



**Executive Board of the
United Nations Development
Programme, the United Nations
Population Fund and the United
Nations Office for Project Services**

Distr.: General
7 June 2021

Original: English

Second regular session 2021

30 August to 3 September 2021, New York

Item X of the provisional agenda

UNFPA – Country programmes and related matters

DRAFT

United Nations Population Fund

Country programme document for the Lao People's Democratic Republic

Proposed indicative UNFPA assistance:	\$18.0 million: \$5.5 million from regular resources and \$12.5 million through co-financing modalities or other resources
Programme period:	Five years (2022-2026)
Cycle of assistance:	Seventh
Category per decision 2017/23:	Orange
Alignment with the UNSDCF Cycle	United Nations Sustainable Development Cooperation Framework, 2022-2026

Proposed indicative assistance (in millions of \$):

Programme outcome areas		Regular resources	Other resources	Total
Outcome 1	Sexual and reproductive health	1.2	5.0	6.2
Outcome 2	Adolescents and youth	1.2	3.0	4.2
Outcome 3	Gender equality and empowerment of women	1.1	3.5	4.6
Outcome 4	Population dynamics	1.2	1.0	2.2
Programme coordination and assistance		0.8	-	0.8
Total		5.5	12.5	18.0

I. Programme rationale

1. The Lao People's Democratic Republic is a mountainous, landlocked country, with an estimated population of 7.2 million, which is expected to grow to 8.1 million by 2030. With 50 ethnic groups, the country is sparsely populated and 68 per cent rural. However, the country is experiencing one of the fastest urbanization rates in the Association of Southeast Asian Nations (ASEAN) and could be 50 per cent urban as early as 2030.

2. One of the fastest-growing economies in South-East Asia over the past decade, Laos is expected to graduate from 'least developed country' status by 2026. This is later than initially expected, in part due to the socio-economic fallout of the COVID-19 pandemic, which is threatening the hard-won development gains, affecting the country's development trajectory. The United Nations Common Country Assessment (CCA) analysis shows that rising poverty is compounded by increasing inequality. Laos has strong socio-economic ties to neighbouring countries; plans are underway for an increase in mobility of people, goods and services across borders and through the new North-South corridor, which will make Laos 'land-linked'.

3. The ninth National Socio-economic Development Plan, 2021-2025 (NSED9) aims for greater emphasis on economic diversification, human capital, a 'green' economy and resilience. There is a growing recognition by the Government of the urgency to invest heavily in human capital, especially health, education and empowerment of women and youth, to harness its demographic dividend. The Vientiane Declaration on partnership for effective development cooperation (2016-2025) is the overarching framework for development cooperation in the Lao People's Democratic Republic.

4. As the country undergoes its demographic transition, the population growth rate has been declining; the total fertility rate is 2.7 and 60 per cent of the total population is under the age of 30. An average population growth rate of 1.1 per cent is expected over the coming 20 years and Laos will experience the largest growth in its working-age population over the next 10 years, thus presenting an opportunity to realize a demographic dividend. However, while the country has made significant strides in primary enrolment, secondary school retention and completion face significant challenges, with 4 out of 10 youth aged 15-17 years out of school. Teenage pregnancy and child marriage/early union rates are amongst the highest in ASEAN (83 per 1,000 girls aged 15-19 years and 23 per cent, respectively) but teenage pregnancy rates are much higher (136 per 1,000 girls aged 15-19 years) in rural areas without roads.

5. Maternal mortality declined rapidly to meet Millennium Development Goals targets but remains high (185 per 100,000 live births). Disaggregated data reveals significant disparities by education, geography, income and ethnicity, identifying those most at risk of being left behind. Antenatal care and skilled birth attendance coverage have improved, with 69 per cent of births attended by skilled personnel. Coverage is as low as 34 per cent in rural areas without roads, and there are significant disparities for some ethnic groups. Limited access to high-quality health services, including urban-rural disparities, as well as limitations in the availability, accessibility, acceptability and quality of sexual and reproductive health services, remains a challenge. The Government is committed and has been innovating to address these challenges.

6. The unmet need for contraceptives stands at 14 per cent and is as high as 75 per cent for those sexually active but not in a union. The modern contraceptive prevalence rate stands at 49 per cent in 2017. Challenges in improving contraceptive supplies at the local level are being addressed through the logistic management information system, focusing on the 'last mile'. When disaggregated by method, the coverage of the long-acting reversible contraceptives is particularly low (3.5 per cent) due to insufficient information on contraceptive options and issues related to the quality of family planning services. There is a high potential of improving contraceptive coverage by shifting towards long-acting reversible methods.

