

Executive Board of the United Nations Development Programme and of the United Nations Population Fund

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## UNITED NATIONS POPULATION FUND

## **Country programme for El Salvador**

| Proposed UNFPA assistance:     | \$10.5 million: \$3.5 million from regular resources<br>and \$7 million through co-financing modalities and/or<br>other, including regular, resources |  |
|--------------------------------|---|--|
| Programme period:              | 5 years (2007-2011)   |  |
| Cycle of assistance:           | Sixth   |  |
| Category per decision 2005/13: | В   |  |

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

|                                       | Regular resources | Other | Total |
|---------------------------------------|-------------------|-------|-------|
| Reproductive health                   | 1.5               | 6.0   | 7.5   |
| Population and development            | 1.0               | 0.6   | 1.6   |
| Gender                                | 0.4               | 0.4   | 0.8   |
| Programme coordination and assistance | 0.6               | -     | 0.6   |
| Total                                 | 3.5               | 7.0   | 10.5  |

#### I. Situation analysis

1. El Salvador is a lower middle-income country with a per capita gross domestic product (GDP) of \$2,350 (2004). It has made impressive gains in the economic and social spheres since 1992, when peace accords ended a 12-year war. Overall poverty declined between 1992 and 2003, from 58 to 36 per cent, with extreme poverty dropping from 27 to 14 per cent. With a population of 6.7 million living in a territory of 21,000 square kilometres, it is the smallest, most densely populated country in the Americas. The annual population growth rate in 2003 was 2.2 per cent.

2. According to the common country assessment, the country has made progress towards meeting many of the Millennium Development Goals. The extreme poverty target had been met by 2002, and the child mortality rate target is likely to be achieved before 2015. El Salvador expects to achieve universal access to primary education by 2015. There are no gender differentials in school enrolment rates.

3. Despite these advances, El Salvador faces challenges in its efforts to: (a) reduce poverty; (b) ensure equitable access to economic growth and social services, particularly in marginal and rural areas: and (c) achieve the Millennium Development Goals in maternal health. HIV/AIDS, gender equality and the empowerment of women.

4. Maternal mortality continues to be a major challenge. The maternal mortality ratio increased from 120 deaths per 100,000 live births in 1998 to 173 deaths per 100,000 live births in 2003. A 2004 study on the availability and use of emergency obstetric care indicated that the majority of maternal deaths were preventable and that there were significant gaps in emergency obstetric care services.

5. The contraceptive prevalence rate increased from 59.7 per cent in 1998 to 67.3 per cent in 2003. However, access to family planning services is limited for adolescents, poor women, women in rural areas and women with no formal education.

6. With respect to HIV/AIDS, El Salvador has made advances in policy, programme and legislative frameworks. Although the epidemic is concentrated among vulnerable groups, it is spreading rapidly among women and young people. In 2000 there was a ratio of 3 men infected for every woman; the current ratio is 1.3 men per woman.

7. El Salvador has increased the availability of sociodemographic data. A population and housing census is under way – the first in over 14 years. It will enable the Government to better integrate population variables into development and poverty reduction strategies, and will provide useful information on indigenous groups. It will also facilitate environmental and spatial planning, territorial development, and risk and disaster management, given the vulnerability of the country to natural disasters.

8. Migration is a key issue. In 2004, approximately 3 million Salvadorans were residing outside the country. Remittances from family members working abroad (estimated at 16 per cent of GDP for 2005) are a critical source of income for many Salvadoran families, helping them to emerge from poverty. However, policies that maximize the benefits of migration and protect the human rights of migrants and their families are needed.

9. Violence is an important issue that has economic, social, health and governance implications, especially for youth. There is an urgent need to invest in comprehensive youth policies and programmes, including those aimed at preventing violence among young people.

10. Despite progress in legal and policy frameworks for gender equality, sociocultural barriers, along with institutional and financial constraints, are hindering their implementation. The political participation of women remains low, and gender-based violence affects women in all social groups. The 2003 family health survey reported 19.7 per cent of women in unions have experienced physical abuse from their partners.

#### II. Past cooperation and lessons learned

11. UNFPA assistance to El Salvador began in 1974. The fifth country programme (2003-2006) was approved for a total of \$5.1 million, with \$2.4 million from regular resources and \$2.7 million from other resources. By early 2006, UNFPA had mobilized \$2.06 million for the programme.

12. One of the key achievements of the current programme was the support provided for planning and implementing the population and housing census. This support will improve the availability and use of socio-demographic data disaggregated by age and sex, including indicators related to indigenous populations.

