United Nations Population Fund
The UNFPA strategic plan, 2022-2025

Summary

The UNFPA strategic plan, 2022-2025, reaffirms the relevance of the current strategic direction of UNFPA. It calls for urgent action to achieve universal access to sexual and reproductive health, realize reproductive rights for all, and accelerate the implementation of the Programme of Action of the International Conference on Population and Development (ICPD). With this “call to action”, UNFPA contributes directly to the 2030 Agenda for Sustainable Development, in line with the Decade of Action to achieve the Sustainable Development Goals.

The UNFPA strategic plan, 2022-2025, is the second of three consecutive strategic plans leading to 2030. It focuses on critical pathways and the strategies necessary to accelerate the achievement of three transformative results: (a) ending the unmet need for family planning; (b) ending preventable maternal deaths; and (c) ending gender-based violence and harmful practices, including female genital mutilation and child, early and forced marriage. These three transformative results, which UNFPA is committed to achieving, also formed the basis of the current UNFPA strategic plan, 2018-2021, the first of the three strategic plans leading to 2030.

However, the transformative results cannot be achieved at the current rate of progress. The coronavirus disease 2019 (COVID-19) pandemic negatively affected women’s and girls’ access to sexual and reproductive health and reproductive rights, and, in many cases, reversed much of the progress made in recent decades. The pandemic further stalled progress towards achieving the three transformative results.

In response, the UNFPA strategic plan, 2022-2025, calls upon United Nations Member States, organizations and individuals to “build forward better” while emerging from the pandemic, recover the gains lost, and accelerate progress.

The UNFPA strategic plan, 2022-2025, was developed through an extensive consultative process, building on good practices and lessons learned, including during the COVID-19 response. In elaborating its new strategic plan, UNFPA utilized the best available evidence on how to accelerate progress to achieve the three transformative results.

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I. Overview

1. The UNFPA strategic plan, 2022-2025, is a call to action. It builds on the momentum generated by the twenty-fifth anniversary of the International Conference on Population and Development (ICPD25) and calls for urgent interventions to accelerate the implementation of the ICPD Programme of Action and the achievement of the three transformative results: (a) ending the unmet need for family planning; (b) ending preventable maternal deaths; and (c) ending gender-based violence and all harmful practices, including female genital mutilation and child, early and forced marriage. UNFPA committed to achieving these transformative results in its strategic plan, 2018-2021. The new strategic plan, 2022-2025, emphasizes the centrality of data to ensure that evidence-informed actions are taken across the three transformative results.

2. The UNFPA strategic plan, 2022-2025, seeks to ensure that no one is left behind, and calls for protecting and promoting human rights for all, particularly for those left behind. It recognizes the need to transform unequal gender power structures in societies in order to accelerate the achievement of the ICPD Programme of Action and to achieve universal access to sexual and reproductive health and reproductive rights.

3. To support the achievement of the three transformative results, while working effectively and coherently within the overall framework of a reformed United Nations development system, UNFPA must also transform itself. The strategic plan, 2022-2025, therefore, offers a vision of how UNFPA will lead the way forward in addressing gender equality, equity and non-discrimination, empowerment of women and girls, and the pursuit of the realization of sexual and reproductive health and reproductive rights. To achieve this, the UNFPA strategic plan, 2022-2025, also provides a blueprint ensuring that all essential organizational processes of the Fund (policies, programmes, technical support, human resources, resource mobilization, partnerships and communications) fully align with the mission of UNFPA – delivering a world where every pregnancy is wanted, every childbirth is safe, and every young person’s potential is fulfilled.

4. The achievement of the UNFPA strategic plan commitments is essential to achieving the Sustainable Development Goals by 2030. The strategic plan contributes to the achievement of all 17 Sustainable Development Goals, but directly contributes to the following: (a) Goal 3 (ensure healthy lives and promote well-being for all at all ages); (b) Goal 5 (achieve gender equality and empower all women and girls); (c) Goal 10 (reduce inequality within and among countries); (d) Goal 13 (take urgent action to combat climate change and its impacts); (e) Goal 16 (promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels); and (f) Goal 17 (strengthen the means of implementation and revitalize the Global Partnership for Sustainable Development) (see figure 1 below). The strategic plan ultimately contributes to the achievement of Goal 1 (end poverty in all its forms everywhere).
5. The UNFPA strategic plan, 2022-2025, is the second of three consecutive UNFPA strategic plans leading to 2030. It was developed through an extensive consultation process with UNFPA staff, external stakeholders, members of the Executive Board, Member States and other United Nations organizations.

6. The new strategic plan was formulated using the latest available evidence, including that from recent evaluations of UNFPA programmes. It is aligned with the principles of the 2030 Agenda for Sustainable Development, including the centrality of human rights, gender equality, the principle of “leaving no one behind” and partnerships. The plan is also aligned with the United Nations reform efforts and the principles outlined in General Assembly resolution 75/233 on the quadrennial comprehensive policy review of operational activities for development of the United Nations system (hereafter referred to as the 2020 quadrennial comprehensive policy review).

7. The strategic plan, 2018-2021, charted the course to achieve the three transformative results and further advanced the implementation of the ICPD Programme of Action. However, during this period, the world faced a series of challenges, not the least the onset of the COVID-19 pandemic. The strategic plan, 2022-2025, while continuing to advance the ICPD Programme of Action, will concentrate on recovering from the COVID-19 pandemic and restoring the gains lost while accelerating progress towards achieving the three transformative results and the sustainable Development Goals. Doing so requires bold, innovative and proven solutions that build on strategic public and private partnerships and innovative financing approaches that can stand the test of time amid global uncertainties and complex megatrends.

8. Insufficient progress over the next four years will prevent the achievement of the ICPD Programme of Action and the three transformative results by 2030. It will exact an unjust and, indeed, unconscionable toll
on the lives and future of the most vulnerable women, adolescents and youth, and especially adolescent girls. The UNFPA strategic plan, 2022-2025, supports the conviction that universal sexual and reproductive health, the realization of reproductive rights and the three transformative results can only be achieved with an increased focus on protecting and promoting the rights and inclusive participation of women, adolescent and youth as agents of change. This requires accelerated and specific actions across humanitarian and development programming and contributions to social cohesion and peace.

9. UNFPA believes that women-led movements, organizations and initiatives are central to achieving the ICPD Programme of Action, as well as the outcomes of its reviews.\(^1\) In considering the concept of ‘intersectionality’ – when dimensions of race, class, and gender create overlapping and interdependent systems of discrimination or disadvantage – an especially pernicious challenge to realizing the ICPD agenda, UNFPA recognizes the need to transform fundamentally unequal gender power structures, to ensure everyone, everywhere, can exercise bodily autonomy, enjoy their rights and access opportunities free from discrimination, exclusion, and violence, including harmful practices. UNFPA will therefore prioritize funding, programmes and internal resources dedicated to gender equality, women’s rights and leadership, bodily autonomy, inclusive participation, and empowerment.

10. In addition, UNFPA will pursue some key shifts and adopt new ways of doing business in support of its new strategic plan, 2022-2025. These are being summarized in box 1 below.

| Box 1 |
| Key strategic shifts of the UNFPA strategic plan, 2022-2025 |
| (a) Aligning the organizational focus on achieving the three transformative results; |
| (b) Integrating the effects of megatrends, such as climate change, demographic shifts, inequalities and digitalization, into programming; |
| (c) Increasing the focus on “populations left behind”, and emphasizing “reaching those furthest behind first”; |
| (d) Scaling up the provision of high-quality comprehensive sexual and reproductive health information and services, as part of universal health coverage plans; |
| (e) Expanding the humanitarian response capacity to better safeguard the lives of women, adolescents and youth, especially adolescent girls, while also addressing mental health and psychosocial issues; |
| (f) Mainstreaming resilience, prevention, preparedness and early action, and emphasizing the complementarity between humanitarian, development and peace-responsive interventions; |
| (g) Incorporating the multisectoral needs of women, adolescents and youth, and addressing structural inequalities, such as discriminatory gender and social norms, that hinder the achievement of transformative results; |
| (h) Tailoring programmatic and technical assistance to better respond to local contexts through a country office-led process, “within the United Nations family on the ground”; |
| (i) Strengthening the UNFPA normative role in all countries where UNFPA is present; |
| (j) Shifting the focus from funding the ICPD agenda to financing the ICPD agenda; |
| (k) Reinvigorating and expanding partnerships, including those with the private sector, civil society organizations, international financial institutions, academia and media, as well as partnerships through South-South and triangular cooperation; |
| (l) Increasing the focus on joint accountability, in line with United Nations reforms, principles and practices. |

11. In the following sections, this document presents: (a) the context that has informed the formulation of the strategic plan; (b) the expected results; (c) where and how the results will be achieved; (d) the internal UNFPA capacity that will require improvements to achieve the results; (e) the identified risks and mitigation measures; and (f) the monitoring and evaluation of the implementation and achievement of the results of the strategic plan.

