

Format for the Country Programme Performance Summary

A. Country Information		
Country name: Côte d'Ivoire		
	Current programme period: 2017-2020	Cycle of assistance: 7th

B. Country Programme Outputs Achievement

SP1-1 Output 1: National capacity is strengthened to increase the provision of integrated, high-quality sexual and reproductive health services, including in humanitarian settings.

Indicators	Baseline	Target	End-line data
Number of health facilities strengthened to provide basic emergency obstetric and neonatal care	185	385	<p style="text-align: center;">325</p> <p>As a result of the programme's interventions, 140 health structures have been strengthened as of June 30, 2019, to provide basic emergency obstetric and neonatal care. The target of 100% completion by the end of 2020 can be achieved. Capacity building consisted in training providers in Maternal Death Review and Response Surveillance and in equipping delivery health facilities with equipment and products to offer the following six basic EmONC functions:</p> <ol style="list-style-type: none"> 1. The administration of antibiotics by injection 2. The administration of oxytocics by injectable route 3. Administration of sedatives / anticonvulsants by injection 4. Manual extraction of the placenta ; 5. Uterine revision ; 6. Assisted vaginal delivery by vacuum or forceps extraction.
Number of health facilities strengthened to provide comprehensive emergency obstetric and neonatal care	48	88	<p style="text-align: center;">82</p> <p>The programme registered 34 health facilities out of 88 targeted, whose capacities had been strengthened as of June 30, 2019, representing 136.0% completion for the provision of quality comprehensive emergency obstetric and neonatal care, or 85.0% completion of the targeted facilities. This good performance ensures that the programme will reach 100% completion by the end of 2020, as only 3 of the 88 targeted health facilities still need to be covered by C-EmONC,</p> <ul style="list-style-type: none"> – Capacity building in comprehensive emergency obstetric care C-EmONCC involved support for the performance of Caesarean section and blood transfusion at the referral center level in addition to the six functions of the EmONC they offer.
Number of health facilities strengthened to provide integrated quality reproductive health services	389	589	<p style="text-align: center;">560</p> <p>The programme supported 171 health facilities corresponding to a 136.8% completion rate as of June 30, 2019, which have been strengthened to offer integrated quality reproductive health services. This intervention contributed to:</p> <ul style="list-style-type: none"> – the effective integration of ANC, FP, EmONC and HIV services in these facilities, – the implementation of the RH Services Reorganization Strategy, – training of health providers in EmONC and FP, – cervical cancer screening, STI/HIV – conduct of the fairground consultations (free of charge) – supply in reproductive health products. <p>The performance is at a very good level of progression with 85.5% as there is only a 14.5% completion rate left to reach 100% at the end of the programme by the end of 2020.</p>
Number of women with fistulas treated	2,564	3,500	<p style="text-align: center;">3,500</p> <p>936 women and girls with fistula were operated free of charge either 88% implementation rate out of 936 planned from donor funding (KOICA). This performance is reinforced by the other results obtained which relate to :</p> <ul style="list-style-type: none"> – 343 health providers have been trained in pre-, per- and post-

			<p>operative fistula management. Similarly, 98 health providers, including 23 newly trained providers, were trained in 2018 in fistula surgery.</p> <ul style="list-style-type: none"> - A National Plan for the Prevention and Treatment of Obstetric Fistula covering the period 2017-2020 has been developed for nation-wide implementation. The current level of progress of the fistula programme is at a very good completion rate of 98.2% and makes it possible to envisage reaching 100% performance at the end of the programme in December 2020, since only 115 women and girls with fistula remain to be operated on. <p>The programme also focused on training national managers and NGOs in preparing for and responding to humanitarian emergencies:</p> <ul style="list-style-type: none"> - 98 health providers from 8 Health Districts and the NGOs AIBEF, Bouaké Red Cross and Korhogo; as well as 25 youth volunteers from the Red Cross of Taabo, Bouaflé, Bouaké, Séguéla and Yamoussoukro and 6 managers from the Health Districts were strengthened on the Minimum Emergency Package (MISP) in reproductive health (RH) and prevention of sexual violence to enable them to respond adequately to humanitarian emergencies.
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Key Achievements

The external evaluation of the 7th Programme noted a very good overall performance of Output 1 measured by four indicators. Thus, the completion rate was 119.3% as of June 30, 2019, when the completion rate was 80.3% six months before the end of the programme. This remarkable performance has been observed continuously over the years 2017, 2018, 2019. Thus, the availability of health facilities that offer EmONC has improved nationally, increasing from 129 to 325 B-EmONC and from 35 to 82 C-EmONC, from 2016 to 2019.

