



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

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**UNFPA – Annual report of the Executive Director**

**United Nations Population Fund**

**Integrated midterm review and progress report on implementation of the  
UNFPA strategic plan, 2018-2021**

**Report of the Executive Director**

*Summary*

This report details the cumulative progress that UNFPA made in implementing its strategic plan, 2018-2021; it also contains the midterm review of that plan. The report should be read in conjunction with the statistical and financial review, 2019 (DP/FPA/2020/4 (Part I)/Add.1) and the midterm review of the UNFPA integrated budget, 2018-2021 (DP/FPA/2020/5).

The report also includes the contributions of UNFPA global and regional interventions in achieving the results of the strategic plan.

UNFPA made good progress in achieving the results of its strategic plan. The report takes stock of the challenges encountered and the lessons learned. Annexes to the report, available on the UNFPA Executive Board website, provide detailed analyses and information on the progress achieved.

*Elements of a decision*

The Executive Board may wish to:

- (a) Note with appreciation the progress made by UNFPA in achieving the cumulative results of its strategic plan, 2018-2021;
- (b) Approve the proposed adjustments to the UNFPA strategic plan, 2018-2021, based on the findings of the midterm review, as contained in DP/FPA/2020/4 (Part I) and annex 1.

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The annexes are available on the [UNFPA Executive Board website](#).

## I. Overview

1. This report details the cumulative progress that UNFPA made in achieving the results of its strategic plan, 2018-2021; it also contains the report of the midterm review of that plan. The goal of the UNFPA strategic plan is to achieve universal access to sexual and reproductive health and reproductive rights. The strategic plan includes a UNFPA commitment to achieve, by 2030, three transformative results: (a) ending preventable maternal deaths; (b) ending the unmet need for family planning; and (c) ending gender-based violence and all harmful practices, including female genital mutilation and child, early and forced marriage. The three results represent the UNFPA contribution to the 2030 Agenda for Sustainable Development.

2. During 2019, UNFPA reinforced the foundations that will enable it to accelerate the achievement of the transformative results by:

- (a) Making good progress towards achieving the results of its strategic plan, and ensuring that UNFPA has the “ability to deliver”;
- (b) Mobilizing more than 1,250 voluntary commitments to support the acceleration of the transformative results and the Programme of Action of the International Conference on Population and Development (ICPD);
- (c) Estimating the total financial needs to achieve the transformative results by 2030: \$264 billion in costs to achieve the transformative results, and \$222 billion in new investments worldwide;
- (d) Conducting the midterm review of the strategic plan to make organizational and thematic adjustments.

3. The midterm review of the strategic plan found that the strategic focus of the plan remained relevant. To address implementation challenges and take advantage of emerging opportunities, such as the Decade of Action and the momentum arising from the twenty-fifth anniversary of the adoption of the ICPD Programme of Action, UNFPA made a number of adjustments. These adjustments were based on the findings of the midterm review, and were undertaken in order to accelerate progress in achieving the transformative results. UNFPA:

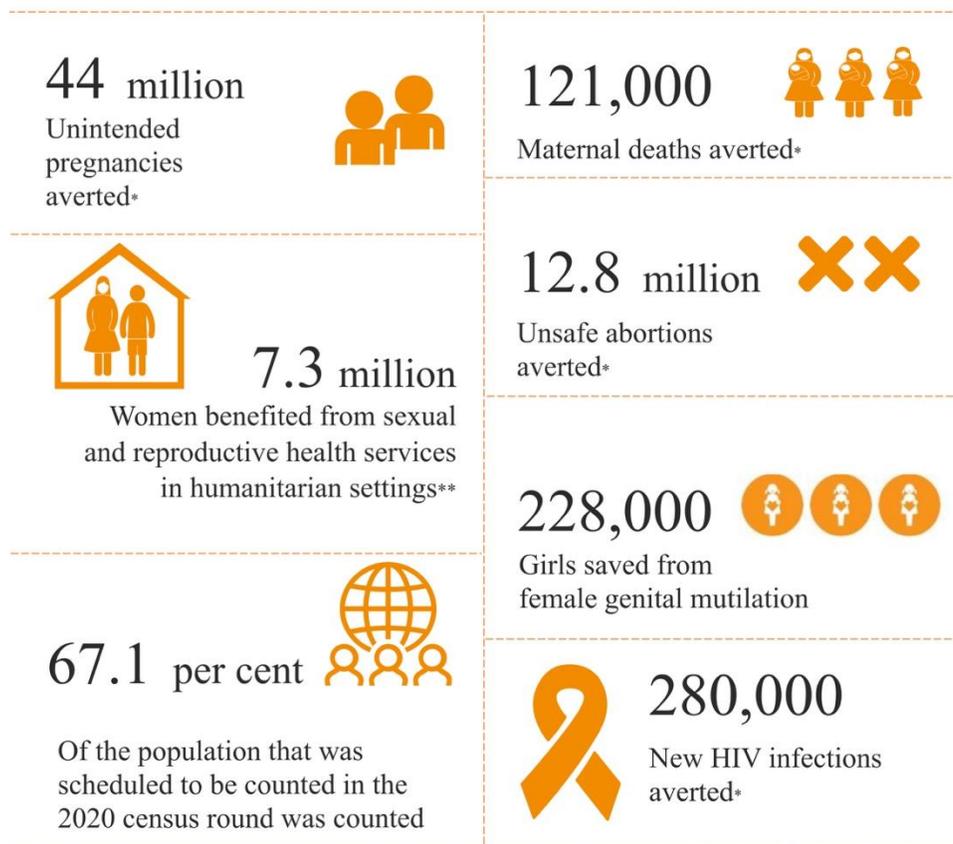
- (a) Strengthened the thematic focus on: (i) mental health in humanitarian settings; (ii) climate change; and (iii) ageing and low fertility;
- (b) Responded to the challenges of: (i) “leaving no one behind”; (ii) population data; and (iii) the quality of sexual and reproductive health care;
- (c) Institutionalized mechanisms to track the implementation of the commitments made to achieve the three transformative results and the ICPD Programme of Action;
- (d) Institutionalized innovation as a core strategy;
- (e) Strengthened organizational readiness by: (i) further aligning UNFPA with United Nations reforms; (ii) shifting towards adaptive management; (iii) enhancing transformational leadership; and (iv) advancing the implementation of change-management initiatives.

4. UNFPA updated its integrated results and resources framework, its integrated budget, and its global and regional interventions to reflect the midterm adjustments. These adjustments are mainstreamed throughout this report and highlighted in section IV.

5. The analysis of the 2018-2019 results reveals that UNFPA made good progress towards the strategic plan results it sought to achieve. There are 18 strategic plan outputs. For eight of those outputs, UNFPA progress toward the targets was 90 per cent and above. For 10 of those outputs, the progress was between 60 and 90 per cent of the targets. No outputs performed below 60 per cent of the targets (annex 1). Figure 1 highlights the key results achieved in 2018-2019.

6. In 2018-2019, UNFPA fully met 89 per cent of the targets of its regional programmes and 91 per cent of the targets of its global programme (annex 4).

**Figure 1: Key results achieved in 2018-2019**



\*Estimated results obtained from UNFPA family planning commodity distribution  
\*\* 2019 only

**More results may be found at:**

[unfpa.org/data/results](https://unfpa.org/data/results)

7. During 2018-2019, UNFPA prioritized “leaving no one behind” and “reaching the furthest behind first”. It strengthened its organizational readiness to achieve results and implemented a change-management process that aligned its structures to make the organization “fit-for-purpose”. UNFPA certified 35 per cent of its managers through the management certification system, maintained overall gender parity (50.3 per cent of UNFPA staff are women) and maintained a zero-tolerance policy for all forms of sexual harassment (annex 5).

## II. The 2019 context and the UNFPA response

8. The year 2019 marked three historic milestones for the rights of women and young people: (a) the twenty-fifth anniversary of ICPD; (b) the fiftieth anniversary of UNFPA; and (c) the fortieth anniversary of the adoption of the Convention on the Elimination of All Forms of Discrimination against Women.

9. The 2030 Agenda for Sustainable Development marked its fourth year of implementation in 2019. People are living better lives than they did a decade ago. The decline in global extreme poverty continued, but has slowed.

10. The world economy grew at 3.0 per cent in 2019 – a significant drop from 2017-2018 for emerging markets, developing economies and advanced economies. Although economic growth in the least developed countries is on the upswing, the 7 per cent target by 2030 is unattainable. Development assistance for sexual and reproductive health in low-income and middle-income countries declined.

11. World population continued to grow, albeit at a slower pace than at any time since 1950, owing to reduced levels of fertility. World population is projected to increase to approximately 8.5 billion in 2030, 9.7 billion in 2050 and 10.9 billion in 2100.

12. The global fertility rate, which fell from 3.2 births per woman in 1990 to 2.5 in 2019, is projected to decline to 2.2 in 2050. Persons aged 65 or over make up the fastest growing population group. By 2050, 1 in 6 people in the world will be over 65.

13. In 2019, the number of international migrants worldwide was nearly 272 million. More than half the world's population is living in cities; that share is projected to rise to 60 per cent by 2030.

14. Progress towards universal access to sexual and reproductive health and reproductive rights has met challenges:

(a) More people than forecasted needed humanitarian assistance. By the end of 2019, 136 million people required such assistance. This included an estimated 35 million women of reproductive age, five million of whom were pregnant. Fifty-six million people that needed humanitarian assistance lived in 12 of the 33 countries at risk of, or in, debt distress;

(b) Climate change continued to challenge sustainable development, disproportionately affecting those who are poor and vulnerable, and who lack resources. The average global temperature for 2015-2019 was the warmest of any equivalent period on record;

(c) The year 2019 also witnessed opposition to sexual and reproductive health;

(d) Inequality within and among countries persisted and hindered progress towards inclusive sustainable development.

15. In early 2020, the COVID-19 pandemic emerged, with enormous effects on women's health. It disrupted access to sexual and reproductive health services as well as services to combat gender-based violence. The pandemic may deny millions of women access to family planning. It will also exacerbate financial inequality between men and women.

