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United Nations Population Fund

Country programme document for the Lao People's Democratic Republic

Proposed indicative UNFPA assistance:	$19.4 million: $5.4 million from regular resources and $14 million through co-financing modalities or other resources
Programme period:	Five years (2027-2031)
Cycle of assistance:	Eight
Category:	Tier I
Alignment with the UNSDCF Cycle	United Nations Sustainable Development Cooperation Framework, 2027-2031

Note: The present document was processed in its entirety by UNFPA

I. Programme rationale

1. The Lao People's Democratic Republic (Lao PDR), with an estimated population of approximately 7.8 million, is undergoing a rapid demographic transition, which presents a time-bound opportunity to harness a demographic dividend. The total fertility rate has declined from 6.3 births per woman in the 1980s to 2.4 in 2024, although significant geographic variation persists. Fertility is already below replacement level in Vientiane Capital, while it remains above 3.0 in six provinces. Life expectancy has increased to 70.2 years, reaching 72 years for women and 67 years for men. Adolescents and youth account for 58.3 per cent of the population. Together, these demographic shifts have resulted in a historically high share of the working-age population (aged 15-64 years), which now accounts for 65.5 per cent of the total population. Population projections indicate that Lao PDR's demographic window spans 1983-2044, of which more than 65 per cent has already elapsed. The adolescent and youth cohort is projected to begin shrinking after 2030, alongside a rapid acceleration of population ageing. Empowering adolescents and youth is, therefore, central to realizing the demographic dividend before this window closes, as over 80,000 young people enter the labour market each year and youth out-migration continues, with more than 415,000 Lao nationals working abroad.

2. Lao PDR's Human Development Index of 0.617 (147th globally) places the country in the medium human development category, and it declines by around 25 per cent when adjusted for inequality, indicating uneven access to education, health and adequate living standards. According to the 2024/2025 Lao Expenditure and Consumption Survey, an estimated 17.9 per cent of the population experiences multidimensional poverty. While the women's labour force participation is relatively high (61.4 per cent), gaps in education and skills result in 80 per cent of women being engaged in informal employment. Lao PDR's socio-cultural diversity, with more than 50 ethnic groups, influences development outcomes, with social norms, gender roles, geographic isolation, language and disability barriers affecting access to health, education and protection services.

3. While progress in human development has continued, structural disparities persist across geography, income, gender and ethnicity, shaped in part by constrained public investment. Combined government expenditure on health and education declined to approximately 2.3 per cent of Gross Domestic Product (GDP) in 2024, with education at about 1.2 per cent and health at around 1 per cent of GDP, limiting service quality, coverage and equity. At the same time, Lao PDR is highly climate-vulnerable, ranking 22nd on the Global Climate Risk Index. Floods and droughts threaten livelihoods, infrastructure and long-term resilience, particularly given reliance on hydropower and agriculture. This situation is further compounded by high public debt, inflation and the country's impending graduation from least developed country (LDC) status in 2026, which may affect access to external financing.

4. Adapting to demographic change requires addressing structural constraints through economic diversification and sustainable, nationally owned public and private financing, as articulated in the Vientiane Declaration III (2026-2035), alongside sustained investment in health, education, care and employment. The UNFPA foresight exercise shows that Lao PDR is at a critical turning point, with mobility, demographic changes, digital transformation, climate change and regional integration shaping the next 10-15 years, while today's policy decisions determine whether these trends drive inclusion or increase inequalities.

5. Maternal mortality has declined by almost 82 per cent, from 609 deaths per 100,000 live births in 2000 to 112 per 100,000 live births in 2023, placing the country on track to meet the Sustainable Development Goals (SDG) targets. However, disparities persist across geographic areas and socioeconomic groups, and in accessing essential services. While 71.6 per cent of women nationally receive at least four antenatal care visits, coverage declines to 49.4 per cent in rural areas without road access. Facility-based delivery reaches 78.2 per cent nationally but falls to 48.4 per cent among rural women without roads. Skilled birth attendance stands at 94.8 per cent in urban areas but is much lower in remote rural communities (47.2 per cent). Postnatal care also remains uneven, especially in underserved areas. These gaps reflect challenges in 'last-mile' service delivery, the quality of care, workforce deployment and referral systems. Rising HIV prevalence rates, noncommunicable diseases and localized outbreaks further highlight the need for preventive health system reform.

6. Nationally, unmet need for family planning among married women stands at 14.2 per cent. Among unmarried adolescent girls aged 15-19 years, unmet need reaches 78.7 per cent, reflecting significant stigma, limited confidentiality and gaps in comprehensive sexuality education (CSE) and youth-friendly services. The modern contraceptive prevalence rate has stagnated at around 50.4 per cent, with the limited method choice dominated by short-acting methods. Decision-making authority over contraception remains low. Only 17.6 per cent of married women report making decisions independently, declining to 8.7 per cent in rural areas without road access. As a result,

adolescent girls face higher risks of unintended pregnancy, school dropout and long-term disadvantages in education and economic participation.