The planned strengthening of the offer of EmONC services has therefore largely been achieved, but the strengthened facilities do not always offer all their functions despite the fact that the notification and monitoring of maternal deaths has been made mandatory by an order of the Minister of Health and the Fight against AIDS (n°450/MSLS/CAB of 5/08/2015). As a result, there are reversals characterized by a downward trend between 2016 and 2017 followed by an upward trend between 2017 and 2018. The literature review shows that in 2017, the second year of the establishment of the Maternal Death Review and Response Committees, activities were implemented in an intense and regular manner. However, in 2018, there was a slackening of monitoring in the majority of Health Districts with the non-functioning of the maternal death review and response committees, which is compatible with the observed increase. In addition, the recurring breakdowns of blood bags in the health facilities and delays in evacuating parturients who are not under the programme's control are also other external factors that hindered the contribution of the 7th programme's interventions to the reduction of maternal deaths.

The evaluation of the fistula project implemented by UNFPA and financed by the Korean Cooperation (KOICA) reports satisfactory effectiveness of the various strategies with target achievement levels very often above the planned thresholds. This performance is appreciated by the beneficiaries, particularly the quality of the services received, especially repair. However, in 2017, a counter-performance was observed in which only 270 women with fistula were operated on out of the 450 expected, a 60% completion rate. In order to improve the optimal management of obstetric fistula and performance, the programme should strengthen (i) the identification of patients in the community with regard to the taboo and stigmatizing nature of the phenomenon, (ii) synchronize the transition from caravans to routine care with the search for fistula cases, and (iii) provide incentives for caregivers (routine care is not effective despite its official implementation in May 2019), (iv) Training of qualified personnel (nurses, midwives, surgeons, gynecologist nurses and anesthesiologists) due to the high mobility of trained providers (v) Monitoring and development of partnerships for the implementation of IGAs.

As part of the adoption of promising strategies for the reduction of maternal mortality, UNFPA's advocacy with national authorities and development partners has led to the commitment of Côte d'Ivoire in the process of setting up the National EmONC Network. This process led to the selection of 235 health facilities to constitute this network of maternity hospitals (73 reference facilities and 162 first contact health facilities) from the 33 health regions. In the same vein, the programme supported the "Helping Mother and Baby Survive" strategy. In addition, the midwives on duty, the student midwives and their supervisors benefited from UNON coaching to improve the quality of care during childbirth.

With regard to preparing for humanitarian emergencies, 98 national managers were trained on the Minimum Emergency Response Package (MISP) in Reproductive Health (RH) and prevention of sexual violence to enable them to respond adequately to humanitarian emergencies.

The first three indicators (1, 2, and 3) examined above show completion rates as of June 30, 2019 well above the expected thresholds, while the last one is significantly closer to the target. Finally, with an average product completion rate of 80.3%, the full completion of product 1 by the end of the programme can be viewed with optimism, with an average residual of only 19.7%.

SP1-3- Output 2: National capacities are strengthened to improve the provision of quality clinical and community-based family planning services.

Indicators	Baseline	Target	End-line data
Number of health facilities strengthened to provide at least 3 modern methods of contraception	398	724	656
			The office recorded a very good performance in building the capacity of 258 health facilities to offer at least three modern methods of contraception, This programme performance has had a positive impact on increasing the number of women using modern contraceptive methods in Côte d'Ivoire. The current level of progress is favorable with a completion rate of 79.1%, i.e. 20.9% remaining for the achievement of the 100% indicator target at the end of the programme in December 2020.
Number of community-based contraceptive distribution agents trained and equipped for service delivery	1,212	2,396	1,586
			The programme recorded an average capacity building performance of 374 community-based distribution agents of contraceptive products trained and equipped to provide services. The current 31.6% increase in the completion rate does not guarantee that 100% of the indicator will be achieved by 2020 at the end of the programme.

