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UNITED NATIONS POPULATION FUND

Final country programme document for the Central African Republic

Proposed indicative UNFPA assistance: \$28 million: \$8 million from regular resources and

\$20 million through co-financing modalities and/or

other, including regular resources

Programme period: Five years (2012-2016)

Cycle of assistance: Seventh

Category per decision 2007/42: A

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

	Regular resources	Other	Total
Reproductive health and rights	3	10	13
Population and development	2	8	10
Gender equality	2	2	4
Programme coordination and assistance	1	-	1
Total	8	20	28

I. Situation analysis

- 1. The population of the Central African Republic is estimated at 4.6 million. The annual population growth rate is 2.5 per cent.
- 2. The population is unevenly distributed and predominantly rural (62 per cent). Young people aged 10-24 account for 32.6 per cent of the total population, and women account for 50.2 per cent. The total fertility rate is high (5.1 children per woman). The infertility rate is 10.2 per cent.
- 3. Life expectancy at birth dropped from 49 years in 1988 to 42.7 years in 2003. This decline is due in part to the high infant mortality rate and the HIV epidemic. Sixty-two per cent of the population lives below the poverty line.
- 4. Despite the presence of valuable natural resources in the Central African Republic, the economic growth rate is below the level necessary to spur social and economic development. In addition, during the past decade, some areas of the country have experienced armed conflict and insecurity, which have hampered development efforts.
- 5. The availability of updated and disaggregated data is limited. This hinders the integration of population dynamics into policies, programmes and plans for sustainable development.
- 6. The maternal mortality rate is high (850 maternal deaths per 100,000 live births). The infant morality rate is 106 deaths per 1,000 live births. The health infrastructure and the number of trained personnel are inadequate. About half of all deliveries occur at home, attended by unskilled persons. The modern contraceptive prevalence rate is low at 8.6 per cent (9.3 per cent among adolescent girls aged 15-19).
- 7. The adolescent fertility rate (among women aged 15-19) is 13.3 per cent, which

- contributes to increased mortality and morbidity rates. Obstetric fistula is one consequence of the high teenage pregnancy rate (36 per cent).
- 8. The HIV-prevalence rate is also high (6.2 per cent). The prevalence rate is higher among women (7.8 per cent) than among men (4.3 per cent). Among youth aged 15-24, the prevalence rate is higher among girls (5.7 per cent) than among boys (1 per cent).
- 9. The development Government and partners have made efforts to mainstream Nevertheless, gender-equality gender. legislation has not been fully implemented, and gender disparities persist. The primary school attendance rate is 71 per cent among boys, compared to 55 per cent among girls. In 2010, the percentage of women in decision-making positions was low (10.6 per cent in Parliament and 13.3 percent in the cabinet).
- 10. Women experience numerous types of gender-based violence, including female genital mutilation/cutting, sexual violence and violence related to witchcraft, as well as early marriage. In conflict-affected areas, 36 per cent of women have been victims of sexual violence.
- 11. The Government has developed a poverty reduction strategy, 2011-2014. This strategy has three pillars: (a) peace consolidation, good governance and the rule of law; (b) the promotion of economic stimulus and sustainable development; and (c) the promotion of human capital and essential social services.

II. Past cooperation and lessons learned

12. The current country programme, 2007-2011, has a budget of \$13.5 million. Programme achievements included: (a) an updated national population policy; (b) strengthened capacity in gender equality and equity; (c) the development of a national gender policy action plan; and (d) improved reproductive health services, including services

to prevent HIV/AIDS, in programme areas and areas affected by conflict.

