Country Programme Performance Summary

This format is mandatory to be submitted to the Executive Board (EB) alongside the Country Programme Documents (CPDs). The summary format should factor in all evaluative evidence, such as the latest country programme evaluation, and will be posted together with other mandatory documents for access by the Executive Board.

A. Country Information		
Country name: Mali		
Category per decision :	Current programme period: 2015-2019	Cycle of assistance: 7

B. Country Programme Outputs Achievement (please complete for all your CP outputs)

Output 1: Increased access to information and integrated sexual reproductive health and HIV services for adolescents and youth, particularly in crisis-affected areas

Indicators	Baseline	Target	End-line data
Number of targeted health centres that have integrated sexual & reproductive health and HIV services tailored to youth	20	60	33
Number of sex workers organizations engaged in implementation of HIV prevention programmes for adolescent girls	0	2	2

Key Achievements (input also from the last CP evaluation)

Increased priorities on adolescents, especially on very young adolescent girls, in national development policies and programmes have been realized throw some national . In 2018, a Youth Policy that supports marginalized girls initiatives has been developed. In addition Youth-friendly spaces have been put in place in some areas that provide some form of life skills education and trainings.

Country Office has established a collaborative framework with two NGOs, DANAYA SO and SOUTOURA, targeting sex workers, in the context of HIV prevention in key populations, according to a concordant analysis of annual activity reports and interviews with stakeholders. In this Indeed, these NGOs with the support of UNFPA have set up 24 cells and a committee in bars and closed houses in Bamako, Mopti and Gao. Several information, awareness-raising and training actions have been conducted. 844 educational talk sessions were held with sex workers and their customers. Sex workers had access to free medical consultations. Perr reviewers benefited from training sessions on IEC animation techniques on the transmission of HIV / AIDS and STIs. In addition, 30 women team members received training on human rights

Output 2: Strengthened national capacity for better access to high-quality family planning services

Indicators	Baseline	Target	End-line data
Number of strong advocates in favour of use of reproductive health and family planning services for adolescent girls	0	100	16
Percentage of targeted service delivery points without stockouts in the last three months	13%	90%	7,2%
Percentage of health facilities providing at least five modern contraceptive methods	98%	100%	89.9%

Key Achievements (input also from the last CP evaluation)

In order to enhance advocacy on FP, the CO involved ardent advocates are religious, community and political leaders, who were sufficiently sensitized and trained with; engage on a voluntary basis in the field of their areas of competence (Village, Commune, National Assembly, etc.) to carry out information, awareness and advocacy activities for RH and FP.

Output 3: Increased access to quality maternal and neonatal health services, particularly in areas affected by the crisis.

Indicators	Baseline	Target	End-line data
Number of health facilities offering emergency obstetric and neonatal care services	81	120	55
Number of referral health facilities equipped with reproductive health kits	20	30	40
Number of obstetric fistula cases reported, treated and cured	645	1600	1090

Key Achievements (input also from the last CP evaluation)

UNFPA supports all regions of Mali in addition to the district of Bamako in through the DNS. Activity planning is done each year with the development of a global ATP.

As a result, the 7th program trained and provided health providers with health structures in RH Kits and EmONC equipment, thus raising their plateau level.

This has helped to boost the performance of Indicator 2. By way of illustration, in 2015.

Two district's hospital (Douentza and Diré) have been equipped with medical ambulances, the regional hospitals in Timbuktu and Gao, from RH Emergency Kits. In 2016, the capacities of 36 health structures were reinforced for the supply of EmONC and 7 new CSREFs equipped with Emergency RH Kits. In 2017, 23 centers reference health centers in the northern regions and 17 in the center were equipped with RH emergency kits.

As a result, the number of referral health facilities equipped with RH emergency kits reaches 40 in 2017, far exceeding the expected target at the end of the program (30). Other achievements are also consider, particularly in terms of capacity building of midwives in schools of health training. As such, 5 midwifery training centers of the INFSS were supported in RH, the skills of the supervisors strengthened in terms of GBV and insertion of PPIUD, 34 midwifes trainees were trained in the insertion of the post-perfume IUD, 21 midwives trained in clinical management of rape, now enabling them to take care of women victims of VBG including rape. An accreditation plan for the midwifery training program has been developed with the support of UNFPA and allows all the partners of the INFSS intervening in the SRH to have a readability on what has been and what remains to be done. The process of accreditation of the national school of midwifery is in the phase of consolidation of equipment and infrastructures.