Key Achievements

The overall performance of product 2 measured by two indicators is at a very good 99.3% on June 30, 2019.

Indicator 1 of output 2 on health facilities strengthened to offer at least 3 modern methods of contraception, which is 142.5% completion rate. This performance is very significant because contraceptive methods are increasingly becoming available at service delivery points (SDPs), with an upward trend from 2013 to 2019. The results of the survey on the availability of RH services and products conducted in 2018 show an improvement in the supply of family planning services, thanks to the support of the technical and financial stakeholders, including UNFPA. Indeed, 96% of health facilities offer at least 3 modern methods of contraception compared to 75% in 2013; 67.5% of health facilities offer at least 5 modern methods of contraception compared to 45.1% in 2013. Thus, the achievements of the year 2017 have contributed to the achievement of the country's "FP2020" results since according to the June 2017 report on the level of indicators, 371,000 new users have been enrolled and the contraceptive prevalence rate is 20.6%. Thus, over the period 2018-2019 the programme made it possible to offer modern methods of contraception to 574,738 women, thus contributing to the prevention of 997 maternal deaths, 241,786 unwanted pregnancies and 85,174 abortions. The strategies of mobile clinics and community-based distribution of contraceptive products add significant value to the programme's performance in improving the provision of quality clinical and community-based family planning services.

However, Indicator 2 has a lesser performance because only 1,586 out of 2,396, or 56.1% of the target for the *number of Community-Based Contraceptive Product Distribution Agents trained and equipped to provide services has been achieved*. The evaluation of CP7 notes that Indicator 2 has a high level of requirement: the training of Community-Based Distribution Agents (CBDAs) must be complemented by their equipment. The community-based health mobilisers are trained every year, but their equipment does not always follow. For example, according to the 2018 annual activity report, only 55 of the 155 trained community-based health mobilisers have been equipped. Insufficient financial resources to address this is one of the main causes. It should also be noted that the community-based health mobilisers trained and equipped still face the reluctance of some providers to delegate tasks for the administration of injectable methods. Similarly, among other obstacles, there are persistent stockouts and the proportion of health departments that have experienced stockouts of at least three contraceptive products as of June 30, 2020 is 71%. This proportion is 53% for stockouts of at least five contraceptives (report from ENSEA, MSHP & UNFPA, 2018). The current experience of SAYANA PRESS (self-administered injectable method) in a pilot project in 3 Health Districts could make it possible to remove this obstacle.

Ultimately, the full achievement of Output 2 by the end of the programme relies primarily on Indicator 2 on the number of ADBC's to be both trained and equipped with a completion rate of 31.6%. Additional efforts will be required to achieve the residual completion rate of 68.4% in 2020, given the unfavorable socio-political and health context six months before the end of the programme in December 2020.

SPI-3- Output 3: Community capacity and social support are strengthened to increase demand for maternal health services, including family planning.

Indicators	Baseline	Target	End-line data
Number of Schools for Husbands created and functional	152	312	274
			Current performance is good in the implementation of 122 "Schools of Husband" created and operational, representing a completion rate of 102.5% compared to the target of 312 expected at the end of the programme. This performance has had a positive impact on the increase in the number of men, villages and communities involved and committed to the promotion of reproductive health. The remaining 23.7% or the establishment and operation of 38 Schools of Maris is achievable by the end of the programme by the end of 2020.
Number of targeted villages that have developed community-based strategies to	0	60	40
			40 villages have developed community strategies to facilitate

facilitate women's access to maternal health services			women's access to maternal health and family planning services. This 66.7% increase in the completion rate to reach 100% at the end of the programme on 12/31/2020 requires additional efforts to cover the remaining 20 villages in view of the country's current socio-political and health context, which is not very favorable.
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Key Achievements

The overall performance in achieving Output 3 as measured by two indicators: on June 30, 2019, the achievement rate was 105.3% and in relation to the target at the end of the programme. This good performance explains the achievements and the constant annual progression for both indicator 1 and indicator 2.

