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**UNFPA – Country programmes and related matters**

**UNITED NATIONS POPULATION FUND**

**Country programme document for the Republic of Paraguay**

Proposed indicative UNFPA assistance: \$ 8.7 million: \$ 4.1 million from regular resources and \$ 4.6 million through co-financing modalities and/or other, including regular resources

Programme period: Five years (2015-2019)

Cycle of assistance: Seventh

Category per decision 2013/31: Yellow

Proposed indicative assistance (in millions of \$):

Strategic plan outcome area		Regular resources	Other	Total
Outcome 1	Sexual and reproductive health	1.5	4.1	5.6
Outcome 2	Adolescents and youth	0.8	0.2	1.0
Outcome 3	Gender equality and women's empowerment	0.7	0.1	0.8
Outcome 4	Population dynamics	0.7	0.2	0.9
	Programme coordination and assistance	0.4	-	0.4
	<b>Total</b>	<b>4.1</b>	<b>4.6</b>	<b>8.7</b>



## I. Situation analysis

1. Paraguay is a lower-middle-income country, with 23.8 per cent of the population living in poverty; 10.1 per cent live in extreme poverty. This affects particularly those populations living in rural areas, where 57.4 per cent live in poverty and 17.6 per cent in extreme poverty, respectively. (Source: 2013 Permanent Survey of Households, General Directorate of Statistics, Surveys and Census). Over the past years, economic growth was around five per cent annually, but income inequality between the poorest and the richest has increased, with indigenous and rural populations, adolescents, young people and women benefitting less than others.
2. The population was estimated at 6.6 million in 2012, with some 59 per cent of the total population living in urban areas; the rural population is facing challenges linked to the fast urbanization process. The indigenous population is estimated at 113.000 people, belonging to 19 ethnic groups, representing a great cultural diversity.
3. Some 60 per cent of the population is younger than 30 years of age, with 29 per cent aged 15-29 years; this offers the country an opportunity to benefit from a 'demographic dividend' contributing to the reduction of poverty and inequities over the coming years.
4. The total fertility rate decreased from 4.3 children per woman in 1998 to 2.5 children per woman in 2008. However, fertility rates vary widely among regions, income levels, and marginalized and excluded populations. The use of modern contraceptive methods among women of reproductive age who were married or in a union was 70.7 per cent (National Demographic Health Survey, 2008). The unmet need for family planning per woman of reproductive age decreased from 26.1 per cent in 1998 to 12.9 per cent in 2008.
5. The adolescent birth rate (for women aged 15-19 years) decreased from 66 births per 1,000 women in 2005 to 63 per 1,000 women in 2008; however, adolescent mothers account for 20 per cent of all births. Despite government efforts, the need to increase the availability of youth friendly reproductive health services and the provision of comprehensive sexuality education remains.
6. The maternal mortality ratio has decreased, from 127 maternal deaths per 100,000 live births in 2007 to 89 per 100,000 live births in 2011 (Ministry of Health, 2012). The main causes of maternal mortality are complications of induced and unsafe abortions, toxemia, hemorrhages and sepsis. Paraguay is unlikely to achieve Millennium Development Goal 5.
7. The National HIV Plan 2014-2018 devotes specific attention to adolescents and young people. In total, 7 out of 100 people with new HIV infections are adolescents; the major route of transmission is sexual intercourse (98.1 per cent, Ministry of Health, 2012).
8. Gender inequalities persist. Over 60 per cent of women report having been victim of sexual violence; nearly 20 per cent of cases are registered among women younger than 15

years. More efforts are required to record these cases through governmental institutions, in line with recommendations made by international human rights bodies.

9. There is limited recent disaggregated data available on adolescents, youth and excluded population groups, on gender-based violence, sexual violence, as well as sexual behaviour and related topics. Such data is critical for obtaining evidence for social policies that address social inequalities and subnational disparities.

