



Summary

The global interventions action plan outlines UNFPA global interventions support to the strategic plan, 2018-2021, drawing on the comparative advantages and strengths of the organization at the global level.

The purpose of the global interventions is to complement and catalyse in-country and regional interventions, and to ensure cohesion across interventions at the country, regional and global levels. The global interventions action plan, 2018-2021, is based on analytical work that was undertaken during the course of development of the strategic plan, 2018-2021, including analysis of the external and internal environments, lessons learned from the mid-term review of the strategic plan, 2014-2017, evaluation of its architecture, and an in-depth review of each of the key thematic areas. The global interventions in 2018-2021 will remain grounded in this logic, using the strategic plan, 2018-2021, as their guiding framework. Global interventions are geared towards enabling countries and regional offices to deliver on the 2030 Agenda for Sustainable Development and the agenda of the International Conference on Population and Development. This action plan outlines the role that the global interventions will play in creating the enabling environment in support of the four outcome areas of the strategic plan, 2018-2021. To support organizational effectiveness and efficiency, the global interventions will focus on improving programming for results; optimizing management of resources; strengthening system-wide results, coordination and coherence; and enhancing communication for impact, resource mobilization and partnerships.

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I. Situation analysis

1. The Sustainable Development Goals, as set out in the 2030 Agenda for Sustainable Development, elaborate a universal, integrated and equality-focused sustainable development agenda, representing a major shift from the sector-driven approach of the Millennium Development Goals. The 2030 Agenda for Sustainable Development is people-centred with a view to achieve sustainable development through economic, social and environmental dimensions, and address the unfinished business of the MDGs.

2. The International Conference on Population and Development Beyond 2014 Review underscored the vision and values of the Programme of Action of the International Conference on Population and Development (ICPD), which is based on the premise that individual human rights and capabilities are the foundation for achieving collective sustainable development. The ICPD Beyond 2014 Review put forward equality and human rights as fundamental and cross-cutting components—both centrepieces of the 2030 Agenda for Sustainable Development. While poverty reduction remains a priority focus of the agenda, the Sustainable Development Goals delve into root causes of poverty and deprivation by addressing inequality of opportunities and outcomes, as well as myriad factors that increase exclusion, marginalization and undermine the fulfilment of human rights. The Sustainable Development Goals provide a comprehensive vision of development priorities grounded in human rights, of which sexual and reproductive health and rights are an indivisible part, making clear that the 2030 Agenda for Sustainable Development will not be achieved without the universal fulfilment of sexual and reproductive health and rights.

3. The global interventions, 2018-2021, focus on ensuring leadership and strategic direction such that the Programme of Action of the ICPD and the 2030 Agenda for Sustainable Development are firmly placed in the frameworks for global development, humanitarian action and sustaining peace. Addressing inequalities and discrimination is central to the mandate of UNFPA, and is embedded in the UNFPA strategic plan, 2018-2021, including through its principle goal: to achieve universal access to sexual and reproductive health, realize reproductive rights, and reduce maternal mortality to accelerate progress on the Programme of Action of the ICPD, to improve the lives of women, adolescents and youth, enabled by population dynamics, human rights and gender equality.

4. Although many countries have made progress towards the MDGs, not all population groups have benefited from this progress. Recognizing this challenge, the Sustainable Development Goals place an emphasis on reducing inequalities. Success in completing the unfinished agenda and reducing inequalities calls for a focus on the “furthest behind”. In many cases, women, adolescents and youth are the “furthest behind”. They face heightened risks of human rights violations, including gender-based violence, harmful and coercive practices and discrimination. The most vulnerable and/or marginalized women and adolescents have limited or no access to sexual and reproductive health or to quality education. These risks are heightened in humanitarian contexts, where women and adolescents face even more difficult circumstances. Of the more than 125 million people requiring humanitarian assistance in 2016, over 30 million were women and adolescent girls of reproductive age between 15 and 49. Furthermore, 40 per cent of the 1.4 billion people living in states impacted by crises are under the age of 15, and adolescents aged 10 to 19 years constitute a significant proportion of the population in many conflict and post-conflict settings.

5. Despite increasing economic growth in the last decade, resulting in significant advances in development, disparities remain both within and among countries in the Global South in areas related to the Framework of Actions for the follow-up to the Programme of Action of the International Conference on Population and Development Beyond 2014 and the Sustainable Development Goals. While traditional development cooperation remains critical to address these gaps, there is also an accumulated experience and expertise in the Global South that can be accessed through South-South and triangular cooperation to address institutional and capacity gaps in other countries facing similar challenges. Demographic knowledge of how many people are alive today and how these numbers will change, how old they are and how age structures will change, where they live and how spatial distribution will change, is essential for people-centred and evidence-based policies.

Without this knowledge, countries will not understand the most basic and ever-changing needs of their populations, and the question of whether policies and programmes are effective in supporting progress toward the development goals will be based on chance, rather than design.

6. This knowledge is also critical for enabling the effective monitoring of the Sustainable Development Goals, particularly Sustainable Development Goals 3 and 5. Of the 230 Sustainable Development Goal indicators, 98 require population data, of which only 41 have internationally accepted standards for measurement and data that are regularly collected by most countries (referred to as Tier I indicators). For 33 Sustainable Development Goal indicators, data collection by most countries is largely irregular (Tier II indicators), and for 21 indicators, international standards do not yet exist and most countries do not regularly collect the data (Tier III indicators). Regional assessments suggest that few developing countries have the capacity to track more than half of the 230 indicators of the Sustainable Development Goals, creating a large divide between aspirations and capabilities for evidence-based policy making.

7. Member States have emphasized the centrality of the Programme of Action of the ICPD to global development, and also expressed concern over its unequal and fragmented progress. Remaining challenges must therefore be addressed comprehensively through collaborative partnerships. Orchestrated opposition, politicization and existing misconceptions about key issues related to the ICPD, such as sexual and reproductive health and rights, have resulted in the need to engage closely with partners at national, regional and global levels to ensure that progress is not eroded. The protracted financial crisis, weak economic recoveries and migratory flows due to crises and conflicts have added to the already uncertain environment.

8. In this context, implementation of the 2030 Agenda for Sustainable Development is an immense developmental challenge. Achievement of the Sustainable Development Goals will cost trillions of \$US. In this context, development assistance will remain critical, especially for the world's least developed countries and for the financing of public goods, but it will not be sufficient to drive progress. Progress will require proactive and innovative solutions.

9. The above unfinished business and persisting ICPD-related challenges call for innovative, proactive and effective global interventions. In order to meet these challenges and drive progress, global interventions must:

- (a) Complement the focus on reducing inequalities between countries by identifying and tackling inequalities within countries and communities, thereby widening the scope of action to include countries at all stages of development. Global interventions will examine the drivers of inequalities and effective solutions, and share this knowledge between countries and regions.
- (b) Improve and increase the systematic collection of data (including population data) to map needs and inequalities, and use these data as demographic intelligence to inform development strategies, policies and programmes.
- (c) Consistently and continuously articulate positioning to promote rights-based policies and increased attention to marginalized population groups, including women and adolescent girls, in the drive to fulfil sexual and reproductive health and reproductive rights.
- (d) Complement resource assistance from official sources with assistance from other sources, including private sources. Moreover, the scale of resources needed is such that innovative financing should be explored to optimally leverage domestic resources.
- (e) Advancing the implementation, follow-up and review of the Programme of Action of the ICPD, including its integration in the 2030 Agenda for Sustainable Development at all levels, through regional and global interagency and Intergovernmental processes.

- (f) Expand and innovate in the area of partnerships, to safeguard the Programme of Action of the ICPD and ensure political and financial support from countries. Partnerships to implement the global agendas, contribute to accountability and protect hard-won rights are also critical at the global, regional and national levels. Strengthening engagement with a broader network of stakeholders, including parliamentarians and civil society at all levels, is key to contribute to the emerging social movements in favour of the Programme of Action of the International Conference on Population and Development.
- (g) Strengthen South-South and triangular cooperation. This can serve as a mechanism to optimize the use of resources at all levels, put in place new modes of engagement, become a concrete tool to bring new opportunities for funding programmes, including via cost-sharing, build new alliances, and expand the exchange of national solutions to achieve common goals across regions.

II. Lessons learned

10. Under the UNFPA Strategic Plan, 2014-2017, the same vision and focus that drove country programmes also drove the global interventions, positioning them as a source of, and a prerequisite for, coherence in programming overall. As such, the vision and strategic focus of the global interventions was inseparable from the stipulations of the strategic plan, 2014-2017, which placed sexual and reproductive health and reproductive rights at the centre of the work of UNFPA. The most recent evaluation on the architecture of the UNFPA strategic plan, 2014-2017, acknowledged the global and regional interventions for 2014-17 to be an improvement when compared to its predecessor, the Global and Regional Programme, with a clearer alignment of the global and regional interventions to the strategic plan; a better definition of recipients of, and needs for, capacity building; and baselines and targets established across all interventions. Global interventions did, however, present some overlaps with indicators assigned at the country and regional levels. Therefore, one of the lessons learned was to better refine and clarify the role and comparative advantage of the global interventions at the indicator level.

11. The global interventions were also subject to findings and recommendations for improvement in thematic evaluations, including those of the 2010 Census Round, adolescents and youth, family planning, among others.

12. The Evaluation of the UNFPA Support to Family Planning (2016) concluded that UNFPA was a leading actor at the global and country level; however, it noted a need to increase the integration of family planning and sexual and reproductive health services, as well as the need for coordinated and evidence-based knowledge to guide regional and country interventions. Finally, it acknowledged the human rights aspects of family planning support, but emphasized the need to increase integration of a human rights-based approach into family planning programmes.

13. The conclusions of the UNFPA-UNICEF Joint Evaluation of the UNFPA-UNICEF Joint Programme on Female Genital Mutilation/Cutting (FGM/C): Accelerating Change (2013), presented to the Executive Board in January 2014, noted that the joint programme on female genital mutilation showed significant strengths, including its emphasis on pursuing a holistic and culturally sensitive approach to addressing female genital mutilation, and its emphasis on addressing global, national, and local levels simultaneously. Available evidence supports several of the key assumptions shaping the underlying theory of change of the joint programme, but also highlights knowledge and evidence gaps with regard to the transition from changes in female genital mutilation-related social norms to visible changes in individual and collective behaviours and, eventually, changes in prevalence of female genital mutilation.

14. Lessons learned from implementation of the global interventions, 2014-2017, showed that in order to increase availability and use of family planning, maternal health and HIV/sexually transmitted infection (STI) prevention services at service delivery points, a solid base of suppliers of sexual and reproductive health commodities must be available.

This can only be supported if there is an expanded source of suppliers, along with availability of quality-assessed reproductive health commodities for procurement.

15. With regard to strengthening enabling environments for the regulation of condoms, experiences with Member States has shown that availability and access to sexual and reproductive health commodities is linked to quality and regulatory systems in the countries. Therefore, the use of inconsistent quality control testing standards, and the use of different, and in some cases, inapplicable standards, negatively impacts access and availability of sexual and reproductive health commodities in countries.

16. The Evaluation of UNFPA support to population and housing census data to inform decision-making and policy formulation (2016) noted that despite being a key partner in census support, UNFPA needs to consolidate its position and expand support to the full potential of census data, by strengthening its work on increasing the use of data for policy and programming.

17. The Evaluation of UNFPA Support to Adolescents and Youth (2016) found that UNFPA is a champion for adolescent girls, and has sharpened its focus and attention on their diverse needs. While UNFPA has positioned itself strategically to support adolescents and youth, it needs to build on this by increasing the use of data for evidence-based programming, with a particular focus on helping countries identify and address the needs of the most marginalized or vulnerable adolescents and youth, including in humanitarian contexts.

18. The High-Level Panel on Humanitarian Financing Report to the United Nations Secretary-General, *Too important to fail- addressing the humanitarian financing gap* (2016), pointed out that a 'resilience-based' approach that transcends the humanitarian-development divide is necessary for finding sustainable solutions to crises and recurrent vulnerability and fragility. A more flexible, multi-year funding approach that enables fluidity between phases of response, and makes sexual and reproductive health financing available to conflict-affected and non-conflict affected countries alike, can help ensure transition from relief to sustainable development. UNFPA recognize that crises will continue to occur and acute needs will always need to be met. However, a fundamental shift is required from reacting to disasters and conflicts as they unfold and sometimes linger for decades, towards: (a) sustaining peace in conflict settings; (b) prevention and mitigation of conflicts; (c) investment in disaster risk reduction, preparedness and resilience; and (d) empowerment of individuals and communities to withstand crises and disasters and recover from them.

In addition to the above, UNFPA has learned that:

- (a) Integration of different areas of work is critical and requires focus and investment. The global interventions have enabled the organization to be a pioneer of integrated approaches to global health and development. At the same time, shrinking resources have made maximizing synergies ever more critical. Significant progress was made in recent years through the adoption of priorities that cut across different areas of work. One example of such an integrated approach is the demographic dividend, which has provided a unifying framework within the context of population and development work of UNFPA, by demonstrating that investments in health, adolescent and youth empowerment, gender equality and population data can advance sustainable development. The advocacy efforts for investments in the health and well-being of women, girls, adolescents, and youth made over time through initiatives supported by UNFPA have resulted in increased country demands for policy guidance and technical support on how to harness the demographic dividend.
- (b) Ambitious targets require investment in transformational partnerships and innovation. Innovation is becoming a critical component of United Nations programmes. The Innovation Initiative at UNFPA started with the establishment of the Innovation Fund in 2014 and following its first two years of implementation, the Innovation Initiative has undergone an evaluation and is currently being reoriented towards focusing on overcoming programmatic bottlenecks through innovative partnerships and strengthening internal innovation capacity. The vision is to

inclusively create and scale-up data-driven, sustainable and open solutions that accelerate the achievement of transformative results in the lives of women, girls, adolescents and youth.

- (c) South-South and triangular cooperation can play a catalytic role. Evidence gathered through the assessment conducted by the South-South and triangular cooperation project shows that some developing countries have seen significant progress, through the adoption of laws, policies and programmes pertaining to access to sexual and reproductive health services, and the empowerment of adolescent and young girls, youth, and excluded populations, including at community level. However, imbalances are evident and a systematic field-based approach would support country programme commitments to reinforce national institutional capacity, accelerate progress on the Programme of Action of the ICPD, and achieve the 2030 Agenda for Sustainable Development, “leaving no one behind”.
- (d) External evaluations of the advocacy programme with parliamentarians and civil society in donor countries have revealed strong evidence that:
- (e) UNFPA has been effective in creating a conducive environment for advocating for the Programme of Action of the International Conference on Population and Development in donor countries, despite financial and political challenges. Donor country parliamentarians and non-governmental organizations have successfully contributed to several policy initiatives in support of the Programme of Action of the ICPD at the Council of Europe and the European Parliament, and countered hostile activities with coordinated action between European and national levels during the implementation of global interventions, 2014-2017.

III. Proposed global interventions, 2018-2021

19. In addition to the delivery of resources, UNFPA is increasingly delivering more expertise and insight. This is in line with the expectations of a growing number of countries that are willing and able to use their own financial resources for their development programmes, including in the areas of sexual and reproductive health, gender equality and population and development, but are looking for policy guidance, technical assistance and collaboration. The global interventions action plan is critical to allow UNFPA to play this role.

20. Strongly anchored in the 2030 Agenda for Sustainable Development and in the Framework of Actions for the follow-up to the Programme of Action of the International Conference on Population and Development Beyond 2014, the global interventions action plan, 2018-2021, focuses on support for the implementation of the UNFPA strategic plan, 2018-2021. The global interventions provide leadership for the development of knowledge products and services ensuring that advocacy, policy dialogue and technical assistance are strongly grounded in evidence and supported by state-of-art theory, which in turn contributes to the development of technically sound policies, programmes and projects.

21. The strong engagement in upstream policy dialogue and policy-making processes at the global level is another critical function conducted by global interventions to ensure the Programme of Action of the ICPD is firmly placed within global policy discussions on sustainable development. The focus of global interventions will be on shaping major global partnerships, processes, standards and norms, and supporting regional and country offices in their engagement in policy dialogue, advocacy, knowledge management and service delivery. This function is key for global interventions to guide partners and relevant actors on key trends and gaps for the accomplishment of the Programme of Action of the ICPD and the Sustainable Development Goals, as well as delivery of Commitments to Action of the World Humanitarian Summit and Sendai Framework for Disaster Risk Reduction.

22. Finally, global interventions also provide technical assistance to country and regional offices for the implementation of the strategic plan, as well as capacity building support for humanitarian action. This support is accompanied by strategies to ensure that critical

knowledge is decentralized within the organization and strengthens country and regional capacities to deliver on the UNFPA mandate.

