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UNFPA – Country programmes and related matters

DRAFT

United Nations Population Fund

Country programme document for South Africa

Proposed indicative UNFPA assistance: \$11.9 million: \$6.4 million from regular resources and \$5.5 million through co-financing modalities or other resources

Programme period: Five years (2020-2025)

Cycle of assistance: Fifth

Category per decision 2017/23: Yellow

Proposed indicative assistance (in millions of \$):

| Strategic plan outcome areas | | Regular resources | Other resources | Total |
|---------------------------------------|---|-------------------|-----------------|-------|
| Outcome 2 | Adolescents and youth | 1.9 | 3.0 | 4.9 |
| Outcome 3 | Gender equality and women's empowerment | 2.3 | 2.5 | 4.8 |
| Outcome 4 | Population dynamics | 1.2 | - | 1.2 |
| Programme coordination and assistance | | 1.0 | - | 1.0 |
| Total | | 6.4 | 5.5 | 11.9 |

I. Programme rationale

1. The Republic of South Africa, with a population of 58.8 million, is the largest country in the Southern Africa region. Women account for 51 per cent of the population; 27 per cent is aged 10-24 years; the proportion aged 60 years and above doubled between 2002 and 2019, to 3 per cent. The demographic diversity presents opportunities for harnessing the demographic dividend with the right investments, including addressing inequality, poverty and unemployment recognized as persistent structural challenges impeding South Africa's progress towards sustainable development.

2. Classified as an upper middle-income country, South Africa is one of the most unequal countries in the world, with a gini co-efficient of 0.63. The 2015 Survey of Living Conditions reports 49.2 per cent of the adult population as living below the upper-bound poverty line, with higher levels for women (52 per cent). The highest provincial poverty headcounts were in Limpopo (67.5 per cent), Eastern Cape (67.3 per cent), and Kwa-Zulu-Natal (60.7 per cent).

3. Gender inequality and negative sociocultural norms contribute to violence in South Africa, with the highest incidence of rape per capita in the world. In 2016, one in five of ever-partnered women aged 18 years and older had experienced physical violence by a partner, and 6 per cent of women aged 18 and older had experienced sexual violence. The 2019 South African Police annual report indicates a 3.9 per cent increase in rape cases from 2014 levels, with intimate femicide as a leading cause of murders. The 2019 Presidential Emergency Plan on Gender-based Violence highlights this issue as a national priority requiring urgent investments to address underlying causes, in partnership with multisectoral institutions, communities, men and boys.

4. The total fertility rate declined from 2.6 children per woman in 2009 to 2.3 in 2019, with 60 per cent of sexually active women aged 15-49 years using modern contraception. A 19 per cent unmet need for family planning among women of reproductive age underscores a significant proportion of women with limited access to modern contraceptives, including 31 per cent aged 15-19 years and 28 per cent aged 20-24 years. The adolescent birth rate (71 per 1,000 girls aged 15-19 years) is higher than the global average, despite progressive laws facilitating access to adolescent sexual and reproductive health services from age 12. Teenage pregnancy is 16 per cent for girls aged 15-19 years, resulting from early sexual debut and rape, with consequences of unsafe abortions and sexually transmitted infections, including HIV. The institutional maternal mortality ratio declined from 188 per 100,000 live births in 2009 to 134 deaths per 100,000 live births in 2017, despite skilled birth attendance of 97 per cent. Persistent gaps in quality of care within the health care system and high rates of unsafe abortions are key bottlenecks.

5. HIV prevalence is 13.5 per cent, translating into 7.9 million people living with HIV in 2019. While there was notable decline in incidence of HIV infection in the general population, there was an increase of 11.3 per cent in young people aged 15-24 years between 2012 and 2017, with young women accounting for 70 per cent of new infections. HIV prevalence among female sex workers is estimated at 57.7 per cent, more than twice the prevalence among the general population of women.

6. South Africa has a well-developed statistical system, with regular census and population-based surveys. However, gaps exist in the availability of disaggregated data at subnational levels and for vulnerable groups, including adolescents aged 10-14 years and people living with disabilities. Migration is significant, requiring improved availability of disaggregated data on patterns, drivers and related remittances. Strengthening South-South and triangular cooperation on data for development is a potential lever the country could facilitate due to its geopolitical positioning.