16. The year 2019 provided valuable opportunities to promote the ICPD Programme of Action and the quest for universal access to sexual and reproductive health and reproductive rights. The Commission on Population and Development adopted, at its fifty-second session (E/2019/25-E/CN.9/2019/6), a declaration by Member States marking the twenty-fifth anniversary of ICPD.

17. The Governments of Denmark and Kenya, together with UNFPA, convened a summit (ICPD25) in November 2019 in Nairobi, Kenya. Over 8,000 delegates from 170 countries attended the summit. Global consultations led to the adoption of the Nairobi Statement, which provides a framework for government and partner commitments to accelerate the implementation of the ICPD Programme of Action and advance the achievement of the transformative results.

18. At its seventy-third session, the United Nations General Assembly convened a high-level plenary meeting to commemorate the twenty-fifth anniversary of ICPD. At the seventy-fourth session of the Assembly, the United Nations Secretary-General called on all sectors of society to mobilize for a "Decade of Action" to achieve the Sustainable Development Goals. The General Assembly also adopted resolution 74/2 on the political declaration of the high-level meeting on universal health coverage. In addition, 12 multilateral organizations launched a joint plan in

September 2019 to support countries in accelerating progress towards the health-related Sustainable Development Goals.

19. In May 2019 – for the first time – States, United Nations organizations, the International Committee of the Red Cross, civil society organizations, regional and international organizations, and survivors of gender-based violence met to end sexual and gender-based violence in humanitarian crises. The Governments of Iraq, Norway, Somalia and the United Arab Emirates, along with UNFPA, the Office for the Coordination of Humanitarian Affairs and the International Committee of the Red Cross hosted the conference, entitled “Ending Sexual and Gender-based Violence in Humanitarian Crises”. The conference adopted an outcome statement in which States made commitments to provide \$363 million to prevent and respond to sexual and gender-based violence.

20. At the United Nations Climate Action Summit in September 2019, 10 regions pledged to reduce greenhouse gas emissions to zero by 2050. In April 2019, the General Assembly adopted resolution 73/291 on the Buenos Aires outcome document of the second High-level United Nations Conference on South-South Cooperation.

21. UNFPA introduced several organization-wide changes in 2019 to respond to emerging needs, including:

- (a) The establishment of a liaison office in the Republic of Korea to support cooperation in areas related to population and development;
- (b) The establishment of a Humanitarian Office in Geneva, Switzerland;
- (c) The improved integration of multilateral and inter-agency functions into policy, strategic development and implementation functions;
- (d) The scaling up of investments in population data for development.

### **Box 1: Progress in implementing UNFPA change-management initiatives, 2019**

By 2019, UNFPA had completed five change-management initiatives. These included: (a) repositioning its intergovernmental and multilateral affairs; (b) restructuring the Programme Division; (c) launching the Regional Operations Shared Service Centre in the East and Southern Africa region; (d) providing field-focused technical services; and (e) reviewing the humanitarian response architecture. Ten other change initiatives are ongoing.

## **III. Results achieved as of 2019**

### **A. Status of the three transformative results**

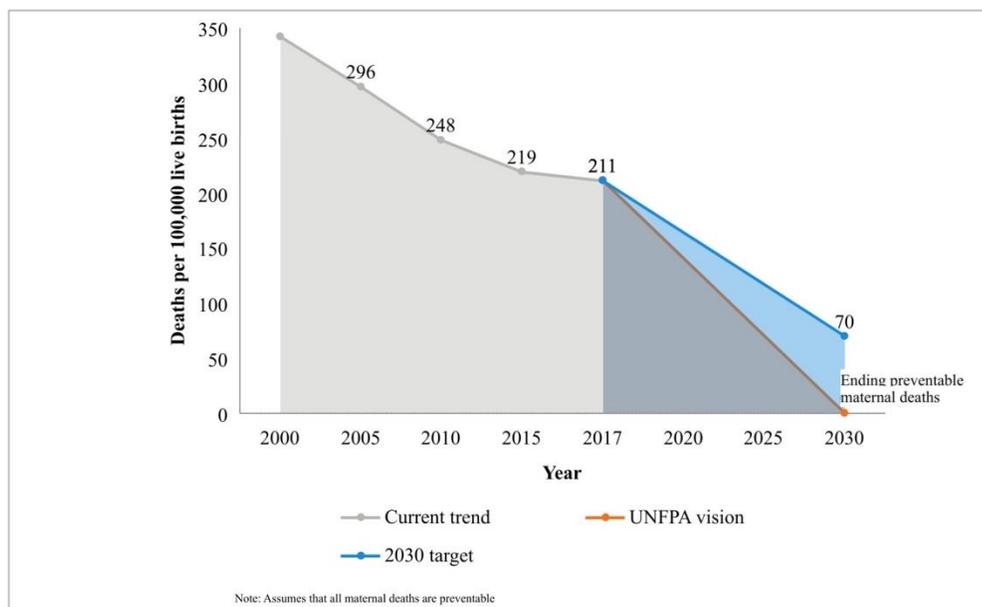
22. In 2019, UNFPA reinforced the foundations that will enable it to accelerate progress towards achieving the transformative results. All new UNFPA country programmes are committed to achieving at least one of the three transformative results. Nearly all United Nations Sustainable Development Cooperation Frameworks that were developed in 2019 integrated the transformative results into the Cooperation Frameworks.

23. In 2019, UNFPA, in partnership with Johns Hopkins University, the University of Washington, Victoria University and Avenir Health, estimated the global resource needs required to achieve, by 2030, the three transformative results. The preliminary results were announced during the High-level Political Forum of the United Nations General Assembly in July 2019. UNFPA disseminated the final results at the Nairobi Summit. These results will enable UNFPA and its partners to identify the investments needed to achieve the transformative results. As part of the midterm review, UNFPA will strengthen its advocacy in order to mobilize resources to fill resource gaps. UNFPA will also support countries in developing country investment cases to mobilize domestic financing for the transformative results.

**Ending preventable maternal deaths**

24. Maternal deaths declined from 451,000 in 2000 to 295,000 in 2017, a 38 per cent reduction since 2000. The global lifetime risk of maternal mortality for a 15-year-old girl in 2017 was nearly half the risk in 2000. The proportion of deaths to women of reproductive age (15 to 49 years) due to maternal causes was estimated at 9.2 per cent in 2017 – down by 26.3 per cent since 2000.

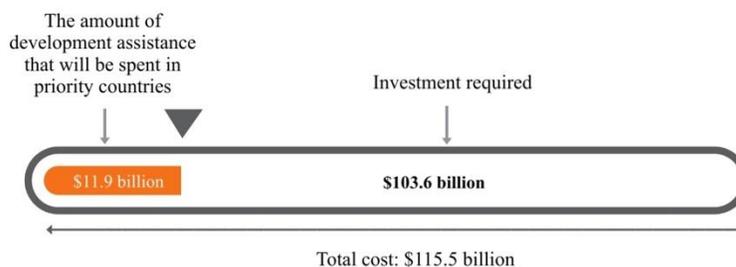
**Figure 2: Trends in maternal mortality**



25. Maternal mortality in the least developed countries (the UNFPA priority countries) declined by 46 per cent. Angola, Belarus, Estonia, Kazakhstan, Mongolia, Rwanda, Timor-Leste and Turkmenistan achieved the highest annual rates of reduction in maternal mortality.

26. The reduction in maternal mortality is not at the level required to end preventable maternal deaths by 2030. The pace of decline since 2015 has slowed. To end preventable maternal deaths by 2030, countries require investments of \$103.6 billion between 2020 and 2030 (figure 3).

**Figure 3: Investments required to end preventable maternal deaths**

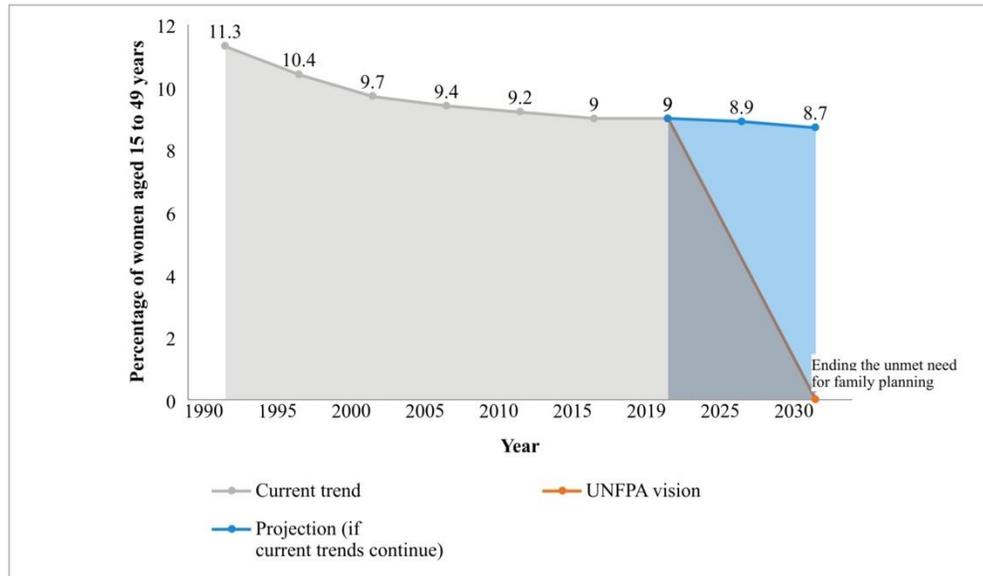


Source: UNFPA, Costing the three transformative results, 2019

**Ending the unmet need for family planning**

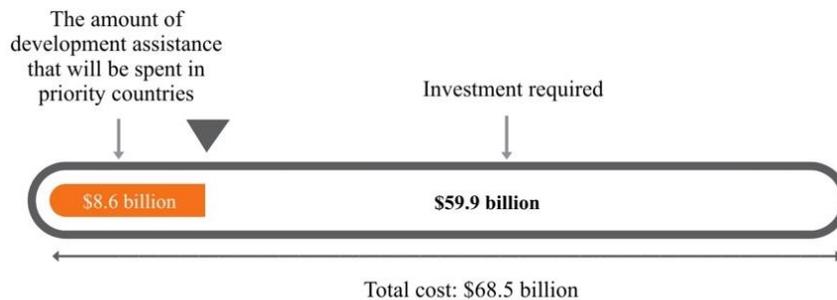
27. The unmet need for family planning declined worldwide from 11.3 per cent in 1990 to 9 per cent in 2019.

