

# UNITED NATIONS POPULATION FUND

Annex 6. Implementation of global and regional interventions, 2018

2018 Executive Director Annual Report to the Executive Board, 2018

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### A. Introduction

In its decision 2017/24, the Executive Board invited UNFPA to report on implementation of, and funds spent on, global and regional interventions (GRI) in an annex to the annual report of the Executive Director.

Global and Regional Interventions (GRI) constitute a programmatic instrument that UNFPA uses at regional and global levels to support and complement country programmes, and to ensure cohesion of programmes at all levels to promote the Programme of Action of the International Conference for Population and Development (ICPD PoA) and the 2030 Agenda for Sustainable Development.

GRI directly supports the achievement of results of the UNFPA Strategic Plan, 2018-2021, contributing towards the achievement of the strategic plan outcomes and organizational effectiveness and efficiency outputs through the implementation of one global and six regional action plans. GRI also directly contributes towards achievement of the three strategic plan transformative results: (a) zero preventable maternal deaths; (b) zero unmet need for family planning; and (c) zero gender-based violence and all harmful practices, including female genital mutilation and child, early and forced marriage.

The GRI operates through six main intervention areas: (i) strengthening advocacy and intergovernmental policy dialogue, (ii) building and expanding partnerships, including interagency collaboration, (iii) enhancing capacity and promoting dissemination of knowledge, (iv) providing technical and programmatic advisory support to countries, (v) promoting international norms and standards, and (vi) strengthening humanitarian response and preparedness.

This annex presents the selected results achieved in 2018 by the GRI as a contribution towards the achievement of the UNFPA Strategic Plan, 2018-2021. It also highlights the main challenges and progress made in achieving output indicator targets together with the financial resources spent per outcome of global and regional interventions within their action plans.

## **B.** Summary of Achievements

In 2018, global and regional interventions supported advancement of the ICPD PoA and contributed to the 2030 Agenda for sustainable development. The interventions promoted international norms and standards by providing policy advice and technical advisory support to governments and intergovernmental processes across all outcomes of the UNFPA Strategic Plan, 2018-2021. They also were instrumental in providing programming solutions, including for humanitarian situations, and assisted country offices and programmes with integrated, innovative, operational and programmatic support, including capacity building.

The interventions supported the implementation and progress towards achievement of the results of the Strategic Plan, 2018-2021, contributing to each of the four strategic plan outcomes and its organizational effectiveness and efficiency outputs. In 2018, the GRI posted a strong performance by meeting 90 per cent of the targets of six regional interventions action plans and 92 per cent of the targets of the global action plan.

## C. Highlights of key results, by intervention area

### (i) Advocacy and intergovernmental policy dialogue and processes strengthened

In 2018, many regional and global intergovernmental processes showed progress in advancement of the ICPD PoA and the 2030 Agenda. For example, the outcomes of several regional intergovernmental processes that reviewed the ICPD Programme of Action reaffirmed the ICPD agenda and reinforced the primacy of sexual and reproductive health and reproductive rights, gender equality and women's and girls' empowerment, and population data as imperative to the achievement of the 2030 Agenda for Sustainable Development.

The outcomes of some intergovernmental processes resulted in commitments toward achieving the three transformative results that UNFPA has set in its Strategic Plan, 2018-2021, including financial commitments to increase access to sexual and reproductive health and protect the rights of women and girls. Others specifically supported policies that ensure access to sexual and reproductive health and prioritize "leaving no one behind" and "reaching the furthest behind first". Selected key results include:

- a) The regional ICPD+25 reviews conducted across Africa, Asia and the Pacific, Latin America and the Caribbean, Europe and the Arab Region Member States endorsed the outcomes of commitments at the ministerial level together with major global and regional civil society networks to advance and accelerate the full implementation of the ICPD;
- b) Global interventions leveraged political support leading to the adoption, by parliamentarians from 70 countries, of the Ottawa Statement of Commitment to support the UNFPA Three

Transformative Results as essential to the achievement of SDGs;