- 13. Lessons learned include: (a) balancing the allocation of resources with geographical coverage is an asset in planning and implementing programmes; (b) strengthening partnerships with civil society, the private sector and the media helps to achieve programme results, including a reduction in maternal mortality; (c) the lack of baseline data and of an effective monitoring and evaluation system hinders the achievement of evidencebased results; and (d) national ownership, mutual responsibility and accountability contribute the sustainability to of the programme.
- 14. Challenges include the need to: strengthen the capacity of national institutions in the areas of coordination. monitoring and evaluation; (b) increase the national commitment to prevent gender-based violence; (c) focus programme interventions on young girls and boys; and (d) restore the quality of reproductive health services, with a focus on rural areas. The allocation of resources is expected to contribute to the improvement of basic social indicators.

III. Proposed programme

15. The Government and UNFPA developed this programme using a participatory process. The programme is aligned with the three components of the poverty reduction strategy paper; the Millennium Development Goals; the Programme of Action of the International Conference on Population and Development; development other international frameworks, including the Maputo Plan of Action, United Nations reform principles and the Paris Declaration on Aid Effectiveness. It will contribute to achieving four of the six outcomes of the United Nations Development Assistance Framework (UNDAF), 2012-2016.

16. The programme is aligned with the UNFPA strategic plan, 2008-2013. It has three components: (a) reproductive health and rights; (b) population and development; and (c) gender equality. The programme will contribute to improving the quality of life of the population, with a focus on rural areas.

Reproductive health and rights component

- 17. The expected outcome of this component is: increased utilization of high-quality sexual and reproductive health services, including services for maternal health, family planning, and the prevention of HIV/AIDS. The component will contribute to the UNDAF outcome concerning the utilization of basic social services.
- 18. Output 1: Improved, integrated and highquality reproductive health services, including family planning, assisted deliveries, emergency obstetric and neonatal care, and services to manage sexually transmitted infections, prevent mother-to-child transmission of HIV, and prevent gender-based violence, in programme areas. Strategies include: (a) strengthening the capacity of central institutions to develop policies, strategies, programmes, norms and procedures. undertake advocacy mobilize resources, and conduct monitoring and evaluation activities; (b) strengthening the capacity of health facilities to provide highquality reproductive health services, including the provision of reproductive health commodity security, the management of obstetric fistula, and services to combat gender-based violence; partnerships building with organizations to provide, with the participation community-based men, services; strengthening the health information system at the central level and in programme areas; (e) strengthening HIV-prevention efforts among women of reproductive age; and (f) integrating family planning into services that seek to prevent mother-to-child transmission of HIV.

- 19. Output 2: Increased capacity of youth organizations to provide youth-friendly services to adolescents as well as to young boys and girls. Strategies include: (a) strengthening the capacity of institutions concerned with youth to develop policies, strategies and norms, undertake policy dialogue, carry out advocacy, and participate in coordination, monitoring and evaluation efforts; (b) strengthening the capacity of youth organizations to provide youth-friendly services; and (c) developing innovative communication strategies that seek to advance youth leadership and participation to reduce risky behaviour among and adolescents and youth.
- 20. Output 3: Strengthened capacity of humanitarian entities involved in emergency preparedness and response to provide sexual and reproductive health services. Strategies include: (a) strengthening the capacity of humanitarian entities to implement the minimum initial service package; and (b) building partnerships with humanitarian entities to provide reproductive health services in crisis-affected areas.
- 21. Output 4: Strengthened reproductive health commodity security at national, regional and local levels. Strategies include:
 (a) strengthening the national capacity to deliver reproductive health commodities to clients through effective supply-chain management; and (b) building partnerships with all entities that provide reproductive health commodities.

Population and development component

22. The proposed outcome is: a strengthened integration of population dynamics, including gender. vouth. the environment and reproductive all sectoral health. into development frameworks at central and community levels. This component will contribute to the UNDAF outcomes related to good governance and equitable access to government institutions.

