reproductive Health and Rights (SRHR) covered under Output 1, Adolescents and Youth (AY) covered under Output 2, Population and Development (PD) covered under Output 3 and Gender Equality and Women's Empowerment (GEWE) covered under Output 4.

1.3.2 Methods for data collection and analysis

Data Collection

18. Having established the Evaluation Questions, methods for data collection and analysis were identified to provide evidence-based answers to the questions. The evaluation utilized both quantitative and qualitative methods to collect data from primary and secondary sources. This allowed qualitative data being complemented with quantitative data to minimize bias and enhance the findings' validity by assessing convergence, corroboration and correspondence of results from different methods to gain a more complete and reliable picture based on evidence-based findings.

19. Quantitative data was gathered through a desk review of documents, websites, and online databases to obtain secondary data of country background information on SRHR, AY, PD and GEWE (including gender-based violence). Reliance was mainly on secondary sources, while extracting data from CO existing reports and documents including financial data from UNFPA's Cognos and Quantum financial system, CPD, and data from government sources and information systems. The desk review collated relevant financial information and data on key indicators that measure change at output and outcome levels of the CP. Search and review of print and electronic-based materials included country plans and policies, national data, population surveys and census reports, evidence from government reports, work plans, progress and final reports of implementing partners, research publications and UNFPA documents (i.e. CPAP, quarterly and annual reports, annual work plans, etc). Disaggregated data (by, inter alia, gender, age, location, ethnicity, disability status and other relevant vulnerability criteria in Malaysia's context), as much as available, helped assess the level of inclusivity and level of inequalities as well as the change that took place as a result of interventions and support from UNFPA and its implementing partners. Annex-2 provides a list of documents consulted.

20. Qualitative data was collected using a participatory approach with key stakeholders and implementing partners during the field phase through observation and in-depth one-on-one and group semi-structured interviews. The interviews aimed at getting in-depth information related to the implementation and intended results of the CP at different levels, from stakeholders involved at both national and sub-national levels to identify its relevance, coherence, effectiveness, efficiency, and sustainability. The participation of multiple stakeholders as selected through a criteria articulated in the following section, allowed for triangulation of data across various levels to enhance validation as well as ownership of findings.

21. To collect necessary data related to assumptions and indicators reflected under each of the eight selected EQs included in the evaluation matrix (see Annex-1 of the report), the ET employed a variety of techniques and instruments. Techniques included content analysis of UN and GoM-related documents and reports, in-depth interviews conducted by ET and participated by selected key informants, and group discussions where needed. Other techniques of data collection such as electronic surveys could not be employed during the field phase due to time constraints.

22. Semi-structured interviews were conducted using an interview guide developed as part of the Design Phase (attached as part of Annex-6 of this report titled "data collection tools"), and Interview Logs were designed and maintained for each interview conducted. Ethics considerations were adhered to as per UNFPA Evaluation Policy and UNEG guidelines. Ground rules for the interview were laid out, while providing assurance of

confidentiality of information. Verbal informed consent to participate in and record the interview was obtained before each interview was conducted. All interview sessions were confidential and anonymous, and participants were notified up-front about their voluntary participation in the session, and that they could exercise the option of denying part or whole of the interview at any time during the interview or even denying the recording. Assurance was given that no statement in the evaluation report would be directly associated with any individual. This was followed by detailed interview questions centred around the EQs, focusing on the programmatic and operational aspects of the CP. The session's language was predominantly English, while some interview sessions were in Malay as per the comfort and preference of the participants.

23. Interview probes were conducted via the appreciative inquiry approach to explore what has worked, what has worked well, what was not working and what this means in relation to the contextual factors for the next programme cycle. The interviews were conducted as a mix of in-person and online sessions (in cases where the interviewees had a preference for online sessions) using the Zoom application. Verbatim transcripts in English were maintained for all the interviews in the form of third party Closed Caption (CC) option to the platform. The ET used OneDrive from a personal subscription to securely store all collected data. Access to this data was strictly limited to use by the ET, and multiple measures were put in place to ensure confidentiality and anonymity. These measures included encrypted storage, which ensured that data stored in OneDrive was inaccessible to unauthorized users, and access controlled, where only designated members of the ET had permission to access the OneDrive folder. Additionally, data anonymization techniques were employed, such as removing or masking personal identifiers to protect individuals' identities. This practice, combined with restricted access and encryption, ensured that the data remained secure and that the confidentiality and anonymity of the participants were maintained.

Data analysis and validation

24. In line with a theory-based approach, an analysis of the intended outputs, activities and contextual factors was undertaken that may have had an effect on the implementation of the CP. The pathways of change and assumptions that underpin the causal linkages between elements of the results chain were investigated. While integrating elements such as gender and leaving-no-one-behind (LNOB) principles into the methodology, addressing the needs of marginalized populations featured in EQs of all interviews conducted. The interview questions were posed in a way to encourage respondents to comment on gender equality and women's empowerment and LNOB principles as cross-cutting issues, examining in particular the extent to which UNFPA Malaysia has mainstreamed interventions to advance these principles across CP interventions, with special consideration being given to assess how vulnerable target populations were included in programme design and implementation. The evaluation did not utilize artificial intelligence (AI) tools or technologies. Interview content was transcribed using the Zoom transcription function, organized using Microsoft Word, and analyzed by the ET. The analyses were handled with accuracy and personal oversight.

25. The Evaluation Matrix served as the guiding structure for data analysis for all components of the evaluation, and the EQs included as part of the matrix were used to structure data analysis. Descriptive, content, comparative, quantitative, and contribution analysis was used to analyze and synthesize the data as follows: The scope and current state of the country and CP activities was illustrated by the descriptive analysis. The content analysis was used for analysis of interviews and group interviews transcripts, and existing documents' and reports' contents, providing the basis for preliminary observations and evaluation findings based on emerging issues and trends. Different programme aspects and activities were contrasted using comparative analysis, identifying good practices and innovative approaches. Quantitative analysis methods were used to interpret data gathered from annual reports, studies and financial data, while contribution analysis assessed the relationships between different aspects of the UNFPA programme, contribution of CP outputs to outcomes, and in turn, contribution to the country's overall achievements.

26. Qualitative data analysis techniques such as thematic analysis and content analysis were utilized to provide an overall situation of the country's context, development challenges and national strategies, as well as the progress and achievement of CP outputs and their contribution to outcomes, thereby furnishing substantive data to enable the evaluation team to answer the EQs. The qualitative data analysis started early in the process of data collection and continued throughout the field and data analysis phases in order to enrich the quality of data by filling the gaps missed during the design phase.

27. The audio files of the qualitative interviews were downloaded and transcribed (and translated where needed) and coded into themes for analysis. All interview data/transcripts were first analysed using the deductive approach based on the assumptions of the TOC, the selected evaluation questions, and the expected outputs of the CP. Each transcript was screened again to identify the patterns and unintended outcomes of CP interventions. The ET employed various measures to boost the validity and reliability of data and findings. At initial qualitative data analysis, coding of transcripts and documents was conducted collaboratively between the ET members. All analyses were reviewed by all team members until consensus was reached in case of any discrepancy.

28. Triangulation technique was applied to maximize the authenticity and validity of the data and findings. All evaluation findings were supported with evidence as gathered from documents and interview quotes. Data was triangulated across sources and methods by cross-comparing the information obtained via each data-collection method. The ET also cross-compared the evidence obtained through different data sources – e.g., comparing evidence obtained through interviews with government staff with those obtained from other secondary data sources. As all interview data was captured based on respondents' perceptions, the triangulation of data sources, data types and data collection methods, helped overcome any reporting biases that may have been present, and increased the credibility of the evaluation findings, as diverse perspectives were explored and validated through triangulation of information from various sources. Perspectives from stakeholders and actors from different backgrounds and different levels of involvement in CP1, including representatives from civil society and academics were sought and triangulated, to obtain complementary insights on the progress, outcomes and challenges of the programme. The findings shed light on how UNFPA has been able to support its partners and beneficiaries in developing capacities and establishing mechanisms to achieve planned results, ensure ownership and the sustainability of effects and the extent to which UNFPA activities were designed in a manner that ensured a reasonable handover to local partners.

29. Following the end of the field data collection phase, the ET met jointly with the Evaluation Reference Group (ERG) and the UNFPA CO to share and discuss preliminary findings in the form of a validation meeting. This in-person meeting also provided the ET the opportunity to consult with the ERG on forward-looking perspectives, translating into recommendations emanating from the evaluation exercise. The discussion with ERG on proposed recommendations towards the conclusion of the meeting and the comments received from them during and after the meeting, were integrated into the draft evaluation report. The draft evaluation report was then shared with ERG members for their review, and the feedback received has been incorporated in this finalized version of the report.

1.3.3 Stakeholders consulted and sites visited

30. The ET reviewed the list of UNFPA interventions and undertook a filtering exercise to ensure effective targeting in the selection of the sample of key stakeholders to be interviewed, while ensuring that a purposive sample has been selected. The selection of the stakeholders was based on the initial stakeholder mapping identified by the UNFPA CO during the preparatory phase and further discussed with the ET during the design phase. While adopting an inclusive approach, a broad range of partners and stakeholders were considered and deliberated upon, focusing on major categories of stakeholders distributed across CP1 programme themes, covering all 4 outputs of the CP. The Evaluation Matrix served as an important tool through which perspectives of various population groups were sought.

31. The following considerations were kept in perspective while selecting the mix of stakeholders from stakeholder categories list in the UNFPA Evaluation Handbook 2004⁷:

- i) Stakeholders involved in seemingly well-performing and poorly performing interventions of the CP.
- ii) All types of stakeholders for each output/outcome - i.e., ministries and administrative entities, IPs, executing agencies, donors, rights-holders, academia and CSOs.
- iii) For each output/outcome, stakeholders associated with ongoing UNFPA interventions as well as with interventions (as per CO AWP) that have already been completed.
- iv) Stakeholders related to interventions implemented in Kuala Lumpur and interventions implemented in other states (*applicable to stakeholders in Sabah, Sarawak, Selangor*).
- v) Stakeholders associated with financially large and financially modest AWP.

⁷ With reference to the 9 categories of stakeholder selection criteria listed under Table 7 of UNFPA's Evaluation Handbook 2004

- vi) Stakeholders associated with both tested interventions and pilot interventions.
- vii) Stakeholders associated with any soft-aid activities carried out by the CO.
- viii) Stakeholders that have been involved with inter-agency projects.
- ix) Stakeholders who work in the same field as UNFPA (e.g. on SRHR, maternal health, or SGBV), but who are neither directly partnering with UNFPA, nor implementing partners.

32. An initial list of stakeholders mapped by the ET with inputs from the CO, keeping the above criteria in perspective, was drawn, identifying UNFPA's key partners for the interventions and programmes under CP1. In consultation with the UNFPA CO, the ET assessed at the design phase stage that stakeholder sampling will focus at the national level, as most of the programme interventions in the CP are focused on national level advocacy, policy dialogue, partnership, coordination, and capacity building. The ET connected with all national level stakeholders who fulfilled the selection criteria above including government agencies, IPs, NGOs/CSOs and academia, UN agencies, UNFPA staff of the Malaysia CO as well as UNFPA's Asia-Pacific Regional Office (APRO). In the context of this evaluation, based on the stakeholder selection criteria listed above, the key groups of stakeholders consulted included: -> stakeholders directly involved in the CP for each given output/outcome, including implementing partners, government agencies, academia, etc: -> stakeholders related to the country programme implemented at national and sub-national levels; -> stakeholders that are UNFPA's implementing partners; -> stakeholders who work in the same field as UNFPA (SRHR, AY, PD, GEWE), but who are neither directly partnering with UNFPA, nor IPs; Annex-3 provides information on the stakeholder mapping undertaken during the design phase of the evaluation as a starting point to this exercise, which also contains an indicative list of persons that were to be consulted, while taking into account the prescribed stakeholder selection criteria.

33. The evaluation also covered selected stakeholders at the sub-national/state levels (in Sabah, Sarawak and Selangor) who participated in or were involved in the interventions implemented by the National Population and Family Development Board (NPFDB), and other NGOs such as the Women's Aid Organisation (WAO). Stakeholders who work directly with the beneficiaries / vulnerable groups were included in the sampling framework, for example local organizations, NGOs, and community leaders who have access to these vulnerable groups were consulted to ensure that their perspectives are included. The full list of stakeholders consulted is included as part of Annex-4 of this report.

34. Based on the stakeholder mapping, an indicative sampling framework was developed, which was kept flexible, and adjusted during the field phase and developed into a final purposive sample (even if not fully representative). The stakeholder mapping, along with the sampling framework, was continuously revisited as the field phase progressed, and availability of various persons approached was verified. Given prospective limitations in the availability and access to concerned entities, the ET ensured that these limitations would not create a bias in the sampling, by selecting a larger sample size leaving the margin for low participation rate. In some cases, replacement candidates were accommodated, while few entities opted out of the process, due to not having sufficient exposure to UNFPA activities to be able to share their viewpoint. Where needed, alternative entities were interviewed that were familiar with the UNFPA CP and could bring in similar representative perspectives. In the case of one Ministry (Ministry of Health), the clearance for the interview could not be received in time, and this remained a limitation of the evaluation, as perspectives of an important stakeholder could not be sought as part of primary data collection. This gap was partially filled by participation of a Ministry of Health representative in two ERG meetings (being an ERG member) including the one in which preliminary findings and possible recommendations were presented by the evaluation team. The Ministry's views/comments were further sought through written feedback on the draft evaluation report. Due to site visits not being possible, direct observations from field visits could not be made.

35. Table 1.2 captures the sampling framework and stakeholder categories, and enlists the interviewees that were available to the ET for being consulted. From a sample size of 68 stakeholders, the ET succeeded in consulting a total of 52 stakeholders (*71 percent of which were females*). Selection of stakeholders for inclusion in the evaluation kept in perspective the women's empowerment and leaving no-one behind criteria, such that all key stakeholders are represented in the sample selected. Inclusion of direct and indirect beneficiaries was attempted to the extent possible. Annex-3 of this report contains a full listing of 63 stakeholders that the field phase started with. As the process moved forward, this list was expanded to include 68 stakeholders that were targeted for individual and group interviews, some of whom did not eventually make it in the end due to their unavailability or unwillingness to be part of the process. The participation rate was 76 percent. Listing of the final 52 stakeholders that were interviewed is provided as Annex-4 of the report.

Table 1.2: Sampling framework

S.No	Stakeholder Group/Sample	Numbers		Interviewees	Sex Ratio		Method
		Appr-oached	Parti-cipate d		F%	M%	
1.	UNFPA Country Office	11	11	Country Representative, Assistant Representative, M&E Officer, Ops Focal Point for UN-OMT, Consultants functioning as thematic experts, outsourced Communications Agency; and UNFPA Country Rep for South Korea (former country rep in Malaysia until May 2024)	72.7	27.3	Key informant semi-structured individual interviews
2.	UNFPA Regional Office	8	8	Desk Officer for Malaysia, and focal points for thematic areas of engagement with UNFPA Malaysia	62.5	37.5	Key informant semi-structured individual and group interviews
3.	Government coordinating entity	1	1	Ministry of Economy (ME)	100	0	Key informant semi-structured individual Interview
4.	Implementing Partner Representatives	9	8	Appropriate staff from each IP - NPFDB/LPPKN, WAO, PSU, MyAgeing, Burnet Institute, UNU-IIGH	62.5	37.5	Key informant semi-structured individual interviews
5.	Other national/ state government entities	5	4	MYS, MWFC, MOE, DOSM	75	25	Key informant semi-structured individual interviews
6.	Representatives of national/international NGOs and women rights organizations including entities that are not partners of UNFPA but functioning in the same space	18	8	FRHAM, MCCBCHST, RRAAM, ENGENDER, SWWS, JFS, AWAM, DMA	62.5	37.5	Key informant semi-structured individual interviews
7.	Representatives of Academia	5	4	UM, HUMS, UIS, ISIS	75	25	Key informant semi-structured individual interviews
8.	Beneficiaries of UNFPA support	1	0	Trainee from PEKERTI comprehensive sexuality education advocacy programmes run by LPPKN	0	0	
9.	Autonomous Body	1	1	SUHAKAM (Human Rights Commission of Malaysia)	100	0	Key informant semi-structured individual interview
10.	UN Agency partners	9	7	UN Resident Coordinator's Office (RCO), UNICEF, UNDP, UNHCR, UNAIDS	85.7	14.3	Key informant semi-structured individual and group interviews
	TOTAL	68	52		37 F	15 M	

Site selection:

36. In addition to Kuala Lumpur, the geographical scope of the evaluation covered the states of Sabah, Sarawak (located in East Malaysia) and Selangor, given the reach of UNFPA Malaysia's interventions in these states, as articulated in Annex-5. During the field phase, both physical as well as online interviews were conducted. Where possible, physical interviews were conducted in-person with key informants and other stakeholders, especially those based in the Kuala Lumpur / Selangor. Online interviews were conducted with participants who are based in Sabah and Sarawak, due to limited financial resources being available for this exercise not making it feasible to undertake air travel to access these areas.

1.3.4 Limitations and mitigation measures

37. Though the programme duration of the CP is from January 2022 to December 2025, implementation of activities under the programme was initiated full-fledged only in mid-2023 when funding became available. Hence the time period of programme implementation to be evaluated was considerably brief, with a number of

planned interventions remaining to be implemented during the course of 2024-2025. As such, for the evaluation of the progress towards achievement of planned/intended results and contribution of outputs towards outcomes, considerable time has not yet passed since implementation started, which remained a limitation of the evaluation. The ET has made best use of the information available to-date, as gathered from primary and secondary data sources, and assessed factors such as reach to beneficiaries that are furthest behind, disability inclusion, human-rights based approaches, that have been adopted thus far, along with reviewing the programme pipeline to assess what measures are planned for the remaining period of the CP to reach the most vulnerable. Interview questions raised with some key stakeholders and CO staff incorporated these dimensions.

38. The inability of the ET to travel to Sabah and Sarawak, and engage with key stakeholders in these states, remained a limiting factor, and close liaison was maintained with the CO to ensure that arrangements for internet connectivity and online access to these stakeholders remained in order. Online interviews with IPs (LPPKN) in Sabah and Sarawak were successfully conducted.

39. The ET discussed with the CO during the design and field phases on the inclusion of beneficiaries in the stakeholder listing for interviews to be conducted during the field phase. However, the CO found this challenging and provided the reasoning that UNFPA Malaysia does not directly engage in on-the-ground activities and therefore the UNFPA-beneficiary link does not exist. As an example, when the CO tried to identify beneficiaries from the implementation of the CSE advocacy forum in liaison with the IP (LPPKN), the CO found that participants did not recognise UNFPA, even when introduced by LPPKN. This reflects that UNFPA's visibility vis-à-vis those who benefit from UNFPA's support, warrants intervention, and is a factor that should seriously be considered by UNFPA, moving forward. Additionally, a significant number of beneficiaries did not recall their participation in the forum, which in turn highlighted sustainability issues.

40. Further constraints included internet connectivity issues and geographical barriers for reaching those located in remote locations of Eastern Malaysia, which made it difficult for the CO to reach beneficiaries. The ET considers this to have remained a limitation of the evaluation, and registered this reservation with the CO. The CO was of the view that the evaluation should focus more on assessing the overall performance of the country programme at the output level, rather than individual experiences of beneficiaries⁸.

41. One of the limitations was the availability of quantitative monitoring data on outcome and output level indicators of the CPAP results framework and the indicators included in the work plans. To mitigate this limitation, the output and outcome level indicators reported in the programme monitoring framework, including qualitative monitoring details provided in the quarterly and annual reports of implementing partners, and the Country Office Annual Reports as well as qualitative data from semi-structured interviews, was used as references.

42. To overcome the risk of reporting bias, the ET cross-compared the evidence obtained through different data sources. As all interview data was captured based on respondents' perceptions, the triangulation of data sources, data types and data collection methods, helped explore diverse perspectives and overcome any reporting biases, thereby increasing the credibility of the evaluation findings. Respondents were encouraged to be forthright with their responses, by giving them the assurance that their identity will be kept confidential.

43. Given the logistical challenges of arranging the field work schedule within a tight time frame with several stakeholders to be covered while not being sure of their preoccupations, availability and willingness to be part of the process, the ET remained in close contact with the UNFPA CPE Manager while setting up the interview schedule so that alternate options could be worked out.

44. The rounds of interviews were divided amongst the ET members based on the members' respective area of expertise, and when feasible and appropriate, combined participation of ET members in select meetings enabled the team to achieve maximum perspectives collectively. Several rounds of meetings with CO staff took place to help clarify the CP work programme and its implementation.

⁸ Feedback from CPE Manager

CHAPTER 2 – COUNTRY CONTEXT

2.1 Development challenges and national strategies

1. Malaysia's Human Development Index (HDI) stands at 0.807 in 2023-24⁹ (having improved from 0.577 in 1980) ranking it 63 out of 193 countries, and placing it under the "Very High HDI" country category. As per World Bank assessment, Malaysia is classified as an Upper-Middle Income country¹⁰ (UMIC), with a Gross National Income (GNI) per capita equalling a high USD 27,295 in 2022¹¹. Malaysia's growth strategy is anchored in the Twelfth Malaysia Plan (12MP), as updated by the Government's Ekonomi Madani agenda, which explicitly commits to securing ambitious changes in human development, targeting Malaysia's HDI to be ranked amongst the top 25 countries¹².

2. The country's population stood at 33.5 million in 2023¹³, with an annual population growth rate of 1.8 per cent. Malaysia is a multi-ethnic and multi-religious country with 58.0 per cent Malay, 12.1 per cent other Bumiputera, 22.6 per cent Chinese, 6.6 per cent Indians, and 0.7 per cent 'others'.¹⁴ Total fertility rate for women aged 15-49 years dropped from 1.7 in 2021 to 1.6 in 2022, the lowest in five decades. Proportion of population per age group was 7.6 million (22.7 per cent) for 0-14 years, 23.4 million (69.9 per cent) for 15-64 years, and 2.5 million (7.5 per cent) for 65 years and above. Child and infant mortality rates are almost on par with developed countries, and life expectancy at birth climbed to 75.2 years for both sexes (2024)¹⁵. Enrolment in primary schools is close to 100 per cent, while for secondary schools, it stands at approximately 90 per cent.¹⁶ Public service coverage is extensive - about 95 per cent of households have access to water, electricity and sanitation facilities.¹⁷

3. According to Department of Statistics Malaysia (DOSM)'s Household Income and Expenditure Survey, the average household income increased from RM 5,000 in 2012 to RM 8,479 in 2022¹⁸. During this period, the Gini Coefficient by ethnicity decreased for all ethnicities, indicating a lowering inequality trend. In 2022, Malaysia's absolute poverty rate increased to 6.2 per cent, up from 5.6 per cent in 2019 before the pandemic. Nearly 490,000 Malaysian households live below the average national poverty line of RM 2,589 per month.

4. Malaysia is undergoing a significant demographic transition and is expected to become an aged nation by the year 2030 when 15 per cent of its population will comprise of those aged 60 and above. Rapid population ageing can be attributed to the decline in fertility rate and longer life expectancy. Population aging poses several challenges for Malaysia, which also has a vibrant young population. Demographic transition has consequences for labour force participation and slowdown of economic growth, as well as pressures on the healthcare system and overall productivity. The median age of the population has increased from 17.6 years in 1970 to 30.4 years in 2022.¹⁹ Old-age dependency ratio is also expected to increase from 10.4 per cent in 2020 to 21.7 per cent by 2040.²⁰ These demographic changes would have an impact on older persons, especially older females, who are more economically vulnerable.

5. Floods are one of the most common climate and natural disasters in Malaysia, particularly occurring during the monsoon season (November to February).²¹ While flood-related deaths and serious injuries were minimal, residents in several flood-prone states (including those residing in the states of Sabah, Sarawak and Selangor) suffered considerable loss and damage, and remain at risk of displacement. Other climate-related disasters include drought, landslides, and storm surges. Research has also showed that women and children are among

⁹ <https://hdr.undp.org/system/files/documents/global-report-document/hdr2023-24reporten.pdf>

¹⁰ <https://blogs.worldbank.org/en/opendata/new-world-bank-country-classifications-income-level-2022-2023>

¹¹ <https://datahelpdesk.worldbank.org/knowledgebase/articles/906519> (accessed by January 2021)

¹² <https://hdr.undp.org/system/files/documents/global-report-document/hdr2023-24reporten.pdf>

¹³ UN Common Country Analysis, 2024 (draft)

¹⁴ Department of Statistics Malaysia: <https://open.dosm.gov.my/>

¹⁵ Demographic Statistics Malaysia Third Quarter 2023: https://www.dosm.gov.my/uploads/release-content/file_20231107101245.pdf

¹⁶ DOSM online, accessed September 2024 – Male/Female ratios were 73 years/77.8 years

¹⁷ DOSM, 2021. Children Statistics, Malaysia, 2021.

¹⁸ DOSM, 2020. Household Income and Basic Amenities Survey 2019.

¹⁹ Table 3: Mean of monthly household gross income by ethnic group of head of household, strata and state, Malaysia, 1970 – 2022.

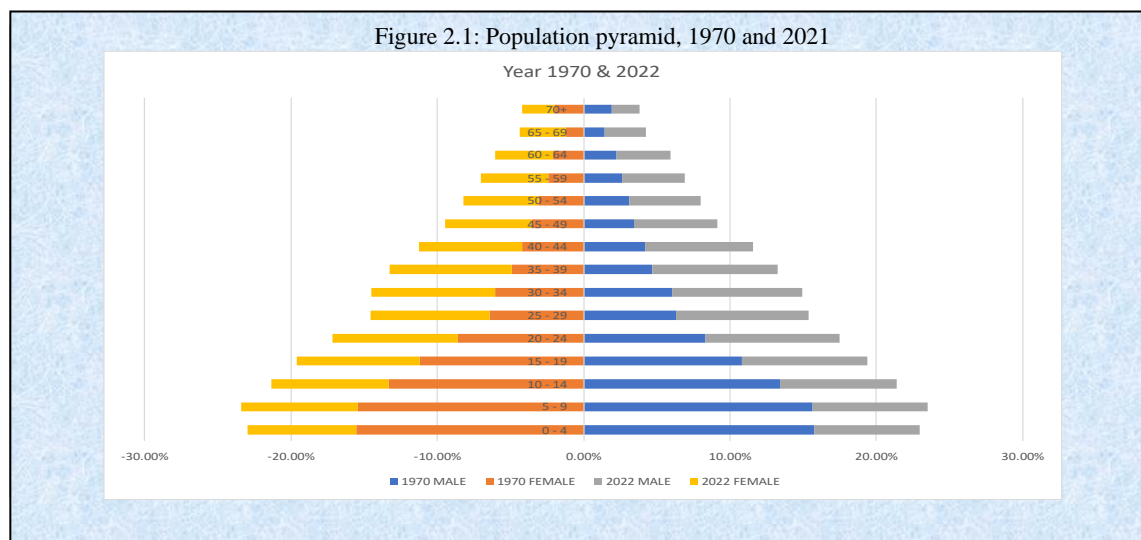
²⁰ <https://www.ekonomi.gov.my/sites/default/files/2023-12/Jadual3-Pendapatan-Isi-Rumah-Kasar-Bulanan-Purata-Mengikut-Kumpulan-Etnik-Ketua-Isi-Rumah-%20Strata-dan-Negeri-Malaysia-1970-2022.pdf>

²¹ DOSM, 2022. Current Population Estimates, Malaysia, 2022.

²² DOSM, 2016. Population Projection Revised, Malaysia, 2010-2040.

²³ Climate Risk Country Profile: <https://www.adb.org/sites/default/files/publication/723571/climate-risk-country-profile-malaysia.pdf>

the most vulnerable groups to climate change risks.²² Sustainability is a core theme of Malaysia's 12MP under which green economy is being promoted. The Government aspires to achieve carbon neutrality by 2050. The establishment of the National Climate Change Action Council in 2023 demonstrates its recognition of climate change as a critical issue. The National Energy Transition Roadmap launched in August 2023 further emphasized the Government's green credentials.²³



6. Malaysia has been actively fostering technology and innovation as key drivers of its economic growth and development. Various initiatives and policies have been implemented to support the growth of the technology sector and encourage innovation across industries. For example, the Multimedia Super Corridor (MSC), Cyberjaya, and Technology Park Malaysia serve as hubs for research, development, and collaboration among industry players, academia, and government agencies. In addition, Malaysia has been investing in digital infrastructure, including high-speed internet connectivity and digital platforms, to expand broadband access in rural areas and promote digital literacy among the population.

7. Maternal and child health indicators have improved over the years, particularly the reduction of maternal deaths from 56.4 per 100,000 live births in 1980 to 23.5 per 100,000 in 2018. In the same period, safe delivery by skilled birth attendants increased from 38 to 99 per cent. Maternal mortality rate increased to 24.8 in 2020 and 68.2 in 2021 due to the COVID-19 pandemic²⁴, but dropped to 26 in 2022 and 2023 as the pandemic slowed down. Malaysia has achieved the under-five mortality rate target since 1984, with a rate of 86 per 100,000 live births.

8. Despite the progress, there are still groups that remain vulnerable and marginalized from programmes, interventions and support. For example, there is limited access to sexual and reproductive health information and services for indigenous groups, local and migrant workers in rural areas and sectors (eg., who rely on plantations) who remain invisible, populations such as the Bajau Laut comprising of women who often depend on the permission of their male partners/members of their family to access services. Others most vulnerable who remain at the cusp of being left behind and need attention include persons with disabilities (PwDs), key populations, SGBV survivors, marginalised and impoverished populations, migrants and displaced populations. Growth therefore needs to be more equitable, favouring lower-income groups, and lagging regions. The Government is seeking wider improvements in the attainment of SDGs by way of improving access to healthcare, providing more affordable housing, actions to eradicate hardcore poverty, and delivering enhanced social protection programmes²⁵.

²² World Bank Group Gender Strategy. Gender Equality, Poverty Reduction, and Inclusive Growth. <https://documents1.worldbank.org/curated/en/820851467992505410/pdf/102114-REVISED-PUBLIC-WBG-Gender-Strategy.pdf>

²³ National Energy Transition Roadmap. https://www.ekonomi.gov.my/sites/default/files/2023-09/National%20Energy%20Transition%20Roadmap_0.pdf

²⁴ Statistics of life expectancy, Malaysia

²⁵ UN Common Country Analysis, 2024 (draft)

9. According to the Fifth Malaysian Population and Family Survey (MPFS-5), 2014,²⁶ the national contraceptive use has declined from 55 per cent in 1994 to 52 per cent in 2014. The use of modern methods has stagnated at 34.3 per cent since 1984. The unmet need for modern methods of contraception has steadily risen from 25 per cent in 1998 to 34.3 per cent in 2014. In 2020, adolescent birth rate was 7.6 per 1,000 among adolescents 15-19 years old. In 2019, the total number of deliveries by women below the age of 20 was 11,452. Around 40 per cent of adolescents who had an unsafe abortion did not use any methods of contraception, with their knowledge regarding methods of contraception remaining low at 45 per cent²⁷. Statistics highlighted in the Adolescent Health Survey 2022²⁸ indicate various aspects of sexual behaviour and practices among the youth, underlining the need for comprehensive sexual health education and awareness programmes. The prevalence of adequate HIV knowledge among adolescents was only 1.3 per cent²⁹ partly attributed to social-cultural factors that limit their access to SRH information and services. To enhance human capital and drive macroeconomic performance, it is necessary for Malaysia to continue to invest in sexual and reproductive health and reproductive rights, in particular unmet needs in family planning, more effective Comprehensive Sexuality Education (CSE) in and out of schools, and to ensure access to sexual and reproductive health information and services for young people, as well as for vulnerable and marginalized populations.

10. Malaysia has made considerable progress toward gender equality and women's empowerment, with gender parity having been attained in education and health. In 2018, out of all school leavers who applied to enter universities, 60 per cent were female and 40 per cent were males, the same proportions were seen in the success rate. However, female labour force participation rate remains one of the lowest in the region, with Malaysia ranking lower than ASEAN countries on the World Economic Forum Global Gender Gap Report, 2022³⁰. Only 55.5 per cent of working-age Malaysian women were employed or looking for jobs in 2021, compared to 80.9 per cent of men³¹. While Malaysian women have achieved significant advancements in education, traditional gender roles and expectations persist in the society. While women make up 58.9 percent of the civil service, they only make up approximately 38.7 per cent of top management and above.³² There has been a growing awareness of the need for gender-transformative approaches to address these issues, while challenging and transforming the underlying power structures, norms, and attitudes that perpetuate gender inequality, and place women and girls at the centre of policies and programme.

11. Gender-based violence (GBV) remains to be perceived as a sensitive issue not discussed openly in Malaysia. About 8 per cent of Malaysian women between the age of 18-50 years have experienced Intimate Partner Violence (IPV) in their lifetime³³. Given the sensitivity of GBV that is linked to stigma, fear of retribution, and socio-cultural beliefs, the number of women who have experienced violence is likely to be higher than reported.

12. In order to address the challenges facing the country with regards to SRHR, AY, Population and aging issues and GEWE, several national strategies have evolved over time, the key ones being:

- The **National Family Planning (FP) Programme** was introduced in 1966 with the establishment of the National Family Planning Development Board (NFPDB), also known as LPPKN (Lembaga Penduduk dan Pembangunan Keluarga Negara in Malay), as the centre of excellence for population and family³⁴. The Programme was expanded and integrated with the Ministry of Health's maternal and child health services since the 1970s. During ICPD25, Malaysia reiterated its commitments to reproductive health through its **National Policy and Plan of Action for Reproductive Health and Social Education (referred to as PEKERTI)**, which recognizes that Social and Reproductive Health Education (SRHE) is a key component in (SRHR), and that achievement of optimal reproductive and sexual health plays an important role in human

²⁶Key Findings of the Fifth Malaysian Population and Family Survey (MPFS-5) 2014. National Population and Family Development Board https://familyrepository.lppkn.gov.my/index.php/database_stores/store_view_page/18/488?link=Ij9taWQ9MTU3JmFscGhhYmV0PVIi

²⁷ Key Findings of the Fifth Malaysian Population and Family Survey (MPFS-5) 2014. National Population and Family Development Board https://familyrepository.lppkn.gov.my/index.php/database_stores/store_view_page/18/488?link=Ij9taWQ9MTU3JmFscGhhYmV0PVIi

²⁸ Institute for Public Health (IPH) 2022. Technical Report National Health and Morbidity Survey (NHMS) 2022: Adolescent Health Survey, Malaysia.

²⁹ Institute for Public Health (IPH) 2022. Technical Report National Health and Morbidity Survey (NHMS) 2022: Adolescent Health Survey, Malaysia.

³⁰ Global Gender Gap Report 2022, Insight Report July 2022, World Economic Forum.

³¹ DOSM. 2022. Labour Force Survey Report 2021.

³² DOSM, 2022. Statistics of Women's Empowerment in Selected Domains, 2022.

³³ Shuib R, Endut N, Ali SH, Osman I, Abdullah S, Oon SW, et al. Domestic violence and women's well-being in Malaysia: Issues and challenges conducting a national study using the WHO multi-country questionnaire on women's health and domestic violence against women. *Procedia-Social and Behavioral Sciences*. 2013;91:475–88.

³⁴ LPPKN website:

<https://www.lppkn.gov.my/lppkngateway/frontend/web/index.php?r=portal/article&menu=60&id=MmZPV04xYlgldlNLbm9HNURQUU9YZz09>

development.³⁵ LPPKN is a statutory agency under the Ministry of Women, Family and Community Development (MWFCDD) and has overall responsibility for implementing PEKERTI, which mainly targets adolescents. The **National Family Planning Guidelines** have been formed as a guide for the implementation and coordination of this programme.

- Considering the critical role of family well-being in national development, the Ministry of Women, Family and Community Development (MWFCDD) developed the **National Family Policy** (NFP) in 2010, which prioritises the perspective of the family in all socio-economic development efforts to produce a high-quality generation.
- In 2011, the Cabinet approved a new **National Policy for Older Persons** (NPOP) and its Action Plan (2010-2020) to replace the National Policy for the Elderly in 1995. The revised policy adopts a life span perspective, with a goal of empowering the individual, the family and the community, making provisions for age-friendly services as well the development of enabling and supportive environment towards the well-being of older Malaysians. It highlighted the need for continued initiatives for the protection of vulnerable older persons, with more old-age employment opportunities.³⁶ Recognising that Malaysia will be an ageing nation by 2030, and as part of its commitments made during the Nairobi Summit (ICPD25), initiatives have been undertaken to empower the youth population and to provide them avenues to voice their needs. Recognizing the importance of the youth population, the voting age has been lowered from 21 to 18 years.
- The Government has established a **One Stop Crisis Centre** (OSCC) in all hospitals under the Ministry of Health since 2015 to provide the necessary services to survivors of GBV. In 2018, the Committee on the Elimination of Discrimination against Women (CEDAW) recommended several measures targeted at strengthening the comprehensive response to GBV and other harmful practices, including developing a comprehensive system to collect, analyse and publish data on women's situation regarding GBV. Malaysia submitted the 6th CEDAW Report³⁷ in 2023, reiterating its commitment to making efforts in addressing recommendations made by the committee, and was commended for actions taken with reference to amending criminal laws specifically to criminalize the act of stalking to address gender-based violence against women and girls, as well as abolishing the mandatory death penalty.
- In 2019, the Government launched the **Shared Prosperity Vision** (SPV) 2030³⁸ to focus its policies on realising more equitable and balanced growth, including through the establishment of a more comprehensive and effective social protection system. The SPV 2030 aims to **increase the participation and leadership of women in the public and private sectors**, especially at the highest level of management, by protecting women's rights, reviewing the effectiveness of laws that protect victims of domestic violence and providing access to child care programmes to ensure the participation of women with children in the labour market.
- In compliance of its commitments to ICPD25, Malaysia has drafted a new **Sexual Harassment Bill** and had the first reading in Parliament in 2021. The **Anti-Sexual Harassment Act** (ASHA) 2022 was passed in August 2022. MWFCDD is empowered to make the necessary regulations in respect of the Tribunal for Anti-Sexual Harassment. As opposed to the sexual harassment provisions under the Malaysian Employment Act 1955, which only cover workplace sexual harassment namely, sexual harassment made (i) by an employee against another employee; (ii) by an employee against any employer; or (iii) by an employer against an employee, ASHA 2022 provides the right of redress for any person who has been sexually harassed in all aspects of everyday living.
- An **Anti-Discrimination Against Women Bill** has been drafted to address gender inequality.
- Raising the **minimum age of marriage** in Malaysia: Kedah (one of 13 Malaysian states) raised the minimum age of marriage of girls and boys from 16 to 18 in 2022. The amendment, while an important first step, still allows Muslim girls below the age of 18 to be married with the Shariah court's permission. The civil law of Malaysia also allows state chief ministers to grant girls between the ages of 16 and 18 the permission to be married. Selangor is the only other Malaysian state which has raised the minimum age of marriage for girls and boys from 16 to 18.
- As an example of **Gender Responsive Budgeting**, in 2022, Selangor became the first state to address period poverty with an RM 200,000 allocation under its 2023 State Budget. The amount is for providing free

³⁵ LPPKN website:

<https://www.lppkn.gov.my/lppkngateway/frontend/web/index.php?r=portal/article&menu=3&id=SnlwSyt2Z1R2aUJZQ25Ic1BWb3I3Zz09>

³⁶ Policy Development on Ageing in Malaysia in Book (Healthy Ageing in Asia):

<https://www.taylorfrancis.com/chapters/edit/10.1201/9781003043270-4/policy-development-ageing-malaysia-tengku-aizan-hamid-wan-alia-wan-sulaiman-mohamad-fazdillah-bagat-sen-tyng-chai>

³⁷ Sixth periodic report.

https://www.kpwkm.gov.my/kpwkm/uploads/files/Penerbitan/instrument_antarabangsa/Discrimination%20against%20women%20CEDAW/CEDAW_C_MYS_6_8667_E.pdf

³⁸ Shared Prosperity Vision 2030. <https://www.ekonomi.gov.my/sites/default/files/2020-02/Shared%20Prosperity%20Vision%202030.pdf>

sanitary napkins to target groups of female students (those staying in low-cost flats and from low-income families) from selected schools for one year.