23. Advancing the achievement of strategic plan outcome 1, “Every woman, adolescent and youth everywhere, especially those furthest behind, has utilized integrated sexual and reproductive health services and exercised reproductive rights, free of coercion, discrimination and violence,” the global interventions will focus on providing technical leadership to advance and strengthen the generation and management of state-of-the-art knowledge on sexual and reproductive health and population and development within a global technical network. The global interventions will also prioritize translating state-of-the-art technical knowledge into strategies, policies and operational tools to support country offices to integrate the Programme of Action of the ICPD into development agendas, policy dialogue and effective programmes, including supporting United Nations processes within the new aid environment.

24. The global interventions will provide qualitative and quantitative evidence to overcome inequities in accessing integrated sexual and reproductive health services and information, including in humanitarian settings. In order to prioritize sexual and reproductive health information and services for those left “furthest behind”, global and regional inter-governmental policies and strategies must be negotiated such that all stakeholders share a sense of ownership. Due to the scale of the issues and resource gaps, critical partnerships will be maintained and new ones forged to secure the required technical expertise, innovation, financing and domestic funding.

25. Specific areas of technical expertise including innovative financing, resilient health systems, midwifery and supply chains to deliver sexual and reproductive health and rights, including family planning, to the last mile will receive special attention.

26. To contribute to the achievement of outputs under the first outcome of the strategic plan, global interventions will ensure the availability of guidelines and tools designed for civil society to advocate for and engage in evidence-based policy dialogue for improving quality and equity of integrated sexual and reproductive health and rights services, including family planning and the prevention of sexually transmitted infections, such as HIV/AIDS. Global interventions also will provide support for countries to respond comprehensively to the sexual and reproductive health and rights needs of women, girls, adolescents and youth in crisis, including for delivering and implementing the minimum initial service package and strengthening cooperation and complementarity among development, humanitarian action and sustaining peace. Humanitarian action will need to move from repeated short-term interventions toward contributing to longer-term development by investing in preparedness, disaster risk reduction and resilience gains.

27. Given the UNFPA leadership on sexual and reproductive health in humanitarian contexts, the global interventions will support implementation of the minimum initial service package, including through establishing sexual and reproductive health humanitarian coordination in countries facing emergencies, provision of sexual and reproductive health commodities and supplies, strengthening surge capacities, and ensuring timely deployment at the onset of an emergency, to support country-level humanitarian response.

28. Advancing the achievement of strategic plan outcome 2, “Every adolescent and youth, in particular adolescent girls, is empowered to have access to sexual and reproductive health and reproductive rights, in all contexts,” the global interventions will focus on generating evidence-based knowledge to ensure that: (a) the determinants of adolescent and youth sexual and reproductive health and rights, particularly for adolescent girls, are identified; and (b) investment cases are recognized and integrated as priorities in national development plans and pillars for building the human capital of countries. Issues related to youth and adolescents will frame the demographic dividend in a way that captures the many facets of today’s global age structures, in both developed and developing countries. Partnerships will be critical to advancing the integration of these issues in global agendas and inter-agency platforms on youth, e.g. the System-Wide Action Plan and the United Nations Inter-Agency Network on Youth Development.

29. UNFPA acknowledges the positive role that young people play in rebuilding their communities after natural disasters and conflict situations, serving as levers for sustained

peace between communities and countries, and driving technology and connectivity. Evidence will be collected to inform youth engagement in humanitarian settings and sustaining peace initiatives, as well as UNFPA leadership of the Compact for Young People in Humanitarian Action.

30. Advancing the achievement of strategic plan outcome 3, “Gender equality, the empowerment of all women and girls, and reproductive rights are advanced in development and humanitarian settings,” the global interventions will focus on the following strategies:

- (a) Generate evidence-based knowledge and guidance on accountability frameworks, including international human rights mechanisms, national institutions and laws, to advance gender equality and women’s empowerment;
- (b) Ensure the availability of research and guidance on addressing the specific needs of individuals and groups most marginalised in terms of access to sexual and reproductive health and rights, including persons with disabilities, indigenous groups, and migrants;
- (c) Generate knowledge on emerging issues and broader factors for promoting gender equality and reproductive rights, including free, prior and informed consent, the linkages between reproductive rights and women’s economic empowerment, and engaging men and boys;
- (d) Partner with a broad range of stakeholders including civil society organizations and faith-based organizations to strengthen accountability mechanisms and accelerate progress towards abandonment of gender-based harmful practices.
- (e) Facilitate the provision of technical assistance and capacity development on evidence-based interventions to accelerate progress in women’s empowerment and reproductive rights.

31. The aim of these strategies will be to generate knowledge and research on trends, including analysis of prevalence rates and social drivers, contributing factors, and good practices to accelerate progress in the elimination of gender-based harmful practices, with a focus on child, early and forced marriage, female genital mutilation and son preference. This will include greater understanding of how gender, social, and cultural norms operate at different levels, to promote abandonment of gender-based harmful practices, including the measurement of social and cultural norm change and operational guidance.

32. Given the UNFPA leadership on gender-based violence in humanitarian contexts, the global interventions will support establishing humanitarian coordination of gender-based violence prevention and response in countries facing emergencies, strengthen surge capacities, and ensure timely deployment at the onset of an emergency, to support country-level humanitarian response.

33. Advancing towards the achievement of strategic plan outcome 4, “Everyone, everywhere, is counted, and accounted for, in the pursuit of sustainable development”, the global interventions will draw on the thought leadership of UNFPA on persisting and emerging demographic and development challenges. The provision of demographic intelligence will focus on how population changes affect sustainable development, including the implementation of the 2030 Agenda for Sustainable Development and progress towards the Sustainable Development Goals, and how demographic change is, in turn, shaped by development and rights-based policies. Global interventions will include the roll-out of population data platforms, tools and analyses to inform programming and policy development at the global, regional and country level. Interventions will also focus on the integration of data from different sources (censuses, humanitarian needs assessments, civil registration and vital statistics systems and household surveys) to support analysis, visualization and mapping of needs, including in humanitarian settings.

34. UNFPA will continue to lead and support discussions at all levels on the demographic dividend, population aging and fertility decline, and to convene major stakeholders in these areas with a view to promote common, coherent and rights-based policies and programmes.

35. Technical and evidence-based support will be provided to intergovernmental and interagency processes on the effect of sexual and reproductive health and rights, adolescents and youth, gender equality and women's empowerment, and demographic change on development priorities and objectives. Interventions will facilitate and advocate for support from parliamentarians and civil society for the implementation of the Programme of Action of the ICPD and the 2030 Agenda for Sustainable Development.

36. Finally, global interventions will include technical assistance to countries with regard to census: to improve national data systems, to strengthen capacities to collect, disaggregate, monitor and use UNFPA-priority Sustainable Development Goals, and to integrate demographic analysis in their development strategies, policies and programmes.

37. To support achievement of organizational effectiveness and efficiency, output 1, "Improved programming for results," the global interventions will focus on the following strategic areas of work:

- (a) Piloting, refining and scaling up innovative products, services and processes that contribute to the achievement of strategic plan outcomes 1, 2, 3 and 4 through expanded partnerships and strengthened communities of practice;
- (b) Mainstreaming South-South and triangular cooperation as an integral part of the UNFPA business model to consolidate and strengthen institutional capacities of regional and country offices to implement the Programme of Action of the ICPD and the Sustainable Development Goals;
- (c) Strengthening organizational capacities for gender mainstreaming and accountability mechanisms (United Nations System-Wide Policy on Gender Equality and the Empowerment of Women 2.0, gender marker and gender scorecard, *inter alia*), as well as implementation of the System-wide action plan for ensuring a coherent approach to achieving the ends of the United Nations Declaration on the Rights of Indigenous Peoples.

38. To support the achievement of organizational effectiveness and efficiency output 2, "Optimized management of resources", the global interventions will support the development of communities of practice across institutional units and geographic spaces to address resource constraints and better leverage human and financial resources to ensure a coherent, timely, and effective support to countries and other stakeholders.

39. To support the achievement of organizational effectiveness and efficiency output three, "Increased contribution to the United Nations system-wide results, coordination and coherence," the global interventions will focus on the following strategies:

- (a) Regularly engage in and support inter-agency mechanisms with a view to promoting a coherent and comprehensive approach in strategy and operations, including on issues related to the Programme of Action of the ICPD;
- (b) Manage the collaboration, harmonization and alignment of joint programmes, thematic trust funds and global initiatives related to the Programme of Action of the ICPD, e.g. the UNAIDS joint programme and the H6 Global Financing Facility.

40. To support the achievement of the organizational effectiveness and efficiency output 4, "Enhanced communication, resource mobilization and partnerships for impact," the following strategic interventions will be deployed at the global level:

- (a) Cooperate with traditional and non-traditional partners for the identification of key development challenges, as well as designing concrete, actionable solutions;
- (b) Engage on technical issues with major funders (e.g. Global Fund, The United States President's Emergency Plan for AIDS Relief), towards shaping policies and strategies;
- (c) Drive innovations in resource mobilization with traditional and non-traditional partners, including through financial platforms and instruments, and face-to-face fundraising activities.

IV. Action plan management, resource mobilization, partnership, monitoring and evaluation

41. The UNFPA Executive Director is ultimately and directly accountable for approval of the plans and delivery of the results of the global and regional interventions. The Executive Committee, led by the Executive Director, is explicitly designated as the decision-making body. A Secretariat for the global and regional interventions, hosted by the Programme Division, has been established to strengthen the overall coordination and management of the global and regional interventions action plans implementation. This body enables the Executive Committee to more effectively monitor and make timely decisions on the global and regional interventions. The Executive Committee makes decisions on resources, which will not be allocated to global interventions without a review of the proposal by the global and regional interventions secretariat.

42. The global interventions will be managed, implemented and monitored by the relevant UNFPA headquarters units. Overall implementation of the global interventions action plan will be coordinated by the global and regional interventions secretariat, whereas the directors of divisions will be responsible for overseeing the development, implementation, monitoring and evaluation of activities of their respective units, ensuring alignment with the UNFPA mandate, strategic plan and internal control and accountability frameworks. Global interventions will allocate resources for staff members to provide technical and programmatic expertise and support to implement the global interventions action plan.

43. The global interventions action plan will be implemented following the UNFPA programme policies and procedures, specifically the workplan policy. Using a results-based management approach, the global interventions action plan will be operationalized through annual work plans that will be implemented both by UNFPA directly and through implementing partners. Programmatic and financial review and revisions will likewise take place on an annual basis. Substantively, units will prepare and report on progress against the quarterly milestones identified in their respective annual results plans throughout the UNFPA “Strategic Information System”, myResults module. These progress updates will be compiled by the global and regional interventions secretariat, synthesized into a separate semi-annual progress report, and presented to the Executive Committee to ensure effective monitoring and timely decision-making on programmatic and financial issues. The monitoring and evaluation of the global interventions will be conducted in accordance with programme monitoring procedures identified in UNFPA programme policies, and following the established evaluation plan.

44. In accordance with the paradigm shift responding to the new aid environment and austerity measures implemented by the organization, global interventions elaborated an innovative and creative resource mobilization plan. In an effort to strengthen relationships with existing donors and to diversify their donor base, global interventions identify new and emerging donors, forge synergies with ongoing and planned initiatives by foundations and the private sector, and highlight opportunities for thematic inter-agency proposal development, *inter alia*. Global interventions seek to capitalize on the unique needs, skills, specificities and landscape of opportunity in the implementation of these strategies. The global interventions resource mobilization activities identified in Annex 3 will focus on the achievement of results of the global interventions action plan.

45. The partnership activities of the global interventions in 2018-2021 will build on the results achieved and lessons learned informed by the evaluation of the architecture of the strategic plan, 2014-2017. Key highlights of the partnership activities are elaborated in Annex 4. Throughout the 2018-2021 programme cycle, global interventions will engage with a wide range traditional and non-traditional partners that include but are not limited to governments, parliamentarians, academia, the Global South, continental technical and political actors, and United Nations partner agencies, among others. The robust and diverse partnership choices reflect objective-driven collaboration and modalities of engagement. The partnership plan includes the following key elements: (a) delivering specific results; (b) a diversified partnership base; (c) engagement of civil society organizations with special attention to those led by marginalized groups; (d) ability to achieve more with less; (e)

opportunities to combine resources and find innovative solutions leveraging unique competencies and achieving win-win outcomes; and (f) objective to tackle intrinsically multi-sectoral challenges.

46. Global interventions will contribute to the alignment of the priorities and resources of the United Nations development system, a harmonization that will facilitate reforms that strengthen results on the ground, increase transparency and accountability, improve intersectoral approaches across the Sustainable Development Goals and ensure that no one is “left behind”. Building on ongoing collaboration among United Nations entities, global interventions will further strengthen inter-agency policy and programming approaches that are truly cross-cutting and able to address complex, multidimensional issues. By designing global and regional plans through a theory of change model, UNFPA will ensure that the work undertaken by the organization is most directly tied to its mandate, address overlap and the duplication of efforts, pool expertise with United Nations partner organizations where it can yield the best results, work together to build stronger partnerships within and outside the United Nations development system; and achieve greater harmonization and efficiencies in both programmes and operations. This may, in turn, facilitate the development of the joint initiatives and programmes around key areas of “collaborative advantage” between two or more organizations with complementary strengths, or across the development system as a whole.

Table 1. Evaluation Plan

Evaluation Title	Purpose of the Evaluation	Timeline (Month, Year)	Estimated Cost (\$)	Source of Funding	Key Evaluation Partners
South-South and triangular cooperation incorporated in UNFPA programming processes	Mid-term evaluation to assess the use of South-South and triangular cooperation initiatives, documenting progress, accomplishments and proposing any necessary adjustments	September, 2019	25,000	Regular resources	Regional Offices Country Offices Programme Division UNFPA National counterparts (Ministries of Foreign Affairs) in selected partner countries Evaluation Office
South-South and triangular cooperation incorporated in UNFPA programming processes	Final evaluation to assess the use of South-South and triangular cooperation initiatives in achieving the global interventions results and the impact/relevance of its use by UNFPA units as a systematic mode of engagement	June, 2021	50,000	Regular resources	Regional Offices Country Offices Programme Division UNFPA National counterparts (Ministries of Foreign Affairs) in selected partner countries Evaluation Office
End of programme cycle evaluation of advocacy with parliamentarians and donor country NGOs	Assess the contribution of this specific component to UNFPA strategic plan outcomes and provide recommendations on structure of future work with NGOs and parliamentarians	December 2020	30,000	Regular resources	Implementing partners
Evaluation of the global action plan reproductive health commodities prequalification	Evaluate the functioning and added value of the prequalification of condoms and IUDs	2019	30,000	Manufacturers' fees	WHO Prequalification WHO Reproductive Health Research The Global Fund

Annex 1. Results and resources framework

UNFPA Strategic Plan 2018-2021 outcomes and outputs	Global Programme 2018-21 output: indicator(s), baseline and yearly targets	Partners	Indicative resources by global interventions, in dollars			
			2018	2019	2020	2021
Outcome 1: Every woman, adolescent and youth everywhere, especially those furthest behind, has utilized integrated sexual and reproductive health services and exercised reproductive rights, free of coercion, discrimination and violence						
		Regular Resources	4,795,713	4,873,252	4,917,357	4,977,229
		Other Resources	3,074,000	3,074,900	3,274,900	4,794,000
Output 1: Enhanced capacities to develop and implement policies, including financial protection mechanisms, that prioritize access to information and services for sexual and reproductive health and reproductive rights for those furthest behind, including in humanitarian settings	<p>1.1 Number of technical guidance, tools and peer-reviewed papers developed and disseminated to support countries to address inequities in access to integrated SRHR Baseline 2017: 4; Target 2021: 20</p> <p>1.2 Number of global intergovernmental processes on SRHR supported by UNFPA that contribute to policies and strategies prioritizing access to quality SRHR information and services by those left furthest behind Baseline 2017: 6; Target 2021: 6</p> <p>1.3 Number of humanitarian and inter-agency health coordination focusing on SRHR information and services supported by UNFPA, that contribute to the implementation of the MISP in humanitarian settings Baseline 2017: 10; Target 2021: 17</p> <p>1.4 Technical guidance developed and disseminated to support countries to develop, implement, and monitor Universal Health Coverage for improving access to quality SRH services, especially by those left furthest behind Baseline 2017: No; Target 2021: Yes</p> <p>1.5 Policy guidance and tools on cash-based interventions for SRH in humanitarian situations developed and disseminated Baseline 2017: No; Target 2021: Yes</p> <p>1.6 Technical guidance developed and disseminated for the integration of SRH into humanitarian response plans Baseline 2017: No; Target 2021: Yes</p>	Regular resources				
			1,490,926	1,507,993	1,545,013	1,562,363
		Other Resources				
			1,000,000	1,000,000	1,000,000	1,000,000

