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UNFPA – Country programmes and related matters

DRAFT

United Nations Population Fund

Country programme document for Mongolia

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| Proposed indicative UNFPA assistance: | \$20.7 million: \$3.6 million from regular resources and \$17.1 million through co-financing modalities or other resources |
| Programme period: | Five 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. Mongolia is a landlocked, mineral-rich lower-middle-income country, with an estimated population of 3.3 million; it is one of the least densely populated countries in the world. With a largely youthful, urban and mobile population, set to reach 4.9 million by 2040, the country has an opportunity to realize the demographic dividend.
2. Over the past three decades, Mongolia has made good economic progress, driven by the mineral extraction sector. However, gross national income per capita remains low and economic growth is not diversified nor inclusive enough to create employment opportunities for all in line with the Government's Vision 2050 human development goals. Mongolia has one of the highest coverage levels of social protection in the Asia and Pacific region, and on the human development index it is ranked 94 out of 189 countries. Despite progress in social inclusion, over 25 per cent of Mongolians remain poor and food insecure, and the most vulnerable lack access to critical services. High levels of socio-economic inequality have been exacerbated by the COVID-19 pandemic.
3. The United Nations common country analysis (CCA) identified the most at-risk of being left behind. They include women and girls, children and youth, particularly unemployed, unskilled youth, urban poor, internal migrants, rural poor and herders, older persons, persons with disabilities, ethnic minorities and sexual minorities. Drivers for exclusion include prevailing negative social norms, stereotypes and traditions; limited capacities of duty-bearers to deliver policies aimed at inclusion; lack of institutional arrangements and mechanisms to ensure the systematic inclusion and participation of rights-holders in decision-making; limited capacities of service providers to deliver public services, particularly in remote areas; the uneven implementation of social service reforms; and a disconnect between policymakers and civil society organizations working with vulnerable groups.
4. The Government has demonstrated its commitment to accelerating the implementation of the International Conference on Population and Development (ICPD) Programme of Action. The country has advanced progressive legal, policy and regulatory frameworks in sexual and reproductive health and reproductive rights and gender equality. However, gaps in implementation remain. One major challenge is limited institutional and human resources capacity to effectively implement laws and policies as they require comprehensive and intersectoral analysis to make evidence-based, result-oriented, coherent and prioritized policy formulation for sustainable development. Other gaps include weak coordination; no specific budget allocation for sexual and reproductive health; and limitations in the availability and utilization of fully disaggregated data.
5. Mongolia made significant progress in decreasing maternal mortality (down from 155 per 100,000 live births in 2000 to 30.2 per 100,000 in 2020), putting it on track to achieve the country's Sustainable Development Goal (SDG) target. The Government pledged at the 25th anniversary summit of the ICPD in Nairobi (ICPD+25) to further reduce the ratio to 15 per 100,000 by 2030. However, the continuing low utilization of emergency obstetrics services, particularly at the rural *soum* (subprovince) health centres and the increased role of non-obstetric causes in maternal mortality, including gender-based violence, pose risks to ambitions for the further reduction in maternal mortality. This was particularly evident during the COVID-19 pandemic when maternal deaths tripled.
6. The contraceptive prevalence rate for modern methods among married women declined from 49.6 per cent in 2008 to 45.2 per cent in 2018. The unmet need for contraception among married women increased from 16.9 per cent in 2013 to 22.6 per cent in 2018, reached 31.4 per cent among married young people and is increasing among unmarried adolescents and youth. Furthermore, the adolescent birth rate is high and increasing, from 40.4 per 1,000 women aged 15-19 in 2013 to 42.6 per 1,000 in 2018. The deterioration in family planning indicators reflects challenges related to the quality of care and geographic and socioeconomic disparities.
7. Gender equality has seen some progress; however, the high prevalence of gender-based violence and low levels of women's political participation are obstacles to achieving gender equality. Over half of Mongolian women have experienced at least one type of violence in their

lifetime, and 31.2 per cent of ever-partnered women report experiencing physical and/or sexual violence from their partners. Inadequate funding and lack of specialized technical capacity have hindered the full implementation of gender-based violence laws and policies. While significant investments have been made in strengthening multisectoral gender-based violence response services, several, including those offered at the one-stop service centres, are not tailored for survivors with disabilities. Prevailing discriminatory social norms and attitudes derail efforts to achieve gender equality and deter women and girls, especially the most disadvantaged, from using services and exercising their rights.