7. The Government has scaled up implementation of its policy framework on gender equality and violence against women through the Gender Equality Law (2019), the National Action Plan for Gender Equality (2021-2025), the National Action Plan on Violence against Women and Children, and the Vision 2030 Strategy. These efforts have been recognized by the Committee on the Elimination of Discrimination against Women (CEDAW). Gender-based violence (GBV) remains widespread, with nearly 30 per cent of women reporting that they have experienced violence. Although acceptance of intimate partner violence among women of reproductive age declined markedly (from 58.2 per cent in 2012 to 12.5 per cent in 2023), negative social norms and gender stereotypes continue to influence behaviour. As highlighted in the UNFPA trends and foresight analysis, rapid digitalization is also creating new risks, including technology-facilitated GBV, such as online harassment, abuse and digital surveillance. Overall, 43.2 per cent of survivors never disclose the violence, and only about one in five report cases to authorities, indicating a continued reliance on informal coping mechanisms. Addressing these challenges will require strengthened implementation through the forthcoming National Action Plans on Gender Equality and on Violence Against Women for 2026-2030, as well as the Women's Development Plan (2026-2030).

8. Child marriage remains a major concern, with one of the highest rates in Southeast Asia. As of 2023, 30.5 per cent of women aged 20-24 years were married before the age of 18. Prevalence is significantly higher in rural areas (36 per cent) than in urban areas (17 per cent), and especially among the poorest households, where it reaches 41 per cent. Rates are particularly high among some communities, including the Hmong community, where 52 per cent of women aged 15-19 years are currently married or in a union. These patterns reflect persistent social norms and geographic and socioeconomic disparities that reinforce cycles of poverty and restrict girls' access to education and economic opportunities.

9. Adolescent pregnancy compounds these challenges and is closely linked to early marriage, limited agency and restricted access to age-appropriate sexual and reproductive health information and services, including in-school and out-of-school CSE. The adolescent birth rate increased from 83 births per 1,000 girls (aged 15-19 years) in 2017 to 89 in 2023.

10. Despite progress in population data generation, including investments in census and administrative systems, the availability and use of timely demographic data for policy formulation and budgeting remain areas for continued strengthening. A Statistical Performance Index of 60.9 indicates scope to further enhance analytical capacity and data use, while administrative systems, including civil registration and vital statistics, require sustained attention, particularly as birth registration rates declined from 73 per cent in 2017 to 65 per cent in 2023.

11. Digital transformation is a growing government priority with e-government services, digital identification and an increasing focus on artificial intelligence and tele-health offering opportunities to improve governance, service delivery and data systems. At the same time, gaps in digital access, skills and institutional readiness, alongside a rising risk of technology-facilitated GBV and the still-evolving legal and ethical frameworks for data protection and privacy, present inclusion risks.

12. The previous country programme established a strong foundation for accelerated action. UNFPA supported major policy and system-level achievements, including the Family Planning 2030 commitments, the Midwifery Action Plan 2025-2035, the accreditation of midwifery colleges, integration of CSE into national curricula, expansion of adolescent-friendly and youth-friendly services, standardized GBV responses, and the successful delivery of the first digital Population and Housing Census in 2025. These achievements demonstrate the comparative advantage of UNFPA in linking rights-based programming with population data, evidence and policy support, while playing a key role within the United Nations country team (UNCT) through its leadership in gender equality and adolescent and youth issues, and contributions to joint planning, monitoring and efficiency initiatives.

13. At the same time, recommendations and lessons from country programme reviews point to persistent challenges that the new country programme must address. These include limited domestic financing, uneven subnational implementation capacity, continued reliance on external support, and uneven funding across programme areas, particularly for youth empowerment. Strengthening the prevention of GBV and harmful practices, moving beyond pilots to scalable systems, and integrating sexual and reproductive health (SRH), gender equality, adolescents and youth, and population dynamics remain critical.

14. The new country programme will support Lao PDR in harnessing its demographic opportunities with equity, dignity and resilience by advancing universal access to sexual and reproductive health, eliminating preventable maternal deaths, preventing GBV and harmful practices, and strengthening population data and foresight for inclusive

policymaking. Building on its catalytic role in promoting the use of population data in national planning and the United Nations Sustainable Development Cooperation Framework (UNSDCF), 2027-2031, UNFPA will continue working closely with the UNCT to advance coherent policy dialogue and integrated responses aligned with Government priorities and the 2030 Agenda for Sustainable Development, including joint initiatives and partnerships that mobilize resources and strengthen the collective impact.