Indicator 1 of product 3 shows a level of achievement of 274 out of a target of 312 Schools of Husbands created and functional. This corresponds to a 76.3% completion rate, which is a very appreciable performance and has been constant overall years of the programme. Thus, the programme has strengthened the capacities and commitment of men to promote gender and reproductive health. In fact, the members of these schools were trained on the basic notions of RH/FP, communication, leadership, gender equality, the fight against GBV and group dynamics. However, the evaluation of CP7 reveals that the functionality of the "Ecoles des Maris" is precarious because it is hampered by numerous difficulties. These difficulties are mainly the following: (i) the lack of a system to motivate community agents and model husbands, thus fostering de-motivation ;(ii) failures in the system for monitoring activities by health facility managers and supervisors due mainly to the lack of logistical means for field trips (megaphone, image box, lamp or torch, fuel for the supervisors' motorcycles) and (iii) its non-integration into the routine supervision of providers (iv) failures in the system for collecting data and reporting on the functioning of the "Ecoles des maris" due to the low capacity of some model husbands, resulting in low visibility of their impact.

Regarding indicator 2 of output 3, the level of achievement is 40 out of 60 targeted villages that have developed community strategies to facilitate women's access to maternal health and family planning services. This result corresponds to an achievement rate of 108.1%, which is just a good performance because additional efforts are needed to equip the remaining 20 villages with community strategies, i.e., a 33.3% completion rate for the remaining target. The development of the facilitating strategies involves : (i) the establishment of local cells and the recruitment of members; (ii) the training of members of the cells formed to sensitize the communities; (iii) the development of action plans in favor of RH/FP and the promotion of gender equity; and (iv) the development of a national plan of action for RH/FP.

Ultimately, the residual target of 28.5% completion rates for both indicators 1 and 2 can be achieved by the end of the programme. With regard to indicator 1, the CP7 evaluation recommends that attention be given to restoring the functioning of the Maris schools already established. On the other hand, additional efforts are needed to equip the remaining 20 villages with community-based strategies that facilitate women's access to maternal health and family planning services by the end of the programme, bearing in mind that only half of the 2020 election year can be counted on to work there.

SP1-3- Output 4: National capacity is strengthened to design and implement comprehensive school-based and out-of-school sexuality education programmes for adolescents and youth, including in humanitarian situations.

Indicators	Baseline	Target	End-line data
Number of students reached by the comprehensive sexuality education programme based on the sexual and reproductive health life lessons approach	3,890,000	7,178,000	6,675,543
			2,785,543 of students reached by the comprehensive sexuality education programme based on the sexual and reproductive health life lessons approach. This performance reflects a current increase in completion rate of 84.7% which will enable the programme to reach 100% expected by the end of 2020 as only 15.3% of the target, i.e. 502,457 students, remains to be covered.
Number of adolescents and youth (10 - 24 years) who received sexual and reproductive health services through school and university health services	455,030	819,830	716,449
			Out of an expected target of 261,419 adolescents and youth (10 - 24 years) who received sexual and reproductive health services through school and university health services. This 71.7% increase in the completion rate is very significant in that it makes it possible to envisage reaching 100% of the target set by the programme by the end of 2020, since only 28.3% of the target, i.e. 103,381 adolescents and young people, remain to be covered.
Number of leaders of youth organizations whose capacities are strengthened to engage in policy dialogue and participation in national planning processes that take into account the challenges of the demographic dividend	30	110	91
			Out of a target of 110 set, 91 were achieved, or 122.0% achievement, with leaders of targeted youth organizations having been strengthened in their capacity to engage in policy dialogue and participation in national planning

			processes that take into account the challenges of the demographic dividend. This performance reflects a very good 76.3% completion rate and indicates that the current progress will enable the programme to reach 100% planned by the end of 2020 as only 23.7% of the target corresponding to 19 people to be trained remains to be covered.
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Key Achievements

Progress toward achieving Output 4 is reported through three main indicators. The analysis of the performance of product 4 highlights an overall completion rate of 124.1% as at 30/06/2019 of 77.5% which is a good performance. These results can be broken down into activities to strengthen the knowledge and skills of Adolescents/Youth (including key populations) in RH/FP/HIV in school and community settings, and the prevention and management of STIs and HIV. They also concern the provision of services to Adolescents and Youth as well as capacity building of School and University Health Services/Adolescents and Youth (SSSU/AJ). Finally, they focus on capacity building for youth on the demographic dividend and leadership.

