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UNFPA – Country programmes and related matters

UNITED NATIONS POPULATION FUND

Final country programme document for Algeria

Proposed indicative UNFPA assistance: \$3.2 million: \$2.2 million from regular resources and \$1 million through co-financing modalities and/or other, including regular, resources

Programme period: Three years (2012-2014)

Cycle of assistance: Fifth

Category per decision 2007/42: B

Proposed indicative assistance by core programme area (in millions of \$):

	Regular resources	Other	Total
Reproductive health and rights	1.1	0.6	1.7
Population and development	0.4	0.3	0.7
Gender equality	0.5	0.1	0.6
Programme coordination and assistance	0.2	-	0.2
Total	2.2	1.0	3.2

I. Situation analysis

1. Algeria is a middle-income country. In 2010, the gross domestic product per capita was \$4,400 and the gross domestic product was \$158.4 billion. The economy is heavily dependent on oil exports.

2. While the two previous national development plans focused on strengthening basic infrastructure, the current plan, 2010-2014, emphasizes production and the social sector. It focuses on disparities, young people and the quality of public services. Although Algeria is likely to achieve the Millennium Development Goals by 2015, there is a need to address regional and socioeconomic disparities.

3. Algeria has a population of 35.6 million. The annual population growth rate is 1.96 per cent. The total fertility rate decreased from 4.4 children per woman in 1998 to 2.27 in 2009. Average life expectancy is 76 years, and 7.4 per cent of the population is over 60 years old. The demographic transition is well advanced, though there are regional disparities. Policy initiatives are needed to provide support to disadvantaged groups, especially young people and the aged.

4. The maternal mortality ratio declined from 117.4 maternal deaths per 100,000 live births in 1999 to 81.4 in 2009. The contraceptive prevalence rate for modern methods is 52 per cent. The prevalence of HIV is relatively low (0.1 per cent). Access to government health facilities is free. Approximately 85 per cent of Algerians are covered by health insurance.

5. The youth population is reaching its peak. Nearly 22 per cent of the population of Algeria is between the ages of 15 and 24. This age group accounts for 70 per cent of those younger than 25.

6. Young people are facing increased competition and diminished opportunities, thereby resulting in unemployment associated with delayed marriage and delayed family formation. Age at first marriage was 29 for women and 32 for men in 2009. During this period of young adulthood, risks for young people are increased by inadequate access to reproductive health information and services. The capacity and expertise of local and national structures to meet the needs of young people require additional attention and investment.

7. Although Algeria has made progress towards achieving gender equality regarding access to education and health services, challenges remain regarding women's participation in politics, entrepreneurship and employment. Halting gender-based violence is a priority. At least 10 per cent of married women suffer from gender-based violence on a regular basis.

8. The creation of the new Ministry of Planning and Statistics offers opportunities to develop evidence-based policies. This is expected to facilitate the integration of population and reproductive health data into the policy-formulation process.

II. Past cooperation and lessons learned

9. UNFPA has collaborated with Algeria since 1989. The budget of the fourth country programme, 2007-2011, was \$4.2 million. The programme emphasized: (a) contraceptive choice; (b) the early

detection of cervical cancer; (c) integrated services for young people; (d) demographic analyses; and (e) the promotion of gender equality.

10. Activities supported by the fourth country programme reflected changing needs in the area of reproductive health. The programme introduced testing for the human papilloma virus to complement cytology in the early detection of cervical cancer; promoted a wide range of family planning methods; and introduced the concept of reproductive health in textbooks.

11. Demographic analyses at the local level provided valuable information to support population policies, thereby strengthening the capacity of local population committees. However, further detailed analyses are needed on subnational disparities. These analyses should focus on producing information to improve the design of programmes for vulnerable groups.

12. The programme supported a situation analysis of gender-based violence, which guided preparatory activities for the implementation of the national strategy for the surveillance and prevention of such violence. Future programmes should include capacity-building in order to coordinate and implement the national strategy on gender-based violence.

13. A December 2010 evaluation highlighted the need to strengthen strategic partnerships with government departments, United Nations organizations and civil society. Findings indicated the need for more capacity-building in providing high-level expertise, especially for analysing databases, formulating policies and training service providers. The evaluation also

pointed out opportunities to promote South-South collaboration.

III. Proposed programme

14. The Ministry of Foreign Affairs coordinated a participatory process, which included the United Nations system and national partners to formulate a situation analysis, a needs assessment and a framework for United Nations-wide cooperation for the period 2012-2014. Collaboration will focus on advocacy and knowledge management to leverage national resources through national ownership.

15. The proposed UNFPA country programme contributes to the following four pillars of the Strategic Cooperation Framework, as agreed by the Government and the United Nations country team: (a) young people; (b) human development; (c) governance; and (d) humanitarian support.