7. South Africa is affected by climate change, including occurrence of droughts and floods, leading to displacement of vulnerable communities, with consequences on coping mechanisms and access to services. Accelerated evidence-based actions at national and provincial levels are required to strengthen resilience and adaptation in line with the National Climate Change Adaptation Strategy.

8. Achievements from the previous country programme include: strengthened policy environment through enabling strategic frameworks for reproductive, maternal, newborn, child and adolescent health and nutrition; development of an investment case; national youth policy monitoring framework; in-school and out-of-school comprehensive sexuality education frameworks and manuals; National Strategic Plan on Gender-based violence, and its costing study; strengthened capacity of provincial departments and district municipalities to integrate population dynamics, youth and HIV issues into development plans; cost-effective and good practice models in KwaZulu Natal and Eastern Cape

provinces, including introduction of long-acting reversible contraceptive methods, integrated services model for sex workers; and adolescent and youth-friendly service standards.

9. Lessons learned from previous country programmes at national level and in targeted provinces underscore the need for a differentiated approach to programme design and delivery. Best practice models and tailored approaches underscore generation and use of disaggregated data to address pockets of inequality related to youth and adolescent sexual reproductive health and rights. Intensifying multisectoral coordination and actions are important in addressing violence against women and girls. Strengthening monitoring and accountability of public and private-sector actions help reach populations left behind, especially adolescents, young people, persons living with disabilities, key populations and underserved geographic hotspots. Continued attention to the centrality of population dynamics in migration, climate change, and transformative social change remain critical.

II. Programme priorities and partnerships

10. The fifth country programme contributes to the National Development Plan 2030 and its five-year Medium-term Strategic Framework, 2019-2024. The programme directly contributes to Sustainable Development Goals 1, 3, 5, 10, 16 and 17, and is integral to the United Nations Sustainable Development Cooperation Framework, 2020-2025 results. It also contributes to UNFPA Strategic Plan outcomes and transformative results of ending unmet need for family planning, preventable maternal death, gender-based violence and sexual transmission of HIV, and to achieving national commitments to accelerate implementation of the International Conference on Population and Development (ICPD) Programme of Action.

11. The country programme was developed through a consultative multi-stakeholder process led by the Government in collaboration with the United Nations system and other partners. It will prioritize interventions at national with a focus on closing inequality gaps at provincial levels in the Eastern Cape, Kwa-Zulu Natal and Limpopo, in line with the 2019 presidential integrated districts approach to sustainable development, as endorsed by the Cabinet, local government structures, traditional authorities and President's Coordinating Council.

12. Interventions focus on evidence-based policy dialogue, advocacy and knowledge management to guide scaling-up of best practice models, while targeted capacity development at national and provincial levels will advance reaching those furthest behind. At the national level, focus will be on inclusive policy implementation, targeted programming, development and updating of guidelines, strengthening systems for data disaggregation and enhancement of South-to-South and triangular cooperation. At provincial levels, focus will be on evidence generation and use of disaggregated data to inform targeted policies and scaling up programme implementation.

A. Adolescents and youth

13. *Output 1: Young people in targeted provinces are equipped with knowledge and skills to make informed decisions on sexual and reproductive health and rights, HIV and gender, and actively participate in development.* The programme will focus on: (a) mobilization and engagement with community actors to improve uptake of integrated sexual and reproductive health and rights, HIV and gender-based violence services by young people and key populations; (b) generation of evidence on social determinants to guide targeted actions for young people's well-being and development; (c) institutionalization and scale-up of comprehensive sexuality education for in-school and out-of-school youth, including in higher educational institutions, to improve responsible transition to adulthood and agency; (d) use of innovative social behavioural change communication approaches and platforms to increase knowledge and skills, and promote empowerment of young people and key populations to make informed choices on their sexual and reproductive health and rights and well-being.