	<p>1.7 Number of global partnerships and technical working groups on SRHR supported to advance the implementation of the SDGs and the operationalization of the Global Strategy for Women’s, Children’s, and Adolescents’ health</p> <p>Baseline 2017: 26; Target 2021: 26</p>									
<p>Output 2: Strengthened capacities to provide high-quality, integrated information and services for family planning, comprehensive maternal health, sexually transmitted infections and HIV, as well as information and services that are responsive to emergencies and fragile contexts</p>	<p>2.1 Number of countries and regional offices trained on HIV prevention implementation tools and HIV-SRHR linkages/integration, including for key populations</p> <p>Baseline 2017: 0; Target 2021: 6 regions</p> <p>2.2 Number of knowledge products developed and operationalized on combination HIV prevention, including condoms, and addressing the needs of young people and key populations</p> <p>Baseline 2017: 4; Target 2021: 20</p> <p>2.3 Number of</p> <p>a) evidence reports/papers developed and published on critical SRH needs focusing on family planning access, supply and demand in fragile and humanitarian settings (Baseline 2017: 1 /target 2021: 5)</p> <p>b) policy guidance tools developed based on the report’s findings (Baseline 2017: 0 / Target 2021: 2)</p> <p>2.4. Number of country and regional offices trained to strengthen capacity of local stakeholders to assess and respond to comprehensive SRH needs in humanitarian settings</p> <p>Baseline 2017: 0; Target 2021: 6 ROs and 50 COs</p> <p>2.5 Number of guidelines developed and tested for addressing SRH needs in the continuum from crisis preparedness, response and recovery to strengthening resilience</p> <p>Baseline 2017: 0; Target 2021: 3</p> <p>2.6 Number of SSTC Initiatives using the new tagging for SSTC in GPS to enhance capacity to deliver quality SRH services, particularly those targeting youth needs, and gender-based violence.</p> <p>Baseline 2017: 0; Target 2021: 10 initiatives</p> <p>2.7 Technical guidance on Emergency Obstetric and Newborn Care</p>	<p>IAWG</p> <p>USAID, BMGF, UNAIDS, WHO, UNDP, UNICEF, IPPF, WB, Gates</p> <p>Federal University of Santa Catarina, Brazil</p> <p>IBSA Fund</p> <p>MOFA of global south partners</p> <p>National Coop. Agencies</p>	<p>Regular Resources</p>				2,004,457	2,033,501	2,022,445	2,052,045
<p>Other Resources</p>				650,000	650,000	850,000	2,370,000			

	<p>(EmONC) developed and disseminated to support countries to strengthen availability and quality of maternal and newborn health services in national EmONC facility networks</p> <p>Baseline 2017: No; Target 2021: Yes</p> <p>2.8 Number of countries supported to monitor maternal and newborn health services, including EmONC indicators, at a national scale</p> <p>Baseline 2017: 6; Target 2021: 15</p> <p>2.9 Number of countries supported for conducting EmONC Needs Assessments, followed by the identification of a national EmONC facility network and the setup of an EmONC monitoring and response system</p> <p>Baseline 2017: 3; Target 2021: 13</p> <p>2.10 Technical support and capacity building provided to regions and countries in support of ensuring quality and human rights-based family planning</p> <p>Baseline 2017: Yes; Target 2021 : Yes</p> <p>2.11 Number of countries supported for the development of a costed, time-bound national strategy in line with the UN goal of ending fistula within a generation</p> <p>Baseline 2017: 22; Target 2021: 34</p> <p>2.12 Number of technical guidance papers and tools developed and disseminated to support countries in implementing and monitoring WHO standards, to improve the quality of SRH services for adolescents and youth</p> <p>Baseline 2017: 1; Target 2021: 3</p> <p>2.13 Number of countries (within GAVI eligible countries) supported for the introduction of the HPV vaccine</p> <p>Baseline 2017: 3; Target: 8</p>		
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Output 3: Strengthened capacities of the health workforce, especially those of midwives, in health management and clinical skills for high-quality and integrated sexual and reproductive health services, including in humanitarian settings	3.1 Revised Global Midwifery Strategy (2017-2030), disseminated and implemented to ensure quality midwifery programmes Baseline 2017: No; Target 2021: Yes	Regular Resources			
		466,202	473,549	485,555	492,384
	3.2 Technical support and guidance provided to enhance the capacities of relevant health cadre to positively work with and meet the needs of adolescents Baseline 2017: No; Target 2021: Yes	Other Resources			
		300,000	300,000	300,000	300,000
	3.3 Number of countries, regional entities and global institutions trained to implement MISP at the onset of a crisis Baseline 2017:55; Target 2021: 80				
	3.4 Number of academic health institutions and academic partners at the global level trained as master trainers on Minimum Initial Service Package Baseline 2017: 8; Target 2021:24				
	3.5 A monitoring tool developed and institutionalized that can capture rapid response in the implementation of the MISP within the 48 and 72 hours of the onset of an emergency Baseline 2017: 0; Target 2021: 1				
	3.6 A monitoring tool that capture the transition from MISP to a comprehensive SRH service delivery system developed Baseline 2017: 0; Target 2021: 1				
	3.7 Proportion/percentage of countries supported to integrate SRH into their disaster risk reduction plans, contingency planning and emergency preparedness and response plans Baseline 2017: 28; Target 2021: 40				
Output 4: Strengthened capacities to effectively forecast, procure, distribute and track the delivery of sexual and reproductive health commodities, ensuring resilient supply chains	4.1 UNFPA supply chain management strategy available and implemented Baseline 2017: No; Target 2021: Yes	Regular Resources			
	Other partners: JSI, FP2020	705,233	721,287	725,377	729,439
	4.2 Number of technical tools and guidance available for strengthened national capacities in establishing a functional LMIS/eLMIS Baseline 2017: 0; Target 2021: 2	Other Resources			
		1,024,000	1,024,900	1,024,900	1,024,000
	4.3 Number of national laboratories trained for compliance with ISO 17025 or updated ISO standard				

	<p>Baseline 2017: 10; Target 2021: 18</p> <p>4.4 Number of countries that are members of the network of laboratories established, to share information on condom quality issues and testing issues</p> <p>Baseline 2017: 1; Target 2021: 16</p> <p>4.5 Number of prequalified male condom manufacturers/ number of prequalified female condoms/ number of prequalified IUDs</p> <p>Baseline 2017: MC: 30 (maintain)/ FC: 5/ IUD: 6 (maintain); Target 2021: MC: 30 (maintain)/ FC: 5/ IUD: 6 (maintain)</p> <p>4.6 Total amount saved through procurement of generic products</p> <p>Baseline 2015: 804,792; Target 2021: 2,500,000)</p> <p>4.6. Percentage (USD value) of contraceptives procured that are generic products</p> <p>Baseline 2015: Implants - 0%; Other Hormonal Contraceptives - 17%; ERH kits - For 18 % of the ERH kits orders lines (excl. those requiring pre-clearance) the time between ATD and PO due date was more than 3 days.</p> <p>Target 2021: Implants: 3%, Other Hormonal Contraceptives - 27%; ERH kits - 10%</p>					
<p>Output 5: Improved domestic accountability mechanisms for sexual and reproductive health and reproductive rights through the involvement of communities and health-system stakeholders at all levels</p>	<p>5.1 Number of countries supported for strengthening the capacity of national health information systems to monitor and disaggregate (e.g., by age) key SRH indicators</p> <p>Baseline 2017: 0; Target 2021: 20</p> <p>5.2 Technical guidance developed and disseminated on community participation, for the development, implementation, and review of SRHR policies and the monitoring of availability and quality of SRH services in health facilities</p> <p>Baseline 2017: No; Target 2021: Yes</p> <p>5.3 Community feedback guidance developed based on the IASC accountability to affected population framework in humanitarian settings to measure satisfaction with the quality of SRH services</p> <p>Baseline 2017: No; Target 2021: Yes</p> <p>5.4 Number of countries supported to develop annual Maternal Death Surveillance and Response (MDSR) reports</p> <p>Baseline 2017: 15; Target 2021: 40</p>	Regular Resources				
		128,895	136,922	138,967	140,998	
		Other Resources				
100,000	100,000	100,000	100,000			

Outcome 2: Every adolescent and youth, in particular adolescent girls, is empowered to have access to sexual and reproductive health and reproductive rights, in all contexts						
		Regular resources	1,340,388	1,367,330	1,391,730	1,420,134
		Other resources	265,000	265,000	265,000	265,000
Output 6: Young people, in particular adolescent girls, have the skills and capabilities to make informed choices about their sexual and reproductive health and rights, and well-being	6.1 ROs and COs trained on young key populations (YKP) SRH programming Baseline 2017: No; Target 2021: Yes 6.2 Number of innovative tools for CSE advocacy developed and/or maintained (Baseline 2017: 1; Target 2021: 5)	Regular Resources				
		Other partners: UNESCO	174,624	178,908	181,843	186,344
		Other Resources				
			265,000	265,000	265,000	265,000
Output 7: Policies and programmes in relevant sectors tackle the determinants of adolescent and youth sexual and reproductive health, development and well-being	7.1 Proportion of requested assistance provided to country offices to develop country-specific Adolescent Investment Cases (Baseline 2017: 0%/ Target 2021: 100%) 7.2 Number of tools, knowledge products and guidance generated and disseminated on the demographic dividend (Baseline 2017: 2/ Target 2021: 6)	Regular Resources				
			887,078	903,310	920,372	937,523
		Other Resources				
Output 8: Young people have opportunities to exercise leadership and participate in sustainable development, humanitarian action and in sustaining peace	8.1 Qualitative and quantitative evidence developed to assess the operationalization of youth engagement in peace and security (Baseline 2017: No/ Target 2021: Yes) 8.2 Progress study on Youth, Peace and Security finalized, and findings disseminated Baseline 2017: No; Target: Yes 8.3 Programming guidance and tools developed to support country and regional offices on best practices on gender and youth-based peacebuilding interventions Baseline 2017: No; Target 2021: Yes	Regular Resources				
		PBSO IFRC	278,686	285,112	289,515	296,267
		Other Resources				

	<p>8.4 Compact for young people in humanitarian action operationalized with a budgeted work plan exists and is implemented</p> <p>Baseline 2017: No/Target 2021: Yes</p> <p>8.5 Guidance for engaging young people in humanitarian action developed</p> <p>Baseline: No; Target: Yes</p>						
Outcome 3: Gender equality, the empowerment of all women and girls, and reproductive rights are advanced in development and humanitarian settings							
			Regular resources	1,605,254	1,628,352	1,668,409	1,687,250
			Other resources	2,265,000	2,265,000	2,265,000	2,265,000
Output 9: Strengthened policy, legal and accountability frameworks to advance gender equality and empower women and girls to exercise their reproductive rights and to be protected from violence and harmful practices	9.1 Number of knowledge products produced and disseminated on emerging issues and linkages between gender equality and reproductive rights (Baseline 2017: 3/ Target: 6)	Regular Resources					
	9.2 Number of published knowledge products, technical guidance, and briefs developed and disseminated on strengthening accountability mechanisms (human rights mechanisms, legal frameworks etc.) Baseline 2017:3/ Target: 6	OHCHR, UN Women	1,129,383	1,144,610	1,172,919	1,185,409	
	9.3 Analysis and guidance on UPR Recommendations developed	Other Resources					
	Baseline 2017: Yes/ Target 2021: Yes		265,000	265,000	265,000	265,000)	
9.4 Number of knowledge products developed on empowering groups furthest left behind in exercising their SRHR, including women and girls, persons with disabilities, indigenous peoples, and migrants							
Baseline 2017: No/ Target Yes							
9.5 Analysis of data from SDG indicators 5.2, 5.3, 5.6.1 & 5.6.2 undertaken/completed. (Baseline 2017: No/ Target: Yes)							
9.6 Engagement with inter-governmental processes, including in partnership with Civil Society Organizations and Faith-Based Organizations to promote the ICPD Beyond 2014 (Baseline 2017: Yes/ Target 2021: Yes)							
9.7 Number of ROs and COs provided with guidance and/or trainings to support the roll-out of national programmes to engage men and boys in							

	<p>support of women’s empowerment, gender equality, GBV, and SRHR Baseline 2017: 0; Target 2021: 10</p> <p>9.8 Number of countries and regional offices trained on applying a human rights-based, gender-transformative, and culturally sensitive approach in the 2030 context (Baseline: No/ Target: Yes)</p>					
Output 10: Strengthened civil society and community mobilization to eliminate discriminatory gender and sociocultural norms affecting women and girls	<p>10.1 Number of technical guidance/resources provided on engaging men and boys for ending GBV (Baseline 2017: 0/ Target 2021: 4)</p> <p>10.2 Guidance on culturally sensitive approaches and engagement of faith-based organizations and community leaders (political, cultural, religious) in support of socio-cultural change and advancement of human rights available. (Baseline 2017: No/ Target 2021: Yes)</p>					
Output 11: Increased multisectoral capacity to prevent and address gender-based violence using a continuum approach in all contexts, with a focus on advocacy, data, health and health systems, psychosocial support and coordination	<p>11.1 Number of technical guidance, knowledge and capacity development products aimed at supporting GBV prevention and response within a continuum approach (Baseline 2017: 0/ Target 2021: 4)</p> <p>11.2 Number of country and regional offices capacitated to implement Essential Service Package for GBV services Baseline 2017: 5; Target 2021:45</p> <p>11.3 Number of knowledge and capacity development products aimed at supporting the integration of GBV into SRH programmes and services Baseline 2017: 0; Target 2021:2</p> <p>11.4 Number of knowledge products and guidance developed, aimed at addressing sexual violence, violence during pregnancy, and violence against most marginalized groups Baseline 2017: 0; Target 2021: 5</p> <p>11.5 Number of countries that are not currently experiencing a humanitarian crisis capacitated to strengthen data collection on GBV, through the implementation of GBV prevalence surveys Baseline 2017: 3; Target:5</p> <p>11.6 Number of inter-governmental processes supported by UNFPA in which GBV is strategically positioned (Baseline 2017: 8/ Target 2021: 16)</p> <p>11.7 Number of policy briefs, web-based resources, and advocacy events produced and/or held (Baseline 2017: 3/ Target 2021: 10)</p>	UN Women	Regular Resources			
			464,371	472,242	483,990	490,341
			Other Resources			
			2,000,000	2,000,000	2,000,000	2,000,000

	<p>11.8 Number of country and regional offices capacitated to implement programmes that prevent and mitigate GBV, and improve the quality of and survivors' access to multi-sector GBV services (Baseline: 30/ target: 75)</p> <p>11.9 Number of countries engaged in humanitarian preparedness, response and the transition to recovery that have aligned their interventions to UNFPA's GBViE Minimum Standards. Baseline 2017: 10; Target 2021: 20</p> <p>11.10 Number of UNFPA COs that have at least one dedicated GBV in Emergencies (GBViE) staff (staff member, consultant, or surge) on board to respond to a crisis (Baseline 2017: 15; Target: 25)</p> <p>11.11 Number of emerging GBViE specialists demonstrating improved knowledge and skills to address GBV during an emergency as a result of UNFPA's interventions (Baseline 2017: 50; Target 2021: 100)</p> <p>11.12 Number of countries implementing an accountability framework for addressing GBV in emergencies that includes engagement of Humanitarian Coordinators and Humanitarian Country Teams Baseline 2017: 0; Target 2021: 8</p>					
<p>Output 12: Strengthened response to eliminate harmful practices, including child, early and forced marriage, female genital mutilation and son preference</p>	<p>12.1 Number of advocacy events at inter-governmental processes to strategically position initiatives against harmful practices Baseline 2017: 0; Target 2021: 10</p> <p>12.2 Number of policy briefs and web-based resources produced on harmful practices (CM, FGM, Son Preference) Baseline 2017: 0; Target 2021: 11</p> <p>12.3 Indicators and tools developed and implemented to establish baselines and measure change in gender, social, and cultural norms related to harmful practices Baseline 2017: No; Target 2021: Yes</p> <p>12.4 Number of countries capacitated on implementation of models for addressing harmful practices Baseline 2017: 0; Target 2021: 44</p> <p>12.5 Technical guidance and models on harmful practices developed and implemented Baseline 2017: 0; Target 2021:3</p> <p>12.6 Technical guidance developed and implemented to support intervention models on engaging men and boys for ending harmful practices Baseline 2017: 0; Target 2021:3</p>	Regular Resources				
		Other partners: UN Women, UNICEF	11,500	11,500	11,500	11,500
		Other Resources				