- 23. Output 1: Strengthened capacity of the entities in charge of planning and development, and strengthened capacity of civil society organizations, to integrate population issues into policies, plans and development programmes at national, regional and local levels. Strategies include: (a) strengthening the national capacity to integrate population issues. including gender, gender-sensitive and adolescent and budgeting, reproductive health, into policies, plans and development programmes; (b) strengthening the national capacity to provide education on population issues; (c) developing an advocacy plan to raise awareness of the interlinkages between population issues (including gender and adolescent and youth reproductive health) development sectors; (d) partnerships with civil society, the media, the University of Bangui, and research and training institutions in the areas of research and the integration of population issues into national and sectoral strategies; and (e) developing the capacity of the coordinating body of the seventh UNFPA country programme in planning, implementation, monitoring and evaluation, and resource mobilization.
- 24. Output 2: Strengthened capacity of the national statistical system to collect, process, analyse, disseminate and sociodemographic data disaggregated by sex, age and place of residence, including in humanitarian situations. Strategies include: (a) strengthening the national capacity to collect, process, analyse, disseminate and store data, including in humanitarian settings, and dialogue undertake with planners; supporting the fourth national population and housing census in 2013; (c) strengthening the national capacity to manage data from the integrated management information system at central and regional levels; and (d) promoting the civil registration system in programme areas.

Gender equality component

- 25. The outcome of the gender equality component is: a strengthened institutional and sociocultural environment that is conducive to gender equality and equity. This component will contribute to the UNDAF outcome on promoting the rule of law, protecting human rights, good governance and equal access of populations to government institutions. Two outputs will contribute to the achievement of this outcome.
- 26. Output 1: Strengthened national capacity to implement the national gender policy. Strategies include: (a) strengthening the capacity of national institutions to coordinate and monitor the implementation of the national gender policy; (b) strengthening the capacity of national institutions in charge of gender issues, including civil society organizations, in advocacy and policy dialogue; and (c) building partnerships in policy dialogue and advocacy to promote inclusive civic participation.
- 27. Output 2: Strengthened capacity of the Government and civil society organizations to prevent and respond to gender-based violence and human rights violations. Strategies include: (a) developing the capacity of the Government and civil society organizations to prevent and respond, in a holistic manner, to gender-based violence and human rights violations: (b) building partnerships to implement the gender-based violence strategy; and (c) supporting knowledge sharing, good practices and documenting results.

IV. Programme management, monitoring and evaluation

28. The management, monitoring and evaluation of the seventh country programme are integrated into the UNDAF and coordinating mechanism of the poverty reduction strategy document. The Ministry of Planning and Economy will ensure the overall coordination of the programme in collaboration

- with the ministries in charge of health, gender, youth and education, as well as with civil society and United Nations organizations. The programme will encourage and use South-South cooperation.
- 29. The Government and UNFPA will develop plans for monitoring and evaluation, resource mobilization and communication in accordance with those of the UNDAF. The Government will be responsible for the security of UNFPA staff and property. Risk-alleviation and prevention efforts will be part of the programme implementation process, and will be budgeted accordingly.
- 30. The UNFPA country office in the Central African Republic consists of a representative, international operations an manager, international national programme and specialists and support staff. UNFPA will use programme funds to recruit additional staff, as necessary, to implement the programme. The UNFPA Africa regional office, the subregional office in Dakar, Senegal, and headquarters units will provide technical support.

RESULTS AND RESOURCES FRAMEWORK FOR THE CENTRAL AFRICAN REPUBLIC

National priorities: (a) peace consolidation, good governance and human rights; (b) economic stimulus and regional integration; and (c) human resources and essential social services

UNDAF outcomes: (a) by 2016, government institutions, the private sector and civil society organizations apply good governance principles (political, economic and administrative) and are equally accessible to populations; and (b) by 2016, the population of the Central African Republic, particularly the most vulnerable, will participate in planning and implementation, use social services, and seize and value opportunities