**Figure 4: Trends in the unmet need for family planning**



28. Of 1.1 billion women of reproductive age who want to avoid or delay their pregnancies, 130 million have an unmet need for family planning. To end the unmet need by 2030, the world will require \$59.9 billion in new investments (figure 5).

**Figure 5: Investments required to end the unmet need for family planning**

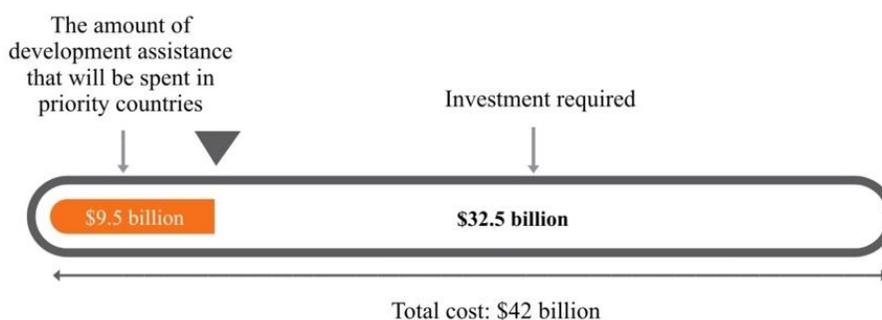


Source: UNFPA, *Costing the three transformative results, 2019*

**Ending gender-based violence and all harmful practices, including female genital mutilation and child, early and forced marriage**

29. Globally, 18 per cent of ever-partnered women and girls aged 15 to 49 years have experienced physical and/or sexual violence by a current or former intimate partner in the last 12 months. The cost of ending gender-based violence by 2030 requires \$32.5 billion in new investments (figure 6).

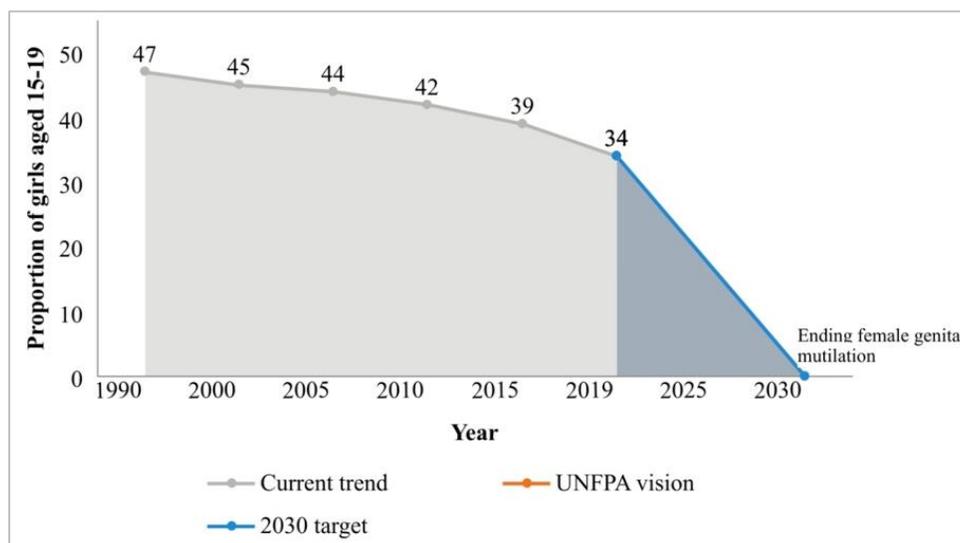
**Figure 6: Investments required to end gender-based violence**



Source: UNFPA, *Costing the three transformative results, 2019*

30. Female genital mutilation declined by 25 per cent since 2000. In the 30 countries with nationally representative prevalence data, approximately 1 in 3 girls aged 15 to 19 today have undergone the practice, compared to nearly 1 in 2 in 2000. To achieve the 2030 target of ending female genital mutilation, the rate of reduction must be accelerated tenfold.

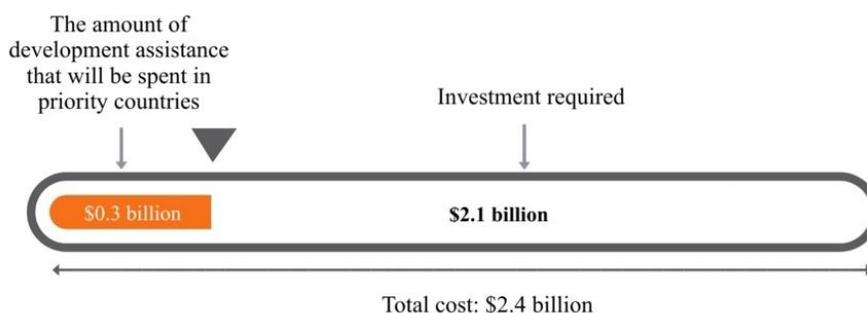
**Figure 7: Trends in female genital mutilation**



31. Over 200 million women and girls today have experienced female genital mutilation. Without concerted and accelerated action, 68 million more girls could be subjected to this practice by 2030.

The pace of decline of female genital mutilation has been uneven. Since 2000, the fastest decline among girls aged 15 to 19 years occurred in Burkina Faso, Egypt, Kenya, Liberia and Togo.

**Figure 8: Investments required to end female genital mutilation**



Source: UNFPA, *Costing the three transformative results, 2019*

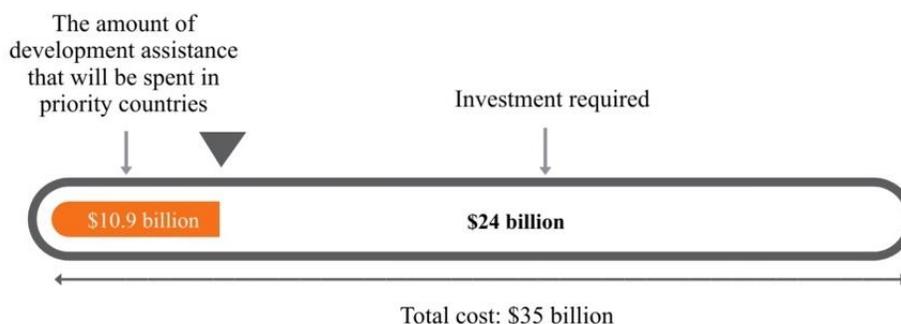
32. Child marriage continued to decline. During the last decade, the proportion of young women who were married as children decreased by 15 per cent, from 1 in 4 to approximately 1 in 5.

33. South Asia witnessed the largest decline in child marriage during the last 10 years; there, a girl's risk of marrying before her eighteenth birthday dropped by more than a third.

34. The current rate of decline in child marriage is insufficient to meet the 2030 target. Without further accelerating the reduction in child marriages, more than 150 million additional girls under 18 will marry by 2030. In order to meet the 2030 target, the annual rate of reduction must be 23 per cent.

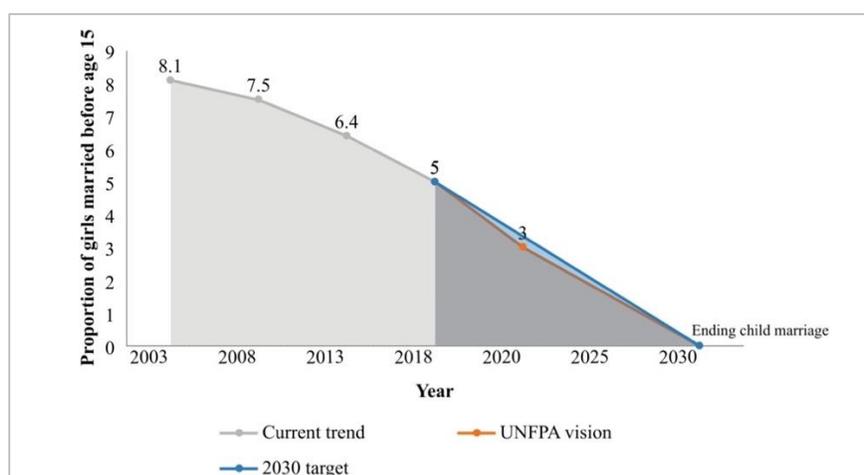
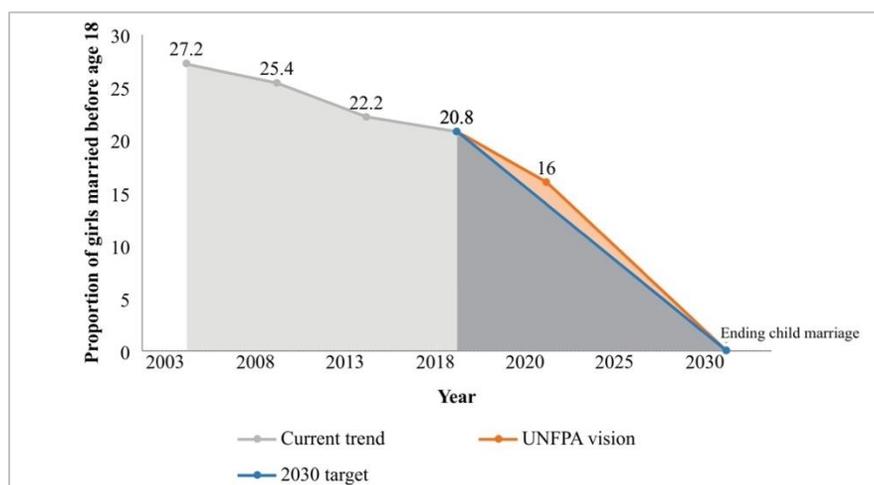
35. To eliminate child marriage by 2030, priority countries with a high burden of child marriage will have a \$24.1 billion resource gap (figure 9). Six hundred dollars are required to avert one case of child marriage.

