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**UNFPA – Country programmes and related matters**

**UNITED NATIONS POPULATION FUND**

**Draft country programme document for Maldives**

Proposed UNFPA assistance: \$1.5 million from regular resources and \$0.5 million through co-financing modalities and/or other, including regular, resources

Programme period: Five years (2008-2012)

Cycle of assistance: Fourth

Category per decision 2005/13: A

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

	Regular resources	Other	Total
Reproductive health	0.85	-	0.85
Gender	0.50	0.5	1.00
Programme coordination and assistance	0.15	-	0.15
Total	1.50	0.5	2.00

## I. Situation analysis

1. Maldives consists of approximately 1,200 small tropical islands, of which 196 are inhabited. The population reached nearly 300,000 in 2006. One third of the population lives in the capital, Male'. The rest of the population is scattered over 195 islands, many with fewer than 200 residents.

2. Maldives has an impressive economic growth rate and is expected to achieve middle-income country status in 2011. The economic impact of the 2004 tsunami and the burden of reconstruction efforts resulted in the decision by the United Nations to maintain the country's status as a least-developed country until 2008, when a three-year transition period to middle-income status will begin.

3. The annual population growth rate was 1.69 per cent from 2000-2006. Life expectancy at birth rose to above 70 for both sexes in 2004, and the total fertility rate decreased to 2.8 children per woman in 2000. Maldives has a high proportion of young people: 24 per cent aged 14-24 years. Greater investment in the social sector is needed to harness the full potential of young people for future growth and development.

4. The country is making good progress in meeting the Millennium Development Goals and is expected to achieve most of the Goals, except those relating to gender equality and environmental sustainability. Maternal and infant mortality have declined. In 2004-2005, the maternal mortality ratio was 72 deaths per 100,000 live births, and the infant mortality rate was 12 deaths per 1,000 live births. Although HIV prevalence is low, several risk factors exist that could fuel the epidemic unless preventive measures are taken.

5. The country faces a number of challenges, as noted in the common country assessment (CCA): (a) environmental vulnerability; (b) the dispersed nature of island communities; (c) an over reliance on tourism and fisheries; and (d) regional disparities in income and access to physical infrastructure and social services. Social unrest, marked by increasing levels of violence and drug

abuse, is evident. A growing number of young people use drugs and engage in high-risk behaviour, including unprotected sex. Young people have limited knowledge of how to prevent sexually transmitted infections and HIV, and unmarried young people have limited access to reproductive health services.

6. The low contraceptive prevalence rate, high contraceptive discontinuation rates and high unmet need for family planning are major concerns that threaten previous gains in maternal health. The increasing number of abortions is an indicator of the unmet need for family planning. Although cancers of the reproductive tract and infertility are reported, data are not systematically collected; therefore, prevalence rates are uncertain.

7. While Maldives ranks well ahead of other South Asian countries on key development indicators, women still face constraints regarding opportunities for employment, access to higher education, and equitable participation in decision-making. Despite recent efforts to establish support services for victims of gender-based violence, and high-level political support for such efforts, much remains to be done. Violence against women is underreported due to a variety of reasons, including the stigma surrounding the issue and the fear of retribution. In general, such violence is considered to be a private matter rather than an infringement of human rights. Despite efforts to advance gender equity in the country, including the enactment of a family law, major challenges remain.

## II. Past cooperation and lessons learned

8. During three previous country programmes, UNFPA helped to build a strong information base and to increase knowledge of reproductive health, including family planning. Advocacy efforts helped to align national policies and programmes with the principles of the International Conference on Population and Development (ICPD). Audits of maternal deaths improved antenatal coverage and led to measures to enhance the quality of reproductive health care.

9. A noteworthy achievement was the successful piloting of the life-skills education programme in selected schools in Male'. The programme included support for a culturally appropriate life-skills education package for primary, secondary and out-of-school young people, along with training for trainers and facilitators. The programme also introduced youth-friendly health services at the National Youth Centre and through the Society for Health Education, a non-governmental organization (NGO).

10. The programme also supported the 2006 census as well as a nationwide survey that helped to increase understanding of gender-based violence. The survey indicated the existence of extensive domestic violence and child abuse, particularly among younger women and girls. Priorities for the Government and donors include implementing policy reforms to address gender-based violence and strengthening the support services for the victims of such violence.