7. Several measures to combat violence against women, including the criminalization of marital rape, and the development of a national action plan, have been undertaken. Since the

national study on violence against women was undertaken (2014), limited counselling services and shelters for victims and awareness-raising programmes have been put in place. However, challenges remain. At the Nairobi Summit on ICPD25, the Government committed to investing in prevention and rolling out the essential service package in response to violence against women.

8. The COVID-19 pandemic was met with an effective, timely, government-led response. Analysis shows that women are disproportionately affected by the COVID-19 impact in terms of unemployment, the burden of care in households and an increase in violence and abuse. It is expected that the COVID-19 pandemic will lead to an increase in unplanned pregnancies and the consequent increase in maternal deaths. It is also projected that school dropouts could further increase by five per cent.

9. The country is vulnerable to climate change and has been facing extreme weather events with greater intensity and frequency, requiring increased efforts to build resilience and strengthen disaster preparedness and response.

10. The CCA identified the following groups as those being most at risk of being left behind: adolescents and youth, especially girls; migrants; women; persons with disabilities; people living with HIV; older persons; those who lack education; people from ethnic groups; and people residing in remote areas far from services and protection systems. While the socio-cultural practices are changing, social norms and practices that negatively influence women and young people's access to sexual and reproductive health information and services need to be addressed more comprehensively.

11. While data is available, there is a need for strengthened use of disaggregated data for planning and monitoring progress towards development results. More consistent use of the data available to inform decision-making related to policies and programmes would help in prioritizing and budgeting decisions.

12. The sixth country programme evaluation recommended that UNFPA (a) balance engagement at the subnational level for sustainable outcomes; (b) prioritize support to scale up and accelerate progress towards the Nairobi commitments of the Government by 2030, including engaging a network of diverse partners; (c) reach those vulnerable due to geographic location, cultural and linguistic barriers, people living with disabilities, and develop disaggregated programme indicators, targets and annual milestones to track progress; (d) continue investment in its technical and convening role as a competent and purposeful data and research agency for evidence-based priority-setting and development interventions; and (e) build on previous effective humanitarian responses to strengthen the women-friendly spaces based on global good practices.

13. The comparative advantage of UNFPA is in its leadership on sexual and reproductive health, including strengthening maternal health services; its advocacy and technical assistance around the 'Noi ecosystem', a comprehensive, evidence-based programme framework for adolescent girls; its convening role on the demographic dividend to leverage the necessary investments in health and education; its work on prevention and response to gender-based violence; and its ability to provide a platform for dynamic innovative partnerships including with the private sector and civil society on issues of adolescents and youth and gender-based violence.

14. Through the *Lao 2030 report*, UNFPA facilitated analysis of population data to inform the United Nations Sustainable Development Cooperation Framework (UNSDCF) 2022-2026 and the NSEDP9, with a focus on the necessary investments in people to achieve the pillars of sustainable development, while emphasizing the principles of 'leave no one behind', gender equality and the empowerment of women, human rights and resilience. UNFPA will continue to actively engage the United Nations country team (UNCT), contributing to integrated policy and programme solutions in support of government efforts towards achieving its national priorities and the 2030 Agenda for Sustainable Development. Within the UNSDCF, UNFPA will continue to participate in joint programmes to leverage resources for ICPD25 commitments and expand existing coalitions.

II. Programme priorities and partnerships

15. The country programme seeks to accelerate progress towards the achievement of universal access to sexual and reproductive health and reproductive rights. This will be done through the following investments in human capital development: supporting adolescent girls and boys to delay pregnancy and marriage until adulthood by acquiring skills and competencies, including through comprehensive sexuality education, ensuring every pregnancy is by choice and that no woman dies while giving life, and that women and girls can live lives free from abuse and violence. These are essential for youth to realize their full potential and for the country to realize its demographic dividend. The programme will focus on supporting national systems so that the country stays on track to achieve the SDG and ICPD25 commitments despite setbacks due to the COVID-19 pandemic.

16. Aligned with the UNSDCF, the 2030 Agenda, the International Conference on Population and Development (ICPD) Programme of Action and the NSEDP9, the programme is guided by key normative commitments, including the Convention on the Elimination of All Forms of Discrimination against Women, and government responses to the 2020 Universal Periodic Review. It will contribute to the three transformative results of UNFPA through advocacy for increased investment in social development and inclusive growth.

