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**UNFPA – Country programmes and related matters**

**United Nations Population Fund**

**Country programme document for Lebanon**

Proposed indicative UNFPA assistance: \$15 million: \$2 million from regular resources and \$13 million through co-financing modalities and/or other resources, including regular resources

Programme period: Four years (2017-2020)

Cycle of assistance: Fourth

Category per decision 2013/31: Pink

Proposed indicative assistance (in millions of \$):

Strategic plan outcome areas		Regular resources	Other resources	Total
Outcome 1	Sexual and reproductive health	0.7	5.0	5.7
Outcome 2	Adolescents and youth	0.6	4.0	4.6
Outcome 3	Gender equality and women's empowerment	0.6	4.0	4.6
Programme coordination and assistance		0.1	-	0.1
<b>Total</b>		2.0	13.0	15.0

## I. Situation analysis

1. The population of Lebanon is estimated to have increased from 3.7 million in 2004 to 4.7 million in 2015. Since 2004, the total fertility rate has been 1.9, signifying that replacement level has been reached. Youth aged 15-29 years make up 27.4 per cent of the population, while 9.6 per cent is 65 years and older.

2. The crisis in Syria has resulted in unprecedented levels of forced displacement. Since 2011, Lebanon has been hosting 1.1 million displaced Syrians, the highest per capita number worldwide. One in every four persons in Lebanon is Syrian, in addition to 300,000 refugees from other countries, making the total population around six million. As the crisis wears on, displaced Syrians face increasingly complex challenges, including narrowing of protection space. Lebanon incurred significant fiscal and economic losses related to the Syria crisis. Although Lebanon is a middle-income country, inequalities are increasingly evident, with an estimated 25 per cent of the population living below the poverty line – including in urban areas.

3. Lebanon ranks among the top countries in the Arab region that met the Millennium Development Goal 5 target. The maternal mortality ratio decreased from 101.4 per 100,000 live births in 1990 to 18.1 in 2013. Attended births accounted for 98 per cent of deliveries (with regional disparities) and 96 per cent of pregnant women received medical care during pregnancy; however, postnatal care is only 50.3 per cent. The contraceptive prevalence rate is 53.7 per cent (with 44.8 per cent use of modern contraceptives) and is low among Syrian women (45 per cent) and not accepted by 39 per cent of Syrian youth. Postpartum family planning counselling is absent at the primary and secondary health-care levels, although a midwifery workforce at secondary levels is common. While around 20 per cent of the population use public sector health services, the Ministry of Public Health recently launched its vision to enhance coverage and utilization of the universal primary health care service package – which lacked youth-friendly services – across 214 outlets nationwide, targeting mainly those of limited socioeconomic status, given that half of the Lebanese population is uninsured.

4. Gender parity is still low and inequalities persist between male and female access to opportunities in all spheres. The *Human Development Report 2015* ranked Lebanon 78 out of 188 on the gender inequality index. Personal status laws relating to marriage, custody, divorce and inheritance are dictated by sectarian principles still governing society. Most political powers are against reserving a quota for women in elections, thus women's representation in parliament remains very low (3.1 per cent). Despite international conventions and advocacy, achievement of gender equality is constrained by challenges linked to persistence of sociocultural norms and harmful practices that violate women's rights, including their reproductive rights, which negatively affect sexual and reproductive health outcomes. Assessments conducted recently confirmed that domestic violence, sexual harassment and exploitation occur significantly among women and adolescents. Sixty-one per cent of youth who have experienced some kind of gender-based violence have not reported it. Child and forced marriages and trafficking, mainly among women migrant workers and displaced Syrians, are key violations of human rights that require legislation and coordinated efforts. Despite adoption of Law 293 on the protection of women and other family members from domestic violence, there still exist discriminatory provisions within the law.

5. Lebanese citizens, Palestinian refugees and displaced Syrians each have a consistent share of youth (15-29 years) at 27.4 per cent of their populations, totalling 1,616,740. While birth rates and the dependency ratio have dropped, Lebanon is in the midst of a demographic transition, with an increased dependency ratio expected in 2025. Both skilled and unskilled youth struggle to transition into employment. A large percentage of female youth never enter the labour force or they exit very early and become economically inactive, especially in rural areas. Youth unemployment is high at 34 per cent. Recent studies show that on average male and female adolescents (aged 15-18 years) initiate sex at 15.5 years. The youth volunteerism rate is 11.9 per cent, lower than elsewhere in the region. Seventy-seven per cent of Lebanese youth are “not

confident” in the ability of the Government to deal with the rise of extremist groups; social tensions exist between Lebanese and Syrian youth.