- c) The Bali Outcome Document endorsed by more than 26 countries committed to promote South-South cooperation to advance the ICPD agenda;
- d) The "UNECE Monitoring Framework for the ICPD Programme of Action beyond 2014", developed by the United Nations Economic Commission for Europe and the UNFPA Eastern Europe and Central Asia regional office, was endorsed by 56 Member States in Europe, North America and Asia;
- e) 30 Latin American and Caribbean countries adopted the Regional Monitoring Framework for the Montevideo Consensus on Population and Development and included 34 indicators from this framework in the Regional Monitoring Framework for the SDGs;
- f) Increased funding commitments to Yemen (\$24 million) and South Sudan (\$6 million) for family planning and protecting the rights of women and girls affected by conflict;
- g) \$2.3 million was mobilized for mainstreaming gender-based violence (GBV) into humanitarian response, including strengthening GBV information management systems and clinical management of rape;
- h) \$1.7 million was mobilized by Asia and the Pacific regional office for a regional prepositioning initiative to better respond to humanitarian crisis situations and to collect data on violence against women;
- i) São Tomé and Príncipe received \$550,000 for the first time from an India-UN development partnership fund for family planning programming, within the context of global interventions with the West and Central African regional office.

Intergovernmental processes at the regional level were successful in gaining commitments of regional commissions and member states to promoting integrated sexual and reproductive health services and reproductive rights, and eliminating fistula. For example, the Economic Community of West African States adopted the first-ever regional resolution, the Banjul Call for Action: "Towards eradicating Fistula in the region by 2030"; the Ulaanbataar Declaration on disaster risk reduction was adopted by the United Nations Economic and Social Commission of Asia and the Pacific Member States; and all 14 Southern African Development Community (SADC) ministers of health adopted the Sexual and Reproductive Health and Rights Strategy.

# (ii) Strategic partnerships, including partnerships with other United Nations organizations, expanded

In 2018, expanded partnerships fostered through global and regional interventions advanced the ICPD agenda and contributed to the achievement of the Strategic Plan, 2018-2021 and its three transformative results. Both new and existing partnerships, including with United Nations organizations, were leveraged to expand support for increased utilization of integrated sexual and reproductive health and reproductive rights.

In Asia and the Pacific, partnerships engaged in promotion and support of work to prevent gender-based violence and harmful practices, and formulation of policies for active aging. As an outcome of the joint regional comprehensive sexuality education dialogue between Asian-Pacific Resource and Research

Centre for Women, UNFPA, and UNESCO, 15 Asian and Pacific countries increased their national commitments to comprehensive sexuality education.

As a result of the Arab States co-leadership on the UN interagency technical task team, specific sexual and reproductive health-HIV/AIDS issues were included in the young people framework for 2018-2021 for Arab States. UNFPA Arab States regional office co-chaired the SDG Data Task Force under the Regional Coordination Mechanism, resulting in the adoption of 39 ICPD-based SDG indicators for the region. The regional office also brokered a first-of-its-kind partnership with religious leaders on the youth, peace and security agenda through organizing the first regional forum for religious leaders to promote dialogue and strengthen the role of youth and women in the fight against violent extremism and the promotion of peace in the Arab States.

In Eastern Europe and Central Asia, as a result of regional inter-agency thematic alliances and cooperation, 14 UN agencies endorsed a UN joint common position paper on ending tuberculosis, HIV and viral hepatitis, developed by a regional UN issues-based coalition on health and well-being, as a cohesive one-UN approach to the three diseases in Eastern Europe and Central Asia. Furthermore, functional bilateral thematic cooperation platforms were established for supporting the institutionalization of regional training courses on priority sexual reproductive health issues.

In East and Southern Africa, regional harmonized and standardized sexual and reproductive health and HIV guidelines were adopted for promoting integrated youth friendly sexual and reproductive health services. A Middle Income Countries technical experts hub was established in the UNFPA regional office to provide tailored support to countries in line with the R-UNSDG strategy to support middle-income countries within the context of ongoing UN reforms. The East and Southern Africa regional office built on different partnerships, including inter-agency collaboration, to review the state of unintended and early pregnancy in 10 East and Southern African countries, and to harmonize the legislation on adolescents' sexual and reproductive health, including the SADC Model Law on eradicating child marriage.