17. The programme draws from the relevant sectoral plans: the updated Reproductive, Maternal, Neonatal, Child and Adolescent Health Strategy and the ninth Education and Sports Sector Plan. Cross-cutting plans to which the programme will contribute include the national plans of action for the prevention of violence against women and girls; for gender equality; and women and children. The National Youth Strategy and the National Population and Development Policy 2019-2030 will also serve as guiding documents for the country's social development objectives and the Government commitments to ICPD25. Each provincial plan has incorporated the 'Noi ecosystem' for increased investments in adolescent girls and support of the ICPD25 commitments. Working with the United Nations system, UNFPA will build resilience by feeding into and supporting the national disaster preparedness and response plans, ensuring the inclusion of the minimum initial service package for reproductive health in emergencies and the minimum standards for prevention and response to gender-based violence in emergencies.

18. UNFPA will contribute to United Nations efforts to realize the potential for a demographic dividend in Laos within the reality of rapid urbanization and increased migration within and across borders. To accelerate action to reduce teenage pregnancy, child marriage and school dropouts, and taking into consideration the large cohort of adolescents who will annually enter the workforce, UNFPA will advocate for increased investments in women, adolescents and youth, and partnerships with diverse stakeholders, and will continue efforts to leverage financing for ICPD25 commitments.

19. UNFPA will continue health system and community-based interventions for strengthening midwifery to accelerate the reduction of maternal deaths, to reach those furthest behind. The programme will build on the pilot telehealth interventions for reaching women and girls in remote areas. Recognizing that women are economically active almost equally as men but face systemic, cultural obstacles related also to abuse and violence, interventions will target changing negative socio-cultural norms, especially by reducing the unmet need for contraceptives, improving services for prevention and response to violence against women and engaging men as partners to address gender inequality. Mental health and psycho-social services will be strengthened, with a focus on women and young people. With the next Lao social indicator survey (scheduled for 2022), the population and housing census (scheduled for 2025) and ongoing efforts for collaboration among development partners for strengthening the civil registration and vital statistics, UNFPA will contribute to strengthening systems and capacities related to population data.

20. The unique added value of UNFPA support to the Government lies in the delivery of results through a diverse and growing number of partnerships, including the private sector, and leveraging resources of international non-governmental organizations for scale and

reach. UNFPA partnerships have expanded and diversified to include a growing portfolio of private-sector alliances. The approach maximizes reach and impact while raising the visibility of the need of women and girls to be free from violence and have bodily autonomy and ensuring that no woman dies while giving birth. The alliances are focused on expanding the delivery of results, especially at subnational levels. The alliance building focuses on complementarity and collaboration, partners include the media, the hotel industry, the banking sector in addition to key stakeholders such as government ministries, United Nations agencies, development partners, civil society and beneficiaries. Mutually beneficial South-South and triangular cooperation through cross-border initiatives within the Mekong countries will also be explored.

21. Strengthening resilience through investments in preparedness and response to natural disasters based on the national disaster risk profile of Lao People's Democratic Republic will be integral to the programme. The aim is to ensure that sexual and reproductive health, psycho-social support and protection from violence and exploitation for women and youth are included in national and subnational disaster legal and policy frameworks, contingency plans and response plans.

22. The UNFPA programme will contribute to three UNSDCF outcomes: (a) equitable and inclusive access to social services for the most vulnerable and marginalized; (b) inclusive, resilience-transformative and sustainable socio-economic and demographic opportunities; and (c) access to exercise rights, accountability of institutions and upholding of rule of law and international human rights standards and norms.

23. The programme will balance upstream policy support with catalytic interventions at the subnational level in selected geographical areas. Subnational interventions will build on previous efforts and incorporated in provincial workplans through the 'Noi framework' integration. Selection of intervention sites will be agreed upon with the Ministry of Planning and Investment and relevant authorities, based on key sexual and reproductive health indicators, vulnerability mapping, continuity of past support and partnership opportunities. UNFPA will work with the Government and partners to address sustainability through national budget provisions and leveraging financing to scale up effective initiatives. The outputs are mutually reinforcing.

24. The UNFPA work will be aligned to the changing socio-economic environment and emerging trends of urbanization and mobility, whereby emerging vulnerabilities will be anticipated drawing on population data, and preventive measures for resilience building will be implemented. UNFPA will combine advocacy and evidence-based policy advice, knowledge management, capacity building and partnerships in support of government efforts to accelerate the achievement of the SDGs and reduce geographic, socio-economic, gender and socio-cultural inequalities. The direct beneficiaries of the programme will be young people, especially adolescent girls and boys and women, with a focus on populations marginalized by geography, language, disability and ethnicity, to leave no one behind.