6. Lebanon is one of few countries worldwide that did not conduct a population census since 1932, due to the complexity of the political and confessional makeup. The limited or late availability of often poor quality data and systems has been at great cost since the lack of clarity and solidarity has compromised efficient policymaking and successful development results.

## **II. Past cooperation and lessons learned**

7. The previous country programme for Lebanon (2010-2014), extended to 2016, contributed to: (a) improving and scaling up sexual and reproductive health services, including within the humanitarian response; (b) advocating for the integration of reproductive health concepts in out-of-school and extracurricular school programmes; and (c) developing and operationalizing frameworks and standards for promoting gender equality and preventing gender-based violence, including among populations affected by the humanitarian crisis.

8. Achievements in sexual and reproductive health included: (a) the piloting of a student self-learning tool to integrate reproductive health concepts in schools; (b) the development and operationalization of a hospital-based maternal audit system; (c) the revision and adoption of reproductive health-service delivery guidelines, including on family planning, youth-friendly services, and the clinical management of rape; (d) capacity development for primary health-care providers; and (e) continuous supply of contraception to the public sector, including for the Syrian displaced population and based on the recent reproductive health commodity assessment. Achievements in gender equality included the development and adoption of a multi-year national women strategy with a plan of action; and advocacy for the promulgation of domestic violence law (293) and implementation support.

9. Lessons learned from the country programme evaluation include the need to: (a) adjust interventions based on regular needs assessments and a participative approach; (b) advocate for increased flexibility to address emerging critical issues, prioritizing the most vulnerable groups in the Syrian population based on needs assessments; (c) enhance the level and intensity of policy dialogue in areas covered in the country programme; (d) ensure that sustainability plans are agreed on, with a clear exit strategy; (e) define a long-term, comprehensive strategy to streamline interventions aimed at introducing reproductive health in the education system, with targeted sensitization for high potential impact; (f) move the gender-based violence platform and agenda forward to ensure increased impact and continuity, holistically addressed through reproductive health services and enactment/enforcement of policies and laws; and (g) work with national counterparts to mainstream and operationalize gender issues in relevant national policies.

## **III. Proposed programme**

10. The new country programme is guided by the situation analysis and several assessments, in addition to multisectoral consultations with the Government, civil society and other United Nations organizations. It is aligned with national policies and strategies, the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) and Universal Periodic Review recommendations, the United Nations Strategic Framework (UNSF) 2017-2020, the Programme of Action of the International Conference on Population and Development Beyond 2014, the 2030 Agenda for Sustainable Development, the Sustainable Development Goals, the Amman Youth Declaration, Security Council resolutions 1325 (on women, peace and security) and 2250 (on youth, peace and security), and the 2016 Lebanon Crisis Response Plan. The programme will directly contribute to Sustainable Development Goals 3, 4 and 5.

11. According to the business model, Lebanon is in the ‘pink’ quadrant; however, the humanitarian situation requires that UNFPA modes of engagement also include targeted capacity development, knowledge management and, to a lesser extent, service delivery.

The new programme will focus primarily on young people by empowering them to lead selected interventions, and will provide targeted support to vulnerable populations affected by the Syrian crisis, in displaced and host communities. All interventions will be developed with due attention to a gender marker. In parallel, the programme will seek to contribute to the resilience vision of the Government by delivering medium- to long-term scaled-up interventions towards stabilization. The programme will strengthen national capacities, mainly of the Central Administration of Statistics, for data generation and analysis to inform policymaking and scale-up programme interventions. Lastly, the level and intensity of policy dialogue will be enhanced in the areas covered by the country programme.

12. The proposed programme will deliver its interventions at the national level, whereas some activities will be delivered at subnational levels based on the most underprivileged localities identified in the UNDP maps of risks and resources and the vulnerability assessment of Syrian population in Lebanon.