II. Programme priorities and partnerships

15. The country programme vision is to support Lao PDR in leveraging its demographic transition to accelerate progress towards the three transformative results of UNFPA (zero preventable maternal deaths, unmet need for family planning, and GBV and harmful practices), while strengthening adaptation to demographic change. To realize this vision, the programme will address persistent geographic, socio-economic and ethnic disparities in access to high-quality SRH services, transforming discriminatory gender and social norms, and strengthening the agency, capabilities and opportunities of women, adolescents and youth, particularly in ethnic communities and among persons with disabilities, to leave no one behind and build demographic resilience.

16. The unique positioning of UNFPA lies with demographic intelligence and targeted programmes delivered at the intersection of sexual and reproductive health and reproductive rights (SRHRR), gender equality, GBV and harmful practices, and youth empowerment, to drive systematic transformation. UNFPA will act as a trusted thought leader and technical partner in Lao PDR, supporting population data, evidence-informed policy dialogue, innovation and foresight. By prioritizing those furthest left behind, including persons with disabilities, marginalized groups and ethnic communities, and by strengthening national systems and diversifying partnerships and financing, the programme will shift from individual interventions towards integrated, people-centred and community-led approaches that address root causes and generate a sustainable, multisectoral impact.

17. Aligned with the International Conference on Population and Development (ICPD) Programme of Action, the 2030 Agenda, the UNFPA Strategic Plan, 2026-2029, and the UNSDCF, 2027-2031, the country programme will prioritize those furthest left behind and ensure demographic change becomes a driver of sustainable development. The programme responds directly to national priorities on human capital development, gender equality and adaptation to demographic change. The programme draws on the 10th National Socio-Economic Development Plan (NSEDP) 2026-2030 and key sectoral frameworks, including the National Population and Development Policy (NPDP) 2019-2030, the Demographic Dividend Roadmap (DDR) 2025-2030, the National Action Plan on the Elimination of Violence against Women 2026-2030, the Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH) Strategy 2026-2030, and the Youth and Adolescent Development Strategy (2021-2030). The programme is guided by core human rights commitments, including CEDAW and the recommendations of the Universal Periodic Review and Convention on the Rights of Persons with Disabilities.

18. The programme is designed for a context of constrained fiscal space, uneven development outcomes, increasing climate and disaster risk, and rapid socio-demographic change. It prioritizes integrated, people-centred and systems-strengthening interventions that strengthen implementation and institutional capacity for sustainable impact. The programme will shift from stand-alone initiatives towards scalable approaches integrated into national and subnational systems, with stronger monitoring, learning and accountability, while ensuring that interventions reach persons with disabilities, marginalized groups and ethnic communities.

19. Drawing on previous country programme reviews, the UNSDCF evaluation, and centralized and thematic evaluations, the programme adopts an integrated, foresight-driven approach anchored the demographic dividend, diversity, disparities and digitalization. It will strengthen the quality, integration and equity of sexual and reproductive health and GBV services across the life course for women, adolescents and youth, while promoting community-based prevention of GBV and harmful practices, including child, early and forced marriage, through social norms change, policy advocacy and institutional strengthening. Leveraging digital transformation and integrated data systems, the programme will address coordination and service delivery constraints, expand regional engagement and shift towards sustainable financing approaches, including public-private partnerships and blended finance, to enhance scale and resilience.

20. The programme will strengthen national and subnational capacities to generate, integrate and use data (on population, demographics, sexual and reproductive health, youth and GBV) to inform policy, planning and investment decisions. This includes strengthening data analysis, advancing civil registration and vital statistics and inter-operable administrative data systems, institutionalizing demographic, economic and foresight analyses, population projections and national transfer accounts.

21. The country programme will balance upstream policy and systems support with catalytic subnational interventions in selected priority provinces, based on disparities in outcomes, vulnerability to climate and socio-economic shocks, continuity of past support and opportunities for scale-up through national systems. Subnational interventions will be integrated into provincial planning and budgeting processes to support sustainability and domestic financing, while applying a risk-informed approach and strengthening institutional and community resilience.

22. The programme will be implemented through a human rights-based and gender-transformative approach, guided by 'leaving no one behind' and 'reaching those furthest behind first'. Prioritization will be informed by disaggregated data and vulnerability analysis, with attention to intersectionality, including geography, ethnicity, disability, age, marital status and poverty. Data, analysis and evidence generation will support monitoring, adaptive management and accountability across all areas of work.