Outcome 4: Everyone, everywhere, is counted, and accounted for, in the pursuit of sustainable development						
		Regular resources	6,865,908	6,324,737	6,232,048	6,398,628
		Other resources	5,550,000	5,550,000	1,400,000	1,400,000
<p>Output 13: Improved national population data systems to map and address inequalities; to advance the achievement of the Sustainable Development Goals and the commitments of the Programme of Action of the International Conference on Population and Development; and to strengthen interventions in humanitarian crises</p>	<p>13.1 Functioning online population data platform exists (including timely access to data in humanitarian settings) Baseline 2017: No; Target 2021: Yes</p> <p>13.2 Guidelines developed for countries to annually update sub-national population estimates for humanitarian common data set Baseline 2017: No; Target 2021: Yes</p> <p>13.3 Proportion of countries conducting their censuses for which TD provides knowledge and advocacy on geo-referencing and geo-coding of censuses Baseline 2017: 10%; Target 2021: 20%</p> <p>13.4 All requests for innovative censuses methodologies satisfied (Baseline 2017: Yes Target: Yes)</p> <p>13.5 Proportion of countries and regional offices trained to collect, disaggregate and monitor UNFPA-priority SDGs Baseline 2017: 0%; Target 2021: 100%;</p> <p>13.6 Number of countries supported to generate data for SDG indicator 5.6.1 using refined methodology Baseline 2017: 0; Target 2021: 20</p> <p>13.7 Global survey on SDG indicator 5.6.2 undertaken/completed Baseline 2017: No; Target 2021: Yes</p>	Regular Resources				
	Other partners: UNHCR and OCHA	898,643	912,475	933,199	947,915	
	Other Resources					
		5,350,000	5,350,000	1,325,000	1,325,000	
<p>Output 14: Mainstreamed demographic intelligence to improve the responsiveness, targeting and impact of development policies, programmes and advocacy</p>	<p>14.1 Proportion of country and regional offices trained to process, integrate, disseminate and use geo-referenced and geo-coded population data, including for national and sub-national population projections Baseline 2017: 0; Target 2021: 100</p> <p>14.2 Guidelines for vulnerability mapping of populations at district level or below developed Baseline 2017: No; Target 2021: Yes</p>	Regular Resources				
	ELO	5,967,265	5,412,262	5,298,849	5,450,713	

	<p>14.3 Functioning online platform on Demographic Dividend country profiles exists Baseline 2017: No; Target 2021: Yes</p> <p>14.4 Number of key global, regional and national events on the demographic dividend, population ageing and low fertility supported to lead to concrete follow-up action Baseline 2017: 5; Target 2021: 10</p> <p>14.5 Number of knowledge products produced on demographic—development linkages in the context of UNFPA’s mandate. Baseline 2017: 2; Target 2021: 10</p> <p>14.6 Proportion of the principal development strategies of countries that are being developed between 2018-2021 and that include a dedicated section on demographic change Baseline 2017: 0; Target 2021: 50%</p> <p>14.7 Proportion of development strategies of capital cities that are being developed between 2018-2021 and that include a dedicated section on demographic analysis Baseline 2017: 0; Target 2021: 50%</p> <p>14.8 Number of partnerships with population centres established Baseline 2017: 1; Target 2021: 12</p> <p>14.9 Proportion of outcome documents of global and regional intergovernmental processes supported by UNFPA that address ICPD issues and UNFPA priorities in the 2030 Agenda Baseline 2017: 85%; Target 2021: 100%</p> <p>14.10 Proportion of advocacy interventions supported that result in a favourable outcome for UNFPA Baseline 2017: Total interventions for 2017; Target 2018: 100% increase; 50% (2019); 10% (2020); 10% (2021)</p>	Other Resources			
		European Parliamentary Forum on Population and Development (EPF) and other donor country NGOs	200,000	200,000	75,000

Organizational Effectiveness and Efficiency						
		Regular resources	1,731,387	1,873,737	1,661,059	1,672,566
		Other resources	80,000	80,000	80,000	80,000
OEE Output 1: Improved programming for results	<p>OEE1.1 Proportion of UNFPA offices (HQ divisions, regional offices, country offices) that pilot and/or transition to scale innovations with partners Baseline 2017: 0; Target 2021: 4</p> <p>OEE1.2 Number of norms, policies and tools to enhance the implementation of SSTC available Baseline 2017: 1; Target 2021: 5</p> <p>OEE1.3 Proportion of country programmes in which South-South/Triangular Cooperation is utilized within the modes of engagement of at least one outcome, output or indicator Baseline 2017: 21; Target 2021: 35</p> <p>OEE1.4 Number of staff trained on Minimum Preparedness Actions Baseline 2017: 105; Target 2021: 300</p> <p>OEE1.5 Number of organizational tools and guidelines developed and optimized for humanitarian settings (including emergency preparedness and disaster risk reduction) Baseline 2017: 3; Target 2021: 12</p> <p>OEE1.6 Number of COs supported on emergency preparedness Baseline 2017: 50; Target 2021:120</p>	Regular Resources				
		Regional Offices	1,373,889	1,505,413	1,283,097	1,289,539
		Country Offices				
		UNCTs				
		Other Resources				
	80,000	80,000	80,000	80,000		
OEE Output 2: Optimized management of resources	<p>OEE2.1 Proportion of surge requests successfully filled from the total requests received Baseline 2017: 50; Target 2021: 80</p> <p>OEE2.2 Proportion of CO requests for surge deployment satisfied Baseline 2017: 26; Target 2021:40</p>	Regular Resources				
		Other Resources				

OEE Output 3: Increased contribution to United Nations system-wide results, coordination and coherence	<p>OEE 3.1 Proportion of pertinent interagency processes¹ where UNFPA technical teams ensure a focus on UNFPA priorities within strategy documents and operational activities Baseline 2017: 100%; Target 2021: 100%</p> <p>OEE3.2 Percentage of performance indicators of the UN System-wide Action Plan on Gender Equality and the Empowerment of Women (2.0), on which UNFPA meets or exceeds requirement Baseline 2017: 0%; Target 2021: 60%</p> <p>OEE 3.3 Percentage of performance indicators of the UN System-Wide Action Plan (SWAP) on Indigenous Peoples on which UNFPA meets requirement Baseline 2017:0% ; Target 2021: 30%</p>	Regular Resources				
		UNDG, IASC, humanitarian clusters, UNPFII, UNIPP, UNPRPD, ECESA+, SWAPs, Every Woman Every Child, Inter-agency Working Group on Religion and Development, International Partnership on Religion and Sustainable Development (PaRD)				
		Other Resources				
OEE Output 4: Enhanced communication, resource mobilization and partnerships for impact	<p>OEE 4.1 Proportion of strategic plan outputs with at least one partnership where UNFPA technical teams, traditional and non-traditional partners co-create and implement initiatives Baseline 2017: 60%; Target 2021: 100%</p> <p>OEE 4.2 Innovative model for resource mobilization established (Baseline 2017: No/ Target 2021: Yes)</p>	Regular Resources				
			357,498	368,324	377,962	383,027
		Other Resources				
TOTAL						
		Total regular resources	16,338,650	16,067,408	15,870,603	16,155,807
		Total other resources	11,234,000	11,234,900	7,284,900	8,804,000

¹ Interagency processes include UNGD, IASC, humanitarian clusters, UNPFII, UNIPP, UNPRPD, ECESA+, SWAPs, Every Woman Every Child, Inter-agency Working Group on Religion and Development, International Partnership on Religion and Sustainable Development (PaRD)

Annex 2. Theory of change

Introduction

1. The global interventions complement regional and country level interventions and contribute towards the achievement of enabling conditions required to attain the outputs of the UNFPA strategic plan, 2018-2021. They have been formulated within the scope of the outputs of the strategic plan. This annex locates the global interventions within the causal linkages of results, as presented in the theory of change of the strategic plan, 2018-2021. More details on the UNFPA strategic plan, 2018-2021 theory of change can be found in Annex 2 of the strategic plan document.

2. UNFPA relies on a dedicated group of experts with strong expertise in sexual and reproductive health, including for family planning, comprehensive maternal health, and gender-based violence; gender equality; demography; resilience and humanitarian preparedness and response. These experts are part of global interventions.

3. The design of global interventions includes new elements such as evaluation and partnership plans and is opened for the first time for non-core resources to be mobilized by the global interventions action plan to achieve its results. Historically, the scope of global interventions was funded with regular resources only. Audit and evaluation recommendations highlighted the need to identify and quantify supplementary required non-core resources to achieve global interventions' identified results. Initiatives funded by thematic trust funds, tranches of existing funds and co-contributions to multi-year funding frameworks are not part of the global interventions.

4. The results listed in the global interventions action plan will be achieved using the following five key approaches: (a) state-of-the-art knowledge generation, promotion and utilization; (b) promotion of international norms and standards; (c) global partner relation management; (d) global advocacy and intergovernmental policy dialogue; and (e) complementary field support.

5. The theory of change of the strategic plan, 2018-2021 identifies other necessary conditions that are required for the achievement of results, but that will not be directly addressed by UNFPA (referred as critical assumptions). In those cases, the global interventions will coordinate and work with partners to meet those conditions. The partnerships of global interventions will build on the existing effective partnerships with United Nations agencies, bilateral and regional development actors and civil society networks, and build new partnerships to achieve shared results. Detailed information about these partnerships is presented in Annex 4, the Partnership Plan of the global interventions action plan.

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

Output 1: Enhanced capacities to develop and implement policies, including financial protection mechanisms that prioritize access to information and services for sexual and reproductive health and reproductive rights for those furthest behind, including in humanitarian settings

6. The global interventions will contribute towards the achievement of this output by helping foster national ownership and commitment, promoting socio-cultural and gender norms and intersectionality perspectives, advancing critical partnerships and multisectoral collaboration, as well as ensuring availability of all required intervention and service delivery protocols. Specifically, the global interventions will fill in the gaps in qualitative and quantitative evidence necessary to address inequities in access to integrated sexual and reproductive health and reproductive rights by populations left “furthest behind” - including people living in extreme poverty, remote areas and in humanitarian settings. They will lead and support intergovernmental processes, reinforce cooperation including via South-South and triangular cooperation, and engage in critical global partnerships and technical working groups to advance the sexual and reproductive health and reproductive rights agenda as well as contribute to policies and strategies prioritizing access to integrated sexual and reproductive health “to the last mile”. Lastly, the global interventions will address emerging priority sexual and reproductive health needs through specific technical and policy guidance and tools, including the specific needs of subgroups such as adolescents and key populations, as well as technical areas such as innovative financing and cash-based interventions focused on sexual and reproductive health that strengthen the continuum of development, humanitarian action and sustaining peace.

Output 2: Strengthened capacities to provide high-quality, integrated information and services for family planning, comprehensive maternal health, sexually transmitted infections and HIV, as well as information and services that are responsive to emergencies and fragile contexts

7. The global interventions will help foster national ownership and commitment, provide intervention protocols, and promote scale-up of innovative approaches and good practices to enable the achievement of this output. Namely, the global interventions will facilitate, including via South-South and triangular cooperation, national efforts to bridge the gap in evidence on access to family planning, comprehensive maternal health, and sexually transmitted infections and HIV information and services, including in fragile settings. The global interventions will provide technical guidance to enhance country capacities to evaluate needs, develop, implement, and monitor the availability and quality of integrated sexual and reproductive health services, including for adolescents and youth, and covering areas of family planning, comprehensive maternal health services, and prevention of HIV and other sexually transmitted infections. Furthermore, to ensure that health systems are resilient to crises and can continue to provide access to basic and comprehensive care in emergency settings, the global interventions will support country and regional offices in strengthening national health system capacities to mitigate, prepare for and respond to disasters. Lastly, the global interventions will help promote South-South initiatives to generate synergies for the ICPD and the Sustainable Development Goals and facilitate their integration into national development agendas.

Output 3: Strengthened capacities of the health workforce, especially those of midwives, in health management and clinical skills for high-quality and integrated sexual and reproductive health services, including in humanitarian settings

8. The global interventions will foster national ownership and promote multi-sectoral collaboration thereby helping create an enabling environment for the achievement of this output. Namely, the global interventions will contribute to strengthening a healthy workforce, with a specific focus on midwives, including their education aligned to World Health Organization/International Confederation of Midwives standards, regulation and status, and deployment. Technical support and guidance will be provided to enhance the

capacities of relevant health cadres to work positively with and meet the needs of adolescents. The global interventions will foster disaster preparedness by strengthening humanitarian and health actors representing different levels of engagement in their preparedness actions specific to ensuring rapid implementation of Minimum Initial Service Package (MISP) as soon as an emergency strikes. The global interventions will also promote institutionalization of capacity-building for MISP within academic curricula globally to enhance the skill sets of health service providers and train them to implement MISP at the onset of a crisis.

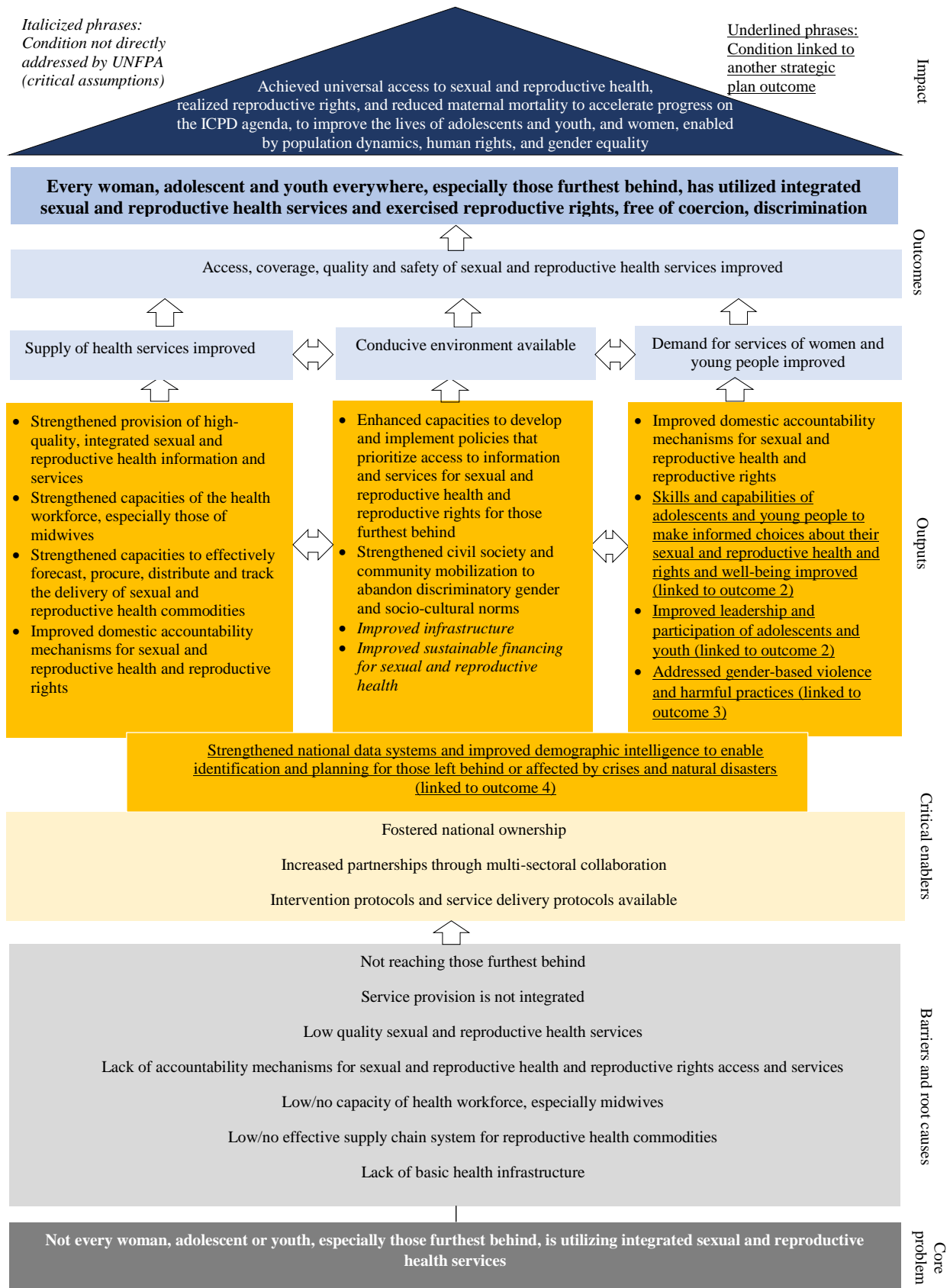
Output 4: Strengthened capacities to effectively forecast, procure, distribute and track the delivery of sexual and reproductive health commodities, ensuring resilient supply chains

9. The global interventions will foster national ownership and multisectoral collaboration that will support the achievement of this output. Namely, the interventions will translate state-of-the-art technical knowledge into strategies, policies, and operational tools to strengthen country capacities for evidence-based supply management with a view to ensuring equitable access to sexual and reproductive health “to the last mile”. They will enhance regional and country capacities to supply quality-assured contraceptives by training national quality control analysts, facilitating dialogue with regulatory agencies, and forging partnerships with pre-qualified condom manufacturers to ensure all procured condoms meet internationally recognized standards. The global interventions will further strengthen country capacities to save costs by fostering procurement of contraceptives that are generic products and to ensure that procurement requests for humanitarian commodities are fulfilled within lead time.