8. Mongolia is, demographically, one of the youngest countries in the region and will need to equip youth with skills and create sufficient opportunities for productive, decent work to harness the full potential of its demographic dividend while promoting rights-based access to contraceptives to reduce unplanned pregnancies. Adolescents and youth, especially the most marginalized, are vulnerable to school dropout, unemployment, mental health issues and early union. They lack comprehensive and accurate information and services on sexual and reproductive health and reproductive rights and continue to have limited participation in decision-making processes on issues that affect them. Among teenage girls, 55 per cent experienced controlling behaviour by their partners.

9. Mongolia is already an extremely dry country with temperature increases triple the global average. Climate change is increasing the frequency and severity of natural hazards (*dzuds*,¹ droughts, floods, windstorms), which has adverse impacts on agriculture, livestock and human health, and disproportionately affects women, girls and young people. Strengthening the resilience of systems, institutions and individuals to better prepare, adapt and respond to these risks, including empowering young people to lead and participate in the development and humanitarian action, is critical.

10. The new country programme will build on the success of the previous programme and is guided by the evaluation recommendations, including to: (a) ensure sustainable and uninterrupted delivery of family planning services at all levels of health care; (b) continue support to the National Centre for Maternal and Child Health to ensure sustainability of the interventions, including midwifery education, implementation of the mobile application programme, and replicating the success of telemedicine for maternal and child health; (c) strengthen institutional capacities to fully implement the national action plan on combating domestic violence and ensure budget sustainability and strengthen multisectoral cooperation and response to gender-based violence across the country; (d) support in/pre-service teacher training systems and mechanisms for comprehensive sexuality education; (e) sustain investments for adolescent and youth programming and scale up best practices; (f) strengthen the focus on marginalized groups left behind from current sexual and reproductive health services and reproductive rights; (g) support increased availability of disaggregated quality data for evidence-based policymaking; and (h) complete investment cases to secure sustained political will and funding to fully achieve the three transformative results.

11. Based on the recommendations of the evaluation of the United Nations Development Assistance Framework, 2017-2022, the new country programme will strengthen integrated programming supported by rights-based, evidence-informed advocacy for sustained investments in gender-transformative policies; effective partnerships and strategic alliances and joint resource mobilization; and strengthened national capacity for disaggregated data collection, analysis, dissemination and use.

12. The proposed programme is aligned with the United Nations Sustainable Development Cooperation Framework (UNSDCF) for Mongolia, 2023-2027, which is closely aligned to the country's Vision 2050 and will support national efforts to build back better after COVID-19 by addressing inequalities and building inclusive and resilient society through sustainable development. UNFPA will have a direct contribution to two UNSDCF strategic priorities: 1 (human development and wellbeing); and 3 (people-centred governance, rule of law and human rights), based on its comparative advantages which are (a) strong influence on policies and key

¹ A *dzud* is a Mongolian term introduced by the Government of Mongolia in July 2015 (Government resolution 286) for a severe winter in which large number of livestock die, primarily of starvation, due to being unable to graze or, in some cases, directly from the cold.

decisions; (b) evidence-based and human rights-based advocacy; (c) leadership in universal access to sexual and reproductive health and reproductive rights, youth empowerment, and addressing gender-based violence; and (d) convening power to leverage different types of partnerships.

13. UNFPA is committed to enhancing coherence and synergies with United Nations system-wide efforts in Mongolia, as reflected in the UNSDCF, through active participation in the United Nations interagency working groups, including by leading the areas of youth development, gender equality, addressing the needs of persons with disabilities and creating awareness of the demographic transition as a crucial area for the United Nations system.

II. Programme priorities and partnerships

14. The proposed country programme is aligned with the Government's Vision 2050, the UNSDCF 2023-2027, the 2030 Agenda for Sustainable Development, the ICPD Programme of Action, the ICPD+25 voluntary national commitments, and the UNFPA Strategic Plan, 2022-2025. It will support actualization of national commitments in relation to the universal periodic review, the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), and the Convention on the Rights of Persons with Disabilities (CRPD), and other human rights instruments. Aligned to the Decade of Action, the programme will adopt an integrated, multidimensional, well-coordinated approach to accelerate progress towards sustainable development, including SDGs 3 and 5.

15. The new country programme was developed in partnership with the Government, civil society organizations, United Nations organizations and relevant stakeholders, based on the principles of inclusion, human rights and equity. It will contribute to three UNSDCF strategic priorities to support the Government's commitment to universal access to sexual and reproductive health and reproductive rights, focused on achieving the three transformative results. The programme will be grounded in rights-based, gender-transformative and inclusive approaches and the principles of national ownership and sustainability. The programme will adopt targeted, innovative approaches to reach out to vulnerable, marginalized populations most at-risk of being left behind, using UNFPA comparative advantages.