A. Sexual and reproductive health

25. The programme will accelerate action towards universal access to sexual and reproductive health, to reduce preventable maternal deaths and the unmet need for family planning, with a focus on women and girls most left behind. The two outputs will strengthen the health system and strengthen the capacity to deliver high-quality comprehensive and integrated sexual and reproductive health services.

26. *Output 1. The health system at national and subnational levels is strengthened for the implementation of high-quality evidence-based sexual and reproductive health and reproductive rights plans and programmes to achieve universal health coverage, across the development and humanitarian continuum.*

27. This will be done through advocacy, policy dialogue, evidence generation and technical assistance to strengthen capacity for the implementation of evidence-based comprehensive sexual and reproductive health policies, programmes and plans by: (a) advocating for inclusion of a comprehensive package of sexual and reproductive health services within the

universal health coverage framework, in support of a resilient health system; (b) strengthening regulatory frameworks and training of professional midwives and other health professionals to improve the quality of reproductive, maternal, newborn, child and adolescent health services, including provision of basic emergency obstetric and newborn care and family planning services to reach the most vulnerable and marginalized groups, across the development and humanitarian continuum; (c) expanding synergies with health partners for scaling up; (d) developing analysis to support evidence-based advocacy for sustainable domestic resource allocations to health financing for sexual and reproductive health services; (e) strengthening protocols and guidance for adolescent and youth-friendly sexual and reproductive health services, including to reduce adolescent pregnancy; (f) strengthening capacity for ensuring reproductive health commodities reach the last mile.

28. Output 2. Strengthened capacity of health providers in priority provinces to deliver high quality integrated comprehensive sexual and reproductive health information and services for all, with a focus on women and girls, including those in conditions of greater vulnerability, across the development and humanitarian continuum.

29. To achieve this, UNFPA will focus on (a) capacity building of health care providers, including midwives, to provide high-quality, integrated sexual and reproductive health information and services in health facilities and through telehealth, including for adolescents and youth, and the most vulnerable groups, such as survivors of gender-based violence, sex workers, those of diverse sexual orientation and gender identity, people with disabilities and those living in hard to reach areas; (b) advocacy for deployment of midwives based on needs and that midwives are drawn from the communities they serve, as a part of broader efforts to strengthen the midwifery profession; (c) strengthen capacity to use telehealth for providing essential reproductive, maternal, newborn, child and adolescent health services to reach people living in remote areas; (d) support demand creation in communities, empowering women and families to access sexual and reproductive health services at subnational levels; and (e) engaging men and boys to create a supportive environment for women's and girls' access to sexual and reproductive health and reproductive rights.

B. Adolescents and youth

30. Output 1. Strengthened national and subnational capacities to increase access of young people to gender-responsive sexual and reproductive health and reproductive rights information and services, skills development and opportunities that enable them to make informed choices.

31. This will be done through technical support, evidence generation and advocacy in selected provinces and districts by (a) supporting the establishment of a national coordination committee for planning and monitoring of the implementation of the national youth and adolescent strategy, for enhanced accountability; (b) implementing evidence-based, gender-responsive and costed 'Nang-Noi' programmes to empower adolescent girls and boys in selected provinces with high adolescent fertility, high school dropout and large ethnic populations; (c) supporting implementation of a full package of comprehensive sexuality education in primary schools nationwide, and expansion to secondary, technical and vocation education and training and higher education; (d) strengthening mental health and psychosocial services provided to adolescents and youth through training of counsellors; (e) engaging men and boys for a conducive environment for adolescent girls to realize their rights; and (g) strengthening the capacity of young people and youth networks to engage in advocacy and decision-making.

C. Gender equality and women empowerment

32. Output 1. Strengthened capacities and multisectoral coordination at national and subnational levels to implement legal and policy frameworks related to gender equality and combating gender-based violence in targeted provinces across the development and humanitarian continuum.