23. Partnerships will be central to programme delivery. UNFPA will work with government institutions at national and subnational levels, civil society organizations, women-led and youth-led organizations, academia, development partners, international financial institutions and the private sector to support policy implementation, service delivery, social norms transformation and sustainable financing. These partnerships will be purpose-driven and oriented towards scale, sustainability and long-term impact, including through expanded public-private collaboration. Regional cooperation, including with the Association of Southeast Asian Nations and through South-South and triangular cooperation (SSTC), will facilitate the exchange of expertise, policy solutions, resource mobilization opportunities and innovations in areas such as population data, digital health, youth mobility, maternal health, GBV and climate resilience, reflecting Lao PDR's growing regional interconnectedness.

24. UNFPA will work closely with United Nations agencies through joint programming, national and subnational coordination platforms and UNSDCF outcome groups to reinforce synergies towards the achievement of the SDGs and the ICPD Programme of Action. Joint programmes and initiatives with UNDP, UNICEF, WHO, ILO, UNESCO and IOM, among others, will accelerate progress towards the three transformative results, while leveraging the convening role and technical leadership of UNFPA in SRHRR, GBV and population data.

25. The country programme outputs contribute to the relevant UNSDCF outcomes and are designed to be mutually reinforcing, with data, analysis and evidence generation underpinning implementation, monitoring and accountability.

A. Output 1. Women and young people in rural, ethnic, climate-vulnerable and other underserved communities of priority provinces, have equitable access to high-quality, integrated, rights-based sexual and reproductive health and multisectoral gender-based violence services and comprehensive sexuality education

26. This output contributes to the UNFPA transformative results on ending preventable maternal deaths, reducing unmet need for family planning and ending GBV and harmful practices, as well as to the UNSDCF outcome on people's well-being. It supports national priorities to strengthen human capital development to realize the demographic dividend, reduce inequalities in access to SRH services and expand multisectoral services for GBV survivors that are resilient to external shocks and risks.

27. This output will be achieved by: (a) strengthening implementation, coordination and accountability of SRHRR policies, including sustainable financing, and their implementation in humanitarian contexts; (b) improving the quality and integration of family-planning services across reproductive, maternal, newborn, child and adolescent health points of care, including expanded method mix and long-acting reversible contraception, while strengthening supply systems and increasing domestic budget allocation for SRH commodities, including in humanitarian contexts; (c) expanding adolescent and youth-friendly services and outreach with private-sector partners for underserved groups, including persons with disabilities and hard-to-reach communities, while strengthening premarital counselling and rights-based information; (d) strengthening midwifery education, regulation, mentorship and deployment to underserved areas, aligned with international standards; (e) enhancing emergency obstetric and newborn care and intrapartum, postpartum and referral systems, including in humanitarian contexts; (f) improving the utilization of routine data and digital health functionality, including maternal and perinatal death surveillance for quality improvement, resource mobilization and equity monitoring; (g) strengthening implementation and monitoring of national laws, policies and accountability mechanisms on GBV and child, early and forced marriage, including advocacy for increased domestic financing; (h) integrating technology-facilitated GBV into legal and policy frameworks and strengthening digital safeguards; (i) strengthening survivor-centred GBV response systems through multisectoral case management,

standardized referral pathways and service provider capacity strengthening across health, social welfare and justice sectors, including on disability inclusion, gender diversity and mental health and psychosocial support, in development and humanitarian contexts; (j) strengthening referral pathways between adolescent and youth-friendly services, GBV services and schools, while leveraging digital platforms and confidential helplines to expand young people's access to SRH and GBV information and referrals; and (k) strengthening the capacity of education institutions to deliver high-quality CSE through enhanced teacher training, curriculum quality assurance and strengthened institutional systems.

B. Output 2. The capacities of government and non-government institutions and communities in priority provinces are strengthened to promote the agency of young people and transform social and gender norms and stereotypes that discriminate against women and girls and that perpetuate gender-based violence, child, early and forced marriage, and adolescent pregnancy

28. This output contributes to the UNFPA transformative result on eliminating GBV and harmful practices and to the UNSDCF outcomes on people's well-being, governance and institutions by strengthening institutional and community capacities in priority provinces to promote the agency of young people and transform discriminatory social and gender norms that perpetuate GBV, child, early and forced marriage and adolescent pregnancy, including emerging risks, such as technology-facilitated GBV.

29. This output will be achieved by: (a) strengthening community engagement through gender-transformative approaches, promoting positive masculinities and youth-led initiatives that engage boys and men in the prevention of GBV and child, early and forced marriage; (b) implementing and scaling up community-based action models informed by evidence generated through social norms research; (c) establishing community dialogue platforms engaging adolescents, parents, leaders, teachers and local authorities to challenge harmful gender norms and prevent GBV and child, early and forced marriage; (d) strengthening parliamentary engagement in preventing GBV, including technology-facilitated GBV, and child, early and forced marriage; (e) building partnerships with the private sector and civil society to empower women and girls, enhance awareness, support access to SRH and GBV services, and prevent technology-facilitated GBV and child, early and forced marriage; (f) promoting digital safety and safeguards to prevent technology-facilitated GBV through digital literacy, community engagement and online awareness; (g) implementing the Roadmap for CSE for Out-of-School Adolescents and Youth (2025-2030) as a platform for youth agency and social norms change; and (h) investing in the agency, life skills and leadership of adolescents and youth.

