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Enhancing Accountability

REPORT

OF

THE AUDITOR-GENERAL

ON

ANTI-FEMALE GENITAL MUTILATION BOARD

FOR THE YEAR ENDED 30 JUNE, 2023







ANTI-FEMALE GENITAL MUTILATION BOARD

ANNUAL REPORT AND FINANCIAL STATEMENTS

FOR THE FINANCIAL YEAR ENDED 30TH JUNE 2023

Prepared in accordance with the Accrual Basis of Accounting Method under the International Public Sector Accounting Standards (IPSAS)

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1. Acronyms, Abbreviations and Glossary of Terms

A: Acronyms and Abbreviations

Anti-FGMB Anti-Female Genital Mutilation Board

CEO Chief Executive Officer

ICPAK Institute of Certified Public Accountants of Kenya

IPSAS International Public Sector Accounting Standards

NT National Treasury

OCOB Office of the Controller of Budget

OAG Office of the Auditor General

OSHA Occupational Safety and Health Act of 2007

PFM Public Finance Management

PPADA Public Procurement and Asset Disposal Act

PPE Property Plant & Equipment

PSASB Public Sector Accounting Standards Board

SAGAs Semi-Autonomous Government Agencies

SC State Corporations

UNICEF United Nation Children Fund

UNFPA United Nation Population Fund

B: Glossary of Terms

Fiduciary Management- Members of Management directly entrusted with the responsibility of financial resources of the organization.

Comparative Year- Means the prior period.

2. Key Entity Information and Management

(a) Background information

The Anti-Female Genital Mutilation Board (Anti-FGMB) was incorporated/ established under the Prohibition of Female Genital Mutilation Act 2011 in December 2011. The Anti-FGM Board is domiciled in Kenya.

(b) Principal Activities

Vision: A society free from Female Genital Mutilation.

Mission: To uphold the dignity and empowerment of girls and women in Kenya through the coordination of initiatives, awareness creation and advocacy against FGM.

Core values:

- i) Honesty and integrity
- ii) Efficiency and effectiveness
- iii) Innovativeness and creativity
- iv) Inclusiveness
- v) Professional work ethics, work and excellence
- vi) Accountability and transparency

Mandate:

- i) Design, supervise and co-ordinate public awareness programmes against the practice of female genital mutilation.
- ii) Generally, advice the Government on matters relating to Female Genital Mutilation and the implementation of the act.
- iii) Design and formulate a policy on the planning, financing and coordinating of all activities relating to female genital mutilation
- iv) Provide technical and other support to institutions, agencies and other bodies engaged in the programmes aimed at eradication of female genital mutilation.
- v) Design programmes aimed at eradication of female Genital Mutilation;
- vi) Facilitate resources mobilization for the programmes and activities aimed at eradicating female genital mutilation and
- vii) Perform such other functions as may be assigned by any written law.

(c) Key Management

The Board's day-to-day management is under the following key organs:

| No. | Designation | Name |
|-----|-----------------------------|------------------------|
| | | 1. Ms. Ipato Surum |
| | | 2. Ms. Dianah Kamande |
| | | 3. Ms. Lucy Kiria |
| | | 4. Dr. Rashid Omar |
| 1. | Board of Directors | 5. Ms. Susan Karuri |
| | | 6. Ms. Emily Opati |
| | | 7. Mr. Hassan Duale |
| | | 8. Ms. Emily Maina |
| | - | 9. Dr. Bashir Issak |
| 2. | Chief Executive Officer | Mrs. Bernadette Loloju |
| 3. | Head of Programmes | Mr. Bennie Kutwa |
| 4. | Head of Finance | CPA Josphat Mweu |
| 5. | Head of Policy and Planning | Mr. Nicholas Songok |
| 6. | Head of Procurement | Ms. Shelmith Leshinka |
| 7. | Head of Human Resource | Ms. Habiba Bare |
| 8. | Head of Communication | Mr. Brian Mureithi |
| 9. | Head of Internal Audit | CPA Sarah Amisi |

(d) Fiduciary Management

The key management personnel who held office during the financial year ended 30th June 2023 and who had direct fiduciary responsibility were:

| No. | Designation | Name | | |
|-----|-----------------------------|-------------------------|--|--|
| 1. | Chief Executive Officer | Mrs. Bernadette Loloju | | |
| 2. | Head of Programmes | Mr. Bennie Kutwa | | |
| 3. | Head of Finance | CPA Josphat Mweu Kamuti | | |
| 4. | Head of Policy and Planning | Mr. Nicholas Songok | | |
| 5. | Head of Procurement | Ms. Shelmith Leshinka | | |
| 6. | Head of Human Resource | Ms. Habiba Bare | | |
| 7. | Head of Communication | Mr. Brian Mureithi | | |
| 8. | Head of Internal Audit | CPA Sarah Amisi | | |

(e) Fiduciary Oversight Arrangements

In the year ended there were three (3) committees of the Board established to assist in the discharge of its responsibilities and oversight obligations efficiently whose overall responsibility is as below;

Audit and Risk Committee

The Audit and Risk Committee shall monitor the Internal controls, Governance structures and Risk management to provide the Board with independent advice and guidance regarding the adequacy and effectiveness of management's practices and potential improvements to those practices.

Finance and Administration committee

To ensure that the Board's budget and procurement plan are in line with the mandate of the Board and aligned to the relevant laws, review quarterly and annual financial statements and recommend to full board for approval. Also advising the board on implementation of human resource instruments and aspects of administrations.

Programmes Committees

The programmes committee shall oversight the management on the level of compliance in implementing interventions and strategies that will result to the realization of the Boards strategic direction, mission, and vision.

(f) Entity Headquarters

Kenya Railways Staff Retirement Benefit Scheme Building South Wing, Block 'D" 2nd Floor Haile Selassie Avenue P.O. Box 54760 -0200 Nairobi, KENYA

(g) Entity Contacts

Telephone (254)0202220106

E-mail: Admin@antifgmboard.go.ke
E-mail: ceoantifgmboard@gmail.com
Website: www.anti-fgmboard.go.ke

(h) Entity Bankers

Co-operative Bank of Kenya Aga Khan Walk Branch P.O. Box 20818-00100 Nairobi, Kenya

Key Entity Information and Management (continued)

(i) Independent Auditor

Auditor-General

Office of the Auditor General

Anniversary Towers, University Way

P.O. Box 30084

GPO 00100

Nairobi, Kenya

(j) Principal Legal Adviser

The Attorney General

State Law Office and Department of Justice

Harambee Avenue

P.O. Box 40112

City Square 00200

Nairobi, Kenya

3. The Board of Directors.

| F | Ref Directors | Details |
|----|------------------------------|---|
| | Mrs. Ipato Korema Surum | Date of Birth: 1976 Currently pursuing MBA Degree Bachelor of Business Management Served as a community Development Assistant in Narok County. Served as Narok County Government as ward administrator. Chairperson of the Board of |
| | | Directors |
| 2. | Mr Hassan A. Duale- Director | Date of Birth: 17/6/1977 Master's degree in education management Masters in business administration Alternate to PS Ministry of Education. Member Finance and Programmes Committee |
| 3 | Dr. Bashir Issak | Date of Birth: 4/10/1970 Fellowship on Leadership in Maternal and Reproductive Health Master' in Medicine (MMED) Head of Family Health Coordinator Kenya Cuba Collaboration Project Program Coordinator UNFPA Senior Health Advisor DIFPARK. Alternate to PS Ministry of Health Member Audit and Programmes Committee |
| 3. | | Member, Audit and Programmes. |

| Ms Emily Maina- Director 4. | Date of Birth:01/03/1966 Bachelor's Degree in Education Master Degree in Curriculum Development Deputy Director Youth Affairs. Alternate to PS State Department for Youth Member Finance and administration and Programmes Committee |
|----------------------------------|---|
| Ms Susan Wanjiku Karuri- Directo | Date of Birth: 08/10/1985 LL.M in International Economic Law LL.B from Moi University. Currently pursuing a Master of Arts in Public Policy and Administration. Office of the Attorney General & Department of Justice The Judiciary and the Ministry of Justice, National Cohesion and Constitutional Affairs. Alternate to PS The National Treasury. Member, finance and administration and audit. |
| Ms. Emily Opati- Director 6. | Date of Birth: 01/02/1968. Bachelor's degree in education. Master's in criminology. Diploma in Women Empowerment and labour issues. Certificate in counselling. Deputy Children's Officer District Gender and Social Development Officer. Deputy SDO Nairobi County Deputy Director Gender Alternate to PS Gender Member Finance and audit Committee |

| 7. | Date of Birth: 14/12/1982 |
|--|--|
| Ms. Dianah Wanjiku Kamande- Director | Degree in Governance, Peace and Conflict Studies Diploma in Women in Leadership and Governance in Africa Independent Director Member Audit and Programmes Committee |
| Ms. Lucy Kawira Kiria- Director | Date of Birth: 09/01/1965 Master of Business Administration Diploma in Public Relations Management. Bachelor of Science in Business Management. Senior Managers Leadership Program Served at the East African Portland Cement PLC for 29 years. Independent Director Member, Audit and Programmes Committee |
| 9. Dr. Rashid Ali Omar. Director 10. Mrs. Bernadette Resian Loloju Secretary to the Board | Date of Birth: 20/12/1958 PhD in Sociology MA Social Development Anthropology B.A in Islamic Law Diploma in Linguistic Independent Director Member Finance and Programmes Committee Date of Birth: 1975 M.A in Global Community Development World Concern international for 3 years World Vision Kenya for 10 years CEO, Anti-FGM Board Secretary to the Board |

4. Key Management Team

| | Management | Details |
|----|--|---|
| 1. | Mrs. Bernadette Resian Loloju Chief Executive Officer B.A Community Development M.A in Global Community Development World Concern international for 3 years World Vision Kenya for 10 years | Responsible for providing strategic and transformative leadership in development, regulation, coordination and supervision of the Anti-FGM programmes according to the provisions of the Prohibition of Female Genital Mutilation Act No.32 of 2011 that prohibits the practice of Female Genital Mutilation and safeguard against the violation of a person's mental or physical integrity through the practice of Female Genital Mutilation and for connected purposes. |
| 2. | Mr, Bennie Kutwa Manager, Programmes M.A in Social Development and Management Bachelor of Education, Arts Post Graduate Diploma in Project Planning and management Graduate teacher for 12 years Chief Officer, Department of Public Service and Administration, Vihiga County for 4 years Manager, Programmes Anti-FGM Board for 2 years | Responsible for provision of strategic leadership and direction in the Programmes Directorate by initiating development, implementation, and review of Anti-FGM Programmes according to the Prohibition of Female Genital Mutilation Act No.32 of 2011, to ensure effective coordination and management of strategies in areas of advocacy and public education, field coordination resource mobilization and Linkages. |



Mr. Nicholas Songok

Manager, Policy, Planning and Strategy

- M.A in Monitoring and Evaluation
- Bachelor of Arts
- Certified associate in project management (CAPM)
- Principal Co-op Officer, Dept. of Finance
 Marketing, Ministry of Industry, Trade
 and Co-operatives in 2019
- Manager, Policy, Planning and Strategy,
 Anti-FGM Board for 2 years

Responsible for provision of strategic leadership and direction in the directorate of Policy and Research regarding formulation, review and implementation of policies, strategies, standards, guidelines, procedures programmes on planning, strategy, identification, undertaking and implementation of relevant research projects at all functional areas of the board.

3.



CPA Josphat Mweu Kamuti

Manager, Finance

- MBA (Finance),PHD BA (ongoing)
- Bachelors of Commerce (Finance)
- CPA(K)
- 19 years' experience in Financial Management.

Responsible for budget and budgetary control, working capital management, financial reporting development and implementation of sound accounting and financial management systems in line with Public Finance
Management (PFM) Act 2012, Regulation 2015 and the International Public Sector Accounting Standards (IPSAS)

4.



Ms.Habiba Barre Assistant Manager, Human Resource and Administration

- Bachelor of Business Management (Human Resource)
- Higher Diploma in Human Resource Management
- Over 12 years' experience in People Management from various institutions

Responsible for provision of strategic human resource advisory services including recruitment & selection, placement, retention, training and development, performance management, discipline, administration of staff welfare and separation, coordination of administrative matters, security services and records management.

5.



Ms.Shelmith Leshinka
Supply Chain Management Officer

- MCIPS
- MSc. Procurement & Logistics
- BSc in Supply Chain Management

Responsible for undertaking procurement of goods, works and services and management of inventories and disposal of assets in accordance with the provision of Public Procurement and Asset Disposal Act (PPADA) 2015 and Public Procurement and Asset Disposal Regulations 2020

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Brian Mureithi
Public Communication Officer.

- M.A in Communication Studies (Development Communication)
- Bachelors of Journalism and Mass Communication
- 8 years' experience in communications and media practice

Responsible for coordinating the enhancement of the Board's visibility, corporate image branding and facilitate effective communication channels between the Board, the internal and external stakeholders as guided by the Anti-Female Genital Mutilation Board Act and Public Relations strategies.

5.



CPA Sarah Amisi Internal Audit Manager

- MBA- Finance
- BSc Mathematics.
- Certified Public Accountant Kenya CPA(K)
- Certified Information System Auditor -CISA
- Certified in Risk and Information Systems
 Control CRISC
- Lead ISO auditor.

Responsible for planning and implementing internal audit strategy that provides independent, objective assurance and consulting activity aimed at adding value, improving the operations of the Board and establishing risk management controls and governance processes.

6.

The Board has enhanced partnership and linkages which has resulted to more resource mobilization, joint programmes implementation and improved reporting. The Board has also been able to develop a number of strategic documents including Guideline to Men andBoys Engagement in Ending FGM, FGM Journalist and Editors Tool Kit and Training Manualfor Anti-FGM Champions, Guideline to Community Dialogue, Guideline to Alternative Rite of Passage and Eliminating FGM Handbook.