33. This will be done through (a) advocacy and implementation of national action plans related to gender equality and gender-based violence; (b) support to legal and accountability frameworks, so that laws are aligned with international treaties and standards to advance gender equality and women's rights and to prevent and respond to gender-based violence and child marriage; (c) strengthening capacities of government and civil society decision-makers and service providers at national and subnational levels to ensure survivor-centred, coordinated, multisectoral services, to prevent and respond to gender-based violence in development and humanitarian settings, in line with the essential service package and the minimum standards for prevention and response to gender-based violence in emergencies; (d) advancing gender equality, challenge biased social norms, including gender-based violence and child marriage, address harmful masculinities and promote reproductive health and reproductive rights by empowering women and girls, men and boys, community authorities, older people, people with disabilities, people living with HIV, sex workers, those of diverse sexual orientation and gender identity, people in remote communities and diverse ethnic groups in selected provinces; (e) strengthening coordination and expand alliances, including with civil society, for joint advocacy and interventions to advance gender equality and address gender-based violence and harmful practices.

D. Population dynamics

34. Output 1. Strengthened capacities of the Lao Statistics Bureau and selected ministries to produce and utilize population data for planning and monitoring of the national social-economic development plan, sectoral plans, the ICPD Programme of Action and the Sustainable Development Goals, including humanitarian preparedness and response.

35. This will be accomplished through technical assistance to; (a) strengthen capacity to use disaggregated population and reproductive health data and in-depth analysis at national and subnational levels to address inequities and prioritize policies, programmes and interventions to harness the full potential of its demographic dividend; (b) support the use of disaggregated population data to monitor implementation of national policies, and progress towards the achievement of the ICPD Programme of Action, the SDGs, as well as commitments to the Universal Periodic Review, the Convention on the Elimination of All Forms of Discrimination against Women and the Convention on the Rights of the Child; (c) strengthen capacity of national and local government officials to be able to integrate population data for formulation of population policies and plans; (d) strengthen use of population data for analytical studies related to population dynamics, including urbanization and migration, which will impact national development; (e) strengthen multisectoral partnerships and coordination among the Government, development partners and other institutions to bridge the gap between data producers and users; (f) strengthen the capacity of the Lao Statistics Bureau, ministries, the National University of Lao and other institutions to generate, analyse and disseminate population and sexual and reproductive health data, including the 2022 Lao social indicator survey, the 2025 population and housing census, and the ongoing strengthening of the civil registration and vital statistics data systems.

III. Programme and risk management

36. The Lao People's Democratic Republic is strongly committed to the 2030 Agenda, with the Prime Minister chairing the National Steering Committee for SDG implementation. UNFPA, together with other United Nations agencies, works closely with relevant partners in the development, monitoring and implementation of the national and sectoral plans and strategies. The annual roundtable process, along with sector working groups, is the major mechanism for development-cooperation policy dialogue.

37. The Ministry of Planning and Investment will be the coordinating authority for the programme and, together with the ministries of health and education, will oversee the delivery of programme outcomes and outputs.

38. UNFPA is active in six United Nations joint programmes and leads two of them. UNFPA, housed in the common United Nations premises, engages in multiple joint initiatives

and is a part of discussions to explore further efficiencies. UNFPA will continue to lead and convene areas of work related to the ICPD Programme of Action within the UNCT and development partners, building on its existing leadership for prevention of gender-based violence initiatives, collaboration related to realizing the full potential of adolescents, especially adolescent girls through the 'Noi framework' and the adolescent girl working group, as well as United Nations collective efforts to ensure no one is left behind in civil registration and vital statistics.

39. The main UNFPA partners include the Ministry of Planning, Ministry of Health, Ministry of Education and Sports, Lao Women's Union and the National Commission for the Advancement of Women and Children, Lao Youth Union, and the Lao Statistics Bureau. Selected provincial authorities are expected to have an active role, based on the need for strengthening primary health care and community-based responses.

40. The strategic partnerships with the private sector, development partners, international financial institutions and civil society organizations will be leveraged as per the national context and regulatory framework. UNFPA will focus on strengthening alliances for delivery of ICPD25 commitments and the three transformative results and will mobilize resources and leverage financing, guided by the integrated strategic partnerships and resource mobilization plan.

41. The scale of financial resources in the proposed programme is similar to the current programme; however, programme interventions will focus on the decentralized level. The design of the current programme is based on the availability of core funding and a growing volume of non-core funds. The partnership strategy and building-block approach to resourcing the programme through non-core funds envisions an increase in relevant technical staff through additional resources as they progressively become available; this is envisaged particularly for the upcoming census.

42. The country office will continue to source expertise from the UNFPA Regional Office for Asia and the Pacific and from UNFPA headquarters to ensure high-quality technical support, as required, for substantive areas of work as well as for managing increasingly complex strategic partnerships and joint programmes. UNFPA has been sourcing expertise through its strategic partners locally, such as those in the hospitality and banking industries, and regionally through universities and think tanks that can apply best practices to complement UNFPA programme design and interventions.