16. The proposed programme will accelerate achievement of the three transformative results through: (a) disaggregated data, strategic partnerships and coordination to sharpen the focus on vulnerable populations; (b) scaling up successful practices and programme models to increase coverage and quality of sexual and reproductive health services in support of universal access; (c) systematically addressing inequalities and discriminatory gender and social norms; and (d) scaling up engagement of youth in decision-making, participation and leadership to effect change and contribute to human development capacity in Mongolia.

17. Recognizing the risks posed by climate change, and in line with the UNSDCF and the Government's commitment to the Sendai Framework for Disaster Risk Reduction, UNFPA will work across the humanitarian-development continuum to integrate life-saving sexual and reproductive health services, including family planning, maternal health and gender-based violence prevention and response, into disaster risk reduction and climate action through a resilience-building approach.

18. The programme will leverage partnerships with government entities at the national and subnational levels. Efforts will be made through evidence-based policy advocacy to mobilize domestic funding to scale up successful initiatives from the previous country's programme. Strategic partnerships will be strengthened with international financial institutions, donors, civil society organizations, the media, youth and women networks, development partners, academia, think tanks, innovative institutions and the private sector to strengthen advocacy efforts and leverage resources. Under the UNSDCF, UNFPA continues to promote joint programming and collaboration with other United Nations entities for greater efficiency. UNFPA will continue to partner with the United Nations Children's Fund (UNICEF) and the World Health Organization (WHO) on health system strengthening to deliver quality comprehensive sexual and reproductive health services. UNFPA will collaborate more closely with UNDP, UNICEF, the United Nations

Educational, Scientific and Cultural Organization (UNESCO) and others to address social norms and empower women, girls and vulnerable young people. UNFPA will align with the International Migration Organization (IOM), UNDP, UNICEF and other United Nations organizations to strengthen data and evidence and climate-resilient and adaptive capacities. UNFPA will also facilitate mutually beneficial South-South cooperation to enable technical exchange and national capacity-building in maternal health, adolescent sexual and reproductive health and reproductive rights, gender-based violence and population and development. Policy dialogue, technical assistance, knowledge generation and capacity development will be core modes of engagement across all areas. The programme has been designed so outputs are mutually reinforcing, harnessing interlinkages across programme components.

A. Output 1: Strengthened national and subnational policies and programmes to enable access of the furthest left-behind groups to high-quality, rights-based, gender-responsive, comprehensive sexual and reproductive health and reproductive rights information and services, across the humanitarian-development continuum

19. To accelerate progress in achieving Strategic Plan outcomes 1 and 2 by 2030, this output will support equitable access to quality sexual and reproductive health services, especially for marginalized populations, including herders, adolescents, young people and people with disabilities, and contributes to achieving UNSDCF outcome 1 on human development and well-being.

20. This output will be achieved through advocacy, technical support and evidence-generation across the humanitarian-development continuum for: (a) strengthened evidence-based policies and decision-making to ensure domestic financing and insurance coverage for sexual reproductive health and reproductive rights programmes, including availability of high-quality contraceptives, within the context of universal health coverage; (b) strengthened capacity of public and private health facilities to provide quality, affordable, inclusive and youth-friendly sexual and reproductive health services, including gender-based violence response, sexually transmitted infections/HIV prevention and management; (c) strengthened policy environment for disability-inclusive and youth-friendly sexual and reproductive health services; (d) improved capacity of service providers, focused on strengthened midwifery education and professional development at the facility level to provide comprehensive, integrated sexual and reproductive health services, including gender-based violence response, tailored for most-left-behind groups; (e) scaled up implementation of the essential sexual and reproductive health package; (f) expanded public and private partnerships to provide quality, rights-based family planning services and ensure adequate budget allocations; (g) expansion of innovation and digitalization to reach hard-to-reach populations, including telemedicine in rural areas; (h) enhanced capacity of human rights institutions and civil society organizations to monitor implementation of reproductive rights; and (i) support for evidence-based behaviour change communication interventions focused on addressing discriminatory social norms and engagement of men and boys (link to output 2).