Output 5: Improved domestic accountability mechanisms for sexual and reproductive health and reproductive rights through the involvement of communities and health-system stakeholders at all levels

10. The global interventions will contribute to the achievement of this output by fostering national ownership and promoting socio-cultural and gender norms and intersectionality perspectives that are necessary to enable achievement of this output. Specifically, the global interventions will help strengthen the capacity of national health information system to monitor and disaggregate key sexual and reproductive health indicators, improve implementation of the Maternal Death Surveillance and Response system, and conduct assessments related to the prevention of HIV and other sexually transmitted infections. Furthermore, by supporting countries in leading evidence-based sexual and reproductive health and reproductive rights advocacy and participation in policy dialogues by civil society and youth-led networks, the global interventions will help advance domestic accountability mechanisms within the health system. This will also support communities, including young people, to have an active voice in monitoring the availability and quality of sexual and reproductive health and reproductive rights information and services.

Figure 1: Outcome 1 change model in brief



Global interventions contribution towards the enabling conditions for the achievement of Outcome 1

Enablers	Global interventions
Fostered national ownership and commitment	<ul style="list-style-type: none"> ● Provide technical leadership to enhance country capacities to assess needs, develop, implement, and monitor the availability and quality of integrated sexual and reproductive health information and services, including in delivering family planning, comprehensive maternal health, and information and services on sexually transmitted infections, including HIV. ● Strengthen the capacity of health systems to mitigate, prepare for and respond to disasters, including in delivering and implementing MISIP, and foster the continuum from development, humanitarian action and sustaining peace interventions. ● Enhance capacities to supply quality-assured contraceptives by training national quality control analysts, and to save costs by engaging strategically with key suppliers for an increased uptake of generics. ● Strengthen South-South and triangular cooperation as a means of reinforcing national capacity and institutionalization of quality sexual and reproductive health programming. ● Provide technical guidance and evidence-based communication and advocacy tools for improving community participation in the development, implementation, and review of sexual and reproductive health and reproductive rights policies and the monitoring of availability and quality of sexual and reproductive health services in health facilities.
Increased partnership and multisectoral collaboration	<ul style="list-style-type: none"> ● Support global inter-governmental processes and strategies that prioritize access to quality sexual and reproductive health and reproductive rights information and services for those “left furthest behind”, and convene the major stakeholders and sectors in those areas. ● Lead and engage in critical partnerships and technical working groups to position and advance the sexual and reproductive health and reproductive rights agenda.
Socio-cultural and gender norms and intersectionality perspectives to generate the required social change applied	<ul style="list-style-type: none"> ● Provide quantitative and qualitative evidence to overcome inequities in accessing integrated sexual and reproductive health and reproductive rights information and services, including in humanitarian settings. ● Lead the development of evidence-based communication and advocacy for improving accountability for the provision of quality sexual and reproductive health and reproductive rights, including on HIV prevention and adolescent sexual and reproductive health.
Intervention and service delivery protocols available	<ul style="list-style-type: none"> ● Ensure availability of technical guidelines and operational tools on critical sexual and reproductive health and reproductive rights issues, including combination HIV prevention, comprehensive maternal health, family planning, sexual health, and the differentiated sexual and reproductive health and reproductive rights needs of adolescents. ● Produce information, guidance and tools to strengthen country capacities for evidence-based supply chain management to ensure equitable access to sexual and reproductive health commodities “to the last mile”. ● Provide guidance and tools to strengthen country capacity to improve education, regulation and deployment of the health workforce, especially midwives ● Provide policy guidance and tools on Universal Health Coverage for improving access to quality sexual and reproductive health services, especially by those “left furthest behind”. ● Provide policy guidance for cash-based interventions focusing on sexual and reproductive health to strengthen the continuum of development, humanitarian action and sustaining peace.
Scaled up innovative approaches and good practices	<ul style="list-style-type: none"> ● Establish global South-South initiatives to generate synergies for the ICPD and the Sustainable Development Goals, considering South-South and triangular cooperation to complement traditional cooperation. ● Provide technical expertise in support of innovative financing for service delivery in humanitarian settings. ● Document and support the application of state-of-the-art innovative models to improve access to sexual and reproductive health and reproductive rights information and services, especially for those “left behind”.

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

Output 6: Young people, in particular adolescent girls, have the skills and capabilities to make informed choices about their sexual and reproductive health and rights, and well-being

11. In order to achieve the output statement, the global interventions will fill in the gap in availability of knowledge about programming for the empowerment of adolescent girls and young women, and guidance and tools on comprehensive sexuality education (CSE) both in- and out-of-school. They will also focus on addressing the lack of capacity of regional and country offices to implement sexual and reproductive health and rights programming for young key populations. The global interventions' contribution will be made at the enablers level of the strategic plan theory of change for outcome 2, particularly by fostering the improvement of girls' health, social and economic assets and contributing toward availability of age-appropriate sexuality education both in- and out-of-school. This will also include establishing an evidence-informed portfolio of new and innovative approaches that leverage information and communication technology (ICT) and mobile solutions created with and for young people about their sexual and reproductive health and reproductive rights. The global interventions' contribution also will be to ensure the availability of innovative tools for use by global, regional and national advocates to engage in global and international fora.

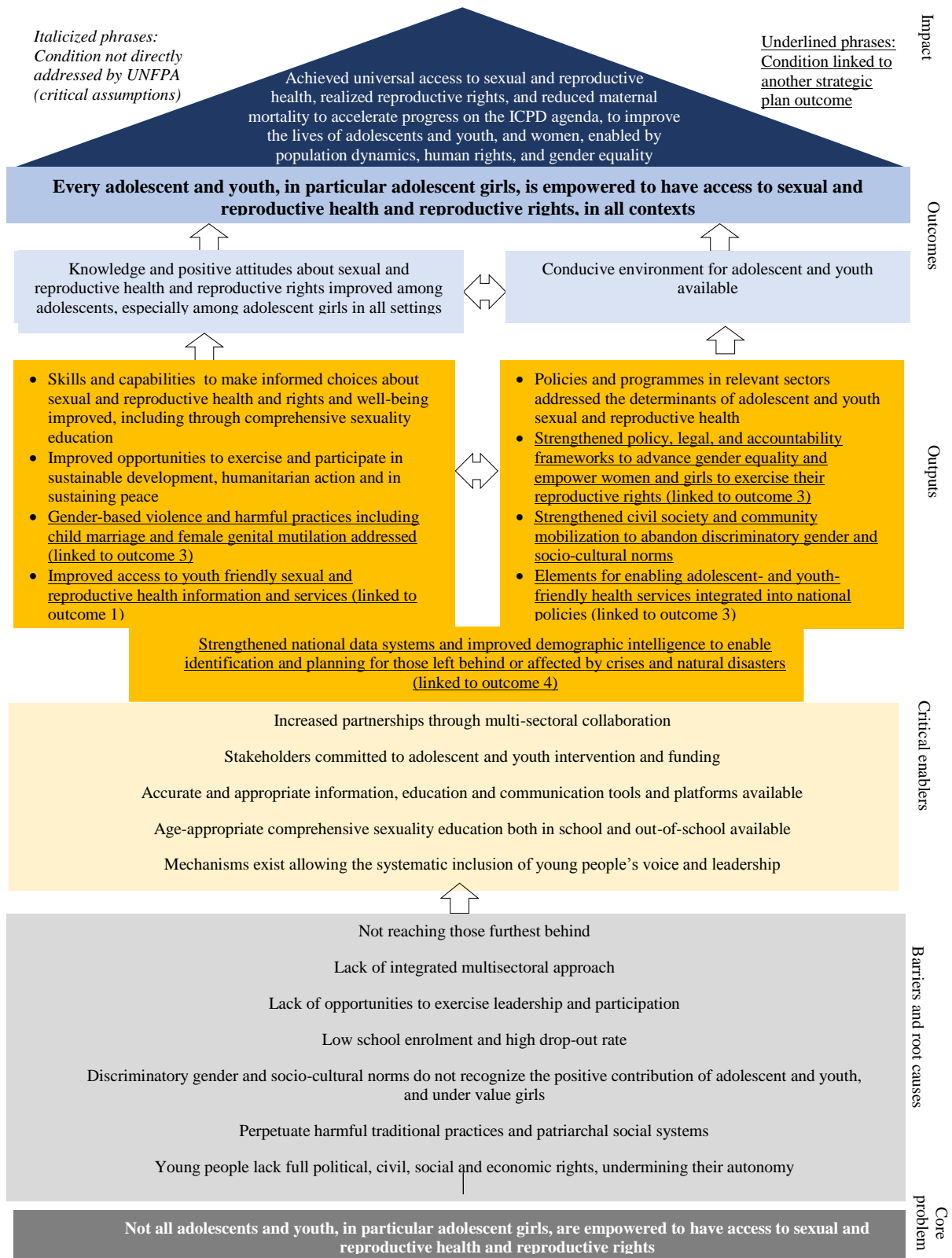
Output 7: Policies and programmes in relevant sectors tackle the determinants of adolescent and youth sexual and reproductive health, development and well-being

12. The global interventions will contribute toward achievement of this output statement by addressing the lack of global partnerships and platforms to position and advance the sexual and reproductive health and rights agenda for adolescents. They will aim to fill the gap in available guidance and tools on addressing the determinants of adolescent and youth sexual and reproductive health and rights, and recognize country-specific adolescent investment cases and integrate them as priorities in national development plans and pillars for building human capital of countries. This will be achieved by contributing to the enablers of the strategic plan theory of change for outcome 2 by advocating that governments commit towards adolescent and youth interventions and funding, and making available required guidance and tools. They will also facilitate the establishment of mechanisms allowing the systematic inclusion of young people's voice and leadership in the development agenda of their countries, including in humanitarian and peacebuilding settings.

Output 8: Young people have opportunities to exercise leadership and participate in sustainable development, humanitarian action and in sustaining peace

13. To achieve this output statement the global interventions will address the gap in evidence to inform youth engagement in humanitarian settings as well as in sustaining peace initiatives. The interventions will develop guidance and tools, and facilitate establishment of platforms allowing young people to actively participate in the development agenda, including in humanitarian and peacebuilding settings. There is a risk of overlooking the positive role that young people continue to play in rebuilding their communities after natural disasters, or in serving as levers for sustained peace between communities and countries, leveraging technology and connectivity. This will inform global interventions' leadership in the Compact for Young People in Humanitarian Action. The interventions will contribute in particular to the enablers, identified in the strategic plan theory of change for outcome 2, such as "mechanisms exist which allow the systematic inclusion of young people's voice and leadership in the development agenda of their countries, including in humanitarian and peacebuilding settings"; and in making available required protocols and tools.

Figure 2: Outcome 2 theory of change in brief



Global interventions contribution towards the enabling conditions for the achievement of Outcome 2

Enablers	Global interventions
Girls' health, social and economic assets improved	<ul style="list-style-type: none"> ● Lessons learned in programming for the empowerment of adolescent girls and young women synthesized and disseminated.
Age-appropriate comprehensive sexuality education both in- and out-of-school available	<ul style="list-style-type: none"> ● Capacity of regional office and country offices on global guidance on comprehensive sexuality education both in- and out-of-school settings and on reaching young key populations strengthened. ● Regions and countries supported in implementing sexual and reproductive health and reproductive rights programming for young key populations. ● Innovative tools for comprehensive sexuality education advocacy available. ● Adolescent and youth participation in sexual and reproductive health information, service provision and evaluation improved through innovation. ● Evidence-informed portfolio of innovative approaches leveraging information and communication technology and mobile solutions for adolescent sexual and reproductive health and rights
Mechanisms exist which allow the systematic inclusion of young people's voice and leadership in the development agenda of their countries including in humanitarian and peacebuilding settings	<ul style="list-style-type: none"> ● Youth organizations and networks utilized innovative advocacy tools and engaged in global technical and political fora. ● Leadership and engagement in critical global partnerships and platforms to both position and advance the sexual and reproductive health and reproductive rights agenda for adolescents is in place. ● Studies to strengthen the evidence base on Youth, Peace and Security generated. ● The Compact for Young People in Humanitarian Action convened and led. ● Young people's capacity in humanitarian action increased. ● Leadership capacity of adolescent and youth organisations and networks built.
Government committed to adolescent and youth interventions and funding	<ul style="list-style-type: none"> ● Country-specific adolescent investment cases available through technical support.
Required intervention protocols and service delivery protocols available	<ul style="list-style-type: none"> ● Guidance developed on addressing the determinants of adolescent sexual and reproductive health. ● Guidance developed for engaging young people in humanitarian action.

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

Output 9: Strengthened policy, legal and accountability frameworks to advance gender equality and empower women and girls to exercise their reproductive rights and to be protected from violence and harmful practices

14. In order to achieve the output statement, the global interventions will focus on generating analysis and developing evidence-based guidance for country programmes on engaging with international and national human rights mechanisms and strengthening policy and legal frameworks to advance accountability for gender equality, reproductive rights, gender-based violence, and harmful practices. Interventions will focus on strengthening policy, legal, and accountability frameworks on gender equality, reproductive rights, gender-based violence, and harmful practices in accordance with human rights standards to achieve the Sustainable Development Goals, in particular SDG 5.2, 5.3, and 5.6. Global interventions will also ensure the availability of research and guidance on addressing the specific needs of those groups “left furthest behind”, including women, adolescent girls, persons with disabilities, indigenous peoples, and migrants, for exercising their reproductive rights free from violence, coercion, and discrimination. The global interventions will generate knowledge on emerging issues and broader factors for promoting gender equality and reproductive rights, including free, prior and informed consent, the linkages between reproductive rights and women’s economic empowerment, and engaging men and boys. In partnership with civil society organizations, including faith-based organizations, the interventions will advocate for strategically positioning and monitoring implementation of the ICPD within the key intergovernmental processes, including Sustainable Development Goals processes, and the international human rights mechanisms. Special emphasis on advocacy efforts will be placed on promoting inclusion of those “furthest behind” in accessing humanitarian assistance, including women and adolescent girls, and the most marginalized populations.

Output 10: Strengthened civil society and community mobilization to eliminate discriminatory gender and sociocultural norms affecting women and girls

15. To achieve this output statement the global interventions will focus on generating research, knowledge and providing guidance on culturally sensitive approaches and engagement of faith-based organizations and community leaders (political, cultural, religious) in support of socio-cultural change and advancement of human rights. This will include greater understanding of how gender, social, and cultural norms operate at different levels to promote abandonment of gender-based harmful practices, including measurement of social and cultural norms change and operational guidance. Global interventions will focus on partnering with a broad range of stakeholders including civil society organizations and faith-based organizations to strengthen accountability mechanisms and accelerate progress towards abandonment of gender-based harmful practices. It will facilitate the provision of technical assistance and capacity-development on evidence-based interventions.