All these strategic Documents are meant to provide a framework in the implementation of FGM interventions and serve as resource, reference and learning materials. The Board has also translated the prohibition of FGM Act, 2011 to Arabic, Braille and into a simplified version. This is meant to increase awareness and understanding of the existence of the Legal Framework. Due to the challenges of funding the Board has remained strategic in creating partnerships by bringing on board other partners such as UNFPA, UNICEF, Equality Now, Africa Led Movement to end FGM, World Vision, Amref-Health Africa among others. These partners have directly or indirectly funded the Board through funding, implementation of joint work plans, research, and development of strategic documents.

FGM being asocial norm many communities have remained resistant to the end FGM Campaign. The Board has dealt with this challenge by creating awareness and the consequences of FGM and through dialogue forum especially with cultural leaders, elders, religious leaders, Youths, Women, Civil societies, and other opinion leaders in the community. The re-emergence of FGM in counties which are not among the hot spot has been one of the greatest challenges in the end FGM. The Board has been able to deal with this by capacity building National Government Administrative officers and other duty bearers in the affected counties and also worked closely with Judiciary to ensure perpetrators face the rule of law.

To fully implement the Strategic Plan and the National Policy for Eradication of FGM the Board has remained steadfast in creating and engaging grass root structures. These include establishment of County and Sub-County Anti-FGM Steering Committees. The structures are meant to harmonize, coordinate and create accountability mechanisms to allgender actors implementing Anti-FGM and GBV interventions. Movement building networks such as Youth Anti-FGM Networks, Survivors Forum and Anti-FGM Champions asestablished by the Board will amplify the voices of Anti-FGM crusaders,

Mrs.

Ipato

Surum

Chairperson of the Board.

5. Chairman's Statement

Female Genital Mutilation is a harmful cultural practice and also a form of gender-based violence perpetuated against millions of girls and women every year globally. Kenya has made notable progress towards abandonment of the practice. According to the Kenya Demographic and Health Survey (KDHS) 2014, the national prevalence of FGM has declined over time from 32 % in 2003 to 27% in 2008/09 to 21% in 2014 and 15% in

The decline can be attributed to multi-faceted interventions mounted by both the state and non-state actors. The enactment and implementation of the Prohibition of FGM Act 2011, the constitutions, Children's Act 2022 among other regional and international legal provisions have also played a key role in the reduction of the prevalence.

However, the 15% prevalence is very high. Our Vision is to realize Zero Tolerance to FGM. Therefore, to promote the abandonment of FGM, we have adopted coordinated and systematic strategies. We have engaged all communities and focussed on human rights and gender equality. Our strategies have been more innovative, emphasized on societal dialogue and the empowerment of communities to act collectively to end the practice. We have also its consequences. Our strategies must be resilient enough to cope up with humanitarian crises such as climate change and pandemics that disrupted the patterns of the school Kenya.

According to (KDHS 2022), the knowledge about FGM among the Kenyan Population is over 90% for both men and women in all the counties. Therefore, it beats logic to learn that the prevalence of FGM is still high despite the knowledge and understanding of its consequence. This is a manifestation of defiance and an indication that communities will continue to perpetuate FGM not because of ignorance of its consequences but because of sustaining social norms in total disregard of the law. It is therefore incumbent upon all theduty bearers abandonment of FGM. Ending FGM needs a very strong political commitment and sound government that subscribes to the rule of law.

It is on this basis that the Kenya Kwanza Government has prioritized the elimination of FGM in Kenya in its Plan. Under the Women Agenda point four of the 9 points the Government commits to increase funding for the Anti-Female Genital Mutilation (FGM) Board and fully implement the Anti-FGM law. To reinforce point four under the Women Agenda His vicellency the President on 5th December 2022 during the Launch of the State of the diciary Report in Nairobi he said that FGM should not be a conversation we are having in uring that we eliminate FGM in our country because it is not only against the law but also in higher to the health of girls and women in Kenya.

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6. Report of the Chief Executive Officer

During the 2022-2023 FY the Board managed to implement a number of activities. This was in line to achieving the Vision of the Board which having a society free from FGM, the Board's Strategic Plan and the Government's Agenda of Bottom-up Transformation Agenda (BETA).

Kenya Demographic and Health Survey 2022 indicated a decline of FGM from 21% in 2014 to 15% in 2022. The decline can be attributed by the great efforts of the Board, partners, civil societies, champions, role models and the media. The major milestones achieved included hosting dialogue forum with elders from Maasai, Borana, Sabaot, Kuria, Kipsigis and Rendile communities. Elders are the gate keepers of culture. Therefore, FGM being a social norm practice the involvement of the cultural leaders and elders to commit to end FGM will result to change of attitude, behaviour, stereotypes and associated practices related to FGM among the community members.

To enhance coordination, share successes, challenges and lessons learnt the Board organized quarterly meeting for the County Anti-FGM steering Committees in Wajir, Tana River, Garissa, Isiolo, Marsabit and Mandera Counties. The quarterly meetings also created an opportunity for the members to share the situation of FGM at the community levels and areas that need attention. As a result, 300 members of the steering committees were reached in the stated counties. An accountability mechanism was also crafted to put to task the Samburu elders to disseminate the Kisima declaration to end FGM and child marriage at grass root levels.

The Board also retained the Sustainable Development Goals Award for three years running as the best institution in Kenya that has employed the best strategies in realising the SDGs.

The Board appreciates progressive culture that respect the rights and dignity of all. In this regard the Board attended the Maa cultural festivals is Sekenani. The festivals created a forum for the Board to create awareness to 500 people on the effects of FGM and Prohibition of FGM Act, 2011. Cross border FGM has become one of the leading and emerging trends in the practice of FGM. To contain this, during the International Day of the Girl in Taita Taveta County the Board organized for across border engagement between the elders from Tanzania and Kenya. The event also brought together leaders of community-based organizations implementing Anti-FGM interventions along the Borders toshare the best practices that can be deployed in ending cross Border FGM. The forum was used to disseminate the Costed regional Action Plan that was developed by Kenya, Uganda, Tanzania, Ethiopia and Somalia to end cross boarder FGM. In order to enhance movement building and provide a platform for the survivors to amplify their voices and share their experiences the Board in partnership with Africa Led Movement to End FGM

organized for a round table discussion with 50 survivor's fora for the survivors from all the 22 FGM Hotspot Counties. Participants were tasked to lead the process of establishing survivor's forum in their specific Counties.

Youths play a very important role in ending FGM because they are extremely receptive to the end FGM messaging and therefore their uptake of the end FGM campaign cannot be underestimated. Therefore, to mobilize the voices of the young people to fully participate in the quest to end FGM the Board launched and capacity build Youth Anti-FGM Networks in Laikipia, Tana River and Wajir Counties. Ending FGM will only be realized in this generation and therefore cognizance of the fact that the age of cutting has been reduced to children the youths bear the brunt of FGM and are also more at risk of being subjected to FGM. Thus, their involvement is of uttermost importance. The Board also engaged students through campus dialogue forum in Garissa University.

During the year in review, Board was also able to observe all International days that advance the rights of children and women and international days that advocates for endingGender Based Violence. Such days included; International Day for Zero Tolerance to FGM which was observed in Ntimaru Sub-County-Migori County, 16 Days of Activism against GBV, International Day of the Girl in Taita Taveta County, International Day of the African Child in Kajiado County, International Day of Women and International Widows Day in Nakuru County. The Board used the International Days to create awareness on the effects of FGM and the existing policy and legal framework. The Board used various channels of engagement with the public including the media and physical community dialogues to disseminate the information. Further, the Board supported and organized Alternative Rite of Passage and girls Mentorship programmes in Baringo and Laikipia Counties. A total of 670 girls were reached.

The Board also participated in the development of various documents including Development of the Protocol for Baseline Survey on Harmful Practices, developed Monitoring and Evaluation Plan and Result Based Management and a roadmap to the amendment of the Anti-FGM Act, 2011. The Board further validated the Curriculum for Girls from the Christian Perspective and supported Narok County to develop the Narok County anti-FGM Policy to end FGM.

In order to coordinate and partner with civil societies implementing Anti-FGM interventions the Board held a consultative meeting with CBOs to understand their key thematic and focal areas from the 22 hot spot counties. The meeting brought together key actors in Naivasha who shared their experiences and firmed up linkages and partnership. The Board further engaged the public on awareness creation through the mainstream media and local media such as Inooro FM, Nosim FM, Radio Togotane, Kameme FM and TV. For both channels the Board reached out to about 20million Kenyans with information on the effects of FGM and the need to abandon FGM. To ascertain the level of change that the Board has realized in the interventions implemented the Board undertook monitoring visitsin West Pokot, Wajir, Migori, Elgeyo Marakwet and Samburu Counties.

In the course of implementing the mentioned activities to end FGM the Board has faced several challenges including but not limited to the Board's inadequate resource allocation for the 2022/2023 FY budget that affected the implementation of the workplan.

Also, many counties have not fully established all the Sub County Anti-FGM Steering Committees. This will have a negative impact on coordination and partnership among the anti-FGM Stakeholders. Being a social norm practice, FGM is deeply rooted among communities. As a result, the uptake of end FGM among communities in some communities has been slow notably in Migori where there were cases of FGM a mong the Kuria Community in November and December 2022. Emerging trends in FGM such as crossboarder FGM, medicalization and secrecy pose a great challenge to end FGM.

In an attempt to build on our success and mitigate the challenges the Board will endeavour to launch and capacity build the remaining Sub-County Anti-FGM Steering committees, enhance Monitoring and Evaluation to ascertain the level of efficiency and effectiveness of our interventions. The Board will also launch and continuously strengthen the remaining Youth Anti-FGM Networks. The Board will further engage cultural elders and religious leaders. Sustained dissemination of the declaration to all stakeholders and community members will be crucial in enhancing the uptake, sustainability and ownership of declarations made by Cultural leaders and elders. There will be enhanced cross border engagements especially among CBOs implementing anti-FGM interventions among border communities. To sustain surveillance and reporting duty bearers will continuously be capacity build and involved. Engaging survivors and enhanced media campaigns will be deepened. Increased dissemination of IEC Materials and the Prohibition of FGM Act, 2011 to communities. Enhanced support to our partners especially those working in hard to reach and insecure places. The Board will further enhance partnerships and encourage joint implementation of interventions.

Boip

Chief Executive Officer Bernadette Loloju

Statement of Performance against Predetermined Objectives for FY 2022/2023

Anti-Female Genital Mutilation Board has eight (8) strategic pillars/themes and objectives within the current Strategic Plan for the FY 2022/2023-1. These strategic pillars/ themes are as follows:

Pillar 1: Policy formulation and implementation

Pillar 2: Coordination, Partnership and collaboration

Pillar 3: Mitigation of FGM emerging trends

Pillar 4: Awareness Creation and Advocacy

Anti-FGM Board develops its annual work plans based on the above pillars. Assessment of the Board's performance against its annual work plan is done on a quarterly basis. The Anti-FGM Board derived and achieved its performance targets set for the FY 2021/2022 period for its 2019-2023 strategic pillars, as indicated in the diagram below:

| | | Paring manage | | Achievelments |
|------------------|-----------------|---------------|---------------|----------------------|
| | | | | |
| 4 | | | | |
| Pillar 1: Policy | To Improve | Number of | -Develop and | -Formulated and |
| formulation and | Policy | policies in | launch county | launch national |
| implementation | formulation | place | and national | policy for the |
| | and | 8 | anti-FGM | eradication of |
| | implementation | | policies | female genital |
| | at National and | | | mutilation |
| | County level | | - Develop and | -5 Counties |
| - | | | launch county | developed and |
| | , | | Action Plans | launched County |
| | | | and minimum | Action plans (Kisii, |
| | | | packages | Migori, Tana |
| | | | | River, Garissa and |
| | | | | Wajir |

| Strategic Pillar | Objective | Key Performance | Activities | Achievements |
|------------------|---------------|--------------------|--------------|---------------------|
| | | Indicators | | |
| | | | | - Development of |
| | | | | investment cases |
| ¥ | | | | to end harmful |
| | | | | cultural practices |
| Pillar 2: | To strengthen | Number of | - Strengthen | -County Anti-FGM |
| Coordination, | Coordination, | partners both | county | steering |
| Partnership and | Partnership | state and | Anti-FGM | committees in 22 |
| collaboration | and | non-state | Steering | Hot spot counties |
| | collaboration | actors | committee | trained and |
| | with other | working with | | facilitated to hold |
| | institutions | AFGMB | | their quarterly |
| | | | | meetings |
| = | | | | -Anti-FGM |
| | | | | steering |
| | | | | committees |
| | | - | | formed in 44 sub- |
| | | | | counties |

| Pillar 3: | To add | dress | Performance Indicators | | |
|--------------|---------------------|---------|---------------------------|----------------|-------------------|
| Mitigation | _ | merging | Number of | -Address cross | s The Gender |
| FGM emer | | merging | programmes | border | Ministers of |
| trends | dichas | | to address | dialogues | Kenya, Ugand |
| | | | emerging | Address | Tanzania, Ethi |
| | | 1 | issues | medicalized | and Somalia m |
| | | - 1 | initiated and | FGM | on 24th and 25th |
| | - | | implemented | | November 2021 |
| | | | | | Uganda to discu |
| | | | | | the way forward |
| | | - 1 | | 1 | on dealing with |
| _ | . | | | 1 | cross border FGM |
| | | | | 1 | Ministry of Healt |
| | | | | | eviewed GBV |
| | | | | i | ata Collection |
| | | 1 | | 1 | ools to capture |
| | | | | | iM. It also |
| | | | | 1 | inched training |
| | | | | 1 | terial towards |
| | | | | 1 | ponse and |
| | | | | 1 | vention of |
| Pillar 4: | To 60 | | | 1 | licalized FGM |
| Awareness | To formulate | 1 | persons -Capa | | acity build of |
| Creation and | and | traine | Jana | 1 | 6 duty |
| Advocacy | implements | sensiti | zed resou | - 1 | ers and |
| | Programmes | | person | | rce persons |
| | aimed at addressing | | duty b | 1 | counties |

