First regular session 2023
30 January to 3 February 2023, New York
Item 10 of the provisional agenda
UNFPA – Country programmes and related matters

DRAFT

United Nations Population Fund

Country programme document for Algeria

Proposed indicative UNFPA assistance: $4.0 million: $2.5 million from regular resources and $1.5 million through co-financing modalities or other resources

Programme period: Four years (2023-2027)

Cycle of assistance: Seventh

Category: Tier II

Alignment with the UNSDCF Cycle United Nations Sustainable Development Cooperation Framework, 2023-2027
I. Programme rationale

1. Over the past two decades, Algeria has made significant progress in social and economic development. The poverty rate has declined (from 22.6 per cent in 1995 to 5.5 per cent in 2011), life expectancy has increased (from 69.6 years in 2000 to 77.8 years in 2019) and school attendance rates have risen significantly (reaching more than 98.5 per cent at the primary-school level and 96.3 per cent for the middle-school level). In addition, the availability of universal health coverage has increased in recent years.

2. On January 2022, the population of Algeria reached 45.4 million (NSO bulletin 949). The current fertility rate is 3 children per woman, with a net annual population growth of around 1.93; this will bring the population to 51.3 million before 2030. Recent statistics reveal that 30 per cent of the population is under the age of 15 and nearly 52 per cent are under age 30, with 85 per cent living in urban areas. Youth represent an opportunity for Algeria; they are educated and constitute an available skilled workforce for the national economy. These characteristics allow Algeria to benefit from the demographic dividend; however, this also poses challenges, including an increasing influx of young people into the labour market, particularly in urban areas.

3. In 2020, the COVID-19 pandemic threatened some of the achieved gains and some restrictive measures could remain in place until 2022 and beyond. Significant socioeconomic repercussions, especially for the vulnerable people, are becoming evident. The recent socio-economic recovery plan (2020-2024) demonstrated a longstanding reform effort to shift the economy towards a sustainable private sector model and to protect livelihoods.

4. The recent Common Country Analysis shows persistent socioeconomic disparities, including access to health and education, in some geographic areas, such as in the southern and the “haut-plateaux” regions, and among vulnerable populations. In the rapid assessment of the continuity of sexual and reproductive health (SRH) services, about 59 per cent of service providers indicated that family planning services were interrupted due to the impact of the COVID-19 pandemic. The unmet need for family planning rose to 14 per cent in 2020, compared to 7 per cent in 2013, and the contraceptive prevalence for modern methods declined to 45 per cent according to the Multiple Indicator Cluster Survey 6 (MICS6). Moreover, just 6 per cent of married women aged 15-19 years use the pill as the only known method. However, there has been progress in the reduction of the maternal mortality ratio (from 57.7 maternal deaths in 2016 to 48.5 deaths per 100,000 live births in 2019), according to the Ministry of Health. Approximately 6.6 per cent of adolescents aged 15-17 years have in-depth knowledge of HIV; this demonstrates a need for youth to have access to SRH information and services. It is also necessary to focus on pathways to address the increase in unmet family planning need and to continue the gains made in reducing maternal mortality by strengthening the delivery of maternal health services.

5. Algeria has embarked on legal and institutional reforms that promote and protect women’s rights, including protection from gender-based violence (GBV). In 2020, the newly endorsed Constitution included an article on the promotion and protection of women. In addition, the existing legal framework is strong on combating all forms of GBV, including domestic violence and sexual harassment. However, while data is lacking on the prevalence of GBV, evidence shows that attitudes on GBV are a major challenge. As the share of women in total employment increased (from 15.3 per cent in 2009 to 18.3 per cent in 2019), female unemployment rate reached 20.4 per cent, while for men it was 9.1 per cent for the same period. For young people aged 15-24 years, women neither in employment nor in education represent 32.1 per cent and men 20.4 per cent (NSO bulletin 879). The gender inequality index of 0.429 in 2019 ranks Algeria 103 out of 162 countries, in the index ranking in 2019 (UNDP). In Algeria, 21.5 percent of parliamentary seats are held by women (Human Development Report, UNDP 2020).

6. In coordination with the United Nations country team and within the current development landscape, UNFPA has a proven comparative advantage in providing support to improved data collection and analysis, including on high-quality reproductive health and
family planning programmes. UNFPA is committed to continuing that support – to ensure high-quality reproductive health and family planning services, the promotion and protection of vulnerable women and people with disabilities, and data generation to inform programme and policy development.