In Latin America and the Caribbean, as a result of regional partnerships, agreement was reached on a monitoring framework for the Montevideo Consensus in the context of the Statistical Conference of the Americas. A number of partnership platforms, including youth networks, were expanded to support increased investment in adolescents and youth and promotion of the rights of vulnerable youth, including adolescents with disabilities, indigenous and afro-descendants.

In West and Central Africa, a regional inter-agency alliance for reproductive, maternal, neonatal, child and adolescent health supported Member States in developing and implementing integrated sexual and reproductive health and reproductive rights policies and programmes. A number of strategic partnerships, including those with religious leaders and faith-based organizations, were leveraged to increase the population's understanding of the need to harness the demographic dividend and enhance family well-being.

As part of the UN system-wide reforms, inter-agency collaboration increased at global and regional levels, enabling better positioning of the issues of the UNFPA mandate in inter-agency processes and plans. As a result, more inter-agency mechanisms, including initiatives, regional joint programmes and thematic alliances, integrated sexual and reproductive health and reproductive rights. Some of the key results include:

- a) Sexual and reproductive health services were integrated in the Primary Health Care Declaration to ensure that the most vulnerable and hard-to-reach populations receive sexual and reproductive health services through collaboration among WHO, UNICEF, and UNFPA;
- b) The first global collection of data on indigenous women's maternal health was brought together in the UNFPA, UNICEF, UN-Women Fact Sheet on Indigenous Women's Maternal Health, bringing to global attention the need for more action and data in this area;
- c) SDG indicator 5.6.2 on laws to guarantee equal access to sexual and reproductive health was reclassified to Tier II, and rolled out in all UN Member States, as a result of UNFPA's work to develop the methodology;
- d) Young people's sexual and reproductive health and rights were prioritized at the global level through integration into the new UN Youth Strategy (Youth 2030), as a result of UNFPA joint advocacy and work with stakeholders;
- e) New UNSDG Guidance on Leaving No One Behind was developed to support UN country teams, through the work of the UNSDG Thematic Group on Leaving No One Behind.

Figure 1. New regional partnerships for achieving Three Transformative Results



Latin America and the Caribbean regional office established new partnerships with the private sector, opening access to BlackRock's research on population projections and advocacy for the Three Transformative Results through Grupo de Diarios América's media platforms;



The East and Southern Africa regional office partnered with the private sector on pharmaceutical production of generic contraceptives to end unmet need for family planning.



The Arab States regional office brokered its first ever partnership with religious leaders on youth, peace and security agenda towards ending gender-based violence;

The Eastern Europe and Central Asia regional office established a new partnership with OSCE and the European Institute for Gender Equality to generate new knowledge and data collection methodologies to end gender-based violence;



The Asia and the Pacific regional office is strengthening gender and sexual and reproductive health and rights through the South Asia Coordination Group on Violence Against Children (SACG) to end child marriage.

In 2018 the global and regional interventions continued to mobilize key civil society organizations, including faith-based organizations, to promote sexual and reproductive health, gender equality and women's and girls' rights. They expanded partnerships with global and regional networks, regional

parliamentary forums and civil society organizations advocating for adolescents' sexual and reproductive health and rights to advance the implementation of the SDGs.

Providing support to country offices in advocating for increased domestic resources for UNFPA programmes and establishing partnerships with traditional and non-traditional donors in leveraging support and resources for implementation of global and regional action plans were also priorities of the GRI strategic partnership work. Selected results include:

- a) A new partnership with World Vision International on reaching affected populations with realtime data 'to the last mile' with services and supplies in humanitarian crises;
- Faith Advisory Council formed by 40 faith-based non-governmental organizations committed to human rights, including the rights of women and girls to sexual and reproductive health and rights;
- c) Regional maternal, neonatal, child and adolescent health strategy developed in the Arab States as a result of strategic engagement with the League of Arab States (22 countries) to support countries in aligning national reproductive health strategies with ICPD and SDG frameworks;
- d) Youth ICPD and SDG priorities reflected in the European Youth Goals, as a result of collaboration between the UNFPA Eastern Europe and Central Asia regional office, the Government of Bulgaria, the European Union, and European regional youth networks;
- e) Africa Coalition on Menstrual Health Management launched by the East and Southern Africa Regional Office in collaboration with over 300 partners, to empower girls and women in the region to overcome negative social norms and misconceptions.