- **Amendments in the Employment Act 1955** made in 2022, include: restrictions on the termination of pregnant women in a move to improve gender equality and more family-friendly policies in the workplace; increase in Paid Maternity Leave from 60 days to 98 days for some sectors across Peninsular Malaysia (public sector remains 60 days minimum) and including federal territory of Labuan (not approved yet by state legislature for Sabah & Sarawak); and introduction of 7 days Paid Paternity Leave for married male employees in Peninsular Malaysia and including federal territory of Labuan (not approved yet by state legislature for Sabah & Sarawak).

13. In fulfilling its commitment towards supporting and implementing the 2030 Agenda and SDGs, Malaysia has established a multi-stakeholder and participatory governance structure spearheaded by the National SDG Council, chaired by the Prime Minister, and administered by the Ministry of Economy. Progress on SDGs has been mixed. The country has not been scoring well when it comes to disaggregated data – most notably to inform the tracking of gender-specific SDG indicators³⁹. For SDG 3 on Health and Well-being, UN In-house assessment reflects mixed performance, but is trending towards a positive outlook. The metrics, especially for headline targets, are improving, but on-track targets still match off-track ones. For SDG 5, the assessment indicates weak overall progress. Four targets are scored as off-track, three are on-track, and two targets lack sufficient indicator data⁴⁰.

14. Malaysia has increasingly strengthened its data collection systems including civil registry and digital data management. Despite this, the availability of robust data on sexual and reproductive health, in particular for unmarried youth, older persons and on gender-based violence is limited. The last Population and Housing Census was conducted in 2020. A formal Demographic and Health Survey (DHS) has not been conducted and sampling of available surveys may not be representative enough to make quality data projections to inform policies and programmes to address the gaps in achieving SDGs and ICPD-related commitments.

15. The Government is in the final stages of developing the 13th Malaysia Plan 2026-2030 (13MP), at the heart of which is a commitment to addressing four key global megatrends that will shape the future: Shifts in economic blocs; Technological and digital evolution; Demographic and quality of life shifts; and Environmental and climate crisis⁴¹. Sustainability and inclusivity are central to the Plan's agenda. The Plan prioritises green growth, transitioning to renewable energy, and bolstering food security. It also aims to improve public welfare by ensuring access to affordable housing, universal healthcare, and social protection. These initiatives are intended to reduce income inequality and provide a safety net for vulnerable populations. Malaysia's strategic focus under the 13MP will leverage its position as a global / regional hub for Islamic finance while pushing for digital innovation and high-value industries. Reforms in labour markets, fiscal policies, healthcare, and education are also key elements of the Plan.

2.2 The role of external assistance

Global Context

16. Official Development Assistance (ODA) is critical to achieving the SDGs, filling key financing gaps where no alternatives exist. Bilateral ODA provided by members of the OECD Development Assistance Committee (DAC) reached an all-time high of USD 211 billion in 2022, more than double in real terms the level two decades ago. However, most donors have fallen significantly short of the 0.7 per cent of GNI commitment.⁴² International crises, slowing economic growth, rising inflation and other macroeconomic challenges are putting pressure on aid budgets. Aid flows to developing regions fell by USD 4 billion between 2021 and 2022 despite global ODA reaching record levels in 2022.⁴³

17. On average, only 16 per cent of the SDG targets are on track to be met globally by 2030, with the remaining 84 per cent showing limited progress or a reversal of progress.⁴⁴ Covid-19 was an enormous shock to the global

³⁹ UN Common Country Analysis, 2024 (draft)

⁴⁰ UN Common Country Analysis, 2024 (draft)

⁴¹ Inception Conference on the 13th Malaysia Plan, Sept 2024

⁴² <https://unctad.org/publication/financing-sustainable-development-report-2024>

⁴³ <https://unctad.org/publication/aid-under-pressure-3-accelerating-shifts-official-development-assistance>

⁴⁴ <https://s3.amazonaws.com/sustainabledevelopmentreport/2024/sustainable-development-report-2024.pdf>

economy and to progress on the SDGs. The SDGs will not be achieved by 2030 due to a variety of other factors including the shortcomings of the global financial architecture and ongoing geopolitical tensions that have undermined cooperation amongst the major economies.

18. Core contributions to the UN remained largely static throughout the last decade, rising by almost USD 0.6 billion in 2019 to stand at USD 7 billion – 15 per cent higher than in 2010.⁴⁵ UNFPA relies on both core and non-core resources to fulfil its mandate. The leading donors providing core funding to UNFPA globally include Norway, Germany, Sweden and the Netherlands.⁴⁶

19. Given the declining trend in aid flows and its impact on development financing, the significance of mobilizing domestic resources, private sector funding and innovative financing, gains increasing importance. As discussed in Chapter 3 of this report, the success of UNFPA Malaysia in mobilizing cost-sharing from Government resources at the rate of 60 per cent versus 40 per cent from UNFPA core resources, deserves due recognition.

Malaysia Context

20. According to the Central Bank of Malaysia, the country's economy grew by 3.7 per cent in 2023, compared with a record 8.7 per cent in 2022 (the highest in ASEAN). Growth moderated amid a challenging external environment - slower global trade, the global tech downcycle, geopolitical tensions and tighter monetary policies. Forecasts for GDP growth in 2024 range from 4-5 per cent.⁴⁷

21. Figure 2.2 reflects that net ODA to Malaysia has fluctuated over the last five years. According to OECD, net ODA in Malaysia in 2018 had a negative value as the country paid back more than it received. In 2022, net ODA and official aid received was USD 4.9 million.

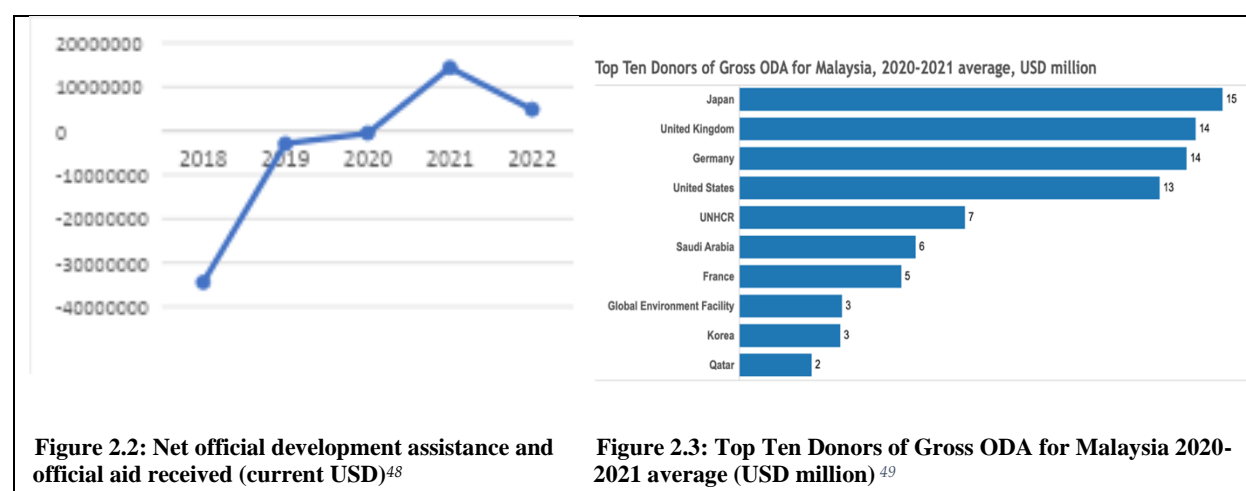


Figure 2.2: Net official development assistance and official aid received (current USD)⁴⁸

Figure 2.3: Top Ten Donors of Gross ODA for Malaysia 2020-2021 average (USD million)⁴⁹

22. As Figure 2.3 demonstrates, Japan has proven to be Malaysia's most significant source of external cooperation with gross ODA averaging USD 15 million between 2020 and 2021 followed by United Kingdom and Germany with gross ODA averaging USD 14 million. Figure 2.4 indicates that a third of bilateral ODA for Malaysia is devoted to the education sector followed by other social infrastructure. 16 per cent of ODA is dedicated to health and population.

⁴⁵ <https://devinit.org/publications/coronavirus-and-aid-data-what-latest-dac-data-tells-us/> (accessed by July 2024)

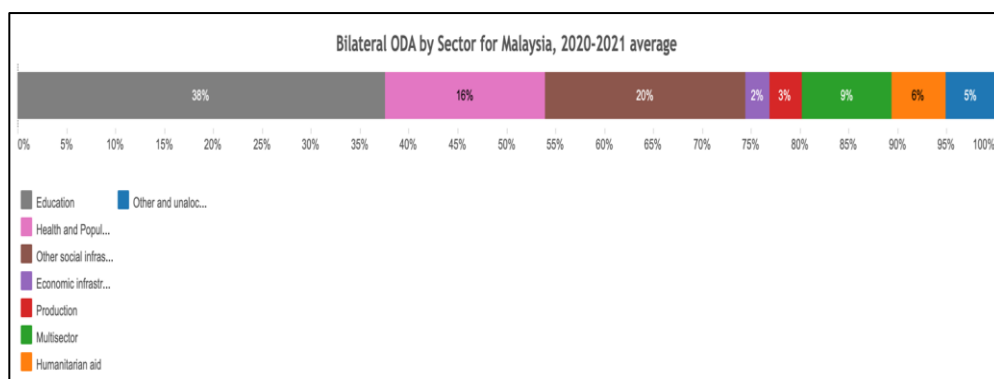
⁴⁶ <https://www.unfpa.org/sites/default/files/resource-pdf/Top20Donors-2023.pdf>

⁴⁷ https://www.bnm.gov.my/-/qb23q4_en_pr

⁴⁸ https://data.worldbank.org/indicator/DI.ODA.ALLD.CD?name_desc=false&locations=IR (accessed by July 2024)

⁴⁹ OECD-DAC: <http://www.oecd.org/dac/financing-sustainable-development/development-finance-data/aid-at-a-glance.htm> (accessed July 2024)

Figure 2.4: Bilateral ODA by Sector for Malaysia 2020-2021 average⁵⁰



⁵⁰ OECD-DAC: <http://www.oecd.org/dac/financing-sustainable-development/development-finance-data/aid-at-a-glance.htm> (accessed July 2024)

CHAPTER 3 – THE UNITED NATIONS AND UNFPA RESPONSE

3.1 United Nations and UNFPA strategic response

1. All UNFPA interventions are guided by a global corporate strategy set out in the UNFPA Strategic Plan. The UNFPA Strategic Plan 2022-2025 (SP) is the second of three consecutive strategic plans leading to 2030. It focuses on critical pathways and the strategies necessary to accelerate the achievement of three transformative results (3TRs): (a) ending the unmet need for family planning; (b) ending preventable maternal deaths; and (c) ending gender-based violence and harmful practices, including female genital mutilation and child, early and forced marriage.

2. The SP seeks to ensure that no-one is left behind, and calls for protecting and promoting human rights for all, particularly for those left behind. It recognizes the need to transform unequal gender power structures in societies in order to accelerate the achievement of the ICPD Programme of Action and to achieve universal access to sexual and reproductive health and reproductive rights. The achievement of SP commitments is essential to achieving the Sustainable Development Goals by 2030. The SP contributes to the achievement of all 17 Sustainable Development Goals, but directly contributes to the following: (a) Goal 3 (ensure healthy lives and promote well-being for all at all ages); (b) Goal 5 (achieve gender equality and empower all women and girls); (c) Goal 10 (reduce inequality within and among countries); (d) Goal 13 (take urgent action to combat climate change and its impacts); (e) Goal 16 (promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels); and (f) Goal 17 (strengthen the means of implementation and revitalize the Global Partnership for Sustainable Development). The SP ultimately contributes to the achievement of Goal 1 targeting to end poverty in all its forms everywhere.

3. For each UNFPA programme country, priorities and approaches are derived from the outcome areas and programming principles set out in the global SP. UNFPA's strategic response focuses on advancing efforts to achieve the 3TRs by 2030. It will also, collaboratively with other United Nations organizations and partners, contribute to the achievement of the following three outcomes by 2025:

SP Outcome 1: By 2025, the reduction in the unmet need for family planning has accelerated;

SP Outcome 2: By 2025, the reduction of preventable maternal deaths has accelerated;

SP Outcome 3: By 2025, the reduction in gender-based violence and harmful practices has accelerated.

4. UNFPA country offices identify, within the integrated results framework of the SP, those outcome areas that best reflect the priorities as identified within the programme country's UNSDCF, which is the UN-wide programming framework that presents the collective response of the United Nations Country Team (UNCT) to national development priorities. UNFPA's work is also guided by other global frameworks underpinning the 2030 Agenda, including the Sendai Framework for Disaster Risk Reduction 2015-2030, the 2015 Paris Agreement on climate change and the 2015 Addis Ababa Action Agenda of the Third International Conference on Financing for Development.

5. The UNFPA SP establishes that country offices should choose at least one SP outcome and determine the focus of the UNFPA contribution through clearly formulated outputs. A CP is therefore not necessarily linked to all outcomes of the SP, but only to selected relevant outcomes, which, in turn, become an integral part of the CP. The UNFPA SP and the UNSDCF thus present the broader expected effects of the CP: the outputs of the CP are linked to the outcomes of the SP and the outcomes of the CP are in turn linked to UNSDCF outcomes.

6. In the case of Malaysia, two out of the three outcomes of the UNFPA SP were selected and CP outputs formulated under these two outcomes. The second SP outcome, which relates to maternal mortality, was not selected because SRH indicators in Malaysia have improved over the years, particularly for reduction in maternal deaths and increase in safe delivery by skilled birth attendants.

7. Given Malaysia's Upper-Middle Income Country⁵¹ (UMIC) status, CP1 is anchored more at a strategic level, linked to the two interconnected UNSDCF outcomes, as detailed in the Results and Resources Framework, using mainly upstream interventions focused on policy dialogue, advocacy, partnerships, coordination and evidence

⁵¹ <https://www.worldbank.org/en/country/iran/overview>; <https://datahelpdesk.worldbank.org/knowledgebase/articles/906519> (accessed Jan 2021)

generation. However, in disasters and emergency-related settings, such as in the context of the COVID-19 pandemic, in addition to the above mode of engagement, service delivery was also deployed.

3.2 UNFPA response through the country programme

3.2.1 Brief description of UNFPA previous programme cycle, goals and achievements

8. UNFPA has closely been working with the Malaysian Government on the national family planning programme since 1973. In the late 1990s and early 2000s, the programme was expanded into SRHR, Gender and PD, to address the rapidly changing needs of the population and the country's development. Since 2003, the UNFPA country programme (CP) has been cost-shared with the Government, and the previous CP 2019-2020 (referred to as Malaysia Programme Plan, 2019-2020, that was extended by an additional year to 2021), was also a cost-shared programme with Government⁵² with a 40/60 ratio for Government resources versus UNFPA resources. The goal of the previous programme was universal access to SRH, realized reproductive rights, and reduced maternal mortality, as articulated in the UNFPA Strategic Plan 2018-2021. It was developed in alignment with the 11th Malaysia Plan (2016–2020) and the United Nations Sustainable Development Cooperation Framework for Malaysia (2016-2020).

9. The review report of the previous programme reflected the following: the programme was adapted to a great extent to the needs of the population at both the design and implementation stage. Situational or needs analyses were conducted by the implementing partners (IPs) to ensure evidence-based programmes were developed using the inputs of the vulnerable groups. The design and implementation of the programme was affected by the COVID-19 pandemic and the changes of Government. Nonetheless, the CO was able to respond and adapt the programme to meet the country's needs. Resources were reallocated for new programmes or joint programmes with other UN agencies for the most affected vulnerable populations, providing support to IPs to restructure their programmes, as well as engaging new partners. Despite challenges, the CP accomplished reasonable results in each outcome area, particularly in generating research evidence on SRHR and PD for policy-making. National capacities to improve access to quality SRHR were enhanced to a certain extent, especially in generating research evidence for policy-making, as well as engagement with faith-based organisations and civil society organisations to advocate for CSE amongst out-of-school youths. The programme also generated demographic data and monitoring mechanisms to inform the national plan, UNCT SDG initiatives, particularly on the SDG indicators and gender equality initiative.

10. The programme's review highlighted that the pandemic delayed several research studies as well as engagement with policymakers and parliamentarians for policies and programmes development on socio-demographic inequalities, affecting the progress in enhancing SRHR linkages to human capacity development as well as demographic intelligence mainstreaming. It recognized that the transition in CO senior management, delay in receiving allocated funds from other sources as well as the procedural change to request funding roll-over during the previous programme, also adversely affected the implementation and progress of the programmes and research studies, with repercussions for policy engagement. The review recommended that more efforts were needed to advocate for CSE for all, especially towards integrating CSE into the school system; and that multi-sectoral collaborations were needed for GBV response, including for health system response.

11. Building on the lessons learnt from the previous programme's implementation, CP1 was to be developed with due attention to setting baselines, targets and milestones for planned activities. Most of the IPs' annual work plans did not have measurable indicators to track the progress and achievement of their programmes. The IP's quarterly and annual reports mainly focused on activities performed and completed, with little reporting on the progress and achievement of project indicators as well as limited evidence on good practices to inform programme and policy development. It was recommended that solid M&E systems are important for the CO to show the rationale for the programmes, what works and what does not, and why they should be scaled up through government initiatives or by other development actors. The CO was required to work more closely with the policymakers and government agencies to influence the policy debate at national level. Uptake and translation of evidence-based policy by the Government needed more focus, especially in SRHR. UNFPA was to continue to play its present role on areas of its mandate that are considered sensitive in the Malaysian context with the support of the wider UN Country Team for some of these issues, e.g. gender and institutionalization of CSE

⁵² Final Review Report of UNFPA CP 2019-2020.

within the school system. The review concluded that UNFPA is well recognized amongst country stakeholders as well as UN partners for its prominent role and neutral position in dealing with SRHR, gender, family planning and GBV issues. By leveraging on the long-established good relationship with key stakeholders, UNFPA could continue to provide support to the country in addressing these sensitive issues in the context of Malaysia through the UN system's support.

3.2.2 The current UNFPA country programme

12. UNFPA Malaysia's first CPD (DP/FPA/CPD/MYS/1) was approved in the January-February 2022 session of the UNDP, UNFPA and UNOPS Executive Board. The UNFPA financial commitment over 4 years towards the programme was approved at USD 2 million from regular resources (USD 0.3 million for SRH component, USD 0.4 million for AY component, USD 0.2 million for PD component, USD 0.9 million for GBV component and USD 0.2 million for programme coordination and assistance). UNFPA also committed to mobilize USD 2.4 million through co-financing modalities and/or from other resources, including regular resources. The "other" resources component on USD 2.4 million was contributed by the Government of Malaysia with a funding ratio of 60/40 for Government resources versus UNFPA resources, reflecting a significant increase in Government contribution as compared to the previous cycle (USD 0.8 million provided for a USD 2.0 million programme with a 40/60 ratio of Government resources versus UNFPA resources), which is considered as a best practice, as in very few countries has UNFPA succeeded in mobilizing 60 per cent of Government cost-sharing.

13. The evolution of the previous cycle into the current one is reflected in the table below. The previous programme 2019-2021 focused on a set of two outputs supporting SRHR and PD areas of work. The work was largely composed of policy advocacy, further research, and dissemination of research already undertaken in the preceding programme cycle through pilot interventions, that were meant to be upscaled in the future programme. The CO reflected⁵³ that as per the UNFPA Strategic Plan and business model, there were no programmes on the ground as provision of service delivery was not an option, given the country's UMIC status. At the time when CP1 was designed, the CO under the new UNFPA SP and business model was able to be on the ground with a larger spread of activities, and addressing the needs of marginalized communities. CP1 was thus designed with coverage given to all four areas of UNFPA mandate as reflected under the four output areas of CP1.

Table 3.1: Comparison of Outputs of previous (2019-2021) and current (2022-2025) CP cycles

Programmatic areas	Outputs of previous cycle	Outputs of current cycle
Sexual and Reproductive Health and Rights	<u>CP Output 1</u> : Enhanced national capacities to improve access to quality sexual and reproductive health and reproductive rights for adolescents and youth, particularly the furthest behind including in humanitarian settings.	<u>CP Output 1</u> : Access to information and services for sexual and reproductive health and reproductive rights, especially for the marginalized and those furthest behind, including people with disabilities, is prioritized in health policies.
Adolescents and Youth	-	<u>CP Output 2</u> : Strengthened national and subnational capacity to design, implement and monitor policies and programmes, including comprehensive sexuality education programmes that promote adolescent sexual and reproductive health and reproductive rights.
Population and Development	<u>CP Output 2</u> : Mainstreamed demographic intelligence to improve the responsiveness, targeting and impact of development policies and programmes on socio-demographic inequalities, including in humanitarian settings.	<u>CP Output 3</u> : Strengthened policy environment to address population ageing and its linkage to gender equality, through life-cycle and rights-based approaches.
Gender Equality and Women's Empowerment	-	<u>CP Output 4</u> : Strengthened national capacities for the design, implementation and monitoring of legal frameworks, policies, plans and programmes to advance gender equality, empower and increase the economic participation of women and girls and prevent gender-based violence and other forms of discrimination.

14. CP1 was developed based on the priorities set under the Twelfth Malaysia Plan 2021-2025 (12MP), UNSDCF 2021-2025 priority areas, UNFPA SP 2022-2025, Sustainable Development Goals (SDGs),

⁵³ Feedback from CO staff as part of Key Informant Interviews, Aug-Sept 2024

benchmarks defined in the ICPD-PoA, and in keeping with the Government's sectoral policies and plans. It was developed in consultation with the Government, civil society, bilateral and multilateral development partners, including UN organizations, the private sector and academia. UNFPA Malaysia adopts the following modes of engagement to implement the programme: (i) advocacy and policy dialogue, (ii) capacity development, (iii) knowledge management, (iv) partnerships and coordination.

Table 3.2: Linkage of UNFPA CP1 outputs, UNFPA SP outcomes and UNSDCF outcomes with Malaysia's 12th Plan and ICPD-PoA priority areas

UNFPA CP1 OUTPUTS UNFPA-SP OUTCOMES ⁵⁴ UNSDCF OUTCOMES	ICPD-PoA PRIORITY AREAS ⁵⁵	MALAYSIA'S 12 TH PLAN CORRESPONDING PRIORITY AREAS ⁵⁶
<p>CP1 Output 1: Access to information and services for sexual and reproductive health and reproductive rights, especially for the marginalized and those furthest behind, including people with disabilities, is prioritized in health policies.</p> <p>UNFPA-SP Outcome 1: <u>Sexual and Reproductive Health</u> By 2025, the reduction in the unmet needs for family planning has accelerated.</p> <p>UNSDCF Outcome 1: By 2025, poor and vulnerable groups living in Malaysia, benefit from more equity-focused and high-quality social services as well as a social protection system that ensures all have an adequate standard of living</p> <p>SDGs 1,3,5,8,17</p>	<ul style="list-style-type: none"> • VII. Reproductive rights and reproductive health A. Reproductive health B. Family planning E. Adolescents • VIII. Health, morbidity and mortality B. Child survival and health C. Women's health and safe motherhood • X. International migration D. Refugees, asylum-seekers and displaced persons. 	<ul style="list-style-type: none"> • Social well-being ensures that the welfare of all segments of society are protected, especially those categorized as economically vulnerable and B40. • Strategy B2: Strengthening Health Financing and Public Awareness Ensures health coverage for vulnerable groups, addressing sexual and reproductive health education. • Strategy F3: Empowering the Role of Women Promotes gender equality and health services for women, which includes maternal health programmes
<p>CP1 Output 2: Strengthened national and subnational capacity to design, implement and monitor policies and programmes, including comprehensive sexuality education programmes that promote adolescent sexual and reproductive health and reproductive rights.</p> <p>UNFPA-SP Outcome 1: <u>Sexual and Reproductive Health</u> By 2025, the reduction in the unmet needs for family planning has accelerated.</p> <p>UNSDCF Outcome 1: By 2025, poor and vulnerable groups living in Malaysia benefit from more equity-focused and high-quality social services as well as a social protection system that ensures all have an adequate standard of living</p> <p>SDGs 1,3,5,8,17</p>	<ul style="list-style-type: none"> • VII. Reproductive rights and reproductive health E. Adolescents D. Human sexuality and gender relations • XI. Population growth and structure B. Population information, education, and communication C. Comprehensive sexuality education • IV. Gender equality, equity, and empowerment of women E. Prevention of violence against women (ensuring safe spaces for education) 	<ul style="list-style-type: none"> • Strategy F2: Building Dynamic, Resilient and Competitive Youth Supports comprehensive sexuality education as part of holistic youth development. • Strategy F1: Advancing Children Wellbeing Incorporates educational and health programs that support adolescents' health and rights.
<p>CP1 Output 3: Strengthened policy environment to address population ageing and its linkage to gender equality, through life-cycle and rights-based approaches.</p> <p>UNFPA-SP Outcome 1: <u>Sexual and Reproductive Health</u> By 2025, the reduction in the unmet needs for family planning has accelerated.</p> <p>UNSDCF Outcome 1:</p>	<ul style="list-style-type: none"> • VI. Population growth and structure A. Fertility, mortality, and population growth rates B. Children and youth C. Elderly people • XI. Population growth and structure C. Addressing the implications of population ageing on social services, health, and economic policies • XII. Technology, research and development 	<ul style="list-style-type: none"> • Strategy F4: Increasing the Wellbeing of the Aged Population Focuses on policies for the elderly, including social protection and healthcare tailored to an ageing population. • Strategy B1: Increasing B40 Income and Redefining Income Group Category

⁵⁴ United Nations. (2015). *Transforming our world: The 2030 agenda for sustainable development (A/RES/70/1)*. United Nations. <https://sdgs.un.org/2030agenda>

⁵⁵ United Nations. (1995). *Report of the International Conference on Population and Development (ICPD): Programme of Action*. United Nations. <https://www.unfpa.org/publications/international-conference-population-and-development-programme-action>

⁵⁶ Government of Malaysia. (2021). *Twelfth Malaysia Plan, 2021-2025*. Economic Planning Unit, Prime Minister's Department. <https://rmke12.epu.gov.my/en>

UNFPA CPI OUTPUTS UNFPA-SP OUTCOMES ⁵⁴ UNSDCF OUTCOMES	ICPD-PoA PRIORITY AREAS ⁵⁵	MALAYSIA'S 12 TH PLAN CORRESPONDING PRIORITY AREAS ⁵⁶
<p>By 2025, poor and vulnerable groups living in Malaysia benefit from more equity-focused and high-quality social services as well as a social protection system that ensures all have an adequate standard of living</p> <p>UNSDCF Outcome 3:</p> <p>By 2025, Malaysia is making meaningful progress towards an economy that is inclusive, innovative and sustainable across all income groups and productive sectors</p> <p>SDGs 1,3,5,8,17</p>	<p>A. Basic data collection and dissemination</p> <p>● XIII. National action</p> <p>A. National policies and plans of action supporting the elderly</p>	<p>Enhances support for the economically vulnerable, including older adults and low-income group.</p>
<p>CPI Output 4:</p> <p>Strengthened national capacities for the design, implementation and monitoring of legal frameworks, policies, plans and programmes to advance gender equality, empower and increase the economic participation of women and girls and prevent gender-based violence and other forms of discrimination</p> <p>UNFPA-SP Outcome 3:</p> <p>Gender Based Violence</p> <p>By 2025, the reduction in gender-based violence and harmful practices has accelerated.</p> <p>UNSDCF Outcome 1:</p> <p>By 2025, poor and vulnerable groups living in Malaysia benefit from more equity-focused and high-quality social services as well as a social protection system that ensures all have an adequate standard of living</p> <p>UNSDCF Outcome 3:</p> <p>By 2025, Malaysia is making meaningful progress towards an economy that is inclusive, innovative and sustainable across all income groups and productive sectors</p> <p>SDGs 3,5,8</p>	<p>● IV. Gender equality, equity, and empowerment of women</p> <p>A. Empowerment and status of women</p> <p>B. The girl child</p> <p>C. Male responsibilities and participation</p> <p>E. Prevention of violence against women</p> <p>● VIII. Health, morbidity and mortality</p> <p>C. Women's health and safe motherhood</p> <p>D. Prevention and response to HIV/AIDS and sexually transmitted diseases, emphasizing the intersection with GBV and sexual health</p>	<p>● Strategy F3: Empowering the Role of Women</p> <p>Targets economic empowerment and gender equality, enhancing women's participation in the workforce and leadership.</p> <p>● Strategy F5: Empowering Persons with Disabilities</p> <p>Includes gender-sensitive policies that ensure inclusion and protection against discrimination.</p>

15. While CP1's **overall goal** remains **universal access to sexual and reproductive health and reproductive rights and accelerate the implementation of the ICPD Programme of Action**, more specifically, CP1 supports the Government in achieving the below outputs, all falling under UNFPA SP and UNSDCF outcomes. See table 4.1 for CP1 outcome and output indicators, including baseline and targets set for 2025.

CP Output 1: Access to information and services for sexual and reproductive health and reproductive rights, especially for the marginalized and those furthest behind, including people with disabilities, is prioritized in health policies.

16. Priority areas of support under CP Output 1 as reflected in the CPD include:

- (a) support implementation of the National Reproductive Health Commodity Security Strategy
- (b) provide technical support to strengthen the capacity of the health system to provide high-quality, rights-based integrated SRH services to all, including increased demand for family planning, strengthened response to GBV survivors and stigma-free HIV services, with a focus on pregnant women, young people and key populations, including in Sabah and Sarawak
- (c) improve the capacity of the health systems to implement Minimum Initial Service Package (MISP) and
- (d) advocate for policies on SRH and HIV integration, for more efficient use of healthcare workers, and ensure a continuum of prevention, treatment, support and care services

Additional areas of intervention that were not initially planned in the CPD under this output, but were implemented, and added value to the output, include: Study on Enhancing Human Capital through SRH Investments and Family, that provided evidence on how Malaysia can enhance human capital via strategic SRH investments as well as vital family support policies and services to increase the female labour force participation rate and achieve essential national milestones, and hence expedite further the country's transition to a high-

income nation; and the Study on Gap Analysis of Confinement Centres in Malaysia that aimed at understanding the operations of these Centres and inform recommendations for their regulation.

CP Output 2: Strengthened national and subnational capacity to design, implement and monitor policies and programmes, including comprehensive sexuality education programmes that promote adolescent sexual and reproductive health and reproductive rights.

17. Priority areas of support under CP Output 2 as reflected in the CPD include:

- (a) advocacy and technical support to the Ministry of Education and other actors to strengthen the implementation of comprehensive sexuality education programmes according to the latest international standards, and strengthen coordination mechanisms
- (b) providing technical support to national and subnational institutions to harmonize the design, implementation and monitoring of comprehensive sexuality education (CSE) programmes in training and vocational institutes
- (c) promoting the use of technology and innovation to support teacher training and engagement of young people and parents
- (d) technical assistance for building the capacity of religious leaders and faith-based organizations to advocate for the implementation of CSE in government schools and Sunday schools ;and
- (e) supporting the generation of evidence on the importance of investing in adolescents and youth through a life-cycle approach, within the context of an ageing society, and on the linkages between CSE and SRH, gender equality and teenage pregnancy.

An additional area of intervention that was not initially planned in the CPD under this output but was implemented, was technical analysis and advocacy with the Vatican on CSE to enhance the level of alignment of its module with UNITGSE (United Nations International Technical Guideline on Sexuality Education).

CP Output 3: Strengthened policy environment to address population ageing and its linkage to gender equality, through life cycle and rights-based approaches

18. Priority areas of support under CP Output 3 *as reflected in the CPD* include:

- (a) strengthening multisectoral and interagency partnerships to raise awareness and visibility on the linkages among population ageing, gender equality and strengthening institutional capacities related to protection and care systems
- (b) promote analysis on population dynamics, vulnerability including gender, covering costed differentiated needs of women and men in the context of rapid population ageing
- (c) provide analysis and policy advice on the care industry, including in the context of rapid population ageing and the impact on older women ; and
- (d) strengthen policy and knowledge generation on population ageing and urban development with a gender and rights perspective

Additional areas of intervention that were not initially planned in the CPD under this output, but were implemented, and added value to the output, include: Report on Demographic and Socioeconomic Changes in Sarawak, identifying critical demographic dynamics and providing insights to guide future policies and strategies to foster sustainable development, particularly in empowering women and youth; and the National Family Policy revision.

CP Output 4: Strengthened national capacities for the design, implementation and monitoring of legal frameworks, policies, plans and programmes to advance gender equality, empower and increase the economic participation of women and girls and prevent gender-based violence and other forms of discrimination.

19. Priority areas of support under CP Output 4 as reflected in the CPD include:

- a) analysis of barriers that limit economic participation of women in the workforce, including home-based economic activities and advocate for gender equality laws and policies that promote women's labour force participation, including in the care industry
- (b) providing technical assistance to strengthen institutional mechanisms for the delivery of multisectoral coordinated response services to survivors of GBV, including establishment of safe spaces in selected service-

delivery points at the community-health-centre level, to ensure a survivor-centred health response to GBV survivors; advocate for pre-service curriculum development on GBV for health practitioners; encourage improved linkage between survivors and GBV response through case management and referral pathways; technical support ensuring capacity of health staff to strengthen accessible and timely essential health services for GBV survivors, especially first-line support, including on referral mechanisms

(c) generation of evidence and data on the importance of gender-related investments in the national economy and support implementation of a mechanism to track the investments

(d) advocacy for the implementation of national and international normative frameworks on human rights and for the enactment of a law against all forms of discrimination

(e) undertake, in coordination with other United Nations organizations, advocacy and policy dialogue and provide technical assistance to the private sector and civil society organizations, to advocate for gender equality and women's rights

(f) support, in coordination with the Government, other UN organizations and civil society, the development of a comprehensive monitoring and reporting framework for CEDAW and the ICPD+25 voluntary commitments on reducing GBV.

An additional area of intervention that was not initially planned in the CPD under this output but was implemented, was the Islamic finance partnership workshop, which aimed to enhance the understanding and application of Islamic financing principles in support of UNFPA's mandate, particularly focusing on SDG 3 (Good Health and Well-being), SDG 5 (Gender Equality) and gender-based violence, which was an important undertaking, and added value to the output.

3.2.3 The financial structure of the UNFPA country programme

20. This section provides an overview of the CP financial structure, and presents an overall perspective of the utilization of resources and expenditures incurred versus the planned resources allocated to the budgets of the various interventions ongoing and completed within the currency of the current programme cycle. The tables included here provide breakdowns of budget and expenditures by themes based on CP outputs (and corresponding SP outcomes), by year, and by IP. An account of resources mobilized under CP1 is also provided. It may be noted that the numbers included in this section for the purpose of this evaluation report, cover expenditures from the start of CP1 in Jan 2022 until 30 June 2024. Financial commitments under CPD 2022-2025 are reflected in Table 3.3 by outcomes/outputs.

