Proposed indicative UNFPA assistance: $31.7 million: $16.7 million from regular resources and $15 million through co-financing modalities and/or other, including regular resources

Programme period: Five years (2011-2015)

Cycle of assistance: Seventh

Category per decision 2007/42: A

Proposed indicative assistance by core programme area (in millions of $):

<table>
<thead>
<tr>
<th>Category</th>
<th>Regular resources</th>
<th>Other</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reproductive health and rights</td>
<td>10.0</td>
<td>10</td>
<td>20.0</td>
</tr>
<tr>
<td>Population and development</td>
<td>3.1</td>
<td>3</td>
<td>6.1</td>
</tr>
<tr>
<td>Gender equality</td>
<td>2.0</td>
<td>2</td>
<td>4.0</td>
</tr>
<tr>
<td>Programme coordination and assistance</td>
<td>1.6</td>
<td>-</td>
<td>1.6</td>
</tr>
<tr>
<td>Total</td>
<td>16.7</td>
<td>15</td>
<td>31.7</td>
</tr>
</tbody>
</table>
I. Situation analysis

1. The population of Burkina Faso is approximately 14 million. About 51.7 per cent of the population is female, and 31.4 per cent are young people aged 15-24. The annual population growth rate is 3.1 per cent, and the total fertility rate is high at 6.2 children per woman. The majority of the population is young. Population growth and population dynamics are important challenges that must be addressed in order to maximize the effects of the volume and youthfulness of the population in achieving sustainable development. Over the past five years, the economy has grown at an annual rate of 5 per cent, which is far below the level required to boost economic and social development, given the annual population growth rate. Approximately 77 per cent of the population lives in rural areas. Life expectancy at birth increased from 53.8 years in 1996 to 56.7 years in 2006.

2. Health indicators are poor, despite efforts to strengthen the health system by constructing, renovating and equipping facilities and by training health workers. Maternal mortality is high at 484 deaths per 100,000 live births. The neonatal mortality rate is 31 deaths per 1,000 live births. According to the 2006 multiple indicator cluster survey, the modern contraceptive prevalence rate increased from 9 per cent in 2003 to 13 per cent in 2006. The unmet need for contraceptives was estimated at 31.1 per cent in 2006.

3. The HIV prevalence rate dropped from 2.3 per cent in 2005 to 1.6 per cent in 2008 among people between the ages of 15 and 49. The HIV prevalence rate among women in the same age group is higher, however (2 per cent). Disparities also exist between rural and urban areas. The prevalence rate among people aged 15 to 24 is 1.3 per cent. The decrease in HIV prevalence is attributable to strong government commitment and political engagement, including a strengthened multisectoral prevention strategy and community-level sensitization efforts.

4. Progress has been made in reducing gender disparities. This progress was the result of heightened political engagement, as reflected in the adoption of a national gender policy, the integration of affirmative-action measures for girls into the national plan for basic education, and increased sensitization efforts at government and community levels. The primary school enrolment rate for girls increased from 36.2 per cent in 2000 to 67.7 per cent in 2008. However, there is a gap between the percentage of boys (31.9 per cent) and girls (24.6 per cent) entering secondary school. Women account for 15.3 per cent of members of parliament and 19 per cent of government ministers. Gender-based violence remains a challenge because of the limited capacity for prevention and care.

5. The Government has adopted several sectoral policies and strategies in the areas of reproductive health and rights, population and development, and gender equality. However, the implementation of these policies is a challenge, due to weak national implementation capacity.

6. The Government has developed a concept paper for an accelerated growth and sustainable development strategy (Stratégie de croissance accélérée et de développement durable), 2011-2015. The strategy builds on the achievements of the previous poverty reduction strategy framework. The two pillars of this strategy are: (a) consolidating the economy and accelerating growth; and (b) developing human capital and economic infrastructure and promoting governance and local development. This strategy formed the basis for the development

II. Past cooperation and lessons learned

7. The sixth country programme, 2006-2010, had a total budget of $18 million. Achievements of the programme included: (a) increased availability and utilization of reproductive health services, with skilled birth attendance increasing from 43.4 per cent in 2006 to 65.19 per cent in 2008; (b) support for analysing data from the 2006 census and other major surveys, such as the demographic and health survey; and (c) the adoption of the national gender policy and contribution to the ‘gender basket fund’ initiated by development partners and managed by UNFPA. Despite these achievements, there is still a need to strengthen national systems, with a focus on monitoring and evaluation mechanisms, while committing additional resources to improve indicators in the social sectors.