C. Output 3. The capacities of national and subnational government and non-government institutions are strengthened to formulate, finance and implement inclusive, evidence-based policies, accelerate investment in the demographic dividend and strengthen its linkages to the transformative results

30. This output contributes to strengthening evidence-based approaches to SRHRR and GBV prevention and response and to the UNFPA Strategic Plan outcome 4 on adaptation to demographic change, as well as the UNSDCF outcomes on people's well-being, governance and institutions, by enhancing institutional capacities to translate demographic trends and population data into inclusive policies, financing decisions and coordinated action, as well as building partnerships with the private sector.

31. This output will be achieved by: (a) strengthening the national demographic intelligence and data ecosystem by improving inter-operable administrative data systems across sectors, including health, education, social protection, GBV and civil registration; (b) strengthening civil registration and vital statistics and their use for planning, service targeting and accountability; (c) enhancing census analysis, thematic reporting and data integration to generate disaggregated and rights-based population data that make vulnerable groups visible in decision-making processes; (d) institutionalizing demographic, economic, foresight and vulnerability analysis, population projections and analysis of the demographic dividend, transition and ageing; (e) establishing National Transfer Accounts and related socio-economic and demographic analyses; (f) developing costed policy scenarios to inform gender-responsive, life-cycle-based policies, investment cases, budget prioritization and financing dialogues; (g) strengthening governance, multisectoral coordination and accountability for population and development planning and resource allocation, at national and subnational levels; (h) strengthening monitoring and reporting on implementation of the NPDP (2019-

2030) and the DDR (2025-2030); and (i) strengthening innovative partnerships with the private sector, including factories, the tourism industry and chambers of commerce, to implement the Noi Business Criteria[1] by improving life and vocational skills and employee well-being.

III. Programme and risk management

32. The eighth country programme will be implemented in close coordination and partnership with the Ministry of Finance and the Ministry of Foreign Affairs, and in collaboration with relevant line ministries and national and subnational institutions responsible for health, education, labour, social protection, gender equality, youth, digital transformation, governance and population statistics. The programme will advance national ownership and accountability through upstream policy engagement and institutional and systems capacity strengthening at the national level, complemented by geographically focused engagement in priority provinces and districts where demographic trends, socio-economic disparities, climate exposure and service gaps are most pronounced.

33. UNFPA will actively contribute to coordination mechanisms under the UNSDCF, including thematic and results groups, while exercising leadership and coordination roles to advance collective action on SRHRR, gender equality, GBV prevention and response, youth empowerment and population data for development.

34. Implementing partners will be selected based on strategic relevance, comparative advantages, institutional capacity and their ability to operate effectively in climate-, mobility- and risk-affected contexts. As a long-standing and trusted partner in Lao PDR since 1976, UNFPA will tailor partnership arrangements to delivery needs, supporting scale, sustainability and national ownership, by strengthening partnership and resource mobilization through joint programming, public–private and International Financing Institutions partnership, and SSTC. Building on evidence-based investment cases and costing, UNFPA will leverage partnerships to mobilize additional resources through diversified, blended, and impact financing approaches. The programme will combine catalytic donor funding, government contributions, pooled UN mechanisms, and, where feasible, private-sector investment to expand scale, reduce risk, and deliver high-impact, shared results aligned with national priorities..

35. Programme implementation will take place in a context of multiple and interlinked risks, including: (a) constrained fiscal space linked to LDC graduation, high public debt and potential reductions in official development assistance, limiting financing for health, education and social protection sectors; (b) increasing climate- and disaster-related shocks, including floods and droughts, disrupting essential services; (c) operational and financial management risks arising from uneven institutional capacity across national and subnational levels and variable readiness of implementing partners; (d) labour-market constraints, including a limited pool of specialized programme expertise, affecting recruitment and staff continuity; (e) population mobility, including unplanned urbanization, labour migration and youth out-migration, and cross-border movement, reducing human capital needed to realize the demographic dividend and affecting continuity and equity of SRHRR and protection services for mobile populations; and (f) rapid digitalization outpacing regulatory and safeguarding capacities, increasing risks of exclusion, data misuse, misinformation and technology-facilitated GBV.