B. Output 2: Strengthened capacities of national and local governments and civil society actors to address discriminatory social norms through evidence-informed and gender-transformative policies and programmes towards the advancement of gender equality and empowerment of women and girls

21. This output contributes to achieving Strategic Plan outcomes 3 and UNSDCF outcomes 1 (human development and well-being) and 4 (people-centred governance, rule of law and human rights) by addressing discriminatory social norms that perpetuate gender inequalities and gender-based violence and undermine women's empowerment. It will be achieved by: (a) strengthening the capacity of national and subnational governments' gender equality committees to advocate for the application of gender-transformative approaches to women's empowerment policy planning, implementation and monitoring and to address discriminatory gender norms (link to output 3); (b) enhancing the capacity of civil society organizations to create awareness and monitor implementation of gender equality-related policies and laws and of recommendations of human rights mechanisms, including the universal periodic review, CEDAW and CRPD;

(c) improving the capacity of networks of women and girls to participate in decision-making processes, including related to climate and humanitarian actions; and (d) supporting evidence-based initiatives to promote gender equality and positive masculinities and to address discriminatory social norms, focused on empowering girls and women and engaging men and boys, including through comprehensive sexuality education in in-and-out-of-school settings.

C. Output 3: Strengthened capacities of national and subnational institutions and mechanisms to provide high-quality, evidence-informed multisectoral gender-based violence prevention and response programme, with special focus on reaching those furthest left behind, across the humanitarian-development continuum

22. Through this output, UNFPA will contribute to achieving Strategic Plan outcomes 3 and the UNSDCF outcomes 1 (human development and well-being) and 4 (people-centred governance, rule of law and human rights) by building on the foundation of existing work addressing gender-based violence and moving towards a comprehensive integrated prevention and response approach. This will be achieved by: (a) focusing and investing in evidence-generation on effective interventions to address gender-based violence for policy advocacy and scale-up; (b) improving evidence-based planning, implementation, monitoring and evaluation of gender-based violence-related policies and laws, including supporting revision of the criminal code, in line with international standards; (c) supporting advocacy to integrate gender-based violence response into universal health coverage and disaster risk reduction policies; (d) strengthening quality and availability of multisectoral services on gender-based violence and referral mechanisms in line with international standards, with an expansion of support and economic empowerment opportunities for survivors; and (e) improving the capacity of duty-bearers from multisector to deliver survivor-focused services.

D. Output 4: Strengthened national capacities to increase access of young people, especially marginalized groups (including young people with disabilities, ethnic minorities, adolescents, girls and rural young people) to comprehensive sexuality education, skills development and opportunities that enable their leadership and participation

23. This output is designed to support achievement of three Strategic Plan outcomes and contribute to the UNSDCF outcomes 1 (human development and well-being), 2 (green, inclusive and sustainable growth) and 4 (people-centred governance, rule of law and human rights). The output will be achieved by: (a) supporting the update and delivery of the comprehensive sexuality education programme for both in-and-out-of-school youth in line with international standards, through innovative solutions to reach marginalized young people, including young herders, ethnic youth, adolescent girls, unemployed and urban youth, sexual minorities and youth with disabilities; (b) providing support to the Ministry of Education and the Ministry of Welfare and Social Protection in using evidences for advocacy to increase the commitment of policymakers and parent groups to improve the quality of comprehensive sexuality education and increase financial commitments for youth development; (c) strengthening youth-led accountability platforms at national and subnational levels to empower young people to monitor implementation of youth-related laws, policies and development issues, including the national youth development law and climate adaptation actions, and to harness the demographic dividend; (d) strengthening participatory, multisectoral platforms, including youth councils, to engage with young people, especially marginalized youth; (e) advocating for national and subnational government to scale up successful adolescent and youth sexual and reproductive health services; and (f) supporting youth empowerment and resilience initiatives, especially for adolescent girls, under youth development centre operations.

E. Output 5: Increased use of high-quality disaggregated data and demographic analyses by national and local governments to develop inclusive and equitable development policies and plans that are responsive to population dynamics and megatrends

24. The output contributes to UNSDCF outcome 4 on people-centred governance, rule of law and human rights and supports achievement of the other four programme outputs to accelerate

achievement of the three transformative results. It will be achieved by: (a) ensuring availability of disaggregated data by key vulnerability criteria for planning and monitoring of policies, plans and programmes, including for humanitarian preparedness and response, with a focus on technical support and innovative solutions for UNFPA-supported population surveys, and will use disaggregated data to monitor and report on international commitments, including the SDGs, the ICPD Programme of Action, the universal periodic review, CEDAW and CRPD; (b) providing technical support to strengthen the capacity of the National Statistics Office, relevant line ministries and selected local authorities to collect, analyse, disseminate and use disaggregated population data and generate in-depth analyses; (c) strengthening national capacities to integrate population megatrends, including urbanization and linkages with climate vulnerability, in developing gender-responsive policies, plans, budgets and monitoring for their implementation, including the country's five-year development guideline; (d) strengthening national and subnational population and development policy discussion platforms that foster interaction and knowledge-sharing among policymakers, parliamentarians, think tanks, civil society organizations and young people; (e) strengthening knowledge management and evidence on current and emerging population issues through use of national transfer accounts and investment cases to harness the demographic dividend, ensure evidence-informed actions across the three transformative results, and advocate for a life-cycle approach; and (f) promoting partnerships with academia and the private sector and, through South-South cooperation, sharing knowledge, experiences and innovative practices on population and development.

