Active in the Philippines since 1970, UNFPA backs national objectives to achieve universal access to sexual and reproductive health care, and reduce maternal deaths. Though maternal mortality is slowly decreasing, the unmet need for family planning has edged up. In disadvantaged areas, UNFPA supports health systems to deliver core services to women and their newborn infants, young people, and men. It partners with government agencies on using effective data to guide policy-making, and civil society organizations to advocate for reproductive rights.

**KEY RESULTS ACHIEVED IN 2018**

**MINIMUM INITIAL SERVICES PACKAGE**
34 Health service providers and managers were trained on the minimum initial service package

**ESSENTIAL SERVICES FOR GENDER-BASED VIOLENCE SURVIVORS**
Women and girls who were subjected to violence have accessed the essential services package

**CENSUS DISAGGREGATION**
Census results disaggregated by age and sex were available and publicly accessible online

**SEXUAL AND REPRODUCTIVE HEALTH COORDINATION BODY DURING CRISIS**
During a humanitarian crisis, a functioning inter-agency sexual and reproductive health coordination body was in place

**YOUTH PARTICIPATION IN HUMANITARIAN RESPONSE**
During a humanitarian crisis, young people were included in decision-making mechanisms in all phases of humanitarian response

**FAMILY PLANNING POLICIES**
11 new private sector companies developed family planning in the workplace policies

**ESSENTIAL SERVICES FOR GENDER-BASED VIOLENCE SURVIVORS**
The minimum standards for the prevention of and response to gender-based violence in emergencies were applied
**EMERGENCIES KEY RESULTS**

### PEOPLE REACHED
- Affected population who directly benefited from all types of ERH kits **25,494**
- Affected population reached with Adolescent SRH **5,712**

### SERVICES DELIVERED
- Number of Dignity Kits distributed **5,341**
- Safe spaces supported by UNFPA (includes women’s, girls’ and youth spaces) **6**
- Mobile clinics supported by UNFPA **25**
- Functional health facilities that provide Emergency Obstetric Care (EmOC) **10**
- Service delivery points (SDPs) supported that provide clinical management of rape (CMR) services **1**

### CAPACITY STRENGTHENED
- Number of personnel trained on Minimum Initial Service Package (MISP) **25**
- Number of youth facilitators, peers and volunteers trained on SRH/GBV **25**

**PROGRAMME ACTIVITIES**

**Integrated sexual and reproductive health services**
- **Total Spending:** $2,932,340 (67.9%)
- **Implemented by:**
  - UNFPA $2,012,883 (69%)
  - NGO $879,701 (30%)
  - Gov $39,756 (1%)
- **Funded by:**
  - Core Resources (66%)
  - Non-core Resources (34%)

**Gender equality**
- **Total Spending:** $628,768 (14.6%)
- **Implemented by:**
  - UNFPA $215,815 (34%)
  - NGO $395,512 (63%)
  - Gov $17,441 (3%)
- **Funded by:**
  - Core Resources (37%)
  - Non-core Resources (63%)

**Organizational effectiveness**
- **Total Spending:** $0
- **Implemented by:**
- **Funded by:**

**Analysis on population dynamics**
- **Total Spending:** $498,460
- **Implemented by:**
  - UNFPA $157,847 (32%)
  - NGO $276,648 (56%)
  - Gov $63,965 (13%)
- **Funded by:**
  - Core Resources (96%)
  - Non-core Resources (4%)

**Adolescents and youth**
- **Total Spending:** $256,135 (5.9%)
- **Implemented by:**
  - UNFPA $11,701 (5%)
  - NGO $244,410 (95%)
- **Funded by:**
  - Core Resources (74%)
  - Non-core Resources (26%)

**Technical Notes and Sources**

Key Achievement Results as of December 2018. Emergency Key Results for 2018 as of May 2019. Data for the Emergency Key Results will be updated on the UNFPA website on a rolling basis as it becomes available from reporting countries. For most up to date data access the online results portal.