#### **A. Outcome 1: Sexual and reproductive health**

13. Output 1: Strengthened capacity of national institutions and civil society organizations to deliver quality sexual and reproductive health and rights services/information with a specific focus on youth, key and most vulnerable populations, across the humanitarian and development continuum. This will be achieved through advocacy, capacity development and knowledge management. Strategies will include: (a) enhancing national capacities for production and utilization of evidence, including on the costing of sexual and reproductive health package to advocate for the comprehensive integrated package with due attention to youth-friendly services; (b) developing and adopting normative frameworks and systems to improve quality of care with emphasis on youth-friendly services; (c) enhancing capacities on reproductive health commodities' forecasting and increased coverage and utilization of family planning services, particularly for populations affected by the Syrian crisis; (d) strengthening the reproductive health component of the emergency, preparedness and resilience plans; and (e) enhancing national systems, frameworks and capacities to improve the quality of midwifery education.

#### **B. Outcome 2: Adolescents and youth**

14. Output 1: Strengthened capacity of national educational institutions to design, implement and monitor life-skills-based and gender-sensitive reproductive health education programmes. This will be achieved through advocacy, capacity development and knowledge management. Strategies will include: (a) strengthening the capacities of educational entities to generate and use evidence to integrate and monitor reproductive health concepts in the education sector; (b) supporting the adaptation, integration and institutionalization of life-skills and gender-sensitive reproductive health education programmes, in curricular and extracurricular setups, with specific focus on peer-to-peer learning; and (c) supporting youth-led innovative tools and approaches – including with the private sector – to deliver, integrate and monitor reproductive health concepts in the education sector.

15. Output 2: Enhanced community and civil society capacities to empower young people for the design, implementation and monitoring of integrated gender-sensitive programmes on sexual and reproductive health, with special focus on marginalized groups and young girls, including in humanitarian settings. This will be achieved through advocacy, capacity development and knowledge management. Strategies will include: (a) strengthening capacities to generate and use evidence to update, operationalize and monitor the national youth policy, namely the health component; (b) enhancing national capacities for conducting assessments, developing policy instruments, establishing strategic partnerships and building human capital to realize the demographic dividend; (c) strengthening the capacity of local communities and youth networks to implement and mainstream youth-led innovative interventions, focused on sexual and reproductive health, life skills, civic engagement and livelihood; and (d) increasing public awareness and support to young people's reproductive health.

### C. Outcome 3: Gender equality and women's empowerment

16. Output 1: Strengthened engagement and capacities of government institutions – national and local – and civil society institutions to advance sexual and reproductive health and rights, gender equality, empowerment of women, and prevention of gender-based violence, including in humanitarian settings. This will be achieved through advocacy, capacity development and knowledge management. Strategies will include: (a) strengthening national capacities for the generation, analysis and utilization of sexual and reproductive rights, gender equality and gender-based violence-related evidence to support programming, advocacy, monitoring and tracking of national targets for the Sustainable Development Goals and the national women's strategy and action plan; (b) enhancing national capacities for the development, validation and adoption of national gender-based violence protocols and modules and their institutionalization in related services and sectors; (c) enhancing engagement and capacities of targeted institutions to increase public awareness on gender equality, eliminate discriminatory gender stereotypes, and initiate positive change in social norms; (d) strengthening national and local capacities for the development and implementation of a contextualized strategy that involves male youth and men in gender-based violence prevention; (e) developing the capacities of local institutions to support community-based protection networks through peer-to-peer approach; (f) supporting initiatives and campaigns for adoption of legislation that safeguards women's rights and promotes gender equality; and (g) strengthening coordination mechanisms for the development and adoption of the national action plan to implement United Nations Security Council resolution 1325 on women, peace and security.

## IV. Programme management, monitoring and evaluation

17. In selecting implementing partners for programme delivery, the country office will make use of its comprehensive partnership plan. It will select partners based on comparative advantage and ability to deliver high-quality programmes. The country programme will use the national execution modality to a large extent and will implement the harmonized approach to cash transfers. UNFPA will monitor implementing partners' progress by applying its monitoring and evaluation processes and tools. In the event of a highly volatile situation preventing UNFPA from conducting its monitoring role, local partners will be identified and mobilized to assume this role.

18. In delivering the country programme, in addition to partnerships with government institutions, other United Nations organizations, non-governmental organizations and the private sector, UNFPA will seek technical assistance from academic and research institutions, professional and medical associations, the regional office and headquarters. In the event of emergency, UNFPA may, in consultation with counterparts, reprogramme activities to better respond to emerging issues, especially to deliver life-saving interventions.

19. In order to ensure financial resources are available for the continued implementation of country programme strategies, UNFPA will develop and update a resource mobilization plan in alignment with programmatic outputs and the government crisis response plan. The country office will approach donors at local, regional and global levels and will ensure a follow-up mechanism is in place.