8. Lessons learned included: (a) the value of participating in common basket funding, which raised the visibility of UNFPA in policy dialogue, facilitated the integration of the Programme of Action of the International Conference on Population and Development (ICPD) into national development frameworks, and served as a channel to leverage additional resources; (b) the need to strengthen advocacy on population-related issues, reposition family planning in the national development agenda, and increase the national commitment to prevent gender-based violence; (c) the importance of building the capacity of government institutions and forging partnerships with civil society to promote the ICPD agenda; (d) the need to enhance the use of results-based management and knowledge management; and (e) the importance of emphasizing security issues in developing and implementing the seventh country programme, given the instability in the subregion.

III. Proposed programme

9. UNFPA and the Government developed the proposed programme through a consultative and participatory process. The programme will help to achieve the goals of the strategy for accelerated growth and sustainable development, 2011-2015, and the UNDAF. The seventh country programme includes three components: (a) reproductive health and rights; (b) population and development; and (c) gender equality.

10. The proposed programme is aligned with the Millennium Development Goals, the ICPD Programme of Action, the UNFPA strategic plan, 2008-2013, and other international development frameworks, including the Maputo Plan of Action. It also embodies the principles of United Nations reform and the Paris Declaration on Aid Effectiveness.

Reproductive health and rights component

11. The outcome for the reproductive health and rights component is: improved utilization of reproductive health services, including maternal health, family planning and HIV prevention. This component will contribute to the UNDAF outcome on improved quality of human capital. Three outputs will contribute to the achievement of this outcome.

12. Output 1: Increased availability of basic maternal health services, including emergency obstetric and neonatal care, the prevention of mother-to-child transmission of HIV, and skilled birth attendance. Strategies include: (a) participating in policy dialogue, and the development, review and monitoring of sector-based health programmes; (b) advocating the development of human resources for maternal health; (c) scaling up emergency obstetric and neonatal care and efforts to prevent mother-to-child transmission of HIV; (d) improving the capacity of and providing support to the national programme to manage obstetric fistula, including through sensitization efforts to
prevent, identify and repair fistula and reintegrate fistula patients into society; and (e) providing support to increase technical capacity to deliver high-quality reproductive health services.

13. Output 2: Increased enforcement of reproductive health rights and access to comprehensive reproductive health services, including family planning, among women, young people and men. Strategies include: (a) advocating the effective application of the reproductive health law, repositioning family planning in the national development agenda, and strengthening partnerships with civil society organizations for community-based services; (b) supporting the implementation of the strategic plan for reproductive health commodity security; (c) developing a comprehensive package that addresses youth and adolescent health needs and integrates reproductive health and HIV; (d) strengthening programmes to promote male and female condoms; and (e) integrating reproductive health issues into emergency response operations.

14. Output 3: Improved gains in knowledge and the adoption of safe behaviour patterns in the area of reproductive health, including HIV and AIDS, among women, men and youth. Strategies include: (a) building the capacity of central and decentralized public structures and civil society organizations to sensitize communities on sexual and reproductive health issues; (b) strengthening individual, family and community participation in the management of maternal health issues and emergency obstetric care, to address danger signs and avoid delays associated with maternal deaths; and (c) integrating reproductive health and HIV interventions.

Population and development component

15. The outcome of the population and development component is: a strengthened national development system to utilize disaggregated population data in national and regional development frameworks and in sectoral strategies at central and regional levels. This will contribute to the UNDAF outcome on accelerated pro-poor economic growth. Two outputs will contribute to the achievement of this outcome.