**Figure 9: Investments required to end child, early and forced marriage**



Source: UNFPA, *Costing the three transformative results, 2019*

**Figure 10: Trends in child marriage**



36. An estimated 12 million girls are married in childhood each year. The global number of child brides today is estimated at 650 million girls and women. In sub-Saharan Africa, levels of child marriage decline modestly. In West and Central Africa, the region with the highest prevalence of child marriages, progress has been the slowest. Population growth threatens to result in an even higher number of child brides in sub-Saharan Africa in the coming years.

## B. Progress in achieving the outcomes of the UNFPA strategic plan, 2018-2021

**Outcome 1: Every woman, adolescent and youth everywhere, especially those furthest behind, has utilized integrated sexual and reproductive health services and exercised reproductive rights, free of coercion, discrimination and violence.**

**Outcome 1 has contributed to achievement of the following Sustainable Development Goals:**



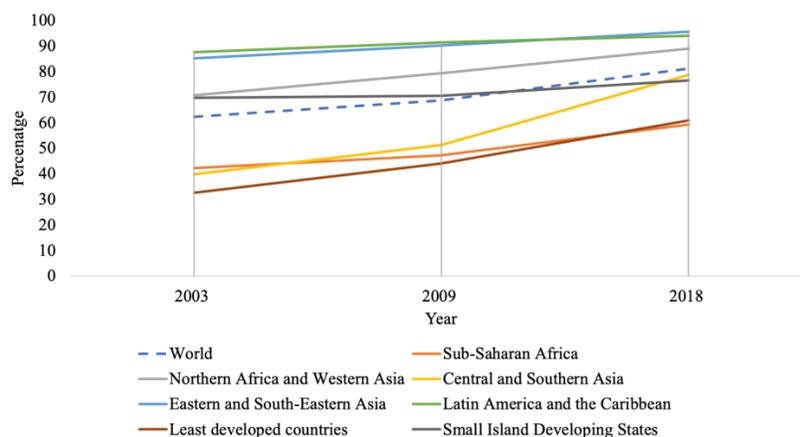
37. Global trends demonstrate notable progress in increasing the utilization of integrated sexual and reproductive health services. In 2019, 62 million women and young people in UNFPA priority countries utilized these services. This includes 33,000 women and young people with disabilities.

38. The demand for family planning services satisfied with modern methods of contraception increased slightly from 76.5 per cent in 2017 to 76.7 per cent in 2019. In the least developed countries, the proportion of women of reproductive age whose demand for family planning was satisfied with modern methods of contraception increased from 56.6 per cent in 2017 to 58.0 per cent in 2019. In 2019, 91 per cent of all women of reproductive age that were using some form of contraception were using modern methods.

39. Contraceptive use among countries increased substantially:

- (a) Between 1975 and 2017, the contraceptive prevalence rate among married women in Bangladesh increased from 8 per cent to 62 per cent;
- (b) In Ethiopia, the contraceptive prevalence rate among married women increased from 36 per cent in 2016 to 41 per cent in 2019;
- (c) In Papua New Guinea, the use of contraception among married women increased from 32 per cent in 2006 to 37 per cent in 2016-2018;
- (d) The modern contraceptive prevalence rate in the Sahel Women's Empowerment and Demographic Dividend countries increased from 9 per cent in 2015 to 17.5 per cent in 2019.

40. Globally, births attended by skilled birth attendants increased by 18 per cent in the 2009-2018 period, compared to 10 per cent in the 2003-2009 period (figure 11). Central and Southern Asia demonstrated the highest rate of improvement (54 per cent) during 2009-2018, compared to 29 per cent during 2003-2009.

**Figure 11: Trends in skilled attendance at birth, 2003-2018**

Source: Joint global database on skilled attendance at birth, 2019, United Nations Children's Fund and the World Health Organization

41. UNFPA made good progress in achieving the outputs under outcome 1. However, UNFPA faced challenges in achieving the targets of the output on policies and programmes for prioritizing furthest behind populations. To achieve those targets, UNFPA will: (a) improve national and subnational coverage of information and services; and (b) increase rights-based programming for sensitization and behavioural change to reduce stigma and discrimination.

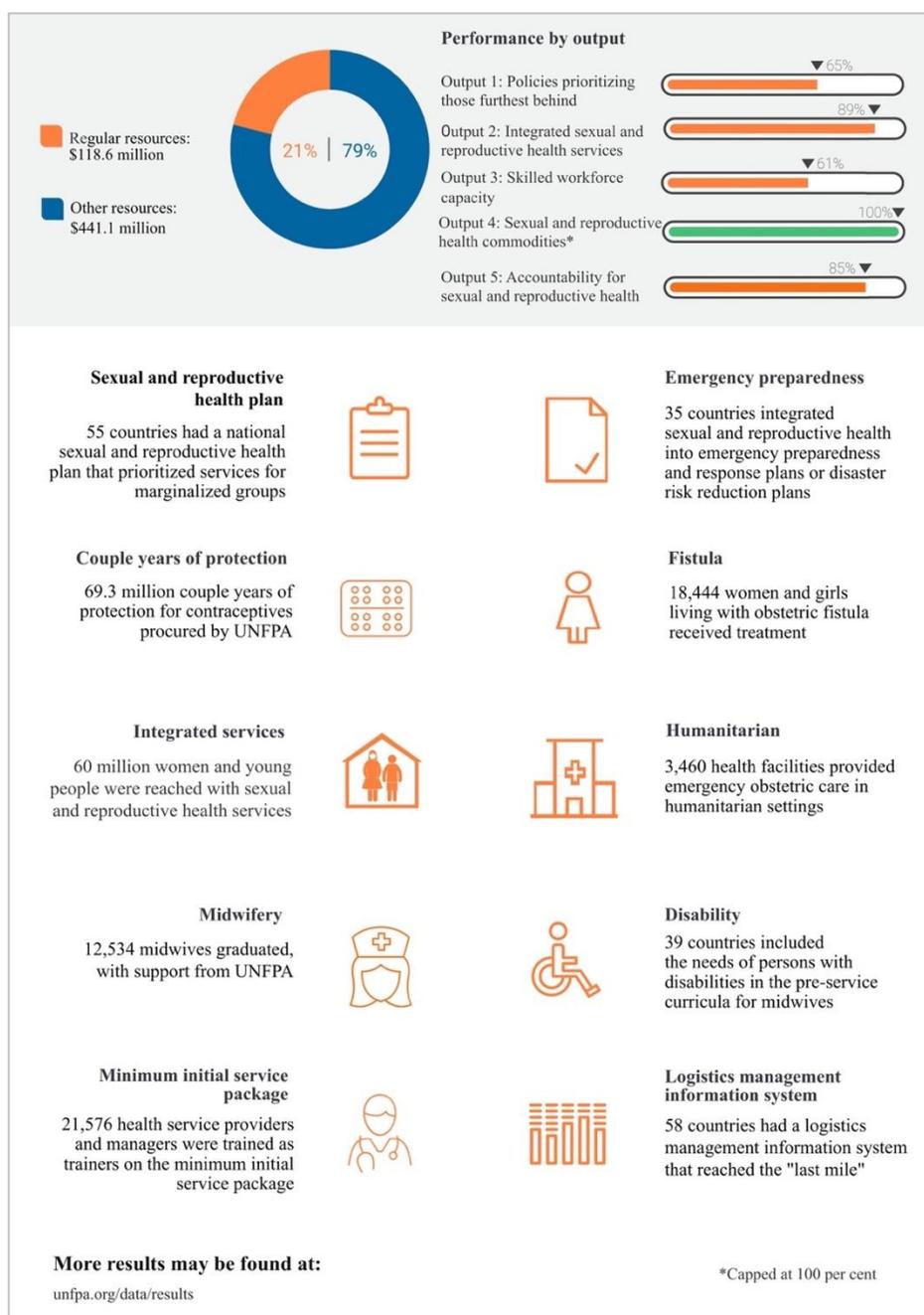
42. UNFPA achieved only 61 per cent of the targets of the output on strengthening the health workforce. This was due to: (a) barriers in establishing regulatory bodies to ensure the accreditation of midwifery schools; and (b) challenges in midwifery deployment schemes and variations in the registration of midwives upon graduation. Figure 12 illustrates some of the key achievements of outcome 1.

43. As part of the midterm review, UNFPA will develop a strategy to prioritize furthest behind populations. It will also develop a maternal health strategy to address challenges in strengthening the capacity of the health workforce.

44. The following examples illustrate the progress made in sexual and reproductive health and reproductive rights at the country level:

- (a) Bangladesh and Kenya made political commitments to eliminate obstetric fistula by 2030;
- (b) The Republic of the Congo introduced free health care for vulnerable groups, including indigenous people;
- (c) In 2019, UNFPA supported 1,607 safe deliveries in the Zaatari refugee camp in Jordan, the world's largest camp for Syrian refugees. Since 2013, skilled attendants assisted over 12,000 deliveries at the camp, with no maternal deaths;
- (d) The Republic of Moldova drafted a national regulation to ensure that vulnerable groups have access to modern contraceptives;
- (e) Sri Lanka eliminated mother-to-child transmission of HIV;
- (f) In Yemen, nearly 800,000 people received reproductive health services in 19 of 22 governorates that were categorized as having highly vulnerable populations.