7. The evaluation of the previous country programme indicated the need for strengthening the direct participation of beneficiaries to fully reflect their role as agents of change. In terms of gender equality and GBV analysis, the active participation of women and men would offer an opportunity to engage with concerned populations to achieve solutions that “leave no one behind”. The previous country programme established a mechanism for strengthening the capacities of partners in UNFPA management procedures and tools, with partners expressing their desire to continue enrolling in such a programme in the future.

8. The evaluation highlighted the UNFPA contribution to the following significant achievements in sexual and reproductive health: (a) adoption of the health law in 2018, which integrates, among other things, prevention in matters of Sexual and Reproductive Health for young people, following an advocacy process; (b) support to the family planning roadmap and improving the quality of maternal death audits by strengthening the capacity of investigators. The GBV achievements include a joint programme by UNFPA and the United Nations Office on Drugs and Crime (UNODC) on addressing GBV that is supported by the Government, the robust participation of partners, including civil society organizations, in the voluntary commitments delivered at the ICPD+25 Summit in Nairobi. and a high-quality communication strategy, particularly focused on GBV issues.

II. Programme priorities and partnerships

9. The proposed seventh country programme will contribute to the Algeria United Nations Sustainable Development Cooperation Framework (UNSDCF) outcome 2 (by 2027, the population will benefit from transparent and accountable institutions that guarantee their participation and effective representation as well as the protection of non-discriminatory and inclusive values, in particular for the vulnerable people) and outcome 3(by 2027, the population, including vulnerable people, will benefit from high-quality, resilient health services including prevention, a high-quality education and training system and a sustainable social protection system). The proposed strategic interventions of the country programme are based on the UNSDCF and informed by the priorities of the Government Action Plan 2022-2026. The programme will catalyse the efforts of the Government to reach its SDG targets, achieve the voluntary commitments delivered at the ICPD+25 Summit in Nairobi and support the realization of the three transformational results – zero maternal mortality, zero unmet need for family planning and zero gender-based violence – to accelerate the achievement of the ICPD Programme of Action.

10. The country programme will apply the following modes of engagement – advocacy, and policy dialogue; capacity development for an enabling environment; partnership and coordination; and knowledge management – to achieve comprehensive results.

11. A focus on several accelerators for the realization of the transformative results will prioritize the most vulnerable in society. Interventions will utilize a human rights-based approach and draw on the Convention on the Elimination of All Forms of Discrimination against Women and the outcomes of Universal Periodic Review, and other international commitments of Algeria. The programme will aim to contribute to the reduction of inequalities and support data collection, analysis and utilization to address the needs of the most vulnerable populations, particularly in certain geographic areas, such as in the southern and “haut-plateaux” regions, and the border areas.

12. In addressing inequalities by focusing on the most vulnerable people, the country programme will support the achievement of the three transformative results during the Decade of Action. It will promote national investment to create transformational change in the lives of youth, women and girls, especially people with disabilities. UNFPA will apply a life-cycle approach, recognizing that people have different and changing needs throughout
their lives. The rights and needs of vulnerable persons, including persons with disabilities, will be prioritized and mainstreamed across and within all interventions and programme activities. The programme will also ensure disaggregated population data and analysis are centrally positioned in programme development and implementation at all levels.

13. UNFPA will engage in diverse partnerships for advancing institutional and accountability systems for high-quality and rights-based SRH services for women, girls, men and youth. These interventions seek to find innovative methods to improve access for those furthest left behind. The country programme will work with youth to advocate for opportunities to build their skills to make informed and responsible choices about their SRH and well-being, as indicated in the 2018 health law.

14. UNFPA will continue to build effective partnerships within the United Nations system, while also expanding partnerships to new donors. UNFPA will maintain its convening role to bring together all stakeholders that contribute to improving SRH information and services and gender equality and promoting the utilization of population data. Strategic partnerships will be critical to achieving the results envisioned under this country programme. It will build upon established alliances and strategic partnerships with Government institutions, civil society organizations (CSOs), especially youth organizations. The political will of the Government and commitment to the human rights agenda, as demonstrated in the National Human Rights Council and investment in human capital, will ensure that the results achieved are sustainable, tangible and transformational.

15. The programme will strengthen collaboration with CSOs, in particular with those promoting and empowering women, girls, adolescents and youth, with a focus on SRH and gender equality. These kinds of collaboration have been a key achievement in ensuring an effective response during the COVID-19 pandemic. UNFPA will coordinate with relevant authorities in the selection of CSOs. UNFPA will explore strategies to expand cooperation with the media and the private sector on gender equality and youth participation in coordination with the Ministry of Foreign Affairs and National Community abroad. The programme will also aim to benefit from South-South and triangular cooperation.