| Strategic Pillar | Objective | Key | Activities | Achievements |
|------------------|-------------|-------------|-------------|-------------------|
| 《李瑟 斯》 | | Performance | | |
| | | Indicators | | |
| | FGM social | | Consensus | Migori and Elgeyo |
| | norms and | 43 | building on | Marakwet held a |
| | women | | ending FGM | dialogue with |
| | empowerment | | | elders as follows |
| v | | | | a) 22nd |
| | | | | September: |
| | | | | Anti-FGM |
| | | | | Consensus |
| | | | | building at |
| | | | | Chebilil |
| | | | | b) 23rd |
| | | | | September: |
| | | | | Anti-FGM |
| | 2 | | | Consensus |
| | | | | building at Mon |
| | | | c |) 24th September: |
| | | | | Anti-FGM |
| | | | | Consensus |
| | | | | building at |
| | | | | Mokoro |
| 1 | | | d | 8th October: |
| | | | | Consensus |
| | | | | building with |
| | | | | Kuria Elders to |
| | | | | Abandon FGM |
| | | | | Celebration of |
| | | | I | nternational Day |

| Stra | tegic Pillar | Objective | Key | Activities | Achievement | 1 |
|------|--------------|-----------|-------------|----------------|-------------------------------|----|
| | | | Performance | | AGINEVELLAND | 1 |
| | | | Indicators | | | |
| | | | | Celebrate | of Zero Toleran | ce |
| | | | | Internation | nal to FGM 2022 or | 1 |
| | | | | Day of Zero | 6 th , February 20 | 20 |
| | | | | Tolerance to | to at Wajir town in | |
| | | | | FGM | which at least 20 | 00 |
| | | | | | Muslims religious | 5 |
| | | | | | leaders and | |
| | | | | | scholars | |
| | | | | | participated | |
| | ~ | | | | | |
| | | | | | Over 5,000 IEC | |
| | | | | | materials were | |
| | | | | | produced and | |
| | | | | Produce and | disseminated | |
| | | | | distribute IEC | | |
| | | | | materials on | With the use of | |
| | | | | FGM | social and | |
| | I | | | | mainstream media | 6 |
| XIT. | | * | | Broaden | AFMB was able to | |
| | | | | Media | spread anti-FGM | |
| | | | 1 | campaigns | messages to 10 | |
| | | | a | gainst FGM | million Kenyans. | |
| | | | | | | |
| | | | | ngagement | 250 Maasai elders | |
| | | | | f religious | were engaged | |
| | | | | nd cultural | | |
| | | | el | ders | | |

| | | | | Achievements |
|------------------|--|-------------|-------------------|----------------------|
| Strategic Pillar | Objective | Key | Activities | Acilievelliene |
| | | Performance | | |
| | | Indicators | | |
| | A CONTRACTOR OF THE PARTY OF TH | | | The Board |
| | | | Monitoring | undertook M&E |
| | | | and | missions in Elgeyo |
| | | | Evaluation | Marakwet, West |
| | | | Missions held | Pokot, Narok, |
| | | | 1.112210112 11010 | Baringo and |
| | | | | Samburu |
| | | | | -2 Self- |
| | | | | assessment |
| | | | | retreats with |
| | ~ | | | Multi-agency |
| | | | * | members and |
| | - | | | county anti-FGM |
| | - | | | representatives |
| | g | 81 | | 1 |
| | | | | were held. |
| | | | I C ALCM | B strategic plan and |

- The activities and strategies above were derived from the AFGMB strategic plan and implemented through performance contracting
- The anti-FGM Board Strategic Plan (2019-2023) set the strategic goals and
 objectives that the Board will pursue within the five years of the Plan period
 Performance Contracting Guidelines issued by Division of Performance Contracting, provide
 guidance in the process of deriving performance targets from the strategic plan and
 implementation of Performance Contracts by the board with an ultimate objective of
 ensuring that performance is measured using international best practices and that
 performance targets are realized.

8. Corporate Governance Statement

Board Composition

During the year under review, nine (9) persons served as directors, three (3) independent non-executive directors, four (4) alternates to Principal Secretaries and Chief Executive Officer. Given below is the summary of Directors who served during FY 2022/2023.

| No. | Name - Marie - | Role Role |
|-----|--|---|
| 1. | Ms. Ipato Surum | Chairperson |
| 2. | Dr. Rashid Omar | Director, Independent |
| 3. | Ms. Lucy Kiria | Director, Independent |
| 4. | Ms. Dianah Kamande | Director, Independent |
| 5. | Mrs. Emily Opati | Director, Alternate to the PS, State Department for |
| | | Gender |
| 5. | Ms. Susan Karuri | Director, Alternate to the PS, National Treasury |
| | Dr. Bashir Mohammud Issak | Director, Alternate to the PS Health |
| | Mr. Hassan Duale | Director, Alternate to the PS, Basic Education |
| | Ms. Emily Maina | Director, Alternate to the PS Youth Affairs |
| 0. | Ms. Bernadette Loloju | Chief Executive Officer |

Roles and Responsibilities of Directors

The Code of Governance for State Corporations Mwongozo and the Board's Charter outlines the roles and responsibilities of Directors.

Attendance to Board Meetings by Members

During the reporting period the Board held seven (7) full board meetings, six (6) Finance and administration meetings, four(4) programmes committee meetings, four(4) audit committee meetings, seven (7) Ad hoc meeting. During the reporting period the Board held a total of twenty-eight (28) meetings. Therefore, as required by Mwongozo Code of Governance, the Board of Directors dedicated adequate time to discharge its duty as presented in the tables below;

| | CE AND ISTRATION TTEE | | | 9/20 | 2022 | 1/20 23 | 4/20 | NO. OF MEETIN GS | ATTE |
|-------|-----------------------|---|----|----------|----------|------------|---------------------------------------|------------------------|------|
| S/NO. | NAME | | | | | | J | 6 | 6 |
| 1 | Dr. Rashid Omar | 1 | 1 | 1 | ٧ | ٧ | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | | 4 |
| 2 | Mr. Hassan Duale | | 1 | 1 | 1 | | 1 | 6 | |
| 2 | | 1 | -1 | 1 | V | V | V | 6 | 6 |
| 3 | Ms. Emily Opati | 1 | 1 | Y | <u> </u> | | J | 6 | 5 |
| 4 | Ms. Emily Maina | 1 | 1 | 1 | | 1 | V . | | - |
| | | | | 1 | | | 1 | 6 | 3 |
| 5 | Ms. Susan Karuri | 1 | | <u>'</u> | | | | | 1 |

| PROGR | AMMES COMMITTEE | 12/07 | 3/10/ | /2023 | 2023 | MEETINGS | ATTENDEL |
|-------|---------------------|-------|---------|-------|---------|----------|----------|
| 5/NO. | NAME | | 1 , 2 1 | 1 | | 4 | 4 |
| 1 | Dr. Rashid Omar | 1 | 1 | 1 | V | - | 2 |
| | Mr. Hassan Duale | | 1 | | 1 | 4 | |
| | | | 1 | 1 | 1 | 4 | 3 |
| 3 | Dr. Bashir Issak | | , | 1 | 1 | 4 | 3 |
| 4 | Ms. Emily Maina | 1 | | N | V | • | 4 |
| 5 | Ms. Lucy Kiria | 1 | 1 | 11 | 1 | 4 | 7 |
| 5 | | 1 | 1 | 1 | 1 | 4 | 4 |
| 6 | Ms. Diannah Kamande | V | V | | <u></u> | | |

| UDIT | COMMITTEE | 4/10/ 2022 | 12/04 | 3/05/ 2023 | 2023 | NO. OF MEETINGS | ATTENDED |
|------|---------------------|---------------|----------|---------------|------|--------------------|----------|
| /NO. | NAME | | | | | 4 | 4 |
| 1 | Ms. Diannah Kamande | 1 | 1 | 1 | ٧ | | 3 |
| 2 | Dr. Bashir Issak | 1 | 1 | 1 | | 4 | 3 |
| | Ms. Emily Opati | 1 | 1 | 1 | 1 | 4 | 4 |
| 3 | | 1 | 1 | 1 | 1 | 4 | 4 |
| 4 | Ms. Lucy Kiria | V | <u> </u> | 1 | 12/ | 4 | 4 |
| 5 | Ms. Susan Karuri | 1 | 1 | V | | | |

| | BOARD MITTEE NAME | 7/20 | | | | | | 13/04/ 2023 | NO. OF MEETI NGS | |
|----|-------------------------|------|-----|----|-----|-------|-----|----------------|------------------------|---|
| 1. | Ms. Ipato Surum | - | - | | | | | | | T |
| 2. | Dr. Rashid Omar | 1 | 1 | 1 | 1 | | 1 | 1 | 7 | 1 |
| 3. | Mr.Hassan Duale | + | 1 | | 1 | | | √ | 7 | 7 |
| | Ms. Emily Opati | 1 | 1 | 1 | - | | , | | 7 | 5 |
| 9 | Ms. Emily Maina | 11 | 1 | -+ | | | , | | 7 | 6 |
| | Ms. Susan Karuri | 1 | 1 | 1 | 1 | - | ' | | | 5 |
| | Ms. Lucy Kiria | | V V | | | | , , | | | 6 |
| | Dr. Bashir Issak | | 1 1 | | | , ' | | | | 7 |
| 1 | Ms. Diannah | VV | | | , I | - ' | 1 | | 1 | 6 |
| 1 | Kamande | | | 1 | 1 | 1 | 1 | 7 | 7 | 7 |

| 3. Dr. Bashir Issak $\sqrt{}$ $\sqrt{}$ $\sqrt{}$ 7 4. Ms. Dianah Kamande 5. Mr. Hassan Duale 6. Ms. Lucy Kiria | NO ATT TI ED |
|--|--------------------|
| 2. Ms. Emily Maina | GS MEE |
| 3. Dr. Bashir Issak $\sqrt{}$ $\sqrt{}$ 7 4. Ms. Dianah Kamande $\sqrt{}$ 7 Mr. Hassan Duale $\sqrt{}$ 7 Ms. Lucy Kiria | |
| Ms. Dianah Kamande Mr. Hassan Duale Ms. Lucy Kiria | 3 |
| . Mr. Hassan Duale Ms. Lucy Kiria 7 | 3 |
| Ms. Lucy Kiria | 1 |
| 7.15. Eddy Kirld | 1 |
| Dr. Rashid Omar | 3 |

Board Charter

There is a board charter that provides guidelines to the Board in exercising its mandate. The charter was adopted by the organization in accordance with Mwongozo Code of Governance for State Corporations.

Directors' external activities and conflict of interest

The Board members conduct their activities while avoiding conflict of interest in line with Annexure I section D(10) (Conflict of interest) and Annexure II (section 3.1 (Prevention of conflict of interest) of the Mwongozo Code of Governance for State Corporations.

Board Remuneration

The renumeration of the Board of Directors is determined by as per circular from the Office of the president Ref No. OP/CAB/IA on Management of State Corporations dated 11th March 2020 and circulars from Salaries and Remuneration Commission (SRC). The Salariesand remuneration Commission is an independent constitutional commission established under Article 230 of constitutional and the Salaries and Remuneration Commission Act 2011. The remuneration comprises of sitting allowance payable to members when attending to the business of the Board and an allowance paid monthly in arrears. Where transport is not provided, a Board member is paid mileage at prevailing AA rates, when Board members are working outside the Board's headquarters, they are entitled to Daily Subsistence Allowance (DSA) at applicable rates determined by SRC.

Appointment and Removal of directors

Board appointments is in line with Article 27 of the constitution and is done in a transparent and formal process governed by the principles of merit and consider mix of skills and competencies and maybe removed from office based on non-performance, non-attendance of meeting, unethical conduct or as set out in any constitutive documents or applicable law.

Board Ethics and Conduct

Board members should observe the highest standards of ethical conduct and comply with laws, rules and regulations to which they we subject. The Mwongozo requires Boards of state corporations to ensure that a code of conduct and ethic is developed in their organization. The Board is required to promote ethical conduct and sanction misconduct.

The Board has a code of conduct and ethics that guides the Board and staff when undertaking their duties.

Conflict of Interest and Declaration of Interest

The Board of Directors has a statutory duty not to have interest that conflict with those the Board. All Board members sign declaration of interest from indicating that they w disclose any matters of potential conflict of interest at the start of every meeting.

The Board evaluation for F/Y 2021/2022 was conducted as guided by SCAC and the results of evaluation presented with areas of improvement noted for action. **Board diversity**

The Board composition is made of directors who have a wide range of skills and competencies. The board satisfies the constitutional requirement of having at least onethird of its existing members be of one gender, with female to male ratio 6:3.

Board Induction and Training

In the year ended the Board facilitated a Mwongozo training for all directors.

9. Management Discussion and Analysis

| Activity undertaken | Place/C ounty | Indicato | Target | Numbers | Remarks 4 188 |
|--|---|---------------------|--------|---------|--|
| Dialogue forum and awareness creation Resource persons and National Government Administration Officers including Survivors, Youths, during international Days that protect women and girls | All te 22 FGM Hotspot counties | Number of people | 1500 | 6740 | A awareness creation on the effects of FGM and the existing legal framework |

| Dialogue forum with elders from Maasai, Kipsigis and Rendile communities, maasai, Babaot | Narok and Marsabit counties | Number of people | 500 | 700 | The programmes was supported by UNICEF. The forum was a continuation of the already ongoing engagement with the elders from the Maasai and Rendile elders towards a declaration. |
|--|--|---------------------|-----|-----|---|
| Quarterly meetings for the County Anti-FGM Steering Committees | Wajir. Tana- River, Garissa, Isiolo, Marabit, Mandera bungom a | Number of people | 250 | 300 | The meetings generated information regarding the annual achievements, challenges, stakeholder mapping and planning for the next financial year. The Meeting was supported by UNICEF |

10. Environmental and Sustainability Reporting

i) Sustainability strategy and profile

The Board has continued to ensure that it meets its financial, social and environmental obligations for long-term sustainability. In the year under review, the Board ensured that the resources were allocated to technically and financially feasible programmes as well as environmentally and socially sustainable.

ii) Environmental performance

The Ant-FGM Board has not developed the environmental policy and it does not produce any products that require disposal or produces any emissions that can be of high risk to the environment. However, the Board has endeavoured to contribute towards a clean and sustainable environment by outsourcing a cleaning services firm that is licensed to offer cleaning services and proper management of waste and disposal. The board also encourages a paperless operation in offices that cumulatively contributes to environmental conservation and general management of biodiversity. The Board embarked on tree

planting exercise in Migori county during the year under review, planting over three hundred (300) tree seedlings. The planting of tree contributes to efforts to manage biodiversity.

iii) Employee welfare

The Board is an equal opportunity employer and does not discriminate in its recruitment directly or indirectly against any person on any ground, including race, sex, pregnancy, marital status, ethnic or social origin, colour, age, disability, religion, belief, culture, dress, language or place of birth.