Output 11: Increased multisectoral capacity to prevent and address gender-based violence using a continuum approach in all contexts, with a focus on advocacy, data, health and health systems, psychosocial support and coordination

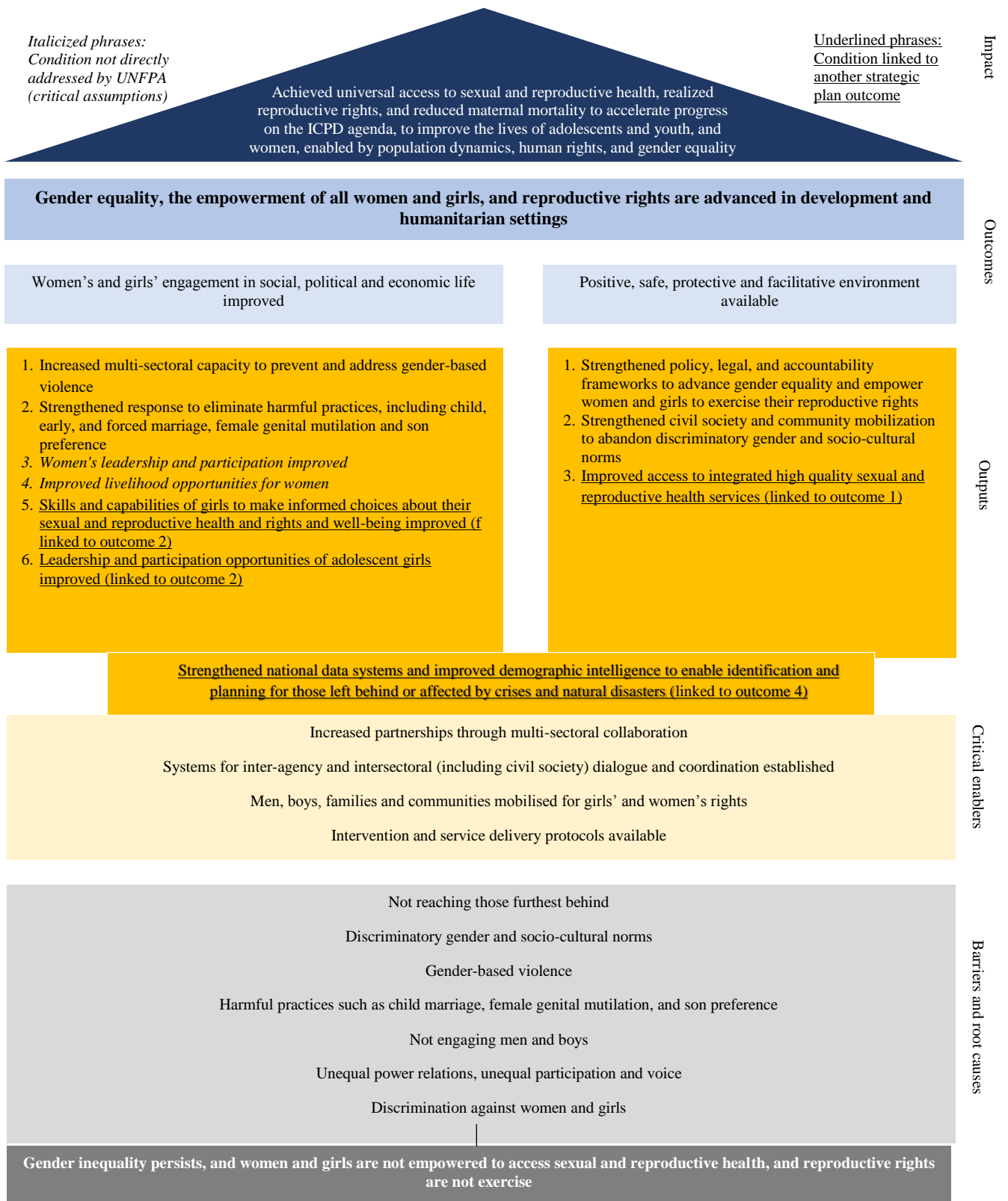
16. The contribution of the global interventions to achieve this output will focus on the implementation of existing United Nations and UNFPA guidance and standards on gender-based violence prevention and response through multi-sectoral services both in development and humanitarian settings. A special emphasis will be placed on the development of a conceptual and operational approach to gender-based violence prevention and response within a continuum of development, humanitarian action and sustaining peace. The “continuum approach” will link gender-based violence interventions across development and humanitarian contexts, building on work initiated in both contexts to ensure programme continuity. In development contexts the global interventions will focus on the implementation of the United Nations Essential Services Package for women and girls

subject to violence, with a particular emphasis on advocacy, data, and the health sector, including sexual and reproductive health and psychosocial support. In humanitarian settings, support will be given to application of Minimum Standards for Prevention of and Response to Gender-Based Violence in Emergencies. Global interventions will also address sexual violence, violence during pregnancy, as well as violence against the most marginalized groups including women with disabilities, indigenous women, and migrants. It will also ensure a well-functioning Gender-Based Violence Area of Responsibility (GBV AoR) coordination through a global-level unit and field sub-clusters. Global interventions will also strengthen the Fund's leadership to address gender-based violence in humanitarian contexts by ensuring timely surge staff deployments supporting country level humanitarian response, and strengthening inter-agency coordination.

Output 12: Strengthened response to eliminate harmful practices, including child, early and forced marriage, female genital mutilation and son preference

17. To achieve this output statement the global interventions will focus on providing support to implement global and regional agreements for the elimination of gender-based harmful practices, in particular Sustainable Development Goal target 5.3, General Assembly resolutions 67/146, *Intensifying global efforts for the elimination of female genital mutilations* and 71/175, *Child, early and forced marriage*, and the Protocol to the African Charter on Human and People's Rights on the Rights of Women in Africa (2003). The aim will be to generate knowledge and research on the trends including analysis of prevalence rates and social drivers, contributing factors, and good practices to accelerate progress in the elimination of gender-based harmful practices, with a focus on child, early and forced marriage, female genital mutilation and son preference. Global interventions will focus on partnering with a broad range of stakeholders including civil society organizations and faith-based organizations to strengthen accountability mechanisms and accelerate progress towards abandonment of gender-based harmful practices. It will also facilitate the provision of technical assistance and capacity-development on evidence-based acceleration interventions.

Figure 3: Outcome 3 change model in brief



Global interventions contribution towards the enabling conditions for the achievement of Outcome 3

Enablers	Global interventions
Systems for inter-agency coordination established	<ul style="list-style-type: none"> ● Provide technical assistance to field-level gender-based violence sub-clusters through guidance development and dissemination, on- and off-site capacity development, and surge deployments. ● Participation in inter-agency working mechanisms to ensure gender-based violence and harmful practices are addressed and strengthened in United Nations global agendas.
Socio-cultural, gender norms and intersectionality perspectives applied	<ul style="list-style-type: none"> ● Carry out applied research on emerging issues and linkages between gender equality, culture and social norms and sexual and reproductive health and reproductive rights. ● Generate analysis on data collected on Sustainable Development Goal targets related to gender-based violence and harmful practices. ● Disseminate and use analysis on data collected on Sustainable Development Goal targets related to gender-based violence and harmful practices to inform policies and programming. ● Develop indicators and tools to measure change in gender and social and cultural norms related to harmful practices to inform country-level policy development and programme intervention. ● Develop and support implementation of intervention models for addressing gender-based violence and harmful practices. ● Develop guidance to strengthen the conceptual/operational linkages on gender-based violence and harmful practices and support its roll-out at regional and country level, as well as in collaboration with civil society organizations, including faith-based organizations. ● Analyse and publish evidence from programming on gender-based violence, harmful practices and reproductive rights to strengthen programming and knowledge base.
Accountability mechanisms established	<ul style="list-style-type: none"> ● Develop evidence-based guidance on engagement with international and national human rights mechanisms to advance accountability for sexual and reproductive health and rights, gender equality, gender-based violence and harmful practices. ● Support at international and regional level the strengthening and functioning of social accountability mechanisms, including on gender-based violence and harmful practices. ● Analyse and provide guidance to countries on Universal Periodic Review (UPR) recommendations. ● Advocate for inclusion of those “furthest behind” in accessing humanitarian assistance, including women and adolescent girls. ● Advocate and engage in policy dialogue within key intergovernmental processes to strategically position gender, gender-based violence and harmful practices.
Men and boys engaged	<ul style="list-style-type: none"> ● Develop guidance and trainings to support roll-out of national policies and programmes that engage men and boys in support of women’s empowerment, gender equality, sexual and reproductive health and reproductive rights, ending gender-based violence and harmful practices. ● Develop effective intervention models for engaging men and boys for ending harmful practices and gender-based violence.
Families and communities mobilised for girls’ and women’s rights	<ul style="list-style-type: none"> ● Develop guidance and tools on culturally-sensitive approaches and engagement of civil society organizations, civil society organizations and community leaders (political, cultural, and religious) in support of social norm change and advancement of human rights.
Partnerships, including civil society engaged in policy dialogue on sexual and reproductive health and rights issues	<ul style="list-style-type: none"> ● Advocate and engage in policy dialogue within key intergovernmental processes, in partnership with civil society organizations, including faith-based organizations, at global and regional levels, to strategically position the ICPD and the Sustainable Development Goals, particularly health, gender equality and rights related Sustainable Development Goal targets.

	<ul style="list-style-type: none"> ● Advocate for and engage in policy dialogue within key intergovernmental processes to strategically position initiatives against gender-based violence and harmful practices - including through engagement with civil society organizations and faith-based organizations.
<p>Required intervention protocols and service delivery protocols available</p>	<ul style="list-style-type: none"> ● Develop guidance based on free, prior and informed consent to strengthen exercise of reproductive rights and access to sexual and reproductive health of groups “left furthest behind”, including women, adolescent girls, persons with disabilities, indigenous people, and migrants. ● Lead and develop methodology and generate analysis on data collected on gender-based violence, harmful practices, health, gender equality and rights-related Sustainable Development Goal targets 5.3, 5.6.1 and 5.6.2. ● Develop guidance, undertake trainings for applying a human rights based, gender-transformative, and culturally-sensitive approach to deliver quality services on harmful practices. ● Develop and support implementation of intervention models for preventing gender-based violence and increasing access to multi-sectoral, quality gender-based violence services in all settings under a continuum approach, including promoting use of and quality assurance for implementation of UNFPA Minimum Standards for Prevention of and Response to Gender-Based Violence in Emergencies and Essential Services Package in development contexts. ● Develop guidance to strengthen the conceptual/operational linkages on the continuum approach for gender-based violence and support its roll-out at regional and country level. ● Develop and provide quality assurance for implementation of gender-based violence information management processes, including data collection, analysis and dissemination for advocacy and to inform programming. ● Build the roster for surge deployments in gender-based violence program management, coordination, and information management in humanitarian contexts. ● Develop the next generation of professionals working to address gender-based violence in humanitarian contexts.

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

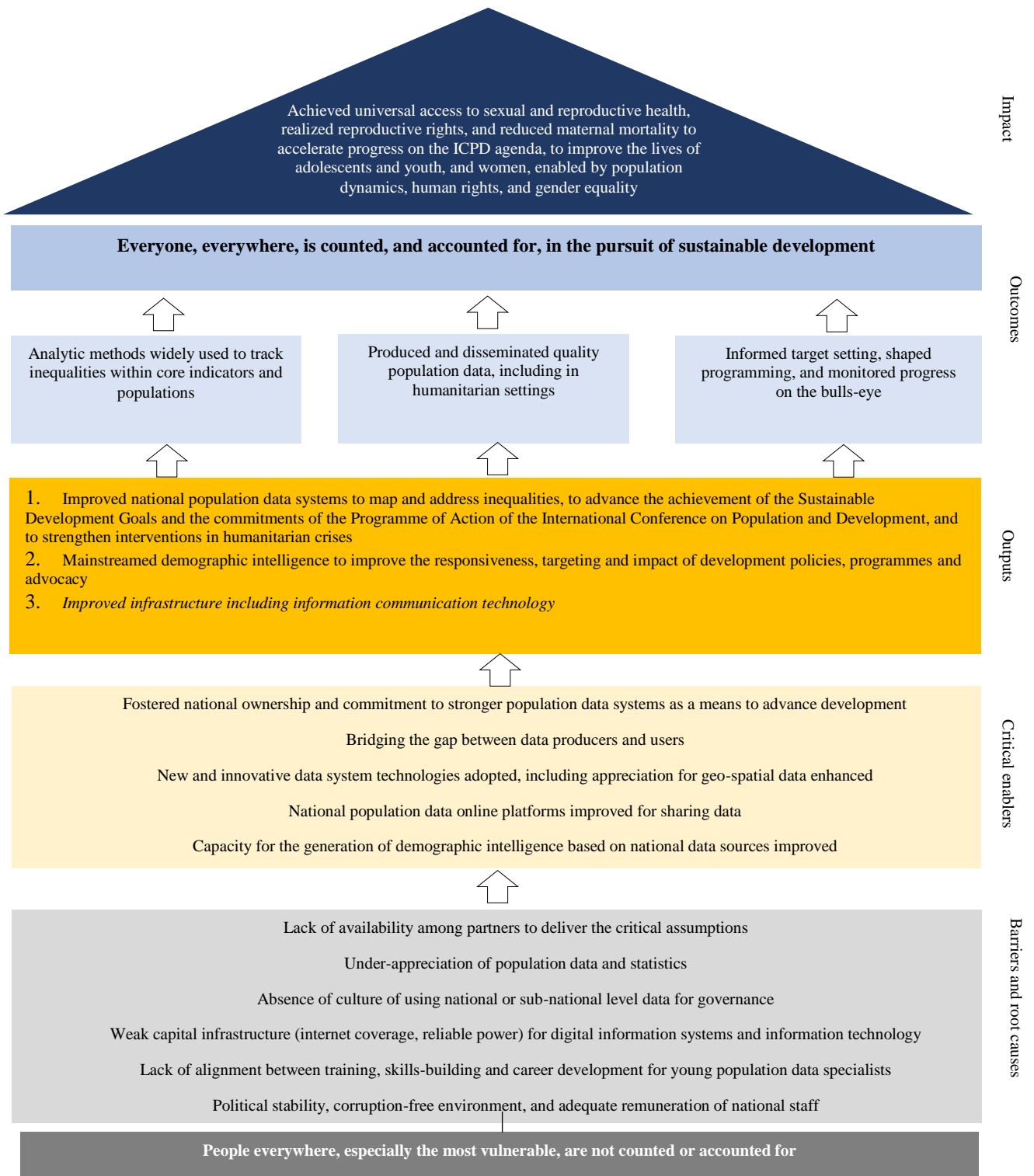
Output 13: Improved national population data systems to map and address inequalities; to advance the achievement of the Sustainable Development Goals and the commitments of the Programme of Action of the International Conference on Population and Development; and to strengthen interventions in humanitarian crises

18. UNFPA global interventions will contribute to the achievement of this output by raising the priority level and international commitment to population data production and use, including linked to the monitoring and implementation of the agenda of the International Conference on Population and Development and 2030 Agenda for Sustainable Development. Global interventions will specifically support the roll-out of geospatial population data platforms, tools and analyses; and the integration of data from different sources. These interventions will inform the technical assistance to countries, and contribute to strengthening capacity on disaggregation, monitoring and use of UNFPA-priority indicators, including Sustainable Development Goals. The global interventions will augment bridging between data producers and users, adoption of new and innovative data system technologies and strengthening of national technical capacity to analyse, disseminate and utilize population data.

Output 14: Mainstreamed demographic intelligence to improve the responsiveness, targeting and impact of development policies, programmes and advocacy

19. The global interventions will contribute towards the thought leadership of UNFPA on persisting or emerging population and development challenges and opportunities faced by countries. Specifically, through these global interventions UNFPA will produce demographic intelligence to inform programming and policy development, and lead and support discussions on the demographic dividend, migration and urbanization, population aging and fertility change. The interventions will promote the integration of demographic analysis into national development plans. The above demographic intelligence, embedded within advocacy and outreach, will be provided to intergovernmental and inter-agency processes and partnerships to prioritize the agenda of the International Conference on Population and Development and the UNFPA strategic plan, 2018-2021 outcomes, including to advance the 2030 Agenda for Sustainable Development.

Figure 4: Outcome 4 change model in brief



Global interventions contribution towards the enabling conditions for the achievement of Outcome 4

Enablers	Global interventions
Global, regional and national commitment to population data systems for development and humanitarian response strengthened, and national ownership fostered	<ul style="list-style-type: none"> ● Embedded demographic intelligence within advocacy and outreach provided to intergovernmental and inter-agency processes and partnerships to prioritize the agenda of the International Conference on Population and Development and the UNFPA strategic plan, 2018-2021 outcomes, including to advance the 2030 Agenda for Sustainable Development. ● Provide technical assistance to strengthen the capacity to disaggregate, monitor and use UNFPA-priority indicators, including those of the Sustainable Development Goals. ● Embed Sustainable Development Goal 5.6.1 in a wide range of national surveys, including but not limited to Demographic and Health Surveys and multiple indicator cluster surveys. ● Develop methodology and generate and disseminate analysis on data collected on health, gender equality and rights-related Sustainable Development Goal targets 5.6.1 and 5.6.2. ● Provide support to regional offices to assure responsive technical support to countries to analyse, disseminate and utilize population data.
New and innovative data system technologies adopted, including geo-spatial data	<ul style="list-style-type: none"> ● Ensure timely access to, and use of, population data in humanitarian settings by integrating data from census, Civil Registration and Vital Statistics (CRVS) and household surveys. ● Use innovative methods to estimate a population census from a combination of satellite imaging and micro-surveys, where humanitarian crises preclude traditional data-gathering exercises.
National population data online platforms improved for sharing data	<ul style="list-style-type: none"> ● Create the UNFPA Population Data Platform, with a unique cluster of core ICPD-related indicators for easy monitoring and evaluation, as well as analysis, visualization and mapping. ● Create an online platform with public access to demographic dividend typologies and guidance to generate them.
Capacity for the generation of demographic intelligence based on national data sources improved	<ul style="list-style-type: none"> ● Produce demographic intelligence to inform programming and policy development. ● Lead and support discussions on the demographic dividend, migration and urbanization, population ageing and fertility change, and convene major stakeholders in these areas to promote common, coherent and rights-based policies and programmes. ● Promote integration of demographic analysis into national development plans. ● Provide demographic intelligence on how the demographic changes affect sustainable development, including the implementation of the 2030 Agenda for Sustainable Development and progress towards the Sustainable Development Goals, and how demographic changes can be shaped by sustainable development and rights-based policies in turn. ● Improve national systems for integrated processing, analysis and use of geospatial data, including skills in mapping, linking georeferenced/ geocoded population data with sexual and reproductive health services and other spatial data, and use of methods for small area estimation. ● Establish partnerships with population centres to enhance capacity and create sustainable research and analytic hubs.