\(^1\) The outcome documents of the regional review conferences provide region-specific guidance on population and development for each region that adopted the particular outcome documents.
II. Context

Global trends

12. Humanity has arrived at an inflection point: seismic shifts in climate, demography, inequality and technology are reshaping the world as never before. Intensifying natural disasters, environmental degradation, public health emergencies, such as global pandemics, and conflicts are causing humanitarian catastrophes, disrupting the provision and use of sexual and reproductive health information and services, and leaving women and girls vulnerable to predation, exploitation and violence. These shifts affect the progress and, in some cases, threaten to reverse the gains made towards accelerating the ICPD agenda and the 2030 Agenda for Sustainable Development.

13. The world population is expected to increase by two billion people, from 7.7 billion at present to 9.7 billion in 2050. Countries are demographically more diverse than ever before – with falling fertility rates and large-scale population ageing affecting some countries while relatively higher fertility and emerging youth populations are impacting others. The world is ageing rapidly. People aged 60 and older currently make up 12.3 per cent of the global population; by 2050, that number will rise to almost 22 per cent. While about half of the world’s population lives in countries with below-replacement fertility (2.1 births per woman), in 2019, 33 of the 36 countries or areas that had fertility levels above four births per woman are in sub-Saharan Africa. Demographic structures have profound implications for sustainable development, particularly regarding the abilities of States to provide social protection and health services (including sexual and reproductive health information and services) and secure reproductive rights. Applying a life-course approach is therefore essential to meeting diversified demands and translating demographic dividends into human capital.

14. Approximately 55 per cent of the world’s population lives in towns and cities, with the level of urbanization projected to reach almost 70 per cent by 2050. For many, urbanization has opened opportunities for better health and socioeconomic prosperity but it has also led to the proliferation of slums and informal settlements, which often lack essential services, including sexual and reproductive health care, and effective mechanisms to prevent and respond to gender-based violence. Universal access to sexual and reproductive health and reproductive rights will be critical for addressing urban poverty. With the right urban policies and investments, urbanization has the potential to usher in a new era of well-being and dignity, resource efficiency and inclusive economic growth.

15. Inequalities among and within countries remain a major threat to the achievement of sustainable socioeconomic and human development. While recent trends show progress in reducing poverty, economic forces allocate unprecedented prosperity to a small minority and leave vast numbers behind. Not only are women, adolescents and youth (especially those who are affected by intersectional vulnerabilities due to disability, racism, xenophobia, sexual orientation and gender identity, ethnicity or residency status) excluded from the economic prosperity, they are also barred from human capacity-enhancing opportunities, such as education, health, and digital technology. Moreover, as digitalization yields new opportunities, it also spawns a digital divide that leaves millions unable to access or safely navigate the new technologies. Misinformation, disinformation, cybercrime, and digital violence undermine health and justice institutions and erode public trust, compromising the health and welfare of the marginalized and leaving them further behind in the development process. Rapid advancement in assisted reproductive technologies has created a further divide, advancing reproductive choices for some, but leaving many without access to these life-giving interventions, or placing people at risk of unproven technologies offered without the benefit of regulation or quality assurance.

16. Climate change and other natural disasters pose major threats to achieving the ICPD Programme of Action and the Sustainable Development Goals. Droughts, water insecurity, floods and landslides, severe tropical storms and hurricanes, and protracted humanitarian crises displace millions of people; increase food insecurity and vulnerability to diseases; disrupt the provision and use of services; and lead to an upsurge in gender-based violence. These factors disproportionately affect women and girls, children, older persons and other vulnerable groups. Over half of all maternal deaths occur in humanitarian and fragile settings. Recent trends show an increase in the number and extent of humanitarian emergencies, with the number of people needing humanitarian assistance swelling from 137 million in 2017 to 235 million in
2021. To tackle these trends, it is crucial to prioritize disaster risk preparedness and humanitarian response systems that are flexible, adaptable and resilient to future threats and uncertainties.

17. Yet humanity also finds itself nearer than ever to the goal of achieving sexual and reproductive health and rights for all. Globally, access to modern family planning services has increased – from 73.6 per cent in 2000 to 76.8 per cent in 2020. However, more than 200 million of the 885 million women in developing regions who wished to prevent pregnancy were not using modern contraceptives. Furthermore, the unmet need for contraceptives continues to be highest among adolescents.

18. Maternal deaths declined from 451,000 in 2000 to 295,000 in 2017 – a 38 per cent reduction – while the proportion of women of reproductive age who died due to maternal causes, estimated at 9.2 per cent in 2017, was down by 26.3 per cent since 2000. However, the decline has plateaued in the last five years. Taking effective action to tackle the causes of maternal death, including unsafe abortions and lack of post-abortion care, which caused approximately 13 per cent of these deaths, is also critical.

19. While there has been a steady decline in gender-based violence, the incidence remains alarming. A review of available data from 2000 to 2018 finds an estimated 736 million women – almost 1 in 3 women – have been subjected to intimate partner violence, non-partner sexual violence, or both, at least once during their lifetime. More than 640 million women aged 15 years and older (26 per cent) have been subjected to intimate partner violence.

20. Harmful practices show similar trends. During the last decade, the proportion of young women who were married as children decreased by 15 per cent, from 1 in 4 girls to approximately 1 in 5 girls. Female genital mutilation declined by 25 per cent during the same period. In the 30 countries with nationally representative prevalence data, approximately 1 in 3 girls aged 15-19 years today have undergone the practice, compared to nearly 1 in 2 girls in 2000.

21. However, we cannot ignore the challenges ahead. The current progress is not sufficient to achieve the three transformative results. Moreover, the COVID-19 pandemic has set back the progress made so far. The pandemic, which so far has claimed over 4 million lives and infected more than 185 million people, has exacerbated inequalities; it is projected to push an additional 71 million people into extreme poverty, and has unleashed a shadow pandemic of violence against women and girls. The COVID-19 pandemic has exacted a disproportionately negative toll on women and girls; it has increased female poverty, escalated women’s unpaid care work and disrupted programmes that address gender-based violence and harmful practices. It has also severely affected vulnerable populations, including adolescents and young people, older persons, Afro-descendant and indigenous people, persons with disabilities, and migrants and refugees.

22. UNFPA estimates that the COVID-19 pandemic has disrupted access to family planning services for 12 million additional women. It could cause a one-third reduction in progress towards ending gender-based violence and one-third reduction towards ending female genital mutilation by 2030. Two million female genital mutilation cases could occur over the next decade that would otherwise have been averted, and an additional 13 million child marriages could take place by 2030 that otherwise would have been prevented.

23. Meanwhile, the global capacity to respond to these concerns is at risk. Health systems have been strained, and in some cases, overwhelmed. Many resources for sexual and reproductive health information and care have been redirected; official development assistance for population and development policies and programmes, including sexual and reproductive health programmes, has declined over the last five years and is possibly further jeopardized by global economic constraints.

24. The international development architecture offers opportunities to accelerate progress, as do the 2030 Agenda, the Decade of Action and the United Nations reform process. The momentum generated from ICPD25, which led to over 1,400 voluntary commitments made by Governments, multilateral agencies, civil society organizations, the private sector and many other stakeholders, as well as the 25th anniversary of the adoption of the Beijing Platform of Action in 2020, shows how partnerships can be strengthened and synergies harnessed to confront global challenges.
Lessons learned

25. The evidence, experiences and lessons learned from implementing the UNFPA strategic plan, 2018-2021, and responding to and recovering from the COVID-19 pandemic, provide a firm ground to build on and accelerate universal access to sexual and reproductive health and reproductive rights and the three transformative results. The lessons learned to accelerate progress include:

(a) The collective United Nations development system can open doors for accelerating the three transformative results;

(b) Multisectoral and multi-stakeholder partnerships and ecosystems, including with public and private entities and through South-South and triangular cooperation, are vital to address common challenges;

(c) A development approach that is rooted in respect for fundamental human rights is essential. A human rights-based approach facilitates more effective and equitable responses to address barriers to achieving the transformative results;

(d) A commitment to “leave no one behind” and an emphasis on “reaching the furthest behind first” must be at the core of programming to accelerate progress;

(e) A focus on underlying structural inequalities, gaps and intersectional vulnerability factors that follow people through their life cycles and are transmitted across generations is necessary to reach the furthest behind populations;

(f) Enabling youth leadership and participation accelerates progress;

(g) Improving the integration and quality of care and services at scale improves outcomes in sexual, reproductive, maternal and adolescent health;

(h) Timely, high-quality and disaggregated data are essential for identifying those furthest behind to develop programmes for such populations;

(i) Mainstreaming resilience and strengthening the systems approach to address emergency needs, while simultaneously addressing the root causes of vulnerabilities, are critical for sustainable solutions and progress;

(j) Investments in expanding the capacity of the organization to learn, innovate and adapt, including through digital solutions, can accelerate progress towards the achievement of the three transformative results.