36. Risk management will be integrated throughout programme design and implementation and aligned with the UNFPA enterprise risk management framework. Mitigation measures will include: (a) diversification of financing sources and partnerships, including engagement with international financial institutions and the private sector; (b) adaptive and flexible programming modalities to respond to climate shocks, population mobility and service disruptions; (c) application of the harmonized approach to cash transfers to manage financial risks; (d) mitigation of labour market and staff continuity risks through proactive workforce planning for specialized roles, supported by optimization of core roles and targeted use of individual consultants, United Nations Volunteers, academic partnerships and regional advisory support, including SSTC; (e) regional and cross-border cooperation to address risks related to mobility, migration, sexually transmitted infections, HIV and digital risks; and (f) integration of SRHRR and GBV into digital systems, with safeguards for data protection and prevention of technology-facilitated GBV. Risks and mitigation measures will be reviewed regularly through annual planning, monitoring and performance reviews, in line with UNFPA policies and procedures, including social and environmental standards and protection from sexual exploitation and abuse.

[1] The Noi Business Criteria is an innovative private-sector initiative in Laos designed to promote human capital development, employee well-being, and gender equality. Developed by the Government and the UNFPA, the criteria encourage companies to invest in their young, female and marginalized workers to boost both corporate productivity and social progress.

37. The country office will maintain core technical capacity in SRHRR, GBV, adolescent and youth programming, and population dynamics, while strengthening cross-cutting competencies for upstream policy engagement through role realignment, surge and advisory support, and systematic skills transfer in policy analysis, demographic and economic modelling, sustainable financing, digital health and data governance, strategic communications, foresight and emergency preparedness. The office will also operate within the Mekong cluster arrangement with Cambodia and Viet Nam, leveraging shared regional expertise, technical backstopping and cross-border collaboration to strengthen programme delivery, policy engagement and knowledge exchange across the subregion.

38. This country programme document outlines UNFPA contributions to national results and serves as the primary unit of accountability to the Executive Board for results alignment and resources assigned to the programme at the country level. Accountabilities of managers at the country, regional and headquarters levels with respect to country programmes are defined in the UNFPA programme and operations policies and procedures and the internal control framework.

IV. Monitoring and evaluation

39. The country programme will apply an integrated monitoring, evaluation and learning framework grounded in the country programme theory of change and aligned with the UNFPA Strategic Plan, the UNSDCF and national monitoring and accountability systems, including the 10th National Socio-Economic Development Plan 2026-2030, the National Population and Development Policy 2019-2030 and the Demographic Dividend Roadmap 2025-2030. Monitoring will contribute to joint UNSDCF accountability through UN Info and other reporting mechanisms, ensuring coherence across global, regional and national results frameworks while reinforcing national ownership and alignment with country priorities.

40. Building on lessons learned from the country programme reviews and the UNSDCF evaluation, monitoring and evaluation will move beyond output tracking to assess causal linkages and intermediate changes, particularly how upstream policy engagement, institutional capacity development and financing reforms contribute to service coverage, quality, equity and sustainability at the subnational level. The programme will apply a systematic approach to piloting and testing innovative models, supported by clear theories of change, baseline data and defined success criteria. Targeted thematic evaluations and programme assessments will generate evidence on priority interventions, including CSE, adolescent and youth-friendly services and private-sector engagement models, to inform policy dialogue, programme improvement and scale-up through national systems.

41. Programme monitoring will be conducted jointly with national counterparts through existing coordination, reporting and review mechanisms. The National Population and Development Coordination Committee will serve as a strategic platform for reviewing progress, strengthening cross-sectoral coherence and promoting the systematic use of demographic evidence in policy formulation, planning and budgeting. UNFPA will support strengthening national data systems and analytical capacities for SDG monitoring and reporting, including contributions to the voluntary national review.

42. The programme will prioritize the use and integration of national data systems, including health management information systems, civil registration and vital statistics and other administrative data platforms. Where gaps persist, targeted analytical work, implementation research and evaluative studies will be undertaken. Data will be systematically disaggregated by sex, age, disability, geography and ethnicity to operationalize a ‘leave-no-one-behind’ approach and strengthen accountability for results at the subnational level.

43. Monitoring will adopt an integrated lens across results, partnerships, advocacy and resource mobilization, assessing progress not only against outputs and outcomes but also in the institutionalization and financing of system-level change, including implementation of policy reforms and alignment of domestic and external financing with priority interventions identified through national investment cases and demographic analyses.

44. Learning will be institutionalized through systematic review processes, synthesis of evaluative findings and targeted knowledge products for national and subnational decision makers. As co-chair of the United Nations Learning, Evaluation and Data Group, UNFPA will contribute to strengthening evaluation, learning and data use across the UNCT. A country programme evaluation will be conducted towards the end of the programme cycle to assess relevance, coherence, effectiveness, efficiency and sustainability, with particular attention to the UNFPA contribution to systemic change and national ownership.