16. The overall goal of the programme is to fulfil the vision of the Agenda 2030 by ensuring that the Algerian population enjoy a healthy life, free of discrimination and violence and have opportunities to meet their full potential.

17. The country programme aims to contribute to an enabling environment for the development and advancement of policies that promote accountability for high-quality SRH and family planning services and the prevention of and response to GBV. To accelerate the reduction of maternal deaths and the unmet need for family planning, the programme will enhance national capacities to provide comprehensive SRH services and build resilience in health care systems. To accelerate the prevention of and response to GBV, the programme will strengthen the implementation of policy, legal, accountability and awareness-raising frameworks and promote the institutionalization of a multisectoral response to GBV in order to advance gender equality and empowering women and girls, so that they are better protected from violence and eventual discriminatory practices.

18. As a cross-cutting focus, the programme will support population data collection, analysis and utilization of demographic intelligence to improve the responsiveness, targeting and impact of gender-sensitive policies and programmes, to inform efforts to harness the demographic dividend.

A. Output 1: Strengthened national capacities to provide high-quality reproductive health and family planning services for women and youth, with a focus on hard-to-reach and vulnerable populations

19. UNFPA will provide technical support to the National Plan for the Accelerated Reduction of Maternal Mortality and the National Roadmap for the Reduction of Unmet Need for Family Planning. This will be achieved by (a) supporting the roadmap for family planning by improving the coordination mechanism that integrates efficient planning of
human rights-based SRH programmes locally and based on the recommendations from field visits and rapid analysis; (b) expanding a supervision tool for effective SRH and family planning reporting locally; (c) supporting improvement of family planning services by conducting assessments using client-satisfaction tools on family planning services (d) strengthening capacity building of services providers on family planning counselling and producing related manuals and sensitization tools; (e) strengthening the communication strategy on family planning through innovative initiatives; and (f) advocacy and capacity building, using the relevant the 2018 Health Law, to provide young people with preventive health education on reproductive health

B. Output 2: Enhanced national capacity to support the promotion of gender equality, including by addressing the prevention of and response to gender-based violence

20. UNFPA will contribute to the reduction of gender-based violence by (a) strengthening a human rights-based approach in national empowerment programmes for women and girls and for persons with disabilities; (b) strengthening the capacities of the media to communicate a positive representation of women in the society; (c) supporting the creation and operationalization of a coordinated multisectoral response to GBV; (d) strengthening social dialogue on the impact of gender-based violence, involving men and boys, and persons with disabilities as agents of change; (e) supporting youth associations to develop innovative sensitization initiatives about possible socio-cultural behaviours that affect women and girls; (f) documenting and sharing good practices in a multisectoral coordination of GBV response; and (g) advocating with women, girls and men regarding existing legal frameworks and the referral protocol for GBV victims.

C. Output 3: Improved national capacity for the analysis and use of evidence-based data to support population and development dynamics, with a focus on gender equality and the SRH needs of vulnerable populations

21. UNFPA will support data collection, analysis and dissemination by (a) assessing and analysing information on people with disabilities to advocate for their access to SRH and family planning services; (b) supporting the development of a national communication strategy and implementation of the Convention on the Rights of People with Disabilities; (c) supporting a national communication strategy and the dissemination of the 2020 census results; (d) supporting the documentation of progress towards the 2030 Agenda, using population-centred measures; (e) researching population dynamics, eventual gender-discriminatory sociocultural behaviours that affect women and girls and how such behaviours contribute to GBV; and (f) raising awareness among leaders at different levels on the importance of evidence-based decision-making, in particular on issues related to the ICPD Programme of Action and the Sustainable Development Goals (SDGs).

D. Output 4: Strengthened national capacity for the delivery of inclusive programmes that promote adolescent and youth development.

22. UNFPA will support programmes that enable adolescents and youth to meet their full potential by (a) providing support to the implementation of existing national multisectoral strategies focused on adolescents and youth; (b) support to creating programmes to ensure effective knowledge and life skills, to guarantee knowledge related to reproductive health prevention for the benefit of young people and adolescents; (c) supporting youth-led innovative programmes that contribute to the realization of the SDGs; and (d) supporting national institutions to have data on youth aspirations, including for marriage and fertility.