26. Investing in sexual and reproductive health and reproductive rights, gender equality, and the empowerment of women and girls is not only the right thing to do; it is also a prudent investment to make. These investments can yield multiple future social, economic and health benefits to countries and societies and contribute to the eradication of poverty. A UNFPA analysis in 2019 estimated that, beyond the existing investments, additional investments of $222.2 billion are needed between 2020 and 2030 to achieve the three transformative results by 2030. This figure includes $59.9 billion for ending unmet need for family planning; $103.6 billion for ending preventable maternal deaths; and $58.7 billion for ending gender-based violence and harmful practices, including child marriage and female genital mutilation.
III. Expected development results

27. The UNFPA strategic plan, 2022-2025, aims to achieve universal access to sexual and reproductive health and reproductive rights and accelerate the implementation of the ICPD Programme of Action. In achieving these goals, UNFPA will directly contribute to the 2030 Agenda for Sustainable Development – particularly to Sustainable Development Goals 3, 5, 10, 13, 16 and 17, and ultimately to Goal 1 – while aligning with the 2030 Agenda principles of human rights, universality and “leaving no one behind”.

28. The main target groups of the strategic plan are women, adolescents and youth, especially adolescent girls. UNFPA will apply a life-course approach, recognizing that people have different and changing needs throughout their lives as well as intergenerational connectedness. The strategic plan reaffirms the Fund’s commitment to prioritizing gender equality and the empowerment of women and girls, including inclusivity, women’s rights, women’s leadership and bodily autonomy for all.

29. The strategic plan focuses on leaving no one behind and targets the furthest behind first in achieving the results, taking into consideration factors and characteristics often associated with discrimination and exclusion, including (a) gender; (b) age; (c) culture, ethnicity, race, language and religion; (d) disability; (e) location; (f) migration, asylum, refuge and displacement status; (g) key populations; (h) socioeconomic status and related factors; and (i) other factors such as HIV and AIDS. These factors and their impact may vary according to the local context. The strategic plan will also take into account additional specific factors that are relevant in a particular region or country.

30. The UNFPA strategic plan, 2022-2025 will continue to advance efforts to achieve the three transformative results by 2030; it will also, collaboratively with other United Nations organizations and partners, contribute to the achievement of the following three outcomes by 2025:

   Outcome 1: By 2025, the reduction in the unmet need for family planning has accelerated;

   Outcome 2: By 2025, the reduction of preventable maternal deaths has accelerated;

   Outcome 3: By 2025, the reduction in gender-based violence and harmful practices has accelerated.

31. The three outcomes are interconnected. Ending gender-based violence and harmful practices contributes to ending the unmet need for family planning and ending preventable maternal deaths. Ending the unmet need for family planning is critical to ending preventable maternal deaths. Interventions to end preventable maternal deaths and end the unmet need for family planning also contribute to ending gender-based violence.

32. UNFPA will contribute to these three interconnected outcomes by achieving six interconnected outputs. These outputs are (a) policy and accountability; (b) quality of care and services; (c) gender and social norms; (d) population change and data; (e) humanitarian action; and (f) adolescents and youth. All the outputs contribute to the achievement of each outcome; they have a multidimensional, ‘many-to-many’ relationship with these outcomes.

Policy and accountability output

By 2025, improved integration of sexual and reproductive health and reproductive rights, as well as the prevention of and response to gender-based violence and harmful practices, into universal health coverage-related policies and plans, and other relevant laws, policies, plans and accountability frameworks

33. Integrating sexual and reproductive health into national policies and development frameworks increases the chances of a country to commit to the three transformative results in its development actions, including through specific resource allocations, which is critical to accelerating progress. This output involves integrating sexual and reproductive health and reproductive rights, including the three transformative results, into universal health coverage benefit packages, equitable financing schemes, accountability mechanisms, and policies and plans related to primary health care, as the basis for actions to accelerate progress towards good health and the well-being of people. The output also aims to integrate the
three transformative results across multisectoral policies and laws, including policies related to resilience, preparedness and disaster risk reduction.

34. UNFPA will work on this output in collaboration with several United Nations partners, including the World Health Organization (WHO), the United Nations Children’s Fund (UNICEF), the United Nations Entity for Gender Equality and the Empowerment of Women (UN-Women), UNDP, the Office of the United Nations High Commissioner for Human Rights (OHCHR) and the Joint United Nations Programme on HIV/AIDS (UNAIDS).

Quality of care and services output

By 2025, strengthened capacity of systems, institutions and communities to provide high-quality, comprehensive sexual and reproductive health information and services, including supplies, as well as essential services, to address gender-based violence and harmful practices

35. Improving the availability, acceptability, affordability, and quality of services is critical for increasing the utilization of services and, consequently, contributing to accelerating progress towards the three transformative results. This output strengthens health and social protection systems by scaling up: the operationalization of the comprehensive package of sexual and reproductive information and health interventions; services to address gender-based violence and harmful practices, including mental health and psychosocial support, from a life-course approach; and health workforce capacity, competence and availability. With a focus on both the provision and the utilization of high-quality care and services, this output addresses the needs of those left furthest behind, including people with disabilities.

36. UNFPA will work on this output in collaboration with several United Nations organizations, including WHO, UN-Women, UNICEF, UNAIDS, UNDP, the World Food Programme and the United Nations Environment Programme, and with the International Organization for Migration (IOM).

Gender and social norms output

By 2025, strengthened mechanisms and capacities of actors and institutions to address discriminatory gender and social norms to advance gender equality and women’s decision-making

37. Gender and social norms shape women’s voices, rights and decision-making power within their families and societies; they underpin many behaviours and practices that expose women and girls to harmful practices and prevent the use of services that would improve their health or support them realize their rights or safeguard their dignity. Addressing harmful social and gender norms and discrimination will build capacities at individual, community and national levels to address root causes of structural inequalities; empower women, adolescents and youth and those left furthest behind; and promote positive health-seeking behaviours and positive gender and social norms, which all contribute to accelerating progress towards achieving the three transformative results.

38. UNFPA will work on this output in collaboration with several United Nations partners, including UN-Women, UNDP and UNICEF.

Population change and data output

By 2025, strengthened data systems and evidence that take into account population changes and other megatrends (including ageing and climate change), in development policies and programmes, especially those related to sexual and reproductive health and reproductive rights

39. UNFPA recognizes that without disaggregated, high-quality data and evidence, it will not be possible to accelerate the achievement of the three transformative results and the Sustainable Development Goals. Data and evidence are needed across many relevant sectors and for a range of critical policy and programme decisions. These include defining the pace of change required to achieve the three transformative results; identifying populations that are left furthest behind; understanding the challenges and gaps in achieving the transformative results; projecting and operationalizing a pathway to scale up interventions; and evaluating the impact of such interventions.
40. UNFPA will work on this output in collaboration with several United Nations partners, including UNICEF, WHO, UN-Women, UNDP, the United Nations Population Division and United Nations regional bodies.

**Humanitarian action output**

*By 2025, strengthened capacity of critical actors and systems in preparedness, early action and in the provision of life-saving interventions that are timely, integrated, conflict- and climate-sensitive, gender-transformative and peace-responsive*

41. UNFPA is on the ground before, during and after crises. The acceleration of the three transformative results cannot be realized without prioritizing preparedness, early and anticipatory action and the provision of life-saving interventions, focusing on humanitarian, conflict and post-conflict contexts. Under this output, UNFPA, in line with its comparative advantage in promoting the rights and choices of women and girls, will ensure complementarity across its humanitarian, development and peace-responsive efforts.

42. UNFPA will work on this output in collaboration with several United Nations partners, including the United Nations Office for the Coordination of Humanitarian Affairs (OCHA), WHO, UNHCR, UNICEF, WFP, UN-Women, the United Nations Peacebuilding Support Office and UNDP, and with IOM.