In its recruitment process the Board is guided by the Provision in the following policy and legal documents;

- i. The Constitution of Kenya,2010
- ii. The employment Act, 2007
- iii. The Public Service Human Resource Policies and Procedure Manual, 2016 and
- iv. The Anti-Female Genital Mutilation Human Resource Policy and Procedure Manual.
- v. The strategic plan of the Board.

The Board will endeavour to have a gender balanced staff establishment by ensuring that not more than 2/3 of positions in its establishment are filled by either gender while considering skills and education requirement for various posts.

The Board has put in place employee welfare mechanisms aimed at integrating the sociopsychological needs of the employees, the structure and processes of the organization and the existing socio-cultural environment to create a culture of work commitment in the organization which ensures higher productivity and greater job satisfaction to the employee. In the provision of employee welfare the Board complies with statutory requirement such as;

Compliance with the general welfare provisions of the Occupational safety and Health Act which includes; supply of wholesome clean drinking water, washing facilities, sitting facilities and a well-ventilated clean working environment.

Provision of Work Injury Benefit Insurance and Group Personal Accident Cover to safeguard safety of employees at the work place.

Other welfare provisions include;

In the reporting year, the Board reviewed the Human Resource instruments, conducted skills gap and training needs analysis and subsequently trained all staff to address skills gaps and develop staff for proper succession planning.

Provision of group medical cover for the employees.

Flexi-working hours.

In ensuring proper management of performance, the Board appraises its employees biannually to ensure targets are met and identify gaps in performance. This forms the basis for training needs and the basis for reward and sanctions at the Board.

iv) Market place practices-

The organisation should outline its efforts to:

a) Responsible competition practice.

The Board implements the Corruption Prevention Policy and Anti Bribery procedures in line with Anti-bribery Act. Furthermore, the Board undertakes corruption prevention and bribery risk assessment on a quarterly basis to identify critical touch points and implement controls to address potential risks.

b) Responsible Supply chain and supplier relations

Procurement policies have been in place to ensure fair competition considering the economy, efficiency, transparency and accountability according to legal and statutory requirements consistent with the governing law. The Board adheres to the Public Procurement and Asset Disposal Act 2015 and the Public Procurement and Asset Disposal regulations 2020 to increase transparency in procurement processes and pay the supplier on time.

v) Corporate Social Responsibility / Community Engagements

In partnership with Kenya Commercial Bank Foundation the Board was able to identify needy and support hundred (100) girls from twenty-two (22) FGM hot spot counties who benefited for scholarship programme for the 2023 class eight students transiting to form one.

The Chief Executive Officer of the Board as a role model has also been offering motivational talks to girls' schools in the FGM hotspot counties. This is aimed at motivatinggirls to pursue their dreams irrespective of the cultural barriers. Also, during the previous years the Board has engaged in environmental conservation by purchasing trees and distributing to our stakeholders and schools for planting during 16 Days of Activism againstFGM.

11. Report of the Directors

The Directors submit their report together with the audited financial statements for theyear ended June 30, 2023, which show the state of the Board's affairs.

i) Principal activities

The principal activities of the Board are set out on (iv)

ii) Results

The results of the Board for the year ended June 30, 2023, are set out on page $1\,$

iii) Directors

The members of the Board of Directors who served during the year are shown from page ix to xii. During the year Director Ipato Surum was appointed as the Chairperson with effect from February 2023.

iv) Auditors

The Auditor-General is responsible for the statutory audit of the Board in accordance with Article 229 of the Constitution of Kenya and the Public Audit Act 2015.

By Order of the Board



Mrs Bernadette Loloju Secretary to the Board

12. Statement of Directors Responsibilities

Section 81 of the Public Finance Management Act, 2012 and Prohibition of Female Genit Mutilation Act 2011 require the Directors to prepare financial statements in respect of that Board, which give a true and fair view of the state of affairs of the Board at the end of the financial year/period and the operating results of the Board for that year/period. The Directors are also required to ensure that the Board keeps proper accounting records which disclose with reasonable accuracy the financial position of the Board. The Directors are also responsible for safeguarding the assets of the Board.

The Directors are responsible for the preparation and presentation of the Board's financial statements, which give a true and fair view of the state of affairs of the Board for and as at the end of the financial year (period) ended on June 30, 2023. This responsibility includes:

(i) Maintaining adequate financial management arrangements and ensuring that these continue to be effective throughout the reporting period; (ii) Maintaining proper accounting records, which disclose with reasonable accuracy at any time the financial position of the Board; (iii) Designing, implementing and maintaining internal controls relevant to the preparation and fair presentation of the financial statements, and ensuringthat they are free from material misstatements, whether due to error or fraud; (iv) Safeguarding the assets of the Board; (v) Selecting and applying appropriate accounting policies; and (vi) Making accounting estimates that are reasonable in the circumstances.

The Directors accept responsibility for the Board's financial statements, which have been prepared using appropriate accounting policies supported by reasonable and prudent judgements and estimates, in conformity with International Public Sector Accounting Standards (IPSAS), and in the manner required by the PFM Act, 2012 and the State Corporations Act 2010. The Directors are of the opinion that the Board's financial statements give a true and fair view of the state of Board's transactions during the financialyear ended June 30, 2023, and of the Board's financial position as at that date. The Directors further confirms the completeness of the accounting records maintained for the

Board, which have been relied upon in the preparation of the Board's financial statements as well as the adequacy of the systems of internal financial control.

In preparing the financial statements, the Directors have assessed the Board's ability to

The Directors further confirms the completeness of the accounting records maintained for the Board, which have been relied upon in the preparation of the Board's financial statements as well as the adequacy of the systems of internal financial control.

Nothing has come to the attention of the Directors to indicate that the Board will not remaina going concern for at least the next twelve months from the date of this statement

Approval of the financial statements

The Board's financial statements were approved by the Board of Directors on

_2023 and signed on its behalf by:

KOREMA SURUM

Chairperson of the Board

Chief Accounting Officer

Benedette Lolojn Bois

REPUBLIC OF KENYA

Telephone: +254-(20) 3214000 E-mail: info@oagkenya.go.ke Website: www.oagkenya.go.ke



HEADQUARTERS

Anniversary Towers Monrovia Street P.O. Box 30084-00100 NAIROBI

Enhancing Accountability

REPORT OF THE AUDITOR-GENERAL ON ANTI-FEMALE GENITAL MUTILATION BOARD FOR THE YEAR ENDED 30 JUNE, 2023

PREAMBLE

I draw your attention to the contents of my report which is in three parts:

- A. Report on the Financial Statements that considers whether the financial statements are fairly presented in accordance with the applicable financial reporting framework, accounting standards and the relevant laws and regulations that have a direct effect on the financial statements.
- B. Report on Lawfulness and Effectiveness in Use of Public Resources which considers compliance with applicable laws, regulations, policies, gazette notices, circulars, guidelines and manuals and whether public resources are applied in a prudent, efficient, economic, transparent and accountable manner to ensure Government achieves value for money and that such funds are applied for the intended purpose.
- C. Report on Effectiveness of Internal Controls, Risk Management and Governance which considers how the entity has instituted checks and balances to guide internal operations. This responds to the effectiveness of the governance structure, the risk management environment and the internal controls, developed and implemented by those charged with governance for orderly, efficient and effective operations of the entity.

An unmodified opinion does not necessarily mean that an entity has complied with all relevant laws and regulations and that its internal controls, risk management and governance systems are properly designed and were working effectively in the financial year under review.

The three parts of the report are aimed at addressing the statutory roles and responsibilities of the Auditor-General as provided by Article 229 of the Constitution, the Public Finance Management Act, 2012 and the Public Audit Act, 2015. The three parts of the report, when read together constitute the report of the Auditor-General.

REPORT ON THE FINANCIAL STATEMENTS

Opinion

I have audited the accompanying financial statements of Anti-Female Genital Mutilation Board set out on pages 1 to 32, which comprise of the statement of financial position as at 30 June, 2023, and the statement of financial performance, the statement of changes

in net assets, statement of cash flows and statement of comparison of budget and actual amounts for the year then ended, and a summary of significant accounting policies and other explanatory information in accordance with the provisions of Article 229 of the Constitution of Kenya and Section 35 of the Public Audit Act, 2015. I have obtained all the information and explanations which, to the best of my knowledge and belief, were necessary for the purpose of the audit.

In my opinion, the financial statements present fairly, in all material respects, the financial position of Anti-Female Genital Mutilation Board as at 30 June, 2023, and of its financial performance and its cash flows for the year then ended, in accordance with International Public Sector Accounting Standards (Accrual Basis) and comply with the Public Finance Management Act, 2012 and the Prohibition of Female Genital Mutilation Act, 2011.

Basis for Opinion

The audit was conducted in accordance with International Standards of Supreme Audit Institutions (ISSAIs). I am independent of the Anti-Female Genital Mutilation Board Management in accordance with ISSAI 130 on Code of Ethics. I have fulfilled other ethical responsibilities in accordance with the ISSAI and in accordance with other ethical requirements applicable to performing audits of financial statements in Kenya. I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for

Key Audit Matters

Key audit matters are those matters that, in my professional judgment, are of most significance in the audit of the financial statements. There were no key audit matters to report in the year under review.

Other Matter

Unresolved Prior Year Matters

In the audit report of the previous year, several issues were raised under the Report on Financial Statements, Report on Lawfulness and Effectiveness in Use of Public Resources and Report on Effectiveness of Internal Controls, Risk Management and Governance. However, Management has not resolved the issues or given any explanation for the failure to adhere to the provisions of the Public Sector Accounting Standards Board templates and The National Treasury's Circulars.

REPORT ON LAWFULNESS AND EFFECTIVENESS IN USE OF PUBLIC

Conclusion

As required by Article 229(6) of the Constitution, based on the audit procedures performed, except for the matter described in the Basis for Conclusion on Lawfulness and Effectiveness in Use of Public Resources section of my report, I confirm that, nothing else has come to my attention to cause me to believe that public resources have not been applied lawfully and in an effective way.

Basis for Conclusion

1. Lack of Lease Agreement on Rental Expenditure

The statement of financial performance reflects use of goods and services expenditure of Kshs.81,728,478 as disclosed in Note 6 to the financial statements. Included in the balance is an expenditure on rent amounting to Kshs.6,832,760. However, the expenditure was not supported by a lease agreement.

In the circumstances, the propriety of the rental expenditure of Kshs.6,832,760 could not be confirmed and Management is in breach of the Public Procurement and Asset Disposal Act, 2015.

2. Failure to Fill Vacant Positions

Review of the staff establishment and the payroll data revealed that the Board had fourteen (14) employees in various cadres against the authorized establishment of sixty-six (66), resulting in a deficit of fifty-two (52) or 78%. The staff shortage if not addressed, could adversely affect the operations of the Board and service delivery to the public.

In the circumstances, the Board may not achieve its goals due to inadequate human resource capacity.

In the circumstances, Management was in breach of the Circulars.

The audit was conducted in accordance with ISSAI 4000. The standard requires that I comply with ethical requirements and plan and perform the audit to obtain assurance about whether the activities, financial transactions and information reflected in the financial statements are in compliance, in all material respects, with the authorities that govern them. I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my conclusion.

REPORT ON EFFECTIVENESS OF INTERNAL CONTROLS, RISK MANAGEMENT AND GOVERNANCE

Conclusion

As required by Section 7(1)(a) of the Public Audit Act, 2015, based on the audit procedures performed, except for the matters described in the Basis for Conclusion on Effectiveness of Internal Controls, Risk Management and Governance section of my report, I confirm that, nothing else has come to my attention to cause me to believe that internal controls, risk management and governance were not effective.

Basis for Conclusion

1. Failure to Tag Assets

The statement of financial position reflects property, plant and equipment balance of Kshs.19,477,314 as at 30 June, 2023 and as disclosed in Note 12 to the financial statements. However, the Board's newly acquired computers and plant and equipment

valued at Kshs.754,400 and Kshs.485,000 respectively were not tagged as a mechanism for tracking, safe custody, use and control.

In the circumstances, the accuracy and completeness of the property, plant and equipment of Kshs.19,477,314 could not be confirmed.

2. Internal Control Weaknesses

The following internal control weaknesses were noted:

- There was no segregation of duties in the accounts and procurement departments due to a lack of adequate staffing.
- ii. The Board did not have a qualified information communication technology officer to manage the ICT department unit. As a result, unauthorized changes can be made to the ICT system. In addition, changes made to the system were not tested and or lacked supporting documentation, which may lead to interference and loss of data.

In the circumstances, the existence of an effective internal control system to safeguard information and assets of the Board could not be confirmed.

3. Corporate Governance

During the year under review, the Chief Executive Officer also performed the functions/roles of a Company Secretary contrary to paragraph 1.22 (3) of the Mwongozo Code of Governance Guidelines, 2015 on the separation of roles.

In the circumstances, the effectiveness of internal controls, risk management and governance of the Board could not be confirmed.

The audit was conducted in accordance with ISSAI 2315 and ISSAI 2330. The standards require that I plan and perform the audit to obtain assurance about whether effective processes and systems of internal control, risk management and overall governance were operating effectively, in all material respects. I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my conclusion.

Responsibilities of Management and the Board of Directors

Management is responsible for the preparation and fair presentation of these financial statements in accordance with International Public Sector Accounting Standards (Accrual Basis) and for maintaining effective internal controls as Management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error and for its assessment of the effectiveness of internal controls, risk management and governance.

In preparing the financial statements, Management is responsible for assessing the Board's ability to continue to sustain its services, disclosing as applicable, matters related to sustainability of services and using the applicable basis of accounting unless Management is aware of the intention to terminate the Board or to cease operations.