III. Programme and risk management

23. The new country programme was developed in a consultative process with the Government of Algeria, United Nations agencies and other development partners, including representatives of civil society organizations. Through its implementation, UNFPA will contribute to United Nations results groups, and other relevant inter-agency coordination
mechanisms, towards the achievement of the SDGs and the three transformational results accelerating the realization of the ICPD.

24. To secure the critical support and resources necessary for effective programme implementation, an integrated partnerships and resource mobilization plan will guide efforts to leverage strategic partnership opportunities with the Government, international multilateral and bilateral partners, the private sector and United Nations organizations, in line with respective UNFPA policies and procedures. The plan provides a conceptual framework for mutual accountability regarding UNFPA contribution to national priorities and development needs.

25. Under the overall guidance of the UNFPA Regional Director, the country office will be led by a ‘Head of Office’ and supported by technical and operational teams. As needed and to allow for flexibility of response, the office will leverage a pool of expert consultants to ensure high-quality outputs of the proposed country programme. Staff will be funded from the UNFPA integrated budget for management and development effectiveness functions and from the programme budget for programme functions.

26. There are multiple risks to the implementation of the UNFPA country programme in Algeria, including the significant risk related to the sustainable financing mobilized for the implementation of the program UNFPA continues to enhance its advocacy strategy to provide relevant Government authorities with evidence-based information and expand partnerships with parliamentarians, CSOs and the media, in coordination with the Ministry of Foreign Affairs and the national community abroad. UNFPA will continuously review its risk management system to introduce change, leverage existing resources and integrate lessons learned. The information derived from the risk management systems will inform programming, focusing implementation on vulnerable groups, strengthening communication and using innovative methodologies to reach out to those left furthest behind. The programme will also seek to benefit from South-South and triangular cooperation.

27. A significant part of Algeria is exposed to earthquakes, flooding, drought, forest fires and landslides. Through the country’s continued efforts to integrate disaster-risk considerations, strengthening institutional capacities and regional and international partnerships have contributed to the strengthening of national preparedness, response and recovery capacities. Updating the national emergency response and preparedness plans and integrating capacities for rapid assessments in case of emergencies, along with the Minimum Initial Services Package, would contribute to improved management of crises situations. UNFPA will support the Government in updating relevant national plans and continue to regularly assess operational and programmatic risks and make the required adjustments.

28. This country programme document outlines UNFPA contributions to national results and serves as the primary unit of accountability of UNFPA to the Executive Board for results alignment and resources assigned to the programme at the country level. Accountabilities of managers at the country, regional and headquarters levels with respect to country programmes are prescribed in the UNFPA programme and operations policies and procedures, and the internal control framework.

IV. Monitoring and evaluation

29. A key recommendation of the evaluation of the previous UNFPA country programme is to strengthen the monitoring and evaluation systems for programme implementation at all levels of intervention. The new country programme will explore and invest in innovative and effective ways of monitoring the programme and the achievement of the SDGs, the three transformative results and the 2030 Agenda.

30. UNFPA will support implementing partners in putting in place monitoring and evaluation mechanisms (trimester coordination meetings with partners, field visits, trimester reports on activities, annual review, midterm review, evaluation) and programmes to support the follow-up and reporting on key interventions. UNFPA will also support implementing partners in conducting regular monitoring in the field, following up on progress and periodically adjusting implementing arrangements, as needed.
31. Support for the annual and midterm reviews of programme implementation will be organized jointly with partners, including the United Nations agencies, and the programme will be adjusted accordingly. UNFPA will support the national statistical and monitoring capacities to produce disaggregated population data and ensure effective monitoring and evaluation of the progress made in achieving the SDGs, the ICPD Programme of Action and the three transformative results, ensuring that data is available on those left furthest behind. UNFPA will also support the analysis and dissemination of census data. Monitoring, evaluation and reporting of the country programme will be based on the expected outcomes, outputs and the respective indicators, as presented in the results framework. Monitoring and evaluation will be conducted in collaboration with national partners, implementing partners and other United Nations agencies.

32. As an active member of the United Nations country team, UNFPA will have an active role in the monitoring and evaluation results group. UNFPA will also actively contribute to the Common Country Analysis, the development of joint workplans and results groups, UNSDCF monitoring, support to national SDGs monitoring and voluntary national reports and Universal Periodic Reviews.
## RESULTS AND RESOURCES FRAMEWORK FOR ALGERIA (2023-2027)

### NATIONAL PRIORITY: Human development, social policies based on the population expectations.

### UNSDCF OUTCOME: By 2027, the population, including people living in vulnerable conditions, benefit from quality, resilient health services, including prevention, a quality education and training system and an efficient social protection system.