III. Programme and risk management

25. UNFPA will work with the United Nations country team as the mechanism for inter-agency coordination and oversight of the UNSDCF, under the guidance and leadership of the United Nations Resident Coordinator guided by the United Nations management and accountability framework and will align its work towards integrated development solutions and apply the principles of leaving no one behind, national ownership and mutual accountability.

26. The country programme will be implemented under overall coordination of the Ministry of Foreign Affairs, using a results-based management approach and ensuring national leadership, sustainability and full engagement with implementing partners. The programme will be implemented through partners, adopting a harmonized approach to cash transfers, guided by comprehensive risk assessment and the capacity of implementing partners.

27. UNFPA will leverage partnerships and resources with the Government and non-governmental organizations, at national and subnational levels, and other development partners and will focus on programme scale-up and sustainability. UNFPA will use evidence and innovative approaches to advocate for increased financing for ICPD+25 voluntary national commitments and proactively contribute to joint initiatives with other United Nations organizations and the Resident Coordinator's Office to diversify partners and attract new funding sources with a focus on reaching the furthest behind first.

28. Several risks that could impact programme delivery include: (a) the COVID-19 pandemic and adverse effects such as disruption of basic sexual and reproductive health services and social protection, capacity constraints of implementing partners and reduction of domestic resources for the implementation of the ICPD Programme of Action; (b) natural disasters; (c) weak coordination and collaboration between sectors and between government partners and civil society organizations working to safeguard human rights, particularly of marginalized populations; and (d) social norms that oppose gender equality, women's and girls' empowerment, comprehensive sexuality education, and sexual and reproductive health and reproductive rights.

29. To mitigate these risks, an operational and programmatic risk assessment and mitigation strategy will be developed that will be reviewed annually with key stakeholders. UNFPA will address risks by expanding partnerships and diversifying funding sources to complement regular resources and improve coordination; strengthening data harmonization and evidence-based communication and policy advocacy; conducting regular socio-political scanning; and applying innovative and rights-based approaches to ensure accountability and sustainability. As part of the United Nations country team, UNFPA will continue to strengthen national capacity in

preparedness, response and recovery efforts to emergencies, including COVID-19 and natural disasters, ensuring integration of gender-based violence and sexual and reproductive health and reproductive rights. In emergencies, in consultation with the Government, UNFPA may reprogramme funds toward activities to mitigate impacts and enhance resilience.

30. The country office will align its human resources strategy to meet programme needs and will mobilize strategic partnerships with United Nations organizations and academic institutions to respond effectively and timely to the demands for technical assistance. Support will be sought from the Asia-Pacific regional office and headquarters, as needed.

31. 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 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

32. UNFPA is committed to monitoring programme results for the country programme and UNSDCF. UNFPA, with the Government and United Nations country team, will establish a framework to monitor and evaluate UNSDCF implementation. UN Info will be used as the main monitoring tool and inform the UNSDCF Steering Committee, comprising the United Nations country team and senior representatives of line ministries, led by the Ministry of Foreign Affairs. UNFPA will actively participate in the implementation, monitoring, annual reporting and evaluation of the UNSDCF and ensure participation of marginalized groups.

33. UNFPA and partners, under the leadership of the Ministry of Foreign Affairs, will manage and monitor the programme, following UNFPA policies and procedures, using adaptive results-based management and accountability frameworks.

34. UNFPA and the Government will systematically carry out annual and midterm reviews together with stakeholders to critically assess the programme's contribution to UNSDCF outcomes, UNFPA Strategic Plan outcomes and national development priorities. Regular joint field monitoring visits with relevant stakeholders and other United Nations organizations will take place. An independent country programme evaluation will be conducted in the penultimate year, involving young evaluators and ensuring a transparent, participatory process. It will be complemented by thematic evaluations. Innovative monitoring and evaluation activities will be explored, including online visits and consultations, use of digital technologies, and real-time data management for expected results. Quality assistance and capacity-building measures for UNFPA implementing partners will be ascertained through regular project and programme management training and monitoring.