RESULTS AND RESOURCES FRAMEWORK FOR LAO PEOPLE'S DEMOCRATIC REPUBLIC (2027-2031)

NATIONAL PRIORITY: 10th National Socio-Economic Development Plan. Outcome 2: High-quality human capital equipped to leverage new technology for development; 3: Improved people's well-being with balanced urban and rural development to drive gradual poverty eradication.				
UNSDCF OUTCOME: 1. By 2031, people in Lao PDR have greater capabilities, opportunities, skills and equitable access to services to lead safe, healthy and productive lives, participate more fully in public life, and better adapt to the impacts of socio-economic, technological and demographic change.				
RELATED UNFPA STRATEGIC PLAN OUTCOME(S): 1. By 2029, the reduction in the unmet need for family planning has accelerated; 2. By 2029, the reduction of preventable maternal deaths has accelerated. 3. By 2029, the reduction in gender-based violence and harmful practices has accelerated.				
UNSDCF outcome indicators, baselines, targets	**Country programme outputs**	**Output indicators, baselines and targets**	**Partner contributions**	**Indicative resources**
UNSDCF and UNFPA Strategic Plan Outcome indicators: ● Percentage of births attended by skilled health personnel *Baseline*: 80.4 (2025); *Target*: 90 (2031) ● Unmet need for family planning *Baseline*:14.2% (2023); *Target*: 10% (2031)	Output 1. Women and young people, especially in rural, ethnic, climate-vulnerable and other underserved communities of priority provinces, have equitable access to high-quality, integrated, rights-based sexual and reproductive health and multisectoral gender-based violence services and comprehensive sexuality education.	● Percentage of districts in two designated pilot provinces that have operationalized all seven elements of the midwifery acceleration plan *Baseline: 0 (2025); Target: 75% (2031)* ● Number of primary and tertiary health facilities in priority provinces providing integrated, high-quality SRH services *Baseline: 1 (2025); Target:7 (2031)* ● Number of national laws, policies and strategies addressing GBV (including technology-facilitated GBV) and harmful practices that include accountability frameworks and integrate the rights and needs of persons with disabilities and other furthest-behind groups *Baseline: 4 (2025); Target: 8 (2031)* ● Number of priority provinces with multisectoral GBV services provided, as per national minimum standards *Baseline: 6 (2025); Target: 7 (2031)* ● Percentage of public primary and secondary schools in six priority provinces that operationalized CSE aligned with United Nations International Technical Guidance on Sexuality Education *Baseline: 0 (2025); Target: 90% (2031)* ● Number of beneficiaries individuals accessing digital helplines who received counselling and were referred to SRH and GBV services, disaggregated by service type, age, sex and geographic location *Baseline: 63,550 women, adolescents and youth (2025); Target: 127,100 (2031)*	Ministry of Health; Ministry of Education and Sports; Lao Women's Union; Ministry of Finance; Lao Association of Midwives, WHO, UNICEF, the media; the private sector; women's and youth associations; local governments.	$ 6.8 million ($1.8 million fror regular resources and $5 million from other resources)
NATIONAL PRIORITY: 10th National Socio-Economic Development Plan. Outcome 2: High-quality human capital equipped to leverage new technology for development; 3: Improved people's well-being with balanced urban and rural development to drive gradual poverty eradication.				
UNSDCF OUTCOME: 1. By 2031, people in Lao PDR have greater capabilities, opportunities, skills and equitable access to services to lead safe, healthy and productive lives, participate more fully in public life, and better adapt to the impacts of socio-economic, technological and demographic change 2. By 2031, Lao PDR's institutions at all levels are more accountable and responsive to the needs of people, uphold human rights and the rule of law, promote participatory governance, gender, disability and digital inclusion and open civic space, and safeguard against risks of transnational crime.				
RELATED UNFPA STRATEGIC PLAN OUTCOME(S): 3. By 2029, the reduction in gender-based violence and harmful practices has accelerated.				