### RELATED UNFPA STRATEGIC PLAN OUTCOME(S): 1. By 2025, the reduction in the unmet need for family planning has accelerated. 2. By 2025, the reduction of preventable maternal deaths has accelerated.

### UNSDCF outcome indicators, baselines, targets

<table>
<thead>
<tr>
<th>UNSDCF Outcome indicators:</th>
<th>Country programme outputs</th>
<th>Output indicators, baselines and targets</th>
<th>Partner contributions</th>
<th>Indicative resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maternal deaths per 100,000 live births</td>
<td>Output 1. Strengthened national capacities to provide high-quality reproductive health and family planning services for women and youth, with a focus on hard-to-reach and vulnerable populations</td>
<td>Number of wilaya (districts) where the health department has integrated the monitoring and supervision tool as a follow-up mechanism to high-quality SRH and family planning services</td>
<td>Ministry of Health, Ministry of Interior, local authorities and spatial planning / national delegation for major risks; Ministry of Youth and Sports, Ministry of National Solidarity, Family and Women’s Condition Ministry of National Education, Ministry of Religious Affairs and Wakfs (Endowments), Universities, research centres, NGOs; World Health Organization (WHO), UNICEF, UNAIDS</td>
<td>$1 million ($0.7 million from regular resources and $0.3 million from other resources)</td>
</tr>
<tr>
<td>Proportion of women in reproductive age (15-49 years) who are using modern methods of contraception</td>
<td></td>
<td>Number of wilaya in which the national counselling manual for SRH and family planning capacity development, including for people with disabilities, is implemented</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Proportion of women of reproductive age (15-49 years) who have their needs for family planning satisfied with modern methods</td>
<td></td>
<td>Number of available programmes to guarantee knowledge related to reproductive health prevention for the benefit of young people and adolescents</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Proportion of women aged 20-24 years who were married before 18 years</td>
<td>Output 2. Enhanced national capacity to support the promotion of gender equality, including addressing the prevention of and response to gender-based violence.</td>
<td>Number of national institutions supported with training on the human rights-based approach to programming for women and girls’ empowerment, youth and persons with disabilities</td>
<td>Ministry of National Solidarity, Family and Women’s Condition, Ministry of Health, Ministry of Youth and Sports, Ministry of Religious Affairs and Wakfs (Endowments), Universities Research centres, National Human Rights Commission</td>
<td>$1 million ($0.5 million from regular resources and $0.5 million from other resources)</td>
</tr>
<tr>
<td>Proportion of women aged 15-49 years who make their own informed decisions</td>
<td></td>
<td>Number of national advocacy campaigns conducted at wilaya level on the impact of GBV and, involving men and boys, and persons with disabilities</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### NATIONAL PRIORITY: Human development, social policies based on the population expectations.

### UNSDCF OUTCOME: By 2027, the population including people living in vulnerable conditions, benefit from transparent, accountable, and effective institutions that guarantee their effective participation and representation, the rule of law, as well as the promotion of inclusiveness and non-discrimination values.

### RELATED UNFPA STRATEGIC PLAN OUTCOME(S): 2. By 2025, the reduction in the unmet need for family planning has accelerated.

### UNSDCF outcome indicators, baselines, targets
Regarding sexual relations, contraceptive use and reproductive health care

**Baseline:** 32.8% (2019); **Target:** 45% (2025)

- National mechanisms to engage multiple stakeholders, including men and boys, to prevent and address GBV, are in place by strengthening coordination
  
  **Baseline:** 0 (2022); **Target:** 1 (2027)

- Number of national key stakeholders trained in prevention and response to digital violence, including sexual violence through social media
  
  **Baseline:** 0 (2021); **Target:** 15 (2027)

### NATIONAL PRIORITY: Human development, social policies based on the population expectations.

### UNSDCF OUTCOME: By 2027, the population, including people living in vulnerable conditions, benefit from quality, resilient health services, including prevention, a quality education and training system and an efficient social protection system.

### RELATED UNFPA STRATEGIC PLAN OUTCOME(S): By 2025, the reduction in the unmet need for family planning accelerated. By 2025, the reduction in preventable maternal deaths accelerated. By 2025, the reduction in gender-based violence and harmful practices accelerated.