43. Risks for delivery of the programme include (a) limitations of implementing partners due to capacity constraints, high staff turnover, financial limitations especially due to the impact of the COVID-19 pandemic on domestic and other resources; (b) lack of coordination between national and provincial authorities; (c) competing priorities for resource allocation by government and donors; and (d) natural disasters.

44. Building on the collective UNCT work undertaken for human capital investments, agency-specific and collective advocacy with development partners will be undertaken for building support to mitigate the above risks. Financial leveraging and diversification of partnerships will aim to address capacity and funding constraints. Evidence and data will be used to make investment cases. In the case of disasters, funds will be reprogrammed in consultation with the Government.

45. This country programme document outlines UNFPA contributions to national results and serves as the primary unit of accountability 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 concerning country programmes are prescribed in the UNFPA programme and operations policies and procedures, and the internal control framework.

IV. Monitoring and evaluation

46. The programme was designed using results-based and rights-based approaches to planning, implementation and monitoring and applying UNFPA social and environmental

standards. United Nations approaches, such as the harmonized approach to cash transfers, and others that may be presented through the business operations strategy will be put in practice for the strengthening of national systems. UNFPA will prioritize support to reporting on localized SDG indicators. UNFPA will be part of the United Nations monitoring and evaluation working group.

47. UNFPA will engage with the UNCT and the Government within the country's round tables and sector working groups to implement the agreed-upon approaches among the government and development partners to monitor and evaluate development cooperation, including the UNSDCF. Annual sector reviews will inform the agency cooperation frameworks as well as the UNSDCF. The internal United Nations mechanisms for coordination and enhancing synergies will be undertaken through the outcome results groups and the 'leave no one behind' technical group that will analyse progress and emerging challenges towards international commitments in support of normative human rights frameworks. UNFPA will engage with the steering committee of the UNSDCF and respond to Government requests to support SDG monitoring and reporting, including through the voluntary national report.

48. A midterm review of the programme will seek to gauge the impact of the COVID-19 pandemic; course corrections might be required to support government efforts to achieve the ICPD25 commitments and the SDG targets through the national and sectoral plans. This will be aligned to migration and urbanization trends, which are expected to shift due to the anticipated 'land-linked' status.

49. UNFPA will develop a monitoring and evaluation plan that will include all monitoring and evaluation activities, with clear roles, responsibilities, timelines and budgets. Progress will be assessed through bilateral quarterly meetings, joint annual programme reviews and the government-led round table process and its mechanisms, Quality-assurance activities will be conducted on an ongoing basis, including through spot checks, monitoring and regular review meetings and training.

50. UNFPA and its implementing partners will implement the monitoring and costed evaluation plans, in line with the monitoring and evaluation of the UNSDCF and sectoral plans.

RESULTS AND RESOURCES FRAMEWORK FOR THE LAO PEOPLE'S DEMOCRATIC REPUBLIC (2022-2026)