Thus, for Indicator 1, a total of 6,675,543 was achieved, or 135.5% of the corresponding achievement of the students reached by the comprehensive sexuality education programme. The variation according to the gender of the beneficiaries of this intervention shows an under-representation of girls). The evaluation of CP7 recommends that they should aim to complete their enrollment in the CSE courses. To this end, sensitization actions should be intensified for the main actors (students, parents, school administrations, etc.) in favor of the adherence of all students in general and all girls in particular. The programme still needs to make efforts to train 502,457 remaining students for 100% completion, which is possible by the end of 2020.

With regard to Indicator 2, during the period covered by the evaluation, a total of 716,449, or 114.7 percent of adolescents and youth (10-24 years old) had access to RH/FP services in school and outside of school between 2017 and 2019. Although the programme is gender-sensitive, sex-disaggregated data are not always available. Based on the data collected in the SSSU during the field visits, the evaluation was able to estimate an average of 54% for boys versus 46% for girls. These estimates also confirm the under-representation of girls. In addition, the activities of the SAS Center, an NGO supported by UNFPA, made it possible to sensitize 4411 young motorcycle cab drivers and vulnerable young girls on RH in Bouaké and Korhogo. They also made it possible to offer RH/FP/HIV services and counseling to 1,360 vulnerable young girls. There are also the "Healthy Youth - Protect Yourself" caravans whose results have made possible to carry out educational talks; HIV testing; the offer of contraception (oral, injectable, implant); pregnancy testing for young girls; and the distribution of male and female condoms from 195801 to 2018.

With regard to Indicator 3, out of 110 youth organization leaders identified, 91 were strengthened in their capacity to engage in policy dialogue and participate in national planning processes that take into account the challenges of the demographic dividend. Within this framework and in 2018, 66 Adolescent and Youth Advisors and Facilitators have benefited from capacity building on RH and in specific areas (combined prevention, life skills, income generating activities and the demographic dividend). Despite this satisfactory implementation rate, the evaluation of CP7 reveals that there have been some difficulties in implementing activities, including the following: the incompleteness of contraceptive products in the health facilities; the frequent interruption of FP inputs, particularly Xylocaine (the local anesthesia used to insert the implant); the late availability of certain inputs in the SSSU; the lack of equipment in certain health facilities (beds and tables for consultations, dressing box for minor surgery, video projector, equipment...). Indicator 3 should be achieved in view of the current progress since only 23.7% of the target corresponding to 19 people to be trained remains to be covered. The completion rate for Output 4 over the life of the programme is 84.7%, 71.7% and 76.3% for indicators 1, 2 and 3 respectively. At this rate of progress, it is reasonable to expect to achieve the remaining 15.3%, 28.2% and 23.7% of the residual targets for indicators 1, 2 and 3 by the end of the programme to reach 100%.

SP1-3- Output 5: The capacity of national institutions and civil society organizations is strengthened to combat GBV and promote gender equality and women's empowerment, including in humanitarian situations.

Indicators	Baseline	Target	End-line data
Number of multisectoral platforms for combating gender-based violence strengthened and functional	26	50	45
			19 multisectoral platforms to combat gender-based violence, out of a target of 50. This programme performance corresponds to the ongoing institutionalization of the multisectoral mechanism for the prevention and management of gender-based violence in Côte d'Ivoire. The current level of progress is satisfactory at 79.2% of the completion rate, since the 20.8% or 5 remaining GBV platforms can be achieved, which means that 100% of the indicator's target can be reached by the end of the programme in December 2020.

Number of community leaders who report abandoning the practice of female genital mutilation/cutting and early marriages	275	625	565
			290 community leaders declare abandonment of the practices of female genital mutilation and early marriage. This performance as of June 30, 2019, resulting from the advocacy and training activities carried out, is a significant increase of 82.9% in the completion rate, which guarantees that the 100% completion rate will be reached by the end of the programme on December 31, 2020. Only 17.1% remains and therefore to obtain the commitment of 60 community leaders.
Family code document finalized	0	1	1
			It was expected that the Individual and Family Code document would be finalized at the end of CP7. This result has been achieved at 100% since 2018 rate in terms of completion. The document of the code of persons and family has been validated.