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

10. The previous country programme (sixth cycle, 2007-2011), was extended for three years until 2014. The programme aimed at: (a) increasing access to culturally and gender-sensitive sexual and reproductive health services and education; (b) strengthening the capacity of women, young people and excluded populations to demand high-quality health services and education; (c) increasing the use of high-quality, disaggregated socio-demographic data at national, subnational and local levels; (d) incorporating population and development linkages into national and subnational policies, plans and strategies; and (e) promoting women's empowerment and autonomy and guarantee gender equity in public policies.

11. The final programme evaluation conducted by UNFPA and the Government in 2013 provided significant lessons learned and recommendations. One important lesson referred to the work at national and subnational levels, as well with community-based organizations, to promote the Programme of Action of the International Conference on Population and Development – notably, achievement of universal access to sexual and reproductive health and rights, including commodities, and improving maternal health. The recommendations included the following: (a) continue strengthening government and civil society capacity to advance with the Programme of Action of International Conference on Population and Development; (b) strengthen national capacity for reproductive health commodity security by supporting the procurement of contraceptives; (c) empower and strengthen capacities civil society promoting reproductive rights, non-discrimination, prevention of violence against women, including sexual violence; and (d) continue to focus attention on population dynamics and the production and dissemination of quality disaggregated data.

## **III. Proposed programme**

12. The proposed programme is aligned with national priorities, including those of the National Social Development Plan 2010-2020, the United Nations Development Assistance Framework (UNDAF), 2015-2019; the Programme of Action of the International Conference on Population and Development; and the UNFPA Strategic Plan, 2014-2017. The programme was developed in consultation with the Government, civil society organizations and United Nations system agencies; recommendations from evaluation of the previous country programme were considered.

13. The proposed strategies will focus on capacity building of government institutions and civil society organizations, at national and subnational levels, helping to achieve universal access to sexual and reproductive health and rights, and to improve maternal health, with an

emphasis on the most excluded and marginalized populations, including rural and indigenous populations, adolescents and women.

14. These efforts will be complemented by the generation of knowledge, which will be the basis for targeted evidence-based policy, advocacy and advice on prioritized matters, using strategic communication initiatives. These strategies will be sensitive to gender and socio-cultural diversity, embracing a human rights-based approach.

*Outcome 1: Sexual and reproductive health*

15. Two outputs are related to outcome 1 of the strategic plan contribute to the UNDAF outcome on achieving universal access to an integrated high-quality health care responding to diversity and the specific needs of the population.

16. Output 1: Strengthened capacity of government institutions and civil society organizations to improve access to and demand for youth-friendly services, family planning, HIV prevention with human rights, gender and culturally sensitive approaches.

17. UNFPA will achieve this output through: (a) capacity building to scale up access to high-quality sexual reproductive health services, emergency obstetric care and commodities; (b) technical assistance, advocacy and policy advice to increase access to, demand for and use of family planning services, adolescent-friendly health services, especially for excluded and marginalized populations; (c) advocacy and policy advice to improve the linkages between sexual reproductive health, gender-based violence, family planning and HIV prevention services.

18. Output 2: Strengthened capacities of government and civil society organizations, in selected health regions, to implement and monitor policies, norms and protocols on maternal health, family planning and HIV prevention, including in humanitarian settings.

19. UNFPA will achieve this output through: (a) advocacy, technical assistance and knowledge sharing to strengthen maternal health surveillance systems and improve monitoring of implementation of policies, norms and protocols, especially those related to sexual and reproductive health, including emergency obstetric care; and (b) technical assistance for the implementation of the Minimum Initial Service Package, particularly at the onset of a crisis.

*Outcome 2: Adolescents and youth*

20. The two outputs related to the strategic plan outcome 2 contribute to the UNDAF outcome on advancing universal access and completion of high-quality education at all levels.

21. Output 1: Increased capacity of government institutions to design, implement and monitor public policies and programmes for adolescents and youth, including comprehensive sexuality education, with gender equality and culturally sensitive approaches.