20. UNFPA will deliver the country programme through a core team funded from the institutional budget, and regular and other resources. It will recruit additional programme and administrative staff and short-term personnel for the delivery of development and humanitarian-related initiatives. Furthermore, UNFPA will rely on personnel recruited through United Nations Volunteers modalities, internal detail assignments and short-term missions.

## RESULTS AND RESOURCES FRAMEWORK FOR LEBANON (2017-2020)

<p><b>National priority:</b> Lebanon reduces poverty and promotes sustainable development while addressing immediate needs in a human rights/gender-sensitive manner.  <b>United Nations Strategic Framework (UNSF) outcome:</b> Improved equitable access to and delivery of quality social services, social protection and basic assistance.  <b>Indicator:</b> Percentage increase of people without formal health insurance coverage who access primary, secondary and tertiary health care at affordable cost (disaggregated by Lebanese and refugees – Syrians/Palestinians). <i>Baseline: 70% Lebanese and 72% refugees; Target: 85% Lebanese and 85% refugees</i></p>				
UNFPA strategic plan outcome	Country programme outputs	Output indicators, baselines and targets	Partners	Indicative resources
<p><b>Outcome 1: Sexual and reproductive health</b>  Increased availability and use of integrated sexual and reproductive health services, including family planning, maternal health and HIV, that are gender-responsive and meet human rights standards for quality of care and equity in access</p> <p><u>Outcome indicator(s):</u></p> <ul style="list-style-type: none"> <li>Number of primary health-care centres successfully integrating youth-friendly services into health service package <i>Baseline: 10; Target: 150</i></li> <li>Percentage of vulnerable population accessing universal health coverage package, including comprehensive sexual and reproductive health services <i>Baseline: 70%; Target: 85%</i></li> </ul>	<p><b>Output 1:</b> Strengthened capacity of national institutions and civil society organizations to deliver quality sexual and reproductive health and rights services/information with a specific focus on youth, key and most vulnerable populations, across the humanitarian and development continuum</p>	<ul style="list-style-type: none"> <li>Percentage of primary health care centres with capacity to provide comprehensive youth-friendly services <i>Baseline: 10%; Target: 90%</i></li> <li>Number of normative frameworks and curricula developed, validated, and institutionalized for improving quality of care <i>Baseline: 3; Target: 7</i></li> <li>Proportion of midwives capable of providing family planning counselling at primary and secondary care levels <i>Baseline: 20%; Target: 85%</i></li> </ul>	Ministries of: Public Health; Social Affairs; Education and Higher Education; Central Administration of Statistics; medical and professional associations; non-governmental institutions; academic institutions; World Health Organization; (WHO); United Nations Children's Fund (UNICEF); Office of the United Nations High Commissioner for Refugees (UNHCR)	\$5.7 million (\$0.7 million from regular resources and \$5 million from other resources)
<p><b>National priority:</b> Lebanon enjoys political stability and practices effective governance.  <b>United Nations Strategic Framework outcome:</b> Government's ability to improve the performance of institutions and promote participation and accountability increased.  <b>Indicators:</b> Number of people (including refugees, women, children, youth, elderly, persons with disabilities and others) accessing services from social development centres.  <i>Baseline: 300,000; Target: 750,000.</i> Number of key recommendations in the national youth policy and its action plan implemented. <i>Baseline: 10; Target: 50</i></p>				
<p><b>Outcome 2: Adolescents and youth</b>  Increased priority on adolescents, especially on very young adolescent girls, in national development policies and programmes, particularly increased availability of comprehensive sexuality education and sexual and reproductive health</p> <p><u>Outcome indicator(s):</u></p> <ul style="list-style-type: none"> <li>Number of educational institutions integrating comprehensive life skills-based gender-sensitive reproductive health/gender-based violence education programmes within their</li> </ul>	<p><b>Output 1:</b> Strengthened capacity of national educational institutions to design, implement and monitor life-skills based gender-sensitive reproductive health education programmes</p>	<ul style="list-style-type: none"> <li>Number of innovative tools mainstreamed in extracurricular activities on gender-sensitive life-skills reproductive health/gender-based violence education <i>Baseline: 1; Target: 4</i></li> <li>Number of educational institutions successfully completing workshops on development, interpretation and monitoring of reproductive health knowledge <i>Baseline: 0; Target: 150</i></li> <li>Number of educational institutions that adopt a youth peer-to-peer approach for promoting reproductive health <i>Baseline: 0; Target: 30</i></li> </ul>	Ministries of: Education and Higher Education; Social Affairs; Youth and Sports; Labour; Interior and Municipalities; Education Centre for Research and Development; Central Administration of Statistics; non-governmental organizations;	\$1.5 million (\$0.4 million from regular resources and \$1.1 million from other resources)
	<p><b>Output 2:</b> Enhanced community and civil society capacities to empower young people</p>	<ul style="list-style-type: none"> <li>Tracking tool to monitor implementation of the youth policy <i>Baseline: 0; Target: 1</i></li> </ul>		\$3.1 million (\$0.2 million from regular resources and