Table 3.3: UNFPA Financial Commitment* for CPD 2022-2025 (in USD) by outcome/output areas

SP Outcome / CP Output Areas	Regular Resources	Other Resources	Total Resources	% Overall Budget
SP Outcome 1: Sexual and Reproductive Health				
CP Output 1/SRH: Access to information and services for sexual and reproductive health and reproductive rights, especially for the marginalized and those furthest behind, including people with disabilities, is prioritized in health policies.	300,000	400,000	700,000	16%
CP Output 2/AY: Strengthened national and subnational capacity to design, implement and monitor policies and programmes, including comprehensive sexuality education programmes that promote adolescent sexual and reproductive health and reproductive rights.	400,000	500,000	900,000	20%
CP Output 3/PD: Strengthened policy environment to address population ageing and its linkage to gender equality, through life-cycle and rights-based approaches.	200,000	300,000	500,000	11%
SP Outcome 3: Gender-based Violence				
CP Output 4/GE&WE: Strengthened national capacities for the design, implementation and monitoring of legal frameworks, policies, plans and programmes to advance gender equality, empower and increase the economic participation of women and girls and prevent gender-based violence and other forms of discrimination.	900,000	1,200,000	2,100,000	48%
Programme coordination and assistance (PCA)	200,000	0	200,000	5%
Total	2,000,000	2,400,000	4,400,000.00	100%

() As per CPD approved by the UNFPA, UNDP and UNOPS Executive Board in its first regular session Jan-Feb 2022. The financial structure of CP1 is presented in the Results and Resources Framework that forms part of the UNFPA Malaysia CPD 2022-2025.*

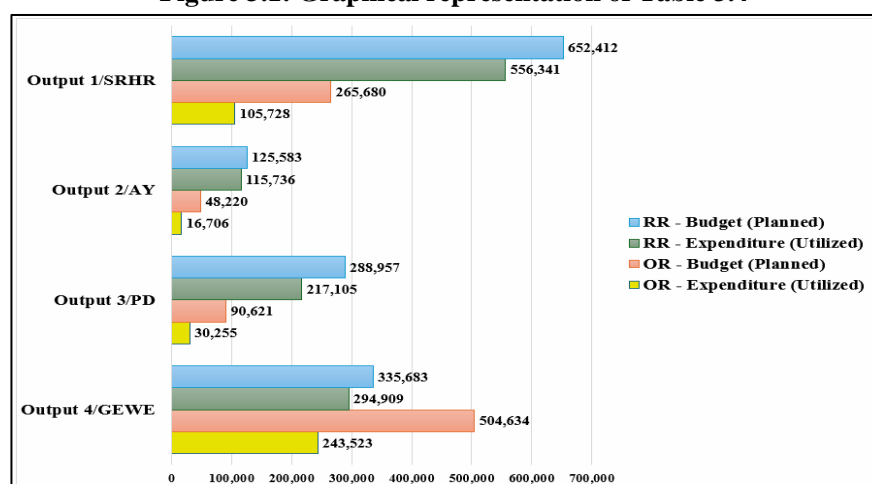
21. Preliminary financial data for the first 2.5 years (Jan 2022 to June 2024) of CP1 and the budget picture presented in Table 3.4 reflects that 40 per cent of the committed funds of USD 2,311,790 were allocated to the SRH component, 8 per cent to the AY component, 16 per cent to the PD component, and 36 per cent to the GEWE component. In terms of utilization rates, the total utilization for each of the thematic areas remains within the 64-72 per cent range, with GEWE being the lowest at 64 per cent and SRH being the highest at 72 per cent. The overall utilization rate for the 4 outputs averages out to 68 per cent with expenditures totalling to USD 1,580,330.

Table 3.4⁵⁷: Overview of the budget allocation, expenditures and utilization rate for the programmatic areas by output for the first 2.5 years (1 Jan 2022 – 30 June 2024) of CP1, in USD

Thematic Area ^a		Regular Resources (RR)		Other Resources (OR)		Total Resources (RR + OR)		
		Budget (Planned)	Expenditure (Utilized)	Budget (Planned)	Expenditure (Utilized)	Budget	Expenditure	% Utilized
SRHR	Output 1	652,412	556,341	265,680	105,728	918,092	662,095	72%
AY	Output 2	125,583	115,736	48,220	16,706	173,803	132,442	76%
PD	Output 3	288,957	217,105	90,621	30,255	379,578	247,360	65%
GEWE	Output 4	335,683	294,909	504,634	243,523	840,317	538,432	64%
Total		1,402,635	1,184,092	909,155	396,212	2,311,790	1,580,330	68%

Source: Country Office

Figure 3.1: Graphical representation of Table 3.4



Source: Based on data provided by Country Office

22. Tables 3.5 and 3.6 provide breakdowns of funds utilized per year and per IP during the first 2.5 years (Jan 2022 to June 2024) of CP1.

Table 3.5⁵⁷: Overview of the budget allocation, expenditure and utilization rate per year for the first 2.5 years (1 Jan 2022 – 30 June 2024) of CP1, in USD

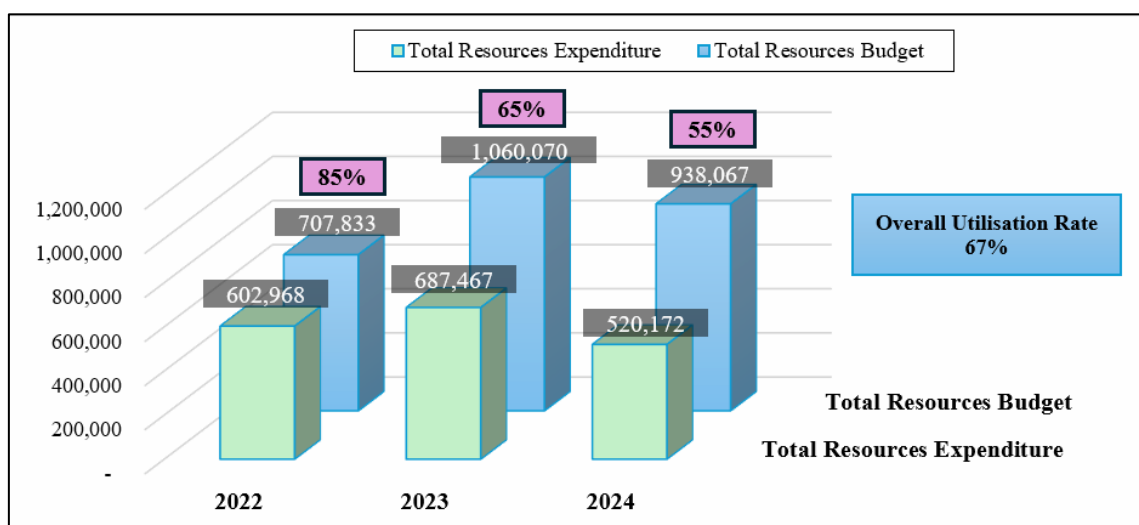
Year	Regular Resources (RR)			Other Resources (OR)			Total Resources (RR + OR)		
	Budget (Planned)	Expenditure (Utilized)	% Utilized	Budget (Planned)	Expenditure (Utilized)	% Utilized	Budget	Expenditure	% Utilized
2022	592,604	576,743	97%	115,229	26,226	23%	707,833	602,968	85%
2023*	611,962	525,144	86%	448,109	162,322	36%	1,060,070	687,467	65%
2024	563,506	302,529	54%	374,561	217,643	58%	938,067	520,172	55%
Total	1,768,071	1,404,417	79%	909,155	396,212	44%	2,705,970	1,810,608	67%

Source: Country Office

* In addition to the regular resources, the CO received Strategic Investment Facility (SIF) in 2023 for the amount USD 50,000. The funds have been used over 2023-2024 to support the refinement and implementation of Islamic Financing solutions in the country.

⁵⁷ During 2022-2023, staff costs were classified under specific CP outputs, such as SRH, AY, PD, and GBV, based on data from Cognos. However, for 2024, data were extracted from QuantumPlus, and staff costs were classified under 'position management,' no longer being attributed to any specific CP output

Figure 3.2: Graphical representation of Table 3.5



Source: Based on data provided by Country Office

Table 3.6: Overview of the budget allocation, expenditure and utilization rate per Implementing Partner for the first 2.5 years (1 Jan 2022 – 30 June 2024) of CP1, in USD

Implementing Partners	IP Codes	Total Resources		
		Budget	Expenditure	% Utilized
Burnet Institute (concluded in 2022)	PN7026	20,000	20,000	100%
UNU-IIGH (concluded in 2022)	PU0138	83,253	68,281 ^a	82%
NPFDB / LPPKN (2023)	PGMY01	30,428	3,283	11%
MyAgeing (2023)	PGMY02	16,139	0.00	0%
PSU (2023)	PGMY03	7,194	0.00	0%
WAO (2023)	PN7396	49,810	28,057	56%
UNFPA (ongoing)	PU0074	2,182,343	1,541,965	66%
Total		2,389,167	1,661,586	70%

Source: Country Office

^aIncluded previous cycle fund. USD 526,133 from Government funding has been carried over from 2021 into 2022

NOTE: 2024 expenditures as reflected in the above 3 tables are covered until 30 June 2024

23. Bringing into consideration the first 2.5 years (Jan 2022 to June 2024) of the CP, the CO has utilized 67 per cent of its total planned resources for the 3 years (ref: Table 3.3 reflecting utilization rates of 85 per cent and 65 per cent for the years 2022 and 2023 respectively). The apparent reason for the lower utilization rate in 2023 is that the Government funding for the interventions became available only in the third quarter 2023, and activities in the earlier part of the year were largely carried out through UNFPA regular resources. For 2024, it is still mid-year, so it is to be seen as to what the utilization rate will be recorded by year-end. It is noted that in the years 2022 and 2023, the utilization rates for “regular” resources (UNFPA core resources) are much higher i.e. 97 per cent and 86 per cent respectively, than for “other” resources. For 2023, the low utilization rate for “other” resources at 36 per cent can be understood due to late receipt of funds. In 2022, “other” resources were not yet received, and the 23 per cent utilization for 2022 needs to be further looked into. For the mid-year mark of 2024, the delivery of assistance appears to be on track, with a 58 per cent utilization rate achieved to-date, by the mid-year mark.

24. Amongst the IPs, as Table 3.6 reflects, UNFPA itself has the largest share of the budget allocated (91 per cent) for interventions it is implementing directly. Initiatives with MyAgeing and PSU have recently taken off and have not yet recorded any expenditures. Interventions with Burnet Institute and UNU-IIGH concluded in 2022 recording 100 and 82 percent utilization respectively.

25. Table 3.7 captures the resources mobilized by UNFPA Malaysia during the period of CP1. At present, UNFPA's only donor in Malaysia is the Government of Malaysia. Given the country's UMIC status, resources from bilateral or multilateral donors have not been forthcoming. In line with the CPD commitment of USD 2.4 million from "other" resources (see Table 3.7), the Government of Malaysia and UNFPA Malaysia reached an agreement whereby through an annual allocation of USD 600,000 per annum over the 4 year period of the current CPD 2022-2025, the GoM would make the amount of USD 2.4 million available to UNFPA for programming under the CPD priority areas. Accordingly, two tranches of USD 600,000 each amounting to USD 1.2 million have been mobilized by UNFPA from the GoM in October 2023 for the years 2022 and 2023. The funding amount is based on the signed annual workplan between UNFPA and the Government. The next two tranches of USD 600,000 each amounting to USD 1.2 million covering the years 2024 and 2025 are in the process of being allocated (as of 30 June, 2024).

26. In addition to the above amounts, an unspent amount of USD 526,133 from Government funding has been carried over from 2021 into 2022, moving from one programme cycle to the other. This makes the total amount of GoM funds available for programming under the currency of CP1 to be to the tune of USD 2,926,133. The table below reflects the areas of intervention under each of the four programme output areas which these funds were, (in the case of 2022 and 2023 funding) and will be directed to (in the case of 2024 and 2025 funding).

Table 3.7: CO Resource Mobilization and Areas of Intervention

Year	Donor	Programme Component/ CP Output	Areas of Intervention
2023	Government	SRH/Output 1	SRH advocacy (including SRH advocacy forum, SRH promotional materials)
		SRH/Output 2	PEKERTI advocacy (including PEKERTI at institute and school, PEKERTI in the communities)
		SRH/Output 3	Population dynamics advocacy (including Report on Demographic and Socioeconomic Changes in Sabah, Seventh Asian and Pacific Population Conference (7 th APPC), PERKKS)
		GBV/Output 4	GBV advocacy (IDEVAW, Malaysia Women and Girls Forum, etc)
2024	Government	SRH/Output 1	SRH advocacy (including SRH advocacy forum, unmet need of family planning study)
		SRH/Output 2	PEKERTI advocacy (including PEKERTI at institute and school, PEKERTI in the communities)
		SRH/Output 3	Population dynamics advocacy (including MYSIAP, CANDI)
		GBV/Output 4	GBV advocacy (TeamTINA, Malaysia Women and Girls Forum, etc)

(Source: Country Office)

CHAPTER 4 – FINDINGS

Evaluation Criteria: RELEVANCE

4.1 Answer to evaluation question 1

EQ1R: To what extent is the CP adapted to: (i) **the needs of diverse populations, including vulnerable and marginalized groups?** (ii) **priorities articulated in relevant international and national frameworks and agreements,** including the ICPD PoA, SDGs, CEDAW, and UPR; (iii) **the strategic direction and objectives of UNFPA?** and (iv) to the **effects of megatrends**, particularly but not limited to ageing, low fertility and climate change, and how can UNFPA boost sustainable strategic, human rights-based responses and adaptations to these?

Summary of findings: The needs of diverse populations, including vulnerable and marginalised groups (e.g. young people, women and persons with disabilities) were taken into account to a significant extent in the design and implementation of programme interventions, though the LNOB (leaving no-one behind) principle has not been fully applied. The programmes supported by UNFPA were consistent with the priorities put forward in policy and normative frameworks, including the UNSDCF, ICPD-PoA, CEDAW, UPR and the priorities of the UNFPA Strategic Plan. Furthermore, the CP and its intended results were in line with Government of Malaysia strategies and plans. More work is needed for CP's strategies to respond to the effects of megatrends through sustainable, strategic, human rights-based responses.

Finding #1: The CP was adapted to a significant extent to the needs of diverse populations, including vulnerable and marginalized groups

1. The needs of the population were assessed as part of the CP design process and adapted during implementation - stakeholders including vulnerable groups were engaged through an extensive consultative process including discussions with Government ministries and agencies, the private sector, religious authorities, key implementing partners, academic institutions and NGOs (including those represent diverse groups of vulnerable and marginalized eg. women, youth and the elderly), and their concerns were reflected in the design of CP interventions. Implementing partners (IPs) were invited to share their proposals on the identified scopes. Stakeholder discussions with the Government and IPs were held to finalise the approaches and activities for each intervention under CP outputs. As noted by one of the informants⁵⁸ that “*UNFPA contributes by sharing input on policy making, involving population inputs, and collaborating in planning and implementation of programmes under CPAP. They also participate in research and invite various stakeholders to technical meetings and conferences.*” The deliberations from these meetings were then input into programme implementation to cater to the needs of the diverse groups.

2. CP interventions have integrated rights and responsibilities of rights holders and duty bearers across the output areas, with specific attention on the needs and rights of vulnerable groups, in particular, adolescents and youth, women and girls, for example through the following studies undertaken: (i) Empowering the Women and Youth in Sabah – a study by PSU, UM; (ii) SRHR Programme for marginalized adolescents by LPPKN; (iii) the Regional study on Understanding Pathways to Adolescent Pregnancy in Southeast Asia by the Burnet Institute; (iv) The Study on Gap Analysis on Confinement Centres in Malaysia which aimed at the development of a regulatory framework standardising the quality of confinement centres in Malaysia, which directly contributes to improving the safety and well-being of women during the crucial postpartum period; (v) Families on the Edge (FOE) study on the impact of COVID-19 on women and children in low-income families by DM Analytics and UNICEF, which resulted in advocacy on improved social protection and access to services in times of shocks targeting women from lower income or vulnerable urban residents, those with children, elderly and family members with disabilities to support their SRH and care work. Following the finalization of the Confinement Centre report, a regulatory framework and responsible agency/ministry to set quality standards for confinement centres in Malaysia and mechanisms to enforce regulations, including Standard Operating Procedures (SOP) will be proposed⁵⁹ in consultation with concerned ministries, which will directly contribute to improving the safety and well-being of women during the crucial postpartum period. Furthermore, the needs of these vulnerable

⁵⁸ Quote from a stakeholder as part of Key Informant Interviews, Aug-Sep 2024

⁵⁹ UNFPA Annual Report 2023

groups, namely the adolescents, young people, women and girls as well as older people were emphasized⁶⁰. This is evident from the response from one of the key informants during the interview;⁶¹ *“UNFPA supports programmes directed towards reproductive rights, but not sexual rights due to cultural sensitivities. The focus is on marginalized groups, including persons with disabilities and commercial sex workers. UNFPA's role includes technical and programmatic support.”*

3. Further, there are examples of decision-making, review and needs analyses during the implementation phase. For example, the National Population and Family Development Board (NPFDB/LPPKN) conducted a situational analysis to compare Family Planning and Comprehensive Sexuality Education (CSE) policies and practices across selected Muslim countries based on the best practices from international guidelines, with support from the United Nations University – International Institute for Global Health (UNU-IIGH)^{62,63,64}. Being present and playing an important role at strategic dialogues helps facilitate broadened advocacy on UNFPA’s mandate e.g. the Government then requested UNFPA to be a partner to support review and revision of the National Family Policy⁶⁵. In the provision of SRH services, elsewhere in Sabah and Sarawak, the inclusion of long-acting reversible contraceptives as an essential sexual and reproductive health service into primary health care was implemented. These contraceptives were all utilized well in LPPKN clinics in Sabah and Sarawak⁶⁶.

4. Similarly, a situational analysis was also conducted on socio-demographic issues such as fertility and fertility preferences, marriage and divorce, gender differentials in health, education, employment and household decision making, and contraceptive use and unmet need for Family Planning (FP) in Sabah to provide evidence to build the case for prioritising investments in services for the state⁶⁷.

5. A gendered approach has been adopted in the design of studies and interventions across outputs, in particular women’s voices from diverse groups have been included. For example, Women’s Aid Organisation (WAO)’s community network mapping to study GBV response in Malaysia, among marginalized women and B40 groups via needs assessment to identify the issues of concern and key recommendations for improving the GBV response system through the community and through a gender lens; trained grassroots women to become community advocates; and trained Government front-liners to work with these women. One informant⁶⁸ voiced that *“WAO’s work with UNFPA consciously includes diverse groups in their programmes, ensuring representation of different races, religions, abilities, and geographical locations. They actively seek to engage communities beyond Klang Valley and focus on diversity, although it can be challenging due to segregation in certain areas. Some communities are not used to thinking about diversity, presenting challenges in engagement.”*

6. Some evidence⁶⁹ of GBV Advocacy, Dialogue, and Programmes in Malaysia include^{70,71}

- ❖ 16 Days Campaign for the International Day for the Elimination of Violence against Women (IDEVAW): Orange the Nation campaign in collaboration with Ministry of Women, Family and Community Development and other partners.
- ❖ Malaysia Women and Girls Forum (MWGF), an annual event that brings together multiple stakeholders involved in the social and economic advancement of women and girls in Malaysia.
- ❖ White Ribbon Campaign with men and boys working to end violence against women and girls, carried out in collaboration with All Women’s Action Society (AWAM).
- ❖ The Legal Literacy Programme, which is in the pipeline, aims to: raise awareness on all forms of constitutional and legal rights pertaining to gender equality, GBV, SRHR, women’s economic

⁶⁰ 2023 Annual Workplan for UNFPA Malaysia Country Office with Implementing Partners

⁶¹ Interview with implementing partners as part of Key Informant Interviews, Aug-Sept 2024

⁶² United Nations University - International Institute for Global Health. Family Planning Strategies across selected Muslim countries: A review to inform Malaysia’s next steps. 2020

⁶³ United Nations University - International Institute for Global Health. Sexuality Education across selected Muslim countries: A review to inform Malaysia’s 2020-25 National Reproductive Health and Social Education Plan of Action. 2020

⁶⁴ National Reproductive Health and Social Education Policy (PEKERTI) and its Plans of Action (PoA) for LPPKN project on Integrated SRHR Plans and Policies in Malaysia

⁶⁵ 2023 UNFPA Annual Report Malaysia

⁶⁶ WP Report LPPKN 2023

⁶⁷ UNFPA Malaysia. Standard Progress Reports by Implementing Partners

⁶⁸ Interview with Implementing Partner, Aug-Sept 2024

⁶⁹ WAO. UNFPA Final Outcome Report: Building Capacities for GBV Response in Malaysia during COVID-19 Pandemic. 2020

⁷⁰ 2023 Annual Workplan for UNFPA Malaysia Country Office with Implementing Partners

⁷¹ 2023 UNFPA Annual Report Malaysia

empowerment, including legal protection and rights under the Malaysian laws; to educate and inform communities of their legal rights; and make available support mechanisms and opportunities.

These events played a significant role in raising awareness about violence against women and other critical issues faced by women and girls in the country, and giving them a voice. Additionally, the MWGF platform brings together a diverse range of stakeholders to discuss and highlight contemporary issues, ensuring that these important topics reach and resonate with a broader audience.

Finding #2: The “leaving no-one behind” and “reaching the furthest behind first” principles are not fully applied

7. The “leaving no-one behind” (LNOB) and “reaching the furthest behind first” principles, are not fully applied, as certain segments of diverse populations have not been targeted for support. As noted, although UNFPA is proactive and collaborative in engaging with relevant ministries, the need for more focus on rural and disadvantaged youth is warranted. Thus, further efforts to reach those not yet reached will be needed through engaging more with entities that can provide high quality data/data analytics (eg. DOSM) as they have a wealth of data that can provide information regarding those that are at the bottom end of the development spectrum, or entities such as SUHAKAM, the Human Rights Commission of Malaysia to whom vulnerable and marginalized populations reach out to for addressing their needs. As noted by a key NGO informant, *“UNFPA’s engagement with marginalized populations has been minimal, particularly in SRH services. Despite the key informant being involved in some strategic planning meetings, there was little follow-up or visible impact on addressing the needs of marginalized communities. UNFPA’s initiatives did not seem to address critical issues like safe abortion and contraception, which are vital for marginalized groups”*. This is reiterated by a key informant from APRO that *“Malaysia is transitioning to a high-income country, but vulnerable populations, including ethnic minorities and hard-to-reach groups, are still being neglected in policy interventions. This poses challenges for UNFPA in terms of addressing SRHR and population development issues.”*

8. The welfare department of MWFCDD could also be tapped as a source for securing data on those left behind in the development continuum, needing support. A key informant⁷² noted: *“UNFPA’s work with SUHAKAM has played a role in building long-term capacities, particularly by supporting advocacy efforts for stateless children and victims of child marriage. However, more can be done to ensure that these efforts are institutionalized.”*

Finding #3: CP design was in alignment with priorities articulated in national and international frameworks/agreements, and UNFPA’s strategic directions

9. The priorities, objectives and strategies of the CP were in line with the 12th Malaysia Plan and SPV 2030 and with relevant Government strategies and policies regarding SRHR, population dynamics and women’s empowerment, in particular, fostering gender equality, addressing demographic challenges, and promoting sustainable socio-economic development in the country. The CP addressed Theme 2: Strengthening Security, Wellbeing and Inclusivity of the 12th Malaysia Plan and focused on Chapter 1: Strengthening Macroeconomics; Chapter 5: Addressing Poverty and Building an Inclusive Society, Priority Area F: Empowering Specific Target Groups, Chapter 6: Improving Regional Balance and Inclusion; Chapter 7: Enhancing Socio-economic Development in Sabah and Sarawak. The CP was also in line with relevant Government strategies and policies regarding SRHR, population dynamics and women’s empowerment. For example, adolescent SRHR – in particular, the access to CSE – under outputs 1 and 2, while gender equality and GBV were covered under output 4 of the CP; and in Chapter 13 of the 12th Malaysia Plan: Strengthening Public Sector Service Delivery. These were also in tandem with the Government’s commitment to implementing the 17 SDGs through a whole-of-nation approach.^{73,74}

10. The design of the CP (and corresponding AWP) was also in line with the UNSDCF and UNFPA strategic plan, and 2030 Agenda, and in alignment with ICPD-PoA and SDGs, ensuring that “leaving no one behind” and “reaching the furthest behind first” principles were integrated in programmes design for promoting equitable growth across Malaysia, although much work is still needed to reach the pocket of population who have not been

⁷² Interview with Implementing Partner, Aug-Sept 2024

⁷³ Economic Planning Unit, Prime Minister’s Department. Twelfth Malaysia Plan, 2021 - 2025: A Prosperous, Inclusive, Sustainable Malaysia. 2021. Available from: <https://rmke12.epu.gov.my/en>;

⁷⁴ Annual Work Plan-2024 - LPPKN

reached yet. As noted in one of the interviews, “UN bodies, including UNFPA, are proactive and collaborative in engaging with relevant ministries. Adaptation to emerging challenges, such as youth issues and aging populations, is ongoing. The need for more focus on rural and disadvantaged youth is noted.” Through UNFPA partnership, “Ministry of Education’s strategies, including the implementation of PEERS, are selectively aligned with international frameworks such as the SDGs and the ICPD PoA. The alignment is carefully managed to balance international recommendations with local cultural and religious contexts. These strategies support Malaysia’s sexuality education goals by ensuring that global best practices are adapted to the local context, albeit selectively.”⁷⁵ The CP was also aligned to achieve universal access to SRH, realize reproductive rights and address GBV challenges, to accelerate progress towards implementation of the ICPD Programme of Action and the 2030 Agenda for Sustainable Development, contributing to achievement of the SDGs.⁷⁶

Finding #4: UNFPA’s engagement with the Government for CEDAW reporting processes, and UPR follow-up through adoption of a step-by-step approach are considered to be a good practice model

11. The CP was adapted to priorities articulated under CEDAW, and the CO provided extensive support to the Government for CEDAW reporting processes, and following up on CEDAW recommendations. The CP is in alignment with CEDAW and it helps Malaysia to achieve its commitment to the convention. “Malaysia assured the CEDAW Committee of its firm commitment to strengthening further the national machinery for gender equality and women’s empowerment, including through multi-stakeholders engagements”⁷⁷. The CO also closely engaged with the Government on the UPR process – it worked with Government with support of OHCHR and the UNCT to advocate for CEDAW recommendations (on SRHR, FGM, GBV) to be integrated into the UPR process. The step-by-step approach adopted to engage with different stakeholders, including the national advocacy mechanism which was adopted for rolling out the UPR recommendations, was considered to be a good practice model that has been shared with other countries in the region. A testament to this effect was provided by UNFPA’s Asia-Pacific Regional Office (APRO) in Bangkok.⁷⁸ Additionally, in alignment with Malaysia’s commitment to CEDAW, the UNFPA CO needs to continue to advocate to prohibit the practice of all forms of Female Genital Mutilation (FGM), given that it has no basis in core Islamic law or any of its partial provisions, but carries significant health risks and compromises the autonomy of girls. This has been one of the recommendations provided by Women’s Aid Organisation (WAO) and the Joint Action Group for Gender Equality (JAG) in the “The Status of Women’s Human Rights: 24 Years of CEDAW in Malaysia”.

Finding #5: The CP is not fully adapted to address the effects of megatrends and more forward-looking perspectives are needed

12. An assessment of the current CPD reflects that its design did not focus on anticipating upcoming trends that may impact UNFPA’s future work in the country. Given the prevailing megatrends of climate change, low fertility, ageing, and others that engulf the global population, and also transcend to impacting Malaysia’s development trajectory, the Government of Malaysia has taken a progressive approach in carving out the country’s development strategies and corresponding five-year plans in tandem with meeting the challenges of these emerging megatrends. UNFPA programming needs to keep in view the emerging trends impacting its mandated areas of work, with more forward-looking perspectives and approaches.

13. In the case of climate change, for example, the CPD notes the impact of climate change as a physical risk to operations. It refers to natural disasters, particularly regular flooding in eastern Malaysia and how that may affect the achievement of results by disrupting services and refocusing Government priorities. The CPD recommends that the mitigation measure for overcoming this risk is to provide technical support to the Government in integrating SRH and GBV response service provision within national contingency plans and other emergency preparedness plans, which remains valid. However, it does not include any mention of climate change as a systems pressure and its impact on other inter-connected segments of the system.⁷⁹

14. The rapid pace of climate change in the next decade will make UNFPA’s three transformative results (3TRs): ending unmet need for family planning, ending preventable maternal mortality, and ending GBV and

⁷⁵ Interview with stakeholder as part of Key Informant Interviews, Aug-Sep 2024

⁷⁶ UNFPA Malaysia. Country Programme Action Plan between The Government of Malaysia and UNFPA, 2019 - 2020

⁷⁷ Press release: Malaysia successfully presented reports on the Convention on the Elimination of all forms of Discrimination Against Women (CEDAW) 2024. <https://www.kpwkm.gov.my/kpwkm/>

⁷⁸ Interview with stakeholder from APRO as part of Key Informant Interviews, Aug-Sep 2024

⁷⁹ UNFPA Malaysia CPD 2022-2025

harmful practices, challenging to achieve. It will have a significant impact on SRHR. The risk of negative maternal mortality outcomes will be further harmed by increase in poverty and food insecurity driven by climate-related loss of livelihoods⁸⁰, as has been experienced in the increasingly severe cases of flooding hitting the country, leading to losses of lives and the destruction of homes, livelihoods and infrastructure. Hence, climate change impact on women and young girls needs to be understood from a gender perspective, while identifying which climate events harm this segment of the population the most and adaptation mechanisms needed. This was corroborated in discussion with senior members of the UNCT as well, who indicated that this could also be a potential area of collaboration between UN entities⁸¹.

15. The country is undergoing a significant demographic transition, having consequences for labour force participation and the economy, as well as creating pressures on the healthcare system and overall productivity. 2040 will be an important inflection point for Malaysia, by when 14.5 per cent of Malaysians will be over 65-years old.⁸² Climate change and climate-induced disasters exacerbate demographic shifts by impacting resource availability, including food and water security, and by increasing the frequency of extreme weather events. These changes impose further economic and social stress, particularly on vulnerable populations⁸³. The interplay between climate change and demographic dynamics in the context of an ageing population is therefore significant for Malaysia, and the well-being of the elderly and their families is a crucial focus area in understanding this interplay. This focus is essential because Malaysia's ageing population will represent a significant segment of society that is particularly vulnerable to climate impacts. Extreme weather events, heatwaves, and the spread of climate-sensitive diseases pose direct threats to their health and well-being. This has led UNFPA globally to focus its advocacy on ageing and investing in inter-generational cohesion being strengthened, and has been actively engaged in advocacy initiatives among UN agencies and external stakeholders related to Ageing and Population dynamics, and a strategy paper on ageing has been developed to position UNFPA work on climate change and its effects on ageing in Malaysia⁸⁴. UNFPA Malaysia has not yet actively pursued this agenda locally. As informed by the concerned Ministry⁸⁵, the Government of Malaysia recently launched a draft blueprint on ageing for soliciting feedback from stakeholders, which provides an avenue for considering a UN-wide collective approach, which UNFPA could lead.

16. Development challenges arising due to influx of migrant populations, resulting from displacement due to climatic effects and political developments in neighbouring countries, also need to be kept in perspective while devising response strategies.

17. All the above factors and the priorities of the 13th Malaysia Plan (under development) which aims to address global and local challenges for the country's economic future, makes reference to four key megatrends that will shape the future: (i) shifts in economic blocs; (ii) technological and digital evolution; (iii) demographic and quality of life shifts; (iv) environmental and climate crisis, warrant attention for future UNFPA programming, while boosting strategic, rights-based responses and adaptation mechanisms as relevant to its mandate.

4.2 Answer to evaluation question 2

EQ2R: To what extent has the CO been able to **respond to changes in, or to shifts caused by crisis or major political changes?**

Summary of findings: The CP has responded well to changes in national needs and priorities and these were duly reflected in UNFPA's SRH, AY, PD and GEWE programming, specifically with regards to the needs of older people, women and youth, as well as vulnerable populations. Post COVID-19 pandemic, the CO responded to change in country needs and priorities, including the needs of vulnerable and marginalised populations (including refugees, migrants). The CO responded to change in country needs and priorities due to the changes of Government as well.

18. Changes in national needs were in terms of post-COVID-19 support as well as change in Government, resulting in changes in certain policies related to Gender, GBV and SRHR. The CO has responded to changes

⁸⁰ <https://esaro.unfpa.org/en/topics/climate-change-0>

⁸¹ Interviews with key informants from UNRC Office and UNDP, Aug-Sep 2024

⁸² <https://www.undp.org/malaysia/publications/transitioning-futures-anticipating-change-socio-economic-futures-malysias-climate-demographic-transition>

⁸³ Envisioning Malaysia 2050: A Foresight narrative

⁸⁴ 2022 UNFPA Annual Report Malaysia

⁸⁵ Information gathered from Key Informant Interviews, Aug-Sep 2024

in national needs and priorities caused by the COVID-19 pandemic and the changes of government, especially in the areas of gender, GBV and ASRH, by reallocating resources for new programmes or joint programmes with other UN agencies for vulnerable populations who were worse affected by COVID-19, providing support to implementing partners to re-programme such as adapted their research design or mode of delivery as well as engaging new partners such as CSOs and religious leaders.

19. As far as SRHR is concerned and in improving access to quality SRH for adolescents and youth, particularly the furthest behind including in humanitarian settings, this was delivered by: (a) offering technical assistance to carry out health and demographic studies, including economic variables, in order to create an economic case for investment in SRH policies and services; and (b) utilizing a thorough comprehensive analytical approach linking health, education, gender, and violence prevention as facilitators for the development of human capital. This included evidence based advocacy and shared understanding for the development of a SRHR plan via improving the SRH education policy and plan, and the family planning policy; with particular attention to bridging the gaps of the furthest behind population groups; and (c) engaging in policy dialogue to support CSE in formal and informal settings. This included providing technical assistance to the design of an out-of-school programme as well as engaging social actors including the private sector, in a broader discussion to reduce the resistance to CSE for adolescents and youth. It also includes the support to the Advisory Coordination Committee on Reproductive Health, which coordinates the inputs from the various Ministries, as well as the development of a strategy to guide inputs into the policy dialogue⁸⁶.

20. Much effort has been put in to deal with domestic violence that surged during the pandemic and this was worsened by disruption to the GBV response systems during the pandemic. In addressing Malaysia's response to GBV, the CP funded a project run by the Women's Aid Organization (WAO) to raise awareness and develop the capacity of various communities and government stakeholders in protection pathways to respond to GBV. In addition, in the situational analysis of "Empowering the Women and Youth in Sabah to achieve their full Economic and Social Potentials," a portion of the surveys also looked at how the COVID-19 pandemic affected study participants. Given that Sabah is home to the majority of undocumented people and is one of Malaysia's most impoverished and unequal states, the survey's findings about the pandemic's effects had given the government another justification to allocate resources based on urgency⁸⁷.

21. UNFPA & UNICEF collaborated on the Families on the Edge (FoE, 2020) study to explore the impact of the COVID-19 crisis on women and children in low-income urban families in Malaysia, followed by the post-pandemic Living on the Edge (LoE, 2023) study, providing support for evidence-informed policy-making & public dialogue.

Finding #6: UNFPA aptly adapted its programme in order to remain relevant during a major national and global health crisis

22. From 2020 onwards, after the onset of the COVID-19 pandemic, UNFPA aptly adapted its programme in order to remain relevant during a major national and global health crisis that included severe mobility restrictions of the entire population during peak periods of spread and related Movement Control Order (lockdown). It was noted by a key informant that *"UNFPA's persistence in continuing their work during times of crisis, such as the COVID-19 pandemic and flooding, was essential for ensuring that the needs of adolescents, which became more nuanced during these crises, were addressed. The flexibility and understanding UNFPA showed during these challenging times ensured that research continued, minimizing the risks of delays or disruptions."*

23. UNFPA coordinated its efforts as the health system's main focus shifted to addressing the pandemic's effects and containing its spread. It did this by offering data and evidence needed to inform the national response through its CO and by implementing a number of interventions targeted at the pandemic conditions in the most affected areas, such as collaboration with the Ministry of Health, Ministry of Women, Family and Community Development, and other NGOs on lifesaving SRHR and GBV services. In order to comprehend and address the unique challenges that young people encountered during COVID, UNFPA organized and involved them. As per a key informant⁸⁸: *"During COVID, we were very grateful for UNFPA's proactive engagement, and*

⁸⁶ UNFPA Malaysia AWP 2024

⁸⁷ Tey Nai Peng, Lai Siow Li, Jennifer Chan Kim Lian (2023). Report: Demographic and Socioeconomic Changes in Sabah. Sabah: Universiti Malaysia Sabah Press.)

⁸⁸ Interviews with stakeholders as part of Key Informant Interviews, Aug-Sep 2024

procurement. At least 10,000 dignity kits were distributed to marginalized communities, including refugees and asylum seekers across Malaysia.” Moreover, the CO adapted the implementation of key areas of its development programming to the requirements of the pandemic, including working from home arrangements for its staff.

24. This adaptation of the programme, and flexible working arrangements continued in the post-pandemic period during the current CPD cycle. For example, in the post-COVID context, resources were reallocated for new programmes or joint programmes with other UN agencies for vulnerable populations, particularly women and children in low-income urban families who were worse affected by COVID-19⁸⁹, providing support to implementing partners (IPs) to re-programme interventions. This included adapting their research design, or modifying the mode of delivery (for example, introduction of online programmes), as well as engaging new partners and religious leaders.

25. Further, there was also support to handle the surge in domestic violence due to aggression caused by the confinement at home, via WAO by increasing awareness and building capacities of diverse communities and Government stakeholders in protection pathways to respond to GBV⁹⁰. Apart from that, UNFPA together with UNICEF with their Families on the Edge (2020) study explored the impact of the COVID-19 crisis on women and children in low-income urban families in Malaysia, followed by the post-pandemic Living on the Edge (2023) study, which provided an avenue for support for evidence-informed policy-making and public dialogue.

Finding #7: UNFPA has remained involved through various means, in supporting the policies and priorities of the new Government

26. As for the changes in Government policies and priorities, the Ministry of Women, Family and Community Development (MWFCDD), which is a close partner of UNFPA, is the key player driving forward many of the policies that are relevant to UNFPA’s mandate. Collaboration with Ministries is highlighted in this quote⁹¹: “*UN bodies, including UNFPA, are proactive and collaborative in engaging with relevant ministries. Adaptation to emerging challenges, such as youth issues and aging populations, is ongoing. The need for more focus on rural and disadvantaged youth is noted.*” Specifically, the Ministry of Education⁹² reported: “*UNFPA’s support has been instrumental in MOE’s approach on CSE in response to changes in national policies, demographic trends, and emerging challenges, but the effectiveness of this support is often hampered by bureaucratic hurdles. For example, the ongoing revision of the curriculum to include more time for PEERS in 2027 demonstrates MOE’s commitment to adapting its strategies to meet the evolving needs of the education system.*” For example, the MOE has aligned its strategies with international frameworks like the SDGs and the ICPD PoA. However, adaptation is selective, balancing international recommendations with local cultural and religious considerations.