**Figure 12: Key achievements in utilizing sexual and reproductive health services, 2018-2019**



45. UNFPA was instrumental in global and regional interventions that supported the achievement of progress at the country level:

- (a) UNFPA introduced a comprehensive package of sexual and reproductive health and rights interventions, applying the life-cycle approach;

- (b) UNFPA operationalized the global midwifery strategy;
  - (c) The Arab States region developed a reproductive, maternal, newborn, child and adolescent health strategy, endorsed by the Council of Arab Health Ministers;
  - (d) UNFPA operationalized a "last-mile assurance" strategy for reproductive health commodities.
  - (e) With support from UNFPA, countries operationalized national networks of referral health facilities to provide essential sexual and reproductive health services and ensure emergency obstetric and newborn care within two hours of travel time.
46. Partnerships helped to increase the utilization of integrated sexual and reproductive health services:
- (a) The Family Planning 2020 partnership, in which UNFPA serves as one of the core conveners, enabled an additional nine million women and adolescent girls to use modern contraception during the 2018-2019 period;
  - (b) In 2019, UNFPA began to host the secretariat of the Every Woman, Every Child, Every Adolescent partnership;
  - (c) The H6 partnership, of which UNFPA is a member, established multi-stakeholder platforms in 40 developing countries;
  - (d) UNFPA led the Global Campaign to End Fistula. Eighty per cent of countries in the Global Campaign have national strategies to end obstetric fistula;
  - (e) UNFPA, as a member of the Global Financing Facility, continued to provide technical assistance to countries to finance the health outcomes of their populations;
  - (f) UNFPA supported the operationalization of the Global Action Plan for Healthy Lives and Well-being for All. UNFPA co-leads the data and digital health accelerator of the Plan.
47. The experience of the first two years of the strategic plan in increasing the utilization of integrated sexual and reproductive health services revealed the following:
- (a) Poor quality-of-care constitutes a greater barrier to reducing mortality than insufficient access to care;
  - (b) Self-help interventions can be delivered rapidly to large numbers of people in low-resource humanitarian settings by non-specialists with minimal training;
  - (c) Primary health care, including first-level referrals, is the most cost effective and inclusive means of delivering health services;
  - (d) To close gaps in sexual and reproductive health and rights, an essential, integrated sexual and reproductive health package that applies the life-cycle approach must be operationalized;
  - (e) Domestic resources are the most sustainable sources of investments in sexual and reproductive health and rights.
48. UNFPA and its partners experienced the following challenges in achieving outcome 1:
- (a) decreasing global and domestic financial flows to the area of sexual and reproductive health; and
  - (b) the increasing decentralization of health systems, which impaired the ability to influence policies and programmes on a national scale.
49. As part of the midterm review, and in response to the challenges and lessons learned, UNFPA will: (a) strengthen quality-of-care in sexual and reproductive health services; (b) strengthen risk pooling and pre-payment schemes; (c) support health infrastructure through partnerships; and (d) increase financing for sexual and reproductive health.

**Outcome 2: Every adolescent and youth, in particular adolescent girls, is empowered to have access to sexual and reproductive health and reproductive rights, in all contexts.**

**Outcome 2 has contributed to achievement of the following Sustainable Development Goals:**



50. In 2018-2019, adolescents and youth, in particular adolescent girls, continued to be empowered to have access to sexual and reproductive health and rights. By 2019, in 50 per cent of UNFPA programme countries, young people, including marginalized adolescents and youth, participated in the formulation of sexual and reproductive health policies and programmes.

51. Available data on HIV knowledge is a proxy measure for youth empowerment. According to the most recent global data available, the percentage of men and women aged 15 to 24 who have the correct knowledge to prevent the sexual transmission of HIV was 21 per cent for women and 30.8 per cent for men in UNFPA programme countries. The 2019 evaluation of UNFPA capacity in humanitarian action concluded that UNFPA had increased the focus on adolescents and youth in its humanitarian programmes.

52. UNFPA made good progress on the strategic plan outputs for empowering adolescents and youth. Figure 13 highlights some of the key achievements. The output on advancing adolescent and youth skills and capabilities, however, met only 66 per cent of its targets. This was due to challenges encountered in providing services to marginalized girls, and limited resources and political support for sexuality education.

53. As part of the midterm review, UNFPA will develop a strategy to reach furthest behind populations, including marginalized girls, and launch a joint inter-agency guide on comprehensive sexuality education to reach out-of-school youth.

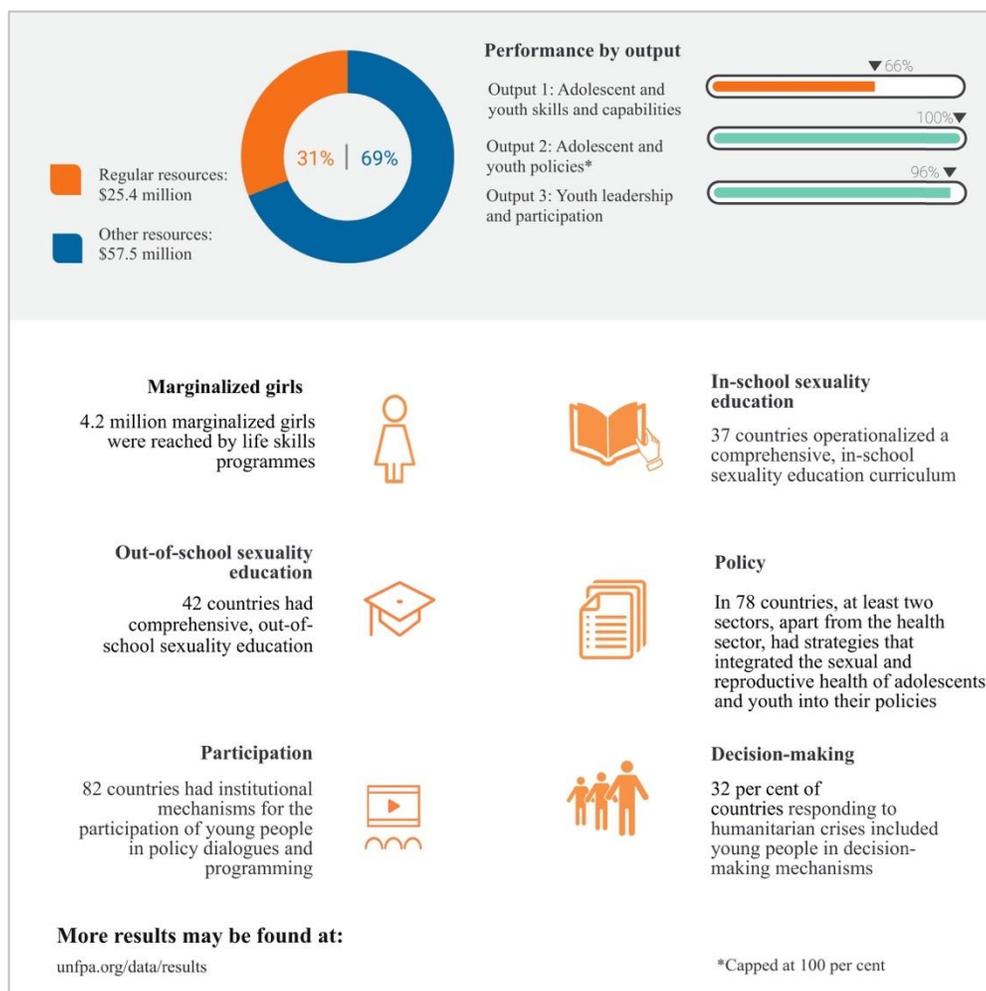
54. In 2019, UNFPA made progress in prioritizing adolescents and youth in its policies and programmes. Fifteen countries in West and Central Africa and several countries in East and Southern Africa integrated the demographic dividend into their national development plans.

55. Global and regional developments supported by UNFPA in 2019 provided a conducive environment for empowering adolescents and youth at the country level. For example, UNFPA launched an adolescent and youth strategy, “My Body, My Life, My World”, which demonstrates the linkages between sexual and reproductive health and reproductive rights, gender equality, population dynamics, and youth leadership and participation.

56. UNFPA played a critical role in shaping the youth, peace and security agenda by co-leading the development of the independent progress study on youth, peace and security mandated by the Security Council. The study contributed to the adoption of Security Council resolution 2419 on increasing the role of youth in conflict prevention and resolution.

57. UNFPA supported the adoption, in 2019, of the Lisboa+21 Declaration on Youth Policies and Programmes that seeks to promote, protect and fulfil the human rights of young people. The Arab States developed a regional strategic framework on youth, peace and security. To date, 177 countries have ratified the Convention on the Rights of Persons with Disabilities.

**Figure 13: Key achievements in the empowerment of adolescents and youth, 2019**



58. Partnerships were critical in empowering adolescents and youth. For example:

- (a) Last year marked the completion of phase I of the Sahel Women’s Empowerment and Demographic Dividend project, coordinated by UNFPA in partnership with the World Bank. At the end of phase I, all countries in the project – Benin, Burkina Faso, Chad, Côte d’Ivoire, Mali, Mauritania and Niger – integrated the demographic dividend into their national development plans and sectoral plans;
- (b) UNFPA co-led the Compact for Young People in Humanitarian Action, an interagency network that prioritizes the rights of young people in all stages of humanitarian action.

59. UNFPA and its partners learned the following lessons from empowering young people:

- (a) Partnering with regional and subregional youth institutions supports the prioritization of young people’s rights at the country level;
- (b) In countries where sexuality education is challenged, framing sexuality education as a health issue rather than as an educational issue may increase opportunities for its acceptance;

(c) Developing adolescent and youth investment cases helps countries prioritize investments for young people.

60. Youth unemployment has challenged the empowerment of young people. According to the most recent data available, the youth unemployment rate was 12 per cent compared to 4 per cent for adults. UNFPA continues to work with the International Labour Organization to support the Global Initiative on Decent Jobs for Youth.

61. There is no standardized, widely collected measure for youth empowerment. As part of the midterm review, UNFPA, in partnership with its stakeholders, will develop such a measure. UNFPA will also develop guidance on youth, peace and security during the remaining years of the strategic plan.

### **Outcome 3: Gender equality, the empowerment of all women and girls, and reproductive rights are advanced in development and humanitarian settings.**

**Outcome 3 has contributed to achievement of the following Sustainable Development Goals:**



62. Gender equality and the empowerment of women and girls continued to make progress. The most recent data from 51 countries show that 57 per cent of women aged 15 to 49 make their own informed decisions regarding sexual and reproductive health. Child marriage and female genital mutilation continued to decline globally. In the past decade, 131 countries have enacted 274 legal and regulatory reforms to support gender equality.