<p>programmes <i>Baseline: 0; Target: 70</i></p> <ul style="list-style-type: none"> <li>Proportion of targeted local community structures mainstreaming the comprehensive youth package – with emphasis on gender-based violence/sexual and reproductive health – within their local plans <i>Baseline: 0%; Target: 75%</i></li> </ul>	<p>for the design, implementation and monitoring of integrated gender-sensitive programmes on sexual and reproductive health, with special focus on marginalized and young girls, including in humanitarian settings</p>	<ul style="list-style-type: none"> <li>Number of local community stakeholders capable of supporting gender-sensitive life skills-based youth programming, including for marginalized groups <i>Baseline: 0; Target: 150</i></li> <li>Number of youth-led life skills-based innovative initiatives developed and implemented with the private sector <i>Baseline: 0; Target: 3</i></li> <li>Number of thematic in-depth analysis reports on the demographic dividend produced and disseminated <i>Baseline: 0; Target: 3</i></li> </ul>	<p>professional associations; academic and research institutions; the private sector; International Labour Organization; UNESCO; UNDP; WHO; UNICEF</p>	<p>\$2,9 million from other resources)</p>
<p><b>National priority:</b> Lebanon enjoys political stability and practices effective governance.  <b>UNSF outcome:</b> Institutional mechanisms and policies strengthened for improving the legal status of women, eliminating gender-based violence and promoting gender equality – UNFPA convener.  <b>Indicators:</b> Number of laws and directives to remove discriminatory articles against women. <i>Baseline: 12; Target: 25.</i> Percentage of girls and women reporting satisfaction with services provided (disaggregated by Lebanese and refugees). <i>Baseline: 0%; Target: 50%.</i> Number of CEDAW recommendations implemented. <i>Baseline: 1; Target: 5</i></p>				
<p><b>Outcome 3: Gender equality and women’s empowerment</b>  Advanced gender equality, women’s and girls’ empowerment, and reproductive rights, including for the most vulnerable and marginalized women, adolescents and youth  <u>Outcome indicator(s):</u></p> <ul style="list-style-type: none"> <li>Proportion of married women aged 15-49 years who make their own informed decisions regarding contraceptive use <i>Baseline: 8.1%; Target: 30%</i></li> <li>Proportion of targeted local community structures mainstreaming comprehensive women empowerment (gender-based violence/sexual and reproductive health) programmes within local plans. <i>Baseline: 0; Target: 75%</i></li> </ul>	<p><u>Output 1:</u> Strengthened engagement and capacities of government institutions – national and local – and civil society institutions to advance sexual and reproductive health and rights, gender equality, empowerment of women, and prevention of gender-based violence, including in humanitarian settings</p>	<ul style="list-style-type: none"> <li>Number of protocols/modules institutionalized within selected services/sectors <i>Baseline: 3; Target: 7</i></li> <li>Number of women entities capable of generating, analysing and utilizing gender-related evidence to support programming, advocacy and monitoring-related initiatives <i>Baseline: 0; Target: 20</i></li> <li>A functioning tracking and reporting system to follow up on implementation of reproductive rights recommendations and obligations established <i>Baseline: 0; Target: 1</i></li> <li>Number of policy briefs on gender equality – with attention to vulnerable groups – produced and disseminated <i>Baseline: 0; Target: 4</i></li> </ul>	<p>Ministries of: Social Affairs; Interior and Municipalities; Public Health; Justice; National Commission for Lebanese Women; Parliamentary Commission on Women and Children; Central Administration of Statistics; non-governmental organizations; academic and research institutes; the media; UNDP, UNHCR, UNICEF</p>	<p>\$4.6 million (\$0.6 million from regular resources and \$4 million from other resources)</p> <hr/> <p>Total for programme coordination and assistance: 0.1 million from regular resources</p>