14. *Output 2: Strengthened institutional capacity to deliver youth-friendly and integrated sexual and reproductive health and rights, HIV and gender-based violence services at all levels.* UNFPA will support: (a) policy implementation and monitoring of the National Youth Policy 2020-2030; national strategic plan on HIV/AIDS, tuberculosis and sexually transmitted infections; national strategic plan on sex workers and HIV; integrated school health policy and the national adolescent sexual reproductive health and rights framework strategy; (b) promoting inclusion of a comprehensive sexual and reproductive health package, including youth-friendly family planning and maternal health services, within the national health insurance to achieve universal health coverage; (c) streamlining data management and referral systems across sexual and reproductive health and rights, HIV and

gender-based violence service provision platforms; (d) capacity building for the provision of high-quality, integrated adolescent and youth-friendly information and services including sexual and reproductive health, HIV and gender-based violence, and (e) promoting multisectoral partnerships at national and provincial levels, including with civil society and the private sector, to advance youth leadership, asset building and improved livelihoods for young people.

B. Gender equality and women's empowerment

15. *Output 1: Strengthened civil society and community mobilization in targeted provinces to eliminate discriminatory gender and sociocultural norms affecting women and girls.* The programme will prioritize capacity development and mobilization of community actors (civil society, traditional and faith-based leaders, women's organizations, academic institutions) to: (a) promote women's empowerment through social norms changes; (b) prevent stigma and discrimination through positive community actions; (c) strengthen engagement with men and boys to promote gender equality and healthy non-violent masculinities at national and targeted provincial levels, (d) promote civil society participation in multisectoral coordination of interventions on gender equality, elimination of harmful practices, and prevention and response to gender-based violence at national and targeted provinces.

16. *Output 2: Increased multisectoral capacity at national and provincial levels to prevent and respond to gender-based violence.* The programme will contribute to the implementation of multisectoral policies and plans by public and private-sector institutions; including: (a) strengthening the national gender machinery with establishment of the gender-based violence and femicide council, and contributing to the Presidential Emergency Plan on Gender-based Violence, National Strategic Plan on Gender-based Violence and Femicide; (b) supporting generation and analysis of strategic evidence in line with a gender indicator framework including undertaking a national prevalence study to inform rights-based policies, laws and programmes that advance gender equality, prevent and respond to gender-based violence; (c) advocacy and capacity enhancement of policy-makers and programme managers to facilitate gender-responsive planning, budgeting, monitoring and reporting in targeted provinces.

C. Population dynamics

17. *Output 1: Strengthened capacities at national and provincial levels to map, analyse and use disaggregated data on sexual and reproductive health, HIV, gender and youth to improve targeted response to pockets of inequalities.* UNFPA will support: (a) mapping available primary and secondary population data; (b) strengthening generation, analysis and synthesis of data disaggregated by age, sex, disability, and other variables from the 2021 Population and Housing Census and relevant studies; (c) supporting institutional capacity building at provincial level on disaggregated data generation, analysis and use for implementation; (c) advocacy and policy dialogue to improve planning, response and focus on linkages between population dynamics and sustainable development, including migration and climate change; (d) documenting lessons learned from integrated service delivery models in targeted provinces for national scale-up and knowledge sharing; (d) strengthening collaboration on population data generation and analysis to monitor and evaluate sexual and reproductive health and rights interventions at national and provincial levels; and (e) promoting South-South and triangular cooperation on disaggregated data generation and use, leveraging strong statistical systems and knowledge exchange platforms within Southern Africa, and with emerging markets and developing economies.

18. To ensure linkages, the programme will: (a) prioritize availability and use of disaggregated data to identify and target adolescents, young people and women left furthest behind with integrated sexual and reproductive health and rights services; (b) improve gender equality, empowerment and realization of reproductive rights of women and girls by addressing inequitable access to integrated service delivery, (c) empower young people, especially adolescent girls to exercise agency through strengthened institutional capacity for integrated sexual and reproductive health and rights service delivery as well as mutual accountability mechanisms led by civil society and youth to ensure duty bearer actions are responsive to rights-holder needs. Cross-cutting capacity development monitoring, evaluation and reporting will be applicable.

III. Programme and risk management

19. The fifth country programme will be coordinated by the Department of Social Development through a National Coordination Forum, convened with key partners, including youth, at national and targeted provinces.

20. The resource mobilization, partnership and communication plans will be reviewed periodically to ensure responsiveness to prevailing realities, including use of United Nations joint programmes to secure funding from Government, donors and the private sector.