Management is also responsible for the submission of the financial statements to the Auditor-General in accordance with the provisions of Section 47 of the Public Audit

In addition to the responsibility for the preparation and presentation of the financial statements described above, Management is also responsible for ensuring that the activities, financial transactions and information reflected in the financial statements are in compliance with the authorities which govern them and that public resources are applied in an effective way.

The Board of Directors is responsible for overseeing the Board's financial reporting process, reviewing the effectiveness of how the Management monitors compliance with relevant legislative and regulatory requirements, ensuring that effective processes and systems are in place to address key roles and responsibilities in relation to governance and risk management and ensuring the adequacy and effectiveness of the control

Auditor-General's Responsibilities for the Audit

The audit objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes my opinion in accordance with the provisions of Section 48 of the Public Audit Act, 2015 and submit the audit report in compliance with Article 229(7) of the Constitution. Reasonable assurance is a high level of assurance but is not a guarantee that an audit conducted in accordance with ISSAIs will always detect a material misstatement and weakness when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

In addition to the audit of the financial statements, a compliance audit is planned and performed to express a conclusion about whether, in all material respects, the activities, financial transactions and information reflected in the financial statements are in compliance with the authorities that govern them and that public resources are applied in an effective way, in accordance with the provisions of Article 229(6) of the Constitution and submit the audit report in compliance with Article 229(7) of the Constitution.

Further, in planning and performing the audit of the financial statements and audit of compliance, I consider internal controls in order to give an assurance on the effectiveness of internal controls, risk management and overall governance processes and systems in accordance with the provisions of Section 7(1)(a) of the Public Audit Act, 2015 and submit the audit report in compliance with Article 229(7) of the Constitution. My consideration of the internal controls would not necessarily disclose all matters in the internal controls that might be material weaknesses under the ISSAIs. A material weakness is a condition in which the design or operation of one or more of the internal controls components does not reduce to a relatively low level the risk that misstatements caused by error or fraud in amounts that would be material in relation to the financial statements being audited may occur and not be detected within a timely period by employees in the normal course of performing their assigned functions.

Because of its inherent limitations, internal controls may not prevent or detect misstatements and instances of non-compliance. Also, projections of any evaluation of effectiveness to future periods are subject to the risk that controls may become inadequate because of changes in conditions, or that the degree of compliance with the policies and procedures may deteriorate.

As part of an audit conducted in accordance with ISSAIs, I exercise professional judgement and maintain professional skepticism throughout the audit. I also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for my opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal controls.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the Management.
- Conclude on the appropriateness of the Management's use of the applicable basis of accounting and based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Board's ability to continue to sustain its services. If I conclude that a material uncertainty exists, I am required to draw attention in the auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify my opinion. My conclusions are based on the audit evidence obtained up to the date of my audit report. However, future events or conditions may cause the Board to cease to continue to sustain its services.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.
- Obtain sufficient appropriate audit evidence regarding the financial information and business activities of the Board to express an opinion on the financial statements.
- Perform such other procedures as I consider necessary in the circumstances.

I communicate with the Management regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal controls that are identified during the audit.

I also provide Management with a statement that I have complied with relevant ethical requirements regarding independence and communicate with them all relationships and other matters that may reasonably be thought to bear on my independence and where applicable, related safeguards.

FCPA Nancy Gathungu, SBS AUDITOR-GENERAL

Nairobi

11 March, 2024

Statement of Financial Performance for the year ended 30 June 2023

| 14. Statement of Financial Ferroman | Notes | FY 2022- 2023 | FY 2021-2022 |
|---|-------|------------------|--------------|
| | | Kshs | Kshs |
| Revenue from non-exchange transactions | | | 124,500,002 |
| Transfers from other governments entities | 5 | 102,570,000 | 124,500,002 |
| Other Income | | 13,005,740 | 22,292,812 |
| Income from UNICEF | | 13,003,740 | 20,839,102 |
| Income from UNFPA | | 115,575,740 | 167,631,916 |
| Total revenue | | 113,373,740 | |
| Expenses | 6 | 81,728,478 | 111,988,365 |
| Use of goods and services | 7 | 29,762,554 | 28,102,577 |
| Employee costs | 8 | 7,373,604 | 8,068,022 |
| Board Expenses | 9 | 6,538,784 | 4,409,867 |
| Depreciation and amortization expense | | 4,005,870 | 2,918,429 |
| Repairs and maintenance | 10 | 129,409,282 | 155,487,260 |
| Total expenses | | (13,833,542 | 12,144,656 |
| Surplus/(deficit) for the period/year | | 122/22/ | |

The notes set out on pages 11 to 67 form an integral part of these Financial Statements. The Financial Statements set out on pages 1 to 10 were signed on behalf of the Board of Directors by:

Chief Executive Office

Name: TORHAT KAMUTI Name: IPATO K. SUR

Head of Finance

Date 09/02/2024 Date 09/02/2024 Date 09/02/2024

Chairman of the Board

15 Statement of Financial Position as at 30 June 2023

| | Notes | FY 2022-2023 | FY 2021-2 |
|---|-------|--------------|------------|
| Assets | 25.3 | Kshs | Kshs |
| Current Assets | | | |
| Cash and Cash equivalents | | | |
| Total Current Assets | 11 | 32,583 | 2,404,509 |
| | | 32,583 | 2,404,509 |
| Non-Current Assets | | | |
| Property, Plant and Equipment | | | |
| Intangible Assets | 12 | 19,477,314 | 7,414,414 |
| Total Non- Current Assets | 13 | 1,502,693 | 2,370,267 |
| Total Assets | | 20,980,008 | 9,784,681 |
| | | 21,012,591 | 12,189,190 |
| Liabilities | | | |
| Current Liabilities | | | |
| rade and Other Payables | | | |
| otal Current Liabilities | | 6,760,415 | 598,183 |
| | | F | 598,183 |
| otal Liabilities | | | - |
| | - 6 | 6,760,415 | 598,183 |
| et Assets | | | - |
| eserves | | | |
| otal Net Assets and Liabilities | | 4,252,176 | 11,591,007 |
| e financial statements set out on pages 1 | 2 | 2 6 4 - | 12,189,190 |

The financial statements set out on pages 1 to 10 were signed on behalf of the Board of

Head of Finance

ICPAK Member Number: 19011

Date 09/02/2024

Name LANDOK. SURUN

Chairman of the Board

Date 09/02/2024

Date

16. Statement of Changes in Net Assets(Reserves) for the year ended 30 June 2023

| | Retained earnings | Total |
|------------------------------|-------------------|--------------|
| | Kshs | Kshs |
| As at July 1, 2021 | -553,649 | -553,649 |
| Surplus for the year | 12,144,656 | 12,144,656 |
| As at June 30, 2022 | 11,591,007 | 11,591,007 |
| | | |
| As at July 1, 2022 | 11,591,007 | 11,591,007 |
| Surplus/Deficit for the year | (13,833,542) | (13,833,542) |
| Revaluation reserve | 16,480,977 | 16,480,977 |
| As at June 30, 2023 | 14,238,422 | 14,238,422 |

17. Statement of Cash Flows for the year ended 30 June 2023

| | | FY 2022- | 2023 FY 2021 |
|--|-------|-------------|----------------|
| Cash flows from operating activities | Notes | Kshs | Kshs |
| Receipts Receipts | | | |
| Transfers from other governments entities | | | |
| Total receipts | | 115,575,740 | 167,631,91 |
| Payments | | 115,575,74 | 1 1002101 |
| Use of goods and services | | 7-10/15 | 207,031,9 |
| Employee costs | | 81,728,478 | 111,988,365 |
| Board Expenses | | 29,762,554 | 28,102,577 |
| Repairs and maintenance | | 7,373,604 | 8,068,022 |
| Total payments | 1 | 1,005,870 | 2,918,429 |
| Increase/Decrease in Accounts Payable | | 22,870,506 | 151,077,3 |
| Net cash flows from //wood in | | ,162,233 | (13,270,494) |
| Net cash flows from/(used in) operating activities | | 1,132,533) | 3,284,030 |
| Cash flows from investing activities | | | 7,204,030 |
| urchase of PPE and Intangible assets | | | |
| et cash flows from / used in) | (1 | ,239,400) | (1,050,000) |
| et cash flows from/(used in) investing activities | | ,239,400) | (1,050,000) |
| et increase/(decrease) in cash & | | | (-7550,000) |
| sh equivalents | 12 | 274 022) | |
| sh and cash equivalents at 1 July | | 371,933) | 2,234,030 |
| sh and cash equivalents at 30 June | | 04,509 | 170,479 |
| at 50 Julie | 32, | 583 | 2,404,509 |

18. Statement of Comparison of Budget and Actual amounts for the year ended 30th June 2023

| 30° Julie | | | | - | | 101 |
|---|--------------------|-----------------|--------------|----------------------------|---------------------------|-------------------|
| | Original budget | Adjustment s | Final budget | Actual on comparable basis | Performanc edifference | % of utiliz ation |
| | Kshs | Kshs | Kshs | Kshs | Kshs | |
| | a | b | C=(a+b) | d | e=(c-d) | f=d/ c*100 |
| Revenue | | | | | | |
| Transfers from Other Governments entities | 102,570,000 | - | 102,570,000 | 102,570,000 | 0 | 100 |
| Other Income - UNICEF | 0 | 13,005,740 | 13,005,740 | 13,005,740 | 0 | 100 |
| Total Income | 102,570,000 | 13,005,740 | 115,575,740 | 115,575,740 | 0 | 100 |
| Expenses | | - | | | 2 | |
| Use of Goods and Services | 55,568,000 | 13,005,740 | 68,573,740 | 81,728,478 | (13,154,738) | 119 |
| Employee costs | 32,482,000 | 100 | 32,482,000 | 29,762,547 | 2,719,453 | 91 |
| Remuneration of Directors | 6,960,000 | - | 6,960,000 | 7,373,604 | (413,604) | 124 |
| Repairs and Maintenance | 4,660,000 | - | 4,660,000 | 4,005,870 | 654,130 | 86 |
| Depreciation and amortization expense | 1,400,000 | | 1,400,000 | 6,538,784 | (5,138,784) | 457 |
| Total Expenditure | 101,070,000 | 13,005,740 | 114,075,740 | 129,409,282 | (15,333,543) | 113 |
| Surplus for the period | - | - | - | (13,833,542) | | p |
| Capital Expenditure | 1,500,000 | a | 1,500,000 | 1,239,400 | 260,600 | 82 |
| - | | | | | f internal audit | |

The Board Expenses went up due to special sittings for recruitment of internal audit manager.

19. Notes to the Financial Statements

1. General Information

The Board is established by and derives its authority and accountability from Prohibition of Female Genital Mutilation Act 2011. The Entity is wholly owned by the Government of Kenya and is domiciled in Kenya. The Board's principal activity is to uphold the dignity and empowerment of girls and women in Kenya through the coordination of initiatives, awareness creation and advocacy against FGM.

2. Statement of Compliance and Basis of Preparation

The financial statements have been prepared on a historical cost basis except for the measurement at re-valued amounts of certain items of property, plant and equipment, marketable securities and financial instruments at fair value, impaired assets at their estimated recoverable amounts and actuarially determined liabilities at their present value. The preparation of financial statements in conformity with International Public Sector Accounting Standards (IPSAS) allows the use of estimates and assumptions. It also requires management to exercise judgement in the process of applying the Board's accounting policies. The areas involving a higher degree of judgement or complexity, or where assumptions and estimates are significant to the financial statements, are disclosed in Note 5 of these financial statements. The financial statements have been prepared and presented in Kenya Shillings, which is the functional and reporting currency of the Board. The financial statements have been prepared in accordance with the PFM Act, the State Corporations Act, The Prohibition of FGM Act 2011, and International Public Sector Accounting Standards (IPSAS). The accounting policies adopted have been consistently applied to all the years presented.

Notes to the Financial Statements (Continued)

3. Adoption of New and Revised Standards

New and amended standards and interpretations in issue effective in the year ended 30
 June 2023.

| Julie 2023. | and year e |
|---------------------------------------|--|
| Standard | Effective date and impact: |
| IPSAS 41: Financial Instruments (No. | Applicable: 1st January 2023: The objective of IPSAS 41 is to establish principles for the financial reporting of financial assets and liabilities that will present relevant and useful information to users of financial statements for their assessment of the amounts, timing and uncertainty of an Board's future cash flows. IPSAS 41 provides users of financial statements with more useful information than IPSAS 29, by: • Applying a single classification and measurement model for financial assets that considers the characteristics of the asset's cash flows and the objective for which the asset is held; • Applying a single forward-looking expected credit loss model that is applicable to all financial instruments subject to impairment testing; and • Applying an improved hedge accounting model that broadens the hedging arrangements in scope of the guidance. The model develops a strong link between a Board's risk management strategies and the accounting treatment for instruments held as part of the risk management strategy. t applicable) |

| e year ended June 30 | , 2023. | | | | |
|----------------------|--|--|--|--|--|
| Standard | Effective date and impact: | | | | |
| IPSAS 42: | Applicable: 1st January 2023 | | | | |
| Social Benefits | The objective of this Standard is to improve the relevance, | | | | |
| | faithful representativeness, and comparability of the | | | | |
| | information that a reporting Board provides in its financial | | | | |
| | atements about social benefits. The information provided | | | | |
| | should help users of the financial statements and general- | | | | |
| | purpose financial reports assess: | | | | |
| | (a) The nature of such social benefits provided by the | | | | |
| | Board. | | | | |
| | (b) The key features of the operation of those social | | | | |
| | benefit schemes; and | | | | |
| | (c) The impact of such social benefits provided on the | | | | |
| | Board's financial performance, financial position and | | | | |
| | cash flows. | | | | |
| | (Not applicable) | | | | |
| Amendments to | Applicable: 1st January 2023: | | | | |
| Other IPSAS | a) Amendments to IPSAS 5, to update the guidance | | | | |
| resulting from | related to the components of borrowing costs which | | | | |
| IPSAS 41, | were inadvertently omitted when IPSAS 41 was | | | | |
| Financial | issued. | | | | |
| Instruments | b) Amendments to IPSAS 30, regarding illustrative | | | | |
| , | examples on hedging and credit risk which were | | | | |
| | | | | | |
| 5 | inadvertently omitted when IPSAS 41 was issued. | | | | |
| 5 | inadvertently omitted when IPSAS 41 was issued. c) Amendments to IPSAS 30, to update the guidance | | | | |
| | inadvertently omitted when IPSAS 41 was issued. c) Amendments to IPSAS 30, to update the guidance for accounting for financial guaranteed contracts | | | | |
| | inadvertently omitted when IPSAS 41 was issued. c) Amendments to IPSAS 30, to update the guidance | | | | |
| | inadvertently omitted when IPSAS 41 was issued. c) Amendments to IPSAS 30, to update the guidance for accounting for financial guaranteed contracts which were inadvertently omitted when IPSAS 41 was issued. | | | | |
| | inadvertently omitted when IPSAS 41 was issued. c) Amendments to IPSAS 30, to update the guidance for accounting for financial guaranteed contracts which were inadvertently omitted when IPSAS 41 was issued. d) Amendments to IPSAS 33, to update the guidance | | | | |
| | inadvertently omitted when IPSAS 41 was issued. c) Amendments to IPSAS 30, to update the guidance for accounting for financial guaranteed contracts which were inadvertently omitted when IPSAS 41 was issued. | | | | |