16. Output 1: Strengthened capacity of the statistical system, at central and local levels, to collect, process, analyse, store and disseminate sociodemographic data disaggregated by sex, age and place of residence. Strategies include: (a) strengthening the national statistical system to monitor and evaluate development policies, plans and programmes; (b) supporting preparations for the general population and housing census of 2016 and the demographic and health survey; (c) strengthening data storage systems and using existing population data for planning, monitoring and evaluation; and (d) supporting the national programme for population and development studies and research.

17. Output 2: Strengthened capacity of national institutions to mainstream population and gender issues in national and regional development frameworks. Strategies include: (a) supporting national planning institutes to integrate population issues into the design, implementation, monitoring and evaluation of the strategy for accelerated growth and sustainable development at national and regional levels, and in sector-based policies; (b) supporting the implementation of the national strategic plan for building human resources in population and development; (c) building the capacity of civil society organizations and networks to ensure that the needs of young people are better addressed in development plans; and (d) developing and implementing an advocacy strategy on population and development issues and reinforcing policy dialogue to address population growth and population dynamics in Burkina Faso.
Gender equality component

18. The outcome of the gender equality component is: increased mainstreaming of gender issues in national development frameworks and sectoral strategies, consistent with international norms. This will contribute to the UNDAF outcome on rights-based and gender-balanced political, administrative, economic and local governance. Two outputs will contribute to the achievement of this outcome.

19. **Output 1: Strengthened technical and institutional capacity of ministerial departments and civil society organizations to implement the national gender policy.** Strategies include: (a) strengthening the technical capacity of the Ministry of Women’s Affairs to implement the national gender policy; (b) strengthening partnerships with civil society organizations; and (c) building the capacity of ministerial departments to mainstream gender and human rights in sectoral policies and programmes, following the adoption of the national gender policy.

20. **Output 2: Strengthened technical and institutional capacity of organizations working to eliminate gender-based violence, including female genital cutting and early marriages.** Strategies include: (a) supporting civil society coalitions and networks to promote women’s rights; and (b) developing and implementing an advocacy strategy to enforce existing laws on gender equality and to promote the rights of women and girls.

IV. Programme management, monitoring and evaluation

21. The monitoring, evaluation and management of the country programme is integral to the UNDAF monitoring plan and coordination mechanism. The programme falls under the stewardship of the Ministry of Economy and Finance. This ministry will coordinate the country programme, implementing it in partnership with the Ministries of Health, Women’s Affairs and Education, as well as with other United Nations organizations and civil society organizations. The programme will encourage South-South cooperation and technical exchanges.

22. The Government is responsible for the safety and security of UNFPA staff and offices. Security issues, including risk-mitigation measures, will be included in the programme implementation process, taking into account associated costs.

23. UNFPA and the Government will develop resource mobilization, communication, and monitoring and evaluation plans that adhere to the results-based management approach, in line with the UNDAF monitoring and evaluation plan.