**Adolescents and youth output**

*By 2025, strengthened skills and opportunities for adolescents and youth to ensure bodily autonomy, leadership and participation, and to build human capital*

43. Acceleration of the achievement of the ICPD Programme of Action and the three transformative results requires that young people, in particular, young women, realize their rights to make informed choices about their own bodies, their lives and the world they live in. This output will enhance the skills of adolescents and youth and, empower them to make informed decisions about their lives, including their sexual and reproductive health and rights. This output will mitigate adolescents’ risk of embracing harmful behaviours while promoting positive and protective factors that support youth development. It will also promote adolescent and youth participation in development and climate-related processes, humanitarian and peace efforts, with a focus on accelerating the achievement of the three transformative results.

44. UNFPA will work on this output in collaboration with several United Nations partners, including UNICEF, UN-Women, the Office of the Secretary-General’s Envoy on Youth, WHO, the International Labour Organization, UNDP and OHCHR.

45. UNFPA has identified six accelerators to achieve these six interconnected outputs:

   (a) Human rights-based and gender-transformative approaches;
   (b) Innovation and digitalization;
   (c) Partnerships, South-South and triangular cooperation, and financing;
   (d) Data and evidence;
   (e) Leaving no one behind and reaching the furthest behind first;
   (f) Resilience and adaptation, and complementarity among development, humanitarian and peace-responsive efforts.
Figure 2
The “six plus six” output and accelerator framework to accelerate the achievement of the three transformative results

… towards realizing the strategic plan goal of:

Universal access to sexual and reproductive health and reproductive rights, and the acceleration of the implementation of the ICPD Programme of Action

... that contribute to the achievement of the three interconnected outcomes:

| By 2025, the reduction in the unmet need for family planning has accelerated. | By 2025, the reduction of preventable maternal deaths has accelerated. | By 2025, the reduction in gender-based violence and harmful practices has accelerated. |

... to accelerate the achievement of the six interconnected outputs:

| Policy and accountability | Quality of care and services | Gender and social norms | Population change and data | Humanitarian action | Adolescents and youth |

Six accelerators…

| Human rights-based and gender transformative approaches | Innovation and digitalization | Partnerships, South-South and triangular cooperation, and financing | Data and evidence | “Leaving no one behind” and “reaching the furthest behind first” | Resilience and adaptation, and complementarity among development, humanitarian and peace-responsive efforts |

| UNFPA global programme interventions | UNFPA regional programme interventions | UNFPA country programme interventions – aligned with the priorities of the United Nations Sustainable Development Cooperation Frameworks and humanitarian response plans |

46. Paragraphs 47 to 79 explain how UNFPA and its partners can capitalize on the six outputs and the six accelerators to achieve the strategic plan outcomes. Since the three transformative results are interconnected, the proposed pathways of one outcome can be relevant for the other outcomes as well.²

² See annex 2: “Change stories” to accelerate the achievement of the transformative results.
A. Outcome 1: By 2025, the reduction in the unmet need for family planning has accelerated

47. Outcome 1 will focus on accelerating progress toward ending the unmet need for family planning. This outcome directly contributes to achieving Sustainable Development Goal 3 (ensure healthy lives and promote well-being for all at all ages); and Goal 5 (achieve gender equality and empower all women and girls). Specifically, it contributes to target 3.7 (by 2030, ensure universal access to sexual and reproductive health-care services, including family planning, information and education, and the integration of reproductive health into national strategies and programmes) and target 5.6 (by 2030, ensure universal access to sexual and reproductive health and reproductive rights in accordance with the ICPD Programme of Action and the Beijing Platform for Action and the outcome documents of their review conferences). The outcome also contributes to achieving the Global Strategy for Women’s, Children’s and Adolescents’ Health, 2016-2030.

48. The acceleration of the reduction in the unmet need for family planning will not occur unless the following pathways are prioritized: (a) the integration of family planning into sexual and reproductive health and reproductive rights policies and programmes and also the universal health coverage benefit package; (b) investments in human rights-based, people-centred, inclusive and integrated high-quality family-planning services, including products and services that are offered based on informed choice, free from constraints, coercion, discrimination and violence; (c) the strengthening of health data systems; (d) meeting the demand for women’s and young people’s access to family planning services by addressing harmful socio-cultural norms and promoting young peoples’ agency and choice; and (e) the protection and promotion of the rights of individuals and groups furthest behind and those in humanitarian, conflict and post-conflict situations.

49. In the strategic plan, 2022-2025, UNFPA will continue to advocate and support the integration of family planning into reproductive, maternal, newborn, child and adolescent health programmes and policies and accountability mechanisms. UNFPA will support (a) integrating family planning as a core element of the universal health coverage benefit package; (b) supporting policies that facilitate method mix, access and regulatory frameworks; (c) facilitating financial protection arrangements to attain sustainable financing for family planning, including by mobilizing resources domestically; and (d) increasing efforts to strengthen social accountability systems. UNFPA will also expand the leadership and participation of young people in sexual and reproductive health policy development decision-making mechanisms.

50. The discontinuation of contraceptive methods is lower where informed choice, options and access exist. UNFPA will continue to invest in and advocate for people-centred high-quality family-planning services and products to meet the diverse needs of all women, adolescents and youth at facility and community levels. This will be done by focusing on (a) expanding equitable access to high-quality family-planning products and services; (b) expanding method mix and choice; (c) expanding rights-based and skills-based family-planning training to strengthen service provider capacity; and (d) strengthening accountability by increasing client feedback mechanisms.

51. As a result of the lessons learned in the COVID-19 pandemic, UNFPA will scale up self-care interventions related to family planning, and will also support virtual delivery modes, such as mobile learning (m-Learning), to disseminate information and services.

52. As a global leader in supplying quality-assured contraceptives and sexual and reproductive health commodities, UNFPA will focus on strengthening resilient supply chains to reach “the last mile” with contraceptives. UNFPA will strengthen its market intelligence regarding procurement options and capacity and will continue to invest in green procurement practices. The UNFPA Supplies Partnership will continue to be the Fund’s main vehicle to accelerate progress in enhancing the availability of high-quality sexual and reproductive health supplies and medicines in countries with the highest rates of unmet need for family planning.
53. To end the unmet need for family planning by 2030, UNFPA and its partners must address the global humanitarian and fragility landscape. UNFPA will advocate for and leverage the systemic implementation of the updated minimum initial services package, which positions family planning as a life-saving intervention. UNFPA will increase efforts to integrate sexual and reproductive health services, including family planning, into disaster risk-reduction and climate-response strategies, including in national adaptation programmes of action.

54. UNFPA will expand its support for demand-side interventions for family planning, in order to promote health-seeking behaviour. It will achieve this by supporting interventions that empower women and girls to make decisions about their reproductive lives. Besides strengthening the policy environment and scaling up high-quality services and care, UNFPA will (a) continue to support comprehensive sexuality education in schools and out of schools; (b) expand its work with men and boys in promoting positive masculinities, including in support of the use of male methods of contraception; and (c) strengthen partnerships beyond the health sector that include the private sector and civil society actors. UNFPA will also scale up interventions to address discriminatory gender and social norms, stereotypes, practices and power relations hindering family planning, including in low-fertility settings.

55. UNFPA will continue to support the implementation of the 2020 round of population and housing census and strengthen civil registration and vital statistics systems, to generate population data essential for supporting family planning and other sexual and reproductive health services. Similarly, it will support the scaling-up of data in humanitarian settings.

56. The availability and analysis of geo-referenced and disaggregated data are critical for accelerating the progress towards ending the unmet need for family planning and identifying those left behind. UNFPA will strengthen relevant data systems, demand-side research, particularly in rapid urbanization and humanitarian settings, and analytic capacity to better target service delivery. UNFPA will expand the development of evidence-based investment cases to demonstrate the impact of family planning on socio-economic development under different demographic scenarios.

B. Outcome 2: By 2025, the reduction of preventable maternal deaths has accelerated

57. Outcome 2 will focus on accelerating the reduction in preventable maternal deaths by 2025. This outcome will directly contribute to achieving Sustainable Development Goal 3 (ensure healthy lives and promote well-being for all at all ages). It will also contribute to achieving the Global Strategy for Women’s, Children’s and Adolescents’ Health, 2016-2030. Together with its H6 partners (UNAIDS, UNICEF, UN-Women, WHO and the World Bank Group), UNFPA is committed to ending preventable maternal and newborn mortality and morbidity. This outcome will contribute to the achievement of target 3.1 (by 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births) and target 3.7 (by 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes).

