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

**Second regular session 2012**

4 to 10 September 2012, New York

Item 5 of the provisional agenda

**UNFPA – Country programmes and related matters**

**UNITED NATIONS POPULATION FUND**

**Final country programme document for Costa Rica**

Proposed indicative UNFPA assistance: $4.5 million: $3.3 million from regular resources and $1.2 million through co-financing modalities and/or other resources, including regular resources


Cycle of assistance: Fourth

Category per decision 2007/42: B

Proposed indicative assistance (in millions of $):

<table>
<thead>
<tr>
<th>Strategic Plan Outcome Area</th>
<th>Regular resources</th>
<th>Other</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender equality and reproductive rights</td>
<td>0.8</td>
<td>0.3</td>
<td>1.1</td>
</tr>
<tr>
<td>Young people’s sexual and reproductive health and sexuality education</td>
<td>1.3</td>
<td>0.6</td>
<td>1.9</td>
</tr>
<tr>
<td>Data availability and analysis</td>
<td>0.9</td>
<td>0.3</td>
<td>1.2</td>
</tr>
<tr>
<td>Programme coordination and assistance</td>
<td>0.3</td>
<td>-</td>
<td>0.3</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>3.3</strong></td>
<td><strong>1.2</strong></td>
<td><strong>4.5</strong></td>
</tr>
</tbody>
</table>
I. Situation analysis

1. Costa Rica, a higher middle-income country, ranks high on the UNDP human development index. The country has made significant investments in social services, which have led to improved social indicators. Nevertheless, 24.2 per cent of the population lived in poverty in 2010. In addition, social inequalities have increased in the last two decades; the Gini coefficient, which measures inequality, is now 0.423. Women, youth, adolescents, indigenous people, persons of African descent, and migrants are subject to large disparities.

2. The population, estimated at 4.3 million in 2011, is growing at an annual rate of 1.1 per cent. According to the 2000 census, indigenous people account for 1.7 per cent of the total population, people of African descent represent 1.9 per cent, and 7.8 per cent are migrants.

3. Although the population is mostly young and/or of working age, the country faces a demographic transition that will reverse the dependency ratio. There is a high level of coverage of health services and education for adolescents and young people. Nevertheless, there is a need to improve access to high-quality services for this segment of the population.

4. The total fertility rate dropped from 2.0 children per woman in 2005 to 1.8 in 2010. The contraceptive prevalence rate is 82.2 per cent. In 2010, 11.6 per cent of women of reproductive age had unmet family planning needs, and 47 per cent of women reported that their last pregnancy was unwanted. Adolescent fertility is high; 18.7 per cent of births occur within this age group.

5. The maternal mortality ratio declined from 39 maternal deaths per 100,000 live births in 2005 to 21 in 2010. However, the maternal mortality ratio is higher in the provinces of Limón (52) and Puntarenas (41). In 2010, skilled health personnel attended 95.5 per cent of births at the national level.

6. In the last 10 years, HIV/AIDS has primarily affected men in high-risk groups and young people. In 2005, 43.3 per cent of registered HIV cases occurred among people aged 15-24. Only 31.1 per cent of young people correctly identified ways of preventing HIV.

7. Gender inequalities persist, despite national advances in establishing legal and policy frameworks. Gender-based violence is a serious concern. The number of gender-related female homicides increased from 42 in 2007 to 52 in 2011, and the sexual violence rate increased from 94.1 per 100,000 in 2000 to 121.5 in 2007.

8. The availability of data on vulnerable populations is critical for the analysis of social inequalities and subnational disparities. There are gaps in the areas of population dynamics, gender-based violence, sexual and reproductive health, young people, the elderly and migrants.

9. Costa Rica is prone to hurricanes and floods. There is a need for disaster-preparedness measures, including gathering data for risk management and implementing age- and gender-sensitive protocols that address the needs of vulnerable populations.

II. Past cooperation and lessons learned

10. The UNFPA third country programme, 2008-2012, focused on: (a) the formulation and development of national and institutional policies and action plans on gender, sexual and reproductive health, youth and the elderly; (b) the collection and production of statistics on
sexual and reproductive health, young people, employment and migration; and (c) the development of methodologies to promote reproductive rights and prevent violence against women and HIV, particularly among adolescents, young people and migrants, including during humanitarian emergencies.

11. Programme achievements included: (a) the formulation and development of the national gender policy, national strategic health plan for adolescents, HIV strategic plan, national sexuality plan and national ageing plan; (b) the generation of statistical data, such as the national survey on sexual and reproductive health, national youth survey and two county surveys on youth, employment and migration; (c) the development of strategies to promote reproductive rights, prevent violence against women and prevent HIV; and (d) the provision of humanitarian assistance during natural disasters.

12. UNFPA and the Government conducted the final programme evaluation in 2011. The main conclusions were: (a) technical support provided to partners enabled efficient programme implementation, monitoring and evaluation; (b) the country programme and partners contributed to the advancement of the Programme of Action of the International Conference on Population and Development; (c) participation in inter-agency coordination meetings helped to position and articulate the UNFPA mandate at the inter-agency level; and (d) alliances with the media helped to strengthen the visibility of UNFPA in the public arena.

13. Challenges and lessons learned included the need to: (a) strengthen the capacity of the UNFPA country office to mobilize resources; (b) integrate national institutions and civil society organizations to achieve programme outputs; and (c) sharpen the focus on young people, migrants, indigenous people and persons of African descent.