Lack of interest by donors in some regions, including different approaches for co-financing commitments, were reported as challenges by regional interventions. The lack of regional communication and media institutions limiting the reach at the regional level were also identified by regional interventions as obstacles to the development of strategic partnerships.

Documenting good practices of programme-country contributions to replicate across the region and to continue expanding existing partnerships with private sector via transfer of contacts across the regions, including from global to regional offices, were identified as a way forward.

### (iii) Capacity building enhanced

Through the GRI support, in 2018, capacity of countries increased in several outcome areas of the Strategic Plan 2018-2021. GRI played a key role in enhancing countries' capacity in analysing and using census data, improving the forecast and procurement of reproductive health commodities, and applying results-based management. Key selected results in this intervention area include:

- The capacity to collect and utilize georeferenced census data was enhanced in 63 countries by global interventions;
- In 30 countries across the Arab States, Latin America and the Caribbean, and East and Southern Africa, corresponding UNFPA regional offices supported national capacity building on Minimum Initial Service Package (MISP), maternal death surveillance, and sexual and reproductive health;
- Capacity on forecasting, procurement and monitoring of reproductive health commodities was

enhanced in 31 country offices in Latin America and the Caribbean and West and Central Africa regions;

- In 14 countries, capacities for GBV coordination, response and integration were enhanced by regional offices in the Arab States and in Africa, and by 21 gender focal points in Asia and the Pacific region;
- Regional offices built national capacity for results-based management in 37 countries;
- More than 20 knowledge products have been created by the global and regional interventions, establishing platforms for knowledge sharing and dissemination;
- Over 150 UNFPA personnel from 50 countries have skills on effective integration of South-South cooperation as a programming modality for the implementation of country programmes.

The absence of the regional gender advisor in East and Southern Africa regional office impacted the progress in strengthening national human rights institutions and multisectoral capacity to prevent and respond to GBV and harmful practices. To overcome this challenge, the recruitment process of the advisor was expedited to ensure the post was filled by the end of 2018.

Lack of financial resources affected the planned scope of engagement with national human rights institutions in Asia and the Pacific. Whereas in Latin America and the Caribbean, priorities shifted to respond to urgent requests from country offices to increase capacity in GBViE and MISP as well as support in responding to urgent widespread humanitarian needs of refugees and migrants from Venezuela.

## (iv) Technical and programmatic support provided

The regional interventions were instrumental in providing policy and technical advisory services to countries to contribute toward achievement of outcomes of the UNFPA Strategic Plan, 2018-2021, national priorities in Agenda 2030, and attaining specific results of country programmes.

Countries received technical support in requested thematic areas, including: advocacy for resource mobilization for family planning, use of a regional tool to analyse inequalities relating to sexual and reproductive health, and cost-benefit analysis of access to affordable and quality reproductive health commodities by the most marginalized populations.

Regional interventions also provided technical advisory services to countries in other programmatic areas, including integration of sexual and reproductive health services into national disaster risk reduction plans, developing strategic action plans to eliminate fistula, evidence-based programming on adolescent pregnancy, child marriage and early unions, and youth participation and peace building.

To achieve gender equality and empower women and girls, the regional offices supported countries in implementing programmes on establishing safe spaces for women and girls, and eliminating harmful practices such as female genital mutilation and child marriage. They also enhanced capacities of national partners and UNFPA country offices to use mechanisms for monitoring and reporting sexual

reproductive health and reproductive rights, which contributed to countries' reporting on Universal Periodic Review and other commitments.

Regarding population data, countries received technical and advisory services on using population dynamics and quantitative progress data for developing national reports on the ICPD linkage to achieving SDGs, and in mainstreaming aging in national development policies and programs.

Figure 2. Selected results of regional technical and programme support



28 countries supported to implement quality, comprehensive sexual reproductive health and reproductive rights



21 countries received advisory services to advance gender equality and women's empowerment



15 countries were supported in 10 countries benefited in using empowering young people



population dynamics for national policies and strategic analysis

In spite of strong performance, a challenge in providing technical advisory support is the need for a more tailored country context approach, which is more time consuming and costly, due to the diversity of contexts within each region. Additional challenges include changes in national priorities or public structures (e.g. postponed census enumeration, renegotiation of commitment, etc.) and difficulties in managing multisectorial initiatives due to various sectoral priorities and procedures.