21. The programme will be delivered by UNFPA staff at country level and supported by regional and headquarter offices, including the Middle-Income Technical Hub and Regional Operations Shared Service Centre. A human resources alignment exercise will be undertaken in 2020 to ensure adequate skills mix for effective and efficient programme delivery.

22. The 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

23. The country office will implement the monitoring and evaluation plan, which supports accountability to donors and entrenches ownership of results by the country and beneficiaries. Implementation will comply with the harmonized approach to cash transfers in collaboration with UN agencies, with monitoring and oversight through field visits and spot checks. Cost-efficiencies will be increased through the implementation of the UN business operation strategy.

24. Mid-year and annual review meetings will assess programme implementation and results achieved, and corrective measures will be taken to accelerate achievements of planned results. Evaluations of the Cooperation Framework and the fifth country programme will be conducted, and lessons learned documented to inform successor programmes. UNFPA will regularly monitor and evaluate strategic, sociopolitical, operational and fraud risks, and implement a risk mitigation plan. In consultation with the Government, UNFPA will conduct programme criticality assessments and may reprogramme interventions in response to emerging issues.

RESULTS AND RESOURCES FRAMEWORK FOR SOUTH AFRICA (2020-2024)

| <p>National priorities: Improving education, skills revolution and healthy nation; gender; youth empowerment; well-being and rights; advancing social cohesion and safe communities</p> <p>UNSDCF Outcomes (draft): By 2024, all persons in South Africa: (1) especially girls, vulnerable and marginalized populations enjoy increased social cohesion, freedom from violence and discrimination, and have access to justice and human rights; (2) particularly the vulnerable and marginalized populations have improved health and well-being. By 2024, vulnerable and marginalized communities are more resilient to adverse effects of climate change; by 2024, women and marginalized groups are able to participate meaningfully in decision making processes and access to justice.</p> | | | | |
|---|--|---|---|---|
| UNFPA strategic plan outcome | Country programme outputs | Output indicators, baselines and targets | Partner contributions | Indicative resources |
| <p>Outcome 2: Adolescents and youth</p> <p><u>Outcome indicator(s):</u> Percentage of young people (men and women aged 15-24 years) who correctly identify both ways of preventing sexual transmission of HIV and reject major misconceptions about HIV transmission <i>Baseline: 45.8%; Target: 75%</i></p> <p>Percentage of sexually active young people reporting consistent condom use (with more than one partner) <i>Baseline: 68%; Target: 74%</i></p> <p>Adolescent birth rate <i>Baseline: 71 per 1,000; Target: 35 per 1,000</i></p> | <p><u>Output 1:</u> Young people in targeted provinces are equipped with knowledge and skills to make informed decisions on sexual and reproductive health and rights, HIV and gender; and actively participate in development</p> | <ul style="list-style-type: none"> Number of UNFPA-supported provinces that have a mechanism or strategy in place to deliver out-of-school comprehensive sexuality education in accordance with international standards <i>Baseline: 0; Target: 3</i> Number of adolescent and youth in UNFPA-supported provinces reached with life skills that build their health, social and economic assets, with increased resilience to climate change <i>Baseline: 0; Target: 750,000</i> | Departments of Social Health; Basic Education; Higher Education; Women, Youth and People with Disabilities; Planning, Monitoring and Evaluation; South Africa National AIDS Council; National Youth Development Agency; and United Nations agencies | \$2.1 million (\$1.1 million from regular resources and \$1.0 million from other resources) |
| | <p><u>Output 2:</u> Strengthened institutional capacity to deliver youth-friendly and integrated sexual and reproductive health and rights, HIV and gender-based violence services at all levels</p> | <ul style="list-style-type: none"> Number of adolescents and youth in UNFPA-supported provinces who have utilized integrated sexual and reproductive health, gender-based violence and HIV services <i>Baseline: 0; Target: 600,000</i> Number of facilities that deliver integrated sexual and reproductive health, gender-based violence and HIV services to vulnerable groups in UNFPA-supported provinces <i>Baseline: 14; Target: 40</i> Number of sex workers accessing integrated sexual and reproductive health, gender-based violence and HIV services in UNFPA-supported health facilities in selected provinces <i>Baseline: 3,012; Target: 9,000</i> | Departments of Social Health; Basic Education; Higher Education; Women, Youth and People with Disabilities; Planning, Monitoring and Evaluation; South Africa National AIDS Council; National Youth Development Agency; and United Nations agencies | \$2.2 million (\$0.8 million from regular resources and \$1.4 million from other resources) |
| <p>Outcome 3: Gender equality and women's empowerment</p> <p><u>Outcome indicator(s):</u></p> <ul style="list-style-type: none"> Proportion of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner in | <p><u>Output 1:</u> Strengthened civil society and community mobilization to eliminate discriminatory gender practices and sociocultural norms affecting women and girls</p> | <ul style="list-style-type: none"> Number of civil society organizations mobilized and enabled to contribute to the elimination of discriminatory gender practices and socio-cultural norms affecting women and girls. <i>Baseline: 0; Target: 9</i> Number of UNFPA-supported provinces that have developed advocacy platforms, to eliminate discriminatory gender practices and sociocultural norms that affect women and girls <i>Baseline: 0; Target: 3</i> Proportion of young women and girls in UNFPA-supported provinces with knowledge on their rights and where to report sexual violence <i>Baseline: 0; Target: 30%</i> | Departments of Health; Women, Youth and Persons with Disabilities; Social Development; Education; Eastern Cape, Limpopo and Kwa-Zulu Natal House of Traditional Leaders; UNICEF; UN-Women | \$2.5 million (\$1.5 million from regular resources and \$1.0 million from other resources) |