58. The acceleration in the reduction of preventable maternal deaths will not be possible unless certain critical pathways are prioritized: (a) integrating sexual and reproductive health and reproductive rights into policies, strategies, plans and equitable financial schemes related to universal health coverage and primary health care; (b) investing in the quality of care of comprehensive sexual and reproductive health interventions, including midwifery; (c) strengthening health data systems; (d) scaling up humanitarian responses and the provision of life-saving sexual and reproductive health services; and (e) improving the skills, knowledge and education of adolescents and youth.

59. UNFPA will strengthen health systems by supporting initiatives that integrate sexual and reproductive health and reproductive rights into universal health coverage benefit packages, financial protection mechanisms and other policies and programmes using a people-centred, human rights-based and life-course approach. This will be achieved by (a) supporting national efforts to review laws and policies on the age of consent to sex, marriage and accessing services; (b) helping to mobilize domestic resources for sexual and reproductive health; (c) developing evidence-based investment cases to demonstrate cost-effectiveness;
d) strengthening the capacity of Governments to exercise leadership and coordination; (e) improving health-system management at subnational levels and ensuring decentralized funding at district and facility levels; (f) integrating sexual and reproductive health and reproductive rights into universal health coverage measurement frameworks, as integral elements of such frameworks; and (g) strengthening accountability mechanisms for high-quality sexual and reproductive health services, including by supporting the participation of those left behind in the design of health policies and programmes.

60. UNFPA will continue to support initiatives to build resilient health systems, in collaboration with WHO. UNFPA will prioritize (a) strengthening national preparedness, anticipatory action and contingency planning; and (b) integrating gender, sexual and reproductive health, and reproductive rights into recovery frameworks and strategies as well as climate policies and programmes. UNFPA will increase its efforts to enhance women’s and young people’s leadership and meaningful engagement on issues related to sexual and reproductive health, gender equality, and peace and climate action.

61. UNFPA will scale up national interventions on equity in access and the quality of comprehensive sexual and reproductive health care by supporting national efforts for scaling up the implementation of the essential sexual and reproductive health package. This includes, inter alia, comprehensive sexuality education; counselling for family planning and contraception; antenatal, childbirth and postnatal care; the prevention and treatment of HIV and other sexually transmitted infections; access to comprehensive post-abortion care;3 counselling and services for sexual health and well-being; detecting, preventing and managing reproductive cancers and other morbidities, such as obstetric fistula; and counselling and treatment services for infertility. UNFPA will continue to lead the global campaign to end fistula by 2030. UNFPA will continue its efforts to ensure the availability of funds for fistula prevention, treatment, social reintegration and advocacy programmes.

62. UNFPA will endeavour to expand the quality of care by (a) strengthening national healthcare facility networks, including for emergency obstetric and newborn care; (b) developing quality of care policies, standards and protocols for all components of the essential package of sexual and reproductive health services; (c) prioritizing primary healthcare delivery systems, in particular in the areas of readiness, functionality, quality, resilience and financing; (d) strengthening health workforce capacity and deployment; and (e) improving the capacity to target and mainstream the rights of the populations furthest behind into policies and accountability mechanisms, technical guidance and support, medical supplies, training and capacity building.

63. The three transformative results will not be achieved without major investments in midwifery. UNFPA will strengthen “thought leadership” in midwifery by creating an enabling environment and prioritizing the professionalization of midwifery and supporting cadres. UNFPA will scale up support for (a) addressing the unmet need in midwifery professionals; (b) licensing and regulating midwives following international standards; (c) supporting the implementation of midwife-led continuity of care models; (d) improving pre-service and in-service education; (e) supporting deployment strategies; and (f) improving psychosocial well-being.

64. To end preventable maternal deaths in humanitarian contexts, besides providing family planning and contraception services, UNFPA will (a) strengthen sexual and reproductive health coordination; (b) improve sexual and reproductive health information management; (c) support maternal deaths audits; and (d) develop investment cases in humanitarian settings.

65. UNFPA will expand innovations in maternal telehealth, self-care and midwifery care through mobile job aids and virtual capacity building. It will seek to ensure that midwifery curricula are increasingly aligned with international standards, along with a regulated and licensed health workforce.

66. UNFPA will strengthen health-seeking behaviours and the utilization of services by women, adolescents and youth, including adolescent girls. It will support interventions to promote positive masculinities to transform existing norms and to create an enabling environment that encourages men’s and boys’ supportive and respectful engagement with women and girls, thus reinforcing changes to the underlying negative and discriminatory social structures, policies, practices and social norms that

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3 Support in this area will be in line with WHO guidance and consistent with paragraph 8.25 of the ICPD Programme of Action.
perpetuate gender inequalities, including in the health system. UNFPA will strengthen linkages between community and health facilities, including by strengthening the outreach of sexual and reproductive health services support to referral mechanisms and community participation in health governance.

67. UNFPA will strengthen the availability and utilization of high-quality, routine facility-based sexual, reproductive, maternal, newborn and adolescent health data, as well as data from call centres, youth centres and mobile healthcare units to improve the quality of care. By generating and combining population, health and facility data, UNFPA will be able to (a) develop sexual and reproductive health coverage and financial protection indices and (b) identify vulnerable populations with inequities in access to comprehensive sexual and reproductive health and reproductive rights information and services.

C. Outcome 3: By 2025, the reduction in gender-based violence and harmful practices has accelerated

68. Outcome 3 will seek to end gender-based violence and harmful practices by 2030. This outcome responds to Sustainable Development Goal 5, target 5.2 (eliminate all forms of violence against women and girls in public and private spheres, including trafficking and sexual and other types of exploitation) and target 5.3 (eliminate all harmful practices, such as child, early and forced marriage, and female genital mutilation).

69. UNFPA recognizes that gender-based violence and harmful practices against women and girls are violations of human rights and preclude women and girls from exercising agency. Therefore, the promotion of gender equality and the empowerment of women and girls requires a transformation of social and gender norms, power relations and the realization of human rights.

70. UNFPA will continue to pursue, together with UNICEF, its commitment to ending child marriage and female genital mutilation, through their joint programmes on ending these harmful practices. Together with United Nations organizations and partners, UNFPA will support the Spotlight Initiative, a global, multi-year partnership that seeks to eliminate all forms of violence against women. UNFPA will also continue to lead efforts to end ‘son preference’, gender-based sex selection and other harmful practices.

71. The 2021 evaluation of UNFPA support to gender equality and the empowerment of women and girls (2012-2020) identified the strategic directions necessary for ending gender-based violence and harmful practices. UNFPA learned that accelerating the reduction of gender-based violence and harmful practices will not be possible unless investments are made in the following critical pathways: (a) strengthening policy, legal and accountability frameworks related to gender-based violence and harmful practices; (b) tackling harmful or discriminatory gender and social norms and stereotypical practices and power relations; (c) scaling up access to high-quality and gender-transformative, survivor-centred essential services; (d) scaling up humanitarian response and the provision of life-saving services, including for mental health and psychosocial support services; (e) improving the agency of adolescents and youth, especially adolescent girls; and (f) increasing the availability and use of data related to gender-based violence and harmful practices.

72. UNFPA will therefore strengthen the integration of prevention and response to gender-based violence and harmful practices into the universal health coverage plans. UNFPA will operationalize a comprehensive vision to institutionalize the accountability towards gender-based violence and harmful practices by (a) supporting interventions to align laws related to gender-based violence and harmful practices with international human rights standards and supporting their implementation; (b) scaling up support to countries to implement relevant recommendations of human rights mechanisms, such as the Convention on the Elimination of All Forms of Discrimination against Women and universal periodic reviews; (c) strengthening civil society organizations and feminist movements; and (d) advocating an increase in resources for the strategies to prevent gender-based violence and harmful practices.

73. UNFPA will scale up efforts to prevent gender-based violence and harmful practices and further reduce the risk of exposure to gender-based violence and harmful practices through all aspects of service provision. UNFPA will expand its programmes to respond to survivors and ensure that perpetrators suffer
consequences for their actions. UNFPA will also enhance the protective dimensions of its response to gender-based violence and harmful practices.

74. UNFPA will strengthen accessibility to multisectoral essential services, including prevention, protection and care related to gender-based violence and harmful practices. UNFPA will also invest in the quality of essential services and equality of access to them by building the capacity of national and local stakeholders, especially women of all ages facing intersecting forms of discrimination who participate in decision-making and the design and implementation of programmes.

75. UNFPA will prioritize interventions that tackle discriminatory gender and social norms to address gender inequality, as this is often the basis for gender-based violence and harmful practices. UNFPA will (a) promote positive masculinities to challenge discriminatory norms; (b) strengthen a range of civil society, feminist, faith-based and grassroots organizations and activists; (c) support feminist movements and assist women’s rights defenders, human rights defenders and young feminist organizations; and (d) engage with the media on these issues.