27. Pertaining to advocacy with the Vatican on CSE, and technical analysis of the Vatican SRHE module, the Vatican agreed to revise the module to align with UNITGSE and UNFPA agreed to support the revision⁹³

28. As far as the MWFCDD is concerned, integrating SRHR into national policies and development frameworks including the three transformative results, into universal health coverage benefit packages, equitable financing schemes, accountability mechanisms, and policies and plans related to primary health care, as the basis for actions to accelerate progress towards good health and the well-being of people. The output also aims to integrate the three transformative results across multisectoral policies and laws, including policies related to resilience, preparedness and disaster risk reduction (UNFPA SP), and this can be seen in the coming 13MP.

29. UNFPA has been either directly or indirectly involved, through advocacy platforms, provision of technical support and conduct of background studies, in supporting the policies of the new Government that came into power in November 2022. Some examples include:

(a) Raising the minimum age of marriage from 16 to 18 (in the state of Kedah and Selangor) which came up as part of the CEDAW review process;

(b) Introduction of the Anti-Sexual Harassment Act 2022, which was led by CSOs, in which UNFPA provided technical inputs while reviewing the draft of the Act (the draft was also tabled at the UN Gender Results Group

⁸⁹ Living on the Edge Study, 2023

⁹⁰ Living on the Edge Study, 2023; Families on the Edge Report, 2020

⁹¹ Interview with Ministry official as part of Key Informant Interviews, Aug-Sep 2024

⁹² Interview with Ministry official as part of Key Informant Interviews, Aug-Sep 2024

⁹³ UNFPA Malaysia Annual Report 2023

Forum to solicit UN-wide input); and

(c) Gender-responsive Budgeting, that was advocated by UNFPA using the platform of the Malaysia Women and Girls Forum, while promoting the need to invest in women through budgetary allocations.

4.3 Answer to evaluation question 3

EQ3R: To what extent should UNFPA reconceptualize the Theory of Change for the next CP given the state of progress towards the SDGs and the three transformative results (3TRs) in the country and to ensure continued relevance?

Summary of findings: The CPE findings reflect that the CP's Theory of Change (TOC) is seen to be largely valid in terms of identifying the needs and interventions needed to address them, prevailing at the time of CPD development. However, given the fact that the country's needs and priorities are evolving, the same TOC if applied to new programming, may not be fully responsive to the evolving needs, and the pathways of change to address these needs will need to be thought through with a different lens. The next CP would benefit from being strategically developed more holistically for the full programme with a more integrated approach.

Finding #8: The current CP's TOC is largely valid in terms of identifying the needs and interventions needed to address them, prevailing at the time when the CPD was developed

30. CP1's TOC is centred around the four themes of UNFPA's mandate. i.e. sexual and reproductive health and rights (SRHR); adolescents and youth (AY); population and development (PD); and gender equality and women's empowerment (GEWE). Each thematic area is covered under an output, each being dealt with under a separate TOC, with areas of focus indicated to address identified needs, cascading up to the set of outputs and outcomes. CP1's TOC and the intervention logic behind it (as discussed earlier in chapters 1) was found to identify needs behind meeting CP objectives with focus on supporting national efforts in achieving universal access to SRHR, and to promote gender equality and rights. Through provision of advocacy, policy support, knowledge management and capacity development, the programme aims to enable women, adolescents and young people, particularly those most vulnerable, to develop their full potential, taking advantage of the demographic dividend and contributing to achievement of two UNFPA transformative results which seek to accelerate the reduction of unmet needs for Family Planning (FP) and address GBV and harmful practices⁹⁴.

31. While the conceptual framework of CP1 was assessed by the ET as being logical, a shortcoming of the conceptualization of the existing TOC was that the root causes of challenges that exist, and the pathways of change for addressing them, were not captured in the visual representation of the TOC or in the write-up. Hence it was challenging to assess by the ET whether these aspects were adequately identified and addressed while designing the TOC. Also, it was found that there was lack of regular (eg. annual) monitoring of the programmes/activities linking to the TOC, and this prevents the validation of the TOC, learning further along the programme implementation period on what works and what does not in the various contexts and output/thematic areas⁹⁵.

Finding #9: There is a need for the CO to reconceptualize the TOC for the next CP cycle 2026-2029, giving due consideration to the country's evolving needs and priorities

32. Given the fact that the country's needs and priorities are evolving, the same TOC if applied to new programming, may not be fully responsive to the evolving needs, and the pathways of change to address these needs will need to be thought through with a broadened lens. The impact of emerging megatrends of ageing, low fertility and climate change will also need to be kept in perspective. There is therefore a need for the CO to reconceptualize the TOC for the next CP cycle 2026-2029, giving due consideration to the country's evolving needs, centred around the following:

❖ The progress of the country towards achieving the SDGs:

Malaysia is lagging behind in SDG goals/indicators on ratio of female-male labour force participation, seats held by women in Parliament and other political leadership positions, and on demand for family planning satisfied by modern methods⁹⁶;

⁹⁴ UNFPA Strategic Plan 2022-2025; UNFPA CPD 2022-2025 TOC; interviews with Key Informants, Aug-Sep 2024

⁹⁵ Review of UNFPA Monitoring Reports

⁹⁶ United Nations. (2023). *The Sustainable Development Goals Report 2023: Special Edition*. United Nations Publications.

❖ UNFPA's 3 transformative results⁹⁷ - 3TRs:

(i) Unmet needs for family planning; (ii) Reducing maternal mortality; (iii) Addressing GBV

The CO is supporting (i) and (iii) under the current Country Programme. While needs for supporting all three TRs remain highly relevant in Malaysia's context, the conceptualization for the next CP will need to be broadened with more holistic, integrated approaches for taking the TR agenda forward, given the convergence of ageing, low fertility, and climate change presenting complex challenges for Malaysia.

❖ The focus of the upcoming 13th Malaysia Plan⁹⁸:

At the heart of the upcoming 13MP are four key megatrends that will shape the future of the country, including:

- (a) shifts in economic blocs;
- (b) technological and digital evolution;
- (c) demographic and quality of life shifts; and
- (d) environmental and climate crisis.

While keeping sustainability and inclusivity central to the 13MP's agenda, a strategic focus of the upcoming plan is on leveraging Malaysia's position as a global hub for Islamic finance while pushing for digital innovation.

❖ The strategic priorities of the new UN Sustainable Development Cooperation Framework (UNSDCF) for Malaysia 2026-2030 :

Based on the Common Country Assessment⁹⁹ (CCA) undertaken by the UN system in Malaysia, the next UNSDCF for Malaysia is under development, and the outcomes that UNFPA's next CP's outputs will be contributing to, is being determined. The strategic priorities and set of outcomes of the next UNSDCF, will form the outcomes of the next UNFPA CPD verbatim, and the UNFPA programme will be centred around these outcomes under a set of outputs that will contribute to achieving the UNSDCF outcomes. At the time of finalizing this report, the four emerging strategic priorities of the UNSDCF were established as follows: (i) Inclusive Social Development and Well-being; (ii) Economic Transformation for Inclusive and Sustainable Prosperity; (iii) Environment, Climate and Biodiversity; and (iv) Governance, Rights and Social Cohesion¹⁰⁰.

33. In addition, strategies to address prevailing inequalities in gender dynamics, given the country's socio-cultural and religious norms need more focus, also within the context of targeting those who have been left behind in the country's development continuum. The new CP's TOC will also need to be conceptualized around the emerging megatrend of ageing and Malaysia's demographic transition to an ageing society, with associated changes in population dynamics significantly impacting the economic and social systems due to increased dependency ratios and higher demands on healthcare and social welfare. With climate-induced disasters imposing economic and social stress, particularly on vulnerable populations, the interplay between climate change as a whole and demographic dynamics is significant for Malaysia, because the country's ageing population will represent a significant segment of society that is particularly vulnerable to climate impacts, with consequences for the well-being of the elderly and their families. This warrants advocacy and support for development of integrative policies that address both demographic and climate adaptation needs¹⁰¹ such that ageing populations are protected from climate impacts, with resilience and adaptive capacity having been built. This was seen to be a gap area at present, needing attention when the TOC for the new programme will be conceptualized.

Finding #10: To overcome gaps identified, the TOC for the next CP would benefit from being strategically developed more holistically for the full programme with a more integrated approach

34. Given the gaps in the current TOC as identified above, the following was assessed by the ET, based on the indicators posed under the assumption of this EQ: (a) The upcoming megatrends have not been kept in

⁹⁷ UNFPA Strategic Plan 2022-2025

⁹⁸ Loheswar, R. (2024, September 5). *Understanding RMK-13: How the 13th Malaysia Plan aims to address global, local challenges for country's economic future*. Malay Mail. Retrieved from https://www.malaymail.com/news/malaysia/2024/09/05/understanding-rmk-13-how-the-13th-malaysia-plan-aims-to-address-global-local-challenges-for-countrys-economic-future/149382#google_vignette

⁹⁹ UN Common Country Assessment for Malaysia – draft – UN Country Team in Malaysia, January 2024

¹⁰⁰ UNSDCF 2026-2030 Strategic Results Framework

¹⁰¹ UNDP Report on Climate and Demographic Changes in Malaysia, 2024

perspective as warranted, and therefore need more focus while conceptualizing the new TOC. (b) Having learnt useful lessons from COVID-19 that led to an increase in poverty and highlighted the persistent problem of inequality in Malaysia (across genders, across urban/rural, across households)¹⁰², systemic approaches promoting resilience and adaptive capacity have been a gap area that need to be integrated in the next CP's design to withstand future crises. (c) The principles of Leaving No-one Behind and reaching those farthest behind needs to be at the heart of TOC development. (d) Removal of barriers to gender equality that have remained persistent, require targeted support through adoption of transformative approaches, with gender remaining a central theme for TOC development. All of this will have an impact for UNFPA programming. Strategic responses are vital for addressing the extensive and inter-connected effects of ageing, low fertility, and climate change. It will be useful to undertake an exercise of identifying key drivers of change as the basis for scenario building. Therefore the TOC for the next CP would benefit from being strategically developed more holistically for the full programme with a more integrated approach, while remaining cognizant of the rapid changes in population dynamics that will shape Malaysia's development trajectory.

Evaluation Criteria: COHERENCE

4.4 Answer to evaluation question 4

EQ4C: To what extent has UNFPA leveraged strategic partnerships with national, local and grassroots organizations (e.g. women's rights activists, youth-led groups, advocacy groups of persons with disabilities, religious groups, parliamentarians, academia and think tanks, private sector) to address its mandate to improve the sexual and reproductive health and rights and gender inequalities of vulnerable and marginalized populations?

Summary of findings: CPE findings reflect that the UNFPA CO has effectively managed to leverage and maintain sustained strategic partnerships with ministries, civil society organisations, academia, UN entities, networks, and state governments/public entities. The CO's success in mobilizing domestic resources is a testament to its trusted partnership with the Government. UN entities value UNFPA as an important partner in Malaysia, that harnesses windows of opportunities to advance its mandate of advocating for inclusion of vulnerable populations such as women, youth, girls, elderly etc. in national public policy agenda, while also acting as a convenor, enabling the UN entities to come together jointly around issues that are critical to UNFPA's as well as the UN System's mandate. UNFPA's connections with select civil society and grassroots organizations, make it a trusted partner in gender-related and SRHR-related work, facilitating UNFPA's reach to vulnerable and marginalized populations. However, further engagement is needed to make its presence realised by grassroot entities. IPs consider UNFPA to be a credible and reliable partner that uses its funds effectively, and view that for ownership of their interventions to be strengthened, the size of the UNFPA programme should be enlarged with a larger pool of human and financial resources. A more coherent approach and strategic thinking can enhance achievement of outcomes.

Finding #11: UNFPA is considered as a credible and reliable partner by most of the national stakeholders and United Nations entities, while there is scope to enhance collaboration and synergies

35. Most of the key informants¹⁰³ endorsed UNFPA as a strategic and influential partner due to its alignment with Government priorities and effective delivery in its focus areas. The CPE findings reflect that UNFPA has effectively managed to leverage and maintain sustained strategic partnerships, the key partners being ministries, civil society organisations, academia, networks, and state governments/public entities.

36. The ability of UNFPA to mobilize significant resources from the Government is a testament to its strong partnership-building capabilities and the trust that the Government places on it. It has been acknowledged by Government entities during the evaluation team's engagement that *"UNFPA is a valuable partner, focusing on population dynamics, sexual and reproductive health, and gender equality the partnership has been strong, with regular engagement there is a strong focus on achieving sustainable development goals, and the Ministry values UNFPA's work and knowledge in specific fields"*¹⁰⁴. The close partnership established with ministries that are key to UNFPA's mandate, greatly contributes to Government's ownership of UNFPA interventions and facilitates these entities to represent the country at international fora, and in translating

¹⁰² Joint UNICEF-UNFPA study on the impacts of the COVID-19 pandemic

¹⁰³ Views gathered from IPs, other national partners, and UN entities as part of Key Informant Interviews, Aug-Sep 2024

¹⁰⁴ Interview with Government entity as part of Key Informant Interviews, Aug-Sep 2024

commitments made at these fora into concrete actions on the ground. Acknowledgement of this as received from a key informant from a partner ministry: *"UNFPA's role in supporting the Ministry's participation in international forums like CEDAW has fostered strong coordination mechanisms between national and international stakeholders. This ensures that national partners take ownership of these commitments and translate them into actions on the ground."*

37. A reflection of this solid partnership is the fact that the Government has enhanced its financial contribution to UNFPA for the current programme cycle, amount to a total of USD 2.4 million (USD 600,000 per annum as compared to USD 200,000 per annum for the previous cycle)¹⁰⁵. The co-financing arrangement between UNFPA and the Government over the last four programme cycles, underscores the credibility of UNFPA as Government's trusted partner. The agency's strong relationships with national partners, especially with the Ministry of Economy, allow it to secure domestic funding and establish mechanisms for ongoing support, which reflect a commitment to sustainability given that the cost-sharing enhances prospects of national ownership.

38. UN entities consider UNFPA to be a strategic partner in terms of complementarity of mandates, complementarity of capacities and know-how; and value it as an important partner in Malaysia. It has a mandate that is particularly relevant to help navigate sensitive issues, which its partners capitalize upon. UNFPA's solid partnership with select Government entities in sensitive areas of work, provides other UN entities an entry point and enables them to pursue activities around areas of common concern (eg. the partnership with MWFCDD). It was highlighted¹⁰⁶ that UNFPA has a strong focus on reproductive health issues which affect a lot of the vulnerable households that other UN agencies are also trying to reach. Similarly, UNFPA has a strong focus on women's empowerment and gender equality that aligns with other UN agencies' areas of work, as was reflected in discussions with UNDP for example, as well as strategic priorities articulated in the UNSDCF.

39. IPs consider UNFPA to be a credible and reliable partner that uses its funds effectively. It harnesses windows of opportunities to advance its mandate of advocating for inclusion of vulnerable populations such as women, youth, girls, elderly etc. in national public policy agenda by using topics that are more relevant to the Government, as entry points. However, an issue raised by most IPs was the size of the UNFPA programme in Malaysia. They view that for UNFPA to be considered a "strategic" partner, the pool of resources they bring to the programme should be enlarged, along with relevant technical expertise¹⁰⁷.

40. UNFPA's connections with select civil society and grassroots organizations, make it a trusted partner in gender-related and SRHR-related work. These partnerships have facilitated UNFPA's reach to vulnerable and marginalized populations, including those in Sabah and Sarawak regions. However, there remains a gap in engaging directly with various other CSOs and working with them in these states which misses the opportunity for UNFPA to make its presence realised by grassroot entities. Also, there are some CSOs, including in Peninsular Malaysia, that work in the same mandated areas as UNFPA, but are not aware of their current work. Key informants¹⁰⁸ commented that *"UNFPA could be more involved in coordinating and supporting NGOs working on SRHR in Sabah, especially to avoid duplication of efforts"* or *"the lack of coordination amongst NGOs is a challenge, and UNFPA could provide more structured support to ensure better collaboration between these organizations"* or *"UNFPA could better leverage its position by working more closely with NGOs that are already embedded in the communities"*. An important point made by a key informant was that *"UNFPA should push for more active engagement with civil society and academia to ensure policies are not only developed but effectively implemented."* In the same context, it was felt by stakeholders that UNFPA could play a stronger role in bringing local stakeholders together. They have the legitimacy to convene Government and NGOs, which could foster a sense of ownership for the results of their initiatives.

41. A partner entity reflected that in their experience, due to provision of insufficient technical resources from UNFPA's side, the entity was not able to leverage its full potential from the partnership with UNFPA. Also, that UNFPA's partnerships need more coherence and strategic thinking to achieve better outcomes. Another entity commented that the alignment between UNFPA's objectives and national policies is often limited, with areas where collaboration and coordination could be improved, particularly in capacity building¹⁰⁹.

¹⁰⁵ Country Programme Document UNFPA Malaysia 2022-2025

¹⁰⁶ Interview with UN entities as part of Key Informant Interviews, Aug-Sep 2024

¹⁰⁷ Interviews with Key Informants, Aug-Sep 2024

¹⁰⁸ Interviews with Key Informants, Aug-Sep 2024

¹⁰⁹ Interviews with Key Informant, Aug-Sep 2024

42. In terms of UNFPA having taken advantage of existing opportunities for synergies and complementarities amongst its own programme components and those of its partners, it was acknowledged by SUHAKAM that UNFPA has successfully created synergies between its programmes and SUHAKAM's mandate. For example, their joint efforts on advancing CEDAW commitments and engaging with the Government on child marriage were seen by SUHAKAM as having been instrumental in pushing the agenda¹¹⁰. However, when it comes to establishing synergies with the work of grassroots organizations, UNFPA is seen to falling short: As a key informant from a grassroots organization commented: *"While UNFPA conducts meetings and strategic planning, it has not leveraged synergies with grassroots organizations effectively. We haven't been informed about funding opportunities or potential collaborations, which could have supported our work."*¹¹¹

Finding #12: UNFPA is expanding its partnership base by forging new partnerships in addition to strengthening existing ones

43. The Ministry of Economy is the Government's coordinating entity for the UNFPA programme in Malaysia, and is the key interlocutor between UNFPA and other Government entities for the implementation of its programme. The base of UNFPA partners implementing interventions in the areas of its mandate since the start of the current CP in 2022, comprise of the Ministry of Women, Family, and Community Development (through the National Population and Family Development Board/LPPKN), the Malaysian Research Institute on Ageing (MyAgeing), Population Studies Unit (PSU) / Universiti Malaya, the Burnet Institute, and Women's Aid Organisation (WAO). The partnership base is being expanded in 2024 by bringing in new partners to implement interventions in the areas of legal literacy and women's economic empowerment. The selection process for bringing two new NGOs on board as IPs has been completed as of mid-2024¹¹². The Ministry of Education (MOE), the Ministry of Youth and Sports (MYS) and Institute of Strategic and International Studies (ISIS) are other Government entities UNFPA engages with.

44. Engagement with faith-based organizations and religious bodies to advocate SRHR and GEWE issues has been an important undertaking and has worked well. For example, inter-religious dialogues used a harm reduction approach that emphasized how CSE can minimize negative impacts associated with unsafe and unprotected sex such as HIV, unsafe abortion, baby dumping, to get the buy-in from religious leaders¹¹³. The CO informed that the partnership with the state Muftis and other religious leaders has been essential and instrumental in ensuring community buy-in, which has reduced the risks associated with resistance to SRHR and gender-related interventions.

45. Review of documentation and interviews with key informants¹¹⁴ reflect that through strengthening existing partnerships and forging new ones, while liaising closely with the Ministry of Economy as the main interlocutor, UNFPA Malaysia ensures that the key actors are on the same page in their understanding of the issues, are able to approach the work in a complementary manner, and most importantly, the national ownership of UNFPA interventions is established.

Finding #13: UNFPA approaches partnerships as a key strategy for achieving programmatic objectives

46. The long-established solid relationship with Government stakeholders, CSOs and partner UN entities has enabled UNFPA to play a coordinating and convening role for development discussions in Malaysia as a neutral international agency, centered around its unique mandate for dealing with sensitive issues like gender, SRHR, FP, GBV and PD relevant for Malaysia's development context. Sensitive areas such as SRHR and GBV in which UNFPA takes an important role through supporting policy development and programme implementation for the country, are areas that are not actively addressed by the Government, hence it brings in its comparative advantage as a neutral entity. The CO takes pride in the fact that its activities have significantly boosted the technical capacity of national institutions and local entities focusing on women's empowerment, facilitating better policy implementation and advocacy¹¹⁵. UNFPA also has a strong position in supporting the country to address PD issues that are best suited to their needs through evidence-based approaches (for example, a life course approach) as a lead agency in the UN system promoting population programmes.

¹¹⁰ Interview with SUHAKAM as part of Key Informant Interviews, Aug-Sep 2024

¹¹¹ Interviews with NGO representative as part of Key Informant Interviews, Aug-Sep 2024

¹¹² Confirmed through discussion with CO relevant staff

¹¹³ Interview with CO consultant as part of Key Informant Interviews, Aug-Sep 2024

¹¹⁴ Review of AWP; comments from UNFPA staff and IP Reps as part of Key Informant Interviews, Aug-Sep 2024

¹¹⁵ Interview with CO staff as part of Key Informant Interviews, Aug-Sep 2024

47. It is recognized as a neutral entity that brings in global perspectives, upholds international standards and provides a platform for key stakeholders in Malaysia to discuss and adapt solutions to address local issues and needs. An NGO partner¹¹⁶ labelled UNFPA as being an extremely credible partner because they represent an international organization that can affect national policies and assist in capacity building. UNFPA staff's ability to coordinate the implementation of programmes, their technical expertise through outreach to global and regional networks, professional skills, identification of areas for training, research, as well as to form recommendations for advocacy and dialogue with Government, is duly recognized, and has contributed to strengthening the UNFPA-GoM partnership¹¹⁷. With this recognition in place, UNFPA could play a stronger role in bringing local stakeholders together. They have the legitimacy to convene Government and NGOs, which could foster a sense of ownership for the results of their initiatives.

48. Through the partnerships developed and the coordinating and convening role UNFPA is mandated to play, it is assessed that UNFPA approaches partnerships as a key strategy for achieving its programmatic objectives. The partnership with the MWFC, for example, helps make policy inroads in important areas of UNFPA's mandate. As examples: raising the minimum age of marriage from 16 to 18 years (in the state of Kedah and Selangor) came up as part of the CEDAW review process in which UNFPA remained closely engaged with MWFC; gender-responsive budgeting was advocated by UNFPA using its platform of the Malaysia Women and Girls Forum, while promoting the need to invest in women through budgetary allocations. UNFPA's partnership with the Ministry of Economy helps navigate the UNFPA mandate in Malaysia in a sensitive operating environment when it comes to SRHR and gender issues.¹¹⁸

Sexual and Reproductive Health – Partnerships:

49. UNFPA has collaborated with the Malaysian Government to promote and improve SRHR, give young people more options, and improve the collection and application of demographic data for development. Main partners for the SRH outcome area have been the MWFC, esp. the NPFDB, Ministry of Economy, MOE, MYS, Economic Planning Unit under the Prime Minister's Department; and the Department of Statistics Malaysia. Regarding UNFPA's partnership with research institutions¹¹⁹, the entities the ET engaged with, commented that UNFPA's collaboration with local organizations, to name a few, UMS, MyAgeing, PSU (UM), UNU-IIGH, Burnett Institute for example, to conduct research and implement programmes, facilitated the translation of research findings to practice and informed programme design, such as the development of SRH promotional materials or PEKERTI revision. These partnerships could be further leveraged by UNFPA by engaging more deeply in shared research initiatives, and through more regular interactions, there can be more alignment of strategic goals and enhancement of collaborative efforts.

50. UNFPA also engaged in policy advocacy in collaboration with Parliamentarians, youth networks, civil society, and indigenous and migrant groups to incorporate the needs and rights of young people, migrants, and indigenous populations in relation to SRH into plans and policies that are essential to the rights and needs of the marginalized population. While reflecting on the partnership between UNICEF and UNFPA through various projects, one key informant¹²⁰ noted that *"The partnership has been catalytic in avoiding duplication and leveraging each other's expertise, for example, The Families on the Edge report was a collaboration that leveraged the strengths of both agencies."* Having said this, more effort is needed for establishing and strengthening partnerships with NGOs/CSOs, as noted by an NGO key informant *"UNFPA has rarely engaged with the NGO or similar grassroots organizations, which are crucial for advancing SRHR and services"* and further stressed that *"while UNFPA organizes strategic plans and meetings, these often lack real impact and do not translate into meaningful collaboration with local organizations. There was a missed opportunity for UNFPA to support the NGO's ongoing work, such as their workshops and youth advocacy initiatives, which could have benefited from additional funding and collaboration."*

Adolescents and Youth – Partnerships:

51. In partnership with both Government entities and NGOs, effort was made to empower adolescents and

¹¹⁶ Interview with NGO entity as part of Key Informant Interviews, Aug-Sep 2024

¹¹⁷ Interviews with IP Representatives as part of Key Informant Interviews, Aug-Sep 2024

¹¹⁸ Discussions with the Communications Agency (The Big Picture), CO staff and accessing news reports plus records of MWGF meetings

¹¹⁹ Interview with key informant from research institute as part of Key Informant Interviews, Aug-Sep 2024

¹²⁰ Interview with UN entity as part of Key Informant Interviews, Aug-Sep 2024

youths to have access to SRHR, including those with disabilities. Young people needed the skills and capabilities to make informed choices about their SRHR and well-being. UNFPA has continued to advocate for policies that address the needs and rights of young people in relation to SRH, particularly with the MOE. This includes establishing CSE in schools through collaboration with civil society, religious leaders, faith-based organizations, the media, academics, lawmakers, and other UN agencies. CSE forums were also organized for parents and children with disabilities. To cite one key informant¹²¹, *“MOE collaborates with regional and local partners, including NGOs and other government ministries, to enhance the effectiveness of CSE programmes. With UNFPA, most interactions have occurred at higher administrative levels, rather than at the direct level. These partnerships play a crucial role in achieving MOE’s objectives, particularly in areas where additional resources and expertise are required.”* Furthermore, in partnership with MOE, a proposal to develop the PEERS Teacher Module Development and Training was carried out. The ministry showed positive support and is now awaiting management approval. This will then benefit the teachers and students alike.

52. UNFPA engaged with religious entities and faith-based organizations and to get the buy-in or support from religious leaders, inter-religious dialogues have employed a harm reduction strategy that highlighted how CSE may reduce the harmful effects of unsafe and unprotected sex. Furthermore, partnership has been built with CSOs and Trainings for Trainers on CSE have been conducted to reach out to out-of-school youths by NPFDB with UNFPA support.

53. Other ministries, for example MYS, expressed interest in more collaboration with UNFPA on issues related to youth. To quote¹²²: *“the Ministry of Youths and Sports collaborates more with other UN bodies rather than directly with UNFPA. There is interest in future collaboration, especially on SRH issues like HIV among youths. The Ministry partners with LPPKN, which collaborates with UNFPA on some health-related issues.”* Collaborations between UNFPA and MYS have been successful in areas like youth forums, social entrepreneurship, and training programmes. Furthermore, such partnership helped strengthen PEKERTI advocacy and implementation including to conduct TOT for the Ministry of Youth and Sports, National Youth Training Institute, and parents in high risk areas.

Population and Development – Partnerships:

54. The key Government partner for PD is the Department of Statistics Malaysia (DOSM). Academic partners include the Populations Study Unit (PSU) of Universiti Malaya (UM) and the Malaysian Research Institute on Ageing (MyAgeing) of Universiti Putra Malaysia. The key IPs of UNFPA under the PD theme viewed them positively. MyAgeing has been a longstanding partner of UNFPA, and considers the organization to be crucial in the area of population ageing in the country. The IP commended UNFPA’s role as the primary resource for accessing critical datasets whenever needed, and indicated that without UNFPA, their ability to access secondary data, conduct analysis and publish articles would not have been possible. The partnership with PSU-UM and MyAgeing was found to be strategic as these institutions are well positioned in the country to continue to influence the Government and the people on PD and ageing. Both the organization’s mandate, which aligns closely with that of UNFPA is complementary and is crucial to support each other in the work they deliver. Furthermore, UNFPA was reported to have enabled identification of issues faced by various groups of people within the aging population through their partnerships: *“In partnership with UNFPA, PSU addressed various groups in the aging population, considering aspects like race, religion, and ableism. This was evident in collaborative efforts for book publications and local surveys in Sabah and Sarawak, engaging local experts for relevant perspectives (Key-informant).”*

55. UNFPA was also appreciated in their partnership by Government agencies working under the PD theme. One Government agency representative interviewed⁶ acknowledged that UNFPA faces challenges, especially in their limited workforce capacity and ability to cover all key areas within PD. Despite these limitations, UNFPA was reported to have played an important role in facilitating and advising the Government agency on various issues in PD, for example in new emerging issues and statistical indicators of interest to the Government. *“Any new statistics, or new indicators, which are important for interest of the international community as well as for countries (like Malaysia), they (i.e., UNFPA) are ready to facilitate. They also provide advice, raise matters (of importance), facilitating in terms of technical expertise, despite their limitation in strength”.* UNFPA CO staff interviewed attributed their capacity to provide support to the Government in the areas of PD and ageing to their

¹²¹ Interview with Ministry Rep as part of Key Informant Interviews, Aug-Sep 2024

¹²² Interview with Ministry Rep as part of Key Informant Interviews, Aug-Sep 2024

partnership with MyAgeing and PSU-UM. *“They have been a partner (of UNFPA Malaysia) for a very long time because both of them are the only entities that address, one on aging and one on population. There's no other entities addressing those two areas.”*

56. Most of the stakeholders expressed interest and hope for UNFPA to have more technical capacity (in terms of both numbers and expertise) that could provide them with further assistance and support. *“Population dynamics cuts across issues...and that (capacity) is lacking with UNFPA, they can't cover all....if they have a good number of team (members), they can cater (to more issues of interest with regards to PD)”* (Key-informant). Another key-informant stated that *“but I also believe that they have challenges, especially their workforce”, when discussing about the support provided to their organization by UNFPA on PD.* By having a larger team comprised of technical experts in PD, the CO will be in a position to better support the country to meet its needs, enhancing its influence and contribute to greater impact in the area of work. Expanding PD technical capacity will also create opportunities for better strategic collaboration and partnerships with various other CSOs working on PD in the country. The PD technical capacity within UNFPA will help to connect, facilitate and follow-through initiatives that the Malaysian expertise collaboratively build on with available expertise in PD at the UN regional offices, including in the APRO.

Gender Equality and Women's Empowerment - Partnerships:

57. The key Government partner for GEWE is MWFC. NGO partner and IP is WAO. Academic partner and IP for the Islamic Finance initiative is the Islamic University Selangor (UIS). The partnership between UNFPA and UIS charts the way forward for an innovative solution that aims to contribute to the safety, recovery, empowerment and the support academic institutions through Islamic finance can provide for the survivors of domestic violence/GBV. *Islamic finance aligns with Sharia (Islamic law) principles. Two key focus areas identified are, elderly population care, especially as Malaysia is moving towards an aging population. (Another is the) support for domestic violence survivors, focusing on empowering them economically and supporting their families”* (Key-informant). Furthermore, UNFPA's partnership with UIS was perceived as a new area that has the potential for further expansion to support survivors of domestic violence by providing financial support to continue their education. Although the collaboration is still in its early phase, there is a potential for Islamic finance to contribute to addressing the issues of violence in the country. The IP viewed UNFPA as a credible partner, especially in providing seed funding and expert opinions on this topic: *“Yes, I think because it's established organization. So from there, I think credible”* (Key-informant). The IP further expressed interest in expanding their partnership with UNFPA in areas of economic empowerment of women of diverse groups (i.e., religion, and geographical locations), which signals positive experience they had in their work with UNFPA. However, in working with religion-based universities on issues pertaining to gender equality and women's empowerment, it is important for the CO and their partners to be aware of the sensitivities around the usage of the word "Gender." These considerations need to be taken into account for better acceptance and a more effective collaboration.

58. IPs reflected positively on the partnership with UNFPA. One NGO IP¹²³ appreciated the support given by the CO especially when the former was going through organizational constraints: *“We have some constraints in terms of resources, and everything...(and) we feel comfortable to basically reach out to UNFPA and tell them like, okay, this is our situation at the moment in the organization, and they are willing to listen and help us find a solution.”* They also commend the open communication (and flexibility) that they can have with UNFPA, which has allowed them to address challenges such as delays in agreement signing and request for time extensions of their projects. Through working with the IP, UNFPA was able to fund projects that include diverse groups in their programmes, ensuring representation of different races, religions, abilities, and geographical locations. The IP reported to have actively engaged communities beyond Klang Valley and focused on diversity, although this can be challenging due to segregation in certain areas. The NGO informant further reported that: *“So the community that we reach to, we make sure that it's diverse, because sometimes maybe it's difficult, because, in one area like, say, (there can be predominantly only one race/religious groups, for example) Malay or Chinese, or Indian. But we try, you know....”* (Key-informant).

59. The funding given to IPs enables them to collaborate with local NGOs as community mobilizers, which was found to be effective in reaching targeted participants and ensuring sensitivity to local contexts. These partnerships play an essential role in customizing the IPs' programmes to meet specific community needs, and

¹²³ Interviews with Key Informants, Aug-Sep 2024

the dedicated budget for these local partners shows IPs' commitment to valuing their contributions. Interviews with the IP representatives indicated that some of them are engaged with academic institutions directly or indirectly in various capacities including as part of other projects they work on. Hence, their engagements, which are beyond the purview of UNFPA's project, can be leveraged upon to further the mandate of UNFPA.

Evaluation Criteria: EFFECTIVENESS

4.5 Answer to evaluation question 5

EQ5: To what extent have interventions supported by UNFPA **delivered intended results contributing towards achievement of country programme outcomes?** In particular: (i) increased access to and use of **integrated SRH services**, especially for the most vulnerable groups, such as women and girls, young people, older persons, PWDs; (ii) **empowerment of adolescents and youth** to access SRH services and exercise their sexual and reproductive rights; (iii) increased **use of population data** in the development of evidence-based national development plans, policies and programmes; and (iv) advancement of **gender equality** and the empowerment of all women and girls? What have been the **enabling and inhibiting factors** in the implementation of these interventions and the UNFPA Strategic Plan's accelerators, and how can the CP be further strengthened to accelerate progress on 3TRs and ICPD PoA?

Summary of findings: UNFPA provided technical support to strengthen the technical capacity of the health system to provide rights-based integrated SRHR services including increased demand for FP, and strengthened response to GBV survivors, with a focus on pregnant women, young people and key populations, including in Sabah and Sarawak. National capacities to improve access to quality SRHR were enhanced to an extent, especially in generating research-based evidence for policy-making, engagement with faith-based organizations and CSOs to advocate for CSE for out-of-school youths. However, the uptake of evidence-based research translation to policy and programme development remained slow. More efforts are required to advocate for CSE for all, in particular, institutionalization of CSE within the school system and mainstreaming in the national curriculum. Consistent support to academia on PD and Ageing enabled them to engage and influence policy-makers. Challenges remain with regard to accessibility of population data, and its use to inform policies and programmes. UNFPA has effectively played its role as an intermediary between research entities and the Government in sensitive areas of work. More efforts are needed for increasing awareness and evidence-based advocacy, and for enhancing UNFPA's visibility through strategic outreach.

60. As a measure of effectiveness of achievement of programme results under the four CP outputs, an assessment of progress towards achievement of the targets set under the CPD output indicators was made. The assessment reflected that progress for the CP period of implementation of January 2022 to June 2024 has been slow. While some level and some form of progress has been made on most of the indicators, in general terms, bulk of the activities have only taken off recently, with a number of them planned during Q3, Q4 of 2024 and for 2025, which is the final year of implementation of the current CP cycle. The main reason for the slow progress, as also indicated elsewhere in this report, is the late signing of the CPAP and corresponding AWP, resulting in Government funding becoming available only towards the latter part of 2023¹²⁴.

61. In consultation with the CO, the ET's assessment of progress against each CPD outcome and output indicator is reflected in Table 4.1 below.

¹²⁴ UNFPA Annual Reports, CPAP, Interviews with key-informants, Aug-Sep 2024

Table 4.1: Progress towards programme results under indicators for UNSDCF/CPD outcomes and CPD outputs

UNSDCF / CPD Outcome	Indicators	Baseline	Target 2025	Progress 30 June 2024	Remarks	CPD Output	Indicators	Baseline 2022	Target 2025	Progress 30 June 2024	Remarks
By 2025, poor and vulnerable groups living in Malaysia, benefit from more equity-focused and high-quality social services as well as a social protection system that ensures all have an adequate standard of living.	Proportion of women of reproductive age (15-49 years) who have their need for family planning satisfied with modern methods	34.3% (2014)	36	Data not available at the time of this evaluation; The Sixth Malaysia Population and Family Survey (MPFS-6) data collection is ongoing to provide data on modern contraceptive prevalence rate. The data will be available in 2025.	The Sixth Malaysia Population and Family Survey, a population representative survey, was launched in 2024. The survey will collect data on modern contraceptive prevalence rate among married women.	Output 1: Access to information and services for sexual and reproductive health and reproductive rights, especially for the marginalized and those furthest behind, including people with disabilities, is prioritized in health policies.	Indicator 1.1: Comprehensive national sexual and reproductive health plan includes health services and targets for all developed and implemented	No	Yes	No	Ongoing activities include developing evidence based advocacy materials, a study on unmet need for family planning, family planning advocacy forums, SRH advocacy brief. These activities will inform the development of a SRH plan in consultation with MOH, WHO, UNICEF, and regional experts.
							Indicator 1.2: Inclusion of long-acting reversible contraceptives as an essential sexual and reproductive health service into primary health care in Sabah and Sarawak	No	Yes	No	University Malaysia Sabah (UMS) in collaboration with University of Malaya (UM) and UNFPA published a report on Demographic and Socio-economic Changes in Sabah, launched by UNFPA in 2023, providing vital empirical insights into demographic challenges, opportunities and perspectives to be considered for overcoming inequality gaps and ensuring that no one is left behind. Actionable recommendations were made on declining fertility rates, access to FP, SRHR, CSE and overcoming economic barriers for increasing female labour force participation rate in Sabah. This report, along with other situational analyses of Sabah, will help UNFPA develop and design interventions in Sabah as well as in Sarawak, Malaysia’s third poorest state.
						Output 2: Strengthened national and subnational capacity to design,	Indicator 2.1: Number of schools using technology and innovation to teach CSE	0	200	0	LPPKN will integrate the use of digital platform in the training for 21 TVET across states in Malaysia, starting Q2 2025. LPPKN is currently developing the digital contents.