22. UNFPA will achieve this output through: (a) policy guidance, and technical assistance, partly by brokering South-South cooperation for the inclusion of comprehensive sexuality education materials in health technical schools; and (b) technical assistance to analyse and monitor the implementation of public policies aimed at addressing the rights of adolescents and young people, including their sexual and reproductive rights.

23. Output 2: Strengthened engagement of civil society organizations to promote the rights of adolescents and youth, with emphasis on sexual and reproductive rights, especially those of marginalized and excluded groups.

24. UNFPA will achieve this output through: (a) advocacy, policy advice and strategic communication, to enhance adolescents and youth participation in the design and implementation of public policies; and (b) technical assistance, to strengthen community-led organizations and networks' capacities for promoting and defending the reproductive health and rights of adolescents and youth.

*Outcome 3: Gender equality and women's empowerment*

25. The output related to strategic plan outcome 3 will contribute to the UNDAF outcome on protecting and promoting the rights of all people, with an emphasis on those that are excluded or marginalized.

26. Output 1: Improved capacities of government institutions and civil society organizations to provide a coordinated response to prevent and address gender-based violence, with emphasis on sexual violence, promoting non-discrimination, including in humanitarian settings.

27. UNFPA will achieve this output through (a) technical assistance to selected institutions in implementing the comprehensive care protocol for victims of gender-based violence, focusing on sexual violence, particularly in humanitarian settings; (b) technical assistance for capacity building of civil society organizations, to advocate for a coordinated response to gender-based violence, focusing on sexual violence; and (c) advocacy and policy dialogue to prevent and address discrimination related to sexual orientation and gender-based violence, particularly among the most disadvantaged populations.

*Outcome 4: Population dynamics*

28. The output related to strategic plan outcome 4 will contribute to the UNDAF outcome on improving social investment.

29. Output 1: Strengthened capacity of government institutions and civil society organizations for ensuring the availability of data on socio-demographic issues, gender-based violence, sexual and reproductive rights, maternal mortality, adolescents and young people for the formulation and implementation of evidence-based policies and programmes.

30. UNFPA will achieve this output through: (a) systematic and well-structured knowledge-management initiatives, such as the development of research studies, surveys and the systematization of good practices and lessons learned, particularly those related to adolescent pregnancy (under the age of 15 years), sexual violence and maternal mortality; (b) technical assistance, including brokering South-South collaboration, to government institutions and civil society organizations to produce high-quality disaggregated data and other evidence on population dynamics, gender-based violence, including sexual violence, reproductive health, maternal health, and adolescents and youth; and (c) advocacy and policy advice for the use of data to formulate and implement public policies.

#### **IV. Programme management, monitoring and evaluation**

31. UNFPA and the Ministry of Foreign Affairs will coordinate the overall implementation of the country programme. The preferred implementation arrangement will be national execution, supported through carefully selected implementing partners based on their ability to deliver high-quality programmes at the national and subnational levels. UNFPA will continuously monitor the performance of its partners and make adjustments as necessary.

32. A robust results-based management approach will be applied for planning, monitoring and evaluating the country programme. UNFPA will rely, to the extent possible, on national monitoring systems and efforts by civil society organisations. Where feasible, UNFPA and other United Nations organizations will develop joint programmes.

33. The country office includes staff funded through the institutional budget of UNFPA to perform programmatic and administrative functions. In order to strengthen the implementation of the programme, UNFPA will earmark programme funds to ensure technical expertise as well as administrative support to ensure adequate implementation.

34. UNFPA will prioritize capacity development through national and international experts, including technical, operational and programmatic support organized by UNFPA headquarters and the Regional Office for Latin America and the Caribbean.

35. UNFPA will develop a resource mobilization strategy to engage government institutions to contribute and leverage resources. The strategy will include several modalities for contributions and partnerships, involving international donors and the private sector. In the event of an emergency, UNFPA may, in consultation with the Government, reprogramme activities, especially life-saving measures, to better respond to humanitarian situations.