76. UNFPA will also strengthen the skills and capabilities of all people to exercise their agency and rights, bodily autonomy, decision-making, leadership and self-determination. UNFPA will focus on those furthest behind, including women and girls living in humanitarian, conflict and post-conflict contexts; those with disabilities; Afro-descendent and indigenous women; and those most at risk of violence and discrimination.

77. UNFPA will increase investments in strengthening and using data systems on gender-based violence and harmful practices in both development and humanitarian contexts. This will be achieved by (a) strengthening data on violence-against-women, including through the knOwVAW data initiative; (b) expanding coverage of birth, marriage, divorce and death registration for women and girls through stronger civil registration and vital statistics systems; (c) building national capacity in data disaggregation, analysis, dissemination and utilization, including the use of small-area estimation and geospatial statistics for tracking child, early and forced marriage, female genital mutilation and sex ratios at birth; and (d) increasing data coverage and quality for the Sustainable Development Goal 5, target 5.6 indicators.

78. As the leading United Nations organization coordinating the mitigation of and response to gender-based violence in humanitarian contexts, UNFPA will scale up the provision of life-saving support for survivors, including by providing mental health psychosocial services. It will strengthen its ability and capacity to coordinate the gender-based violence area of responsibility in the Inter-Agency Standing Committee. UNFPA will scale up its human resource capacity to coordinate the area of responsibility on prevention from sexual exploitation and abuse.

79. UNFPA will support feminist movements, with specific attention to youth-led and women-led groups and organizations, to accelerate progress towards ending gender-based violence and harmful practices. UNFPA will also promote the leadership and participation of women-led organizations in developing and implementing strategies for disaster risk reduction and resilience building. UNFPA will also strengthen the capacity of women’s organizations and youth organizations to lead or play a key role in supporting the realization of the strategic plan goal and outcomes amid the diverse humanitarian crises and recovery and post-conflict contexts.

IV. Where and how UNFPA will achieve the results

80. Continuing with “business as usual” will not accelerate efforts towards the achievement of the three transformative results. Instead, UNFPA must also transform how it will deliver on the strategic plan results, building on its core comparative advantages, including (a) its presence in over 150 countries and territories through its global, regional and country programmes; (b) its expert knowledge and experience, acquired over decades of operation, and (c) its unique expertise in providing innovative, evidence-informed and rights-based solutions that cover both normative and operational dimensions, in line with the 2030 Agenda, United Nation reform and 2020 quadrennial comprehensive policy review.
Priority countries to accelerate access to sexual and reproductive health and reproductive rights

81. UNFPA will continue to prioritize programme countries to accelerate the achievement of the three transformative results. This means retaining its global presence through 119 country programmes, two multi-country programmes, six regional programmes and one global programme to support programme countries in completing the “unfinished business” of the ICPD Programme of Action and contributing to the 2030 Agenda for Sustainable Development. Enormous work related to the UNFPA mandate and mission, including the three transformative results, remains to be done in programme countries before the 2030 Agenda on Sustainable Development can be realized.

82. Under the strategic plan, 2022-2025, UNFPA will prioritize support to countries furthest from achieving the three transformative results, while supporting all programme countries to accelerate progress through more tailored interventions in advancing the ICPD Programme of Action. Starting with this strategic plan, UNFPA will classify programme countries into three tiers, based on whether they reach or exceed thresholds relating to the three transformative results. The indicators used for classifying 119 programme countries (except for the small island developing States) into three tiers are as follows: (a) the need for family planning satisfied with modern methods; (b) the maternal mortality ratio; and (c) the gender inequality index (see table 1 below). The 36 small island developing States are covered by two multi-country programmes: 14 in the Pacific and 22 in the Caribbean.

<table>
<thead>
<tr>
<th>Transformative result</th>
<th>Indicator</th>
<th>Threshold (based on desired progress by 2030)</th>
<th>Value</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ending the unmet need for family planning</td>
<td>Need for family planning satisfied with modern methods</td>
<td>75 per cent</td>
<td>World Contraceptive Use, 2019, states that a family planning need “exceeding 75 per cent is generally considered high”</td>
<td></td>
</tr>
<tr>
<td>Ending preventable maternal deaths</td>
<td>Maternal mortality ratio</td>
<td>70 per 100,000 live births</td>
<td>Sustainable Development Goal 3, target 3.1</td>
<td></td>
</tr>
<tr>
<td>Ending gender-based violence and harmful practices, including female genital mutilation and child, early and forced marriage</td>
<td>Gender inequality index</td>
<td>0.3 (1=inequal; 0=equal)</td>
<td>The Human Development Report, 2019, uses 0.3 as the gender inequality index for countries with high human development</td>
<td></td>
</tr>
</tbody>
</table>

83. Using the most recent data from the United Nations Population Division, UNDP and WHO for the indicators in table 1 above, the 119 UNFPA country programmes (excluding multi-country programmes) are classified as follows:

Tier I. The 54 programme countries in this tier have not met any of the three indicator thresholds in table 1;

Tier II. The 35 programme countries in this tier have met only one of the three indicator thresholds in table 1;

Tier III. The 30 programme countries in this tier have met at least two of the three indicator thresholds in table 1.

84. UNFPA will prioritize countries in tier I, including 39 least developed countries and 15 landlocked developing countries. UNFPA will also prioritize countries in humanitarian and post-humanitarian settings since the three transformative results cannot be achieved without addressing the situations in these settings.
UNFPA will increase its support to small island developing States and multi-country offices, given their particular vulnerabilities and the impact of the COVID-19 pandemic. This particular prioritization responds to the 2020 quadrennial comprehensive policy review and aligns with the Istanbul Programme of Action, the Vienna Programme of Action and the SIDS Accelerated Modalities of Action (SAMOA) Pathway.

The new resource allocation system

85. UNFPA will allocate nearly three-quarters (approximately 74 per cent, or $3,844.7 million) of projected UNFPA available resources for 2022-2025 to country programmes. This amount includes regular resources of $815.5 million, which represent the foundation for countries to accelerate the implementation of the ICPD Programme of Action and achieve the three transformative results. The resource allocations detailed in the following paragraphs refer only to regular resources that UNFPA distributes among 121 country programmes, which includes the two multi-country programmes in the Pacific and the Caribbean.

86. The regular programmatic resources are allocated to countries through a new UNFPA resource allocation system. It involves two major steps:

Step 1: Determine the floor. This refers to the minimum amount a country office receives for programme support and, in particular, for the normative role of UNFPA (such as policy advice, advocacy, knowledge management, managing strategic partnerships and data analytics);

Step 2: Allocate the remaining regular resources based on the criteria set in the resource allocation system. This ensures that most resources are allocated to countries with the highest needs and that are furthest behind in reaching the three transformative results.

87. UNFPA thus takes a new “three-dimensions, two-adjustments and one-floor” approach. That means that the total regular resources a country receives depends on three key dimensions, adjusted for population size and income, and builds on an equal floor amount of $500,000 per country programme.4

   (a) The three dimensions are (i) distance from reaching the three transformative results, measured by the need for family planning satisfied, the maternal mortality ratio and the gender inequality index, respectively; (ii) health inequality (measured by disability-adjusted life years), which is a measure of global disease burden due to maternal mortality and morbidity; and (iii) vulnerability, measured by the INFORM risk index (a global, open-source measure of risk, vulnerability and coping capacity for natural and human-made disasters);

   (b) The two adjustments are (i) total female population aged 10-24 years, to reflect population size; and (ii) gross national income in purchasing power parity per capita, to capture the average income level, a proxy that reflects people’s living standards among countries.

   (c) The uniform $500,000 floor per country programme provides the minimum essential support for the normative role for upstream intervention, high-level technical assistance and support for policy implementation, including bringing together knowledge and expertise from within the United Nations development system and facilitating South-South and triangular cooperation.

88. During the four years of the strategic plan, UNFPA will ensure that 60 per cent of regular resources for country programmes are allocated to tier I countries. UNFPA will also increase the resources available for the two multi-country programmes in the Pacific and the Caribbean subregions, and plans to establish a funding modality to mobilize non-core resources for these small island developing States, in line with the United Nations reform provisions to expand the possibilities for partnerships.