13. UNFPA made a major contribution in reproductive improving the health policy environment and increasing access to reproductive health services. UNFPA provided support for formulating and implementing the national reproductive health plan (2005-2010); the national strategic plan for the prevention, treatment and control of HIV/AIDS (2005-2010); and the national adolescent health programme. UNFPA also collaborated on an innovative programme for adolescent women. Carried out by UNFPA in cooperation with the Food and Agriculture Organization of the United Nations (FAO), the United Nations Children's Fund (UNICEF), UNDP, the Pan American Health Organization (PAHO) and the World Health Organization (WHO), the programme helped improve the health of young women in 13 municipalities.

14. During the current programme, UNFPA supported: (a) advocacy for reproductive rights, especially through the Salvadoran Parliamentarian Group on Population and Development; (b) reproductive health commodity security, through the signing of an agreement to procure contraceptives through UNFPA; and (c) support to humanitarian emergencies in response to hurricanes, floods and volcanic activities.

15. A successful interagency campaign on the Millennium Development Goals demonstrated the benefits of interagency collaboration. The programme also demonstrated the importance of building alliances with a variety of sectors, including civil society, parliamentarians, faith-based organizations and the media, to ensure an enabling environment in which to implement the Programme of Action of the International Conference on Population and Development (ICPD) and the Millennium Development Goals.

#### **III.** Proposed programme

16. The proposed programme reflects the goals, outcomes and strategies of the United Nations Development Assistance Framework (UNDAF), which in turn reflects national priorities. UNFPA and the Government developed the programme within the framework of the Millennium Development Goals, the ICPD Programme of Action and the UNFPA multi-year funding framework, 2004-2007.

17. Programme strategies will emphasize a propoor, gender-sensitive and rights-based approach. The programme will consist of three components: (a) reproductive health; (b) population and development; and (c) gender. It will focus on areas that the Government and the United Nations have already identified as areas requiring assistance, to make better use of resources and to generate synergies for sustainable results.

18. The programme will focus on: (a) democratic governance; (b) economic development and achievement of the Millennium Development Goals; (c) human and social capital; and (d) environmental and risk management.

#### Reproductive health component

19. The expected outcomes for the reproductive health component are: (a) a strengthened legal framework and political environment at the national and local levels to promote reproductive health and rights; and (b) equitable access to, and increased demand for, comprehensive, high-quality reproductive health services within the context of health-sector reform.

20. <u>Output 1: National health policy has</u> incorporated sexual and reproductive health with a gender and rights perspective. To achieve this output, UNFPA will support the Ministry of Public Health in: (a) formulating and implementing the national health policy, with special attention given to adolescent sexual and reproductive health and HIV prevention; (b) building the management and technical capacity of health-sector staff to implement policies and to update and/or formulate plans and programmes related to sexual and reproductive health; and (c) monitoring and evaluating policy implementation.

21. Output 2: Parliamentarians, key government officials and civil society members are informed and supportive of sexual and reproductive health issues. To achieve this output, UNFPA will: (a) strengthen strategic alliances with key partners on sexual and reproductive health issues, using a gender and rights perspective; and (b) formulate evidence-based arguments, foster awareness of and support training on the linkages between sexual reproductive health. and the Millennium Development Goals, and poverty reduction strategies or plans.

22. <u>Output 3: Improved capacity of health</u> <u>personnel to provide comprehensive, high-quality</u> <u>sexual and reproductive health services</u>. To achieve this output, <u>the programme will: (a) train</u> managerial and technical health-sector personnel in emergency obstetric care and other areas to reduce maternal mortality; (b) build capacity in reproductive health commodity security; (c) support the updating of reproductive health norms and procedures; and (d) monitor and evaluate the quality of sexual and reproductive health services.

23. <u>Output 4: Increased access of adolescents and</u> youth to information and education on sexual and reproductive health, including sexuality education and HIV/AIDS prevention. UNFPA will support the Ministry of Education and civil society in formulating and implementing life-skills education programmes for adolescents and young people in the formal and informal education sectors, and will also support the updating of education and training materials.

#### Population and development component

24. The expected outcomes of this component are: (a) increased availability of population-related data at all levels to improve the effectiveness of development policies and programmes; and (b) population and development linkages are considered in national and local development policies, plans and programmes.