| CHE | te year ended June 30, 2023. | | | | | |
|-----|--|---|--|--|--|--|
| | Standard | Effective date and impact: | | | | |
| | | adoption of accrual basis IPSAS which were | | | | |
| | | inadvertently omitted when IPSAS 41 was issued. | | | | |
| | | (Not applicable) | | | | |
| | Other | Applicable 1st January 2023 | | | | |
| | improvements to | IPSAS 22 Disclosure of Financial Information about the | | | | |
| | IPSAS | General Government Sector. Amendments to refer to | | | | |
| | | the latest System of National Accounts (SNA 2008). | | | | |
| | | IPSAS 39: Employee Benefits. Now deletes the term | | | | |
| | | composite social security benefits as it is no longer | | | | |
| | | defined in IPSAS. | | | | |
| | | IPSAS 29: Financial instruments: Recognition | | | | |
| | | and Measurement. Standard no longer included in | | | | |
| | - | the 2023 IPSAS handbook as it is now superseded by | | | | |
| | | IPSAS 41 which is applicable from 1st January 2023. | | | | |
| | | (Not applicable) | | | | |
| | No. of the last of | | | | | |

Notes to the Financial Statements (Continued)

ii. New and amended standards and interpretations in issue but not yet effective in the year ended 30 June 2023.

| Standard | Effective date and impact: |
|----------|---|
| IPSAS 43 | Applicable 1st January 2025 |
| | The standard sets out the principles for the recognition, |
| | measurement, presentation, and disclosure of leases. The |
| | objective is to ensure that lessees and lessors provide relevant |
| | information in a manner that faithfully represents those |
| | transactions. This information gives a basis for users of financial |
| | statements to assess the effect that leases have on the financial |
| | position, financial performance and cashflows of an Entity. |
| | The new standard requires entities to recognise, measure and |
| | present information on right of use assets and lease liabilities. |

| y | ear ended June | 30, 2023. |
|---|----------------|---|
| | Standard | Effective date and impact: |
| | | (Not applicable) |
| | IPSAS 44: | Applicable 1st January 2025 |
| | Non- Current | The Standard requires, |
| | Assets Held | Assets that meet the criteria to be classified as held for sale to be |
| | for Sale and | measured at the lower of carrying amount and fair value less |
| | | costs to sell and the depreciation of such assets to cease and: |
| | Discontinued | Assets that meet the criteria to be classified as held for sale to be |
| | Operations | presented separately in the statement of financial position and |
| | | presented separately in the statement of the separately |
| | | the results of discontinued operations to be presented separately |
| | | in the statement of financial performance. |
| | - | (Not applicable) |
| | | |

iii. Early adoption of standards

The Entity did not early – adopt any new or amended standards in the financial year.

Notes to the financial statements (continued)

a) Budget information

The original budget for the Current FY 2022/2023 was approved by the National Assembly only June 2022. Subsequent revisions or additional appropriations were made to the approved budget in accordance with specific approvals from the appropriate authorities. The additional appropriations are added to the original budget by the Board upon receiving the respective approvals in order to conclude the final budget. Accordingly, the Board recorded nil additional appropriations on the 2022-2023 budget following the Board of Director's approval.

The Board's budget is prepared on a different basis to the actual income and expenditure disclosed in the financial statements. The financial statements are prepared on accrual basis using a classification based on the nature of expenses in the statement of financial performance, whereas the budget is prepared on a cash basis. The amounts in the financial statements were recast from the accrual basis to the cash basis and reclassified by presentation to be on the same basis as the approved budget. A comparison of budget and actual amounts, prepared on acomparable basis to the approved budget, is then presented in the statement of comparison of budget and actual amounts. In addition to the Basis difference, adjustments to amounts in the financial statements are also made for differences in the formats and classification schemes adopted for the presentation of the financial statements and the approved budget. A statement to reconcile the actual amounts on a comparable basis included in the statement of comparison of budget and actual amounts and the actuals as per the statement of financial performance hasbeen presented under section Statement of Comparable budgets of these financial statements.

Notes to the Financial Statements (Continued)

b) Property, plant and equipment

All property, plant and equipment are stated at cost less accumulated depreciation and impairment losses. Cost includes expenditure that is directly attributable to the acquisition of the items. When significant parts of property, plant and equipment are required to be replaced at intervals, the recognizes such parts as individual assets with specific useful lives and depreciates them accordingly. Likewise, when a major inspection is performed, its cost is recognized in the carrying amount of the plant and equipment as a replacement if the recognition criteria are satisfied. All other repair and maintenance costs are recognized in surplus or deficit as incurred. Where an asset is acquired in a non-exchange transaction for nil or nominal consideration the asset is initially measured at its fair value.

c) Leases

Finance leases are leases that transfer substantially all of the risks and benefits incidental to ownership of the leased item to the Entity. Assets held under a finance lease are capitalized at the commencement of the lease at the fair value of the leased property or, if lower, at the present value of the future minimum lease payments. The Entity also recognizes the associated lease liability at the inception of the lease. The liability recognized is measured as the present value of the future minimum lease payments at initial recognition. Subsequent to initial recognition, lease payments are apportioned between finance charges and reduction of the lease liability so as to achieve a constant rate of interest on the remaining balance of the liability. Finance charges are recognized as finance costs in surplus or deficit. An asset held under a finance lease is depreciated over the useful life of the asset. However, if there is no reasonable certainty that the Entity will obtain ownership of the asset by the end of the lease term, the asset is depreciated over the shorter of the estimated useful life of the asset and the lease term.

Operating leases are leases that do not transfer substantially all the risks and benefits incidental to ownership of the leased item to the Entity. Operating lease payments are recognized as an operating expense in surplus or deficit on a straight-line basis over the lease term.

Notes to the Financial Statements (Continued)

d) Intangible assets

Intangible assets acquired separately are initially recognized at cost. The cost of intangible assets acquired in a non-exchange transaction is their fair value at the date of the exchange. Following initial recognition, intangible assets are carried at cost less any accumulated amortization and accumulated impairment losses. Internally generated intangible assets, excluding capitalized development costs, are not capitalized and expenditure is reflected in surplus or deficit in the period in which the expenditure is incurred. The useful life of the intangible assets is assessed as either finite or indefinite. Intangible assets with an indefinite useful life are assessed for impairment at each reporting date.

Notes to the Financial Statements (Continued)

a) Financial liabilities

Classification

The entity classifies its liabilities as subsequently measured at amortized cost except for financial liabilities measured through profit or loss.

b)Inventories

Inventory is measured at cost upon initial recognition. To the extent that inventory was received through non-exchange transactions (for no cost or for a nominal cost), the cost of the inventory is its fair value at the date of acquisition. Costs incurred in bringing each product to its present location and conditions are accounted for, as follows:

- i) Raw materials: purchase cost using the weighted average cost method.
- ii) Finished goods and work in progress: cost of direct materials and labour and a proportion of manufacturing overheads based on the normal operating capacity but excluding borrowing costs.

After initial recognition, inventory is measured at the lower of cost and net realizable value. However, to the extent that a class of inventory is distributed or deployed at no charge or for a nominal charge, that class of inventory is measured at the lower of cost and current replacement cost. Net realizable value is the estimated selling price in the ordinary course of operations, less the estimated costs of completion and the estimated costs necessary to make the sale,

exchange, or distribution. Inventories are recognized as an expense when deployed for utilization or consumption in the ordinary course of operations of the Entity.

Notes to the Financial Statements (Continued)

f) Contingent liabilities

The Entity does not recognize a contingent liability but discloses details of any contingencies in the notes to the financial statements, unless the possibility of an outflow of resources embodying economic benefits or service potential is remote.

Notes to the Financial Statements (Continued)

g) Nature and purpose of reserves

The Entity creates and maintains reserves in terms of specific requirements. Currently the Board has no reserves maintained.

h) Changes in accounting policies and estimates

The Entity recognizes the effects of changes in accounting policy retrospectively. The effects of changes in accounting policy are applied prospectively if retrospective application is impractical.

i) Employee benefits

Retirement benefit plans

The Board provides retirement benefits for its employees. Defined contribution plans are post-employment benefit plans under which an Entity pays fixed contributions into a separate Entity (a fund) and will have no legal or constructive obligation to pay further contributions if the fund does not hold sufficient assets to pay all employee benefits relating to employee service in the current and prior periods. The contributions to fund obligations for the payment of retirement benefits are charged against income in the year in which they become payable. Defined benefit plans are post-employment benefit plans other than defined-contribution plans. The defined benefit funds are actuarially valued tri-annually on the projected unit credit method basis. Deficits identified are recovered through lump sum payments or increased future contributions on proportional basis to all participating employers. The contributions and lump sum payments reduce the post-employment benefit obligation. Deficits identified are recovered through lump sum payments or increased future contributions on proportional basis to all participating employers. The contributions and lump sum payments reduce the post-employment benefit obligation.

Notes to the Financial Statements (Continued)

j) Borrowing costs

Borrowing costs are capitalized against qualifying assets as part of property, plant and equipment.

Such borrowing costs are capitalized over the period during which the asset is being acquired or constructed and borrowings have been incurred. Capitalization ceases when construction of the asset is complete. Further borrowing costs are charged to the statement of financial performance.

k) Related parties

The Board regards a related party as a person or an Entity with the ability to exert control individually or jointly, or to exercise significant influence over the Board, or vice versa. Members of key management are regarded as related parties and comprise the directors, the CEO and senior managers.

I) Service concession arrangements

The Board analyses all aspects of service concession arrangements that it enters in determining the appropriate accounting treatment and disclosure requirements. In particular, where a private party contributes an asset to the arrangement, the Board recognizes that asset when, and only when, it controls or regulates the services the operator must provide together with the asset, to whom it must provide them, and at what price. In the case of assets other than 'whole-of-life' assets, it controls, through ownership, beneficial entitlement or otherwise — any significant residual interest in the asset at the end of the arrangement. Any assets so recognized are measured at their fair value. To the extent that an asset has been recognized, the Board also recognizes a corresponding liability, adjusted by a cash consideration paid or received.

Notes to the Financial Statements (Continued)

m) Cash and cash equivalents

Cash and cash equivalents comprise cash on hand and cash at bank, short-term deposits on call and highly liquid investments with an original maturity of three months or less, which are readily convertible to known amounts of cash and are subject to insignificant risk of changes in value. Bank account balances include amounts held at the Central Bank of Kenya and at various commercial banks at the end of the financial year. For the purposes of these financial statements, cash and cash equivalents also include short term cash imprests and advances to authorized public officers and/or institutions which were not surrendered or accounted for at theend of the financial year.

n) Comparative figures

Where necessary comparative figures for the previous financial year have been amended or reconfigured to conform to the required changes in presentation.

o) Subsequent events

There have been no events subsequent to the financial year end with a significant impact on the financial statements for the year ended June 30, 2023.

Notes to the Financial Statements (Continued)

4. Significant Judgments and Sources of Estimation Uncertainty

The preparation of the Board's financial statements in conformity with IPSAS required management to make judgments, estimates and assumptions that affect the reported amounts of revenues, expenses, assets and liabilities, and the disclosure of contingent liabilities, at the end of the reporting period. However, uncertainty about these assumptions and estimates could result in outcomes that require a material adjustment to the carrying amount of the asset or liability affected in future periods. State all judgments, estimates and assumptions made:

Estimates and assumptions.

The key assumptions concerning the future and other key sources of estimation uncertainty at the reporting date, that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next financial year, are described below. The Entity based its assumptions and estimates on parameters available when the consolidated financial statements were prepared. However, existing circumstances and assumptions about future developments may change due to market changes or circumstances arising beyond the control of the Entity. Such changes are reflected in the assumptions when they occur. IPSAS 1.140

Useful lives and residual value

The useful lives and residual values of assets are assessed using the following indicators to inform potential future use and value from disposal:

- a) The condition of the asset based on the assessment of experts employed by the Entity.
- b) The nature of the asset, its susceptibility and adaptability to changes in technology and processes.
- c) The nature of the processes in which the asset is deployed.
- d) Availability of funding to replace the asset.
- e) Changes in the market in relation to the asset

Provisions

Provisions were raised and management determined an estimate based on the information available. Additional disclosure of these estimates of provisions is included in Note 40. Provisions

are measured at the management's best estimate of the expenditure required to settle the obligation at the reporting date and are discounted to present value where the effect is material.