Key Achievements

The analysis of the performance of product 5 highlights overall achievement rates on June 30, 2019 of 113.5%, which reflects the significant progress made across the three main indicators. This performance was achieved through the response to gender-based violence, advocacy directed at religious and traditional leaders and support for strengthening the institutional framework for gender promotion.

In terms of Indicator 1, over the period covered, the programme had a 105.6% completion rate for capacity building and the operation of 45 multisectoral platforms for combating gender-based violence, out of a target of 50. This result was achieved successively through 19 functional platforms that were strengthened by staff training in GBV prevention and management and the provision of communication tools and computer equipment for data analysis. The implementation of these platforms concerns the entire country, especially in the northern and western areas with a high prevalence of FGM and child marriages. Thus, in 2018, 150 members (56 women and 94 men) of the 5 new GBV platforms will be members of these platforms, which have seen their capacities strengthened in terms of prevention, management, referral and data collection on GBV. Therefore, women were under-represented in the training sessions of the GBV platforms' members. In order to increase the platforms' efficiency in terms of GBV data collection, analysis and processing and the use of the GBV/IMS database, their material capacities were strengthened by providing them with desktop computers (52), UPS (52) and laptops (52). The evaluation of CP7 took into account the challenges faced by the platforms, namely: (i) insufficient operating budget; (ii) weak material and logistical capacities for prevention activities and victim care; (iii) high professional mobility of members.

Indicator 2: Of the 625 community leaders targeted by the end of the 7th programme to commit to ending FGM practices and early marriage, 565 had been mobilized by June 30, 2019, a rate of 134.9%. This level of performance was achieved successively over the years of the programme. The evaluation of CP7 notes that there is, however, a risk that the involvement of community leaders will be eroded due to the following difficulties: (i) insufficient trained and committed leaders and (ii) insufficient resources within the GBVFPs for continuous monitoring of committed leaders. The evaluation has also revealed that female genital mutilation/cutting (FGM/C) is not included among the priority targets of this intervention, which constitutes a pocket of resistance. Also, the evaluation recommends the conduct of an in-depth study aimed at identifying with the communities the cultural and/or socioeconomic substitutes for the practice of FGM would allow for a better understanding of this phenomenon. Its results should be considered within the framework of a specific programme to combat FGM to be set up.

With regard to Indicator 3, it was planned to finalize the Individual and Family Code document at the end of CP7. This result has been achieved since 2018. The Persons and Family Code document has been validated. Of this document, four (4) laws were adopted by the National Parliament and promulgated by the President of the Republic.

These are :

- the LAW n° 2019-570 of June 26, 2019 relating to marriage ;
- the LAW n° 2019-571 of June 26, 2019 relating to filiation ;
- the LAW n° 2019-572 of June 26, 2019 relating to the minority ;
- the LAW n° 2019-573 of June 26, 2019 relating to successions.

Overall, the performance of Product 5 is high with an average completion rate of 105.8% as of June 30, 2019 and a completion rate of 93.4% over the term of the CPD. The completion of Product 5 by the end of the programme is essentially based on indicators 1 and 2, for which the achievement of the residual target of 10% can be considered with optimism.

C. National Progress on strategic Plan Outcomes					
Outcome 1: 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					
Indicators	Before		After		How
	Start value	Year	End Line data	Year	
Percentage of service delivery points with the seven essential maternal and newborn health drugs available	68%	2016	80,3%	2018	In 2017, the UN Quick Survey conducted showed that the practice of basic UNON increased from 9% in 2010 to 11% in 2017, an increase of 22% (MINSANTE, WHO, UNFPA & UNICEF, 2018).
<p>Summary of National Progress Between 2016 and 2018, the country is making a 12-point increase, from 68% to 80.3% of service delivery points having all seven essential maternal and newborn health drugs available.</p> <p>UNFPA's Contributions The UNFPA country programme interventions have enabled (i) 325 health facilities that have been strengthened as of June 30, 2019, i.e. 70% of the 385 targeted to offer basic emergency obstetric and neonatal care and (ii) 82 health facilities out of 88 targeted whose capacities have been strengthened as of June 30, 2019 to offer quality comprehensive emergency obstetric and neonatal care. In addition, 656 health facilities strengthened by the UNFPA country office offer at least 3 modern methods of contraception.</p>					