25. Output 1: Updated national sociodemographic statistical base. This output will be achieved support provided through to the General Directorate of Statistics and Census for: (a) technical assistance for planning and implementing the sixth population census and the fifth housing census and for updating other national statistics; (b) strengthening national capacities to apply modern technology and processes for collecting and analysing data, including support to surveys such as the National Family Health Survey; and (c) supporting the dissemination and utilization of sociodemographic data (disaggregated by sex, age, geographical area and indigenous population), by the Government and other national institutions, including civil society and academia.

26. Output 2: Strengthened national and local capacity to plan, implement, monitor and evaluate public policies that include population variables and their linkages to development. This output will be achieved by supporting national and local institutions in: (a) building capacity to utilize sociodemographic data in planning; (b) including sociodemographic data in the design and implementation of development and poverty reduction programmes, drawing attention to issues such as migration, indigenous groups and elderly people; and (c) supporting information systems to better prepare for and mitigate the effects of natural disasters, including the incorporation of population data into urban planning; and (d) providing support for considering youth and elderly people's issues in public policies.

#### Gender component

27. The expected outcome of the gender component is the consolidation of national and local institutional mechanisms and the promotion of sociocultural practices that protect the rights of women and girls and advance gender equity and equality.

28. <u>Output 1: Strengthened national institutions,</u> <u>including civil society, to advocate and promote</u> <u>gender equity and equality in the context of the</u> <u>Millennium Development Goals</u>. This will be achieved by: (a) supporting national mechanisms to implement norms that guarantee gender equity and equality; (b) supporting parliamentarians and key stakeholders to promote analysis and discussion of international norms that protect and promote gender equity and equality; (c) supporting civil society programmes that advocate greater political participation and equal opportunities for women.

29. <u>Output 2: Strengthened national institutions</u> that support and protect women, adolescents, youth and the elderly in preventing gender-based violence with active male involvement. This output will be achieved by training national institutions in implementing norms to prevent gender-based violence and by promoting the active participation of men in programmes to prevent gender-based violence.

# IV. Programme management, monitoring and evaluation

30. The national execution modality will be employed to execute and implement the programme, through a harmonized cash-transfer approach. UNFPA and the Government will monitor the contribution of the programme to United Nations system outcomes on the basis of the UNDAF monitoring and evaluation plan. Within the context of the UNDAF, the Government and the United Nations system will establish a monitoring committee. UNFPA will participate in this committee, which will follow up on programme implementation and provide strategic guidance. UNFPA staff and national counterparts will make supervisory visits to project sites at least twice a year. The Government and UNFPA will conduct annual country programme reviews. UNFPA will participate in the UNDAF mid-term review.

31. The UNFPA country office will provide strengthen coordination support to and government institutions. collaboration among national institutions and civil society organizations, combining their comparative advantages in programme execution to achieve sustainable results. National consultants and the UNFPA Country Technical Services Team in Mexico City, Mexico will provide technical assistance.

32. The UNFPA country office consists of a representative, an assistant representative, and administrative and support personnel, as per the approved country office typology. UNFPA will earmark funds for three national programme posts, an information technology post and additional strengthen programme support staff. То implementation, UNFPA will seek to mobilize additional resources with interested donors and with public and private organizations, including mobilizing resources to procure reproductive health commodities, as per the agreement signed in February 2004 between UNFPA and the Government.