24. The country office consists of a representative, an assistant representative, an operations officer, six national programme officers, and six support staff. UNFPA will strengthen the capacity of the office by recruiting a deputy representative, an international programme specialist, three national programme officers and three support staff. UNFPA will also recruit national experts and consultants as required. The country office will seek technical assistance from the subregional office in Dakar, Senegal, the regional office in Johannesburg, South Africa, and other units within UNFPA.
<table>
<thead>
<tr>
<th>Programme component</th>
<th>Country programme outcomes, indicators, baselines and targets</th>
<th>Country programme outputs, indicators, baselines and targets</th>
<th>Partners</th>
<th>Indicative resources by programme component</th>
</tr>
</thead>
</table>
| Reproductive health and rights | **Outcome:** Improved utilization of reproductive health services, including maternal health, family planning and HIV prevention  
Outcome indicators:  
- % of births with skilled attendents  
Baseline: 62.7%; target: 80%  
Baseline: 27.9 % contraceptive prevalence rate  
Baseline: 42.8% | **Output 1:** Increased availability of basic maternal health services, including emergency obstetric and neonatal care, the prevention of mother-to-child transmission of HIV, and skilled birth attendance  
Output indicators:  
- % of social development and health centres implementing emergency obstetric and neonatal care  
Baseline: to be available later in 2010  
- % of obstetric complications treated with comprehensive emergency obstetric and neonatal care services  
Baseline: to be available later in 2010  
- % of pregnant women having undergone an HIV screening test during prenatal care. Baseline: 75% | Ministries of:  
Economy and Finance;  
Education;  
Health;  
Social Development;  
Women's Affairs;  
Youth Development partners | $20 million  
($10 million from regular resources and  
$10 million from other resources) |
|                         | **Output 2:** Increased enforcement of reproductive health rights and access to comprehensive reproductive health services, including family planning, among women, young people and men  
Output indicators:  
- % of community structures working in the HIV field that have mainstreamed reproductive health activities  
Baseline: to be set  
- % of health facilities that did not have a shortage of condoms, contraceptive pills or hormonal injections  
Baseline: to be set  
- % of villages located over 10 kilometres away from a health facility where community-based contraceptive distribution is taking place  
Baseline: to be set | | |
|                         | **Output 3:** Improved gains in knowledge and the adoption of safe behaviour patterns in the area of reproductive health, including HIV and AIDS, among women, men and youth  
Output indicators:  
- % of health districts implementing a communication plan on reproductive health. Baseline: 0%  
- % of persons (men and women aged over 15 years) who know signs of danger during pregnancy. Baseline: to be set  
- % of regions with community-based cultural centres providing reproductive health and HIV information to young people  
Baseline: 0%; target: 100% | | |
### UNDAF outcome: (a) accelerated economic growth is sustainable and pro-poor; (b) the quality of human capital is improved; and (c) political, administrative and economic governance is rights-based and more efficient

| Population and development | **Outcome:** A strengthened national development system to utilize disaggregated population data in national and regional development frameworks and in sectoral strategies at central and regional levels  
**Outcome indicators:**  
- Number of national and sectoral institutions that have a functional data management and information system  
- Number of regional institutions with functional data management systems | **Output 1:** Strengthened capacity of the statistical system, at central and local levels, to collect, process, analyse, store and disseminate sociodemographic data disaggregated by sex, age and place of residence  
**Output indicators:**  
- Number of operational sociodemographic databases developed in support of the integrated management information system at the regional level. Baseline: 0; target: 13  
- % of data management structures at the central and regional levels producing sociodemographic data  
Baseline: to be set; target: 100% | Development partners; National Population Council; National Statistical Institute; non-governmental organizations; Ministries of: Economy and Finance; Education; Health; Social Development; Women’s Affairs; Youth World Bank; other United Nations organizations | $6.1 million (3.1 million from regular resources and 3 million from other resources) |
|---|---|---|---|---|
| Gender equality | **Outcome:** increased mainstreaming of gender issues in national development frameworks and sectoral strategies, consistent with international norms  
**Outcome indicators:**  
- Number of sector-based policies and programmes with a gender component  
Baseline: 0, target 5  
- % of laws or decrees passed to ensure implementation of the Convention on the Elimination of All Forms of Discrimination against Women. Baseline: 3%; target: 5%  
- % of women represented in parliament, government and the judicial system  
Baseline: 19% in government (2009); 31% in parliament and 26.92% serving as court judges (2008). Target: 30% | **Output 1:** Strengthened technical and institutional capacity of ministerial departments and civil society organizations to implement the national gender policy  
**Output indicators:**  
- Number of ministerial departments trained and equipped and implementing the national gender policy. Baseline: 0; target 100  
- Number of civil society organizations trained and implementing the national gender policy. Baseline: 0 | Ministries of: Economy and Finance; Education; Health; Social Development; Women’s Affairs; Youth UNDP; UNICEF; United Nations Development Fund for Women | $4 million (2 million from regular resources and 2 million from other resources) |
|  | **Output 2:** Strengthened technical and institutional capacity of organizations working to eliminate gender-based violence, including female genital cutting and early marriages  
**Output indicators:**  
- Number of implementing partners with the capacity to implement strategies to eliminate gender-based violence. Baseline: 0  
- Number of regional consultation frameworks on gender-based violence established and operationalized. Baseline: 4; target: 13 |  |  | Total for programme coordination and assistance: $1.6 million |