89. To increase public, private, domestic and other resources for population and development programming in programme countries, UNFPA plans to set aside $5 million annually for the next four years, out of the total of $815.5 million in regular resources, to create a strategic investment facility. The strategic investment facility, which will be available to all programme countries, will support leveraging and catalysing resource mobilization and help to unlock additional domestic and international public and

4 The resource allocation system in effect since 2013 applies two different floors: (a) $500,000 for UNFPA offices in low and lower-middle income countries; (b) $300,000 for UNFPA offices in upper-middle or high income countries. With the Executive Board endorsement of the UNFPA strategic plan, 2022-2025, the new resource allocation system would take effect in January 2022.
private financing, for accelerating the implementation of the ICPD Programme of Action and achieving the three transformative results by 2030.

**Modes of engagement**

90. When it comes to the modes of engagement through which support is provided, one of the main lessons learned is that “business as usual” and top-down approaches are no longer an option. UNFPA will continue to offer its five modes of engagement – (a) advocacy and policy dialogue and support; (b) knowledge management; (c) capacity development; (d) service delivery; and (e) coordination, partnership and South-South and triangular cooperation. However, the Fund will now decentralize the determination of these modes of engagement, moving from a centrally-defined determination to a country-led determination of the modes of engagement required to achieve the desired results in a programme country. This more tailored approach will allow UNFPA to provide more customized solutions that respond to local realities and priorities, including emerging challenges, such as low fertility, ageing, climate change and people on the move, and could lead to innovative solutions that would also have the most impact on accelerating the three transformative results. UNFPA aims to remain agile and relevant by leveraging its environment scanning and adapting to a range of diverse country contexts and needs.

**V. Organizational effectiveness and efficiency**

91. Transforming the world also requires reinvigorating, reimagining and transforming UNFPA, in line with a reformed United Nations development system. The development landscape in which UNFPA operates continually evolves, with advances in technology growing exponentially and affecting the lives of human beings more than ever before. Complex global challenges, such as climate change, demographic shifts and the COVID-19 pandemic, have threatened development gains and require UNFPA to continue to evolve and adapt.

92. To address the needs of a world emerging from the COVID-19 pandemic, UNFPA must transform itself into an organization that is more agile, more flexible and more innovative; an organization that attracts and retains high-calibre staff with the right skills; one that constantly expands its pool of donors and partners; and one that is capable of new ways of doing business with a range of public and private partners. UNFPA will therefore build on the change management exercise that it recently undertook to achieve the three transformative results. UNFPA will strengthen and, where necessary, harness capacities to improve its programming for results, enhance its management of resources, continue to invest in human resources and expand its partnerships to become ‘fit for purpose’ and capable of leading on the global transformative agenda.

**Improved programming for results**

93. UNFPA will enhance the quality of its programming by ensuring that the next generation of programmes articulate and implement the transformative ambition of the new strategic plan and support the acceleration of the three transformative results. UNFPA will revise its programming process to (a) strengthen quality assurance and accountability to ensure that its programmes focus on acceleration while responding to local priorities; (b) apply social and environmental standards and safeguards; (c) scale up volunteerism; and (d) utilize robust and accurate results and resource planning approaches that support acceleration, adaptation and resilience. UNFPA will continue to develop country programmes that are closely aligned with the priorities of the United Nations Sustainable Development Cooperation Frameworks, in line with the United Nations reforms.

94. UNFPA will strengthen results-based management, focusing on collective accountability for results and emphasizing learning and adaptive management. It will strengthen peer-to-peer support in results-based management; strengthen knowledge management; and build capacity in scenario planning as part of larger organization-wide efforts to strengthen resilience and remain ‘fit for purpose’. UNFPA will pursue evaluation designs that maximize organizational learning and strengthen its capacity in human rights-based, gender-responsive and disability-inclusive evaluations. UNFPA will also operationalize an adaptive management framework during the strategic plan period.
95. UNFPA programmes will continue to promote gender equality and empowerment of all women and girls by enhancing and accelerating gender mainstreaming by fully implementing the United Nations System-wide Action Plan on Gender Equality and the Empowerment of Women and by working across sectors. The Fund will support women’s movements and other human rights defenders, including grassroots organizations, as a core element of its programming.

96. UNFPA will institute measures to leave no one behind. It will continue to build in-house expertise and promote inclusive practices to accelerate the mainstreaming of disability into UNFPA programming and operations, including by providing more accessible facilities and information. UNFPA will use a marker to track financial resources used to prioritize leaving no one behind.

97. UNFPA will step up engagement with adolescents and young people, guided by the system-wide requirements defined in Youth 2030: the United Nations Youth Strategy. UNFPA will analyse and track the inclusion of youth issues into country programmes and human resource initiatives, including through training and by empowering young professionals internally to foster multigenerational leadership.

98. UNFPA will enhance its internal supply-chain management capabilities, particularly for humanitarian supplies, by creating a supply-chain management unit that is more responsive to programmatic needs to deliver quality-assured supplies to “last-mile” beneficiaries on time.

99. UNFPA will manage risk and strengthen the capacity of implementing partners to support more cost-effective programme delivery. In line with the United Nations Secretary General’s efficiency agenda, UNFPA will report yearly operational efficiency gains from the United Nations reform efforts.

100. UNFPA will build staff capacity in field offices on South-South and triangular cooperation and will improve the mechanisms used to measure such cooperation.

101. UNFPA will harness innovation to meet tomorrow’s challenges and boost its impact, especially in addressing furthest behind populations, and leverage opportunities, social capital, funding and technology by (a) strengthening the corporate innovation architecture and capabilities, (b) scaling up innovations that have proven to be effective and impactful, (c) forming new partnerships and connecting with relevant innovation ecosystems, (d) strengthening and leveraging financing for innovation, and (e) expanding communities and culture for innovation.

**Optimized management of resources**

102. UNFPA will deploy its talent efficiently and effectively, placing the right people with the right skills in the right place at the right time. It will align its strategic staffing to enhance its ability to respond to humanitarian situations and bring in new skills through careful recruitment and internal development. It will transform the UNFPA personnel, through capacity building, hiring and career development, so that it can successfully meet the agenda. To this end, UNFPA will (a) enhance strategic staffing and global mobility policies, practices and tools and streamline recruitment; (b) emphasize equitable representation, fair treatment, equal opportunity and foster a sense of belonging for all employees; (c) promote a corporate culture that embodies the organization’s mission and values, embraces inclusion, enhances trust, supports innovation and accepts accountability; (d) continue to provide duty of care and promote the mental health and well-being of its staff; and (e) develop strong human resources analytics for making timely decisions based on reliable evidence.

103. In response to the changing funding structure of UNFPA, marked by an increasing proportion of non-core resources, it is vital to integrate resource planning and budgeting at UNFPA; this requires improving coordination and consolidating resource management functions. Furthermore, in line with the principles of the 2020 quadrennial comprehensive policy review, reaffirming the principle of full cost recovery, UNFPA will strengthen its capacity to prepare clear and fully costed programme funding proposals.

104. UNFPA will adapt its processes and procedures to attain operational agility with accountability for results and resources. UNFPA will also improve its operational capacity to respond rapidly to emergencies, focusing on preparedness and anticipatory action, and to deliver at scale, with clear accountability lines. UNFPA will (a) improve its supply chain management, forecasting and prepositioning; (b) streamline and speed up recruitment processes, particularly in emergency settings; (c) implement rapid and efficient surge deployments; (d) build stronger data systems for more responsive programming, results-monitoring and
improved accountability to affected populations; and (e) focus on all humanitarian needs related to sexual and reproductive health, reproductive rights and gender-based violence, as part of its efforts to achieve and sustain the three transformative results and contribute to the Sustainable Development Goals.

105. UNFPA will fully implement the information and communication technologies transformation project. The enterprise resource planning system, the project's main component, will provide user-friendly systems to support streamlined processes and advance more effective programme delivery while also strengthening cybersecurity.

106. UNFPA will strengthen its enterprise risk management to a higher maturity level, following the reference maturity model for risk management of the High-level Committee on Management and the benchmarks included in the enterprise risk management report of the Joint Inspection Unit. UNFPA will achieve this by (a) operationalizing a new enterprise risk management policy; (b) enhancing the risk management framework and updating its risk appetite statement; and (c) improving system functionalities so that they will include automated preventive controls, business intelligence features and data-driven monitoring capabilities.

107. UNFPA is committed to mainstreaming social and environmental sustainability in programming, preventing pollution, reducing the environmental footprint of its programmes and operations, and pursuing climate neutrality, as part of the United Nations Strategy for Sustainability Management, 2020-2030. Accordingly, UNFPA will continue to implement (a) its environmental efficiency strategy to reduce its environmental footprint; and (b) its social and environmental standards to ensure that there is no inadvertent harm to people and the environment caused by its programming.