Regional interventions maintained comprehensive technical assistance mechanisms that incorporate capacity building interventions to address issues of quality, completeness and timeliness. Bringing together participants from different countries to understand vulnerabilities together with engaging communities and partners in discussions around contentious issues contributed to overcoming highlighted challenges.

### (v) International standards and tools promoted

Promoting international norms and standards to increase utilization of integrated sexual and reproductive health, empower adolescents and youth, achieve gender equality and empower women and girls, and count and account for everyone, everywhere in the pursuit of sustainable development, in 2018, the GRI emphasized the development of standards and guidance, and supported countries to adapt and roll out a number of tools. Key selected results in this area included:

- a) Global guidance on reproductive health in crisis updated;
- b) Three global thematic frameworks developed (legal framework on female genital mutilation; demographic dividend guidelines; mainstreaming youth, demographic dividend in UNDAF);
- c) UNFPA Global Adolescent and Youth Strategy developed;

- d) UNFPA Census Strategy and operational guidance revised to align with up-to-date developments in geospatial dimensions;
- e) Global guidelines for testing condoms issued;
- f) Minimum Initial Service Package global standards rolled out in 50 countries;
- g) 10 countries' capacity increased on the use of guidelines to integrate GBV into humanitarian action;
- h) 20 countries in Asia and the Pacific and Eastern Europe and Central Asia regions rolled-out or adapted international standards with regional office support;
- i) Case studies documented from 25 countries to replicate good practices in South-South cooperation exchanges and partnerships in the areas of sexual and reproductive health and rights, and population and development.

Performance in this area was affected by the delay in developing the global guidance on engaging men and boys to end gender-based violence, and the monitoring tool for MISP implementation and the guidance note for health care providers to work with adolescents. Preparatory work on these guidance notes required more time than had been anticipated; their completion is planned as a priority for 2019.

### (vi) Timely humanitarian preparedness and response ensured

In 2018, GRI played a critical role in building the capacity of countries to provide timely lifesaving assistance and scale up humanitarian action. The interventions reached all the humanitarian priority countries, from Yemen and Syria to the Democratic Republic of the Congo, Ethiopia, Nigeria, and South Sudan and dozens of other countries. Selected results include:

- Coordinated procurement and delivery of 12,000 emergency reproductive health kits to 50 countries;
- Strengthened capacity and skills of UNFPA personnel to work in emergencies including surge deployment of 110 people to 32 countries, a 55 percent increase since 2016;
- Increased rapid response to 35 countries with a \$9.5 million allocation of the UNFPA Emergency Fund and fully institutionalized the pre-financing mechanism;
- Continued the rollout of Minimum Preparedness Actions, resulting in 200 staff members from 62 country offices being trained;
- Established coordination mechanisms through global leadership of UNFPA in the GBV Area of Responsibility;
- 4,170 UNFPA staff and implementing partners from 55 countries were trained to implement MISP in case of emergency;
- 39 countries' capacity was enhanced to generate disaggregated humanitarian data of the affected populations.

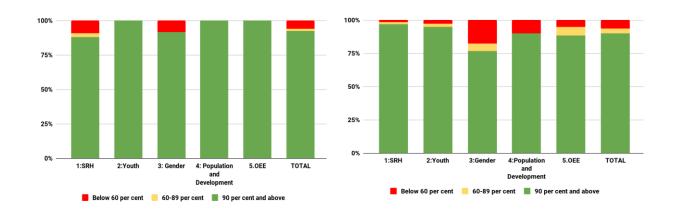
# D. GRI programme and financial performance, by outcomes of UNFPA Strategic Plan, 2018-2021

The performance progress of global and regional interventions was assessed, by outcomes of UNFPA Strategic Plan, 2018-2021, using the results and resources frameworks of one global and six regional action plans. The assessment shows the extent to which the 2018 performance targets were achieved, by global and regional interventions action plans.

Each framework of the action plan specified the output indicators and annual targets for tracking progress towards the achievement of the output results in 2018. Performance of the interventions was assessed by calculating the achievement rate of the annual targets.

Global and regional interventions demonstrated strong performance in 2018 (see Chart 1).