16. The next UNFPA country programme will require a strategic approach that draws on national resources and capacity. UNFPA will strengthen its focus on: (a) equity, by addressing disparities through improved data analyses and improved targeting of vulnerable groups, including young people, the elderly and refugees; (b) national capacity-building to improve the quality of public services, particularly in the health sector; (c) evidence-based policy formulation through the utilization, by decision makers, of the results of data analyses; and (d) regional partnerships and South-South cooperation, to facilitate policy dialogue, knowledge management, and the sharing of lessons learned with countries facing similar challenges.

17. The proposed UNFPA country programme has three components:

- (a) reproductive health and rights;
- (b) population and development; and
- (c) gender equality.

Reproductive health and rights component

18. The outcome for this component is: improved provision of high-quality, comprehensive reproductive health services for women and young people. Two outputs will contribute to this outcome.

19. Output 1: Capacity-building to provide a package of high-quality reproductive health services. This output will be achieved by: (a) training and supporting regional health-service administrators in implementing reproductive health services as part of the health-sector reform; and (b) strengthening the capacity of service providers for the early detection of cervical cancer, offering a wide range of contraceptive choices, and providing improved maternity care.

20. Output 2: Policy formulation to integrate reproductive health into national health-sector reform. This output will be achieved by: (a) sharing experiences through South-South collaboration, with interactions between experts to develop reproductive health services; (b) policy formulation through the analysis of existing data; (c) supporting the early detection of cervical cancer; (d) adopting and implementing the concept of youth friendly services; and (e) providing technical support to implement health-sector reform for reproductive health services.

Population and development component

21. The outcome of this component is: increased utilization of social services by refugees, migrants, young people and the aged. Two outputs will contribute to this outcome.

22. Output 1: Information on disparities is available by building capacity in the areas of data for development planning, policy formulation and knowledge management in service provision. This output will be achieved by: (a) using existing databases to identify disparities, including through health mapping; (b) setting service performance standards to identify gaps; (c) applying knowledge management techniques and a rights-based approach to advocate solutions; and (d) formulating locally appropriate social policies, especially for vulnerable groups.

23. Output 2: Strengthened knowledge management to support policies for vulnerable groups, including young people and elderly. This output will be achieved by: (a) producing local information on the situation of vulnerable groups, including young people, elderly, refugees and migrants; (b) providing technical support to develop service-provision models for young people and the elderly; (c) sensitizing young people in communities regarding healthy behaviour through the Y-Peer approach; (d) generate knowledge and build capacities of young people in youth participation, including civic engagement; and (e) establishing partnerships with non-governmental organizations to disseminate information and promote services among vulnerable groups.

Gender equality component

24. The outcomes of this component are: (a) planning in the social sector incorporates budgeting that addresses gender disparities through the empowerment of women; and (b) response to gender-based violence is expanded through operationalization of the national strategy on gender-based violence. Two outputs will contribute to this outcome.

25. Output 1: Improved capacity to use evidence-based and gender-responsive budgeting methodology in the directorates of ministries in the social sector. To achieve this output, the programme will: (a) produce country-specific and sector-specific methodological guidelines; (b) provide training on the implementation of the guidelines; and (c) use the findings for policy formulation and resource allocation.

26. Output 2: Effective intersectoral partnerships that implement the national strategy on gender-based violence. This will be achieved by: (a) training service providers; (b) supporting an intersectoral approach to implement the national strategy to prevent and respond to gender-based violence; and (c) introducing a monitoring and evaluation system.

IV. Programme management, monitoring and evaluation

27. The Ministry of Foreign Affairs will coordinate the programme. Relevant ministries, including the Ministries of Health, Youth, Family and Women's Affairs, Solidarity, Planning and Statistics, and Education, will implement the programme. UNFPA and the Government will collaborate with non-governmental organizations. The programme will employ the national

execution modality to implement the programme.

28. The UNFPA country office will develop a strategy to mobilize funds, including funds from national sources. UNFPA will align its monitoring and evaluation with government processes and with the Strategic Cooperation Framework. UNFPA will carry out an annual review and as well as a final evaluation of the programme.

29. Working groups of the Strategic Cooperation Framework will facilitate interactions with other United Nations organizations and national partners, including academic institutions. UNFPA will actively participate in theme groups within the United Nations system.

30. The UNFPA country office in Algeria includes a representative, an assistant representative, two programme staff and two administrative staff. The country office will seek technical support from national institutions, the UNFPA Arab States regional office, UNFPA headquarters, and other United Nations organizations.