UNSDCF / CPD Outcome	Indicators	Baseline	Target 2025	Progress 30 June 2024	Remarks	CPD Output	Indicators	Baseline 2022	Target 2025	Progress 30 June 2024	Remarks
						implement and monitor policies and programmes, including comprehensive sexuality education programmes that promote adolescent sexual and reproductive health and reproductive rights	Indicator 2.2: Number of states using an online CSE platform accessible for young people	0	7	0	LPPKN will integrate the use of digital platform in the CSE training for 21 TVET across states in Malaysia, starting Q2 2025. LPPKN is currently developing the digital contents.
							Indicator 2.3: No. of faith-based organizations supportive of CSE being taught in government and Sunday schools	21	25	25	Modules proposed to the Vatican have been accepted and approved, currently discussing methods of implementation. There was also positive support from religious leaders from several countries who attended the dialogues. 6 FBOs have been consulted / advised for the implementation of CSE modules. Of these, 4 were achieved in 2024, and an additional 2 will be in 2025.
By 2025, poor and vulnerable groups living in Malaysia, benefit from more equity-focused and high-quality social services as well as a social protection system that ensures all have an adequate standard of living. By 2025, Malaysia is making meaningful progress towards	Proportion of population covered by social protection floors/systems, by sex, distinguishing children, unemployed persons, older persons, persons with disabilities	To be developed	30%	While the Government has adopted large-scale income support measures, there are no universal or legal social protection provisions for children, disabled people, or older adults.	Families / Living on the Edge findings has been published to inform the need of social protection for female-headed households and disability-headed households, in collaboration with UNICEF	Output 3: Strengthened policy environment to address population ageing and its linkage to gender equality, through life-cycle and rights-based approaches.	Indicator 3.1: Existence of an inter-institutional body to coordinate the generation, analysis and use of population data	No	Yes	No	Organised the National Conference on Ageing 2024 and coordinated with various partners. Conduct of secondary analysis of population data is underway, along with outreach and engagement with stakeholders at Federal and State-level. This is work in progress towards setting up an institutional body, which is part of the 2025 workplan. Planning an event with Seoul National University experts in November and a National Research Priority Areas on Ageing event in December 2024.
							Indicator 3.2: Availability of the National Plan on Population Ageing that integrates	No	Yes	No	Organizing Module Development Workshop with authors and researchers (pending UPM approval for external meetings). Participation made in various care economy events and submitted manuscript for book by APPGM-SDG & ISIS, chapter on

UNSDCF / CPD Outcome	Indicators	Baseline	Target 2025	Progress 30 June 2024	Remarks	CPD Output	Indicators	Baseline 2022	Target 2025	Progress 30 June 2024	Remarks
an economy that is inclusive, innovative and sustainable across all income groups and productive sectors.	pregnant women, work injury victims and the poor and the vulnerable			Despite positive messaging, notably within the Madani agenda, Malaysia lacks an effective social protection floor, nor does it have a commitment to develop one.			gender and human rights perspectives				Care Economy for Older Persons, to advocate for the National Plan on Population Ageing to integrate gender perspective. NHPOP (National Health Policy for Older Persons) PoA Updated. MPOP PoA is ongoing. Planning to organize human rights engagement event with SUHAKAM. Strategic partnering and supporting the ASEAN Care Industry Conference (MWFCI) to be held in 2025 to promote gender and human rights mainstreaming in population policies through SSTC mechanism.
By 2025, poor and vulnerable groups living in Malaysia, benefit from more equity-focused and high-quality social services as well as a social protection system that ensures all have an adequate standard of living. By 2025, Malaysia is making meaningful progress towards an economy that is inclusive, innovative and	Actual case proportion of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner in	8.73% (2017)	6%	No latest data available	UNFPA Malaysia continuously provide support to One-Stop Crisis Center (OSCC) through study assessment and OSCC actors and will follow up on national GBV data.	Output 4: Strengthened national capacities for the design, implementation and monitoring of legal frameworks, policies, plans and programmes to advance gender equality, empower and increase the economic participation of women and	Indicator 4.1: Number of legal frameworks and policies developed or revised to address GBV, and women's economic participation and empowerment Indicator 4.2: Number of advocacy platforms that engage the Government, CSOs and men and boys to promote	0 0	2 2	2 0	Anti-Sexual Harrassment Act and Anti-stalking law have been implemented. In addition the CO is working on 1) a project on legal literacy on SRHR and GBV for communities and GBV survivors, and 2) a project investigating the feasibility of female labour force participation in Malaysia. These projects will influence the development of legal framework for GBV and women's labour force participation. While the planned activities are in progress under WAO work plan, some of their planned activities are pending this year due to internal issues within the organization. Community-based GBV and SRH awareness programme for TeamTINA was planned by engaging various

UNSDCF / CPD Outcome	Indicators	Baseline	Target 2025	Progress 30 June 2024	Remarks	CPD Output	Indicators	Baseline 2022	Target 2025	Progress 30 June 2024	Remarks
sustainable across all income groups and productive sectors.	the previous 12 months, by age and place of occurrence					girls and prevent GBV and other forms of discrimination	women's economic empowerment and GBV prevention and response				different stakeholders, legal, communities and other stakeholders. UNFPA has hired a gender consultant to coordinate the work on Gender and GBV programme, including the UN GRG
	Female labour force participation rate	Female: 55.3% with no formal education: 44.6% urban: 57.5% rural: 46.5% (2020)	Female: 60% with no formal education: 46% urban: 60% rural: 50%		Data on female labour force participation based on DOSM data. Female: 56.8%; With no formal education: 46.6%: urban: 72% rural: 28% (https://storage.dosm.gov.my/labour/lfs_qtr_2024-q3.pdf)		Indicator 4.3: Number of multisectoral GBV coordination mechanisms established and strengthened to deliver comprehensive multisectoral GBV response services across the humanitarian-development continuum	2	10	2	1) Discussions are continuing with the Government (i.e.MWFCD) regarding One-Stop Crisis Center (OSCC) coordination; This is under the 2025 work plan. UNFPA has engaged with the Government, KPWKM and other ministries on OSCC closed-door meeting, and has also provided advocacy to enhance the implementation of the OSCC system in the country. UNFPA will be launching the OSCC report in the coming months, prepared by UNU-IIGH, commissioned by UNFPA. 2) The second programme planned was TeamTINA which is a community-led programme engaging multi-stakeholders. However, the project is currently on hold.

Source: CPD, Quarterly and Annual Progress Reports (2022-23), CPAP, data from Quantum, plus supplementary consultations with CO staff

62. The findings below capture the ET's assessment of progress towards achievement of each of the four outputs of the CPD, covering the themes of SRHR, AY, PD and GEWE.

Delivery of intended results under output 1: SRH (increased access to and use of integrated SRH services, especially for the most vulnerable groups, such as women and girls, young people, older persons, PWDs)

Finding #14: Access to SRHR and service delivery, life-saving support for GBV survivors, and contraceptive needs of women, were provided to an extent to diverse communities (adolescents, youths, girls and women, persons with disabilities and marginalised populations), but evidence-based policy-making remained lacking

63. Through UNFPA support, the ability of the country to increase access to SRH services was somewhat strengthened, especially in the areas of producing research data for policy-makers and collaborating with faith-based organizations and civil society organizations to promote SRH and service delivery, and its evidence for the accessibility to it are as follows:

- Comprehensive national SRH plan includes health services and targets for all, that are created and implemented^{125,126}
- Inclusion of long-acting reversible contraceptives as an essential SRH service into primary health care in Sabah and Sarawak¹²⁷
- Implemented 14 SRHE programmes in 14 states with 420 participants of parents with collaboration from Special Education Division, MOE and Social Welfare Department (Institution for Disabled Child) and parents in the community. These programmes are implemented in view of the importance in engaging parents and parents with disabled child in SRH advocacy and awareness, the SRHE programme for parents especially with disabled young children and adolescents was carried out in selected communities as a pilot project for 14 states throughout Malaysia. Empowering parents with knowledge and skills to address adolescent SRH issues provided support to the adolescents and disseminated the right SRHE to their children at younger age and ensure their safety. The programmes recognised the role of SRHE in ensuring the health and well-being of the younger population in achieving the Sustainable Development Goals in Malaysian society¹²⁸.

64. The SRH investment report that is a product of the study conducted by the Harvard T.H. Chan School of Public Health, has proven useful and effective. This will provide entry points for better SRH financing in future. The report was launched on 11th July 2023, in conjunction with World Population Day and in conjunction with UNFPA's 50 years anniversary in Malaysia. The study examined the impact of SRH investments on the accumulation of human capital. Given the Government's concerns about the aging population and low fertility rate causing the workforce to shrink, life-course approaches and reframing were used to enhance stakeholder buy-in on SRH funding, particularly on FP. Through social and economic engagement, the study optimized women's capacity to contribute to the nation's growth through a care support system. SRH investments were seen to be a viable and cost-effective way to inclusively improve social welfare through: (i) increased female labour force participation through FP interventions; (ii) increased female educational attainment through CSE; (iii) lower depreciation of female human capital with family support policies; and (iv) improved women's health through HPV vaccination and screening¹²⁹. This study has resulted in six policy recommendations for the consideration of the Malaysian Government. With their implementation by 2025, there can be improved integration of SRH and reproductive rights – as well as prevention of and response to GBV and other harmful practices – into universal health coverage-related policies and plans, and other relevant laws, policies, plans and accountability frameworks. Advocacy for SRHR using ROI (Return on Investment) has proven to be effective and the CO will continue to use this strategy.

65. UNICEF and UNFPA joined forces to generate evidence on the patterns of adolescent pregnancy and child marriage in four countries in the region, to understand the drivers and pathways of adolescent pregnancy in Southeast Asia to inform effective policy and programming response¹³⁰. The findings highlight the need to

¹²⁵ UNFPA Annual Report 2023

¹²⁶ Ministry of Health Monitoring and Evaluation Report

¹²⁷ LPPKN Annual Work Plan Report 2023

¹²⁸ Key informant Interviews, Aug-Sep 2024

¹²⁹ Dayalu R, Ferranna M, Algur E, Tan LY, Ab Rashid NF, Bayoumi R, et al. Enhancing Human Capital Through Sexual and Reproductive Health Investments & Family Support Policies in Malaysia. UNFPA and School of Public Health, Harvard T.H. Chan; 2022

¹³⁰ The Burnet Institute. Understanding pathways to adolescent pregnancy in Southeast Asia: Findings from Malaysia 2023

ensure that girls have the resources that they need to make informed decisions that affect their sexual and reproductive health before they become sexually active. This will entail assessing the delivery of timely and accurate SRH information in schools and providing comprehensive sexuality education in school and through non-formal, community based programmes. It will likewise be imperative to address the social and legal barriers girls face to contraceptive access and use¹³¹.

66. Using an integrated approach based on best practices in other countries¹³², the NPFDB studied and modified the National Reproductive Health and Social Education Policy (PEKERTI) and its Plan of Action (2020-2024). This study, undertaken by the United Nations University International Institute for Global Health (UNU-IIGH) with UNFPA's support, improved the NPFDB's capacity to spearhead the development of the nation's SRH and other population health initiatives by enhancing inter-ministerial coordination, monitoring, and advocacy. The desk review compared sexuality education policies and practices across selected Sunni Muslim countries: Turkey, Egypt, Morocco, Bangladesh and Malaysia. It presented the latest evidence on best practices aligned with international CSE guidelines. These countries, especially Malaysia, have made notable progress in human development. In the context of SRH, the country has legal and policy frameworks for matters such as age of marriage, abortion and GBV. However, the implementation of SRH education in schools and the community is poor. This is reflected in the limited SRH knowledge among children, adolescents and young people. Further, since SRH research, education and services are commonly targeted to married couples, unmet need for contraception among young people is underestimated, and thus more work is needed to prevent further STI transmission and unintended pregnancies.

67. A gap analysis study was conducted by the UNU-IIGH to assess the quality standardization of confinement centres for women's health, well-being, and rights. MWFC's evaluation of the Confinement Centres¹³³ produced evidence in support of standardizing regulations to protect the rights, health, and well-being of mothers and new-borns in Malaysia. Despite the industry's explosive growth in metropolitan areas, the analysis of these confinement centres revealed that there are no laws or regulations in place to regulate them¹³⁴. UNFPA has consulted stakeholders, and strongly favoured co-regulation via an ongoing co-regulatory mechanism, to be led by the MWFC and MOH to bridge the identified gap between Confinement Centres, and increase compliance. It remains unclear as to which Ministry will take up the role of regulating the Centres.

Finding #15: UNFPA CP SRH interventions need to more effectively address the needs of various diverse populations

68. Accessibility to services for maternal health and childcare was limited and challenging despite availability, especially for indigenous population, undocumented migrants, and refugees. The calculation of Maternal Mortality Rate (MMR) coverage is limited to Malaysian citizens, excluding other vulnerable groups, such as migrants or refugees. It may be noted that for statistical reporting in Malaysia, maternal deaths comprise all direct and indirect deaths among Malaysian citizens and non-Malaysian citizen with legal document¹³⁵. The CP's SRH interventions are hindered due to lack of awareness of its importance, and due to socio-cultural and religious sensitivities. Targeting of diverse groups for example, indigenous people, and other marginalised and vulnerable groups including persons with disabilities, face significant barriers to accessing SRHR programmes and services, including those located in remote areas¹³⁶. UNFPA can play more of a role in creating awareness of SRHR issues and reaching out to those hard to reach, for example those living in East Malaysia.

69. There needs to be further engagement with policy-makers, Government stakeholders and implementing partners for SRH policy change and impact. Evidence-based research translation to policy and programme development in SRH is insufficient. To enhance human capital and drive macro-economic performance, it is

¹³¹ Understanding Pathways To Adolescent Pregnancy In Southeast Asia: Findings from Malaysia 201

¹³² Ghani, F. and Awini, N. (2020) Sexuality Education across selected Muslim countries: A review to inform Malaysia's 2020-24 National Reproductive Health and Social Education Plan of Action, UNU-IIGH, commissioned by UNFPA

¹³³ Confinement Centre--In Malaysia, the tradition of confinement, or pantang, is a deeply rooted aspect of postpartum care, providing new mothers with specialized attention to support their recovery after giving birth. Confinement centres offer comprehensive services to cater to this traditional need. What was once a community-driven practice, where care was provided by family members and local midwives, has transformed into a commercialized service offered by specialized confinement centres. These centres now cater to a growing market of mothers who seek not only traditional care but also the convenience and luxury of modern facilities.

¹³⁴ UNU-IIGH. Confinement Centres Study in Malaysia - Final Report. 2021.

¹³⁵ MOH, National Technical Committee Confidential Enquiries into Maternal Deaths

¹³⁶ Sexuality Education across selected Muslim countries: A review to inform Malaysia's 2020-24 National Reproductive Health and Social Education Plan of Action

necessary to continue to invest in SRHR through budgetary allocations and other means, in particular in reducing the unmet needs for FP, prevention and response to GBV, and more effective CSE for those in and especially those out of schools.

Finding #16: Guided by research and studies undertaken, UNFPA is planning to expand the reach of its programme in Sabah and Sarawak to address SRHR needs of vulnerable and marginalized populations

70. Following UNFPA's launch of the report on Demographic and Socioeconomic Changes in Sabah published by the University Malaysia Sabah (UMS), which provides vital insights into the various demographic challenges, opportunities and perspectives for overcoming inequality gaps and ensuring that no one is left behind in the pursuit of progress, with actionable recommendations on falling fertility rates, access to family planning, SRHR, CSE and overcoming economic barriers in order to increase the female labour force participation rate in Sabah, and guided by other situational analyses of Sabah, UNFPA is planning to design its programme in Sabah in consultation with relevant local stakeholders. As reflected in Table 4.1, this intervention is in pursuance of CPD output indicator 1.2. In addition, the CO is planning to strengthen its programme and partnership in Sarawak recognizing that Sarawak is the third poorest state in Malaysia with geographical challenges to access services. Recent statistics show that Sarawak has increasing rate of teenage pregnancy, and it is one of the states with the highest child marriage cases in Malaysia¹³⁷.

Delivery of intended results under output 2: AY (empowerment of adolescents and youth to access SRH services and exercise their sexual and reproductive rights)

Finding #17: National and sub-national capacities were strengthened to design, implement and monitor policies and programmes, including CSE programmes that promote adolescent SRHR.

71. UNFPA has put in place measures to strengthen capacities in their policies and programmes design and its implementation. Of note is the Advocacy and Policy Dialogue Related to Youth and Adolescents for Malaysia, which aims to influence policymakers to prioritise policies and programmes that address the unique challenges this demographic group faces in Malaysia. This work includes strengthening CSE in-and out-of schools including using innovative approaches such as the use of online platforms. For example, LPPKN has engaged with relevant stakeholders including MOH, MOE, and Ministry of Higher Education to promote CSE through online platforms. The KafeTeen mobile app has been developed and updated to provide teenagers access to SRH information¹³⁸. Furthermore, UNFPA has held discussion with the Ministry of Education for PEERS Teacher Module Development and Training Collaboration. At the working level, the MOE has shown positive support – and is further seeking approval of their management¹³⁹.

Finding #18: Use of technology and innovation helped national and subnational institutions to promote CSE education, trained teachers and engaged young people and parents

72. UNFPA provided technical support to undertake a review of the use of technology and innovation in CSE to teach in schools, TVET institutes and higher education institutions, as well as provided technical support and advocacy for institutionalisation of inter-agency mechanism to strengthen CSE/PEKERTI, establishment of technical working group, and formulation of its TOR¹⁴⁰. Capacity building initiatives were effectively implemented, particularly in training teachers to enhance their skills. There was a Training of Trainers Workshop for Facilitators conducted at the community level. Furthermore, the SRH Module for Parents, Including Parents with Disabled Child was also carried out. Via digital platforms, the use of technology and innovation was also promoted to support teacher training and engagement of young people and parents. Support for evidence-based advocacy and digital communication materials were developed and distributed through social media and other channels, targeting the AY populations. Advocacy campaigns, CSE forums and dialogues were conducted to strengthen support for using technology and innovation for CSE teaching. The CSE modules were pilot tested and taught using technology and innovation for schools, TVET institutes and higher education institutions. As targeted, there were a number of institutes and schools with such technology and innovation being used. Thus

¹³⁷ Tey Nai Peng, Lai Siow Li, Jennifer Chan Kim Lian (2023). Demographic and Socioeconomic Changes in Sabah, Kota Kinabalu, Sabah: Universiti Malaysia Sabah Press

¹³⁸ Ooi J. Technical Review Report 2018 - 2020: myKafeTeen Mobile Application. UNFPA Malaysia; 2020

¹³⁹ UNFPA Malaysia 2023 Annual Report validated by Key Informant Interviews, Aug-Sep 2024

¹⁴⁰ UNFPA Malaysia 2023 Annual Report validated by Key Informant Interviews, Aug-Sep 2024

far, there are 200 schools using technology and innovation to teach CSE¹⁴¹. The CSE/PEKERTI advocacy and implementation was also strengthened for the Ministry of Youth and Sports (MYS), National Youth Training Institute as well as parents in high-risk areas. There was also promotion and advocacy for the development of syllabus on CSE for mandatory training (INTAN) for teachers¹⁴². To increase the number of trained facilitators in disseminating information on SRHE among educators so that it can be applied to the target group continuously and for a long period of time and sustainably, activities were carried out, such as, conducting a Training of Trainers (TOT) Workshop for 54 Facilitators in the Ministry of Youth (TVET Officers) in Putrajaya, and implementation of SRHE programs in 21 TVET Centers (under MYS) for adolescents, as reported by the CO. Seven states were using an online CSE platform accessible for young people. E.g. Organized 1 TOT Workshop for 70 NPFDB's Facilitators using Live Life Stay Safe Module (RHSE for Disabled Child) and Cakna Diri Ibu Bapa Module (NPFDB RHSE Module), in mid 2024, in Langkawi area. Master trainers consisted of experts from MOH, NPFDB and external experts (2023 LPPKN annual report).

73. UNFPA helped NPFDB train out-of-school teenagers in using my KafeTeen, a mobile app that provides a full package of SRH information, to access SRHR¹⁴³. To further strengthen the capacities of both trainers and youths, training modules were designed as interactive. Parents also used the app to share SRH information with their children and sought counselling services through the TeenCHAT feature. However, the evaluation found that the app is unknown by most Malaysians, both young people and parents. Nevertheless, the app was considered a significant output in enhancing adolescents and young people's capacity to access to SRH services, especially for young people who abstain from sex before marriage.

Finding #19: Technical assistance was provided for capacity building of religious leaders and faith-based organizations to advocate for the implementation of CSE in schools.

74. Taking into consideration that religion remains a key influence in the enactment of SRHR, innovative strategies accommodating socio-cultural norms, beliefs and behaviours to deliver more sensitive services, such as safe abortion, were put in place.

75. The PEKERTI/SRHE Forum conducted in Sarawak under IP/LPPKN generated very positive cooperation with state religious leaders¹⁴⁴. Additionally, the CO worked closely with UNICEF to engage faith-based organizations and religious leaders in Sarawak to reduce socio-cultural and religious barriers to CSE and strengthen adolescents' and youths' right to access SRH information¹⁴⁵. The inter-religious dialogues among religious leaders employed a harm reduction strategy that focused on how CSE may reduce the negative effects of unsafe and unprotected sex, such as HIV, unsafe abortion, baby dumping, etc. These faith-based organisations concurred on the necessity of working with NPFDB on the SRH Boys Module and appropriately implementing the module for youth, both inside and outside of schools. There were a number of faith-based organizations supportive of CSE being taught in Government and Sunday schools (n=21 in 2020, target 25 in 2025)¹⁴⁶. Advocacy with the Vatican on CSE has been progressive, where UNFPA was a technical partner supporting the upcoming revision of the Vatican's module. A CSE module was developed with a Church referencing the Vatican SRHE module with alignment to the UNITGSE (United Nations International Technical Guideline on Sexuality Education) and there was public advocacy with religious leaders including launch of a Boys Module¹⁴⁷.

Finding #20: Diverse groups are not adequately considered in CSE programmes and mainstreaming of CSE in the national curriculum remains limited

76. Certain diverse groups, such as out-of-school youth, persons with disability, undocumented persons/migrants and those in higher education, were not adequately considered in programme interventions, with a primary focus placed on school-level interventions. There is insufficient support for youth-led initiatives, especially in relation to gender equality¹⁴⁸. A lack of inter-sectoral collaboration or coordination hinders the

¹⁴¹ LPPKN Annual Work Plan Report 2023.

¹⁴² UNFPA Malaysia 2023 Annual Report validated by Key Informant Interviews, Aug-Sep 2024

¹⁴³ UNFPA Malaysia; workplan between UNFPA and Implementing Partners

¹⁴⁴ Forum Advokasi Pendidikan Kesihatan Reproduksi Terutama Kepada Golongan Bekeperluan Khas Dari Perspektif Agama di Negeri Sarawak (Report)

¹⁴⁵ UNFPA Malaysia Annual Reports

¹⁴⁶ LPPKN Annual Work Plan Report 2023

¹⁴⁷ UNFPA 2023 Annual Report

¹⁴⁸ Impressions gathered from stakeholder interviews, Aug-Sep 2024

effectiveness of programme delivery and outcomes. The programme mainstreaming of CSE through the national education curriculum remains limited due to insufficient multi-sectoral approach or inter-ministerial collaboration within Government agencies. There is limited capacity of teachers to deliver CSE, due to their restrictive or conservative attitudes and comfort levels pertaining to the delivering of sensitive subjects. In addition, CSO partners are limited and also lack the capacity to deliver CSE to out-of-school youth/marginalized youths, especially those beyond Klang Valley. In this context, UNFPA Malaysia provided technical support and advocacy for institutionalization of inter-agency mechanism to strengthen CSE/PEKERTI and established the technical working group. CSE Advocacy Forum was held in all states in Malaysia, targeting wider population groups and Training Workshop for various stake holders¹⁴⁷. Furthermore, the study by Burnet Institute emphasizes the significance of CSE, adolescent-responsive health services, supportive relationships, and enabling environments in empowering girls to make educated decisions about their SRH and lifestyles¹⁴⁹.

Delivery of intended results under output 3: PD (increased use of population data in the development of evidence-based national development plans, policies and programmes)

Finding #21: UNFPA has consistently supported academia and strengthened their capacity in the areas of PD and ageing, which facilitated sharing of their research findings and engagement with policymakers to influence them in conferences and forums.

77. UNFPA has consistently provided support to academia, facilitating the generation of data, conducting analyses, and disseminating results on Population and Development (PD) and ageing. By partnering with academic institutions, UNFPA is able to advance its areas of interest within PD, ensuring these topics receive the necessary emphasis and visibility at both the country and regional levels. Participation of Malaysia delegates at international events such as the Global Demographic Dialogue, and regional events such as Regional Parliamentarians on Ageing Preparedness and Care Economy in Asian Region in July 2024. Through their support to IPs in PD and Ageing, UNFPA has brought together various groups of people to share and discuss key issues of interest on the topics. According to one of the key-informants, through the funding and support provided by UNFPA, IPs were able to organize and/or participate in forums, workshops, and roundtable discussions both at the country level as well as regional level. The ET assesses that these engagements and discussions facilitates dialogues among diverse stakeholders, amplifying the needs of the grassroots and marginalized and helps to brainstorm for context and community specific solutions. One example of a platform for academics and researchers to present research findings on PD is the National Population Conference 2023 (PERKKS23). In the conference, the dynamic issues and challenges related to ‘population’, and its relation to national development were discussed¹⁵⁰. Through the conference, a Draft Conference Resolution was drafted¹⁵¹, addressing PD issues in the country through focused discussions with policymakers, senior Government officials, representatives from Government-Linked Companies (GLCs), experts, and academics. These resolutions, which are collaboratively formed fosters a sense of ownership and accountability among its stakeholders, enhancing the likelihood of the resolution being adopted and implemented. During the conference, the *Fertility policy and practice: a Toolkit for the Asia-Pacific region* was introduced. This fertility Policy Toolkit was developed by Economist Impact¹⁵² with support from Merck, and it comprises a comprehensive set of policy recommendations that are based on insights gained from research. The report touched on four main areas for addressing the low fertility rate including childcare policies, workplace policies, financial incentives, and assisted reproduction, which were all discussed during the conference.

78. According to one of the IPs, UNFPA’s funding was also instrumental to their IPs in providing support to a coalition of NGOs working on issues pertaining to the theme, for example, in supporting Malaysian Coalition of Ageing. They also supported IPs (i.e., MyAgeing) to reach out to Parliamentarians and influence them on ageing through a round table discussion. Furthermore, UNFPA has actively supported their partners and academic institutions in conducting studies on PD. The Report on Demographic and Socio-economic Changes in Sabah that was published in 2021, was completed and delivered in collaboration with University Malaysia Sabah and the Population Studies Unit, University Malaya¹⁵³. The report unveiled critical demographic

¹⁴⁹ The Burnet Institute (2023). Understanding pathways to adolescent pregnancy in Southeast Asia: Findings from Malaysia

¹⁵⁰ National Population Conference 2023 (PERKKS23) Conference Proceeding: <https://mprh.lppkn.gov.my/books/prosiding-persidangan-kependudukan-kebangsaan-2023/>

¹⁵¹ National Population Conference 2023 (PERKKS23) Conference Programme: <https://submit.confbay.com/thisconf/prog?view=prog&acid=1362>

¹⁵² https://impact.economist.com/perspectives/sites/default/files/ei240_-_apac_fertility_report_v8.pdf

¹⁵³ <https://malaysia.unfpa.org/en/news/report-launch-demographic-socioeconomic-changes-sabah-unfpa-malaysia>

dynamics, highlighting a rapid population increase driven by migrant workers. It brought to light pressing issues such as child marriages, and challenges pertaining to access to education and literacy, which significantly impact the people's socio-economic status, especially that of women¹⁵⁴. These findings underscore the urgent need for collaboration of various CSOs to address these challenges effectively. Additionally, the gender analysis emphasized the importance of enhancing female productivity and increasing women's participation in the labour force in the state of Sabah. While the insights are expected to guide future policies and strategies to foster necessary changes in the state on these issues, the ET assesses that it is crucial for UNFPA and their partners, especially the state Government, to ensure that these key findings translate into interventions that result in measurable outcomes.

79. In supporting Malaysia's commitment to addressing inequalities and social exclusion, rights and health, with a specific focus on SRHR, UNFPA CO has participated and played a key role in supporting the Seventh Asian and Pacific Population Conference (7th APPC). Their role in the conference was well recognized by the Government and other key counterparts. A national secretariat for APPC process consisting of UNFPA, MWFC and LPPKN enabled a structured, close collaboration between the organisations. UNFPA CO supported the national secretariat in planning and conducting survey, organising stakeholder consultation meetings, drafting country report and country statement, co-organising side event, and ensuring participation of youth and CSOs. This support helped enhance the visibility and impact of their work¹⁵⁵.

Finding #22: Challenges remain with regard to lack of expertise in population data, ageing, and its use to inform policies and programmes

80. In the area of PD, it is noted that there has been a lack of capacity and expertise in Malaysia specific to using the population data to inform policies and programmes in the country. As one key informant¹⁵⁶ commented: *"In the traditional sense, much of the resources focus on population data (for example) statisticians, people who collect data...but the expertise in population policies, particularly in population trends and dynamics is scarce and Malaysia is not exceptional"*. This lack of specialized expertise in the country can continue to hinder the development and implementation of evidence-based policies that respond to demographic shifts. In order to meet the needs of the country office, one key-informant suggested for: *"There is a need for a full-time technical expert on population development to be based in Malaysia."* It is further proposed that the country needs to focus on not only its expertise on data collection and dissemination, but also its expertise in interpreting and understanding ways that the population-trends can impact the people in the long run. Furthermore, this gap is evident in the limited efforts to build the capacities of the younger population in understanding PD and Ageing issues and encouraging their engagement on this topic. Strengthening the knowledge and involvement of the younger generation is crucial for fostering a comprehensive approach to PD and ensuring that the country will have the needed expertise (i.e., demographers, statisticians, geriatricians etc.) as well as institutional readiness to meet the demand of a super-aged society (i.e., with over 20 percent of its population above the age of 65) that is projected within the next four decades¹⁵⁷.

81. CPE findings reflect that the CO together with its national partners, needs to invest in identifying the country's need for National Transfer Accounts (NTA) and raise the interest at the national and the regional level. According to one of the key-informants, currently, the CO lacks in-house technical capacity to lead or coordinate this work¹⁵⁸. This is particularly in data analysis and its interpretation for formulation of policies. Additionally, the ET assesses that although there may be existing technical experts in the country who are interested in advancing NTA work but they may lack the necessary funding/resources and network. However, as one of the key-informant suggested, it is important to *"making sure that the demand for NTA analysis come from policy planners, not from researcher who interested to run the analysis and calling for support for funding whatsoever....but it should come from policy"*.

¹⁵⁴ <https://malaysia.unfpa.org/en/publications/key-findings-demographic-and-socioeconomic-changes-sabah-report>

¹⁵⁵ Impressions gathered from stakeholder interviews, Aug-Sep 2024

¹⁵⁶ Interview with stakeholder as part of Key Informant Interviews, Aug-Sep 2024

¹⁵⁷ Schmillen, Achim Daniel; Wang, Dewen; Yap, Wei Aun; Bandaogo, Mahama Abdel Samir Sidbewende; Simler, Kenneth; Binti Ali Ahmad, Zainab; Abdur Rahman, Amanina Binti. *A Silver Lining - Productive and Inclusive Aging for Malaysia (English)*. The Malaysia Development Experience Series Washington, D.C. : World Bank

Group. <http://documents.worldbank.org/curated/en/287981606116408851/A-Silver-Lining-Productive-and-Inclusive-Aging-for-Malaysia>

¹⁵⁸ Impressions gathered from stakeholder interviews, Aug-Sep 2024

Delivery of intended results under output 4: GEWE (advancement of gender equality and the empowerment of all women and girls)

Finding #23: UNFPA's interventions are complementary to those of women's rights organizations

82. Most of the stakeholder representatives interviewed for this evaluation, particularly those working in the areas of gender equality and women's rights, health, and SRH, have a positive view of UNFPA Malaysia. One of the key-informant stated: *"So we really grateful because that work was really actually engaging with the grassroot communities. so far the experience has been good. They have always been supportive, and when we had some constraints in terms of resources, and everything, we feel comfortable to basically reach out to them and tell them like, okay, this is our situation at the moment in the organization, and they willing to listen, and help us to find a solution"*. Another key-informant, whose organization is working in the area of gender equality stated: *"In terms of gender and other intersecting identities....I think they're (i.e., UNFPA) quite focused in in what they do. I've lost touch of their current work, but I believe that whatever they do are for the good of people"*. These stakeholders view the interventions supported by UNFPA (current and/or past) as complementary to the efforts of women's rights organizations, such as those by the All Women's Action Society (AWAM), which conducts campaigns to raise awareness about gender equality and GBV. UNFPA has conducted advocacy for gender equality and women's empowerment through various platforms, including through the Malaysia Women and Girls Forum (MWGF).

Finding #24: UNFPA's work on OSCC, with grassroots women as community advocates and their support for survivors of domestic violence is important for women in need.

83. UNFPA's study on GBV issues in the country holds significant importance, particularly in its producing a report on the experiences and perspectives of GBV survivors and other stakeholders on One-Stop Crisis Centre (OSCC) in Malaysia. The OSCC approach plays a crucial role in providing effective multi-sectoral support services for survivors of GBV who are accessing healthcare services in the country. In order to understand its effectiveness, and identify any gaps, UNFPA and UNU-IIGH collaborated to conduct the study. The study report¹⁵⁹, currently being finalized and due to be released, delves into the complexities of GBV in Malaysia, exploring the multifaceted care pathways and experiences of survivors from their perspectives as well as those of key civil society stakeholders. It sheds light on the care system and the gaps it needs to address and includes recommendations for policy, legal, and healthcare frameworks to better address GBV in the country. The report also highlights the challenges faced by often marginalised and discriminated groups, such as LGBTQ+ individuals, and provides recommendations to specifically address the GBV issues they face. A few stakeholders have identified the OSCC approach as a globally recognized model of good practice, that is comprehensive and multisectoral, hence the findings from the study will provide the ground reality of challenges faced by not only the implementers of the intervention but also of the people who are expected to benefit from it. *"UNFPA's work is relevant and effective in the current Malaysian context, especially through initiatives like the OSCC in general hospitals, which provide comprehensive support to survivors of violence. The integration of various services such as medical, counselling, legal support, in one location is beneficial for all survivors, regardless of their background"*. (Key-informant). The study's insights may help scale the model's learning lessons to other countries in the region once it is published in Q1 2025.

84. One of UNFPA's ongoing initiatives implemented by WAO, (that has not commenced at the time of the interview), in which WAO is working to empower grassroots women as community advocates, particularly in handling GBV cases, was found by the evaluation team to be an important intervention. When asked about the number of people who will be trained, the key-informant stated: *These, these are the grassroots. Okay. 30 women in each location, so is 120 in 4 locations. When we do 4 location. But this is grassroots, but we also reaching out to the front liners right. So it's 50 in one location. So it will be about 200 (front liners)"*. The IP (WAO) is planning to train front liners from Government agencies to work alongside these community advocates and educate local women on gender issues and practical skills. This is an example of a multi-institutional intervention which can be more effective than a single institutional capacity building. Local women will be trained on topics such as gender roles, power dynamics, and consent, as well as practical skills for navigating systems like police stations and hospitals. The development of a network of community advocates, supported by the IP's social workers, showcases a comprehensive approach to managing cases on the ground effectively. Although Table 4.1

¹⁵⁹ UNU-IIGH & UNFPA (Unpublished). Portraits – Journeys of survival, care, and resilience amongst GBV survivors in Malaysia: Experiences and perspectives of GBV survivors and other stakeholders on OSCC in Malaysia.

suggests that there was not much progress at the moment in terms of activities due to delay in some of the planned work of UNFPA under this theme, some initial progress on multi-sectoral coordination has been made by UNFPA, with this multi-faceted/institutional strategy having the potential to foster community resilience and is sustainable as well.

Finding #25: UNFPA leadership of the UN Gender Results Group has helped strengthen UN coordination on GEWE and promoted gender equality

85. UNFPA CO is commended for leading the Gender Results Group of the UNCT in Malaysia to strengthen UN performance on gender equality and the empowerment of women (GEWE), enhance UN coordination, and share information and experiences, leading and promoting joint programming on promoting gender equality, where there is an opportunity. One of the UN agency informant interviewed stated that: *“UNFPA has played a crucial role in leading the Gender Results Group”*, while another acknowledged UNFPA as the lead UN agency for pursuing the UN’s gender equality and women’s empowerment agenda through its leadership of the Gender Results Group. Their leadership of the GRG, as assessed by the ET, has the potential to contribute to the CP output related to the advancement of women and helps to strengthen in-country capacities in GEWE.

86. Apart from contributing to meet the general requirements as part of the UNCT for gender equality and the empowerment of women, UNFPA’s contribution to the UNCT (as well as other UN agencies in the country) was reported through an assessment conducted using UNCT-SWAP gender equality scorecard methodology¹⁶⁰. UNFPA’s contribution was reported to have enabled the UNCT to have met and exceeded minimum requirements in several indicator areas such as: i) the Chairing of the GRG, which made substantive input into the development of the UNSDCF 2021-2025, including the initial common country analysis dated 2019¹⁶¹, ensuring the mainstreaming of gender across the outcome areas, outputs and indicators; ii) The UNCT, led by the Gender Results Group with collaboration with line Results Groups and the UN Communications Group, organized the International Women’s Day 2022 Forum, the 16 Days of Activism and the Malaysia Women and Girls Forum 2022; and iii) UNFPA’s work with other UN agencies and MoFA to support integration of CEDAW, ICPD, CRC, CRPD (conventions committed by the Malaysian Government) to the UPR monitoring framework to facilitate organized monitoring and reporting of Malaysia’s progress towards these commitments. The UNCT has implemented an action plan to enhance their performance on GEWE, with the UN actively contributing to its execution/achievement of targets. However, lack of participation and contribution to GRG by all UN agencies in the country hampers the progress to achieve planned outcomes. This is evidenced through the findings in the UNCT-SWAP Gender Equality Scorecard 2023: *“To date, most of the results groups have not met as regularly as expected according to their mandate.”*

Finding #26: UNFPA has effectively played its role to support the Government in sensitive areas of work by working with academia and CSOs, thereby improving the policy environment.