### III. Proposed programme

11. The proposed programme reflects the findings of the CCA and contributes to the priorities of the 2008-2010 United Nations Development Assistance Framework (UNDAF) and the Millennium Development Goals. The programme conforms to the policies and strategies identified in the seventh national development plan and builds on the experience from earlier country programmes as well as the tsunami recovery programme. The proposed country programme recognizes the reproductive rights of women, men and young people, especially of vulnerable populations, as well as the linkages between reproductive rights and the goals of the ICPD Programme of Action, the Beijing Platform for Action, the Convention on the Elimination of All Forms of Discrimination against Women and the Millennium Development Goals. The programme reflects the new strategic direction of UNFPA and takes into account the comparative advantages of UNFPA as well as the interventions planned by other development partners.

12. The goal of the fourth country programme is to contribute to enhancing the quality of life of the people of Maldives through improved reproductive health, gender equality and women's empowerment. The country programme will contribute to the UNDAF priority areas of social and economic equity and governance. The proposed programme has two components: (a) reproductive health; and (b) gender.

#### *Reproductive health component*

13. The expected outcome of the reproductive health component is improved utilization of high-quality reproductive health information and services for women and men, particularly those most vulnerable. This outcome contributes to the UNDAF outcome on health, education, social protection, income and employment opportunities for the most vulnerable segments of society.

14. Output 1: Enhanced capacity of the national health system to deliver high-quality, integrated and comprehensive reproductive health services. This output will be achieved by: (a) developing a comprehensive plan to enhance the capacity of the health system to manage and deliver high-quality, integrated and comprehensive reproductive health services, in particular family planning services, based on a thorough assessment of the health system; (b) supporting a reproductive health morbidity study as input for the capacity development plan; (c) operationalizing the national policy on skilled birth attendants to ensure the application of minimum standards in maternal health care; (d) implementing the reproductive health plan of action, including the development of an exit strategy for external support of contraceptives and technical assistance to widen the choice of contraceptive methods; and (e) integrating reproductive health and gender issues into the national disaster preparedness plan.

15. Output 2: Enhanced national capacity to improve evidence-based advocacy and behaviour change communication on reproductive health and rights for women, men and young people. This

output will be achieved by: (a) building national capacity to develop and implement an evidence-based behaviour change communication plan to promote good health-seeking behaviour; (b) creating an enabling environment by promoting awareness of reproductive health issues and mobilizing the support of policy and decision makers through evidence-based and culturally sensitive advocacy and social mobilization interventions; and (c) strengthening civil society and community networks to empower couples and individuals to exercise their rights to high-quality reproductive health care. The Ministry of Health, the Ministry of Information, non-governmental organizations (NGOs) and private-sector firms will be key partners under this output.

16. Output 3: Improved access to reproductive health information and services for young people. Key strategies include: (a) developing a youth health strategy that incorporates access to information, counselling and clinical services; (b) upscaling life-skills education in schools by promoting an enabling environment and by strengthening the counselling skills of secondary school teachers, health assistants and counsellors; (c) using out-of-school settings, such as youth clubs, to provide young people with reproductive health information and counselling; (d) establishing a peer education programme as well as mechanisms to facilitate the involvement of young people in relevant policies and programmes; and (e) improving access to youth-friendly counselling and clinical reproductive health services.

17. The national component of this strategy will focus on: (a) identifying the best method of service delivery; (b) establishing service standards; and (c) training service providers. Key partners include the Ministry of Education; the Ministry of Youth and Sports; the Ministry of Health; the United Nations Children's Fund (UNICEF), and the World Health Organization (WHO).

18. Output 4: Enhanced capacity of the health sector to respond to gender-based violence. This output will address critical gaps in health services for identifying and managing gender-based

violence. The strategy will define needs-based community support services in Male' and selected atolls and will develop a coordinated response for women and girls who require support services. In the health sector, the focus will be on: (a) building the capacity of service providers to detect and manage cases of gender-based violence through counselling, care and referral, using international protocols and guidelines; (b) introducing guidelines and standard reporting procedures on gender-based violence as part of the health management information system; and (c) reviewing and replicating the family protection unit at Indira Gandhi Memorial Hospital in Male' in other health facilities.

#### *Gender component*

19. The expected outcome of the gender component is improved fulfilment of the rights of women and girls. While gender and rights are integrated in all areas of the country programme, this outcome contributes to the UNDAF outcome on governance by promoting women's empowerment, equitable participation and access to rights.

20. Output 1: Increased availability and utilization of gender-disaggregated data and information for equitable resource allocation and improved fulfilment of the rights of women and girls. This output involves gender analysis and the dissemination of census findings. The programme will: (a) use innovative approaches to disseminate and promote the use of gender-sensitive data and analysis; (b) support a gender budget analysis to provide insights into gaps in current resource allocations and recommend how equitable planning can occur; and (c) develop institutional capacity to monitor and track progress related to national gender goals and international commitments. The Ministry of Planning and National Development will be the key partner, along with the Ministry of Gender and Family and other sectoral ministries.