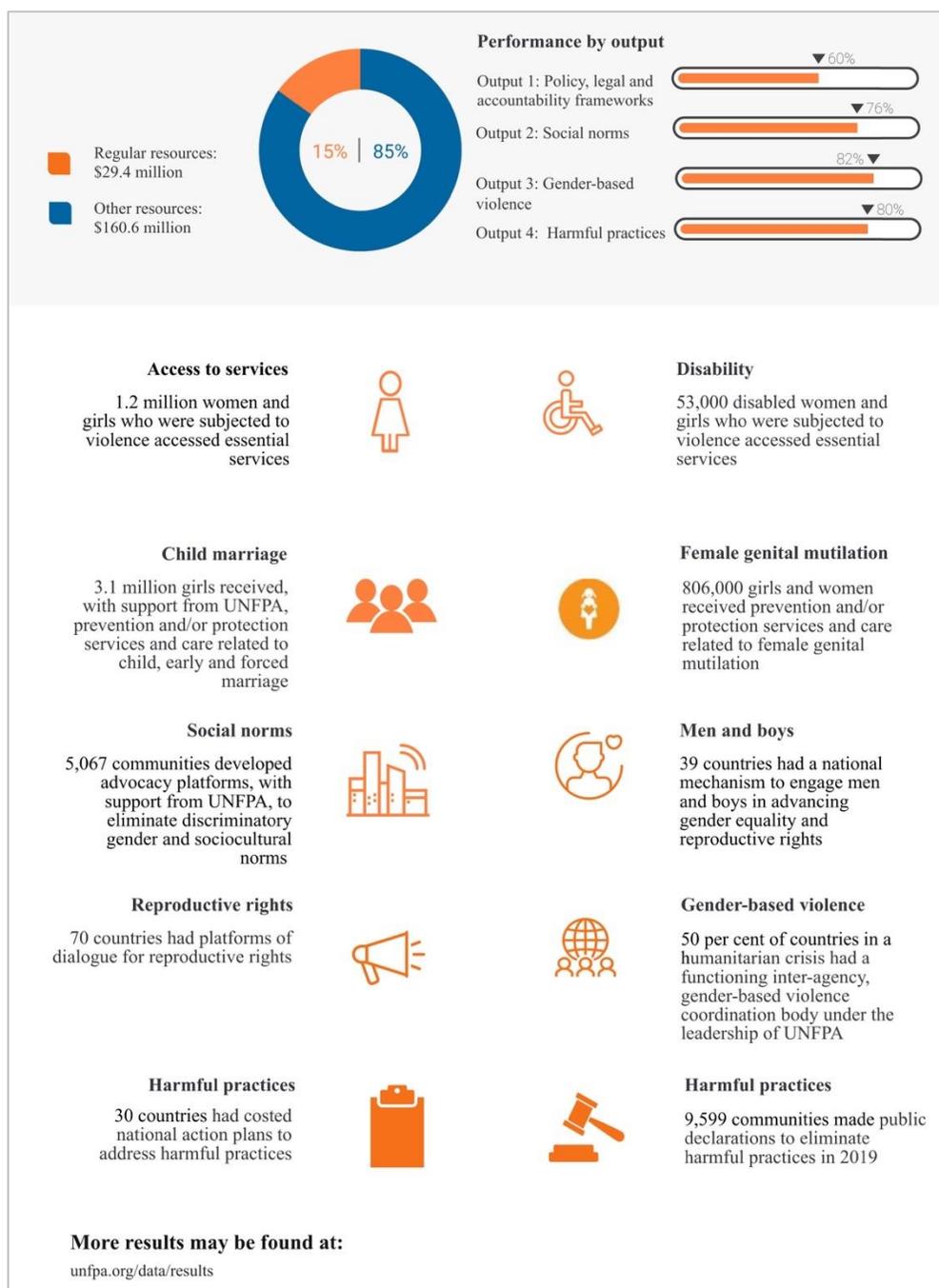
63. In Zambia, the percentage of women who experienced physical violence in the last 12 months declined from 32 per cent in 2008 to 18 per cent in 2018. In the Philippines, the percentage of ever-married women aged 15 to 49 who reported having experienced violence by their husband or partner declined from 29 per cent in 2008 to 24 per cent in 2017. With support from UNFPA, countries implemented the recommendations in the area of sexual and reproductive health and rights of the universal periodic review of the Human Rights Council. By 2019, 90 per cent of countries had taken action on more than 50 per cent of those recommendations.

64. As indicated in figure 14, UNFPA made good progress in achieving the outputs under outcome 3, except the output on advancing policy, legal and accountability frameworks for empowering women and girls, including marginalized and excluded groups, to exercise their reproductive rights. This was due to a lack of expertise and resources. Based on data from 69 countries, only 19 per cent of countries have a comprehensive system to track budget allocations for gender equality.

65. As part of the midterm review, UNFPA will develop guidance for UNFPA offices to enable them to reach furthest behind populations. UNFPA, in cooperation with other United Nations organizations, will also issue operational guidance to improve accountability for gender equality and women's empowerment.

66. The recent evaluation of UNFPA support to the prevention of, response to and elimination of gender-based violence and harmful practices concluded that UNFPA had made significant contributions to respond to gender-based violence and harmful practices at all levels.

**Figure 14: Key achievements in gender equality and the empowerment of women, 2018-2019**



67. With support from UNFPA, countries made significant progress towards achieving gender equality and the empowerment of women and girls:

- (a) Indonesia revised its marriage law by changing the minimum age at which women can marry to 19;
  - (b) Malaysia developed a five-year plan to tackle child marriage and raised the minimum age for marriage for girls from 16 to 18;
  - (c) Mozambique passed a law to address gender-based violence;
  - (d) South Africa declared gender-based violence and femicide as national emergencies;
  - (e) The Supreme Court of the United Republic of Tanzania declared child marriage unconstitutional;
  - (f) More than six cross-border initiatives for the abandonment of female genital mutilation within the East and Southern Africa region became operational.
68. UNFPA was instrumental in global and regional developments that advanced gender equality and the empowerment of women and girls. The Human Rights Council, at its forty-first session, adopted resolutions on: (a) the elimination of all forms of discrimination against women and girls; (b) the consequences of child, early and forced marriage; (c) preventing and responding to violence against women and girls in the world of work; (d) the mandate of the independent expert on protection against violence and discrimination based on sexual orientation and gender identity; and (e) youth and human rights.
69. Partnerships were critical in advancing gender equality and the empowerment of women and girls:
- (a) In 13 countries in Africa and Latin America, UNFPA operationalized the Spotlight Initiative, a global multi-year partnership between the United Nations and the European Union, that seeks to eliminate violence against women and girls;
  - (b) The United Nations Joint Global Programme on Essential Services for Women and Girls Subject to Violence (a partnership of UNDP, UNFPA, the United Nations Entity for Gender Equality and the Empowerment of Women (UN-Women), the United Nations Office on Drugs and Crime, and the World Health Organization) provides essential multisectoral services for women and girls who have experienced gender-based violence;
  - (c) UNFPA and the United Nations Children’s Fund (UNICEF) continue to lead the largest global programme to accelerate the abandonment of female genital mutilation. Thirteen of 17 countries in the programme introduced national laws banning female genital mutilation, and six have costed national action plans;
  - (d) UNFPA and UNICEF continued to implement the Global Programme to Accelerate Action to End Child Marriage. In phase 1 of the programme, 11 of the 12 countries in the programme developed strategies to end child marriage.
70. Challenges, however, continued in advancing gender equality and the empowerment of women and girls. Women are under-represented at all levels of political leadership. As of January 2019, women’s representation in parliaments was 24.2 per cent. Women occupied only 27 per cent of managerial positions in the world. The gender gap in labour force participation among adults has stagnated at 31 per cent. Gaps in financing limit the implementation of laws and policies on gender equality.
71. UNFPA and its partners learned the following lessons:
- (a) By considering harmful gender and sociocultural norms as a root cause of gender inequality, the UNFPA strategic plan was instrumental in advancing gender equality and women’s empowerment;
  - (b) Mental health support should be integrated into the UNFPA response to gender-based violence in emergencies and into sexual and reproductive health in emergencies;
  - (c) Divorced, separated or widowed women are more likely than currently married women to report having experienced physical, sexual or emotional violence by an intimate partner;

(d) Studies in the Arab States region showed that psychological violence was one of the most common types of violence suffered by the elderly.

**Outcome 4: Everyone, everywhere, is counted, and accounted for, in the pursuit of sustainable development.**

**Outcome 4 has contributed to achievement of the following Sustainable Development Goals**



72. UNFPA and its partners made notable progress under outcome 4. As of 2019:

- (a) 67.1 per cent of the population scheduled to be counted in the 2020 round of censuses was counted;
- (b) 89 per cent of countries conducted at least one population and housing census in the last 10 years;
- (c) 58.4 per cent of countries have birth registration data that are at least 90 per cent complete;
- (d) 60.4 per cent of countries have death registration data that are at least 75 per cent complete;
- (e) The births of 73 per cent of children under 5 years of age have been registered by age with a civil authority.