87. UNFPA is seen as playing a crucial role as an intermediary between research institutes, such as the PSU-UM, UNU-IIGH, and the Government, particularly in sensitive areas like SRH, gender issues and enhancing women’s socio-economic status leading to their increased labour force participation. Most of the UNFPA staff members are Malaysians who understand the local culture and sensitivities, a note highlighted by a key-informant from a Government agency for their ease of engagement with UNFPA. Additionally, UNFPA collaborates with a religion-based university, such as UIS, to provide support for GBV survivors and their children. Through this partnership, UNFPA ensures that discussions around gender are approached with cultural sensitivity, particularly as the term “gender” may not be widely accepted by everyone in the religious circles. However, their work in addressing domestic violence is strongly supported by the religious community and beyond. One of the key-informant supported by stating: *“So that’s why our university, they accept this collaboration so that we can break the cycle by educating their children so they will stay away from the family, right, and in the hostel., I think providing education to the domestic violence victim is something new not everyone has done”*. Through such new collaboration, in areas accepted by stakeholders, the CP is able to strengthen its ability to showcase successful programmes, aligns its effort with the needs of the survivors of GBV and garner support in areas of UNFPA’s mandate.

¹⁶⁰ UNCT Malaysia (2023). UNCT-SWAP Gender Equality Scorecard

¹⁶¹ UNFPA Malaysia has also provided support for the current common country analysis undertaken in Jan 2024 for the UNSDCF which is under development.

88. UNFPA has delivered results in contributing towards gender equality, primarily through advocacy on issues such as women's economic contributions and GBV. The launch of initiatives such as the Women and Girls Forum has facilitated the engagement of high-level Government officials as well as CSOs. The Forum has brought together various stakeholders in public and civil society, and during 2022, the issue of women's rights in the economy, particularly in the labour force, was the central theme of the Forum. One key-informant stated: *"UNFPA's communication efforts, through the strategic communication company, have significantly contributed to gender equality and sexual and reproductive health outcomes by amplifying sensitive topics like period poverty and bodily autonomy"*. Through such collaborations, the CP is able to establish inroads into policymaking by leveraging the forum as a dynamic platform that brings together a diverse range of stakeholders from the public sector, civil society, and other key partners. The Forum serves as a unique space for dialogue, knowledge exchange, and collective action, fostering partnerships that bridge gaps between government entities, grassroots organizations, and advocacy groups. However, the impact of the Forum beyond gathering key experts/policy-makers in the country to discuss the issues pertaining to women and girls could not be ascertained, and needs to be assessed/documentated to measure the effectiveness of the Forum. Areas to be assessed would include the reach of the Forum (eg., the number of viewers) and the change that it led to (eg., result of relationships built during the Forum, the change the campaign made, its impacts on policy-making, etc.). Although these campaigns are important and have succeeded in raising the awareness of people in the country on GBV, stakeholders have also cautioned that awareness alone does not significantly reduce the prevalence of GBV. Advocacy efforts are key to driving important legal reforms, which the CO can continue to leverage upon, as per their mandate.

Finding #27: More effort is needed for increasing awareness and evidence-based advocacy, and for enhancing UNFPA's visibility through strategic outreach

89. Despite the engagement of UNFPA with various stakeholders in the country in numerous capacities to advance their mandate in GEWE, there still remain areas of work that need more focus, as per the assessment of the ET. These include undertaking measures to ensure that their funded studies (i.e, OSCC, Living on the Edge and future studies) translate into action by the Government and CSOs, for which a closer engagement and advocacy is needed from UNFPA. For example, as per the ET's evaluation, although the OSCC study may be widely shared and communicated once published, it is important for UNFPA to take on advocacy campaigns to ensure that the recommendations provided for the improvement of OSCC service delivery result in meaningful change in the way that the various groups of stakeholders work. In addition, according to one of the key-informants, reporting and publication efforts by UNFPA need a clearer objective, with a focus on achieving measurable KPIs, such as gaining front-page media coverage. On the other hand, UNFPA's engagement with various CSOs working on GBV in the country will be vital for joining together to influence for change using the study as an evidence. By taking this on, UNFPA's presence will be realised among CSOs working on the issues of GBV in the country, and at the same time, driving sustained, systemic change that fosters collaborative efforts and solutions. Furthermore, given the limitations in conducting country-wide studies, the ET considers that these collaborative efforts will be essential in scaling successful interventions/programmes to have wider reach (or even change) geographically within the country.

90. UNFPA's collaboration with grassroot organizations / CSOs to advance issues of SRH and Gender among religious groups (esp. the Muslims) is viewed as not having fully achieving intended goals, and is constrained by political and social sensitivities. This is due to sensitivities as well as varying levels of acceptance of SRH and Gender related ideas/issues by various communities in the country. Efforts have been made to address this issue. For example, LPPKN has conducted workshops in the state of Sarawak, and has incorporated religious values in SRHE workshops; UNFPA has coordinated with other inter-faith organizations in the country to come together and conducted dialogues among these organizations. However, UNFPA is viewed as not being able to directly engage with various vulnerable and marginalized communities or organizations that represent them (i.e., diverse gender groups; geographic locations – East Malaysia and few states in the Peninsular Malaysia). One of the key-informants from East Malaysia reported that: *"I'm not really aware of what you're all (ie., UNFPA) doing"* when asked whether the informant knows about the work of UNFPA although the informant works on several issues faced by marginalized communities (which are of interest to UNFPA). UNFPA predominantly reach some of these communities through their work with their government partners, key CSOs they work with, or their implementing partners (i.e., IPs). UNFPA faces a challenge where its programmes involving communities and other organizations are implemented by IPs, leading to a situation where these efforts are

sometimes overlooked by beneficiaries and other CSOs as the IPs are visible in the forefront in programme interventions.

Finding #28: There is a lack of programmes or advocacy campaigns focused on men and masculinities

91. The CPE noted that there was a lack of programmes or advocacy campaigns focused on men and masculinities. The CP did not have any programmes/campaigns on engagement with men and boys to address as well as understand their issues with regards to SRH and GBV, apart from the White Ribbon campaign. One of the key-informant from the CO stated: *“UNFPA acknowledges that addressing masculinity and gender norms is essential for long-term change in gender equality and SRHR outcomes.”* These topics are important to be focused on, also because there is a lack of programmes/campaigns (as well as capacity) on challenging harmful masculinities and engaging with men and boys in SRH in the country. There is also a lack of coalitions/organizations working with men and boys as well as policies and legal frameworks that promote positive masculinities in the country. This gap needs to be addressed to create a more comprehensive and inclusive advocacy and programmes that not only promote gender equality but also a move towards addressing the root causes of inequalities, barriers in accessing SRH services and violence against women and girls. While UNFPA acknowledges that identification, engagement and raising awareness on these are important, these were reported to have been deprioritized due to resources and capacity constraints¹⁶².

Finding #29: There is a lack of gender and social inclusion monitoring and evaluation framework

92. The ET assessed that the various interventions implemented by the UNFPA under Output 4 lack gender and social inclusion monitoring and evaluation (M&E) framework for internal monitoring of their programmes. The absence of such a framework indicates a gap in systematic tracking of gender-specific outcomes across their funded programmes, and underscores the need for a more comprehensive and integrated approach to gender and wider social inclusion. The CP’s TOC must explicitly align with its programmes and activities, ensuring that its pathways to change are both inclusive and equitable. Future CP designs should incorporate contextually relevant and targeted indicators to effectively measure progress and impact. Additionally, the CP requires robust tools and methodologies to capture disaggregated data (e.g., by sex/gender, age, disability, and socio-economic status). This will enable comprehensive monitoring and evaluation of the programme’s inclusivity and its influence on diverse population groups, ensuring that no one is left behind¹⁶³.

Enabling and inhibiting factors in programme implementation:

93. Enabling factors:

- One of the key enabling factors due to which the CO was able to progress towards achievement of its goals and objectives in the country, was the strong partnerships formed with various government agencies and their partners, which allowed for effective collaboration. UNFPA’s partnership with various ministries, UN agencies, and UNFPA’s global network (i.e., their network with experts in the area of work globally, within and outside of the UN) is viewed by IPs as one of their advantages that enabled them to have their needs met. Academic IPs reported that they approach UNFPA for support when they need assistance from government agencies. One of the key informant stated: *“Key factors include the availability of relevant data and the cooperation from government bodies (through collaboration with UNFPA)”*. Due to the closer working relationship that key personnel in UNFPA have with the representatives from the government agencies, accessing information/datasets was reported to be made available to them. Moreover, the network and closer working relationships they have with other UN agencies in the country as well as globally is seen to be advantageous for IPs. This network is seen to provide them opportunities to get key information pertaining to the IPs’ areas of work. For example, one key informant stated¹⁶⁴ that: *“UNFPA is instrumental in accessing critical data. Without them, projects like NTA and policy briefs using secondary data would not have been possible”*.

¹⁶² Interview with CO staff as part of Key Informant Interviews, Aug-Sep 2024

¹⁶³ Impressions gathered from stakeholder interviews, Aug-Sep 2024

¹⁶⁴ Interview with stakeholder from the academia as part of Key Informant Interviews, Aug-Sep 2024

- UNFPA's funding has played a pivotal role in fostering strategic partnerships and advancing key initiatives. Notable examples include the Round Table Discussion with Parliamentarians on Ageing¹⁶⁵ and the development of the National Policy and Plan of Action on Ageing¹⁶⁶. These efforts have been crucial in addressing knowledge gaps through significant studies such as the Confinement Center, OSCC, and the Living on the Edge studies. This financial support has also been instrumental in supporting the IPs to sustain and broaden their efforts in areas aligned with UNFPA's mission. One key-informant stated: *"Programmes and activities supported by UNFPA, such as the Demographic and Socioeconomic Changes in Sabah, have delivered intended results by increasing the use of population data for evidence-based planning"*. Additionally, for instance, the funding has enabled IPs to enhance local capacities. WAO has utilised these resources to train women as community advocates against GBV and to equip front liners with essential skills. For example, the IP stated that: *"we want to build this network of community social community advocates. So we will train these women on the ground, on how they can manage cases. If there's any violence happened, they themselves know like, Okay I can go (to the) police station, I will make a police report. I will apply for the protection order"*. Similarly, the ET assesses that MyAgeing and PSU have leveraged the funding to train students and young researchers, thereby fostering a new generation of experts in the field.
- Enhanced capacities at both individual and organizational levels for all IPs have provided significant opportunities to expand UNFPA's network and collaborate with other stakeholders. One of the IPs stated: *"capacity building within MyAgeing has occurred, enhancing the ability to manage projects effectively. Younger people and students have also benefitted from increased capacities (through the collaboration with UNFPA)"* (Key-informant). Additionally, for example, various studies have been conducted to deepen knowledge and understanding of SRHR issues. Noteworthy among these are the adolescent pregnancy and child marriage study by the Burnet Institute, and CSE studies across selected Muslim countries. The insights gained from these studies have been instrumental in shaping national policies, such as the National Population Policy/Strategy and the National Reproductive Health and Social Education Policy (PEKERTI), including its Plan of Action revision¹⁶⁷.
- There is strong Government ownership of the CP's outcomes and outputs, as demonstrated by the Government-UNFPA cost-sharing arrangement¹⁶⁸. This partnership signifies the mutual commitment to achieving shared goals. All interventions under the agreed output areas are reported to be planned in close consultation and collaboration with Government partners/agencies, ensuring alignment with national plans and priorities, as well as feasibility for implementation. This strong governmental involvement not only enhances the relevance and sustainability of the interventions, but also fosters a sense of shared responsibility and accountability.

94. Inhibiting factors:

- The lack of human resource capacity (i.e., number of staff as well as their thematic expertise) of the CO, in terms of both administrative staff, and senior technical experts in the thematic areas, is perceived as an inhibiting factor by some stakeholders. This limitation affects the CO's ability to provide dedicated support, which in turn impacts stakeholder engagement for partnerships and support in their own work related to UNFPA's focus areas. For example, one of the key-informant stated that: *"The Malaysia country office is small, and there is a lack of dedicated staff to handle the growing challenges of population ageing"*. This challenge highlights the need for strengthening the human resources within the Malaysia CO to ensure that it can effectively meet the demands of its stakeholders/partners/collaborators. Enhancing the capacity of both administrative and technical staff would enable the CO to offer more comprehensive and timely support, fostering stronger partnerships and collaboration. Further elaboration is provided in the answer to EQ7 on Efficiency.
- UNFPA is perceived by some CSOs as having limited influence at the policy level in its areas of mandate, such as SRH and GEWE. This perception is partly due to a lack of awareness among CSOs about UNFPA's contribution to SRH in the country, apart from the organizations/individuals they have directly collaborated with, either currently or in the past. One of the key-informant stated: *"about the work of UNFPA....we have*

¹⁶⁵ Parliamentarians' Regional Meeting on Ageing Preparedness and Care Economy in Asia, UNFPA Event Report, 2024

¹⁶⁶ Draft report from the Workshop on the National Policy and Plan of Action on Ageing 2023-2030

¹⁶⁷ LPPKN Plan of Action

¹⁶⁸ Cost-sharing arrangements between GOM and UNFPA: Interview with government key-informants, Aug-Sep 2024

worked with UNICEF, we have some collaboration with them, in the past, we did some programmes with them, we are also looking into working with children, we are more focused on working on violence against women and children". Similar views were expressed by other key-informants belonging to different stakeholder categories. This issue appears to stem from limited visibility and strategic outreach by the UNFPA Country Office (CO), which warrants further attention.

- Financial barriers among CSOs hinder their ability to meaningfully engage with other organizations in their area of work, including with UNFPA, to advocate for the fulfilment of SRH needs. When asked about financial concerns, one CSO key-informant stated, *"financially, of course. To talk about the financial aspect that is one of our constraint. You know, we have to look for funding"*. Similar views were also shared by other CSO key-informants. This financial constraint limits their capacity to form partnerships and often leads to overlapping efforts, resulting in inefficient use of resources and under-utilization of expertise and capacities in the country. UNFPA is well-positioned to address these challenges by engaging with CSOs to advance SRH in the country. By bringing these organizations onto a common platform or leveraging on existing platforms, UNFPA can facilitate better coordination and collaboration, ensuring that resources are used more efficiently and expertise is fully leveraged. This approach can help overcome financial barriers by pooling resources and fostering a more integrated and strategic effort towards achieving SRH goals. Additionally, UNFPA's support to collaborative platforms can enhance their visibility in the country, as well as that of CSOs, further uniting and amplifying their collective voices for better impact.
- There has been limited work and focus on the 3TRs by UNFPA for certain groups, such as undocumented migrants and refugees. Engaging and working with non-citizens presents significant challenges, primarily because the CP is co-funded by the Government, and the funds provided by the Government are restricted to use for citizens of the country only. This funding limitation poses a significant barrier to addressing the SRH needs of undocumented migrants and refugees, who are often among the most vulnerable populations. To overcome this challenge, UNFPA could explore alternative funding sources. One of the key informants stated that: *"UNFPA's resources have helped to leverage additional funding from government sources, though efforts to engage private sector funding are limited"*. UNFPA could also improve its partnerships with international organizations and NGOs that have mandates to support non-citizens. By diversifying its funding base, UNFPA can expand its reach and ensure that the 3TRs are inclusive of all individuals, regardless of their citizenship status. As one key-informant stated: *"there is a need to scale up resource mobilization to better address gaps in funding"*. Another informant stated that: *"the private sector and individual giving are potential sources of additional resources for UNFPA"*. The informant further added that *"high-net-worth individuals in Malaysia have already shown a willingness to contribute to global UNFPA causes, such as the Gaza crisis."*

4.6 Answer to evaluation question 6

EQ6E: To what extent have CP strategies been adapted to the context of an Upper Middle Income Country, particularly in terms of normative role, financing models, policy influence and strategic partnerships, including through SSTC?

Summary of findings: UNFPA in Malaysia will need to establish its continued relevance by evolving, adapting and aligning its programme strategies to the context of an Upper Middle Income Country (UMIC), through innovative financing models, thought leadership, policy influence and strategic partnerships. Given its normative role of being a key driver to accelerate progress towards the 3 TRs and ICPD-POA, UNFPA has the opportunity to become a driver for the future through devising strategies for provision of more integrated family planning, maternal health, GBV and demographic transformation interventions to the communities most in need in line with the LNOB and "reaching the furthest behind first" principle, while aligning with support that other UN agencies are providing. Within the UMIC context, UNFPA's role in facilitating Malaysia's effective partnerships with the global south will be vital through enhancing South-South and Triangular Cooperation exchanges, fostering policy dialogue and knowledge exchange to promote good practices and lessons learned.

Finding #30: UNFPA strategies under its CP need to evolve and adapt to the context of an Upper Middle Income Country

95. Malaysia as a UMIC has made significant progress in reducing preventable maternal deaths and childhood illnesses, expanding contraceptive choices and family planning services, and accelerating the participation of

women in public life and their contribution to the country's economic growth¹⁶⁹. Despite this progress, Malaysia continues to struggle with various challenges that keep the country bound to a middle-income trap. Emerging evidence highlights the existing inequalities in the country, amidst its economic growth, requiring immediate attention and action from agencies¹⁷⁰, such as UNFPA working in areas of its mandate. Addressing the social and economic challenges requires strategic planning and allocation of resources by the Government, in collaboration with UN agencies and various other key stakeholders.

96. Furthermore, in transitioning towards a High-Income Country (HIC) during the course of the current decade, Malaysia will continue to be faced with reduced share of assistance from UN agencies as their ODA share will be gradually decreased, consequently impacting core resource allocations for UNFPA CPs. The current strategies of the CO are not adequately aligned to effectively fulfil its mandate, such as supporting the country in addressing challenges within its focus areas¹⁷¹. This gap is further compounded by the potential reduction in core funding for programmes and activities, highlighting the critical need to prioritize resource mobilization from alternative sources.

97. UNFPA's normative role at the country level, primarily focuses on areas related to SRHR, adolescents and youth, population dynamics, and gender equality and women's empowerment. The mid-term review of UNFPA Strategic Plan, 2022-2025 places additional emphasis on the importance of this role and prioritizes it as a key driver to accelerate progress toward the 3TRs and the ICPD PoA. *"The midterm review found that at the global level, overall, the current pace of acceleration remains inadequate to achieve the three transformative results by 2030. Only a handful of countries have acceleration rates, if maintained, to achieve the transformation results."*¹⁷²

98. The change in the global landscape – with climate change, demographic shifts, growing inequalities, and technological advancements reshaping the world, a UMIC like Malaysia has its planning and strategy setting very much in line with advancements towards managing these megatrends and meeting the development challenges they bring. The upcoming 13th Malaysia Plan is a testament to the fact that the Government's planning outlook is geared towards devising national policies and strategies that are responsive to the changes in the global landscape that would impact Malaysia¹⁷³. However, UNFPA's current programme is not sufficiently adapted to the context of a UMIC for its continued relevance in Malaysia.

99. Just as an example, Malaysia has achieved gender parity in education in line with expectations one would have from a UMIC, but the SDG targets for female representation in Parliament or female labour force participation are low¹⁷⁴, coupled with women's rights issues facing challenges. Hence engagement and relationship-building with women and men leaders (including religious leaders) and the women's forum/caucus in the Parliament, for example, can be an avenue to be explored so that a push for gender-responsive budgets, programmes, and policy-formulation can be made. Existing gender gaps in the political and governance systems in the country need to be pro-actively and continuously challenged as part of UN GRG work in order to ensure that women's voices are heard and their needs are met. This is because *"Malaysia is still far behind in other key areas including economic participation (97th) and political participation (117th)"*¹⁷⁵.

Finding #31: Innovative financing models, effective policy influence and partnerships are needed to ensure sustainability of plans and programmes of UNFPA Malaysia

100. UNFPA currently has insufficient strategic partnerships and lacks innovative financing models that could have been developed with the private sector, foundations, corporate entities, etc.¹⁷⁶. The CO could have leveraged on their relationship with the Ministry of Economy and expanded their ties to other Ministries or foreign companies investing in the country. For example, partnerships with pharmaceutical companies, healthcare providers, and social enterprises to develop and implement new SRHR products and services would

¹⁶⁹ <https://malaysia.unfpa.org/en/news/building-momentum-towards-inclusivity-equity-and-rights-malaysias-women-and-girls>

¹⁷⁰ Proceedings of the National Population Conference (PERKKS) 2023

¹⁷¹ UNFPA CPD 2022-2025, Interview with key-informant from UNFPA CO, Aug-Sep 2024

¹⁷² Integrated midterm review and progress report on the implementation of the UNFPA strategic plan, 2022-2025).

¹⁷³ https://www.malaymail.com/news/malaysia/2024/09/05/understanding-rmk-13-how-the-13th-malaysia-plan-aims-to-address-global-local-challenges-for-countrys-economic-future/149382#google_vignette, UNFPA CPD 2022-2025

¹⁷⁴ United Nations. (2023). *The Sustainable Development Goals Report 2023: Special Edition*. United Nations Publications.

¹⁷⁵ <https://suhakam.org.my/portfolio/gender-equality/>

¹⁷⁶ Impressions gathered from stakeholder interviews, Aug-Sep 2024

have brought in additional resources, expertise, and innovative approaches to SRH service delivery. Additionally, the recent increase in technology investments in the country (and hence, the presence) by tech titans such as Microsoft¹⁷⁷ and Google¹⁷⁸ for example, is an opportunity that UNFPA could have considered for collaboration on innovative projects that are of interest to both parties.

101. UNFPA's policy influence currently is not fully exercised through entities close to policy-makers and decision-makers as per the assessment of the ET¹⁷⁹. The existing partnerships could have been evaluated and re-strategized to ensure that policy-makers and decision-makers are not only reached but are also continuously influenced for change. The CP currently lacks partnership and resource mobilization strategy as well as an action plan, including a clear mechanism for measuring the impact of partnerships and the changes they bring.

Finding #32: UNFPA's role in facilitating Malaysia's effective partnerships with the global south will be vital through enhancing South-South and Triangular Cooperation

102. South-South and Triangular Cooperation represents a shared vision among the peoples and countries of the South, shaped by similar development pathways, as well as shared challenges. Every country has something to bring to the table in a common attempt to find and share solutions that are both cost-effective and easier to adapt to each country's unique situation. One key-informant, realising the limited work of UNFPA Malaysia with other countries in the global South stated: *"there is room for more exchange and cooperation between Malaysia and countries in Africa and Asia"*. The opportunities for Malaysia to showcase its progress and the lessons it for it to learn from the countries of the global south in areas of UNFPA mandate (eg. Maternal Health, OSCC, Islamic Finance innovations and social protection) have not been well capitalized according to the assessment of the ET. One key-informant also stated that *'the experience from Thailand's SSTC activities, such as in gender issues, could serve as a model for Malaysia'*. These exchanges could have fostered policy dialogue and knowledge exchange to promote good practices and lessons learned as well as foster collaboration if it was focused by the CP.

103. The CO hosted side events during global undertakings (2024 CPD57 side event organized by Philippines and participated by Malaysia and Thailand on "Optimizing ASEAN Population Dynamics through SSTC"; May 2024 CPD57 side event on "Gaining insights and lessons from the implementation of the AP Ministerial Declaration on PD / ICPD-PoA" organized by Bangladesh, Nepal, Malaysia; November 2023 7th Asian and Pacific Population Conference (APPC) side event in Bangkok on "Addressing the implications of demographic change" by Indonesia, Malaysia, Thailand, and the Philippines¹⁸⁰. While these events facilitated valuable discussions with experts and diverse stakeholders, leading to new opportunities and strategic partnerships, the formal initiation of more country-to-country exchanges under the SSTC mechanism could have significantly enhanced potential benefits for a UMIC like Malaysia.

Evaluation Criteria: EFFICIENCY

4.7 Answer to evaluation question 7

EQ7Ey: To what extent have **human, financial, and administrative resources** been sufficient, adequately allocated and managed, including on aspects of strategic communication, knowledge management, innovation and digitalization, and to what extent have efforts been made to **leverage joint UN system resources**, including possible common back office services, to achieve the country programme results?

¹⁷⁷ <https://www.reuters.com/technology/microsoft-invest-22-bln-malaysias-digital-transformation-2024-05-02/>

¹⁷⁸ <https://www.reuters.com/technology/google-invest-2-bln-data-centre-cloud-services-malaysia-2024-05-30/>

¹⁷⁹ Impressions gathered from stakeholder interviews, Aug-Sep 2024

¹⁸⁰ UNFPA Annual Reports; Interviews with UNFPA CO, as part of KII, Aug-Sep 2024

Summary of findings: In overall terms, UNFPA has managed to deliver well on its mandate; however, limited in-house staff capacity and frequent change of leadership, and late receipt of resources impacted continuity in relationship building and active engagement with key stakeholders. With the support of technical advisors/consultants, the CO is progressing towards achieving targeted results, albeit slowly. Human resource constraints have led to reliance on consultants, perpetuating the need for the CO to strengthen its capacities. With the support of technical advisors/consultants, the CO is progressing towards achieving targeted results, albeit slowly. Flexibility in accommodating programme demands with a small staff is duly acknowledged. Outsourcing strategic communications to an outside entity has worked to the advantage of the CO within the prevailing staff-constrained environment. CO planning, monitoring and reporting systems need to be augmented for more robust results reporting and monitoring. To meet programming needs, there is a need for additional and more flexible funding being mobilized. Islamic Finance deserves recognition as a good example of innovation. Perceived by UNCT members as an influential player, UNFPA has been a key advocate of integrating issues related to women and girls, and at-risk populations in the agenda of UN programmes in Malaysia in a coordinated manner. UNFPA's institutional strategy for supporting commitment for UN Reform was translated well at the country level. Its leadership of the UN Gender Results Group is well-recognised and duly acknowledged. More effective coordination with UN agencies is needed for leveraging joint resources and making best use of programmatic and operational synergies.

Efficiency in Leveraging Human, Financial and Administrative Resources:

104. As reflected in Chapter 3 of this report, the total utilization for each of the thematic areas remains within the 64-72 per cent range, with GEWE being the lowest at 64 per cent and SRH being the highest at 72 per cent. The overall utilization rate for the 4 outputs averages out to 68 per cent with expenditures totalling USD 1,580,330. The ET was informed that numbers for budgetary allocations for 2025, which is the last year of the CP/CPAP implementation, were not yet available. This reflects that more effective financial planning is needed for being able to have more command over what is planned for the remaining duration of the CP and how best the remaining pot of money available for programming can be utilized. It was also noted that as compared to planned CPD allocations of overall resources for the four themes, the actual allocations recorded up to 30 June 2024 (table 3.4), reflected a deviating picture from what was planned (*SRH allocations constitute 40 per cent of the budget as compared to 16 per cent planned under the CPD, AY allocations constitute 8 per cent of the budget as compared to 20 per cent planned under the CPD, PD allocations constitute 16 per cent of the budget as compared to 11 per cent planned under the CPD, and GEWE allocations constitute 36 per cent of the budget as compared to 48 per cent planned under the CPD*). The CO did not provide any specific reasoning for this differently distributed percentage amongst the themes when queried. The late signing of the CPAP and late receipt of non-core resources has in any case impacted the CO's efficiency for timely delivery, so effective financial planning for the year ahead is all the more necessary¹⁸¹.

Finding #33: In overall terms, UNFPA has managed to deliver well on its mandate; however, limited in-house staff capacity and frequent change of leadership, and late receipt of resources impacted continuity in relationship building and active engagement with key stakeholders.

105. With the support of technical advisors/consultants, the CO is progressing towards achieving targeted results, albeit slowly (due to late receipt of Government funds), in particular through interventions related to: research studies and policy-making considerations through advocacy; creation of increased public awareness and engagement on sensitive issues of gender, SRHR, GBV, ageing; supporting Government delegations for CEDAW and ICPD; engagement with religious leaders to support advancement of CSE, GBV; sustaining the Malaysia Women and Girls Forum as an effective platform for tabling key issues, including sensitive ones, with impact to influence policy. In table 4.1, progress recorded on CPD output indicators contributing to programme outcomes appears limited as of now (for the June 2024 cut-off period of this evaluation), as programmatic activities took off only in the latter part of 2023, when funds became available, hence most of them are still in progress and few have reached completion. The remarks provided in the table give an indication of the progress made until mid-June 2024, which is appreciable, given that the time for implementation has been less than 12 months.

106. With limited human resources and budget, the CO has been able to work with strategic partners to leverage and deliver, optimizing on the technical expertise within the UNFPA CO and outside, when it was needed. APRO has been of support in this regard in terms of making their technical capacities available for CO use. The activities implemented under programme interventions appeared to be reasonable for the amount expended. Most

¹⁸¹ As shared by the UNFPA Malaysia CO based on data derived from Cognos and QuantumPlus financial platforms; the late signing of CPAP and late receipt of funds was confirmed in Key Informants Interviews with CO staff and Implementing Partners, Aug-Sep 2024

respondents were not able to comment on the criteria of efficiency in detail, but amongst those who did, most felt that UNFPA had managed its funds efficiently¹⁸². While demonstrating flexibility in accommodating programme demands, the CO adapted the programme to the changing environment without hampering the planned programme. The CO managed and mitigated risks as they foresaw them during the programme cycle. In their own words: *"While there are risks such as procurement delays and issues with securing vendors, particularly post-pandemic, the overall efficiency and impact of our work outweigh these challenges. Our partnerships help mitigate these risks."* However, any systematic Risks and Assumptions analysis documentation was not available for assessment¹⁸³.

107. Nearly every IP interviewed acknowledged UNFPA's role as a credible and efficient partner, with significant positive impacts, particularly in the area of policy development and capacity building. They indicated that they have benefited from its pool of national and international technical expertise in the context of new ideas being generated, helping solve many of their problems. In terms of administrative and financial procedures as well as implementation modalities to allow for a smooth execution of the CP, there were mixed views expressed from partners. In general, interviewees expressed appreciation for UNFPA's timely support for allocation of resources. However, some IPs highlighted¹⁸⁴ that late signing of the CPAP document and bureaucratic procedures such as late signing of AWP resulted in consequent delay in release of Government funds, and impacted delivery. Also, UNFPA's corporate restrictions on end of fiscal year expenditures impacted IP effectiveness, posing implementation challenges. An additional challenge is frequent changes in IP management and their respective priorities, which at times impacts progress of implementation¹⁸⁵. A couple of testimonials from IPs: *"UNFPA's projects have had significant positive impacts, particularly in the area of policy development and capacity building. However, delays in fund disbursements and data access remain key risks that could undermine the long-term sustainability of these efforts."* And *"UNFPA's activities have had a positive overall impact, but delays in funding disbursement sometimes pose a challenge. While they communicated well and developed strategies to mitigate these risks, ensuring timely funding in the future would help minimize any negative impact on project continuation."* The CO indicated that in general, implementing partners provide positive feedback on technical support provision by the CO, but do face delays in funds disbursement and administrative processes.

108. Reflections from respondents¹⁸⁶ indicated that senior staff transition during the period under review remained a concern, as it brought lack of continuity in relationship building and took time in on-boarding of interim or short-term arrangements put in place. This was reflected upon by a range of stakeholders, in particular UN entities. This also meant that mid-level staff had to multi-task, undertake multiple management activities and engage as much as feasible with higher level processes while addressing a multitude of other day-to-day challenges. This impacted possibilities for more engagement in national level policy discussions. It is hoped that now with funds in hand and new top leadership in place since June 2024, for the remaining 1.5 years period of the CP until end-2025, the pace of implementation will be uplifted to meet the targets set for output indicators in the CPD results and resources framework and corresponding contribution to UNSDCF/CP outcomes.

Finding #34: Human resource constraints have led to reliance on consultants, perpetuating the need for the CO to strengthen its capacities

109. Human capacity constraints within the team have impacted on the CO not being able to fully exercise its mandate in areas where it would have liked to do more, for example on women's economic empowerment and improvement in their labour force participation, care economy, engaging men and boys on GBV, resource mobilization (including tapping private sector resources), and working with the Government and partners on PD for data analytics, evidence generation and translating to policy formulation, design and implementation¹⁸⁷.

110. Due to reliance on consultants to help the CO deliver on its mandate, with the break-in-contract clause in place, there is lack of continuity, with periods of lesser engagement due to limited capacity and small office size. As key informants¹⁸⁸ from the UNFPA regional office as well as from the UN entities in Malaysia pointed

¹⁸² Interviews with Implementing Partners as part of Key Informant Interviews Aug-Sep 2024

¹⁸³ Feedback from CO staff

¹⁸⁴ Interviews with Implementing Partners as part of Key Informant Interviews Aug-Sep 2024

¹⁸⁵ Feedback from IP and CO staff as part of Key Informant Interviews Aug-Sep 2024

¹⁸⁶ Interviews with stakeholders as part of Key Informant Interviews Aug-Sep 2024

¹⁸⁷ Feedback from CO staff, corroborated in interviews with UN entities / other partners as part of Key Informant Interviews, Aug-Sep 2024

¹⁸⁸ Interviews with key informants, Aug-Sep 2024

out that this is an over-burdened team, not having sufficient human resource capacity, leading to outsourcing: *“The reliance on long-term consultants instead of permanent staff impacts the sustainability of programmes, as outsourcing key functions is not a sustainable approach”* and that *“UNFPA’s use of consultants has sometimes impacted continuity in its programmes due to lack of regular presence. The reliance on external expertise can lead to a loss of institutional memory, but its focus on engaging key national partners helps to mitigate these risks.”*

111. In light of the needs on the ground, the CO will greatly benefit from strengthening its capacity in the Gender programming area for example, given that GBV (and GEWE) is one of the three transformative results of the UNFPA SP, which is firmly embedded in the CO’s mandated areas of work. Giving due consideration to the social and cultural context of Malaysian society, gender assumes a significant aspect that needs to be carefully handled at a strategic level. In discussion with Government entities, interest was expressed for UNFPA to do more in the area of PD, especially since reliable data is available, thanks to strong national capacities present (in DOSM) to generate good quality data. The question at hand is how to take this data forward in terms of analysing demographic trends, thereby enabling better planning, policy development and response strategies¹⁸⁹. In this regard, UNFPA can support the Government in this area of work if it had dedicated capacity with PD expertise and in data analytics. Dedicated capacity in other areas such as communications, M&E, and reporting remains a gap. The CO is also in need of capacity support in the area of strengthening partnerships and mobilizing funding and financing support¹⁹⁰.

Finding #35: There is a need for additional and more flexible funding being mobilized

112. CPE findings reflect that over and above the Government funding available, there is a dire need for more flexible funding being made available for programming. Therefore an area that needs focused support is resource mobilization. At present, there is no donor for UNFPA apart from the Government, which automatically results in limitations being imposed on the amount of resources available for programming, and their use. This is because, firstly: the funding envelope for the Government contribution is predetermined when the CPD/CPAP is agreed with the Government and remains fixed at that amount for the currency of the programme cycle; secondly, it comes with restrictions, whereby Government funds cannot be directed to certain segments of society comprising of marginalized, undocumented persons that UNFPA is committed to reaching out to and supporting. The ET assessed that even though the CO has met the CPD’s “other” or “non-core” resources target, in light of the reasons mentioned above, additional resources being mobilized will facilitate not only more interventions being in place in areas where needed the most and where requests for support have been received but could not be accommodated due to restrictions on use of funds or shortage of funds, but also enable the CO to have more bodies in place for critical functions that need focused attention¹⁹¹. In addition, the intended expanded scope of the new CPD will warrant additional financial and technical resources to be in place to take the CP objectives forward.

Finding #36: Outsourcing strategic communications to an outside entity has worked to the advantage of the CO within the prevailing human resource constrained environment

113. Outsourcing **strategic communications** to an outside entity has been effective in terms of handling all aspects of communication and social outreach on behalf of the CO, reducing its burden in the absence of staff capacity to take on this load. Several communications functions, including: design, social media outreach, lobbying with Govt entities (including Parliamentarians), strategizing advocacy around sensitive areas of work and supporting UNFPA in pushing the narrative, creating entry points, strategizing and overseeing events, are all embedded in one company. This is an experiment that has worked to the advantage of UNFPA Malaysia. Key areas highlighted¹⁹² in which the external communications entity was able to provide critical support to the CO include:

- helped shift Malaysia’s socio-political narratives towards gender issues like anti-sexual harassment laws and period poverty; involved key local figures, academics, and politicians in these efforts, making UNFPA’s messaging more aligned with Malaysia’s national priorities;
- through advocacy, introduced localized narratives, which connected more with Malaysians;

¹⁸⁹ Views expressed by Government counterpart agency during Key Informant Interviews, Aug-Sep 2024

¹⁹⁰ Information gathered through discussions with CO staff and select partners during Key Informant Interviews, Aug-Sep 2024

¹⁹¹ Information gathered from CO staff and select partners including senior UNCT official, during Key Informant Interviews, Aug-Sep 2024

¹⁹² Interview with the outsourced external communications agency The Big Picture, Aug-Sep 2024, corroborated by the CO

- UNFPA's commitment to Malaysia's international obligations, like CEDAW and SDGs, helped maintain credibility, while advocacy campaigns on sensitive topics, such as bodily autonomy, resonated with grassroots organizations;
- collaboration with UNFPA during the pandemic significantly elevated issues like GBV and period poverty, leading to legislative changes, such as anti-sexual harassment bills and policies for women's social protection;
- partnerships with local stakeholders, including grassroots movements, have created a ripple effect in policy changes, addressing SRHR and GBV, and have helped make UNFPA's interventions more effective by aligning them with the socio-political climate in Malaysia.