<table>
<thead>
<tr>
<th>UNSDCF outcome indicators, baselines, targets</th>
<th>Country programme outputs</th>
<th>Output indicators, baselines and targets</th>
<th>Partner contributions</th>
<th>Indicative resources</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>UNSDCF Outcome indicators:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| • Proportion of the population aged 15 and above benefiting from social protection systems (MICS6)  
  **Baseline:** 73.6% (2019);  
  **Target:** 85% (2026)  
  **Related UNFPA Strategic Plan Outcome indicator(s):**  
  • The country has conducted at least one population and housing census during the last 10 years  
  **Baseline:** No (2008); **Target:** Yes (2025)  
  • Proportion of children that were registered at birth  
  **Baseline:** 95% (2021); **Target:** 100% (2025) | Output 3. Improved national capacity for the analysis and use of evidence-based data to support population and development dynamics, with a focus on gender equality and the SRH needs of vulnerable populations. | • Number of public institutions that have capacities for the analysis, monitoring and reporting around the ICPD-based SDGs indicators  
  **Baseline:** 1; **Target:** 5  
  • Number of qualitative studies on the SRH and family planning needs and access to GBV services by women and girls with disabilities  
  **Baseline:** 0; **Target:** 2  
  • Number of data analysis products on the needs of vulnerable populations produced to support policy formulation on SRH and GBV  
  **Baseline:** 1 (2021); **Target:** 3 (2027)  
  • Number of capacity-building initiatives with government partners for the dissemination and use of the census results  
  **Baseline:** 0 (2021); **Target:** 5 (2027) | Ministry of National Solidarity, Family and Women’s Condition,  
Ministry of Health,  
Ministry of National Education,  
Ministry of Religious Affairs and Wakfs (endowments),  
Ministry of Digitization and Statistics/Office of National Statistics,  
National economic and Environment Council,  
research centres (CREAD, CRASC) and universities; NGOs; WHO, UNICEF, UNAIDS, UNDP | $1.0 million  
($0.65 million from regular resources and  
$0.35 million from other resources) |

### NATIONAL PRIORITY: Human development, social policies and new republic based on the population expectations.

### UNSDCF OUTCOME: By 2027, the population, including people living in vulnerable conditions, benefit from quality, resilient health services, including prevention, a quality education and training system and an efficient social protection system.

### RELATED UNFPA STRATEGIC PLAN OUTCOME(S): 2. By 2025, the reduction of preventable maternal deaths has accelerated.

<table>
<thead>
<tr>
<th>UNSDCF outcome indicators, baselines, targets</th>
<th>Country programme outputs</th>
<th>Output indicators, baselines and targets</th>
<th>Partner contributions</th>
<th>Indicative resources</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>UNSDCF Outcome indicators:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| • Proportion of youth aged 15-24 years neither in employment nor in education  
  **Baseline:** 23.2%; **Target:** 15% | Output 4. Strengthened national capacity for the delivery of inclusive programmes | • Number of adolescents and youth who benefited from knowledge and life skills programmes, including their implementation  
  **Baseline:** 0 (2021); **Target:** 10,000 (2027) | Ministry of Youth and Sports, Ministry of Health,  
Ministry of National Education,  
Ministry of | $1.0 million  
($0.65 million from regular resources and  
$0.35 million from other resources) |
<table>
<thead>
<tr>
<th>Related UNFPA Strategic Plan outcome indicator(s):</th>
<th>that promote adolescent and youth development.</th>
<th>Religious Affairs and Wakfs (Endowments), National youth council, NGOs; WHO, UNICEF, UNAIDS</th>
<th>$0.35 million from other resources</th>
</tr>
</thead>
</table>
| • Number of national programmes that promote youth-led innovative initiatives, including digital solutions, for accelerating the achievement of the transformative results, with support from UNFPA  
  Baseline: 0; Target: 2 | • Number of youth-focused innovative platforms/initiatives at national and subnational levels that engage adolescents and youth to contribute to achieving the SDGs and the ICPD Programme of Action  
  Baseline: 0 (2021); Target: 5 (2027) |                                                                                   |                                  |
|                                                                 | • Number of youth-led structures supported by UNFPA to sensitize the youth on safe reproductive health behaviour  
  Baseline: 0 (2021); Target: 50 (2027) |                                                                                   |                                  |
|                                                                 | • Number of partners, including NGOs, supported to promote adolescent and youth development  
  Baseline: 0; Target: 5 |                                                                                   |                                  |