Output 4: Increased national capacity to provide sexual reproductive health services in humanitarian settings

Indicators	Baseline	Target	End-line
			data
Number of humanitarian actors with capacity on minimum initial service package resilience programmes	25,864	30,000	26963
Number of humanitarian response and preparedness plans that have elements for addressing sexual and reproductive health needs of women, adolescents and youth, including services for survivors of sexual violence in crises	10	15	18

Indicators	Baseline	Target	End-line data
Number of youth and civil society organizations supported to empower youth and adolescent girls	5	20	18
Number of young people having benefited from comprehensive sexuality education for youth in school and out of school	30 000	100 000	185000
Existence of participatory platforms that advocate for increased investment in marginalized adolescents and youths, within development and health policies and programmes	0	2	2

Key Achievements

The 7th Program has been able to build the capacity of health providers through training and offered integrated S RH / VBG services through mobile teams. In 2015, 861 players have thus been reinforced on humanitarian issues including 161 in DMU / VBGIMS and use of RH kits and 700 in GBV / HIV and use of RH emergency kits. In 2016, the capacities of 150 actors humanitarian organizations have been strengthened. In 2017, the training plan for DMU / RH was updated and 154 providers have been trained. The latter are now active in the clinical management of VBG in all crisis-affected areas, benefiting 1847 most displaced women vulnerable dignity kits.

The GBV / IMS provides reliable and secure data on GBV. Four new plans of preparedness and humanitarian interventions have been developed: (i) the national crisis response plan humanitarian work in the northern regions; (ii) the UNS contingency plan for the northern regions; (iii) the project to strengthen RH and epidemiological surveillance in the regions concerned by the crisis; (iv) the GBV project in the affected areas). In 2016, 15 humanitarian responses and contingency plans addressed the needs of women, adolescents and young people. SRH and sexual violence. National capacities have thus been strengthened for the preparedness and response to humanitarian emergencies. Emergency kits have been prepositioned in all the northern and central regions.

Output 6: Increased capacity of young people and youth organizations to design and implement resilience programmes

Indicators	Baseline	Target	End-line data
Number of national laws related to gender-based violence harmonized with international texts and instruments	0	2	1
Number of communities reporting the permanent abandonment of female genital mutilation	1,042	5,000	1228
Number of gender-based violence survivors accessing full service support	5,000	25,000	15152

Existence of comprehensive report on all aspects of gender and	0	1	1
rights in humanitarian settings			

Key Achievements (input also from the last CP evaluation)

A platform regrouping 10 associations and youth organizations has been set up to make it easier to take into account needs and aspirations of young people in national policies and programs and an action plan for advocacy and resource mobilization for SRH for young people and adolescent empowerment and young people was developed. At least 60,000 young people also had access to health information in and out of school through peer-led IEC / BCC sessions educators, facilitators and counselors. In 2016, a regional platform of youth associations has been set up in the Kayes region to promote advocacy activities in favor of increased investment for marginalized adolescents and young people, including development and health programs and strategies. This platform, like the one set up national level, has an action plan. It brings together a total of 16 youth organizations and the civil society. In addition, the training program led by the NGO AGIR trained in 2016, 44 girls in computer maintenance at training centers in Bamako and Ségou. In

moreover, 3500 adolescents and young people aged 15-24 were affected by peer education activities. In 2017, 45 girls were trained for their empowerment in computer maintenance and skills the PF and the SRH for young people in training centers in Bamako, Segou and Mopti, 20 schools benefited from an E-learning kit enabling their students, numbering 15,000, to take education classes complete sexuality. With the support of UNFPA, the Government of Mali has approved a road map for the capture of the demographic dividend through massive investment in youth in Mali.

Interviews with stakeholders reveal that motivation and follow-up of the activities of the peer educators in some regions remain a problem due to the frequent breakdown of FP inputs (they are entitled to a percentage on the sale of FP products) and lack of means of travel. For the staff of the centers, their contractual situation remains precarious and not very motivating. It should be noted also difficulties related to the placement of girls trained in internships or employment and the cases of abandonment some learners are deplored as part of the training sessions.