Notes to the Financial Statements (Continued)

5. Transfers from Other Government entities

| FY 2022-2023 | FY 2021-2022 |
|--------------|--------------|
| KShs | KShs |
| | 124 500 002 |
| 102,570,000 | 124,500,002 |
| 13,005,740 | 22,292,812 |
| - | 20,839,102 |
| 115,575,740 | 167,631,916 |
| | 102,570,000 |

The decrease in the transfers from government was due to supplementary received in FY 2021-2022 of ksh20,000,000

b) Transfers from Ministries, Departments and Agencies (MDAs)

| Total | 102,570,000 | - | - | the Ministry fully I | NAME AND ADDRESS OF THE OWNER, THE PARTY OF THE OWNER, THE O |
|---|--|---|------------------------------------|--------------------------------------|--|
| State Department of Gender and Affirmative Action | 102,570,000 | - | -, | 102,570,000 102,570,000 | 124,500,002 124,500,00 2 |
| | KShs | KShs | KShs | KShs | KShs |
| | performance. * | income. | | | |
| Name of The Entity Sending The Grant | Amount recognized to Statement of Financial | Amount deferred under deferred | Amount recognised in capital fund. | Total transfers (FY 2022-2023) | FY 2021- 2022 |

(Ensure that the amount recorded above as having been received from the Ministry fully reconciles to the amount recorded by the sending Entity Ministry. An acknowledgement note/receipt should be raised in favour of the sending Ministry. The details of the reconciliation have been included under appendix xxx) *Amount recognised in the statement of financial performance should be the recurrent grant and the development grant to the extent that there are no conditions attached. Total of column 1 should tie to note 6(the part on unconditional grants).

Notes to the Financial Statements (Continued)

6. Use of Goods and Services

| | FY 2022-2 | 2023 | FY 2021-2 |
|--|-------------------------|----------|--------------------------|
| Anti-FGM programmes expenses | Kshs | | Kshs |
| Air Travelling expenses | 13,326,845 | | 24,085,140 |
| Motor fuel | 1,377,465 | | 820,359 |
| | 3,246,350 | | 3,565,078 |
| Branding /IEC Materials | 4,541,901 | | 3,710,029 |
| Advertisement TV and Radio | 3,166,200 | | 9,801,930 |
| Field facilitation and Mobilization | 2,478,700 | | 20,010,520 |
| Conferences facilities on field activities | 724,739 | | 12,743,167 |
| Donor funded activities | 12,993,488 | | |
| Office rent | 6,832,760 | | 0 |
| Office internet | 603,936 | \dashv | 6,529,521 |
| Hospitality suppliers | | | 495,932 |
| Electricity expenses | 2,868,758 | + | 2,717,459 |
| Contracted cleaning services | 175,292 | | 231,326 |
| Conference and Seminars | 1,532,472 | | 1,548,162 |
| Office maintenance | 4,507,413 | | 5,639,495 |
| taff training | 55,000 | 4 | 194,700 |
| elephone expenses | 2,779,681 | 2 | ,237,444 |
| ostage /Courier | 1,177,000 | 1 | ,262,000 |
| eneral office suppliers | 71,510 | 0 | |
| oftware support expenses-ERP | 385,000 | 10 | 58,000 |
| onsultancy services | 827,171 | 74 | 13,530 |
| int and Stationaries | 550,000 | 0 | |
| embership | 327,100 | - | 3,226 |
| aff uniform | 86,782 | | ,900 |
| evel, Subsistence & Other Allowances* | 40,000 | - | 000 |
| ff medical cover | 12,304,090 4,532,004 | | 87,127 |
| m building | 0 | | 70,806 |
| k charges | 216,821 | - | ,460 |
| al Expenses | 81,728,478 | | ,055 , 988,366 |

7. Employee Costs

| | FY2022-2023 | FY2021-2022 | |
|-----------------------------------|-------------|-------------|--|
| Description | Kshs | Kshs | |
| Basic salaries | 13,789,145 | 13,813,803 | |
| House allowance | 5,517,387 | 5,823,750 | |
| Extraneous allowance | 1,074,000 | 1,078,500 | |
| Domestic allowances | 187,200 | 187,200 | |
| Commuter allowance | 1,407,483 | 1,477,000 | |
| Leave allowance | 136,000 | 146,000 | |
| Entertainment allowance | 780,000 | 780,000 | |
| Gratuity | 6,670,926 | 4,760,524 | |
| Employers contribution to NSSF | 60,800 | 35,800 | |
| Employers contribution to pension | 139,606 | 0 | |
| Employee costs | 29,762,547 | 28,102,577 | |

8. Board Expenses

| FY 2022-2023 | FY 2021-2022 | | |
|--------------|--|--|--|
| Kshs | Kshs | | |
| 780,000 | 576,400 | | |
| 1,496,000 | 1,080,000 | | |
| 400,000 | 536,000 | | |
| 432,000 | 220,000 | | |
| 2,397,400 | 3,303,000 | | |
| 1,868,204 | 2,352,622 | | |
| 7,373,604 | 8,068,022 | | |
| | Kshs 780,000 1,496,000 400,000 432,000 2,397,400 1,868,204 | | |

Annual Report and Financial Statements for the year ended June 30, 2023.

Notes to the Financial Statements (Continued)

9. Depreciation and Amortization Expense

| Description | FY 2022-2023 | FY 2021-2022 |
|---|--------------|--------------|
| Description | Kshs | Kshs |
| Depreciation -Property, plant and equipment | 5,787,437 | 3,687,650 |
| Depreciation- Intangible assets | 751,347 | 722,217 |
| Total depreciation and amortization | 6,538,784 | 4,409,867 |

The depreciation amount went up due to asset valuation done in the course of the year.

10. Repairs and Maintenance

| Description | Insert Current FY | Insert Comparative FY |
|---|-------------------|--------------------------|
| | Kshs | Kshs |
| Motor Vehicle Maintenance | 2,222,981 | 1,903,089 |
| Repair and Maintenance-Office Equipment's & | | |
| Computers | 1,782,889 | 1,015,340 |
| Total Repairs and Maintenance | 4,005,870 | 2,918,429 |

11. Cash and Cash Equivalents

| Description | FY 2022-2023 | FY 2021-2022 |
|---------------------------------|--------------|--------------|
| Description | Kshs | Kshs |
| Current Account | 32,583 | 2,404,509 |
| Total Cash and Cash Equivalents | 32,583 | 2,404,509 |

Detailed Analysis of the Cash and Cash Equivalents

| Financial Institution | Account number | FY2022-2023 | FY 2021-2022 |
|--------------------------|----------------|-------------|--------------|
| Tinancial Insulption | Account number | Kshs | Kshs |
| a) Current Account | | | |
| Cooperative Bank (GoK) | 01141309435600 | 31,636 | 2,399,385 |
| Cooperative Bank (Donor) | 01141866586700 | 947 | 5,124 |
| Grand Total | | 32,583 | 2,404,509 |

12.Property, Plant and Equipment

| | Motor | Furniture and fittings | Computers | Plant and Equipment | Total |
|-----------------------------|------------|---------------------------|--|-------------------------|--------------|
| Cost | vehicles | | Kshs | Kshs | Kshs |
| | Kshs | Kshs 007 | 15,448,203 | 4,510,832 | 40,364,300 |
| As At 1July 2021 | 18,419,178 | 1,986,087 | 0 | 0 | 0 |
| Additions | 0 | 0 | 0 | 0 | 0 |
| Disposals | 0 | 0 | 0 | | |
| Transfers/Adjustmen | | | 0 | 0 | 0 |
| ts | 0 | 0 | 0 | | |
| As at 30 th June | | 1,986,087 | 15,448,203 | 4,510,832 | 40,364,300 |
| 2022 | 18,419,178 | 1,980,007 | | | |
| | | | 754,400 | 485,000 | 1,239,400 |
| Additions | 0 | 0 | (12,058,203) | (1,669,559) | (13,873,882) |
| Asset Valuation | (434,178) | 288,058 | (12,030,203) | | |
| As at 30th June | | | 2,635,600 | 2,356,273 | 25,251,018 |
| 2023 | 17,985,000 | 2,274,145 | 2,035/000 | | |
| Depreciation And | | | | | |
| Impairment | | 1 220 717 | 15,448,203 | 3,672,082 | 30,312,236 |
| At 1July 2021 | 9,961,234 | 1,230,717 | 175,000 | 212,500 | 3,687,650 |
| Depreciation | 3,051,889 | 248,261 | | 0 | 0 |
| Impairment | 0 | 0 | 0 | | |
| Transfers/ | | | | 0 | 0 |
| Adjustments | 0 | 0 | 0 | | |
| As At 30th June | | 4=0.070 | 15,623,203 | 3,884,582 | 33,999,887 |
| 2022 | 13,013,124 | 1,478,978 | THE RESERVE THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED I | 254,117 | 5,787,436 |
| Depreciation | 4,496,250 | 284,269 | 752,800 | 0 | 0 |
| Disposals | 0 | 0 | 0 | 0 | 0 |
| Impairment | 0 | 0 | 0 | 0 | 0 |
| Transfer/Adjustment | 0 | 0 | 0 | | |
| As at 30th June | | | 749,067 | 467,818 | 5,997,404 |
| 2023 | 4,496,250 | 284,269 | 1-3/00. | | |
| Net Book Values | | | | | |
| As at 30 th June | | F07 100 | 875,000 | 626,250 | 7,414,413 |
| 2022 | 5,406,054 | 507,109 | 0.0,000 | | |
| As at 30 th June | - 40 | 4 000 075 | 1,882,800 | 2,102,155 | 19,463,581 |
| 2023 | 13,488,750 | 1,989,875 | ards asset in the begin | nning of financial year | ar. |

The change in the cost of fixed asset was as result of valuation of Boards asset in the beginning of financial year.

Notes to the Financial Statements (Continued)

Valuation

All fixed asset were valued by Milford Appraisal professional valuers from the government in line with the National Assets and Liabilities Management Policy and Guidelines (issued 30th June 2020). The assets were revalued Milford Appraisal professional valuers Milford Appraisal professional valuers by professional valuers on this date 15th August 2022.

These amounts were adopted by the Board on 12th October 2022 with concurrence from the National Treasury.

(b) Property, Plant and Equipment at Cost

If the freehold land, buildings and other assets were stated on the historical cost basis the fixed amounts would be as follows:

| Description | Cost | Accumulated Depreciation | NBV |
|-------------------------|------------|-----------------------------|------------|
| | Kshs | Kshs | Kshs |
| Plant And Machinery | 2,356,273 | 254,117 | 2,102,155 |
| Motor Vehicles | 17,985,000 | 4,496,250 | 13,488,750 |
| Computer Equipment | 2,635,600 | 752,800 | 1,882,800 |
| Furniture, And Fittings | 2,274,145 | 284,269 | 1,989,875 |
| Total | 25,251,018 | 5,787,436 | 19,463,582 |

Notes to the Financial Statements (Continued)

13.Intangible Assets

| | FY 2022-2023 | FY 2021-2022 |
|-----------------------------|--------------|--------------|
| Description | Kshs | Kshs |
| Cost | | |
| At beginning of the year | 2,254,040 | 3,953,084 |
| Additions | 0 | 0 |
| At end of the year | 2,254,040 | 3,953,084 |
| Amortization and impairment | | |
| At beginning of the year | | |
| Amortization | 751,347 | 1,582,817 |
| At end of the year | 751,347 | 1,582,817 |
| NBV | 1,502,693 | 2,370,267 |

14. Trade and Other Payables

| | FY 2022-2023 | | FY 2021-2 | FY 2021-2022 | |
|------------------------------------|------------------|---------------|----------------------|----------------------|--|
| Description | Kshs | | Kshs | | |
| Trade payables | 3,960,672 | | 0 | | |
| Other payables(Payroll Deductions) | 2,799,744 | | 598,183 | | |
| Total trade and other payables | 6,760,416 | | 598,183 | | |
| Ageing analysis: (Trade and other | FY 2022- 2023 | % of the Tota | FY 2 021-2022 | % of the Total | |
| Under one year | 6,760,416 | 100 | 598,183 | 100 % | |
| Total (tie to above total) | 6,760,416 | | 598,183 | | |

Notes to the Financial Statements (Continued)

The Board contributes to the statutory National Social Security Fund (NSSF). This is a defined contribution scheme registered under the National Social Security Act. The Board's obligation under the scheme is limited to specific contributions legislated from time to time and is currently at Kshs. 1,080 per employee per month. Other than NSSF the Entity also has a defined contribution scheme operated by Jubilee Pension Fund. Employees contribute 10% while employers contribute 20% of basic salary. Employer contributions are recognized as expenses in the statement of financial performance within the period they are incurred.

Notes to the Financial Statements (Continued)

15. Financial Risk Management

The Entity's activities expose it to a variety of financial risks including credit and liquidity risks and effects of changes in foreign currency. The Entity's overall risk management programme focuses on unpredictability of changes in the business environment and seeks to minimise the potential adverse effect of such risks on its performance by setting acceptable levels of risk. The Entity does not hedge any risks and has in place policies to ensure that credit is only extended to customers with an established credit history. The Entity's financial risk management objectives and policies are detailed below:

Notes to the Financial Statements (Continued)

16.Related Party Disclosures

Nature of related party relationships

Entities and other parties related to the Board include those parties who have ability to exercise control or exercise significant influence over its operating and financial decisions. Related parties include management personnel, their associates and close family members.

Government of Kenya

The Government of Kenya is the principal shareholder of the Board, holding 100% of the Board's equity interest. The Government of Kenya has provided full guarantees to all long-term lenders of the Entity, both domestic and external.

Other related parties include:

- i) The Parent Ministry.
- ii) County Governments
- iii) Other SCs and SAGAs
- iv) SCAC
- v) Key management.
- vi) Board of directors.

| Description | FY 2022-2023 | FY 2021-2022 | |
|--|--------------|--------------|--|
| Description | Kshs | Kshs | |
| Transactions with related parties | | | |
| a) Grants /transfers from the government | | | |
| Grants from national govt | 102,570,000 | 124,500,002 | |
| Total | 102,570,000 | 124,500,002 | |
| b) Key management compensation | | | |
| Directors' emoluments | 7,373,604 | 8,068,022 | |
| Compensation to key management | 19,094,904 | 18,591,528 | |
| Total | 26,468,508 | 26,659,550 | |

The Key staff relates to head of departments.

Directors emoluments relates to directors sitting allowances, medical expenses, Mileage and airtime.

Contingent Liabilities

| Description | FY 2022-2023 | FY 2021-2022 |
|--|--------------|--------------|
| Description | Kshs | Kshs |
| Contingent Liabilities | | |
| Court Case old staff case against the Board ELRC | 63,000,000 | 0 |
| Total | 63,000,000 | 0 |

The case relates to former staff seconded to Anti FGM Board from different ministries .