### **RESULTS AND RESOURCES FRAMEWORK FOR EL SALVADOR**

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| 1 I  | tizens at the national and local levels   |   | 1 <b>-</b> .   | -  |
|--|---|---|--|--|
| Programme<br>component                                     | Country programme outcomes,<br>indicators, baselines and targets  | Country programme outputs, indicators, baselines and targets  | Partners   | Indicative<br>resources by<br>programme<br>component   |
|  |   | Output 1: National health policy has incorporated sexual and reproductive health with a gender and rights perspective         Output indicator:         • Health policy addressing sexual and reproductive health approved and implemented         Output 2:         Parliamentarians, key government officials and civil society members are informed and supportive of sexual and reproductive health issues         Output indicator:         • Strategic alliances built with key social actors         Output indicator:         • Training plans formulated and executed, including emergency obstetric care assistance, to reduce maternal mortality, assure sexual and reproductive health, adolescent sexual and reproductive health and HIV/AIDS prevention commodities, with a gender- and rights-based approach         Output 4:         Increased access of adolescents and youth to information and education on sexual and reproductive health, including sexuality education and HIV/AIDS prevention, implemented in formal and informal educational sectors         • Sexuality education strategies, including HIV/AIDS prevention, implemented in formal and informal educational sectors |  | 7.5 million<br>(\$1.5 million from<br>regular resources<br>and \$6 million<br>from other<br>resources)   |
| UNDAF outcome<br>massive creation of<br>national and local | s: (a) by 2011, national capacities have been imp<br>of quality employment, reduction of inequality an<br>levels will be effectively implemented for integra  | roved in order to design and implement developmental policies, strategies and plans f<br>d achievement of the Millennium Development Goals; and (b) by 2011, public policie<br>ated environmental and risk management   | for equitable and sustainable eco<br>es, strategies and participatory p  | rogrammes at the   |
| Population and<br>development                              | Outcome:         Increased availability of population-related         data at all levels to improve the         effectiveness of development policies and         programmes         Outcome indicator:         • Data disaggregated by sex, age and         geographical area utilized         Baseline: Fifth population census; fourth | <ul> <li>Output 1: Updated national sociodemographic statistical database<br/>Output indicators:</li> <li>Population and housing census implemented and technical assistance<br/>provided to national surveys, such as the National Family Health Survey of<br/>2008</li> <li>Improved sociodemographic statistics database, with sex and age<br/>disaggregated data, including data related to ethnic groups</li> <li>Output 2: Strengthened national and local capacity to plan, implement,<br/>monitor and evaluate public policies that include population variables and their<br/>linkages to development</li> </ul>   | Ministries of: Health;<br>Education; Environment;<br>Governance; Economy;<br>and Housing and Urban<br>Development;<br>Technical Secretariat of<br>Presidency;<br>local governments;<br>NGOs; universities;<br>United Nations and other<br>cooperation agencies | \$1.6 million<br>(\$1 million from<br>regular resources<br>and \$0.6 million<br>from other<br>resources) |

| Programme<br>component                    | Country programme<br>outcomes, indicators,<br>baselines and targets  | Country programme outputs, indicators, baselines and targets   | Partners  | Indicative resources by programme component  |
|---|--|--|---|--|
| Population and<br>development<br>(cont'd) | Outcome:         Population and         development linkages are         considered in national and         local development policies,         plans and programmes         Outcome indicator:         • Population and poverty         links incorporated in         poverty reduction plans         Baseline:         National and local         public policies                                | <ul> <li><u>Output indicators:</u></li> <li>National and local policies, strategies and plans have incorporated population variables, including migration, and have established linkages between population and poverty (e.g., the solidarity network programme)</li> <li>Youth and elderly people's issues incorporated into public policies</li> </ul>   | Ministries of: Health; Education;<br>Environment; Governance;<br>Economy; and Housing and Urban<br>Development;<br>Technical Secretariat of Presidency;<br>local governments;<br>NGOs; universities;<br>United Nations and other<br>cooperation agencies  | (see above)  |
|   |  | (b) broadened democracy execution; and (c) citizen security strengthened institutional capacity at the national and local levels, with a particular security of the security o | articipatory, political party system that gu  | arantees the observance of   |
|   |  | in the context of an informed and empowered society  |   |  |
| Gender                                    | Outcome:         Consolidation of national and local institutional mechanisms and the promotion of sociocultural practices that protect the rights of women and girls and advance gender equity and equality         Outcome indicator:         • National and local institutions apply norms that guarantee gender equity and equality         Baseline: institutional legislation and mechanisms | Output 1: Strengthened national institutions, including civil society, to advocate and promote gender equity and equality in the context of the Millennium Development Goals         Output indicators:         • National mechanisms guarantee gender equity and equality         • Parliamentarians and key actors promote the analysis and discussion of international laws and norms         • Increased political participation of women         Output 2:         Strengthened national institutions that support and protect women, adolescents, youth and the elderly in preventing genderbased violence with active male involvement         Output indicator:         • National institutions apply norms to prevent gender-based violence         • Male participation promoted and included in programmes to prevent gender-based violence   | Ministry of Education; Ministry<br>of Public Health;<br>Ombudsman Office for Human<br>Rights; Public Defender's Office;<br>National Youth Secretariat;<br>National Family Secretariat;<br>National Institute for the<br>Development of Women; national<br>police; Supreme Court; National<br>Judicial Council; Legislative<br>Assembly; political parties; NGOs;<br>United Nations agencies and other<br>cooperation agencies | \$0.8 million<br>\$0.4 million from regular<br>resources and \$0.4 from other<br>resources<br>Total for programme<br>coordination and assistance:<br>\$0.6 million from regular<br>resources |