## RESULTS AND RESOURCES FRAMEWORK FOR PARAGUAY, 2015-2019

<p><b>National priority:</b> Achieve significant progress in reducing poverty and improving income and working conditions, as well as in realizing education, health, nutrition, water and sanitation rights, with the support of an equitable tax structure and budget promoting human rights and equity (National Social Development Plan 2010-2020).</p> <p><b>UNDAF outcome:</b> By the end of 2019, the United Nations organizations will have contributed to the achievement of the universal access of to integrated quality health health responding to diversity and the specific needs of the population.</p>				
UNFPA strategic plan outcome	Country programme outputs	Output indicators, baselines and targets	Partners	Indicative resources
<p><b>Outcome 1: Sexual 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>Outcome indicator</p> <ul style="list-style-type: none"> <li>Number of protocols and norms for sexual and reproductive health that meet human rights standards, including freedom from discrimination, coercion and violence, implemented Baseline: 10; Target: 13</li> </ul>	<p><u>Output 1:</u> Strengthened capacity of government institutions and civil society organizations to improve access to and demand for youth-friendly services, family planning, HIV prevention with human rights, gender and culturally sensitive approaches.</p>	<ul style="list-style-type: none"> <li>Percentage of health units in selected health regions that have health care providers trained to implement updated norms on family planning and HIV. Baseline: 0%; Target: 50%</li> <li>Number of health regions, supported by UNFPA, with adolescent friendly health services. Baseline: 1; Target: 6</li> <li>Number of UNFPA- supported civil society organizations by that promote young people's rights to demand high-quality health services. Baseline: 2; Target: 8</li> </ul>	<p>Ministry of Health; Ministry of Finance; Reproductive Health Commodity Security Committee; national health care system; health regions; civil society organizations; community based organizations; parliamentarians; media, academic institutions; donors; United Nations partner organizations</p>	<p>\$4.2 million (\$0.9 million from regular resources and \$3.3 million from other resources)</p>
	<p><u>Output 2:</u> Strengthened capacities of regional health institutions and civil society organizations to implement and monitor policies, norms and protocols on maternal health, family planning and HIV prevention, including in humanitarian settings.</p>	<ul style="list-style-type: none"> <li>Percentage of health services in selected health regions that adequately implement norms and protocols for maternal health. Baseline: 10% Target: 50%</li> <li>Number of selected national institutions trained on the implementation of the Minimum Initial Service Package for reproductive health in crisis situations. Baseline: 0; Target: 5</li> </ul>		<p>\$1.4 million (\$0.6 million from regular resources and \$0.8 million from other resources)</p>
<p><b>National priority:</b> Achieve significant progress in reducing poverty and improving income and working conditions, as well as in realizing education, health, nutrition, water and sanitation rights, with the support of an equitable tax structure and budget promoting human rights and equity (National Social Development Plan 2010-2020).</p> <p><b>UNDAF outcome:</b> By the end of 2019, the United Nations organizations will have contributed to advancing universal access and completion of high-quality education at all levels.</p>				
<p><b>Outcome 2: Adolescents and youth</b></p> <p>Outcome indicator:</p> <ul style="list-style-type: none"> <li>Number of policies and implementation mechanisms for the advance of rights and the exercise of citizenship among adolescents and youth.</li> </ul>	<p><u>Output 1:</u> Increased capacity of government institutions to design, implement and monitor public policies and programmes for adolescents and youth, on sexual reproductive health and rights, including comprehensive sexuality education, with gender equality and culturally sensitive approaches.</p>	<ul style="list-style-type: none"> <li>Number of public policies and programmes for adolescents and youth supported by UNFPA developed with the civil society organizations participation. Baseline: 2; Target: 5</li> <li>Number of health technical schools that have provided comprehensive sexuality education for adolescents and youth Baseline: 3; Target: 12</li> </ul>	<p>National Secretary of Youth; National Secretariat of Childhood and Adolescents; Ministry of Education; Ministry of Health; parliamentarians; media; NGOs; academic institutions</p>	<p>\$0.6 million (\$0.5 million from regular resources and \$0.1 million from other resources)</p>