Annex 3. Resource mobilization plan

Programme Area/or output	Indicators	Key actions	Target amount (in dollars)	Potential donors	Timeframe	Focal point
Improved UNFPA capacity to use South-South and triangular cooperation for the implementation of the International Conference on Population and Development agenda and alliances built with key stakeholders at the global level	Number of South-South and triangular cooperation initiatives promoted or facilitated by UNFPA to advance the implementation of the International Conference on Population and Development agenda at the local level.	Flagship South-South and triangular cooperation initiatives to serve as the corporate blueprint for action based on strategic partnership with key stakeholders in order to scale up International Conference on Population and Development and Sustainable Development Goals; Global consultative process with engagement of stakeholders; Building national capacity; Advocacy plan to consolidate South-South and triangular cooperation as a means to implement the strategic plan and advance the International Conference on Population and Development and 2030 Agendas.	1,420,000	India, Brazil and South Africa (IBSA) Fund; New Development Bank (NDB); Arab Fund for Economic and Social Development (AFESD); Organization of the Petroleum Exporting Countries (OPEC) Fund for International Development; Dubai Cares; Bank of the South; World Bank South-South Experience Exchange Facility; Organisation for Economic Co-operation and Development (OECD) Ibero-American Programme for Strengthening South-South Cooperation.	2021	South-South Project; Resource Mobilization Branch; Regional Offices; Country Offices.
Strengthened programming capacity and interventions for gender-based violence in emergencies at the global level	Proportion of total humanitarian funding dedicated for global level programming to provide normative, technical and operational support to regional and country offices	Active resource mobilization for range of gender-based violence work in emergencies at the global level; Staff secondment from donor countries to support coordination.	4,000,000 for 4 years	UK/Department for International Development; Denmark; Australia; Canada; Switzerland; Norway/Norwegian Refugee Council; United Nations Action Multi-Partner Trust Fund; Netherlands; Italy; Finland; European Union – European Civil Protection and Humanitarian Aid Operations Programme (ECHO); Sweden; Korea;	2018-2021	Humanitarian and Fragile Contexts Branch

				China; CANADEM International Civilian Response Corps; Swedish Civil Contingencies Agency (MSB); Danish Refugee Council (DRC).		
Strengthened programming capacity and interventions for gender-based violence coordination in humanitarian contexts	Proportion of total humanitarian funding dedicated for global level gender-based violence coordination to provide normative, technical and operational support to regional and country offices	Active resource mobilization for gender-based violence work in emergencies at the global level; Staff secondment from donor countries to support coordination.	2,000,000 for 4 years	UK/Department for International Development; Denmark; Australia; Canada; Switzerland; Norway/Norwegian Refugee Council; United Nations Action Multi-Partner Trust Fund; Netherlands; Italy; Finland; United States (Bureau of Population, Refugees, and Migration & Office of Foreign Disaster Assistance); European Civil Protection and Humanitarian Aid Operations Programme (ECHO); Sweden; Korea; China; CANADEM International Civilian Response Corps; Swedish Civil Contingencies Agency (MSB); Danish Refugee Council (DRC).	2018-2021	Humanitarian and Fragile Contexts Branch

Strengthened global guidance on addressing gender-based violence needs in the continuum from crisis preparedness, response and recovery to support resilience strengthening	Guidelines developed and tested for addressing gender-based violence needs in the continuum from crisis preparedness, response and recovery to strengthening resilience	Partner with Gender, Human Rights and Culture Branch (GHRCB) to define the continuum; Develop operational guidance for UNFPA country offices and partners.	200,000 for 4 years	UK/Department for International Development; Denmark; Australia; Canada; Switzerland; Norway/Norwegian Refugee Council; United Nations Action Multi-Partner Trust Fund; Netherlands; Italy; Finland; United States (Bureau of Population, Refugees, and Migration & Office of Foreign Disaster Assistance); European Civil Protection and Humanitarian Aid Operations Programme (ECHO); Sweden.	2018-2021	Humanitarian and Fragile Contexts Branch; Gender, Human Rights and Culture Branch (GHRCB).
Strengthened global information management mechanisms that support availability of quality gender-based violence data and information	A gender-based violence Information Management Toolkit in place and operationalized to support a range of data management needs, including for gender-based violence incident data, information on risks and vulnerabilities, and programme monitoring data	Lead global engagements with partners to define high-quality gender-based violence information management; Coordinate inter-agency projects to establish and implement field-friendly data management tools.	2,000,000 for 4 years	UK/Department for International Development; Denmark; Australia; Canada; Switzerland; Norway/Norwegian Refugee Council; United Nations Action Multi-Partner Trust Fund; Netherlands; Italy; Finland; United States (Bureau of Population, Refugees, and Migration & Office of Foreign Disaster Assistance); European Civil Protection and Humanitarian Aid Operations Programme (ECHO); Sweden.	2018-2021	Humanitarian and Fragile Contexts Branch
Increased national capacity to	Number of national laboratories	Provide experts to facilitate training	30,000.00	United States Agency for International	2018-2021	Procurement Services

strengthen enabling environments, increase demand for and supply of modern contraceptives and improve quality family planning that is free of coercion, discrimination and violence	that have received laboratory training and working towards ISO 17025 accreditation or now testing condoms in line with international standards			Development/FHI360		Branch
Increased national capacity to deliver integrated sexual and reproductive health services	Number of prequalified suppliers/manufacturers of male condoms, pre-qualified female condoms and prequalified intrauterine devices (IUDs)	Contribute to the cost of prequalifying their manufacturing sites/product - cost recovery policy	66,000.00	Manufacturers of contraceptive devices	2018-2021	Procurement Services Branch
Increased national capacity to deliver integrated sexual and reproductive health services	Number of prequalified suppliers manufacturers of male condoms, pre-qualified female condoms and prequalified IUDs	Fund the prequalification of contraceptive devices programme	1,800,00 over two years	Global Fund; Bill & Melinda Gates Foundation; UNITAID.	2019-2020	Not established yet
Strengthened programming capacity and interventions for the integration of sexual and reproductive health into humanitarian response plans and humanitarian coordination	Per cent of total humanitarian funding dedicated for global level sexual and reproductive health programming to provide normative, technical and operational support to regional and country offices	Active resource mobilization for sexual and reproductive health and reproductive rights work in emergencies at the global level; Staff secondment from donor countries to support programming.	4,000,000 for 4 years	Netherlands; Norway; Canada; Australia; European Civil Protection and Humanitarian Aid Operations Programme (ECHO); Belgium; UK/Department for International Development; China; Norwegian Refugee Council; Belgium; Sweden; Denmark.	2018-2021	Humanitarian and Fragile Contexts Branch
Strengthened global emergency sexual and reproductive health supplies and provide quality assurance to meet the demand, monitor global utilization and provide support to countries facing humanitarian crises	Per cent of sexual and reproductive health supplies managed at the global level deployed to support humanitarian action	Resource mobilization through UNFPA Supplies and other donors and inter-agency working group to support global humanitarian supplies	4,000,000 for 4 years	Netherlands; UK/Department for International Development; Canada; Norway.	2018-2021	Humanitarian and Fragile Contexts Branch

Strengthened global guidance for addressing sexual and reproductive health needs in the continuum from crisis preparedness, response and recovery to support resilience strengthening	Guidelines developed and tested for addressing sexual and reproductive health needs in the continuum from crisis preparedness, response and recovery to strengthening resilience	Lead global consultative process with a range of stakeholders; Inter-Agency Working Group on Reproductive Health in Crises to develop the guidance and field testing; Secure funding from inter-agency working group on reproductive health in crises.	1,000,000 for 4 years	Netherlands; Norway; Canada; Inter-Agency Working Group; Women's Refugee Commission; UK/Department for International Development; Sweden; Every Woman, Every Child (EWEC).	2018-2021	Humanitarian and Fragile Contexts Branch
Strengthened global monitoring mechanisms by developing a monitoring system to capture rapid response on the implementation of minimum initial service package (MISP) in acute emergencies	A monitoring system developed and activated that can capture the rapid response in the implementation of the MISP within 48 and 72 hours of the onset of an emergency	Lead global consultative process with a range of stakeholders, including inter-agency working group and others (NGOs, academia, United Nations agencies) working on sexual and reproductive health in humanitarian settings to design monitoring tools and systems that can capture the rapid response in the implementation of MISP during the acute phase of an emergency	600,000 over 4 years	European Civil Protection and Humanitarian Aid Operations Programme (ECHO); Norway; Finland; Australia; Canada; Inter-agency working group.	2018-2021	Humanitarian and Fragile Contexts Branch
Strengthened global monitoring tools to capture transition from MISP to comprehensive sexual and reproductive health service delivery	A monitoring system developed that can capture the transition from MISP to a comprehensive sexual and reproductive health service delivery system	Lead the development of global monitoring tools by holding a consultative process with key inter-agency working group stakeholders and others (NGOs, academia, United Nations agencies) to design appropriate tools that can capture the transition from MISP to comprehensive sexual and reproductive health service delivery	600,000 over 4 years	Inter-agency working group; Netherlands; Norway.	2018-2021	Humanitarian and Fragile Contexts Branch;
Established affected community accountability mechanism framework for sexual and reproductive health and reproductive rights to be utilized in humanitarian settings	Affected community accountability mechanism framework developed for utilization by countries in humanitarian settings	Develop and lead a consultative process to develop affected community accountability framework for sexual and reproductive health and reproductive rights with humanitarian and sexual and reproductive health stakeholders to be used in emergencies	400,000 over 4 years period	Inter-agency working group; Every Woman, Every Child (EWEC).	2018-2021	Humanitarian and Fragile Contexts Branch
Strengthened global training	Number of academic partners	Training of Trainers organized and	800,000 over	Inter-agency working group.	2018-2021	Humanitarian and

capacity of academic partners from the South and strengthened the development of clinical learning tools and modules on sexual and reproductive health and reproductive rights in emergencies	from the South trained on sexual and reproductive health and reproductive rights in emergencies Number of clinical learning tools and modules developed for utilization by academic partners	facilitated for academic partners from the South on sexual and reproductive health and reproductive rights in emergencies; Global learning tools and modules developed on specific clinical areas of sexual and reproductive health and reproductive rights and tested for utilization by academic partners to train practitioners quickly pre, during and post emergencies	4 years period			Fragile Contexts Branch
Enhanced geospatial analysis of census data thru linking census data with other geospatial data layers, e.g. digital maps of infrastructure, topography, lands, etc.	Functioning online population data platform exists (including timely access to data in humanitarian settings); (Baseline 2017: No; Target 2021: Yes); Proportion of countries conducting their censuses for which Technical Division provides knowledge and advocacy on geo-referencing and geo-coding of censuses; (Baseline 2017: 10%; Target 2021: 20%); All requests for innovative censuses methodologies satisfied; (Baseline 2017: Yes Target: Yes); Proportion of country and regional offices trained to process, integrate, disseminate and use geo-referenced and geo-coded population data, including for national and sub-national population projections; (Baseline 2017: 0; Target 2021: 100); Guidelines for vulnerability mapping of populations at district level or below developed; (Baseline 2017: No; Target 2021: Yes).	Supporting data related activities, e.g. census, Demographic and Health Surveys, etc. Support provided to digital mapping; Support to geo-coding or digital enumeration area boundaries.	\$9,050,000 for 2 years (2018-2019)	Bill & Melinda Gates Foundation; UK Department for International Development.	5 year project	Population and Development Branch

<p>Strengthening Population Data Systems in Humanitarian Emergencies</p>	<p>Coordinated global access to population data for humanitarian actors via a flexible and user-friendly UNFPA data platform; Dramatically improved population estimates in conflict-affected and disaster prone countries; Improved real-time situation analyses of temporal and geospatial dynamics at the national and sub-national levels that enhances decision-making and resource allocation; A collection of Humanitarian Needs Overview (HNO) and Humanitarian Response Plan (HRP) rounds over the next 4 years that are underpinned by such data – including sub-national mapping, and populations in need; and A customized set of technical tools, field guidance materials, policy briefs and web-based training materials that can drive sustained improvements to the humanitarian data ecosystem in future years.</p>	<p>Improve population data access and data acquisition for UNFPA and United Nations Humanitarian Country Teams, by leveraging UNFPA's partnerships with National Statistical Offices and Ministries of Planning and United Nations humanitarian partners (The office of the United Nations High Commissioner for Refugees (UNHCR), United Nations Office for the Coordination of Humanitarian Affairs (UNOCHA), International Organization for Migration (IOM), etc.); Generate subnational population projections by age/sex as part of the Common Operational Datasets (CODs) used by humanitarian actors as part of the Humanitarian Needs Overview (HNO) process; Align UNFPA's humanitarian specialist network with its Population Development Network and channel population data expertise into UNFPA's humanitarian network at the country-, regional-, and headquarters level; Disseminate user-friendly population data products via an open data platform for use by United Nations Humanitarian Country Teams; Improve technical guidance notes and population data tools for UNFPA staff serving in humanitarian settings.</p>	<p>5,300,000</p>	<p>Luxembourg</p>	<p>2018-2021</p>	<p>Population and Development Branch</p>
<p>Support capacity of the African Union Commission to monitor the implementation of the African Union roadmap on harnessing the</p>	<p>Number of policy implementation activities supported</p>	<p>Active resource mobilization; In-kind support from member states, including Junior Professional Officer (JPO) recruited to support capacity building and coordination.</p>	<p>250,000</p>	<p>Private Sector; Embassies from donor countries; Foundations.</p>	<p>2018-2019</p>	<p>Division for Governance and Multilateral Affairs</p>

demographic dividend at country level.						
Support multi-stakeholder process to build understanding and consensus on key issues at all levels.	Investment in and quality of comprehensive sexuality education programmes at country level; Advance normative linkages for the achievement of 2030 Agenda for Sustainable Development goal of “leaving no one behind”.	Consultative platforms bringing together policy makers, researchers, civil society, young people and other stakeholders.	265,000 per year	Norway; Norwegian Agency for Development Cooperation (Norad); Finland; Morocco.	2018-2021	Division for Governance and Multilateral Affairs
Addressing challenges to the implementation of the International Conference on Population and Development Beyond 2014 at all levels	Facilitating better linkages between the ICPD and the Sustainable Development Goals to ensure effective policymaking and implementation at all levels	Multi-stakeholder consultation with Governments, civil society as well as other thought leaders from the ICPD community	265,000 per year	Colombia; Ecuador; Bill & Melinda Gates Foundation; Canada; Ford Foundation; Morocco; Denmark; Netherlands.	2018-2021	Division for Governance and Multilateral Affairs
Organize regional capacity-building workshops to prepare for regional International Conference on Population and Development review outcomes supportive of the Follow-Up and Review of the International Conference on Population and Development Beyond 2014.	Support to the review and follow-up of the ICPD Beyond 2014 provided in all five regions	Active resource mobilization	300,000 over 4 years	Member States	2018-2021	Division for Governance and Multilateral Affairs