35. A costed monitoring and evaluation plan will be implemented and reviewed periodically, in line with the monitoring and evaluation of the UNSDCF and sectoral plans, and to ensure an adequate resource allocation for monitoring and evaluation of the programme.

36. UNFPA, jointly with the United Nations system, will contribute to strengthening national capacities to monitor and report on the country's commitments under the 2030 Agenda, the ICPD+25 voluntary national commitments, and universal periodic reviews.

RESULTS AND RESOURCES FRAMEWORK FOR MONGOLIA (2023-2027)

| NATIONAL PRIORITY: Vision 2050: Goal 2: Human development; Goal 7: Safe and secure society. | | | | |
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| UNSDCF OUTCOME(S): 1: By 2027, people in urban and rural areas, especially the most vulnerable and marginalized, equally realize their full human potential and benefit from inclusive, rights-based, gender and shock-responsive health and nutrition, education, social protection, WASH and other services. | | | | |
| 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 | Country programme outputs | Output indicators, baselines and targets | Partner contributions | Indicative resources |
| <p>UNSDCF outcome indicators:</p> <ul style="list-style-type: none"> Maternal mortality ratio (per 100,000 live births) <i>Baseline: 30.2 (2020); Target: 20 (2027)</i> <p><u>Related UNFPA Strategic Plan outcome indicator(s):</u></p> <ul style="list-style-type: none"> Need for family planning satisfied with modern methods <i>Baseline: 63.9% (2018)</i> <i>Target: 73.5% (2027)</i> | <p><u>Output 1:</u> Strengthened national and subnational policies and programmes to enable access of the furthest left-behind groups to high-quality, rights-based, gender-responsive, comprehensive sexual and reproductive health and reproductive rights information and services, across the humanitarian-development continuum.</p> | <ul style="list-style-type: none"> Number of approved standard operating procedures and regulations that adhere to international standards on the provision of high-quality sexual and reproductive health and gender-based violence response services (including services related to mental health and psychosocial support) and address the needs of the populations furthest left behind, including adolescent girls and people with disabilities <i>Baseline: 0 (2021); Target: 3 (2027)</i> Proportion of target public and private health facilities at primary, secondary and tertiary levels providing at least five modern contraceptive methods <i>Baseline: 30.4% (2016); Target: 55% (2027)</i> Number of facilities providing rights-based midwife-led comprehensive sexual and reproductive health services <i>Baseline: 0 (2021); Target: 30 (2027)</i> | <p>Ministry of Foreign Affairs; Ministry of Health; Human Rights Commission; Parliament; local governments; National Statistical Office; academia; Marie Stopes International; Mongolian Association of Midwives; Mongolian Federation of Obstetricians and Gynaecologists; UNDP, UNICEF, WHO; development partners; civil society organizations</p> | <p>\$7.3 million (\$0.8 million from regular resources and \$6.5 million from other resources)</p> |
| NATIONAL PRIORITY: Vision 2050: Goal 2: Human development; Goal 7: Safe and secure society. | | | | |
| UNSDCF OUTCOME(S): 1: By 2027, people in urban and rural areas, especially the most vulnerable and marginalized, equally realize their full human potential and benefit from inclusive, rights-based, gender and shock-responsive health and nutrition, education, social protection, WASH and other services. 4: By 2027, policymaking and implementation in Mongolia is more gender-responsive, participatory, coherent, evidence-informed and SDG-aligned; governance institutions at all levels are transparent and accountable; and people, especially the marginalized groups, have access to justice and rule of law for full realization of human rights. | | | | |
| RELATED UNFPA STRATEGIC PLAN OUTCOME: Outcome 3: By 2025, the reduction in gender-based violence and harmful practices has accelerated. | | | | |
| UNSDCF outcome indicators, baselines, targets | Country programme outputs | Output indicators, baselines and targets | Partner contributions | Indicative resources |
| <p>UNSDCF outcome indicators:</p> <ul style="list-style-type: none"> Proportion of population who believe decision-making is inclusive and responsive <i>Baseline: 57.1 (2019); Target: 65.8 (2027)</i> Proportion of ever-partnered | <p><u>Output 2:</u> Strengthened capacities of national and local governments and civil society actors to address discriminatory social norms through evidence-informed and</p> | <ul style="list-style-type: none"> Percentage of the target population with knowledge of key causes and consequences of gender-based violence among participants of community mobilization initiatives in priority districts, disaggregated by men and boys, women and girls <i>Baseline: 0 (2022); Target: 25% (2027)</i> Number of provinces and districts with a capacity to implement interventions with a focus on engaging men and boys to address discriminatory social norms and promote | <p>Ministry of Justice and Home Affairs, Ministry of Labour and Social Protection, Ministry of Education and Science, Ministry of Health; local governments; National Statistical Office; Human Right Commission; National Committee on Gender Equality; Coordination</p> | <p>\$4.2 million (\$0.7 million from regular resources and \$3.5 million from other resources)</p> |