Outcome 2: 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					
Indicators	Before		After		How
	Start value	Year	End Line data	Year	
Percentage of young people ages 15-24 who correctly identify the routes of HIV transmission and reject misconceptions about HIV transmission	15,7%	2015	F : 24% H : 33%	2016	
<p>Summary of National Progress The percentage of young people ages 15-24 who correctly identify HIV transmission routes and reject misconceptions about HIV transmission was 15.7% in 2015. By 2016, it is 24% for girls and 33% for boys.</p> <p>UNFPA's Contributions</p> <ul style="list-style-type: none"> UNFPA has developed the national comprehensive sexuality education (CSE) programme, which has contributed significantly to : (i) informing students through the provision of comprehensive sexuality education courses based on the "life lessons" approach to sexual and reproductive health to 6,675,543 students, and (ii) providing sexual and reproductive health services, including contraception, prevention and treatment of STI/HIV/AIDS to 716,449 targeted adolescents and young people (10-24 years old) who received sexual and reproductive health services through school and university health services. 					

Outcome 3: Advanced gender equality, women's and girls' empowerment, and reproductive rights, including for the most vulnerable and marginalized women, adolescents and youth					
Indicators	Before		After		How
	Start value	Year	End Line data	Year	
Budgeted National Plan of Action on Gender Equality that incorporates reproductive rights available	0	2015	-	-	

Summary of National Progress

The Constitution of November 8, 2016 which enshrines the principle of equality between women and men, as well as the fight against all forms of discrimination including gender-based violence in particular, discrimination in access to and control of production resources and (iii) a national strategy for the empowerment of women adopted in 2019 .

UNFPA's Contributions

Thanks to UNFPA advocacy, the Persons and Family Code document was validated in 2018 and four (4) laws were adopted by the National Parliament and promulgated by the President of the Republic.

These are :

- the LAW n° 2019-570 of June 26, 2019 relating to marriage ;
- the LAW n° 2019-571 of June 26, 2019 relating to filiation ;
- the LAW n° 2019-572 of June 26, 2019 relating to the minority ;
- the LAW n° 2019-573 of June 26, 2019 relating to successions.

E. Country Programme resources						
MS Outcome	Regular Resource		Others		Total	
Choose only those relevant to your CP	(Planned and Final Expenditure)		(Planned and Final Expenditure)		(Planned and Final Expenditure)	
Increased availability and use of integrated Sexual and Reproductive Health services	5,036,315	4,228,644	14,860,807	12,588,871	19,897,122	16,817,515
Increased Adolescent and Youth Reproductive Health	1,402,376	1,182,112	770,875	575,406	2,173,251	1,757,518
strengthened gender equality and women empowerment	1,455,972	1,038,145	2,116,266	1,821,173	3,572,238	2,859,318
Total	7,894,663	6,448,901	17,747,948	14,985,450	25,642,611	21,434,351

In total, over the period 2017-2020, a global envelope of USD 43.3 million was expected to be mobilized for the implementation of the Programme, including USD 17.2 million in regular resources and USD 26.1 million in other external resources. Between 1/01/2017 and 30/06/2019, the country office directly mobilized USD 5,040,769. These funds are in addition to the thematic funds mobilized with the support of headquarters which, during the same period, amounted to 12,707,179 USD, to reach the amount of 17,747,948 USD, i.e. 68% of the 26,100,000 USD expected as financial resources to be mobilized over the entire period of implementation of the 7th programme.

Regular resources have increased slightly and continuously since the beginning of the programme, rising from USD 2,550,313 in 2017, USD 2,600,000 in 2018 to USD 2,744,350 as of 30/06/2019; - The evolution of thematic funds, mobilized with the support of headquarters, has increased significantly. They increased from USD 3,532,817 in 2017 to USD 4,587,181 in 2018 and already the same amount as of 30/06/2019.

Regular resources represent 31% of the funds received over this period while mobilized resources constitute 69% of these funds.