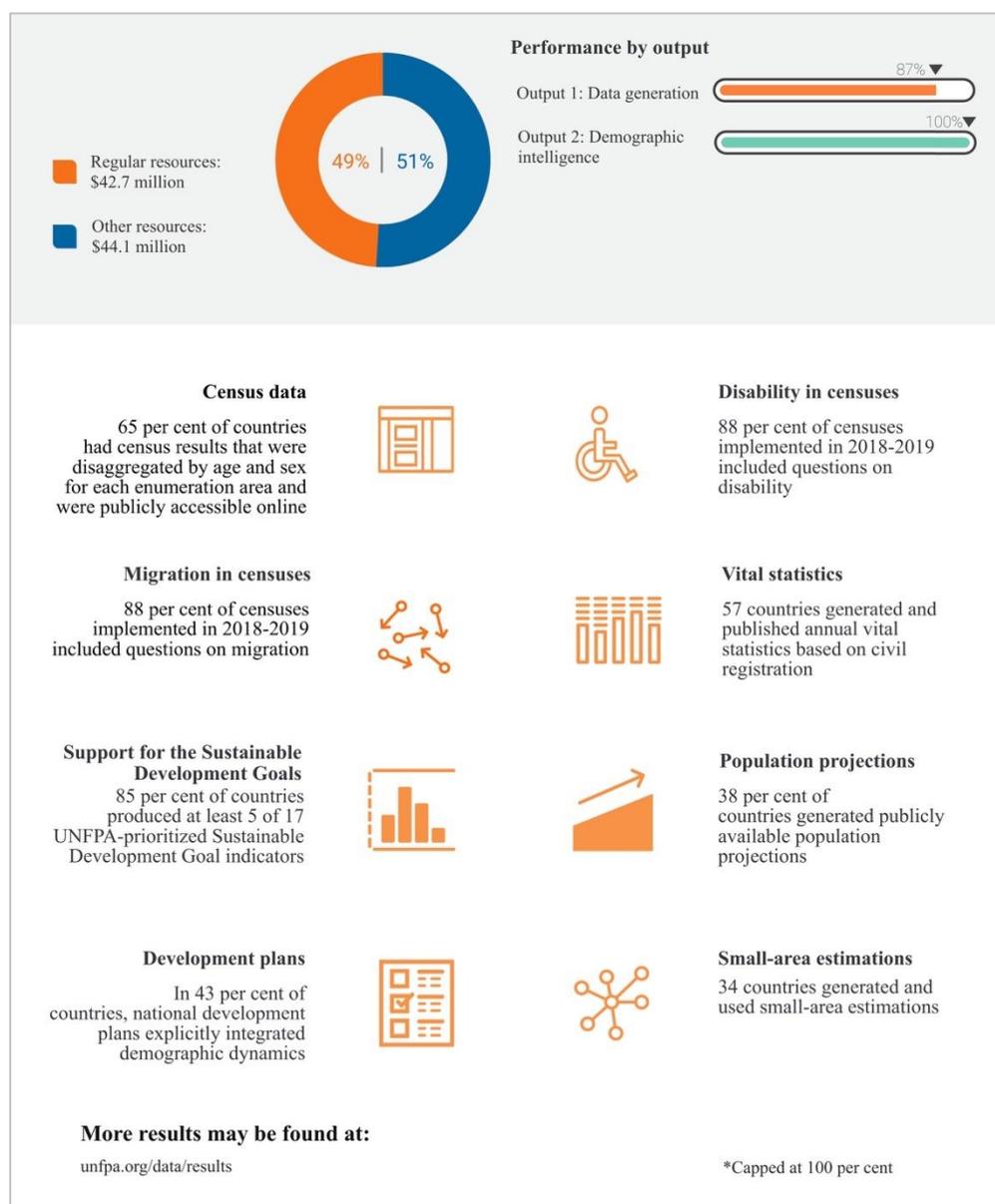
73. In addition, 188 States and the European Union have ratified or acceded to the Paris Agreement on climate change. Approximately 150 countries have developed national policies to respond to the challenges of rapid urbanization. According to the most recent data, 129 countries had implemented a national statistical plan, up from 102 in 2017.

74. Figure 15 illustrates key achievements in 2018-2019 in counting and accounting for everyone, everywhere, in the pursuit of sustainable development.

75. UNFPA achievements at the country level under outcome 4 include the following:

- (a) Barbados established a national population commission;
- (b) Bosnia and Herzegovina established a network of 12 healthy ageing centres and, through South-South cooperation, operationalized this model in other countries;
- (c) Guatemala conducted a population and housing census after 16 years, enabling the Government to strengthen decision-making and the design of public policies;
- (d) Kenya signed into law a data protection bill that established the office of the data commissioner and set forth requirements for protecting personal data processed by public and private entities;
- (e) Viet Nam digitized its census operations for the first time.

**Figure 15: Key achievements in counting and accounting for everyone, everywhere in the pursuit of sustainable development, 2018-2019**



76. UNFPA global and regional interventions were crucial in achieving country-level results:
- (a) Under UNFPA leadership, the United Nations provided guidance to all countries on measuring Sustainable Development Goal indicator 5.6.1 on women’s decision-making in sexual and reproductive health and rights;
  - (b) UNFPA supported the collection of data on Sustainable Development Goal indicator 5.6.2 on laws and regulations that guarantee women’s access to sexual and reproductive health care, information and education. Based on the quality and scale of data collection, the indicator was upgraded from tier III to tier II;

(c) UNFPA developed technical guidance on the production of common operational data sets on population statistics to support decision-making in humanitarian contexts;

(d) The UNFPA Arab States regional office introduced a composite index to quantify progress in implementing the ICPD Programme of Action.

77. Partnerships played an important role in counting and accounting for everyone, everywhere. UNFPA, the Department for International Development of the United Kingdom, and the Bill and Melinda Gates Foundation launched the Geo-Referenced Infrastructure and Demographic Data for Development initiative. Known as GRID3, this multi-country initiative facilitates the production, collection, use and dissemination of high-resolution population, infrastructure and other georeferenced data.

78. In partnership with the International Development Research Centre and its Centre of Excellence for Civil Registration and Vital Statistics Systems, UNFPA launched the Connecting Vital Events Registration and Gender Equality initiative, known as ConVERGE, in 10 countries in West and Central Africa, the Arab States and Latin America.

79. UNFPA learned important lessons in counting and accounting for everyone, everywhere. For example:

(a) Demands for georeferencing census data and other population data are widespread, and represent transformational developments for national statistical systems in the 2020 round of censuses;

(b) Digitizing civil registration, population data and identity management systems can make processing identity information more efficient, but such systems raise questions about privacy and access;

(c) The global interest in “democratizing data” underscored tensions between population data access and privacy;

(d) Using modern population data is no less important than generating this data. Governments and partners must have the capacity to use data to guide programme investments;

(e) Supporting South-South study tours and facilitating the sharing of census equipment are effective and efficient ways to operationalize the 2020 round of censuses.

80. UNFPA encountered several challenges in achieving the outputs under outcome 4, including conditions resulting from war and civil unrest. Such conditions compromise the coverage of population and housing censuses. Census cost was the most commonly reported challenge for governments (67 per cent). Developing countries experienced high turnover and low retention of qualified technical staff throughout the census life cycle.

81. To respond to these challenges, UNFPA will launch a population data thematic fund in 2020. UNFPA will also prioritize the implementation of the UNFPA strategy on the 2020 round of censuses.

### ***Organizational effectiveness and efficiency***

82. Advancements in organizational effectiveness and efficiency contributed to the achievement of development results under the UNFPA strategic plan. UNFPA fully achieved all four outputs under organizational effectiveness and efficiency. Box 2 shows the key efficiencies gained by UNFPA in 2019.

**Box 2: Key efficiencies gained by UNFPA as of 2019****Cash transfers to implementing partners**

- UNFPA disbursed 81 per cent of cash advances and expense reimbursements to 1,250 implementing partners within 15 working days of receiving payment requests, compared to 79 per cent in 2018. This can be attributed to the full operationalization of the UNFPA global programming system.

**Bridge funding mechanism**

- UNFPA averted 56 hormonal contraceptive stock-out situations in 36 countries with the introduction of a bridge funding mechanism.

**Cost saving through last-mile assurance**

- UNFPA recovered \$1 million for the procurement of commodities due to the implementation of the last-mile assurance mechanism in 2019.

**Surge deployment**

- The proportion of level 1 and level 2 humanitarian emergencies in which surge deployment was achieved within lead response time improved from 33 per cent to 80 per cent between 2017 and 2019.

**Cost saving due to generic contraceptives**

- The cost saving from procuring generic contraceptives increased by four times between 2018-2019, from \$1.9 million in 2018 to over 8.7 million in 2019.

83. UNFPA programmes at global, regional and country levels performed well. In 2018-2019, 88 per cent of country programmes were rated as “good” performers. During the same period, UNFPA fully met 89 per cent of the targets of its regional programmes and 91 per cent of the targets of its global programme.

84. This success may be attributed to improved programming for results. The developmental evaluation of results-based management at UNFPA concluded that UNFPA had fully mainstreamed results-based management at all levels. The review conducted by the Multilateral Organisation Performance Assessment Network also found that UNFPA had improved its results-based management at organizational and country levels.

85. UNFPA surpassed its resource mobilization targets for 2018 and 2019 (figure 16). This is the result of: (a) intense and targeted resource mobilization and advocacy efforts at all levels; (b) adoption of the United Nations system-wide funding compact; and (c) political mobilization and financial support for the UNFPA mandate from a range of donors. Initiatives in South-South cooperation also enabled UNFPA to mobilize resources in 2019.

86. UNFPA obtained a “clean” external audit opinion (an unqualified opinion) in 2019. It also achieved a 73 per cent implementation rate for internal audit recommendations. In 2019, all UNFPA units completed an enterprise risk assessment, prepared action plans and responded to all critical and high risks.

87. UNFPA strengthened its organizational response to sexual exploitation, abuse and harassment and certified all its managers in this area.

88. UNFPA signed 85 new agreements with private-sector partners in 2019. It also launched its first-ever individual giving strategy and campaign.

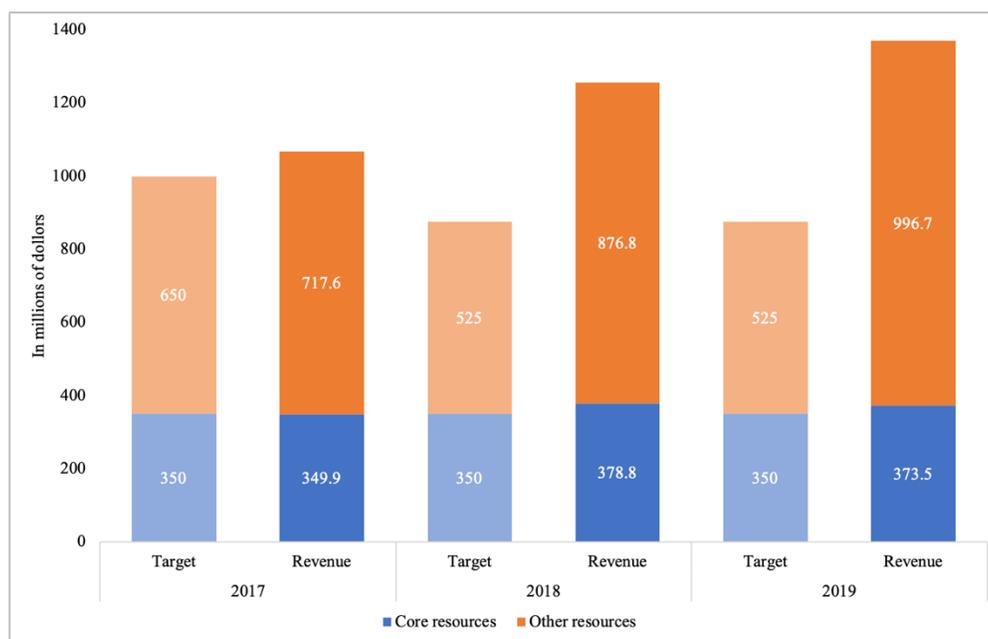
89. By 2019, the proportion of UNFPA programme countries that had utilized South-South cooperation as a strategy to achieve results increased by 20 per cent, compared to 2017.