114. However, given the feedback from stakeholders regarding UNFPA's limited visibility and outreach in the larger arena of CSOs, and the general public, the ET has assessed that in addition to the outsourced entity, the presence of a communications focal person within the CO is considered important, to be seen more as the face of UNFPA, backed up with support from the external outsourced entity¹⁹³.

115. The area of **knowledge management** needs more focus in terms of documenting best practices, and developing material around success stories that can be replicated to benefit the population at large. This will result in more effective generation and dissemination of knowledge, data, and guidance on SRHR, GBV issues, and demographic transitions, and support effective application of that knowledge for programming. Showcasing and demonstrating the impact of successful interventions through effective reporting will contribute to strengthening partnerships and mobilizing more resources for meeting the needs of vulnerable populations. In addition, more assessments are needed on how some of the capacity building and training activities have benefited targeted persons or communities, so that these can be made more effective while incorporating corrective measures and enhancing impact. This function can be tied to an enhanced M&E, reporting and communications capacity in the CO, with support being taken from the outsourced communications entity for developing the material. **Digitalization** is an area that needs to be tapped further as technological advancements have not been sufficiently made use of in adopting these for SRH and GEWE initiatives. CPE findings reflect that for CSE promotion, digital communication materials were developed and distributed through social media and other channels, and advocacy campaigns, CSE forums and dialogues were conducted to strengthen support for using technology and innovation for CSE teaching¹⁹⁴.

Finding #37: Islamic Finance deserves recognition as a good example of innovation

116. An area of **innovation** has been the tapping of Islamic Finance. The *Orange Perpetual Fund*, is a scholarship programme designed to sustainably support the tertiary education of children of domestic violence survivors. The *Work Kafala Programme*, a collaboration between the UNFPA and the International Research Centre of Islamic Economics and Finance (IRCEIF) at Selangor Islamic University (UIS), is designed to economically empower survivors of domestic violence by addressing financial literacy and economic abuse. Both programmes are at early stages of taking off, with systems being set up and beneficiaries being identified. Possible risk areas are also being addressed. In the CO's words: *"The main risk we face is identifying the right beneficiaries, particularly for sensitive issues like domestic violence. However, mechanisms like focus group discussions and partnerships with NGOs are in place to mitigate these risks. We are diversifying funding sources to reduce reliance on specific streams like Zakat, which has restrictions on beneficiaries. This helps mitigate risks related to funding limitations."* There is an opportunity to scale up these initiatives at the national level by UNFPA and its partners¹⁹⁵. With the Government keen to establish Malaysia as a global and regional hub for Islamic Finance¹⁹⁶, the CO would benefit from receiving targeted support at the UNFPA corporate level for facilitation of such ventures.

Finding #38: UNFPA staff's professionalism and goal-oriented approach is appreciated by its partners

117. Key informants¹⁹⁷ duly recognized the professionalism and goal-oriented approach as well as congenial attitude of the UNFPA staff. UNFPA was strategic in sharing technical approaches and knowledge through

¹⁹³ Impression gathered from a range of stakeholders, particularly NGOs, during Key Informant Interviews Aug-Sep 2024

¹⁹⁴ UNFPA Annual Report 2023 and Key Informant Interviews, Aug-Sep 2024

¹⁹⁵ Interviews with CO staff and APRO as part of Key Informant Interviews Aug-Sep 2024

¹⁹⁶ Infographics of the upcoming 13 Malaysia Plan

¹⁹⁷ Interviews with stakeholders as part of Key Informant Interviews Aug-Sep 2024

national and local coordination mechanisms including bilateral dialogues, in line with requests received from government agencies and implementing partners. This indicates a good partnership approach and the ability to implement programmes effectively through long-term partnerships with multiple stakeholders, targeted technical training and strategic policy advocacy. UN entities are also appreciative of the CO staff being able to bring to the table in negotiations with the Government, diplomatic skills that allow them to build support for inclusion of sensitive areas of work into national plans and policy frameworks using appropriate mechanisms and entry points.

Finding #39: Flexibility of IPs in overcoming delays and institutional barriers is duly acknowledged

118. The delayed receipt of funding significantly impacted the commencement of activities by the IPs. Despite this setback, the partners demonstrated commendable flexibility by utilizing the limited time available to achieve their objectives. *“There were issues with the timely provision of funds by UNFPA, which affected the planning and execution of projects. For instance, delays in funding caused the postponement of activities related to the publication of demographic studies”* (Key-informant). Another example was the willingness of an IP to use their existing resources in their organisation to implement an agreed intervention for UNFPA without using the latter's fund (as they were not able to, having passed the funding period to complete their intervention). Given the institutional barriers, such as the complexities of fund disbursement within university settings, and the additional challenges posed by unforeseen circumstances (e.g., illness and staff changes), the partners managed to deliver substantial results. Their ability to navigate these obstacles and still produce meaningful outcomes within a constrained timeframe is noteworthy. This evaluation acknowledges the partners' resilience and resourcefulness in overcoming both anticipated and unexpected challenges, highlighting their commitment to the project's success despite the initial delays.

Finding #40: The CO planning, monitoring and reporting systems need to be augmented for more robust results reporting and monitoring

119. In terms of planning systems and platforms in place in UNFPA corporately, the Strategic Information System (SIS), is the platform where all COs at the beginning of the year discuss and put their annual plans in the system together with indicators and milestones. There is also a section on operational effectiveness and efficiency, where COs place areas of management-related outputs and milestones related to finance, human resources, and procurement. Discussions with CO staff¹⁹⁸ reflected that as part of annual work planning, based on CPD indicators, quarterly milestones/targets are set at output level, and the CO's annual work plans (AWPs) are entered into the SIS platform. For activity-level quarterly monitoring against each AWP, the CO relies on the newly introduced headquarters reporting platform – Quantum. This information forms the basis of output-level quarterly monitoring and reporting of results undertaken by the CO on Quantum Plus (which has replaced SIS in 2024).

120. CPE findings reflect that programme monitoring has mainly focused on activities performed, especially at IP levels, and not at the results and outcome levels of those activities. While the CPD and CPAP include a set of indicators for progress monitoring at programme components level and the AWP include indicators at project level for each IP, it was not clear how indicators at the IPs' level contribute to CP output indicators. The IPs have access to Quantum Plus, that enables them to enter data on workplan progress reports (including indicators progress and activities progress) and direct payments requests. Progress reporting of IPs focuses on activities, and there was seen to be a lack of reporting on the progress and achievement of project indicators, making it challenging to monitor the actual progress made compared to the progress expected in the timeframe concerned. The CO would benefit from introducing smarter ways of defining the indicators incorporated, with increased emphasis on keeping the language more results-based and less process-based¹⁹⁹.

121. Moreover, IPs appear to have different understanding and interpretation on the information to be included in the quarterly or standard progress reports required by UNFPA, which is reflected in the substance and quality of the quarterly reports, which vary across IPs. Reporting on activities such as training exists, without any details on what were the outcomes and achievements or how these activities contribute to the UNFPA CP. Also, whether participants made use of their enhanced knowledge to bring about change in their daily life. This lack of

¹⁹⁸ Interviews with CO staff as part of Key Informant Interviews Aug-Sep 2024

¹⁹⁹ Assessment based on comparison of APRs for successive years 2022-2023

sufficient quality of progress reporting limits evidence being generated on good practices to inform programme and policy development.

122. It is evident from the document review and interviews conducted with concerned entities that the progress at the level of project activities and outputs has been regularly monitored and reported, and corrective measures attended to. Monitoring data have been considered during planning processes. However, all interventions are designed around AWP which do not specifically include risks and assumptions / mitigation plans. It may be useful to conduct internal programme progress reviews in conjunction with the SIS reporting timelines, in which in addition to progress towards annual targets and outcome/output level results being discussed, programme component complementarities can be discussed and coordinated. Periodic monitoring missions would be important, with Back-to-Office monitoring visit reports documented, capturing detailed reporting on results and target achievement with action plans established as follow-up. In discussion with the CO²⁰⁰, it was indicated that though quarterly calls with IPs were planned to understand how work had progressed, it was challenging to follow through and implement this plan due to shortage of staff.

123. The above findings reflect that more can be done to augment the current monitoring and reporting system the CO has in place. Various COs have made in-house adjustments by introducing tools and mechanisms that have enhanced tracking and oversight of programme budgets, resources, and progress of activities against planned targets, on real-time basis. APRO could facilitate by identifying such COs and link UNFPA Malaysia to those whose home-grown measures introduced to strengthen monitoring mechanisms and overcome some of the gaps that exist in corporate planning and reporting systems, such that these good practices in other COs can be replicated and availed by UNFPA Malaysia.

Efficiency in Leveraging Joint UN System Resources:

124. The UNCT in Malaysia consists of the following Resident and non-Resident Agencies:

Table 4.2: The United Nations System in Malaysia

Resident Development Agencies	Resident Humanitarian Agencies
<ol style="list-style-type: none"> UNDP: United Nations Development Programme UNFPA: United Nations Population Fund UNICEF: United Nations Children's Fund WHO: World Health Organization UNDSS: UN Department of Safety and Security UNU-IIGH: UN University 	<ol style="list-style-type: none"> UNHCR: United Nations High Commissioner for Refugees WFP-UNHRD: World Food Programme IOM: International Organization for Migration
	Non-Resident Agencies
	<ol style="list-style-type: none"> ITC: International Trade Centre ILO: International Labour Organization UNEP: UN Environment Programme OHCHR: Office of the United Nations High Commissioner for Human Rights UN Women ITU: International Telecommunication Union UNDRR: United Nations Office for Disaster Risk Reduction UNCDF: United Nations Capital Development Fund UNAIDS: United Nations Programme on HIV/AIDS UNESCO: United Nations Educational, Scientific and Cultural Organization UN-Habitat: United Nations Human Settlements Programme UNIDO: United Nations Industrial Development Organisation UNODC: United Nations Office on Drugs and Crime

125. UN agencies' work and programmes at the country level are guided by the UNSDCF, which is the strategic document that describes the collective response of the UN System to national development priorities. In determining UNFPA's role and representation, the UNSDCF 2021-2025 took into account the organization's mandate and positioning, availability of technical resources and recognized expertise.

²⁰⁰ Discussion with CO as part of stakeholder interviews Aug-Sep 2024

Table 4.3: UNFPA's Participation in the UNSDCF 2021-2025 Results Framework

UNSDCF STRATEGIC PRIORITIES	UNFPA PARTICIPATION IN UNSDCF RESULTS FRAMEWORK	
Collaborative Outputs	UNFPA CPD - Outputs supporting the CF collaborative outputs	Corresponding UNSDCF Indicators for the collaborative outputs that are to be reported on by participating UN entities
STRATEGIC PRIORITY AREA 1 - PEOPLE		
Collaborative Output 1.1: A more efficient, effective and sustainable social protection system is in place that provides increased protection against contingencies throughout the life cycle.	CPD Output 3 on PD	SDG National Indicator 1: 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, work injury victims and the poor and the vulnerable.
Collaborative Output 1.2: Social services are strengthened to ensure access to high-quality, equity-focused provision that promotes the well-being of all.	CPD Output 1 - SRHR	SDG National Indicator 2: 3.7.1 Proportion of women of reproductive age (aged 15-49 years) who have their need for family planning satisfied with modern methods.
Collaborative Output 1.3: Increased adoption of inclusive social norms and values and rejection of harmful practices, particularly against women and girls, and the creation of demand for services.	CPD Output 2 - AY	SDG National Indicator 3: 5.2.1: Actual case proportion of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner in the previous 12 months, by age and place of occurrence.
		SDG National Indicator 6: 3.8.1 Coverage of essential health services.
STRATEGIC PRIORITY AREA 3 - PROSPERITY		
Collaborative Output 3.2: Further advances are made towards women's equality in the economy.	CPD Output 3 - PD CPD Output 4 - GEWE	National Indicator 2: Female Labour Force Participation Rate (LFPR)

Finding #41: UNFPA has been an active participant in UNCT key undertakings and coordination mechanisms

126. One of the key objectives of the UNSDCF is to promote the implementation of new approaches to coordination mechanisms, improving joint programming, coordinated monitoring, evaluation and reporting amongst UN agencies, through establishment of working and thematic groups. Seen as an influential player in UNCT coordination, UNFPA remains actively engaged in various UNCT coordination mechanisms, including the Operations Management Team (OMT) and the Communications Group. UNFPA representatives take part in these groups, either directly or indirectly, as a lead agency or as a member. Despite being a smaller agency with limited resources, they have been recognized as an entity having made substantial contributions in gender-related initiatives and gender mainstreaming in the UNSDCF.

127. It was highlighted by key informants within the UNCT that UNFPA has an institutional strategy for supporting coordination, especially in terms of how the organization at the country level would support UN Reform, bringing the assets of the organization to the disposal of the UNRC and supporting RCO's coordination function. UNFPA's strong institutional commitment for reform, and its commitment to work towards the achievement of UNCT collective results, was thus seen to have been translated at the country level. A particular reference was made by a senior level UN stakeholder that: *"UNFPA's full engagement with UN Reform, transpired across the board, an example being the fielding (and funding) the PSEA (prevention of sexual exploitation and abuse) coordinator, with its limited available resources"*.

128. Interviews²⁰¹ with UN entities in Malaysia including the RC Office reflected their respect for UNFPA's contribution to UN coordination in Malaysia. They noted that UNFPA-Malaysia had:

- (a) helped mainstream gender into the CCA and UNSDCF process;
- (b) maintained an institutional approach to coordination;
- (c) successfully positioned itself as the 'go-to' agency on Gender, while providing leadership on issues related to women and girls, that was effective in facilitating the UNCT's engagement with Government counterparts

²⁰¹ Interviews with UN entities as part of Key Informant Interviews Aug-Sep 2024

- on these subjects;
- (d) discussions on transcending and promoting UN collaboration with GoM on women's empowerment, are subjects that continue to require careful handling, for which UN entities count on UNFPA's close partnership with concerned counterparts;
 - (e) consistently worked to ensure that Gender issues are a joint effort within the UNCT, leading to stronger national ownership of outcomes;
 - (f) contributions to key initiatives, such as the Socio-Economic Recovery Plan (SERP) and the Humanitarian Response Plan, highlighted the benefits of their involvement - though capacity limitations exist, they have consistently contributed to key outcomes, mitigating risks through effective partnerships;
 - (g) strategic partnerships with the Government have allowed it to mitigate risks and maintain programme effectiveness, especially in sensitive areas such as gender equality that has been beneficial for the UN system

129. An important observation made by a key informant from a UN entity that is to be noted, was: *"While there are informal coordination mechanisms in place, we do not have a joint work plan that could ensure sustainability post-intervention. More formalized efforts, including shared advocacy and resource mobilization, would enhance sustainability."*

130. Also, UN entities felt that the UNCT could gain more from a stronger and (continuous) strategic presence of UNFPA, especially in areas of work it leads in line with its mandate, some of which are in sensitive domains, where UN entities use UNFPA as an entry point for negotiations with the Government.

Finding #42: UNFPA is acknowledged as the lead UN agency for pursuing the UN's gender equality and women's empowerment agenda through its leadership of the UN Gender Results Group

131. UNFPA has played a critical role in consistently leading the **Gender Results Group (GRG)**, which is a platform for knowledge sharing, understanding and coordination of different agencies' work on gender, enhancing participation from various UN agencies over time. UN entities acknowledge that the group has transitioned from being sparsely attended to one with broader representation, thanks to UNFPA's persistent efforts. The senior member of the UNCT acknowledged that *"one of our more successful or more active results groups was the gender results group"*. In the absence of UN Women being a resident UN agency in Malaysia, UNFPA is clearly the lead UN agency for pursuing the UN's gender equality and women's empowerment agenda. However, it is important for it to use a stronger convening power to advocate for a higher commitment from the leadership of UN entities to provide sufficient resources and support in prioritising gender issues within the UN agency programmes, for which UNFPA's thought leadership and continued engagement is vital.

Finding #43: UN system resources have been leveraged to an extent but more can be done through joint approaches, while taking advantage of existing opportunities for programmatic and operational synergies

132. All UN agencies responding to the interviews viewed UNFPA's as a credible partner and acknowledged its positive contribution in bringing its technical expertise in areas of its mandate that enhanced the work of other agencies, along with its contribution in strengthening advocacy in sensitive areas that proved useful for other UN agencies operating in a similar space. While recognizing strengths of UNFPA's work and how they value it as a close partner, UN entities also acknowledged the challenges it faces in leading due to limited human resources and a small in-country presence. Hence it would be to UNFPA's advantage to leverage joint UN system resources, including possible common back office services, to achieve the country programme results.

133. Though UNFPA has engaged in joint studies and initiatives, such as the "Families on the Edge" study with UNICEF, and has been a key partner in shaping policy discussions on the care economy in partnership with UNDP working closely with the Ministry of Women, their participation in joint programmes under the UNSDCF has been less prominent. While referring to the partnership with UNICEF, the CO commented that *"Our collaboration with UNICEF on child marriage advocacy and disability inclusion has strengthened our ability to reach results in the SRHR and GBV outcome areas. These efforts reflect coordination and complementarity between programme components"* UNFPA will benefit from boosting such joint approaches with UN entities in areas of common interest.

134. In the absence of bilateral funding, the Malaysia-UN SDG Trust Fund²⁰² offers an opportunity for UNFPA to tap into, through a joint UN agency approach. The previous such effort did not materialize, and in the upcoming next round, UNFPA will need to compete more effectively for funding, focusing on submitting high quality proposals for joint UN initiatives that align with national priorities and meet the Fund's criteria, in partnership with partner UN entities²⁰³. The CO did, however, succeed in mobilizing UNFPA's SIF (Strategic Investment Facility)²⁰⁴ funding in 2023 amounting to USD 50,000 for the refinement and implementation of Islamic financing solutions in the country.

135. More joint initiatives coming on board with UN partners will help establish programmatic synergies. The CPE assessed that there was interest from agencies such as UNHCR, UNICEF and UNDP to advance joint approaches and initiatives with UNFPA. Messaging that came from UNDP indicated: *"UNFPA has been a key partner in shaping policy discussions on the care economy, working closely with the Ministry of Women. This partnership is critical in ensuring that national stakeholders take ownership of the care worker roadmap, with UNFPA playing a central role in building capacity for its implementation. Their engagement in the care economy project has been highly beneficial, even though capacity constraints are a challenge. Their contributions to policy advocacy and social aspects, alongside UNDP's work on financing, demonstrate the broad benefits of this collaboration. While there are capacity risks due to the small size of their team, the impact of their work outweighs these challenges."* Gender and climate change was also identified as a potential area of collaboration between UNFPA and UNDP. Discussions with partner UN agencies for establishing synergies at the work planning stage can be very helpful and contribute to more efficient use of available resources and bring in economies of scale, dovetailing on each other's strengths and field presence, if applicable.

136. There was lack of evidence on UNFPA's engagement on operational synergies as no concrete examples came through from the key informant interviews and documentation review. More effective coordination with partner UN agencies for leveraging on their logistical support and making best use of operational synergies through effective advanced planning would reduce UNFPA's administrative burden and further expedite provision of support where it was most needed. Operational synergies can be strengthened through the OMT platform. Being part of most of the BOS work streams, this platform of coordinating operational support with UN agencies will provide UNFPA the opportunity to establish more operational synergies with partner agencies and make efficiency gains not only for itself but also for the UN System. Making use of harmonized approaches for joint procurement, logistical support, LTAs, etc. specially for use in emergency contexts, would greatly benefit UNFPA.

4.8 Answer to evaluation question 8

EQ8S: To what extent has UNFPA been able to support implementing partners and rights-holders (notably, women, adolescents and youth) in **developing capacities and establishing mechanisms to ensure the durability of effects?**

Summary of findings: CPE findings reflect a mixed picture with regard to the CO's support for development of capacities and establishment of mechanisms to ensure ownership and durability of effects. The general sense is that because all UNFPA programme interventions and activities are agreed upon between GoM and the CO, are based on Government needs and priorities, and most importantly, are funded by the Government, their ownership and sustainability is ensured. However, there are variations in the prospects for sustainability depending on the nature of the intervention, and on the capacities developed at the national, state and local levels for taking these interventions forward. In this context, CPE findings have assessed that UNFPA has contributed to capacity building at both institutional and individual levels, and sustainability is integrated to an extent, but more effective strategies for ensuring sustainability of interventions for wider replication and adaptation will be needed, for impact to continue when UNFPA support is withdrawn.

137. An assessment was made by the ET of sustainability of UNFPA activities in the context of either being a lasting activity or being a long-lasting effect of an activity. The general sense as determined is that because all UNFPA programme interventions and activities are agreed upon between GoM and the CO, and are based on

²⁰² An initiative of MySDG Foundation and UN in Malaysia, the Malaysia-UN SDG Trust Fund supports catalytic interventions that target those at risk of being left behind. The fund promotes partnerships and a whole-of-society approach to create equitable and inclusive pathways for sustainable development with an emphasis on local action, improved livelihoods and SDG progress in Malaysia

²⁰³ Review of Malaysia-UN SDG Trust Fund criteria; Interviews with RCO staff as part of Key Informant Interviews, Aug-Sep 2024

²⁰⁴ As part of the implementation of the UNFPA Strategic Plan 2022-2025, the Strategic Investment Facility (SIF) has been established as a concerted move to support programme countries shift from a development "funding" model to a "financing" model

Government needs as identified, hence they are sustainable. For instance, enhancing SRH programmes through expanding the role of LPPKN was identified as a key strategy to strengthen the family institution, and is a policy priority identified in the Government's 12MP, and therefore UNFPA activities on this issue have higher chance of sustainability. Challenges for sustainability at Government level were found to include: frequent changes of administrations; lack of regular budget lines in the allocation system of IPs that would enable programme interventions funded by UNFPA to be integrated into GoM's funding system once UNFPA funding ends; and changes in GoM priorities.

138. An overview of the spread of UNFPA activities provided the following overarching perspectives: Sustainability of activities focusing on service provision, for instance, could be achieved by integrating these services into IPs' routine responsibilities with allocated regular funds, or through promoting the activity at higher policy levels. Given UNFPA's programming in a UMIC context in Malaysia, such service-oriented activities are on a limited scale. Activities focusing on research, training, knowledge-sharing or capacity building may be considered sustainable even if these activities do not continue once the funding ends or if those activities could not be tied to routine programmes of IPs - these activities nevertheless have lasting effects due to the skillset having been developed and knowledge having been imparted, thereby building the recipients' capacity – a fact alluded to by UNFPA IPs during discussions with the ET²⁰⁵. Therefore even if an activity (for example, research) has been completed, the capacity has been built, and would benefit the country beyond the programme period. Integration of programmes/activities at the highest policy level, and empowerment-oriented programmes have the highest prospects for sustainability. Challenges to sustainability of UNFPA interventions include: i) lack of effective planning for long-term activities; ii) lack of exit strategy in the design of programme interventions; and iii) activities in which sustainability is not part of the programme from the very beginning.

Finding #44: UNFPA has built capacities at institutional and individual levels in the context of IPs and Government entities contributing to sustainability of interventions beyond UNFPA support; however, more could be done to enhance capacities at the grassroots level

139. UNFPA's interventions, though not having sustainability plans specifically built as part of each programme component, were nevertheless found to be making meaningful contributions to capacity building of national partners, enabling the flow of benefits to continue beyond the intervention's life. Through documentation review and key informant interviews conducted with a range of UNFPA stakeholders, the ET has assessed that in case of Implementing Partners, whether NGOs or academics, and in case of Government entities, UNFPA's contribution to capacity building is well-recognized and appreciated²⁰⁶. In the case of academics (eg. MyAgeing), this contribution has been effective and meaningful, given the fact that younger academics have benefited in particular from research opportunities, and the skills and knowledge gained from the capacity built helped influence national development policies, an example being MyAgeing's involvement with UNFPA leading to improvements in gender and human rights integration in the National Policy on Population Ageing. Capacity building support through knowledge and skill development to PSU-UM has helped influence policies, and the improved skillset has contributed to sustained effects. As mentioned earlier, inroads into national policy development have the greatest prospect for sustainability as they become part of Government policy.

140. In the case of UNFPA-supported NGOs that work with grassroots communities (eg. WAO), grassroots women are being trained to become community advocates, equipped with the necessary knowledge and skills to handle GBV cases, and are provided with practical skills for navigating systems like police stations and hospitals. Developing this network of community advocates helps ensure that even after the project's completion, these communities will continue to have the tools and support needed to manage GBV cases, which is a good example of sustainability being mainstreamed. In the case of partner Ministries, skills developed as a result of capacity-building support from UNFPA in areas such as advocacy on gender equality, for example, have been integrated into the Ministry's operations (eg. MWFCD), which enables the concerned Ministry to sustain these programmes. Such capacity development initiatives have positive influence on programme sustainability, as they help overcome the risk that even if policies are implemented, there won't be enough trained professionals to deliver the services²⁰⁷.

141. It was found that capacity-building at the grassroots level needs more focus, as that would contribute to a more meaningful and sustained approach to advocacy and programme implementation. As an example,

²⁰⁵ Interviews with IP reps as part of Key Informant Interviews, Aug-Sep 2024

²⁰⁶ Key Informant interviews with representatives of Government, Academia IPs, NGO IP, Aug-Sep 2024

²⁰⁷ Key Informant interviews with representatives of Government, NGO IP, Aug-Sep 2024

UNFPA's study on confinement centres, has laid the groundwork for sustainability by strengthening the capacity of institutions like the Ministry of Health. Capacity building of healthcare professionals ensures better outcomes of SRHR services and prospects for sustainability. This support is well recognized; however, if the design of the intervention had adopted more structured capacity building initiatives targeting local NGOs in addition to Government entities, there would have been longer-term prospects for the sustainability of these initiatives²⁰⁸.

Finding #45: Sustainability is integrated in programme design only to an extent, but more effective strategies for ensuring sustainability of interventions for wider replication and adaptation will be needed, for impact to continue when UNFPA support is withdrawn.

142. It was assessed that the CO has an important role to play in increasing the prospect of sustainability of its activities and programmes. It is important for UNFPA to establish programmes and activities with partners that are sustainable and resilient, with sustainability plans/capacity building being part of each of the programme components, enabling the flow of benefits to continue beyond the intervention's life. For instance, efforts to mainstream issues around areas in which IPs have planned activities/programmes, will have a positive effect on sustainability. Sustainability needs to be mainstreamed as an approach while designing interventions, weighing different options when deciding on the type of involvement and choosing the best possible sustainable option, which would need to be discussed with concerned IPs from the very beginning.

143. There are limited good examples of this having being put into practice. In terms of durability of effects, the two **Islamic Finance** initiatives that have recently come on board have integrated sustainability elements into the design of the initiative, by forming strategic partnerships with institutions that are well-recognized within the Islamic finance community, to help ensure the long-term sustainability of the interventions. For example, through collaboration on the Orange Perpetual Fund, UNFPA's partner Yayasan KUIS will continuously seek additional donors, corporate sponsors, and CBOs to ensure the longevity and growth of the Fund, guaranteeing ongoing support for future beneficiaries. The Fund has been designed to perpetually fund beneficiaries by investing the initial seed capital. Part of the funding from crowdfunding campaigns is also reinvested to ensure continuity. Collaboration with partners like IRCEIF (under the Work Kafalah Programme) that can integrate the programme into broader Islamic finance and economic empowerment initiatives, enables IRCEIF to actively engage other potential partners, such as local financial institutions and community organizations, to support and expand the programme's reach²⁰⁹. The Islamic financing initiative is a good example of a programme designed with sustainability in mind. The implementing partner for this initiative, the Selangor Islamic University, considers that though this collaboration with UNFPA is new, there is great potential for sustainability through the integration of Islamic finance in supporting domestic violence survivors. UIS has taken ownership of the initiative²¹⁰ by working with NGOs to verify domestic violence survivors for their scholarship programme. As part of this collaboration, the University has already begun engaging with banks to ensure sustainable financial support, indicating strong local ownership and commitment to continuing these efforts.

144. The **Malaysian Women and Girls Forum** (MWGF), established through UNFPA support to identify, engage and track key social, economic and legislative changes needed to accelerate the rights and well-being of Malaysia's women and girls, has been functioning since 2020 as an annual engagement around a topical, designated theme, with momentum around the theme being maintained through different means. This Forum has served as a bridge connecting stakeholders in public and civil society to address crucial social, economic and political issues and solutions for the advancement of Malaysian women and girls. It has to some extent, also had an influence on policy formulation. Focus has been on empowering local NGOs and building capacity among women activists to ensure that the advocacy continues even without direct UNFPA involvement. Through this Forum, UNFPA's support to sustain programmes like bodily autonomy and period poverty advocacy, has resulted to some extent in having local ownership, with national and state-level actors like the Selangor Government allocating resources towards these initiatives²¹¹.

²⁰⁸ Confinement Centres Report; Interview with representative of UNU-IIGH as part of Key Informant Interviews, Aug-Sep 2024

²⁰⁹ Memorandum of Understanding between UNFPA and the Selangor Islamic University

²¹⁰ Interviews with stakeholders as part of Key Informant Interviews, Aug-Sep 2024

²¹¹ Interview with the external Comms Agency The Big Picture, Aug-Sep 2024; News media article referring to Selangor state contribution: <https://www.freemalaysiatoday.com/category/nation/2022/12/12/health-ministry-launches-initiative-to-combat-period-poverty/> The Selangor Government, through its recently passed state Budget 2023, has allocated RM200,000 to empower women, including through an awareness campaign and the provision of free sanitary pads, making it the first state to introduce such an initiative.

145. While the above examples have been shared as good practices, through discussions with key informants and documentation review, the CPE has assessed that the CO has not given sufficient attention to sustainability aspects at the design phase of interventions, and therefore when planning activities, it appears that there is no systematic conversation and in-depth interaction between the CO and IPs on sustainability either at the design or implementation stages. To quote a key informant: *"While UNFPA has contributed to the sustainability of programmes addressing SRHR, more structured exit strategies and handover mechanisms are needed to ensure that these initiatives continue without external support"*²¹². More effective strategies for ensuring sustainability of interventions for wider replication and adaptation will therefore be needed, for impact to continue when UNFPA support is withdrawn.

146. Another aspect is that the amount of knowledge the CO has access to, both nationally as well as internationally, given its regional and global network, provides an opportunity for enhancing sustainability of interventions. UNFPA can play a critical role in bringing in relevant knowledge and expertise, both of which are key elements needed for developing sustainable programmes. Global experiences, lessons learnt and best practice exchanges through SSTC mechanism can be very useful in Malaysia's context. These have not been sufficiently made use of, and the CO can play a key role in facilitating such exchanges.

Finding #46: Partnerships have been developed which ensure that national partners will take ownership of results upon completion of UNFPA supported interventions

147. UNFPA's support for engagement and participation in national, regional and global events in the areas of UNFPA mandate has greatly benefited concerned agencies (and the Malaysian Government) to increase their presence, present country level data/information and develop partnerships. This has been acknowledged widely and recognised as a significant value addition UNFPA brings to the country. This has also established and strengthened partnerships, built ownership for UNFPA's programme, and in some cases, helped sustain long-term partnerships with some key entities. As an example, UNFPA's sustained partnership with the Ministry of Women, Family and Community Development (MWFCD), has supported the Ministry in representing Malaysia at the CEDAW forum and other international processes, which is well recognised by the Ministry. This partnership has facilitated the Ministry's ownership of results of UNFPA interventions, and for their integration into national policies. As a Ministry official indicated: *"UNFPA has been an active and supportive partner, especially in addressing gender equality and issues related to family development The Ministry has worked closely with UNFPA in aligning national policies with global commitments, particularly on GEWE and ageing. The benefits of UNFPA's support, especially in the areas of gender equality and family welfare, have been substantial. Their assistance has not only helped us meet our international obligations, but also strengthened our domestic policies. The risks of not continuing these partnerships would be the loss of technical expertise and international alignment. To manage the risks of programme discontinuation, we are working on integrating UNFPA-supported initiatives into our national policies, ensuring that they are less reliant on external funding in the future The Ministry is committed to sustaining the programmes supported by UNFPA, especially in areas like gender equality and ageing. We are already working on embedding some of these interventions into national development strategies, which will help in the long-term sustainability."*

148. A key implementing partner of UNFPA is the National Population and Family Planning Board (NPFDB)/LPPKN at the national level, as well as in the states of Sabah and Sarawak. The partnership with the Board has spanned over the past two programme cycles. The ET's interviews with all three entities reflected that UNFPA's partnership with NPFDB/LPPKN has helped strengthen advocacy and changing attitudes, working closely with ministries to improve SRHR and GBV awareness. The collaboration with UNFPA has helped increase LPPKN's technical capacity, especially in SRHR, youth programmes, and gender equality. Respondents indicated that LPPKN programmes are designed to be sustainable and have continued even without UNFPA's support during the COVID-19 pandemic, and the programme can be sustained with the current resources. However, LPPKN respondents at the state level highlighted the fact that while some activities can continue after UNFPA support ends, beyond funding, non-monetary support from UNFPA, such as knowledge sharing and training, is crucial for sustaining these programmes.

149. In the partnership developed with the Ministry of Education, sustainability of the UNFPA-supported PEERS programme has been built, by the Ministry embedding it within the broader health education curriculum within preschool to secondary school, ensuring that it continues to be part of the national education strategy.

²¹² Interview with senior-level stakeholder as part of Key Informant Interviews, Aug-Sep 2024

Under the programme, UNFPA is working closely with the Ministry to train teachers on CSE topics, with the training programmes being designed to ensure sustainability through effective monitoring. The curriculum will also include advocacy programmes addressing sexual harassment, girls' health, and safe vs. inappropriate touch, ensuring a comprehensive approach to reproductive health education. This integration is a significant step towards sustainability, as it ensures that PEERS will remain a core part of the standard school curriculum even after external support, such as from UNFPA, ends²¹³. In the Ministry's view²¹⁴, capacity building for teachers through continuous training, especially in handling sensitive topics like sexuality education, has been key to sustaining the programme's impact.

150. The CO reflected that the partnership with religious leaders is being strengthened with the perspective of establishing their ownership of UNFPA's SRHR initiatives, especially with reference to CSE. An MOU is in the process of being signed with the Mufti of Malacca to formalize the partnership on CSE and women's empowerment. UNFPA's engagement with religious leaders has influenced its Government partner (LPPKN) to take the same approach under the programme with UNFPA, i.e. state religious leaders being embedded in CSE programmes in the states. This will help ensure the sustainability of the programme and pave the way for a long-term collaboration with religious leaders. The CSE modules developed with integrated religious elements will be implemented in schools, and the collaboration with religious leaders, including the Vatican, helps ensure sustainability of these interventions. The CO is working with religious leaders towards institutionalizing these modules to continue even after UNFPA's involvement ends. By securing the support of five key muftis in the National Fatwa Council, UNFPA is building a framework for religious leaders to take ownership of SRHR initiatives. It is envisaged that this coordination will ensure that the Fatwa Council supports critical reforms like the child marriage ban²¹⁵. UNFPA's partnership with institutions like the MCCBHST and the Catholic Church in Sarawak, along with technical capacity-building efforts, has helped lay the groundwork for sustained action on issues such as child marriage and GBV.

151. It is noted and is on record that the Government's funding commitment for the UNFPA 4-year programme has been increased from an earlier allocation of USD 200,000/- per year to USD 600,000/- per year, which is a testament to the Government's commitment to sustaining UNFPA-supported programmes.

152. An area needing attention is ensuring that the policies in Malaysia's socio-economic development plan are followed by concrete budget allocations and public expenditures, which has not consistently occurred. UNFPA's advocacy efforts have made few positive inroads, as also acknowledged by the UNRC Office: *"UNFPA has played a significant role in coordinating gender-focused initiatives such as inputting into national budget processes. They have consistently worked to ensure that gender issues are a joint effort within the UNCT, leading to stronger national ownership of outcomes"*²¹⁶. This is a critical step for sustainability, and UNFPA's advocacy efforts and persistent push in this regard can bring positive results. There has been limited follow-up, and this gap is seen as a key area for improvement. Also, creation of technical working groups and multi-stakeholder partnerships around important themes will greatly contribute to ensuring that national partners take ownership of results after the completion of UNFPA-supported activities, making interventions under the programme, sustainable. This can be effective in the context of supporting the Government in addressing population issues for example, facilitating prioritization of its policies related to population ageing and development, thereby promoting national ownership.

Finding #47: Overall benefits of UNFPA activities are greater than the risks affecting their continuation

153. It is assessed that the overall benefits of UNFPA interventions are greater than the challenges their sustainability faces, hence they will either survive once the programme ends, or if they are to be halted, their effects will be long-lasting. Respondents²¹⁷ highlighted few aspects of benefits versus risks:

"The benefits of UNFPA's programmes, particularly in advocating for women's and children's rights, far outweigh the risks. However, political and cultural barriers remain challenges that could affect the continuation of these programmes if not addressed. One of the risks is the resistance to gender equality initiatives in certain conservative communities, but UNFPA has been proactive in engaging diverse stakeholders to mitigate this. For example, they

²¹³ Fadhlina Sidek. (2024, November 10). *PEERS module in 2027 curriculum to tackle teen pregnancy issues*. Bernama. [Link](#)

²¹⁴ Interviews with stakeholders as part of Key Informant Interviews, Aug-Sep 2024

²¹⁵ Interviews with CO staff and consultant as part of Key Informant Interviews, Aug-Sep 2024

²¹⁶ Interview with RCO as part of Key Informant Interviews, Aug-Sep 2024

²¹⁷ Interviews with stakeholders as part of Key Informant Interviews, Aug-Sep 2024

have involved religious leaders in discussions on SRHR."

"UNFPA has been instrumental in building programmes that last, particularly through the One-Stop Crisis Centre (OSCC). They provide integrated support, from medical to legal services, which ensures that survivors of violence get comprehensive care. The fact that these services continue to expand in general hospitals (with Government funding) is evidence of sustainability. However, to maintain this momentum, there should be more structured support and long-term planning".