UNSDCF outcome indicators, baselines, targets	Country programme outputs	Output indicators, baselines and targets	Partner contributions	Indicative resources
UNSDCF and UNFPA Strategic Plan Outcome indicators: ● Percentage of women aged 15-49 years who make their own informed decisions regarding sexual relations, contraceptive use and reproductive health care *Baseline:13.1 (2023);* *Target: 20 (2031)* ● Percentage of women aged 20-24 years who were married or in a union before: (a) age 15; and (b) age 18 *Baseline: (a) 6.1%; (b) 30.5% (2023);* *Target: (a) 3%; (b) 15% (2031)* ● Percentage of priority UPR and treaty body recommendations supported by the UN that show documented progress in implementation *Baseline: 0 (2024);* *Target: 25 (2031)* ● Percentage 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 *Baseline: 30.3% (2014); Target: 25% (2031)*	Output 2. The capacities of government and non-government institutions and communities in priority provinces are strengthened to promote the agency of young people and transform social and gender norms and stereotypes that discriminate against women and girls and that perpetuate gender-based violence, child, early and forced marriage, and adolescent pregnancy	● Number of districts reaching boys and men in all diversity in programme areas, actively participating in sessions/dialogues that address harmful masculinities and gender norms *Baseline: 14 districts in 6 provinces (2025);* *Target: 35 districts in 7 provinces (2031)* ● Number of young people in priority provinces who were reached with out-of-school CSE and/or empowerment interventions, disaggregated by sex, age, location and disability status *Baseline: 845 (2025); Target: 14,945 (2031)* ● Percentage of women and men of reproductive age expressing acceptance of intimate partner violence, disaggregated by age, marital status, and location *Baseline: Women: 12.5% (2023); Men: 10.6% (2023) Target: Women and Men: 5 % decrease (2031)* ● Number of provinces implementing inclusive community-based and gender-transformative action models to address discriminatory gender and social norms that perpetuate GBV and harmful practices and create barriers in accessing services *Baseline: 0 (2025); Target: 7 (2031)*	National Commission for the Advancement of Women, Mother and Child; Ministry of Technology and Communication; National Assembly of Lao PDR; Lao Statistics Bureau; civil society and community-based organizations; women's and youth associations; the media; the private sector; local governments; UNICEF, UNESCO and ILO	$5.8 million ($1.8 million from regular resources and $4 million from other resources)
NATIONAL PRIORITY: 10th National Socio-Economic Development Plan. Outcome 6. Public governance and administration strengthened to ensure political stability, societal order, fairness and civic advancement				
UNSDCF OUTCOME: 1. By 2031, people in Lao PDR have greater capabilities, opportunities, skills and equitable access to services to lead safe, healthy and productive lives, participate more fully in public life, and better adapt to the impacts of socio-economic, technological and demographic change 2. By 2031, Lao PDR's institutions at all levels are more accountable and responsive to the needs of people, uphold human rights and the rule of law, promote participatory governance, gender, disability and digital inclusion and open civic space, and safeguard against risks of transnational crime.				
RELATED UNFPA STRATEGIC PLAN OUTCOME(S): 4. By 2029, adaptation to demographic change has strengthened the resilience of societies for current and future generations, while upholding individual rights and choices.				
UNSDCF outcome indicators, baselines, targets	**Country programme outputs**	**Output indicators, baselines and targets**	**Partner contributions**	**Indicative resources**

UNSDCF and UNFPA Strategic Plan Outcome indicators: ● Percentage of youth (aged 15-24 years) not in education, employment or training *Baseline:38.7% (2022); Target: 20% (2031)* ● Coverage of essential health services (universal health coverage (UHC) service coverage index), disaggregated by categories of service coverage *Baseline: 52% (2021); Target: 60% (2031)*	Output 3. The capacities of national and subnational government and non-government institutions are strengthened to formulate, finance and implement inclusive and evidence-based policies, accelerate investment on demographic dividend and their linkages to the transformative results.	● Number of census analytical reports produced and disseminated with data disaggregated by at least four 'Leaving No One Behind' factors, and policy briefs on SRH, GBV, youth, and climate vulnerability *Baseline: 0 (2025); Target: 12 (2031)* ● Availability of annual Vital Statistics Reports generated from integrated administrative data sources and census *Baseline: 0 (2025); Target:4 (2031)* ● Number of national and sectoral development strategies and plans that integrate demographic intelligence, population projections, foresight and risk/vulnerability analyses *Baseline: 2 (2025); Target:6 (2031)* ● Availability of a functional multi-sectoral committee for coordination and monitoring of implementation of population, and development policies, strategies and roadmaps *Baseline: No (2025); Target: Yes (2031)* ● Number of private sector entities adopting Noi-Friendly Business Criteria in support of youth and women's sexual and reproductive health and wellbeing *Baseline: 1 (2025); Target:16 (2031)* ● Number of evidence-based demographic and vulnerability analyses and investment cases developed and used in national policy and/or financing dialogues *Baseline: 2 (2025); Target:4 (2031)*	Ministry of Finance; Ministry of Technology and Communications; Ministry of Labour and Social Welfare; Macroeconomic Research Institute; Lao Academy of Social and Economic Sciences, National University of Laos; local governments; mass media; the private sector; civil society organizations; UNDP; UNICEF and IOM.	$6.8 million ($1.8 million from regular resources and $5 million from other resources)