NATIONAL PRIORITY: Improved qualities of human resources with enhanced research capacities, and abilities to meet development needs and utilized science and technologies to improve efficiency and add value to productions and services – More inclusive and better quality healthcare services and nutrition.				
UNSDCF OUTCOME INVOLVING UNFPA: By 2026, people, especially the most vulnerable and marginalized, will have more equitable and inclusive access to and will benefit from better quality health, nutrition, food, shelter, protection, water, sanitation, and hygiene (WASH), and education and learning, including during emergencies.				
RELATED UNFPA STRATEGIC PLAN OUTCOME: Sexual and reproductive health and reproductive rights				
UNSDCF outcome indicators, baselines, targets	Country programme outputs	Output indicators, baselines and targets	Partner contributions	Indicative resources
<p>UNFPA strategic plan outcome indicator(s):</p> <ul style="list-style-type: none"> Number of women, adolescents and youth who have utilized integrated sexual and reproductive health services <i>Baseline: 2,283,153 (2020); Target: 2,625,626 (2026)</i> Proportion of births attended by skilled health personnel <i>Baseline: 64 (LSIS 2017); Target: 90 (2025)</i> Proportion of women of reproductive age (aged 15-49 years) who have their need for family planning satisfied with modern methods <i>Baseline: 71.1 (LSIS 2017); Target: 76 (2025)</i> 	<p>Output 1. The health systems at national and subnational levels are strengthened for the implementation of high-quality evidence-based sexual and reproductive health and reproductive rights plans and programmes to achieve universal health coverage, across the development and humanitarian continuum</p>	<ul style="list-style-type: none"> Number of health professional pre-service curricula (midwife, nurse, primary health care workers' curricula) that have adolescent and youth-friendly services, family planning, gender-based violence, Minimum Initial Service Package included <i>Baseline: 1; Target: 3</i> Number of midwifery training institutions accredited according to national and international standards <i>Baseline: 0; Target: 3</i> Number of provinces in which the logistics management information system, including 'reaching the last mile', for forecasting (provincial and district levels) and monitoring sexual and reproductive health commodities are implemented (disaggregated by commodity) <i>Baseline: 3; Target: 6</i> 	<p>Ministries of Health, Education and Sport, and Planning and Investment; Lao Youth Union; Lao Women's Union; Provincial Health Department; Lao Association of Midwives; development partners; civil society organizations; the media</p>	<p>\$2.2 million (\$0.4 million from regular resources and \$1.8 million from other resources)</p>
	<p>Output 2. Strengthened capacity of health providers in priority provinces to deliver high-quality integrated comprehensive sexual and reproductive health information and services for all, with a focus on women and girls, including those in conditions of greater vulnerability, across the humanitarian and development continuum</p>	<ul style="list-style-type: none"> Proportion of facilities in priority provinces with midwives skilled to provide basic emergency obstetric and newborn care <i>Baseline: 21%; Target: 90%</i> Percentage of villages in priority provinces where trained Village Health Volunteers engage men and boys to support sexual and reproductive health information and services <i>Baseline: 0; Target: 50%</i> Number of health facilities, at provincial and district level, from prioritized provinces, implementing the National adolescent and youth-friendly services standards <i>Baseline: 0; Target: 6</i> 	<p>Ministries of Health; Vientiane Youth Centre, Education and Sport, Planning and Investment; Lao Youth Union, Lao Women's Union; Provincial Health Department; Lao Association of Midwives; development partners; civil society organizations; the media</p>	<p>\$4.0 million (\$0.8 million from regular resources and \$3.2 million from other resources)</p>
NATIONAL PRIORITY: Improved qualities of human resources with enhanced research capacities, and abilities to meet development needs and utilized science and technologies to improve efficiency and add value to productions and services – More inclusive and better quality healthcare services and nutrition. Improved utility infrastructure and inclusive accessibility to reduce infrastructure and service accessibility gaps – High-quality education to build highly skilled human resources				