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| <p>women subjected to physical, sexual or psychological violence by a current or former intimate partner in the previous 12 months <i>Baseline: 14.7% (2019); Target: Lower than the baseline (2027)</i></p> | <p>gender-transformative policies and programmes towards the advancement of gender equality and empowerment of women and girls.</p> | <p>positive masculinities <i>Baseline: 0 (2022); Target: 6 (2027)</i></p> <ul style="list-style-type: none"> • Number of government agencies, civil society organizations and private entities capacitated with UNFPA support and actively engaged in implementing and monitoring accepted recommendations from international human rights mechanisms that are related to discriminatory social and gender norms, stereotypes and practices, and power relations <i>Baseline: 6 (2022); Target: 21 (2027)</i> | <p>Council of Crime Prevention; National Police Agency; Family Children and Youth Development Agency; National Centre Against Violence; Mongolian Gender Equality Centre; development partners, UNDP; civil society organizations; the media</p> | |
| | <p><u>Output 3:</u> Strengthened capacities of national and subnational institutions and mechanisms to provide high-quality, evidence-informed multisectoral gender-based violence prevention and response programme, with special focus on reaching those furthest left behind, across the humanitarian-development continuum.</p> | <ul style="list-style-type: none"> • Annual national and subnational government funding for gender-based violence programming <i>Baseline: \$550,000 (2020); Target: 5% increase per annum from the baseline (2027)</i> • Number of legal and policy frameworks revised with UNFPA support that address gender-based violence prevention and response in line with international human rights standards <i>Baseline: 0 (2021); Target: 3 (2027)</i> • Proportion of clients satisfied by multisectoral response services indicating confidential, timely and quality support <i>Baseline: 52.7% (2021); Target: 75% (2027)</i> | <p>Ministry of Justice and Home Affairs, Ministry of Labour and Social Protection, Ministry of Education and Science, Health; National Statistical Office, National Human Rights Commission; National Committee on Gender Equality; Coordination Council of Crime Prevention, National Police Agency; National Emergency Management Agency; Family Children and Youth Development Agency; National Centre Against Violence; local governments; development partners; UNDP, UNICEF, WHO; civil society organizations</p> | <p>\$2.6 million (\$0.6 million from regular resources and \$2.0 million from other resources)</p> |
| <p>NATIONAL PRIORITY: Vision 2050: Goal 2: Human development; Goal 3: Quality of life and middle class; Goal 7: Safe and secure society.</p> | | | | |
| <p>UNSDCF OUTCOME(S): 1: By 2027, people in urban and rural areas, especially the most vulnerable and marginalized, equally realize their full human potential and benefit from inclusive, rights-based, gender and shock-responsive health and nutrition, education, social protection, WASH and other services. 2: By 2027, the Mongolian economy is more diversified, innovative, productive, inclusive, green and geographically balanced enabling decent livelihoods, especially for women and youth, building 21st-century skills, and promoting low-carbon development. 4: By 2027, policymaking and implementation in Mongolia are more gender-responsive, participatory, coherent, evidence-informed and SDG-aligned; governance institutions at all levels are transparent and accountable; and people, especially the marginalized groups, have access to justice and rule of law for the full realization of human rights.</p> | | | | |
| <p>RELATED UNFPA STRATEGIC PLAN OUTCOME: 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. 3: By 2025, the reduction in gender-based violence and harmful practices has accelerated.</p> | | | | |
| <p>UNSDCF outcome indicators, baselines, targets</p> | <p>Country programme outputs</p> | <p>Output indicators, baselines and targets</p> | <p>Partner contributions</p> | <p>Indicative resources</p> |
| <p>UNSDCF outcome indicators:</p> <ul style="list-style-type: none"> • Maternal mortality ratio (per 100,000 live births) <i>Baseline: 30.2(2020); Target: 20(2027)</i> • Unemployment rate, by location, sex, age and persons | <p><u>Output 4:</u> Strengthened national capacities to increase access of young people, especially marginalized groups (including young people with disabilities, ethnic</p> | <ul style="list-style-type: none"> • Number of standard operating procedures approved by the Government to standardize education of pre-service and in-service health education teachers <i>Baseline: 0 (2022); Target: 2 (2027)</i> • Number of national in-and-out-of-school health education curricula revised and approved in line with international technical guidance on sexuality education <i>Baseline: 0; Target: 5 (2027)</i> | <p>Ministry of Finance, Ministry of Labour and Social Protection, Ministry of Education and Ministry of Science, Ministry of Health, Ministry of Culture, Ministry of Construction, Ministry of Agriculture; National Council on Youth Development and subnational councils; Family Children</p> | <p>\$3.7 million (\$0.7 million from regular resources and \$3.0 million from other resources)</p> |