154. The fact that the Government has established OSCCs in public hospitals and is providing funding for their operations, is a demonstration of its commitment to this intervention, ensuring sustainability. This Governmental support is crucial for the continued functioning of OSCCs. As WHO has commented²¹⁸: *By embedding OSCC services within existing healthcare facilities, Malaysia has enhanced the accessibility and sustainability of these services. This integration allows for the utilization of existing resources and personnel, contributing to the model's sustainability.* There have been discussions between UNFPA, Government agencies, and grassroots organizations about improving the functioning of OSCC and the services offered, and more formal coordination mechanisms and sustained partnerships (including between the Ministry of Health, Royal Malaysian Police, and the Social Welfare Department) will further contribute to ensuring national ownership and sustainability.

155. Reflections from the CO staff indicate that the main challenge towards sustainability has been political instability and reluctance from religious authorities in some states, but with the backing of key religious leaders and institutions, these risks are being mitigated. The work in Sarawak on CSE and child marriage, supported by both Islamic and Christian leaders, provides strong evidence of the positive impact. Hence while political transitions in Malaysia did pose challenges, UNFPA was able to navigate these through innovative strategies, such as the study by the Harvard T.H. Chan School of Public Health, and Islamic financing. These initiatives have strong Government buy-in, mitigating risks and ensuring that the benefits of UNFPA work will continue beyond their direct involvement. The Government's commitment to some of UNFPA's SRHR and GBV programmes is a positive sign. However, risks that might hinder long-term sustainability include limited resources and insufficient capacity within CSOs, which are areas that need more work. Better alignment between ministries can help ensure sustained financial support.

Lessons Learned and Good Practices

156. Given the sensitivities as well as varying levels of acceptance of SRH and gender-related issues by various communities in the country, UNFPA's engagement with faith-based organizations and religious bodies to advocate SRHR and GEWE issues has been an important undertaking and has worked well. This is an important lesson learnt, that for sensitive areas of work, strategic thinking is required in coming up with possible approaches, and in the context of Malaysia, partnership established with religious entities has facilitated UNFPA's work in sensitive areas of its mandate. For example, bringing inter-faith organizations together and conducting inter-religious dialogues using a harm reduction approach, and emphasizing how CSE can minimize negative impacts associated with unsafe and unprotected sex, to get buy-in from religious leaders. Partnership with state Muftis and other religious leaders has been instrumental in ensuring community buy-in, which has reduced the risks associated with resistance to SRHR and gender-related interventions. Though the CO has placed importance on building the capacity of religious leaders and members of FBOs on CSE, there remains the need for further work to upscale this promising approach.

157. The Malaysia Women and Girls Forum has facilitated the CO's collaboration with a diverse range of stakeholders from the public sector, civil society, and other partners. Through such collaborations, the CO has been able to make inroads into policymaking by leveraging the forum as a dynamic platform that brings together stakeholders, and serves as a unique space for dialogue, knowledge exchange, and collective action, fostering partnerships that bridge gaps between government entities, grassroots organizations, and advocacy groups. The Forum has the potential to be scaled-up to influence policymakers and people on gender equality and issues related to women and girls. Hence at this point in time, it would be useful for UNFPA to undertake an assessment of its impact in terms of its reach, the change it has led to to-date, and its impacts on policymaking. This would

²¹⁸ WHO publication: Critical considerations and actions for achieving universal access to sexual and reproductive health in the context of universal health coverage through a primary health care approach; WHO 2022.

facilitate provision of forward-looking perspectives in terms of upscaling the Forum and enhancing its effectiveness.

158. An area of innovation for which the CO deserves credit, and other COs in the region can learn from, is Islamic finance, which the CO has succeeded in mobilizing for supporting GBV survivors. Support is being provided in the form of (i) a scholarship programme designed to sustainably support the tertiary education of children of domestic violence survivors; and (ii) economically empowering survivors of domestic violence. Both programmes are at early stages of taking off. There is an opportunity to scale up these initiatives at the national level by UNFPA and its partners. With the Government keen to establish Malaysia as a global and regional hub for Islamic finance, the CO would benefit from receiving targeted support at the UNFPA corporate level for facilitation of such ventures.

159. Delayed signing of the CPAP and subsequent delay in development and approval of AWP, has had a significant impact on implementation and achievement of results within the 4-year programme cycle. Learning from this experience, for the next CP, the CO needs to prepare grounds and start doing the necessary groundwork towards the end of the penultimate year of the current CP cycle, in terms of undertaking negotiations with the Government on measures required to be put in place to expedite approval processes, enabling subsequent release of funds for programme interventions on a timely basis, soon after the new CP starts in Jan 2026. This groundwork should remain a focus in 2025. In addition, the CO should invest in forward planning and mitigation strategies for overcoming funding delays, so that implementing partners are facilitated to the extent possible and work plans can be implemented as planned.

160. Support on women's empowerment, gender equality and GBV programming has been impacted due to not having dedicated capacity in the office to lead this portfolio, adapt global/regional resources and good practices to the Malaysia context, and establish meaningful partnerships with local entities/partners. Especially in the absence of UN Women in the country, UNFPA's role as the UN's focal agency leading the gender agenda becomes more crucial. The UN system looks to UNFPA for provision of the cutting-edge knowledge in this area of work. It is recommended in this report that in collaboration with UN entities, the CO moves towards a gender transformative approach with the aim to change norms and practices, and remove barriers. It will be important that for the new CP, a dedicated output for gender equality and women's empowerment be included, with mainstreaming of gender equality elements in all programmatic areas in the CP, and a full-time CO staff overseeing, reporting and progress monitoring the gender mainstreaming aspects across all programme areas.

Chapter 5 – CONCLUSIONS

5.1 Strategic level

Conclusion 1: The CO has not sufficiently adapted strategies to the context of a UMIC by strengthening financial models, intellectual leadership, policy influence, and partnerships. To drive further progress, the country's capacities be leveraged for broader regional impact. South-South and Triangular Cooperation should be capitalized for policy dialogues, and knowledge exchanges that can provide opportunities for Malaysia to showcase its progress and promote good practices, and at the same time, learn lessons from the countries of the global south.

Origin: Evaluation question 6 (Evaluation criteria: Effectiveness)

Associated recommendations: 1, 6

UNFPA has established itself as a credible and reliable entity by most of its partners. Strategic partnerships established at the national as well as state-level have been a factor contributing to UNFPA's progress towards achieving programme outputs and outcomes. In order for UNFPA to remain relevant in the country given its UMIC context, it needs to focus on strengthening its financial models, thought leadership, policy influence and broadening its partnership base. Its initiatives for building national and sub-national capacity to design and monitor policies, specially CSE programmes while engaging religious leaders to advocate for CSE is well recognized. Parliamentarians, think tanks and academics could also serve as strong advocates for addressing UNFPA's mandate to improve the SRHR and gender inequalities of vulnerable and marginalized populations, and influence policymakers towards more inclusive policies. Further work is needed to strengthen the knowledge and uptake of UNFPA interventions into policies and national frameworks, as in a UMIC context, the focus of UNFPA's work is more on upstream policy level work, rather than service delivery. The CO's success in mobilizing innovative financing through tapping Islamic finance is duly acknowledged. There has been little effort to explore mobilizing additional, more flexible funding from other sources beyond Government funds. It would therefore be useful to expand the partnerships mapping and future collaboration also from the financing perspective, inclusive of Islamic financing.

Additionally, UNFPA is uniquely positioned to strengthen Malaysia's capacities for regional and global knowledge-sharing, particularly through South-South and Triangular Cooperation. Efforts to foster partnerships and exchanges are essential, and UNFPA can and needs to play a key role in facilitating knowledge sharing and collaboration on best practices from within the country, the region and beyond given their global presence and network. These efforts which include identifying the expertise in and the needs of the country in key areas (that would accelerate progress in the output and outcome areas) and facilitating sharing and exchange (of knowledge, skills, best practices and lessons learnt across the global south countries) is important for enhancing national and regional capacities. This approach, which could be implemented via regular/periodic policy dialogues and other forums or conferences, has the potential to foster collaboration and achieve mutual gains in areas of common interest amongst participating countries.

Conclusion 2: By virtue of UNFPA's mandate and technical expertise being particularly relevant to the UNCT to help navigate sensitive issues, UNFPA can use this added value it brings to the UNCT to its advantage, and strengthen its development footprint, while benefiting from more joint programming, and establishing programmatic and operational synergies.

Origin: Evaluation question 7 (Evaluation criteria: Efficiency)

Associated recommendation: 1,3,7

UNFPA CO is well-recognized for its positive contribution to the functioning of the UNCT, and for its institutional commitment for UN Reform through its contribution towards achievement of UNCT collective results. It has been a key advocate of putting on the agenda of UN programmes in Malaysia, issues related to women and girls, and at-risk populations, and has advocated for women empowerment, whether in the context of the UNSDCF, COVID-19 response plans, or other contexts. Its leadership of the UN Gender Results Group is well recognised and acknowledged. UN agencies have benefited from UNFPA's positive contribution in bringing in technical expertise in areas related to its mandate, along with its contribution in strengthening advocacy in several areas leveraging on its good communication pathways established with national partners, that proved useful for other UN agencies operating in a similar space, particularly when it came to navigating sensitive issues. The next UNSDCF under formulation provides a strategic opportunity for UNFPA to strengthen

its development footprint and to gather partner UN agencies around its mandate and priorities. UN agencies such as UNICEF, UNDP, UNHCR and others are keen to build upon and expand their partnership with UNFPA, given the complementarity of mandates, capacities and know-how, and value it as an important partner in Malaysia. This provides a great opportunity for UNFPA to strengthen these partnerships and benefit from more inter-agency collaboration through more joint programming, establishing programmatic and operational synergies, and mobilizing more resources.

Conclusion 3: UNFPA made efficient use of its human, financial and administrative resources, and strategically worked with partners to deliver, despite limited human and financial resources at hand. However, with increasing demands on UNFPA to bring to bear more thought leadership, intellectual engagement, transformative approaches, enhanced visibility and outreach, and a more strategic convening role, the CO's human resource capacity needs to be augmented.

Origin: Evaluation questions 4,5,7 (Evaluation criteria: Efficiency, Coherence, Effectiveness)

Associated recommendations: 2,7

UNFPA has made good use of its human, financial and administrative resources, and has delivered well on its mandate despite limited in-house capacity. Flexibility in accommodating programme demands with a small staff has been duly recognized, also in terms of efficiently and reliably delivering in emergency situations, with special attention to addressing the needs of the most vulnerable. Staff shortage on the technical side has been supplemented by the use of consultants, which is not a sustainable model. Senior staff's frequent transition was seen as an impediment impacting possibilities for more engagement in national level policy discussions. Therefore augmenting staff capacity and continuity in top leadership warrants attention on a priority basis. A robust monitoring and results-reporting system with increased progress tracking and senior management oversight is vital. Additionally, increasing awareness and visibility of the work of UNFPA with its partners and the change it brings to the communities and the country, is important.

Conclusion 4: UNFPA interventions have good potential of being sustainable as they are in line with Government priorities and country needs, and are funded by the Government. However, more effective strategies for ensuring sustainability of interventions are needed, for impact to continue after UNFPA support is withdrawn.

Origin: Evaluation questions 4, 5, 8 (Evaluation criteria: Coherence, Effectiveness, Sustainability)

Associated recommendation: 1,2

UNFPA interventions have good potential of being sustainable as they are in line with GoM's priorities and needs, and most importantly, are funded by the Government, ensuring ownership. They bring knowledge, expertise, training and research, are timely, and have a policy focus. UNFPA's contribution in building capacities at institutional and individual levels, especially in the context of IPs, including academia, presents positive prospects for sustainability, though it is concluded that there is scope for strengthening NGOs/CSOs' capacities through technical support and knowledge-sharing, to take initiatives forward after UNFPA CP's life ends. Strengthening of existing strategic partnerships with key ministries will help overcome the risks of programme discontinuation. Exit strategies are seen to be missing in the design of interventions, that could have benefited from being informed by a systematic conversation on sustainability upfront with national partners. Sustainability of interventions is not an issue as far as Government's resources availability to continue is concerned. However, UNFPA's continued technical support will still be needed to push things through, for example: translating commitments made at international fora into budgetary allocations, and advocating for sensitive issues to remain integrated in Government programmes. Hence moving forward, while plugging few gaps that exist, more effective strategies for ensuring sustainability of interventions for wider replication and adaptation will be needed, for impact to continue after UNFPA support is withdrawn.

Conclusion 5: The TOC of the current CP will need to be reconceptualized for the next CP cycle, while taking into account the evolving needs and priorities of an Upper Middle Income Country, and the emerging megatrends of ageing, low fertility and climate change.

Origin: Evaluation questions 1,3,6 (Evaluation criteria: Relevance, Effectiveness)

Associated recommendations: 6

Considerations are required to be kept in perspective with regard to the country's evolving needs and associated priorities, as well as Government's upcoming socio-economic development plan catering to emerging megatrends that will impact Malaysia's development trajectory. For UNFPA's relevance to be maintained in

Malaysia, and for it to be a partner of choice, building on its comparative advantage of being an established and nationally well-recognized entity addressing sensitive issues that are inherent in Malaysia's socio-cultural and religious context, the TOC for the upcoming programming cycle will need to be reconceptualized with a forward-looking lens, through adoption of a holistic, integrated approach. With Malaysia looking to transition from a UMIC to a High Income Country category during the course of the current decade (i.e. within the currency of the next CP cycle), for UNFPA to remain relevant, it is critical that elements of the upcoming 13MP and the Government's priorities identified therein, in areas that correspond to UNFPA's core mandate and 3 TRs, should remain high on the agenda when conceptualizing the TOC for the new CP. Given the significant demographic shifts Malaysia will be grappling with, particularly ageing and low fertility rates, and their intersection with climate change challenges, UNFPA's focus on supporting the country navigate these megatrends through adoption of strategic, inclusive, sustainable, and human rights-based responses will be vital.

5.2 Programmatic level

Conclusion 6: The needs of diverse populations, including vulnerable and marginalised groups (e.g. young people, women and persons with disabilities) were taken into account to a significant extent in the design and implementation of the programme; however, inclusion of those left behind needs more focus, as intersectionality and inclusivity among diverse and most vulnerable groups in select geographical locations remains limited.

Origin: Evaluation question 1 (Evaluation criteria: Relevance)

Associated recommendations: 4,5,6

Various diverse groups have benefited from the UNFPA Country Programme. UNFPA has demonstrated effectiveness in expanding access to SRHR and GBV services, providing critical support to a number of communities, vulnerable and marginalized populations, including those with disabilities. This is to ensure "leaving no one behind" through promoting equitable growth in select geographic areas in Malaysia, as issues related to SRHR, FP, GBV, CSE and ASRH are still perceived as sensitive issues that require a tactful approach. However, the CP lacks sufficient focus on intersectionality, identifying and addressing the unique and specific needs of diverse groups, and their inclusion remains limited, in particularly the poor, B40, M40,²¹⁹ and the indigenous population. Further analytical framework for intersectionality involving factors like gender, sex, social class, sexual orientation, religion, and disability needs further investigation. This hinders the CO's ability to effectively address systemic inequalities and barriers faced by the most vulnerable and marginalized communities and those with multiple disadvantages. By incorporating intersectionality into its approach, the CP can effectively address the needs of the country in UNFPA's mandated areas of work. Furthermore, given the restrictions for Government funding not to be directed to non-Malaysians, reaching out to humanitarian donors for provision of support to undocumented persons/refugees is important. There is room to strengthen linkages with local CSOs/grassroots entities in the states of Sabah and Sarawak as well as in the East coast of Peninsular Malaysia, and with youth groups.

Conclusion 7: UNFPA has contributed to improving SRHR access, generated data for policy-makers, and partnered with CSOs, while generating evidence on SRHR investments. However, factors that limit access to and utilization of integrated SRH information and services will need to be addressed and inclusion of SRHR issues at all levels of the national development plan will be critical for ensuring access to SRHR information and services to the vulnerable and marginalized populations.

Origin: Evaluation question 5 (Evaluation criteria: Effectiveness)

Associated recommendations: 4

UNFPA has contributed to improving access to high-quality SRHR information and services for diverse groups of communities. This includes generating research data for policy-makers and working with CSOs and faith-based organizations. It has played an important role in facilitating strategic dialogues and advocacy on the need for the uptake of family planning. UNFPA also funded important studies to generate evidence including on adolescent pregnancy and child marriage and on SRHR investment which was found to be a viable way to increase female labour force participation, female educational attainment, and fulfilling the unmet needs of FP. However, the competing priorities of various stakeholders hampers the smooth running and effectiveness of its

²¹⁹ B40 and M40 refers to the bottom 40 per cent and middle 40 per cent of the population by socio-economic status in Malaysia

programme requiring the attention of the CO. The factors limiting access to and utilization of integrated SRH information and services will need to be addressed, such as limited knowledge of youths on contraceptives and SRHR, insufficient coverage and quality of youth friendly SRH services, limited provision of SRH information and services to unmarried young people, limited access by indigenous groups and undocumented migrants and refugees, lack of robust data on SRHR in particular for unmarried youths and other groups such as migrants and indigenous populations for evidence-based policy formulation and programme targeting. Thus, there is a need to raise awareness on SRHR information and services via digital platforms to have a wider reach of audience.

Conclusion 8: GEWE interventions have progressed to a certain extent, but did not focus on efforts to identify and address gender norms or focus on men and masculinities; there is an opportunity for the CO to exercise its leadership of the UN Gender Results Group to influence for change using a Gender Transformative Approach and measuring changes through a gender and social inclusion monitoring and evaluation framework.

Origin: Evaluation question 5 (Evaluation criteria: Effectiveness)

Associated recommendations: 3,7

Programme interventions have contributed to advancing progress on GEWE; however, the programme has not fully integrated gender-transformative approaches (GTA). While programme interventions are largely gender-sensitive and responsive, they are not transformative as they do not focus on challenging gender relations and norms for equality. Interventions did not focus on men and masculinities - barriers and opportunities - as well as the needs of this group across all institutional levels, which holds enormous potential to address the root causes and catalyse change. However, implementing a well-designed GTA requires resources, capacities and collaborative efforts by all stakeholders. Given the size of the CP and its limited resources, GTA can be implemented by a larger coalition of UN entities, for example, using UNFPA's leadership of the UN GRG as a strategic entry point to influence change at the country level. This can be achieved in addition to the current contribution of UNFPA as part of strengthening UN coordination on GEWE and promoting gender equality as a whole for the country. Development of a gender and social inclusion monitoring and evaluation framework will help to assess and evaluate UNFPA's programmes from a gender and social inclusion perspective.

Conclusion 9: UNFPA's programme on PD and ageing needs to continue with further focus on supporting the country in building the capacity of its expertise on PD and ageing, using population data widely and promoting a life-course approach in policy and practice.

Origin: Evaluation question 5 (Evaluation criteria: Effectiveness)

Associated recommendations: 5

UNFPA has supported its IPs on PD and ageing to generate data, analyse, share/disseminate findings, and engage policy-makers and other stakeholders to influence evidence-based decision-making. This engagement for strategic use of evidence and data to influence policy, is essential for designing and implementing responsive policies. This approach needs to be continually supported and could be adapted as a strategy for other programmatic areas as well. The country faces challenges due to limited/lack of specialised expertise in the areas of PD (including on National Transfer Account - NTA) and ageing, which are crucial for understanding, preparing, and responding to its ageing population and demographic changes. Furthermore, the gap can also impede the use of population data to guide policy and programme development. Stronger focus on data analytics and disaggregation is needed to identify and advocate for marginalized groups. Therefore, improving population data availability/access and facilitating/promoting its (wider) use is crucial for UNFPA to support the country in ensuring that its policies are data-driven. Additionally, promoting a life-course approach to policy and practice, addressing both younger and older populations, would enable the country to take action early in life and follow through. In addition to this approach, mainstreaming ageing into national policies and programmes is important for the long-term impact and well-being of society.

Conclusion 10: UNFPA supported the use of technology and innovation to promote CSE, while building capacity of various groups of people; further efforts are needed for better implementation of CSE for greater inclusivity, taking into account the local socio-cultural aspects and the sensitivities of the subject matter.

Origin: Evaluation question 5 (Evaluation criteria: Effectiveness)

Associated recommendations: 4

UNFPA's support for the use of technology and innovation helped national and sub-national institutions to promote CSE, train teachers and engage young people and parents. Advocacy campaigns, CSE forums and dialogues conducted strengthened the support for the use of technology and innovation for CSE teaching among

young people and their parents. Although the CO has placed importance on building the capacity of religious leaders and members of faith-based organizations on CSE, which is pertinent to defuse stigma and socio-cultural barriers to CSE, further work is needed to upscale the promising approach. Interactive training modules were created using an in-person approach. The virtual training may have an impact on the programme's quality and results, particularly if the CSO educators were inexperienced in imparting SRHR knowledge. Digital communication tools and evidence-based advocacy by UNFPA via social media and other platforms holds the potential to gain wider reach among diverse groups of people across geographic locations in the country. CSE mainstreaming and its best practices utilizing technology and innovation in schools, TVET institutes, and higher education institutions is crucial, especially for the diverse groups of vulnerable young people that have not been adequately focused on.

Chapter 6 – RECOMMENDATIONS

The following recommendations, at strategic, programmatic and operational levels, are based on the evaluation findings and conclusions discussed above and feedback received from key stakeholders. While presenting the preliminary findings in-person at the end of the field phase, the ET from the perspective of looking ahead, also shared reflections on proposed recommendations with members of the Evaluation Reference Group, the UNFPA Regional Office for Asia-Pacific and the UNFPA CO, to solicit feedback during the meeting as well as through written feedback following the meeting, for incorporation in the final report. None of the above-mentioned stakeholders expressed reservations on any of the recommendations, and in fact, validated them in principle. Six key recommendations have been selected for inclusion herein for the strategic and programmatic levels, while one operational level recommendation has also been included. Some recommendations are quick-fixes which can be considered by the CO for implementation during the currency of the current CP, while others are more forward-looking for incorporation in strategies to be devised for the new CP.

6.1 Strategic (*in order of priority*):

Recommendation 1: Capitalize on the partnership base developed, expand it further by adopting a strategic approach to partnerships in the design and implementation of programmes, while coordinating with other partners with similar broad objectives, and mobilize more flexible funding.

Priority: Very High

Target level: UNFPA CO

Based on conclusions: 1,2,4

Operational Implications:

Partnerships is an area that needs focus. Given that age structural transition is the backbone of future development programming in Malaysia, UNFPA having built a relationship of trust with key stakeholders, should capitalize on the partnership base developed, form new and strengthened partnerships with national and international entities, and play a key role in Malaysia's progress towards meeting SDGs and ICPD-PoA commitments.

A **mapping of the prevailing partnership landscape** would help, keeping in perspective various entities that can be tapped. Some prospective ones could include:

- ❖ Academia and think tanks – *that can provide intellectual technical input in UNFPA's areas of work; technical sessions around topical issues such as impact of climate change on women and young girls, or harnessing Malaysia's demographic dividend, or the country's impending transition from UMIC to HIC, can bring valuable insights for UNFPA future programming;*
- ❖ Parliamentarians - *the Parliament's Fora, Committees and Caucuses on Women, Population, SRH that are relevant to UNFPA's mandate; this would help in making in-roads in policy debates and influence policy;*
- ❖ The private sector - *partnerships with pharmaceutical companies, healthcare providers, and social enterprises; this can bring in additional resources, expertise, and innovative approaches to SRH products and services;*
- ❖ The Human Rights Commission (SUHAKAM) – *(which has a database of those in need of support that reach out to them on issues such as child marriage, period poverty); - this would enable targeting those most in need and those farthest behind, and partnership with this strategic entity can be leveraged for stronger advocacy and policy influence;*
- ❖ Department of Statistics, Malaysia and the Welfare Department of MWFC – *from whom statistics and data can be gathered regarding those most in need and not yet reached, in line with the LNOB and reaching the furthest behind principle; this can help the Government and UN entities (including UNFPA) determine the spread of the their programmes to reach vulnerable populations and ensure the representation of diverse population groups in programming;*
- ❖ Foundations, network of CSOs and other partners of relevance having broad objectives similar to those of UNFPA

There is a need for more **flexible funding** being tapped for programming, beyond Government funds. Potential of resource mobilization can be explored with humanitarian donors for supporting the vulnerable, undocumented populations for whom Government funding cannot be directed, and with IFIs. Islamic Finance should continue

to be pursued for advancing the SRHR agenda and addressing GBV, while expanding the partnership mapping to also explore future collaborations from the financing perspective, including domestic resources.

Recommendation 2: Institutionalize more systematic mechanisms for effective management of the Country Programme, including forward planning, costing/budgeting, monitoring and reporting of results, and integrate sustainability in the design and implementation of interventions.

Priority: Very High

*Target level: UNFPA CO
UNFPA APRO*

Based on conclusions: 3,4

Operational Implications:

In terms of the overall effectiveness and long-term impact of interventions, it is recommended for UNFPA to adopt more effective strategies to ensure the sustainability of interventions, while institutionalizing systematic mechanisms for strengthening the CO M&E and reporting system, coupled with documenting good practices, knowledge management and learning, such that the achievement of results is better recognized, as well as outreach to the most vulnerable populations can be overseen. Possible measures could include:

- ❖ clearly define M&E activities, the frequency of data collection, intervention-level indicators that also link to the TOC, and introducing smarter ways of defining the indicators (language more results-based and less process-based);
- ❖ plan ahead with systematic discussion upfront with national partners/IPs to determine their needs and seek their views on proposed activities while developing monitoring frameworks and identifying barriers; enhance inclusiveness by ensuring the representation of diverse population groups in programme planning and implementation; provide an exit strategy for continuation of the activity once UNFPA support ends, and Government assumes full ownership;
- ❖ conduct regular internal programme progress reviews in conjunction with undertaking periodic monitoring missions, with reports capturing detailed account of results and potential for sustainability with follow-up action plans; analyze the risk factors for sustainability of programmes and mitigate the risks where possible;
- ❖ develop reporting templates to also include communication initiatives, shifting focus from the completion of interventions and activities to that of a results chain approach; use communication products for enhancing community outreach and task the communications entity to strategize how to better share information with target groups in hard-to-reach areas;
- ❖ effectively capture lessons learnt, demonstrate the impact of successful interventions to help give a push for the needs of the vulnerable to be made part of public policy priorities; highlight end-user satisfaction, specially of activities that are new to the context to policy makers; this can also facilitate resource mobilization;
- ❖ plan programme level evaluations/reviews jointly with the Government, which will contribute to the relevance, effectiveness and sustainability of CP interventions, while also reflecting on the rationale of what works and what does not, and why interventions should be scaled up through Government initiatives or by other development actors; this would be an effective risk mitigation measure that shows the effectiveness of new ideas and could boost sustainability and mainstreaming of the activity within Government structures;
- ❖ consider constituting an unbiased technical experts panel that meets periodically to monitor and evaluate activities from design to implementation phases on technical grounds;
- ❖ invest in NGOs/CSOs' capacity building through knowledge-sharing and leveraging new technologies and methodologies to enhance their skills and knowledge

The above measures, coupled with strengthening the existing strategic partnerships with key ministries will help overcome the risks of programme discontinuation, through integration of UNFPA-supported initiatives into national policies, thereby ensuring that national partners will take ownership of results upon completion of UNFPA supported interventions. It is also important for UNFPA to continue making advocacy efforts and persistently push for the policies in Malaysia's socio-economic development plan to be supported through concrete budgetary allocations. This is a critical step for sustainability. The support of APRO in sharing best practices from other COs with robust results monitoring and reporting systems following a results chain approach, that have home-grown measures to overcome some of the gaps that exist in corporate planning and reporting systems, would help strengthen CO capacity in this area.

Recommendation 3: With a well-resourced and well-capacitated Government machinery in place, UNFPA as part of the UN system in Malaysia needs to collectively strategize on joint approaches and joint initiatives with UN entities to seize opportunities and maintain continued relevance in Malaysia.

Priority: High

*Target level: UNFPA CO
UNFPA APRO*

Based on conclusion: 2,8

Operational Implications:

In the context of Malaysia's UMIC status, where there is a well-resourced and well-capacitated Government machinery in place which has thought through its development priorities, also in keeping with the emerging megatrends, the UN system in Malaysia continues to establish its relevance in the country through the comparative advantages different UN agencies brings in addressing national priorities, based on their respective mandates. Being part of this system, UNFPA will benefit from collectively strategizing on joint approaches and joint initiatives with UN entities to seize opportunities and maintain continued relevance in Malaysia.

The UN system can greatly benefit from UNFPA's leadership in areas of its mandate. UN entities such as UNICEF, UNDP, UNHCR and others are keen to build upon and expand their partnership with UNFPA, given the complementarity of mandates, capacities and know-how; and value it as an important partner in Malaysia, having a mandate that is particularly relevant to help navigate sensitive issues. UNFPA should make use of this as an opportunity for:

- ❖ strengthening these partnerships through more joint approaches, joint planning and joint programming, and using this to mobilize more resources, that would help provide more coverage of services to meet the needs of different vulnerable populations, thereby furthering the implementation of UNFPA's mandate, expanding its development footprint, and supporting Malaysia in meeting its commitment to the ICPD-PoA;
- ❖ establishing UNFPA as a thought-leader within the UNCT by bringing UNFPA's technical expertise to bear in areas of its mandate (eg. gender transformative approaches, age structural transition) that can support UN programming; the subject of population ageing is a case in point where UNFPA leadership of a joint UN approach to support Government in addressing this emerging national priority is an opportunity UNFPA can seize;
- ❖ giving further impetus to its leadership of the Gender Results Group through continued engagement and enhanced investment to this responsibility, providing support in prioritising gender issues within the UN agencies and UN programmes including in designing and implementing GTA at the country level (*with due support from UN Women and UNFPA APRO*);
- ❖ establishing programmatic as well as operational synergies with partner UN entities.

6.2 Programmatic (in order of priority):

Recommendation 4: UNFPA to advocate for and influence policies and financing (while building on evidence from studies), that investing in SRHR and AY and the prevention of GBV and harmful practices across the life course, through increased budgetary allocations, can yield significant returns in terms of improved health outcomes, gender equality and socio-economic development.

Priority: High

Target level: UNFPA CO

Based on conclusions: 6,7,10

Operational Implications:

Investing in SRHR and AY across the life course—from adolescence to adulthood—is crucial for achieving long-term societal benefits. To remain responsive to the evolving needs of the country, it is essential to prioritize further investments and focus on key aspects within SRHR. A rights-based approach to CSE is paramount, as it directly impacts SRHR, GBV, and teenage pregnancy. By addressing these inter-linked issues, UNFPA can empower young people with the knowledge and skills they need to make informed decisions, promote gender equality, and contribute to a healthier, more equitable society.

Some actions to drive focus on SRHR information and services and the rights and health of adolescents and youth could include:

- ❖ make SRHR information and services more affordable and accessible to all in need; this could be done through enhancing accessibility and quality of SRHR information and services through a comprehensive and user-friendly digital platform or software application to cater to a wider population and to further support NGOs or IPs in their service delivery, e.g. as an information hub for SRHR matters, community support (peer support or network) etc;
- ❖ step in where the Government is unable to fulfil critical needs of the diverse population; e.g. supporting NGOs who may reach out to vulnerable or marginalised populations, such as migrants or refugees or LGBTQI persons;
- ❖ advocate for evidence-based research findings being incorporated in policy and programme development; and integration of SRHR information and services and gender equality issues in the country's development planning, through policy engagement and dialogues by leveraging on research outputs;
- ❖ strengthen teachers' capacity in CSE through targeted upskilling;
- ❖ strengthen the right to access SRHR information and services for AY by reducing socio-cultural and religious resistance to CSE, for example, through further engagement with faith-based organisations and religious leaders using a harm reduction approach.

Recommendation 5: Build partnerships and national capacities in PD and ageing to increase the expertise and the use of data/evidence in policies and programmes.

Priority: High

*Target level: UNFPA CO
UNFPA APRO*

Based on conclusions: 6,9

Operational Implications:

To bridge the existing gap in policies and programmes that addresses the needs of the populations in the country and an ageing society, strong partnerships and enhanced national capacities and expertise are increasingly needed. By building collaborations among Government agencies, academic institutions, and relevant stakeholders, expertise in PD and ageing can be strengthened. These partnerships will not only improve data collection and analysis but also foster a culture of evidence-based policy-making, ensuring that decisions are responsive to demographic shifts and the specific needs of an ageing population. Few points for consideration are as follows:

- ❖ build strategic partnerships and strong engagement with the Government and other agencies to ensure that the population data can be generated, processed and released in a relatively shorter period of time, and made available and widely disseminated to academics, NGOs etc to improve research and policy development;
- ❖ in working with IPs on PD issues, especially the academics, ensure that the programme benefits the larger student population as well - i.e. the learnings from the programmes are widely shared in classes, seminars and lectures, so that capacities of the younger population in understanding PD issues is built;
- ❖ with APRO's technical support, use its PD expertise to advocate for policies addressing demographic transitions, low fertility, ageing population, and climate change, as strategic use of evidence and data is crucial for influencing policy in these areas;
- ❖ work with the Government and partners on PD (including using NTA methodology) for data analysis, evidence generation and translating to policy formulation, design and implementation.

Recommendation 6: Develop the next CP with a holistic, overarching TOC for the full programme with an integrated approach while adopting a systems thinking lens, taking into account the emerging megatrends, with strategies for targeting those most in need, in line with the LNOB and "reaching the furthest behind first" principle.

Priority: High

*Target level: UNFPA CO
UNFPA APRO*

Based on conclusions: 1,5,6

Operational Implications:

Given the cross-cutting nature of the key areas of UNFPA's mandate (inter-linkage between SRHR and gender/GBV, and close interface with demographic transition), and inter-connected effects of megatrends of ageing, low fertility, and climate change presenting complex challenges for Malaysia, it will be prudent to

consider devising an overarching TOC for the next CP cycle 2026-2029 more holistically – one TOC for the full programme - giving due consideration to the country’s evolving needs, centred around:

- ❖ Government’s priorities identified under the **upcoming 13th Malaysia Plan** *(the four megatrends at the heart of the upcoming 13th Malaysia Plan that will shape the future of the country, include: : (a) shifts in economic blocs; (b) technological and digital evolution; (c) demographic and quality of life shifts; and d) environmental and climate crisis) – with a strategic focus on leveraging Malaysia’s position as a global hub for Islamic finance while pushing for digital innovation;*
- ❖ The **unfinished SDG agenda** relating to SDG 3 and 5 indicators that record low progress in areas covered by UNFPA mandate *(lagging areas being ratio of female-male labour force participation, seats held by women in Parliament, demand for FP satisfied by modern methods);*
- ❖ Prevailing **inequalities in Gender dynamics**, given the country’s socio-cultural and religious norms;
- ❖ The **demographic shifts and Malaysia’s transition to an ageing society**, with associated changes in population dynamics, while giving due attention to the interplay between climate change and demographic dynamics, and the well-being of the elderly and their families;
- ❖ The need for **actionable research on gendered dimensions of impacts of climate-change** (including induced disasters such as flooding) on Malaysian women, proposing adaptation measures and coping mechanisms;
- ❖ Reaching **those who have been left behind** in the development continuum;
- ❖ Integrating **intersectionality** principles and the inclusion of diverse groups across various geographical locations in the country.

Strategies for targeting those most in need, in line with the LNOB and “reaching the furthest behind first” principle will be critical. UNFPA’s role in advocating for integrated policy responses while adopting a systems approach and supporting community-level adaptations is crucial for fostering a resilient society equipped to handle demographic and environmental shifts effectively, and for boosting sustainable strategic, inclusive, human rights-based responses and adaptations to these emerging priorities and megatrends. This would be important also from an integrated programming perspective, which is how the new programme should be perceived, given Malaysia’s UMIC status and related factors at play. With UNFPA being uniquely positioned to strengthen Malaysia’s capacities for regional and global knowledge-sharing, the SSTC mechanism should be institutionalized through strategic dialogue with the Government at the time of the new CPD development.

6.3 Operational:

Recommendation 7: Strengthen CO human resource capacity for implementation of its programme, enabling it to use to the organization’s advantage, UNFPA’s established and nationally well-recognized role in addressing issues that are inherent in Malaysia’s socio-cultural and religious context, to become a partner of choice.

Priority: Very High

Target level: UNFPA CO
UNFPA APRO

Based on conclusions: 2,3,8

Operational Implications:

Given the country’s needs in the context of existing gender gaps in the political and governance systems, while undergoing a significant demographic transition towards becoming an aged nation, there are increasing demands on UNFPA to bring to bear more thought leadership, enhanced intellectual engagement, adoption of transformative approaches, and an enhanced convening role. These factors perpetuate the need to strengthen the CO’s human resource capacity in programmatic areas.

- ❖ **Strengthen capacity in the Gender programming** area. Giving due consideration to the social and cultural context of Malaysian society, Gender assumes a significant aspect that needs to be sensitively handled. The presence of this capacity will be greatly beneficial for entities such as MWFCD, for whom UNFPA’s present support can be augmented with strategic level thought leadership thereby increasing possibilities for more engagement in national level policy discussions, along with working with NGOs, CSOs and rights organizations active in this area, needing strategic support. There is also an internal UN aspect - given the leadership needed for the Gender Results Groups and the pivotal role UNFPA can play on gender prioritisation and mainstreaming within the UN, which will be a major contribution to the UNCT in

Malaysia. In addition, leveraging national capacities on Gender, especially from the academia, can also be explored to strengthen the team.

- ❖ **Have dedicated in-house capacity focusing on Partnerships and Resource Mobilization.** Partnerships being strengthened/expanded (see recommendation 1) and additional resources being mobilized will facilitate not only more interventions being in place in areas where needed the most and where requests for support have been received but could not be accommodated due to shortage of funds and human resources, but also enable the CO to have **more bodies in place for critical functions**, which need focused attention.
- ❖ Prioritize dedicated funding **for M&E, reporting and communications** (see recommendation 2) in future resource mobilization efforts; dedicated M&E, reporting, and communications capacity with knowledge management function added, would not only strengthen UNFPA's monitoring and reporting system, but also strengthen IP capacities in this area.
- ❖ Make a case with Government, through funding available from Government resources, to have **dedicated capacity in the CO with PD expertise**; in discussion with Government entities, the need was expressed for UNFPA to do more in the area of PD, especially since reliable data is available, which needs to be taken forward in terms of its interpretation and analysis of demographic trends that can impact the population in the long run, thereby enabling better planning, policy development and response strategies.