RESULTS AND RESOURCES FRAMEWORK FOR ALGERIA

National priority: improved reproductive health status, especially for young people, through increased access to high-quality services				
Strategic Cooperation Framework outcome: by 2014, better utilization of high-quality services, especially by young people and women				
Programme component	Country programme outcomes, indicators, baselines and targets	Country programme outputs, indicators, baselines and targets	Partners	Indicative resources by programme component
Reproductive health and rights	<p><u>Outcome:</u> Improved provision of high-quality, comprehensive reproductive health services for women and young people</p> <p><u>Outcome indicators:</u></p> <ul style="list-style-type: none"> • Percentage of government health centres providing a wide range of reproductive health services Baseline: 7 per cent; Target: 60 per cent • Percentage of districts providing youth-friendly health services Baseline: 15 per cent; Target: 65 per cent 	<p><u>Output 1:</u> Capacity-building to provide a package of high-quality reproductive health services</p> <p><u>Output indicators:</u></p> <ul style="list-style-type: none"> • Percentage of government health centres providing a wide range of family planning methods Baseline: 75 per cent; Target: 95 per cent • Percentage of government health centres with providers trained to test for the early detection of cervical cancer Baseline: 8 per cent; Target: 75 per cent <p><u>Output 2:</u> Policy formulation to integrate reproductive health into national health-sector reform</p> <p><u>Output indicator:</u></p> <ul style="list-style-type: none"> • Number of South-South exchanges operationalized to support service planning on reproductive health Baseline: 0; Target: 3 	<p>District administrations; Ministries of: Education; Health; and Youth and Sports</p> <p>Academic institutions; health professional associations; non-governmental organizations</p>	\$1.7 million (\$1.1 million from regular resources and \$0.6 million from other resources)

<p>National priority: reduction of disparities for vulnerable population groups through the application of a rights-based approach and objective-based policy formulation through knowledge management from data analyses</p> <p>Strategic Cooperation Framework outcome: equitable access by vulnerable population groups to national resources</p>				
Population and development	<p><u>Outcome</u> : Increased utilization of social services by refugees, migrants, young people and the aged</p> <p><u>Outcome indicator:</u></p> <ul style="list-style-type: none"> ● Percentage of these high-risk groups utilizing social services 	<p><u>Output 1:</u> Information on disparities is available by building capacity in the areas of data for development planning, policy formulation and knowledge management in service provision</p> <p><u>Output indicator:</u></p> <ul style="list-style-type: none"> ● Number of studies carried out to assess disparities <p>Baseline: 2; Target: 6</p> <p><u>Output 2:</u> Strengthened knowledge management to support policies for vulnerable groups, including young people and the aged</p> <p><u>Output indicator:</u></p> <ul style="list-style-type: none"> ● Number of government organizations and non-governmental organizations with information tools and training resources to provide support for young people and aged persons. Baseline: 3; Target: 9 	<p>Ministries of: Health; Interior; Youth and Sports; Planning and Statistics; and Solidarity</p> <p>Academic institutions; non-governmental organizations</p>	<p>\$0.7 million (\$0.4 million from regular resources, and \$0.3 million from other resources)</p>
Gender equality	<p><u>Outcome:</u> Planning in the social sector incorporates budgeting that addresses gender disparities through the empowerment of women</p> <p><u>Outcome indicator:</u></p> <ul style="list-style-type: none"> ● Number of directorates in social-sector ministries using evidence on gender disparities in their sectoral plans and budget allocations <p><u>Outcome:</u> Response to gender-based violence is expanded through the operationalization of the national strategy on gender-based violence</p> <p><u>Outcome indicator:</u></p> <ul style="list-style-type: none"> ● Percentage of victims of gender-based violence who access services 	<p><u>Output 1:</u> Improved capacity to use evidence-based and gender-responsive budgeting methodology in the directorates of ministries in the social sector</p> <p><u>Output indicators:</u></p> <ul style="list-style-type: none"> ● Country-specific and sector-specific methodological guidelines are available for gender budgeting ● Sex-disaggregated administrative and survey data available in the social sector for gender budgeting purposes <p>Baseline: 0; Target: 3</p> <p>Baseline: 2; Target: 6</p> <p><u>Output 2:</u> Effective intersectoral partnerships that implement the national strategy on gender-based violence</p> <p><u>Output indicator:</u></p> <ul style="list-style-type: none"> ● Number of existing partnerships on gender-based violence. Baseline: 2; Target: 7 	<p>Ministries of: Family and Women's Affairs; Health; Interior; Justice; and Planning and Statistics</p> <p>Academic institutions; non-governmental organizations</p>	<p>\$0.6 million (\$0.5 million from regular resources and \$0.1 million from other resources)</p> <hr/> <p>Total for programme coordination and assistance: \$0.2 million from regular resources</p>