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	Outcome: Increased utilization of high-quality sexual and reproductive health services, including services for maternal health, family planning, and the prevention of HIV/AIDS Outcome indicators: • Assisted birth rate Baseline: 53.4%; Target: 85% • Percentage of pregnancies among adolescents younger than 18 Baseline: 36%; Target: 20% • Contraceptive prevalence rate Baseline: 8.6%; Target: 10%	Output 1: Improved, integrated and high-quality reproductive health services, including family planning, assisted deliveries, emergency obstetric and neonatal care, and services to manage sexually transmitted infections, prevent mother-to-child transmission of HIV, and prevent gender-based violence, in programme areas Output indicators: • Percentage of health facilities that provide basic emergency obstetric and neonatal services. Baseline: 8.21%; Target: 50% • Percentage of health facilities that integrate the management of sexually transmitted infections into their services. Baseline: to be determined; Target: 80% Output 2: Increased capacity of youth organizations to provide youth-friendly services to adolescents as well as to young boys and girls Output indicators: • Number of youth facilities that provide youth-friendly services Baseline: 0; Target: 10 • Number of youth organizations with technical and institutional support in the area of youth reproductive health and HIV. Baseline: 4; Target: 10 Output 3: Strengthened capacity of humanitarian entities involved in emergency preparedness and response to provide sexual and reproductive health services Output indicators: • Percentage of humanitarian crises in which the minimum initial service package has been implemented. Baseline: 70%; Target: 100% Output 4: Strengthened reproductive health commodity security at national, regional and local levels Output indicators: • Percentage of health centres in the programme areas that offer at least three contraceptive methods. Baseline: to be determined; Target: 75%	Ministries of: Health; and Youth and Sport; National AIDS Committee Development partners; United Nations system Community- based organizations; non- governmental organizations	\$13 million (\$3 million from regular resources and \$10 million from other resources)

Programme component	Country programme outcomes, indicators, baselines and targets	Country programme outputs, indicators, baselines and targets	Partners	Indicative resources by programme component
Population and development	Outcome: Strengthened integration of population dynamics, including gender, youth, the environment and reproductive health, into all sectoral development frameworks at central and community levels Outcome indicators: Number of government institutions and civil society organizations that have population issues integrated into their policies, plans and programmes Baseline: 5; Target 10 Amount of resources mobilized for population activities Baseline: \$0; Target: \$20 million	 Output 1: Strengthened capacity of the entities in charge of planning and development, and strengthened capacity of civil society organizations, to integrate population issues into policies, plans and development programmes at national, regional and local levels Output indicators: Number of policies, plans and programmes with integrated population issues. Baseline: 6; Target: 10 Number of studies on population and emerging issues Baseline: 8; Target: 12 Output 2: Strengthened capacity of the national statistical system to collect, process, analyse, disseminate and store sociodemographic data disaggregated by sex, age and place of residence, including in humanitarian situations Output indicators: 	All ministries; National Institute of Statistics Civil society organizations; University of Bangui Development partners; United Nations system	\$10 million (\$2 million from regular resources and \$8 million from other resources)
Gender equality	Outcome: A strengthened institutional and sociocultural environment that is conducive to gender equality and equity Outcome indicators: • Legal texts adopted regarding quotas for women in nominative and elective positions Baseline: 1; Target: 3 • Presidential decrees issued regarding the application of the law on quotas for women in nominative and elective positions Baseline: 1; Target: 3	 Output 1: Strengthened national capacity to implement the national gender policy Output indicators: Number of national policy and sectoral strategy documents that integrate gender equality and equity at all levels. Baseline: 1; Target: 5 Percentage of institutions with a functional gender focal team Baseline: 0%; Target: 100% Output 2: Strengthened capacity of the Government and civil society organizations to prevent and respond to gender-based violence and human rights violations Output indicators:	Ministries of: Planning and Economy; Social Affairs; and all relevant ministries Civil society organizations Development partners	\$4 million (\$2 million from regular resources and \$2 million from other resources) Total for programme coordination and assistance: \$1 million from regular resources