Notes to the Financial Statements (Continued)

17. Events after the Reporting Period

There were no material adjusting and non- adjusting events after the reporting period.

18. Ultimate And Holding Entity

The Board is a State Corporation/ or a Semi- Autonomous Government Agency under the Ministry of Public Service, Gender and Affirmative Action. Its ultimate parent is the Government of Kenya.

19. Currency

The financial statements are presented in Kenya Shillings (Kshs) rounded to the nearest Kshs.

20. Appendices

Appendix 1: Implementation Status of Auditor-General's Recommendations

The following is the summary of issues raised by the external auditor, and management comments that were provided to the auditor.

| No. on | Issue / Observations from Auditor | Management comments | Status: (Resolved / Not Resolved) | (Put a date when you |
|--------|--|---|--|----------------------|
| | Financial Management, Internal Controls and Corporate Governance. Inaccuracy in the Intangible Assets Balance Note 14 to the financial statements reflects intangible assets of Kshs. 2,370,268. However, the balance brought forward for F/Y 2021-2022 of 3,953,084 differs with the closing of Kshs. 3,092,484 resulting to unexplained | Issue was wrongly captured. The closing balance of Kshs. 3,092,484 cited is for NBV (Net Book Value). | Resolved | |

| | ar ended June 30, 20 | | | |
|---------|--|---|-----------|-------------|
| Referer | | Management | | Timeframe: |
| No. on | | comments | | (Put a date |
| | from Auditor | | | when you |
| externa | 1 | | Resolved) | expect the |
| audit | | | | issue to be |
| Report | | | | resolved) |
| | variance of | | | |
| | Kshs. 860,600 | | <u> </u> | |
| | Unsupported Expenditure Rentals amounting to Kshs 6,529,521 which was paid during the year without lease agreements | There exists a contract agreement which serves as lease agreement | Resolved | |
| | Unaccounted | | | |
| | for Board | | | |
| | Expenses | | | |
| | Board expenses totaling to Kshs. 5,111,222 were not supported with documents such payment vouchers, minutes and Board meeting register | All support documents were availed for reconfirmation. | J | |
| | policy and | Risk Management policy and ICT policy in place | | |
| | the technology, | | | |
| | the technology, | | | |

| Reference | Issue / | Management | Status: | Timeframe: |
|-----------|---|---|-----------|-------------|
| No. on | Observations | comments | (Resolved | (Put a date |
| the | from Auditor | | / Not | when you |
| external | | | Resolved) | |
| audit | | | | issue to be |
| Report | variance of | MATERIAL SERVICES | | resolved) |
| | Kshs. 860,600 | | | |
| | Unsupported Expenditure Rentals amounting to Kshs 6,529,521 which was paid during the year without lease agreements | There exists a contract agreement which serves as lease agreement | Resolved | |
| | Unaccounted | | | |
| | for Board | | | |
| | Expenses | | | * |
| | Board expenses totaling to Kshs. 5,111,222 were | All support documents were | | |
| | not supported with documents such payment vouchers, minutes and Board meeting register | availed for re- confirmation. | | |
| | Lack of Risk Management and ICT policy There is lack of | y . | | |
| | documented ICT | Risk Management | | |
| | policy and | policy and ICT policy | | N y |
| | strategic plan to | in place | | |
| | guide the use of | | | |
| | the technology, | | | |
| | | | | |

| No. on the external audit Report as a result, it's not clear whether the ICT needs were identified and addressed Further, no risk assessment was carried out to identify and mitigate potential risks Corporate Governance The Board did not have a chairperson for six months Audit Committee did not have audit charter and met thrice contrary to the requirement of at least four times (Resolved) (Put a date when you expect the issue to be resolved) Appointment of chairperson done. | Reference | ce Issue / | Management | Status: | Timeframe: |
|---|---|-------------------|-------------------|-----------|------------|
| external audit Report as a result, it's not clear whether the ICT needs were identified and addressed Further, no risk assessment was carried out to identify and mitigate potential risks Corporate Governance The Board did not have a chairperson for six months Audit Committee did not have audit charter and met thrice contrary to the requirement of at least four Audit Committee Charter) developed and reviewed. | 20 m 5 to 10 m 10 | Observations | | (Resolved | |
| as a result, it's not clear whether the ICT needs were identified and addressed Further, no risk assessment was carried out to identify and mitigate potential risks Corporate Governance The Board did not have a chairperson for six months Audit Committee did not have audit charter and met thrice contrary to the requirement of at least four Resolved) Resolved) expect the issue to be resolved) Appointment of chairperson done. | | from Auditor | | | |
| as a result, it's not clear whether the ICT needs were identified and addressed Further, no risk assessment was carried out to identify and mitigate potential risks Corporate Governance The Board did not have a chairperson for six months Audit Committee did not have audit charter and met thrice contrary to the requirement of at least four | | | | Resolved) | |
| as a result, it's not clear whether the ICT needs were identified and addressed Further, no risk assessment was carried out to identify and mitigate potential risks Corporate Governance The Board did not have a chairperson for six months Audit Committee did not have audit charter and met thrice contrary to the requirement of at least four | | | | | |
| not clear whether the ICT needs were identified and addressed Further, no risk assessment was carried out to identify and mitigate potential risks Corporate Governance The Board did not have a chairperson for six months Audit Committee did not have audit charter and met thrice contrary to the requirement of at least four Addressed Further, no risk assessment was carried out to identify and mitigate potential risks Appointment of chairperson done. Six did Charters (Internal Audit Committee Charter) developed and reviewed. | Report | | Make meters | | resolved) |
| whether the ICT needs were identified and addressed Further, no risk assessment was carried out to identify and mitigate potential risks Corporate Governance The Board did not have a chairperson for six months Audit Committee did not have audit charter and met thrice contrary to the requirement of at least four Addressed Appointment of chairperson done. Audit Charters (Internal Audit Committee Charter) developed and reviewed. | | as a result, it's | | | |
| needs were identified and addressed Further, no risk assessment was carried out to identify and mitigate potential risks Corporate Governance The Board did not have a chairperson for six months Audit Committee did not have audit charter and met thrice contrary to the requirement of at least four Addressed Appointment of chairperson done. (Internal Audit Charters (Internal Audit Committee Charter) developed and reviewed. | | not clear | | | |
| identified and addressed Further, no risk assessment was carried out to identify and mitigate potential risks Corporate Governance The Board did not have a Chairperson for six months Audit Committee did not have audit charter and met thrice contrary to the requirement of at least four | | whether the ICT | | | |
| addressed Further, no risk assessment was carried out to identify and mitigate potential risks Corporate Governance The Board did not have a chairperson for six months Audit Committee did not have audit charter and met thrice contrary to the requirement of at least four Appointment of chairperson done. Audit Charters (Internal Audit Committee Charter) developed and reviewed. | | needs were | | | |
| Further, no risk assessment was carried out to identify and mitigate potential risks Corporate Governance The Board did not have a chairperson for six months Audit Committee did not have audit charter and met thrice contrary to the requirement of at least four | | identified and | | | |
| assessment was carried out to identify and mitigate potential risks Corporate Governance The Board did not have a chairperson for six months Audit Charters Committee did not have audit charter and met thrice contrary to the requirement of at least four Assessment was carried out to identify and mitigate potential risks Appointment of chairperson done. Appointment of chairperson done. (Internal Audit Charter and Audit Committee Charter) developed and reviewed. | | addressed | | | |
| carried out to identify and mitigate potential risks Corporate Governance The Board did not have a chairperson for six months Audit Committee did not have audit charter and met thrice contrary to the requirement of at least four Corporate Governance Appointment of chairperson done. Appointment of chairperson done. Audit Charters (Internal Audit Charter and Audit Committee Charter) developed and reviewed. | | Further, no risk | | | |
| identify and mitigate potential risks Corporate Governance The Board did not have a chairperson for six months Audit Committee did not have audit charter and met thrice contrary to the requirement of at least four Audit Charter and Audit Charter and Audit Committee Charter) developed and reviewed. | | assessment was | | | |
| mitigate potential risks Corporate Governance The Board did not have a chairperson for six months Audit Committee did not have audit charter and met thrice contrary to the requirement of at least four Appointment of chairperson done. Audit Charters (Internal Audit Charter and Audit Committee Charter) developed and reviewed. | | carried out to | | | |
| Corporate Governance The Board did not have a chairperson for six months Audit Committee did not have audit charter and met thrice contrary to the requirement of at least four Appointment of chairperson done. Audit Charters (Internal Audit Charter and Audit Committee Charter) developed and reviewed. | | | | | |
| Corporate Governance The Board did not have a chairperson for six months Audit Committee did not have audit charter and met thrice contrary to the requirement of at least four Appointment of chairperson done. Audit Charters (Internal Audit Charter and Audit Committee Charter) developed and reviewed. | | | | | |
| Governance The Board did not have a chairperson for six months Audit Committee did not have audit charter and met thrice contrary to the requirement of at least four Appointment of chairperson done. Audit Charters (Internal Audit Charter and Audit Committee Charter) developed and reviewed. | | | | | |
| The Board did not have a chairperson for six months Audit Committee did not have audit charter and met thrice contrary to the requirement of at least four Appointment of chairperson done. Audit Charters (Internal Audit Charter and Audit Committee Charter) developed and reviewed. | | | | | |
| not have a chairperson for six months Audit Committee did not have audit charter and met thrice contrary to the requirement of at least four Audit Charters (Internal Audit Charter and Audit Charter and Audit Charter) developed and reviewed. | | | Annalata | | |
| Audit Committee did not have audit charter and met thrice contrary to the requirement of at least four Audit Charters (Internal Audit Charter and Audit Committee Charter) developed and reviewed. | | | | | |
| Audit Committee did not have audit charter and met thrice contrary to the requirement of at least four Audit Charters (Internal Audit Charter and Audit Committee Charter) developed and reviewed. | | | chairperson done. | | |
| Committee did not have audit charter and met thrice contrary to the requirement of at least four (Internal Audit Charter and Audit Committee Charter) developed and reviewed. | | SIX MONTHS | | | |
| not have audit charter and met thrice contrary to the requirement of at least four Charter and Audit Committee Charter) developed and reviewed. | | Audit | Audit Charters | | |
| charter and met thrice contrary to the requirement of at least four | ă d | | (Internal Audit | | |
| thrice contrary to the requirement of at least four | | | Charter and Audit | | |
| to the requirement of at least four | a. | | | | |
| requirement of at least four | | | 1 | | |
| | | | reviewed. | | |
| unies | | | | | |
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C.E.O.

Date: 9/02/2024

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| the received | | Nature: | | Statement | | | | | Tari |
| Fransferrin bank | | Kecurrent/ Developme | Total | of Financial | | | | Others - | Transfers |
| Is | | nt/Others | KES | renoimanc | Fund | Deferred | Receivabl | must be | during the |
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| tometa Survivi | | | | | | | | | |
| t something | | | | | | | | | |
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| Affirmative | | | | V | | | | | |
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| Affirmative | | | | | | | | | |
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| Ministry of | | | 2001 | 27,012,000 | | 0 | 0 | 0 | 25,642,500 |
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| Ministry of | | | 2001-1-1 | 20,012,000 | | 0 | 0 | 0 | 25,642,500 |
| | | | | | | | | | |
| 25/04/2023 | - | Recurrent | 25,642,500 | 25,642,500 | 0 | 0 | c | c | i i |
| | | | | of temporal property property interests for a definition to provide a sufficient of the sufficient of | A Charles Comment Comm | Agencial deposition of the continue of the con | | > | 25,642,500 |

Annual Report and Financial Statements for the year ended June 30, 2023.

| | Total | UNICEF | Affirmative Action |
|-------------------|-----------|--|-----------------------|
| | | 20/09/2022 | 10 |
| | | 20/09/2022 Donor Fund 7,017,900 17/04/2023 Donor Fund 7 | |
| 115,575,7 40 0 | 5,987,840 | 1 1 | |
| 115,575,74 | 5,987,840 | 7,017,900 | |
| 0 | 0 | 0 | |
| 0 | | | |
| 0 | 0 0 | | |
| 0 | 0 0 | | |
| 115,575,7 | 7,017,900 | | |

Appendix V- Inter-Entity Confirmation Letter

ANTI FGM BOARD, 54760 - 00200

The Anti FGM Board wishes to confirm the amounts disbursed as at 30th June 2022 is indicated in the table below.

Confirmation of amounts received by Anti-Fernale Genital Mutilation Board as at 30th June 2023

| | | | | | The state of the s | | |
|--------------------------|-----------------------|----------------|---|------------------|--|--------------------|-------------|
| | | Amounts Disbur | Amounts Disbursed by State Department of Gender as at 30th June Amount Received | ment of Gender a | s at 30th June | Amount Received | |
| | | 2023 | | | | by [beneficiary | |
| | | | | | | Entity] | Differences |
| Doforonco | Dato | Recuirent (A) | Recurrent (A) Development (B) | Inter- | Total | (KShs) as at 30th | (KShs) |
| Murahor | Dishursad | | | Ministerial | (D)=(A+B+C) | June (Previous FY) | (F)=(D-E) |
| | DOC INCIDE | | | (0) | | (E) | |
| 0030001500 1/08/2022 | 1/08/2022 | 25.642,500 | 0 | 0 | 25,642,500 | 25,642,500 | 0 |
| 00300015667 | 0030015667 10/10/2022 | 25 642 500 | 0 | 0 | 25,642,500 | 25,642,500 | 0 |
| 0030013007 003001607E | 003001300/ 19/10/2022 | 25,612,500 | 0 | 0 | 25,642,500 | 25,642,500 | 0 |
| 003001007 | 0030010073 24/01/2023 | 25,642,500 | | 0 | 25,642,500 | 25,642,500 | 0 |
| Total | 23/01/2023 | 102 570 000 | 0 | 0 | 102,570,000 | 102,570,000 | 0 |
| lotal | | 100/01/01/07 | k | equa | | | |

In confirm that the amounts shown above are correct as of the date indicated.