21. Output 2: Improved awareness of women's rights at all levels and improved accountability of national policies and systems. This output will

support the development of an action plan based on the thirty-seventh session of the Committee on the Elimination of Discrimination against Women. The action plan will raise awareness among parliamentarians and decision makers of the provisions of the Convention on the Elimination of All Forms of Discrimination against Women and their application within the national legal system and policy frameworks. The programme will prepare a strategy to mainstream gender in the legal system and establish a monitoring process. The programme will also help to develop advocacy materials on the rights of women and young girls within the legal system, providing information on procedures and options for legal redress. The Ministry of Gender and Family, the lead partner for this output, will cooperate closely with the Ministry of Justice, the Attorney General and the Maldives Law Commission.

22. Output 3: Strengthened capacities of key stakeholders to promote gender equality and the empowerment and protection of women and young girls. The programme will help to: (a) develop and implement a national action plan on gender-based violence; (b) undertake advocacy and other actions to encourage men and young boys to prevent gender-based violence; and (c) develop an evidence-based communication strategy to create a supportive environment in which to advance gender equality and combat gender-based violence. The Ministry of Gender and Family, the lead partner for this output, will work closely with the Ministry of Health, the Ministry of Justice, NGOs and community groups.

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

23. The Department of External Resources will serve as the central coordinating agency for the programme. The Ministries of Health; Education; Youth and Sports; Gender and Family; and Planning and National Development, as well as atoll authorities, will implement the various components.

24. UNFPA and the Government will implement, monitor and evaluate the country programme within the context of the UNDAF, and in accordance with United Nations Development Group and UNFPA guidelines and procedures. These guidelines include field visits, annual and midterm programme review meetings, surveys, and the use of qualitative and quantitative indicators. A baseline survey of output indicators is slated for 2007.

25. The country office consists of a non-resident UNFPA country director based in Colombo, Sri Lanka; an assistant representative and various support staff. UNFPA will recruit national project personnel to strengthen the implementation of the programme. The UNFPA country technical services team in Kathmandu, Nepal, will provide technical support.

## RESULTS AND RESOURCES FRAMEWORK FOR MALDIVES

<b>National priorities (2006-2010):</b> (a) Maldives will become a more urbanized and equitable society, with a highly educated population; high-quality medical care; and 10 years of formal schooling available to all; (b) institutional frameworks will be developed and a multi-disciplinary protection system for children and vulnerable women will be established; and (c) extreme poverty will be eliminated, equity increased and gender equality promoted				
<b>UNDAF outcome:</b> by 2010, the most vulnerable and marginalized sections of society in Maldives will enjoy better health status; improved access to quality education; enhanced social protection; and income and employment 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	<p><u>Outcome:</u> Improved utilization of high-quality reproductive health information and services for women and men, particularly the most vulnerable</p> <p><u>Outcome indicators:</u></p> <ul style="list-style-type: none"> <li>▪ Contraceptive prevalence rate for modern contraceptive methods</li> <li>▪ Proportion of births attended by skilled health personnel</li> <li>▪ Percentage increase in health budget allocated to contraceptives</li> <li>▪ Percentage of service delivery points offering at least three modern methods of contraceptives</li> <li>▪ Proportion of young people aged 10-24 years aware of reproductive health issues, including HIV/AIDS prevention</li> <li>▪ Youth health strategy that supports access by young people to reproductive health information and services in place</li> </ul>	<p><u>Output 1:</u> Enhanced capacity of the national health system to deliver high-quality, integrated and comprehensive reproductive health services</p> <p><u>Output indicators:</u></p> <ul style="list-style-type: none"> <li>▪ Approved plan to build capacity of the health system in reproductive health based on comprehensive assessment of the system is available</li> <li>▪ Proportion of service delivery points compliant with national standards in priority reproductive health areas</li> <li>▪ System for accreditation of skilled birth attendants developed</li> <li>▪ An exit strategy for UNFPA funding of contraceptives implemented</li> <li>▪ National emergency preparedness plan includes reproductive health and gender issues</li> </ul> <p><u>Output 2:</u> Enhanced national capacity to improve evidence-based advocacy and behaviour change communication on reproductive health and rights for women, men and young people</p> <p><u>Output indicators:</u></p> <ul style="list-style-type: none"> <li>▪ Evidence-based, comprehensive behaviour change communication plan that addresses the sexual and reproductive health of young people and gender-based violence implemented</li> <li>▪ Number of advocacy and social mobilization events held to promote reproductive health</li> <li>▪ Civil society partnerships promote reproductive health and reproductive rights</li> </ul> <p><u>Output 3:</u> Improved access to reproductive health information and services for young people</p> <p><u>Output indicators:</u></p> <ul style="list-style-type: none"> <li>▪ Youth health strategy developed with the active participation of young people</li> <li>▪ Youth advisory panel established and operational</li> <li>▪ Number of schools teaching life-skills education</li> <li>▪ Number of out-of-school young people able to access reproductive health information</li> <li>▪ Number of service delivery points offering reproductive health services to young people</li> </ul> <p><u>Output 4:</u> Enhanced capacity of the health sector to respond to gender-based violence</p> <ul style="list-style-type: none"> <li>▪ Proportion of health providers skilled in screening and managing gender-based violence cases</li> <li>▪ Proportion of service delivery points that have a system for the detection, care and referral of gender-based violence cases</li> <li>▪ Gender-based violence reporting introduced in health management and information systems</li> </ul>	<p>Ministry of Health; Ministry of Gender and Family; WHO; UNICEF</p> <p>Ministry of Health; NGOs</p> <p>Ministries of: Health; Education; Youth and Sports; Gender and Family; Atoll authorities; NGOs; UNICEF; WHO</p> <p>Ministry of Health; Ministry of Gender and Family; Atoll authorities; NGOs; UNICEF</p>	\$0.85 million from regular resources