Output 7: Strengthened national capacity to produce and disseminate development and humanitarian programming			
Indicators	Baseline	Target	End-line data
Number of reports of preparatory phases of 2019 population and houses census	2	8	6
Number of study and, or analysis of statistical data on population dynamics, reproductive health, HIV and gender, humanitarian issues produced and disseminated with the support of UNFPA	0	25	14

Key Achievements (input also from the last CP evaluation)

NFPA support to the Regional Directorates of Plan, Statistics, Informatics, Planning through INSTAT and DNP contributed to the Strengthening of Statistics and Populations components within these structures. In 2015, according to the report activities of INSTAT the national statistical system had a team of 4 trainers in statistics (trained at ENSEA) who in turn trained 25 system agents in statistical analysis of based. A database on civil status has been set up at INSTAT. In 2016, INSTAT benefited the support of UNFPA for the validation of the statistical yearbook. In addition to the 12 structures already

beneficiaries of its support, UNFPA provided in 2016 a support to animation (training in statistics base) of the Statistics Training and Development Center created in 2015.

6 of the 8 preparatory documents for the RGPH5 have been prepared and made available, The census project was developed and validated in 2015. In 2017, two RGPH strategic documents was validated.

Output 8: Strengthened national capacity for harnessing demographic dividend and integrating population, sexual reproductive health and gender dimensions, especially in crisis and post-crisis recovery settings			
Indicators	Baseline	Target	End-line data

Percentage of municipalities that have benefited from the support from UNFPA to integrate population issues into development planning	25%;	80%	53%
Existence of functioning observatory on demographic dividend	0	1	1

Key Achievements (input also from the last CP evaluation)

CO interventions implemented in synergy, namely the integration of population issues into the planning of the development and the demographic dividend. The National Population Policy (PNP) has been revised and adopted in 2017 by the Council of Ministers. It integrates demographic dividend issues for which a national roadmap has been developed under the leadership and technical support and UNFPA. In 2015, 30 Secretaries General representing local decision makers from 30 responsible for rural and urban communes in the Koulikoro region were trained in integration demographic variables, RH and Gender issues in development planning.

A population integration manual has been developed, validated and made available to central and municipal level decisionmakers. Three socio-demographic studies focused on education and girls' schooling were carried out, the reports made available to the education and training development planning. The process of setting up the dividend observatory is underway as part of the SWEDD regional project. Activities implemented relate to:

- The development of the national road map for the exploitation of the demographic dividend;

- Advocacy and advocacy for national ownership of the dividend concept

demographic by religious, community and political leaders;

- The setting up of a framework of exchanges with the young people gathered around the National Council of the

Youth on demographic dividend issues under the leadership of the Ministry of

Youth and Civic Construction (MJCC);

- The setting up of an operational unit of the Demographic Dividend Observatory

consisting of 4 experts: a Coordinator, an Expert in Data Collection, an Expert in

Data Analysis and an Expert in Communication;

- Capacity building for the constitution of a pool of experts on Demographic Dividend: 15 national executives received training in the analysis of the demographic dividend by the National Transfer Account (NTA) method; 45 frame

C. National Progress on Strategic Plan Outcomes ¹	Start value	Year	End value	Year	Comments	
Outcome 1: Every woman, adolescent and youth everywhere, especially those furthest behind, has utilized integrated sexual and reproductive health services and exercised reproductive rights, free of coercion, discrimination and violence						
Number of adolescents who have utilized integrated sexual and reproductive health services	30000	2014	185000	2018		
Proportion of births attended by skilled health personnel	59%	2012	67%	2018		
Proportion of women of reproductive age (aged 15-49 years) who have their need for family planning satisfied with modern methods		2012	40%	2018		
Contraceptive prevalence rate (total)	9.9%	2012	16%	2018		
Unmet need for family planning (percentage of women of reproductive age, either married or in a union, who have an unmet need for family planning)	26%	2012	24%	2018		

¹ The format is aligned to the UNFPA Strategic Plan outcomes, 2018-2021.

Has the country no contraceptive stockouts in at least 60 per cent of service delivery points during the last three months	NO	2015	NO	2017	
Number of adapted and implemented protocols for family planning services in the country that meet human rights standards including freedom from discrimination, coercion and violence	1	2014	1	2018	
Has the country increased the national budget for sexual and reproductive health by at least 5 per cent?	NO	2015	NO	2018	

Summary of National Progress

<u>UNFPA's Contributions</u> *Please provide contributions to those outcomes only to which the CP contributed. Not all outcome areas are expected to be covered under UNFPA contributions.*

The country office has contributed to increase the quality of maternal and child health care through the strengthening of national capacities to improve service delivery, including the strengthening of the EmONC centers, the support of obstetric fistula and the purchase of reproductive health commodities.