90. UNFPA made significant contributions to United Nations system-wide results, coordination and coherence in 2019:

- (a) UNFPA doubled its financial contribution to the resident coordinator system;

- (b) Ninety-three per cent of UNFPA country offices participated in 219 joint programmes;
- (c) In 72 per cent of UNFPA offices, UNFPA shared premises with other United Nations organizations.

**Figure 16: Contribution revenue, 2017-2019**



91. UNDP, UNFPA, UNICEF and UN-Women continued to make good progress in six areas of collaborative advantage, as identified in the common chapter of the respective strategic plans of the organizations (annex 8). A survey conducted by the independent evaluation offices of the four organizations, as part of the evaluability assessment of the common chapter, found that 100 per cent of staff surveyed indicated that the common chapter was either a key driver or a positive influence for improved collaboration. Nonetheless, the reform of the United Nations development system requires collaboration across the entire system. The utility of the common chapter as a separate initiative should therefore be reviewed in that context.

#### **IV. Midterm review of the UNFPA strategic plan, 2018-2021**

92. The midterm review assessed performance against the strategic plan targets; identified areas that were underperforming; recognized factors that led to the underperformance; and recommended remedial measures to get the performance back on track.

93. The midterm review took a small-scale approach. It accorded the most attention to “how” to achieve development results. The review was a consultative process – an internal process with all staff, and an external process with Executive Board members and observers, civil society and academic partners.

94. The midterm review was evidence-driven. It scanned the global development landscape and identified opportunities to accelerate the achievement of the transformative results.

**Strengthening the thematic focus**

95. The world will not achieve the three transformative results without addressing climate change. The midterm review found that UNFPA should give more attention to the effects of climate change on those results. During 2020-2021, UNFPA will develop a climate-change strategy.

96. In areas affected by conflicts, 1 in 5 people are living with some form of mental disorder. Many survivors of gender-based violence experience long-lasting psychological and social effects due to stigma and insufficient support and services, as well as a lack of power and resources.

97. In response to this need, UNFPA will institutionalize the integration of mental health and psychosocial support into the area of sexual and reproductive health and rights. UNFPA will also develop guidance and tools to support countries to undertake this integration.

98. Population ageing, a result of increasing longevity, declining fertility and the progression of large cohorts to older ages, is the dominant demographic trend of the twenty-first century. Low fertility is a major concern for some governments because of its impact on population ageing and the pressure on the labour market, the health-care system and the social security system.

99. In response to population ageing, UNFPA will: (a) continue to support knowledge generation and sharing on the determinants of low fertility and corresponding policy options; (b) increase its support to countries in human rights-based, age-sensitive and all-age-inclusive policy development; (c) address the fear of low fertility by investing in adolescents and young people to raise labour productivity and boost social and economic development; and (d) support countries in applying a life-course approach.

**Addressing challenges in achieving results**

100. The strategic plan outputs focusing on furthest behind populations demonstrated limited progress. The reasons for this include: (a) gaps in the availability of data and information about such populations; (b) inadequate financial resources and skills to reach those populations; and (c) resistance in recognizing some furthest behind populations.

101. UNFPA will strengthen its approaches for reaching furthest behind populations. It will: (a) support countries to invest in data systems that provide disaggregated data and prioritize furthest behind populations in policies and programmes; (b) institutionalize the use of investment cases to underpin advocacy and policy dialogue work; and (c) support country teams to develop national coalitions that are able to secure national commitments to sexual and reproductive health and reproductive rights for furthest behind populations.

102. Although the midterm review revealed that the strategic plan outputs on quality of care performed well, poor quality of care remains a major concern and priority for many countries.

103. UNFPA will improve quality of care by: (a) rolling out the new essential services package and supporting countries to include it in their universal health coverage plans; (b) supporting countries to develop programmes that focus on implementing sexual and reproductive health interventions at scale; (c) supporting countries to develop robust health management information systems; (d) enabling countries to seek and use non-health data, such as population distribution, road networks and geographic information systems; and (e) building partnerships beyond the health sector. UNFPA will also develop a maternal and neonatal health strategy to guide its programming.

104. UNFPA identified a gap in the availability of data to support programming, especially for prioritizing left behind populations, and in supporting the achievement of the Sustainable Development Goals. To address this gap, UNFPA will: (a) support countries to improve data quality and scope by modernizing the 2020 round of censuses; (b) improve census operations; (c) increase the quality and coverage of civil registration; and (d) introduce new approaches, such as geospatial mapping.

105. As of April 2020, UNFPA has responded to the COVID-19 pandemic and its potential impact on achieving the results of the strategic plan. UNFPA has helped to: (a) strengthen the capacity of

the health-care system to maintain the continuity of sexual and reproductive health services and interventions; (b) address sexual and gender-based violence; and (c) ensure the uninterrupted supply of modern contraceptives and other reproductive health commodities. UNFPA is also: (a) promoting risk communication and reducing stigma; (b) helping young people play a leadership role in the response to COVID-19; (c) supporting governments to track COVID-19 cases and providing disaggregated data on vulnerable groups; and (d) ensuring that the UNFPA commitment to “leave no one behind” is embedded in all its responses.

#### **Strengthening “how to do business” in response to the midterm review**

106. The UNFPA business model deploys tailored solutions with different modes of engagement according to country needs and the ability of the country to finance those needs. The modes of engagement include: (a) advocacy, policy dialogue and advice; (b) knowledge management; (c) capacity development; (d) service delivery; and (e) partnerships and coordination, including South-South and triangular cooperation. UNFPA will retain its business model, but adjust its modes of engagement according to the findings of the midterm review.

107. UNFPA will leverage the momentum of ICPD25 and strengthen its advocacy and policy dialogue. It will deploy this approach on the global level in the context of the Decade of Action and the twenty-fifth anniversary of the Fourth World Conference on Women. At the country level, UNFPA will strengthen advocacy and policy dialogue in the context of the United Nations Sustainable Development Cooperation Framework.

108. UNFPA will create a high-level commission to monitor the implementation of the commitments made at the Nairobi Summit and, in cooperation with its partners, will develop a transparent mechanism to track that implementation. UNFPA will use this experience to fine-tune its advocacy and policy dialogue.

109. UNFPA will introduce innovation as a core programme strategy. It will also alter its innovation approach from an inward-looking approach to an outward-looking one that expands its partnerships. UNFPA will: (a) scan and harness the views of the innovation ecosystem actors; (b) work with other United Nations organizations to address areas of common interest; and (c) form alliances with universities, research institutes, foundations and private firms to accelerate the achievement of the transformative results.

110. UNFPA will provide increased support to middle-income countries by: (a) expanding partnerships and South-South and triangular cooperation; (b) increasing the focus on issues facing middle-income countries, such as low fertility, ageing, migration and refugees; (c) supporting countries to develop cost-effective and replicable innovative solutions; and (d) exploring strategies for middle-income countries in the context of United Nations reform and the Decade of Action.

111. UNFPA will prioritize its programming in the small island developing States. Many such States are vulnerable to the negative impacts of climate change and external economic shocks. As part of the midterm review, UNFPA will increase investments for its Pacific and Caribbean multi-country programmes to address those challenges.

#### **Strengthening organizational effectiveness and efficiency in response to the midterm review**

112. As part of the midterm review, UNFPA will prioritize learning and adaptive management. It will introduce an adaptive management framework and strengthen business practices to operationalize that framework. UNFPA will scale up the “RBM seal”, a recognition-based initiative to advance results-based management in the organization.

113. UNFPA will strengthen risk management by focusing on its practical application in differentiated contexts (such as humanitarian and fragile contexts, for example) and operating environments. This will enable risk-informed decision-making, supported by improved performance management processes. UNFPA will follow the guidance developed by the cross-functional task force on risk management, as mandated by the High-level Committee on Management. UNFPA will

also expand transformational leadership and scale-up management certification programmes that are aligned with the United Nations Leadership Framework.

114. UNFPA will strengthen its representation in countries where that representation is not commensurate with the level necessary for high-level political engagement, relations among donors and resource mobilization. UNFPA will add deputy representative posts or a national equivalent where such posts are required. In smaller programme countries without UNFPA representatives, senior national staff will transition to “head of office” to enable them to engage directly with the United Nations resident coordinator system.

115. UNFPA will strengthen its leadership in countries with high-risk operational environments; strengthen independent oversight functions; and adjust its human resource functions in order to implement the UNFPA human resources strategy.

116. UNFPA will continue to support United Nations reform. UNFPA will: (a) align country programmes, global and regional interventions, and related policies and procedures with the United Nations Sustainable Development Cooperation Frameworks; (b) continue to support the resident coordinator system; and (c) build global technical expertise hubs.

117. UNFPA will strengthen advocacy, communications and partnerships for resource mobilization and enhance its capacity to leverage broad-based partnerships in support of the transformative results. It will also take advantage of the momentum generated after the Nairobi Summit.

118. UNFPA has proposed revisions to the integrated budget to support the operationalization of midterm review adjustments. More details are provided in the midterm review of the UNFPA integrated budget, 2018-2021 (DP/FPA/2020/5).

#### **Implementation of the midterm review of the strategic plan**

119. In 2020-2021, in order to implement midterm review adjustments, UNFPA will:

- (a) Communicate, internally and externally, midterm review adjustments and develop organizational guidance to implement the adjustments;
- (b) Continue to implement change-management initiatives to adapt to new ways of doing business;
- (c) Measure and analyse the implementation of the strategic plan in order to make adjustments to organizational policies, programmes and structures.

## **V. Next strategic plan**

120. In 2020, UNFPA will begin the preparation of the next strategic plan, 2022-2025. The focus of the plan will be to accelerate the achievement of the three transformative results in line with the Decade of Action.