<b>National development priorities (2006-2010):</b> (a) mainstream gender and children's rights concerns; (b) support the strengthening of the justice and legal system to protect the rights of children and women; (c) develop mechanisms to increase the economic and socio-political participation of women; and (d) eliminate extreme poverty, increase equity and promote gender equality				
<b>UNDAF outcome:</b> people enjoy greater rights and have increased capacity to fulfil their responsibilities and to actively participate in national and local levels of governance				
<b>Programme component</b>	<b>Country programme outcomes, indicators, baselines and targets</b>	<b>Country programme outputs, indicators, baselines and targets</b>	<b>Partners</b>	<b>Indicative resources by programme component</b>
Gender	<p><u>Outcome:</u> Improved fulfilment of the rights of women and girls</p> <p><u>Outcome indicators:</u></p> <ul style="list-style-type: none"> <li>▪ Proportion of sectoral resource allocations and plans with improved gender equity</li> <li>▪ Increased awareness of the rights of women and girls</li> <li>▪ Capacity-building undertaken regarding commitments for the Convention on the Elimination of All Forms of Discrimination against Women and national accountability to human rights covenants</li> <li>▪ Proportion of women and girls in communities benefiting from support services for victims of gender-based violence</li> </ul>	<p><u>Output 1:</u> Increased availability and utilization of gender-disaggregated data and information for equitable resource allocation and improved fulfilment of the rights of women and girls</p> <p><u>Output indicators:</u></p> <ul style="list-style-type: none"> <li>▪ Gender analysis of census data carried out and disseminated</li> <li>▪ Gender budget analysis completed</li> <li>▪ Gender-related indicators integrated into monitoring and tracking systems</li> <li>▪ Findings of the national survey on gender-based violence disseminated</li> </ul> <p><u>Output 2:</u> Improved awareness of women's rights at all levels and improved accountability of national policies and systems</p> <p><u>Output indicators:</u></p> <ul style="list-style-type: none"> <li>▪ Action plan to follow-up on the thirty-seventh session of the Committee on the Elimination of Discrimination against Women developed</li> <li>▪ Mechanism to monitor compliance with the Convention on the Elimination of All Forms of Discrimination against Women in place</li> <li>▪ Advocacy materials utilized to increase awareness of the rights of women and girls</li> <li>▪ Strategy to mainstream gender in the legal system developed</li> </ul> <p><u>Output 3:</u> Strengthened capacity of key stakeholders to promote gender equality and the empowerment and protection of women and young girls</p> <p><u>Output indicators:</u></p> <ul style="list-style-type: none"> <li>▪ The national action plan on gender-based violence finalized and implemented</li> <li>▪ Number of advocacy events organized to engage men and young boys</li> <li>▪ Communication strategy to address gender-based violence developed and implemented</li> </ul>	<p>Ministry of Planning and National Development; Ministry of Gender and Family</p> <p>Ministry of Gender and Family; Ministry of Justice; NGOs</p> <p>Ministries of: Gender and Family; Internal Affairs; Justice; and Health; NGOs</p>	<p>\$1 million (\$0.5 million from regular resources and \$0.5 million from other resources)</p> <hr/> <p>Total for programme coordination and assistance: \$0.15 million from regular resources</p>