Annex 4. Partnership plan

Constituency	Partner	Nature of collaboration	Contribution of partner	Expected result	Key indicators by year (2018-2021)		Rationale
					baseline	target	
Government	African Union (AU)	Political outreach and advocacy; Facilitation and coordination of regional dialogue and intergovernmental processes	Provide access to influence high level continental decision-makers (Heads of State and Government and Ministers)	Decisions and declarations on demographic dividend/ICPD issues and increased policy dialogue in the continent	No. of continental decisions on ICPD issues Baseline: 4 Target 2018: 2 Target 2019: 2 Target 2020: 2 Target 2021: 2		The only continental and most influential political and intergovernmental body with 55 member states
Continental political and technical actors	African Union Commission (AUC)	Technical support towards continental initiatives of mutual interest	Available platform for advocacy and political outreach	Increase follow-up and implementation of continental initiatives and decisions	No. of continental platforms/initiatives, activities through support to the partner Baseline: 4 Target 2018: 2 Target 2019: 2 Target 2020: 2 Target 2021: 2		The only continental coordinating body for the region and critical entry point to ICPD issues as demographic dividend is high in the continent's agenda
United Nations System	Economic Commission for Africa (ECA) Economic Commission for Asia and the Pacific (ESCAP) Economic Commission for Latin America and the Caribbean (ECLAC) Economic Commission for Western Asia (ESCWA) Economic Commission for Europe (ECE)	Technical United Nations arm to provide evidence and business case	Provide technical expertise and financial support to intergovernmental platforms on implementation review and evaluation of all Regional Review Outcomes on Population and Development and the demographic dividend	Increased availability of high-quality data and research	No. of joint events and publications Baseline: 4 Target 2018: 4 Target 2019: 4 Target 2020: 2 Target 2021: 2		Mandated agencies in the regions to collaborate with UNFPA and other partners on the review of the ICPD Beyond 2014 and continental review; thought leadership institution on development issues and knowledge generation and dissemination.
Regional technical	Regional Economic	Technical support	Avail platform for advocacy and political	Increase follow-up and implementation of	No. of regional platforms/initiatives availed through support to the partner		Regional coordinating organs and critical entry points to ICPD

and political actors	Communities (RECs)	towards regional initiatives of mutual interest	outreach	regional initiatives and decisions	Baseline: 2 Target 2018:2 Target 2019: 2 Target 2020: 2 Target 2021: 1	issues as demographic dividend is high in the African Union regions.
Civil Society Organisations	The Organization of African First Ladies against HIV/AIDS (OAFLA)	Advocacy and visibility of issues	Provide access to key national and regional influencers	Enhanced awareness, understanding, and acceptance of demographic dividend and ICPD	No. of position statements Baseline: 3 Target 2018: 2 Target 2019: 2 Target 2020: 2 Target 2021: 2	Effective champions on key sexual and reproductive health and rights issues such as maternal health and adolescent girls
Civil Society Organisations	International Planned Parenthood Federation (IPPF)	Advocacy and mobilization of civil society organization	Joint advocacy at continental level on sexual and reproductive health and rights	Enhanced awareness, understanding and acceptance of demographic dividend and sexual and reproductive health and rights	No. of decisions and government commitments Baseline: 1 Target 2018: 1 Target 2019: 1 Target 2020: 1 Target 2021: 1	The largest civil society organization working on sexual and reproductive health and rights at the continental level with extensive national presence and recognition
Private sector	Private sector (African Chamber of Commerce and others)	Mobilization with action	Provide access to different platforms and resources	Joint action on demographic dividend	No. of commitments of support received from the private sector Baseline (2017): 1 Target 2018: 1 Target 2019: 1 Target 2020: 1 Target 2021: 1	To adopt integrated and innovative approaches on ICPD and demographic dividend
Global South	Thailand Ministry of Foreign Affairs (MOFA); India MOFA; South Africa MOFA; Brazil MOFA; Mexico MOFA.	Integrate the sharing of Southern knowledge and know-how into UNFPA programming	Provide technical expertise for partner countries on ICPD areas	Institutional capacity and increased know-how of partner countries to address critical ICPD areas	Number of global Memoranda of Understanding signed with Global South countries Baseline: 0 Target 2021: 5	The partnership with a national coordination entity from the global south shall provide facilitated access to a broad number of partners with high-level expertise on key ICPD areas.
Academic Sector	University of Santa Catarina (Brazil); Universidad de Chile; Institute for Population and Social Research Mahidol University (Thailand); Institute of Population and	Bridge knowledge gaps by linking supply and needs in training	Provide training to partner institutions from the Global South	Institutional capacity and increased know-how of partners countries to address critical ICPD areas Institutional capacity and increased know-how of partners countries to address	Number of trained civil servants and community-based workers Baseline 0 Target 2021: 200 Number of Memoranda of Understanding signed with academic institutions (non-cumulative)	It is a prestigious national public university that has offered training for health professionals all over the country and has partnered with UNFPA to provide training for UNFPA partners on ICPD areas at no cost.

	Labor Economics, The Chinese Academy of Social Sciences (China).			critical ICPD areas	Baseline: 1 Target 2021: 3	<p>Universidad de Chile is a prestigious national public university of international quality.</p> <p>Institute for Population and Social Research Mahidol University is prestigious in the region and also a collaborating centre of UNFPA.</p> <p>The Chinese Academy of Social Sciences (CASS) is the premier academic organization and comprehensive research centre of the People's Republic of China in the fields of Philosophy and Social Sciences.</p>
United Nations System	United Nations Office for South-South Cooperation (UNOSSC)	Convening role of United Nations and other partners for South-South and triangular cooperation	Facilitate global dialogue to advance South-South and triangular cooperation on ICPD issues	Increased policy dialogue of partners to ensure ICPD are adequately featured in South-South and triangular cooperation mechanisms	Number of United Nations dedicated mechanisms for South-South Cooperation addressing the ICPD agenda Baseline: 0 Target 2021: 2	UNOSSC is mandated by the General Assembly to mainstream South-South Cooperation across the United Nations System and throughout the international development community and acts as the Secretariat of the General Assembly High Level Committee on South-South Cooperation
Multilateral community	Secretaría General Iberoamericana (SEGIB)	Advocacy within its members	Mobilize resources and partners for South-South and triangular cooperation on ICPD	Institutional capacity and increase know-how of partner countries to address critical ICPD issues	Partnership agreement with SEGIB to advance South-South and triangular cooperation on the ICPD is signed Baseline: No Target 2021: Yes	SEGIB is a recognized multilateral partner with strong presence in the Global South
Global South	G77	Facilitate global dialogue to advance South-South and triangular	Rally southern partners to forge strategic alliances around the ICPD and the Sustainable	Increased policy dialogue of partners to ensure ICPD issues are adequately featured in South-South and	South-South Cooperation mechanisms addressing ICPD gaps are in place Baseline: No mechanisms Target 2021: Yes	G77 is the broadest global alliance of developing countries

		cooperation on ICPD areas	Development Goals	triangular cooperation mechanisms		
Parliamentarians and regional parliamentary groups on population and development	Individual parliamentarians around the world; European Parliamentary Forum on Population and Development (EPF); Asian Forum of Parliamentarians on Population and Development (AFPPD); Inter-American Parliamentary Group on Population and Development (IAPG); Forum of Arab Parliamentarians on Population and Development (FAPPD); Africa Parliamentary Forum on Population and Development (FAP).	Advocacy and Policy Dialogue	Create a conducive environment for implementing the ICPD and the Sustainable Development Goals and allocating resources	Enabling national policy and legislative environment and relevant budgetary allocations for the ICPD mandate	Proportion of advocacy interventions that result in a favourable outcome for UNFPA supported Baseline: Total interventions for 2017 Target 2018: 100% increase Target 2019: 50% Target 2020: 10% Target 2021: 10%	Mandate and because Parliamentarians are responsible for making laws, allocating budgets and ensuring the oversight of the same.
Civil society partners from donor countries	ACPD (Canada); Care (Australia); EPF (Brussels); DSW (Germany); Equilibres & Populations (France); All-part Parliamentary Group on PD (UK); PND Factor (Portugal); FPFE (Spain); IFPA (Ireland); EPWG (European Parliament); Sexual Health (Switzerland); RFSU (Sweden); Sensoa (Belgium); MFPP (France); Sex and Politik (Denmark); NSSR (Norway); OFG (Austria); Vaestolitto (Finland); NZFPA (New Zealand); EURONGOS (Belgium); New European Union members from Eastern Europe	Advocacy and building an enabling policy environment for resource mobilization	They advocate for UNFPA with parliamentarians and showcase the value for the work of the organization among their publics	Increased political support; Increased and/or maintained resources; Increased visibility.	Proportion of advocacy interventions that result in a favourable outcome for UNFPA supported Baseline: Total interventions for 2017 Target 2018: 100% increase Target 2019: 50% Target 2020: 10% Target 2021: 10%	As UNFPA does not have a physical presence in most of the donor countries, it has carried out its advocacy activities in close collaboration with its partner non-governmental organizations (NGOs) and parliamentary groups. This approach has been highly successful, because these partners are best placed to act on behalf of UNFPA and the ICPD agenda, given their knowledge, expertise and national contacts. UNFPA invested significant effort to build the capacity of these partners as key assets for UNFPA in creating a favourable environment in their nations among their publics and policy makers.

<p>United Nations System for global humanitarian interventions</p>	<p>United Nations Office for the Coordination of Humanitarian Affairs (UNOCHA);</p> <p>World Health Organization (WHO);</p> <p>United Nations Development Programme (UNDP);</p> <p>United Nations humanitarian partners;</p> <p>Office of the United Nations High Commissioner for Refugees (UNHCR);</p> <p>United Nations Children’s Fund (UNICEF);</p> <p>Peacebuilding Support Office (PBSO)</p> <p>United Nations Internal Strategy for Disaster Reduction (UNISDR)</p> <p>United Nations Action Against Sexual Violence in Conflict (UN Action)</p> <p>World Food Programme (WFP)</p> <p>Joint United Nations Programme on HIV/AIDS (UNAIDS)</p> <p>United Nations Entity for Gender Equality and the Empowerment of Women (UN-WOMEN)</p> <p>Department of Peacekeeping Operations (DPKO)</p>	<p>Working with OCHA on humanitarian financing;</p> <p>Inter-Agency Coordination;</p> <p>Advocacy;</p> <p>Capacity-building;</p> <p>Inter-agency tools development;</p> <p>Establishing standards;</p> <p>Logistic capacity.</p>	<p>Global Humanitarian advocacy;</p> <p>Inter-agency coordination function;</p> <p>Humanitarian resource mobilization;</p> <p>Response plans, flash appeals, humanitarian multi donor pooled funding mechanisms;</p> <p>Central Emergency Response Fund (CERF) funding and multi-agency risk assessment;</p> <p>Index for Risk Management (INFORM) Index;</p> <p>Technical capacity-building.</p>	<p>Increased coordination and coherence with other United Nations agencies for more effective humanitarian action;</p> <p>Increased advocacy and technical collaboration in terms of normative standard setting to support humanitarian action;</p> <p>Strengthened and increased resources for humanitarian response plans, humanitarian action and resilience;</p> <p>Leveraged support for humanitarian logistical capacity;</p> <p>Increased resources for gender and young people’s participation in peacebuilding and sustaining peace efforts.</p>	<p>CERF/Financial resources allocation to UNFPA increased Baseline \$23,148,417 Target 2018: \$26,000,000 Target 2021: \$37,000,000</p>	<p>UNOCHA is tasked by the General Assembly to coordinate both United Nations humanitarian response and non-UN agencies, and to support the management of CERF funds;</p> <p>UNHCR is the lead agency for refugees and conflict-related internally displaced people (IDPs). UNHCR leads the Global Protection cluster within the cluster system/humanitarian architecture. UNHCR is a strategic partner for coordination between the Protection Cluster and the UNFPA-led Gender-Based Violence Area of Responsibility in Emergencies. UNHCR and UNFPA are strategic partners on sexual and reproductive health and reproductive rights;</p> <p>WHO in relation to the Global Health Cluster Coordination for normative setting, advocacy for ensuring sexual and reproductive health and reproductive rights are reflected in Global Health Coordination in Emergencies;</p> <p>UNISDR on Sendai framework on Disaster Risk Reduction;</p> <p>PBSO for advancing gender and youth participation in peacebuilding;</p> <p>WFP for system-wide support to logistics and communication clusters and to access United</p>
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	<p>Office of the Special Representative on Sexual Violence in Conflict</p> <p>International Organization for Migration (IOM)</p> <p>United Nations Office of the High Commissioner for Human Rights (UNOHCHR)</p>					<p>Nations regional depot;</p> <p>DPKO to address conflict-related sexual violence;</p> <p>Office of the Special Representative of the Secretary-General on Sexual Violence in Conflict (OSRSG-SVC) to address conflict-related sexual violence;</p> <p>IOM for the migrant crisis in Greece and gender-based violence information management.</p>
<p>Governments for global humanitarian interventions</p>	<p>Australia;</p> <p>Belgium;</p> <p>Canada;</p> <p>China;</p> <p>Denmark;</p> <p>Finland;</p> <p>Japan;</p> <p>Netherlands;</p> <p>Norway;</p> <p>United States;</p> <p>UK/Department for International Development.</p>	<p>Advocacy and building an enabling policy environment for resource mobilization</p>	<p>Technical support;</p> <p>Generation of knowledge;</p> <p>Political engagement;</p> <p>Leveraging the UNFPA mandate;</p> <p>Financial support to UNFPA;</p> <p>Convening power around relevant areas of work.</p>	<p>Increased humanitarian resources raised;</p> <p>Political support to UNFPA humanitarian work and mandate.</p>	<p>Number of public announcement at the highest level from the donor governments supporting UNFPA mandate and work in humanitarian settings</p> <p>Baseline: 4 in 2017</p> <p>Target: 10 in 2021</p>	<p>Sustained political support was provided to UNFPA humanitarian work over many years;</p> <p>Investment in UNFPA humanitarian work and allocation of resources to UNFPA over several years.</p>
<p>Civil society, including NGO sector, FBOs for global humanitarian interventions</p>	<p>International Rescue Committee (IRC);</p> <p>Save the Children;</p> <p>Norwegian Refugee Council (NRC);</p> <p>CANADEM (International civilian response corps);</p> <p>RedR Australia;</p> <p>International Medical Corps (IMC);</p> <p>CARE;</p> <p>Swedish Civil Contingencies Agency (MSB);</p> <p>Danish Refugee Council</p>	<p>Standby partnership;</p> <p>Development of tools;</p> <p>Information management;</p> <p>Advocacy;</p> <p>Innovation.</p>	<p>Surge capacity for gender-based violence and sexual and reproductive health;</p> <p>Human resources to scale up humanitarian response capacity;</p> <p>Tools development;</p> <p>Capacity-building;</p> <p>Global collective</p>	<p>Increased humanitarian resources and human capacities for rapid response</p>	<p>Standby partner support of more than 2 million USD per year in 2017 to 4 million USD in 2021</p>	<p>Since 2005, UNFPA has maintained strategic partnership with Norwegian Refugee Council for surge capacity and over several years the partnership with additional standby partners was strengthened for humanitarian action, which enabled UNFPA to scale up and respond rapidly to humanitarian crises through trusted partners and partnership; UNFPA leveraged additional</p>

	(DRC); Women's Refugee Commission (WRC); IPAS; M4ID.		advocacy.			resources (human and financial).
International Conference on Population and Development advocacy civil society partners (global)	Youth Leadership Working Group (YLWG); LAC Youth Alliance; LAC CSO Network (GTF); African Civil Society Organization Coalition for Population and Development (ACCPD); The Asian-Pacific Resource and Research Centre for Women (ARROW); Additional others.	Gather information and advocate for the advancement of ICPD at global and regional levels.	Develop joint strategies and interventions for the implementation, follow-up and review and advancement of ICPD and 2030 Agenda for Sustainable Development issues.	Maintain political ICPD commitments in intergovernmental processes and advance ICPD at regional and global levels.	ICPD beyond 2014 issues are adequately reflected in follow-up and review and other processes.	There are the main global and regional civil society organization networks that follow ICPD beyond 2014 and 2030 Agenda for Sustainable Development commitments at regional and global levels.
Academic and research institutions for humanitarian interventions	Columbia University; University of Geneva; John Hopkins University; American University of Beirut; CDC Foundation; Boston University; John Snow, Inc.; University of Copenhagen; IAWG Training; Partnership Initiative; Jhpiego; Ghent University; Emory University; Harvard University; University of California- Berkeley.	Training partnership; Assessment; Technical support; Information management.	Research and evidence base; Curriculum development; Applied research; Tool developments; Innovation; Capacity-building.	Increased human resources capacity; Knowledge creation.	Number of applied research, trainings conducted and knowledge products developed Baseline: 4 Target: 12	UNFPA worked closely with universities to enhance human resource capacity and to conduct applied research and assessments to create evidence and knowledge and to support UNFPA in developing tools; Partners in the inter-agency working group training partnership are IAWG member organizations and training institutes and universities from crisis-prone countries and regions; Family Planning Association of Nepal (FPAN); Institut Africain de Santé Publique (IASP); Juba College of Nursing and Midwifery.
United Nations System	World Health Organization prequalification team	Alliance	Guidance on	Information sharing on successes of partnerships with Member States on area	Number of tools developed and made accessible publicly to strengthen national capacity in the regulation of	WHO has the normative role of promoting international standards on pharmaceutical food and health products; this

			management of prequalification programme	on prequalification of medicines and diagnostics	condoms and IUDs Baseline: 3 Target 2018-2021: 3 each year; Number of countries that are members of the network of laboratories established, to share information on quality issues for condoms and condom testing issues Baseline: 1 Target 2018: 6 Target 2019: 9 Target 2020: 12 Target 2021: 16.	applies to contraceptive devices as well.
Development Partners	United States Agency for International Development (USAID)	Coalition	Provision of experts for in-country laboratory training in testing of male condoms	Capacity for in-country laboratory testing of male condoms exists	Number of national laboratories that have received laboratory training and working towards ISO 17025 accreditation or now testing condoms in line with international standards Baseline: 10 Target 2018: 11 Target 2019: 12 Target 2020: 13 Target 2021: 14	Largest partner in the area of family planning
Government	Member States	Partnership	Staff time and facilities for meetings	A network of National Regulatory Authorities (NRA) and National Quality Control Laboratories (NQCLs) exists	A network of National Regulatory Authorities (NRA) and National Quality Control Laboratories (NQCLs) established and maintained Baseline: No network Target 2018: Network established Target 2019-2021: Network maintained Number of countries that are members of the network of laboratories established, to share information on quality issues of condoms and condom testing issues Baseline: 1 Target 2018: 5 Target 2019: 9 Target 2020: 12 Target 2021: 16	Strong regulatory control of condom quality is key to success of UNFPA and Member States Programme