The increase in contraceptive prevalence has been promoted by awareness campaigns and the establishment of a local national, regional partnership frameworks around FP and the strengthening of the supply chain for maternal health products and family planning.

Outcome 2: Every adolescent and youth, in particular adolescent girls, is empowered to have access to sexual and reproductive health and reproductive rights, in all contexts

Percentage of women and men 15–24 years old who correctly identify both ways of preventing the sexual transmission of HIV and reject major misconceptions about HIV transmission	60.1%	2012	62.9%	2018	
Has the countries engaged adolescents and youth, including marginalized adolescents and youth, in the formulation of national sexual and reproductive health policies	NO	2015	YES	2018	

Summary of National Progress

<u>UNFPA's Contributions</u> *Please provide contributions to those outcomes only to which the CP contributed. Not all outcome areas are expected to be covered under UNFPA contributions.*

UNFPA supported life skills development through safe spaces for young people in various parts of the country, targeted behavior change campaigns, setting up integrated services centers for young people and strengthening youth organizations. UNFPA worked also with young people networks to promote their rights and their access to services and in their involvement in the implementation of public policies such as The African Union Roadmap on Demographic Dividend.

Outcome 3: Gender equality, the empowerment of all we	omen and girls, a	nd reproduct	tive rights are advanced	in			
development and humanitarian settings							
Proportion of women aged 15-49 years who make their own informed decisions regarding sexual relations, contraceptive use and reproductive health care	15.3%	2012	2018	Mali carried out its sixth DHS in November 2018. The data are being processed and will be used to complete the analysis as soon as they are validated.			
Proportion of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner in the previous 12 months, by age and place of occurrence	15-19 years: 25,7 % 20-24 years: 24,6 % 25-29 years : 28,8 % 30-39 years: 24,6% 40-49 years : 18,9 %	2012	2018				
Proportion of girls and women aged 15-49 years who have undergone female genital mutilation/cutting by age	91%	2012	2018				

Summary of National Progress

The CO supported the capacity building of judicial (women and men) actors for the equitable application of women's rights and those with specific needs.

It has set up a data collection system on violence against women, which is now the main data on GBV in the country. The establishment of reception and holistic care centers in three regions has made it possible, beyond simple care, to

institutionalize the case tracking mechanism.

Advocacy with policymakers and communities has strengthened women's empowerment and decision-making power. As a result, the proportion of women in public service positions rose from 14% in 2015 to 18% in 2017.

Outcome 4: Everyone, everywhere, is counted, and accounted for, in the pursuit of sustainable development

Has the country conducted at least one population and housing census during the last 10 years?	Yes	2009	Yes	2018	The next census is in preparation. Enumeration phase is scheduled for November 2020
birth registration rate	87% %	2015	90%	2017	
Has the country a national urban policy or regional development plan that responds to population dynamics?	Yes	2015	Yes	2018	

Summary of National Progress

UNFPA supported the revision of the National Population Policy which now incorporates the concept of demographic dividend. Otherwise, the integration of the demographic variable in then national development plans was another pillar of capacity building for government structures and resulted in the strengthening of the institutional mechanism which reinforces the anchoring of population issues (strengthening of the Ministry in charge of the population and creation of the Demographic Dividend Observatory) Support for the preparation of the Fifth Census mobilized more than US \$ 10 million as well as mobilization of international expertise for census purposes.

D. Country Programme Resources							
SP Outcome Choose only those relevant to your CP	(Planned	Resource and Final diture)	Others (Planned and Final Expenditure)		Total (Planned and Final Expenditure)		
Increased availability and use of integrated sexual and reproductive health services	10.7	4.73	7.0	12.10	17.7	16.84	
Youth policies and programmes, and increased availability of comprehensive sexuality education	1.5	0.84	4.0	0.12	5.5	0.95	
Advanced gender equality, women's and girls' empowerment, and							
reproductive rights Strengthened national policies and international development agendas through integration of evidence-based analysis on population dynamics	2.1	1.78 3.02	3.0	5.09	8.8	6.87	
Programme coordination and assistance	1.3	1.03		-	1.3	1.0	
Total	19.4	11.42	19.0	18.71	38.4	30.12	