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|--|---|---|---|--|
| <p>the previous 12 months <i>Baseline: 8%; Target: 4%</i></p> <ul style="list-style-type: none"> • Proportion of women and girls aged 15 years and older subjected to sexual violence by persons other than an intimate partner in the previous 12 months <i>Baseline: 6%; Target: 3%</i> | <p><u>Output 2:</u> Increased multisectoral capacity at national and provincial levels to prevent and respond to gender-based violence</p> | <ul style="list-style-type: none"> • Number of plans, advocacy materials or guidelines developed to support gender-based violence prevention and response <i>Baseline: 0; Target: 25</i> • Number of institutions (civil society, faith-based organizations) supported to develop gender-based violence prevention and response action plans <i>Baseline: 7; Target: 20</i> • Number of health facilities in UNFPA supported provinces capacitated to collect and disseminate disaggregated data on incidence and prevalence of gender-based violence <i>Baseline: 0; Target: 40</i> | <p>Departments of Health; Women, Youth and Persons with Disabilities; Social Development; Education, Eastern Cape, Limpopo and Kwa-Zulu Natal House of Traditional Leaders, UNICEF, UN-Women</p> | <p>\$2.3 million (\$0.8 million from regular resources and \$1.5 million from other resources)</p> |
| <p>Outcome 4: Population dynamics</p> <p><u>Outcome indicator(s):</u></p> <ul style="list-style-type: none"> • Number of government institutions with improved capacity to collect and utilize age and gender-disaggregated data, including data on migration and climate change <i>Baseline: 1; Target: 4</i> | <p><u>Output 1:</u> Strengthened capacities at national and provincial levels to map, analyse and use disaggregated data on sexual and reproductive health, HIV, gender and youth to improve targeted response to pockets of inequalities</p> | <ul style="list-style-type: none"> • Census conducted and results disaggregated by age and sex for each enumeration area are publicly accessible online <i>Baseline: 0; Target: 1</i> • Number of institutions, at national or subnational levels, with strengthened capacity to collect, analyse, synthesis and utilize data on population dynamics, including migration and climate change <i>Baseline: 1; Target: 4</i> • Number of South-South and triangular cooperation interactions/ exchanges supported in the areas of sexual and reproductive health and rights, youth, gender and population dynamics <i>Baseline: 0; Target: 22</i> • Number of advocacy initiatives and knowledge products supported to accelerate implementation of the ICPD Programme of Action <i>Baseline: 0; Target: 10</i> | <p>Departments of Social Development; Higher Education; International Relations; Planning Monitoring and Evaluation; Health; Women, Youth and Persons with Disabilities, Statistics South Africa National Youth Development Agency, International Organization for Migration; International Labour Organization</p> | <p>\$1.2 million from regular resources</p> <hr/> <p>Total for programme coordination and assistance: \$1.0 million from regular resources</p> |