UNSDCF OUTCOME INVOLVING UNFPA: By 2026, people, especially the most vulnerable and marginalised, will have more equitable and inclusive access to and will benefit from better quality health, nutrition, food, shelter, protection, water, sanitation, and hygiene (WASH), and education and learning, including during emergencies				
RELATED UNFPA STRATEGIC PLAN OUTCOME: Adolescents and youth				
UNSDCF outcome indicators, baselines, targets	Country programme outputs	Output indicators, baselines and targets	Partner contributions	Indicative resources
<p>UNSDCF outcome indicator(s):</p> <ul style="list-style-type: none"> Adolescent birth rate (aged 15-19 years per 1,000 women) <i>Baseline: 83 (LSIS II 2017); Target: 63.2 (2025)</i> 	<p>Output 1. Strengthened national and subnational capacities to increase access of young people to gender-responsive sexual and reproductive health and reproductive rights information, services, skills development and opportunities that enable them to make informed choices</p>	<ul style="list-style-type: none"> Number of priority provinces implementing ‘Nang-Noi’ (girls and boys groups) programme to empower adolescent girls and boys <i>Baseline:3; Target:6</i> Number of provinces implementing a full package of comprehensive sexuality education and raising awareness on mental health and psycho-social services in primary, secondary, technical and vocational education and training and higher education <i>Baseline:1; Target:4</i> 	<p>Ministries of: Health, Education and Sport; Lao Youth Union; Vientiane Youth Centre; Lao Women’s Union; development partners; the media; civil society organizations</p>	<p>\$4.2 million (\$1.2 million from regular resources and \$3.0 million from other resources)</p>
NATIONAL PRIORITY: Gradually enhance people’s material and mental well-being as per the direction of food and income security – Promoting and creating opportunities for women, youth, children, the elderly, the disadvantaged and people with disabilities to enjoy development, gender equality and be able to fully contribute to the socio-economic development				
UNSDCF OUTCOME INVOLVING UNFPA: By 2026, people, especially the most vulnerable and marginalised, will have more equitable and inclusive access to and will benefit from better quality health, nutrition, food, shelter, protection, water, sanitation and hygiene (WASH), and education and learning, including during emergencies.				
RELATED UNFPA STRATEGIC PLAN OUTCOME: Gender equality and women’s empowerment				
UNSDCF outcome indicators, baselines, targets	Country programme outputs	Output indicators, baselines and targets	Partner contributions	Indicative resources
<p>UNFPA strategic plan outcome indicator(s):</p> <ul style="list-style-type: none"> Proportion of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner in the previous 12 months, by age and place of occurrence <i>Baseline: 30.3% (VAW 2014); Target: 15% (2025)</i> Laws and regulations implemented to guarantee full and equal access to women and men aged 15 years and older to sexual and reproductive health care, information and education <i>Baseline: 2; Target: 4</i> 	<p>Output 1. Strengthened capacities and multi-sectoral coordination at national and sub-national levels to implement legal and policy frameworks related to gender equality and combating gender-based violence in targeted provinces across the development and humanitarian continuum</p>	<ul style="list-style-type: none"> Number of women’s protection shelters established in selected provinces provide multisectoral response services to gender-based violence survivors, in line with international standards (Essential Services Package for women and girls subject to violence) <i>Baseline:0; Target:3</i> The End Violence Against Women coordination mechanism and referral pathway, applicable for development and humanitarian contexts are established and implemented at the central level and in selected provinces <i>Baseline: No; Target: Yes</i> Number of villages where the Male Engagement in Gender-based Violence Prevention and Sexual Reproductive Health Promotion Manual has been implemented that have increased knowledge on gender, gender-based violence and sexual and reproductive health and reproductive rights <i>Baseline: 3, Target: 36</i> 	<p>Ministries of: Health, Education and Sport; Lao Youth Union; Lao Women’s Union; National Commission for the Advancement of Women, Mothers and Children; development partners; the media; civil society organizations</p>	<p>\$4.6 million (\$1.1 million from regular resources and \$3.5 million from other resources)</p>

NATIONAL PRIORITY: Efficient public administration, and equal, just, and protected society following the direction of the effective and strict rule of laws – Improvement of national indicators monitoring and evaluation framework as well as preparation for developing the 10th NSEDP, enhancing coordination capacity between the SDG secretariat and coordination points, including increasing responsibilities of relevant sectors in the management of information and indicators				
UNSDCF OUTCOME INVOLVING UNFPA: By 2026, people, especially the most vulnerable and marginalized, will be better served by public institutions at all levels in a transparent and inclusive manner, able to exercise their rights and obligations and the institutions shall be strengthened and more accountable while the rule of law and international human rights commitments made by Lao PDR are upheld				
RELATED UNFPA STRATEGIC PLAN OUTCOME: Population dynamics				
UNSDCF outcome indicators, baselines, targets	Country programme outputs	Output indicators, baselines and targets	Partner contributions	Indicative resources
<p>UNSDCF outcome indicator(s):</p> <ul style="list-style-type: none"> Proportion of sustainable development indicators produced at the national level, with full disaggregation when relevant to the target, following the Fundamental Principles of Official Statistics <i>Baseline: 67.8% (2017); Target: 75 (2026)</i> 	<p>Output 1. Strengthened capacities of the Lao Statistics Bureau and selected ministries to produce and utilize population data for planning and monitoring of the National Social-Economic Development Plan, sectoral plans, ICPD Programme of Action and the Sustainable Development Goals, including in humanitarian preparedness and response</p>	<ul style="list-style-type: none"> Fifth Population and Housing Census 2025 is completed with high-quality disaggregated population and housing data <i>Baseline: No; Target: Yes</i> Number of in-depth analysis of inequities conducted using population data from the population and housing census, Lao Social Indicator Survey and civil registration and vital statistics to inform policies and plans <i>Baseline: 0; Target: 2</i> Number of ICPD Programme of Action and SDG localized indicators included in the voluntary national reviews, the NSEDP monitoring and evaluation frameworks <i>Baseline: 0; Target: 5</i> 	<p>Ministries of: Planning and Investment; Health, Education and Sport; Lao Statistics Bureau; Home Affairs, National University of Laos; National Assembly; National Commission for the Advancement of Women, Mothers and Children; Lao Women's Union; Lao Youth Union; the media; development partners; province authorities</p>	<p>\$2.2 million (\$1.2 million from regular resources and \$1.0 million from other resources)</p>