Chart 1. 2018 Performance of global and regional interventions, by strategic plan outcome and total



The analysis reveals that the global and regional interventions performance was strong with respect to outcome 2. Global interventions also achieved all 2018 targets under outcome 4 and organizational effectiveness and efficiency. Regional interventions performed well, consistent with greater importance in the strategic plan, with respect to outcome 1 and spent 35 per cent of their regular resources compared to 40 per cent spent by global interventions (chart 2).

A slight decline in the performance of global interventions occurred in outcome 1, in comparison with regional interventions. The global output on strengthening health workforce had progress below 60% of its two targets in 2018, due largely to two delays: finalization of the monitoring tool for MISP implementation, and postponement of issuance of the guidance note for health care providers to work with adolescents. These tools are under development and on track to be completed in 2019.

Particularly for outcome 2, regional interventions face the challenge of a funding gap for long-term sustainability of youth networks. The Compact for Young People in Humanitarian Action proved to be a valuable platform to raise the profile of young people in humanitarian action at global level. This

requires more proactive advocacy at the country level, and will be prioritized by the GRI under technical and advisory support to countries in 2019.

Performance was relatively weak for outcome 3, for both global and regional interventions. The delay in developing a global guidance note on engaging men and boys to end gender-based violence and the absence of the regional gender advisor in East and Southern Africa regional office affected this performance. Finalization of the global guidance is planned for 2019 and the recruitment process of the advisor was completed at the end of 2018. Global and regional interventions each spent approximately 13 per cent of regular financial resources on achieving this outcome.

With respect to outcome 4, only 12 per cent of all regional interventions targets (four indicators) achieved less than 60 per cent progress. The unfinished status of the methodology for quality assessment of civil registration systems affected achievement of these outcomes. More time was required to complete the planning process of geo-referenced infrastructure of demographic data.

The lack of tools for improved utilization of population data to inform national planning before countries are supported with their application also impacted the performance of outcome 4. Finalising the development of tools and methodology are a priority for global and regional interventions in 2019 within the context of promoting international standards and tools.

Regional interventions made steady progress on performance in organizational effectiveness and efficiency except for attaining the target for country programme documents that were rated as satisfactory, and achieving the planned target for resource mobilization and reaching the planned number of countries contributing to core resources in 2018. As a result, improvements to country programme documents were introduced under the overall monitoring and oversight of the regional interventions prior to submission for approval by the UNFPA Executive Committee.

In spite of a strong performance, the global and regional interventions in their reporting identified the need for a more tailored country context approach and growing resistance to some elements of the ICPD agenda as common challenges across all outcomes.

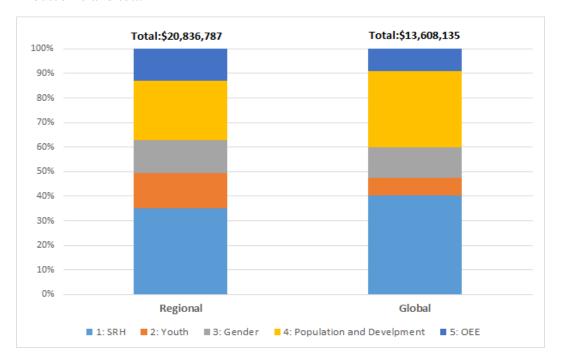
As response to overcome these challenges, they highlighted the need for continued efforts to expand the civic space for partnership and continue focusing on evidence-based advocacy. Efforts to enhance skills in partnering with faith-based organizations and exchanging experiences and knowledge about best practices in building conducive environments for the ICPD PoA were also identified as crucial.

The financial analysis of global interventions reveals that the total expenditure for the reporting year was \$13,608,135 for global interventions and \$20,836,787 for regional interventions (see chart 2).

The expenses incurred by the global and regional interventions mirror the focus on universal access to sexual and reproductive health, with evidence-based prioritization and programming. Most resources

were spent on strategic plan outcomes 1 and 4, in line with the Strategic Plan, 2018-2021. With regard to operational effectiveness and efficiency, regional interventions spent slightly more than global interventions, 13 per cent and 9 per cent respectively.

Chart 2. 2018 Actual expenses of global and regional interventions in US dollars, by strategic plan outcome and total



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