| <p>with disabilities <i>Baseline: 7% (2020)</i> <i>(sex: female: 6.7%; male: 7.3%;</i> <i>location: urban: 8%; rural: 4.6%;</i> <i>age group: 15-24 years: 17.9%; 25-64 years: 5.9%;</i> <i>disability status: with disability: 7%; without disability: 7.2%)</i> <i>Target: Lower than the baseline</i></p> <p><u>Related UNFPA Strategic Plan outcome indicator(s):</u></p> <ul style="list-style-type: none"> • Adolescent birth rate per 1000 (15-19 years olds) <i>Baseline: 27.7 (2020)</i> <i>Target: 16 (2027)</i> • Youth development index <i>Baseline: 0.758 (2020)</i> <i>Target: Higher than the baseline (2027)</i> | <p>minorities, adolescents, girls and rural young people) to comprehensive sexuality education, skills development and opportunities that enable their leadership and participation.</p> | <ul style="list-style-type: none"> • Government budget allocation for youth development <i>Baseline: \$139,000 (2020); Target: 30% increase from baseline (\$180,000)</i> • Number of national and subnational youth-led accountability platforms established and functional with support of UNFPA that enables youth engagement in development and monitoring of youth policies and programmes <i>Baseline: 0 (2022); Target: 2 (2027)</i> | <p>and Youth Development Agency; local governments, the private sector (including Unitel and Oyu Tolgoi); local governments; IOM, UNESCO, UNICEF; civil society organizations</p> | |
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| <p>NATIONAL PRIORITY: Vision 2050: Goal 5: Governance; Goal 7: Safe and secure society.</p> | | | | |
| <p>UNSDCF OUTCOME(S): By 2027, policymaking and implementation in Mongolia is more gender-responsive, participatory, coherent, evidence-informed and SDG-aligned; governance institutions at all levels are transparent and accountable; and people, especially the marginalized groups, have access to justice and rule of law for full realization of human rights.</p> | | | | |
| <p>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. 3: By 2025, the reduction in gender-based violence and harmful practices has accelerated.</p> | | | | |
| UNSDCF outcome indicators, baselines, targets | Country programme outputs | Output indicators, baselines and targets | Partner contributions | Indicative resources |
| <p>UNSDCF outcome indicators:</p> <p>Proportion of population who believe decision-making is inclusive and responsive <i>Baseline: 57.1 (2019); Target: 65.8 (2027)</i></p> <p><u>Related UNFPA Strategic Plan outcome indicator(s):</u></p> <ul style="list-style-type: none"> • Number of countries that adopt and implement national disaster risk reduction strategies in line with the | <p><u>Output 5:</u> Increased use of high-quality disaggregated data and demographic analyses by national and local governments to develop inclusive and equitable development policies and plans that are responsive to population dynamics and megatrends.</p> | <ul style="list-style-type: none"> • Number of UNFPA supported population surveys and in-depth analyses with disaggregated data by sex, age, location, disabilities and income, produced for the planning, budgeting, implementing and monitoring of national SDG targets, ICPD Programme of Action and international commitments <i>Baseline: 1 (2022); Target: 4 (2027)</i> • Number of policies and plans that integrate policy recommendations or advice on population megatrends, and their interlinkage with climate change, with UNFPA support <i>Baseline: 1 (2022); Target: 5 (2027)</i> | <p>Parliament; Ministry of Foreign Affairs, Ministry of Health, Ministry of Labour and Ministry of Social Protection; Human Rights Commission; National Emergency Management Agency; National Statistical Office; academia; local governments; IOM, UNDP, UNICEF, WHO</p> | <p>\$2.6 million (\$0.5 million from regular resources and \$2.1 million from other resources)</p> <p>Programme coordination and assistance: \$0.3 million</p> |

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| Sendai Framework for Disaster Risk Reduction 2015–2030 <i>Baseline: Yes (2021)</i> <i>Target: Yes (2027)</i> | | | | from regular resources |
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