**Expanded partnerships for impact**

108. UNFPA will expand its multi-stakeholder partnerships and innovative collaborations for impact. Partnerships are at the centre of acceleration toward the 2030 Agenda for Sustainable Development and UNFPA recognizes that strengthening its strategic engagement with a broader network of public and private stakeholders at all levels is key to contributing to transformative social movements, building on the voluntary national commitments made in the context of ICPD25.

109. UNFPA will continue to support and improve system-wide coherence and collaboration and capitalize on the United Nations reform as an enabler and opportunity to deliver on the strategic plan. In line with the 2020 quadrennial comprehensive policy review – and against the backdrop of the COVID-19 pandemic – UNFPA is committed to providing integrated policy and programmatic support to accelerate the implementation of the Sustainable Development Goals during the Decade of Action.

110. UNFPA will also continue to implement its victim-centred strategy on protection from sexual exploitation, abuse and harassment. This will be done across four pillars: (a) management and coordination, (b) prevention, (c) enforcement; and (d) assistance. Activities will focus primarily on strengthening country-level capacity to improve effectiveness, accountability and coherence. UNFPA will further continue to provide leadership in system-wide efforts as the lead agency in the gender-based violence area of responsibility.

111. UNFPA will develop and expand new collaborations with traditional and non-traditional partners, including the general public. Having learned from the successful partnerships formed in the context of the COVID-19 pandemic, UNFPA will expand outreach and engage with actors outside of its traditional orbits and connect with corporate, philanthropic, innovation and scientific actors within larger ecosystems of partnerships. UNFPA will also strengthen alliances with a range of international, regional and national development organizations and financial institutions, youth networks, social movements and women’s groups. UNFPA will reinforce its partnerships with faith-based organizations and with religious and traditional leaders, scale up South-South and triangular cooperation and expand humanitarian partnerships to enhance its operational and logistic capacity and widen its reach. UNFPA will also continue to invest in the UNFPA Individual Giving Programme to expand fund-raising from the general public.

112. UNFPA will continue to expand its donor and contribution base to diversify predictable and flexible funding modalities and increase co-financing through its thematic funding mechanisms. UNFPA has made progress in generating revenue from sources other than the direct contributions from traditional donors.
Investments in the management of public-sector partnerships and associated resources remain critical to expanding and diversifying the volume and modalities of UNFPA revenue. Such investments, in turn, also help to support countries in generating their financing streams and introducing innovation in areas central to the mandate of UNFPA. The importance of these kinds of investment will only increase within the context of United Nations reform and the Decade of Action, particularly in making global investment cases for the three transformative results as well as in costing ambitious UNFPA programming in an array of intervention areas.

113. Communication is critical to accelerating the achievement of the three transformative results. During the four years of the strategic plan, UNFPA will scale up implementation of its new communication strategy to better position the UNFPA brand to engage stakeholders and key audiences and encourage them to advocate on behalf of UNFPA. This “audience-first” approach seeks to shape the communication environment through greater influence and expanded communication partnerships that stimulate dialogue and drive change on the ground in humanitarian and development contexts.

VI. Anticipated risks and measures to mitigate risks

114. UNFPA has identified two types of risks: (a) programmatic risks; and (b) operational environment risks. Both can hamper the achievement of the strategic plan results.

115. Programmatic risks include (a) insufficient investments in strengthening physical infrastructure; (b) interventions for the economic empowerment of women and young people that have not been scaled up; (c) increased trends in non-communicable diseases such as cancers of the reproductive organs; (d) insufficient investments in the education of young people, mainly adolescent girls; and (e) widespread low nutrient intake for women and young people. UNFPA will develop and participate in more joint initiatives with United Nations organizations and other entities that work in these areas to mitigate these risks.

116. Operational environment risks include (a) opposition, false narratives and counter-movements to expanding sexual and reproductive health and reproductive rights services; (b) reduced domestic resources and declining levels of official development assistance or humanitarian assistance; (c) increased humanitarian needs due to increasingly protracted crises, including those related to conflict and climate change; (d) a shrinking space for civil society action; and (e) hostility to women and young people as human rights defenders or participants in social movements.

117. To mitigate these risks, UNFPA will (a) scale up its advocacy and communications initiatives; (b) promote a multisectoral approach towards achievement of the three transformative results; (c) innovate partnerships and resource mobilization strategies; and (d) expand and mainstream resilience, preparedness and early action in programmes, communications and operations in all country contexts worldwide.

VII. Tracking progress towards achieving the strategic plan results

118. The monitoring and evaluation of the strategic plan will focus on tracking and assessing the progress made towards achieving the three transformative results, as well as learning from successes and failures in the process, including performance against the strategic plan on innovative and enduring solutions for accelerating the progress. The UNFPA strategic plan monitoring and evaluation priorities will include:

(a) Monitoring outcome-level and impact-level indicators to measure progress and acceleration towards achieving the three transformative results. UNFPA will support joint monitoring and evaluation approaches and efforts with partner United Nations organizations with whom it shares collective outcome-level and impact-level indicators;

(b) Strengthening the capacity of UNFPA staff and supporting joint monitoring and evaluation of the United Nations Sustainable Development Cooperation Frameworks, in line with the United Nations reforms; and relying on the systems and frameworks of the United Nations Development Coordination Office to track several organizational effectiveness and efficiency-related indicators, including those for the 2020 quadrennial comprehensive policy review;
(c) Monitoring the assumptions of the strategic plan and the risks it faces, including financing risks, particularly related to resource gaps for achieving the three transformative results;

(d) Sourcing data from existing national systems as much as possible, and set up the UNFPA monitoring systems to interface and support the exchange of monitoring data and information with United Nations systems, such as UN INFO (the planning, monitoring and reporting system of the United Nations Development Coordination Office that tracks how the United Nations system at the country level supports Governments to achieve the Sustainable Development Goals);

(e) Emphasizing and promoting real-time monitoring to provide decision-making data for learning, adaptive management and resilient and agile programming that – amid changing context, including humanitarian emergencies – focuses on achieving the three transformative results.

(f) Reporting annually on progress towards achieving the strategic plan results, and continuing to harmonize methodologies with other United Nations organizations and the United Nations development system for assessing and reporting on progress in achieving shared results, especially results related to the Sustainable Development Goals;

(g) Reporting annually on the progress towards achieving the strategic plan results, and continuing to harmonize tools and methodologies with other United Nations organizations and the United Nations development system to report on progress;

(h) Conducting a summative evaluation of the strategic plan, and relying on thematic evaluations, country programme evaluations, internal assessments and annual reports to conduct a midterm review of the strategic plan.

VIII. Resources required for realizing the “call to action”

119. The UNFPA strategic plan, 2022-2025, calls upon the global community to act, work together and secure the investment needed for scaling up innovative and impactful interventions to accelerate the ICPD Programme of Action and achieve the three transformative results. It calls upon the global community, Governments, civil society and the private sector to raise an additional $222 billion between 2021 and 2030 to cover the resource gap of the investment needed to achieve the three transformative results by 2030.

120. To advance this “call to action”, UNFPA is committed to achieving six outputs presented in this new strategic plan. UNFPA estimates, based on conservative income projections, that $5.171 billion will be available for its work on these six outputs over the four years of the strategic plan, 2022-2025. However, the resources needed to achieve these outputs at a scale that would significantly accelerate progress toward the three transformative results are much higher: for the four years of the strategic plan, these are estimated at $6.7 billion, based on a more modest scenario, and $10.9 billion, based on a more ambitious scenario.

121. UNFPA will ramp up resource mobilization efforts to cover the gap between the estimated available resources and the estimated need. UNFPA will also direct a higher proportion of its resources (40 per cent) towards achieving the unmet need for family planning since UNFPA has the primary responsibility in this area. UNFPA will direct about 35 per cent of its resources towards preventable maternal deaths and the remaining 25 per cent of resources toward ending gender-based violence and harmful practices since UNFPA collaborates with many other partners to accelerate progress in these two areas.

IX. Elements of a decision

122. The Executive Board may wish to:

(a) Take note of the UNFPA strategic plan, 2022-2025 (contained in document DP/FPA/2021/8), and its annexes (available on the UNFPA website);

(b) Note with appreciation the transparent and consultative process undertaken by UNFPA in developing its new strategic plan;
(c) Welcome the efforts undertaken by UNFPA to align its strategic plan with General Assembly resolution 75/233 on the 2020 quadrennial comprehensive policy review of operational activities for development of the United Nations system;

(d) Endorse the UNFPA strategic plan, 2022-2025, and request UNFPA to provide updated baselines and targets for the integrated results and resources framework of the new strategic plan at the annual session of the Executive Board in 2022.