## RESULTS AND RESOURCES FRAMEWORK FOR PARAGUAY, 2015-2019

	<p><b>Output 2:</b> Strengthened engagement of civil society organizations to promote the rights of adolescents and youth, with emphasis on sexual and reproductive rights, especially those of marginalized and excluded groups.</p>	<ul style="list-style-type: none"> <li>Number of youth networks, supported by UNFPA, that actively promote and track policies and programmes addressing the rights of adolescents and youth. Baseline: 0; Target: 3</li> <li>Number of civil society organisations supported by UNFPA, advocating for sexual and reproductive health and rights of adolescents and youth, and non-discrimination. Baseline: 5; Target: 10</li> </ul>		<p>\$0.4 million (\$0.3 million from regular resources and \$0.1 million from other resources)</p>
<p><b>National priority:</b> Strengthen the capacity of the State to guarantee the rights of all people and society's capacities to fully exercise them.  <b>UNDAF outcome:</b> By the end of 2019, the United Nations organizations will have contributed to advancing the protection and promotion of the rights of all people, with emphasis on those that are excluded or marginalized.</p>				
<p><b>Outcome 3: Gender equality and reproductive rights.</b></p> <p>Outcome indicator:</p> <ul style="list-style-type: none"> <li>Policies and implementation mechanisms to respond in preventing and addressing gender-based violence, with emphasis on sexual violence, non-discrimination, including in humanitarian settings. Base Line: 3; Target: 6</li> </ul>	<p><b>Output 1:</b> Improved capacities of government institutions and civil society organizations to provide a coordinated response to prevent and address gender-based violence, with emphasis on sexual violence, promoting non-discrimination, including in humanitarian settings.</p>	<ul style="list-style-type: none"> <li>Number of health services in selected health regions that implement the comprehensive care protocol for victims of gender-based violence, focusing on sexual violence. Baseline: 0; Target: 18</li> <li>Number of civil society organizations supported by UNFPA advocating for a coordinated response to gender-based violence, focusing on sexual violence and non-discrimination. Baseline: 4; Target: 7</li> </ul>	<p>Ministries of women; health; and education; justice system; Parliament; uniformed forces; civil society organizations; academic institutions; United Nations organizations</p>	<p>\$0.8 million (\$0.7 million from regular resources and \$0.1 million from other resources)</p>
<p><b>National priority:</b> Policies to eradicate poverty. Food security bill (project under consideration by Parliament). Law on infant nutritional assurance. Constitutional precept of 20 per cent of the national government budget for education.  <b>UNDAF outcome:</b> By the end of 2019, the United Nations organizations have contributed to improving social investment through supporting mechanisms for a more equitable tax collection.</p>				
<p><b>Outcome 4: Population dynamics</b></p> <p>Outcome indicator:</p> <ul style="list-style-type: none"> <li>Number of studies, research and analysis provide evidence and arguments to position the demographic dividend, linked to sexual and reproductive rights and HIV, and its articulations to advocate for increased investment in adolescence and youth. Baseline: 0; Target: 4</li> </ul>	<p><b>Output 1:</b> Strengthened capacity of government institutions and civil society organizations to ensure the availability socio-demographic data on gender-based violence, sexual and reproductive rights, and adolescents and young people for the formulation and implementation of evidence-based policies and programmes.</p>	<ul style="list-style-type: none"> <li>Number of research studies and surveys conducted on socio-demographic issues, adolescent pregnancy, maternal mortality, gender-based violence and sexual and reproductive rights of adolescents and young people. Baseline: 2; Target: 6</li> <li>Number of institutions using data and evidence, obtained with UNFPA support, for the formulation of policies and programmes. Baseline: 0; Target: 8</li> </ul>	<p>Technical Planning Secretariat; Statistics Office; associations of population studies and research; academic institutions, Ministries of health and education; civil society organizations</p>	<p>\$0.9 million (\$0.7 million from regular resources and \$0.2 million from other resources)</p> <hr/> <p>Programme coordination and assistance: \$0.4 million from regular resources</p>