III. Proposed programme

14. The proposed country programme is aligned with national priorities and the United Nations Development Assistance Framework (UNDAF), 2013-2017; the Programme of Action of the International Conference on Population and Development; the Millennium Development Goals; and the UNFPA strategic plan outcomes. The programme, which builds on lessons learned, has been developed under the leadership of the Government and in collaboration with civil society organizations, donors and United Nations organizations.

15. Using the results of a risk analysis, UNFPA and the Government designed a programme based on the following assumptions: (a) the financial crisis of the social security system will not affect reproductive health services; (b) conservative positions will not influence political decision makers nor affect the achievement of programme results; and (c) co-financed resources will be mobilized for the programme.

16. The proposed programme addresses the recommendations of the final programme evaluation and incorporates the following strategies: (a) capacity development; (b) programmatic approaches; and (c) alliances and advocacy. The strategies will contribute to national efforts to reduce inequalities.

17. The proposed strategies for capacity development include the design of a capacity training plan that will: (a) improve institutional normative and technical capacity and inter-institutional collaboration to implement, monitor and evaluate policies, strategic plans and programmes; and (b) strengthen civil society organizations to promote their participation in intersectoral committees and commissions related to sexual and reproductive rights and to enable them to better address gender-based
violence and sexual and reproductive health services in emergency situations.

18. The strategies for programmatic approaches include: (a) mainstreaming human rights, gender equality and intercultural diversity in programme planning and implementation; (b) harmonizing data to link development, population dynamics, gender-based violence and sexual and reproductive health; and (c) improving access to and the quality of sexual and reproductive health services, including sexuality education and HIV prevention, focusing on prioritized groups.

19. The programme will apply strategies for alliances and advocacy to: (a) develop an advocacy and communications plan to strengthen the role of UNFPA; (b) design a resource-mobilization plan, including government co-financing agreements for programme sustainability; and (c) strengthen the positioning of UNFPA topics in the United Nations country team.

Gender equality and reproductive rights

20. The strategic plan outcome, ‘gender equality and reproductive rights’, relates to the UNDAF in the area of promoting public safety, social coexistence and access to justice. It specifically relates to the following UNDAF outcome: public institutions and civil society at national and local levels are strengthened to develop cultural practices that will promote peace and the development of strategies to prevent, and provide treatment for the victims of, violence and crime.

21. Output 1: Government institutions and civil society organizations have strengthened capacity to provide a coordinated response to prevent and address gender-based violence and sexual violence, including in emergency situations. UNFPA will achieve this output by building on the achievements of the previous programme in coordination with the Government and civil society organizations by: (a) supporting the implementation of the protocol on comprehensive care for female victims of gender-based violence, including sexual violence; (b) strengthening the inter-institutional response to prevent gender-based violence in cooperation with the justice system, police, Social Security Institute and civil society organizations; and (c) improving the capacity of the National Institute for Women to lead and coordinate an intersectoral and inter-institutional response to gender-based violence, including the generation of data.

Young people’s sexual and reproductive health and sexuality education

22. The strategic plan outcome, ‘young people’s sexual and reproductive health and sexuality education’, relates to the UNDAF in the area of promoting equality, equity and access to opportunities for human development. It specifically relates to the following UNDAF outcome: strengthened capacity of public, private and community institutions to analyse, manage and respond to human rights and improve conditions of human development, giving priority to vulnerable populations.

23. Output 1: Government institutions and civil society organizations have strengthened capacity to implement and monitor the strategic plan of the national policy on sexuality, and the HIV strategic plan, prioritizing men in high-risk groups and young migrants. UNFPA will achieve this output by: (a) strengthening the technical capacity of national institutions and civil society organizations to implement and monitor the strategic plan of the national policy on sexuality (including secondary school sexuality education), the HIV strategic plan and the national strategic plan for adolescents; and (b) supporting intersectoral coordination, prioritizing men in high-risk groups, young people and migrant populations.
24. **Output 2:** Government institutions and civil society organizations have strengthened capacity to improve access to and the quality of sexual and reproductive health services, especially for underserved youth and adolescents, including migrants and indigenous populations. The programme seeks to improve the quality and accessibility of sexual and reproductive health services, especially for vulnerable populations. UNFPA will support the: (a) institutionalization of good practices on user-friendly health services; (b) improvement of knowledge of young people on preventing HIV and sexually transmitted infections; and (c) development, implementation and expansion of an inter-institutional model to prevent adolescent pregnancy and integrate sexual and reproductive health services.

**Data availability and analysis**

25. The strategic plan outcome, ‘data availability and analysis’, relates to the UNDAF in the area of strengthening democratic governance. It specifically relates to the following UNDAF outcome: the capabilities of the national statistical system (law 7839) are strengthened to generate, analyse and use relevant information to develop, implement, monitor and evaluate public policies.

26. **Output 1:** Government institutions have strengthened capacity to harmonize statistical data on population dynamics, gender-based violence, sexual and reproductive health, young people and the elderly, to facilitate evidence-based decision-making and policy formulation, implementation, monitoring and evaluation. The programme will improve the generation and utilization of harmonized data to address social and economic disparities. The programme will strengthen institutional capacity and mechanisms to ensure the leading and coordinating role of the National Institute for Statistics and Censuses in managing a harmonized national statistical system. The programme will support: (a) the monitoring of Millennium Development Goals 5 and 6 (on improving maternal health and combating HIV/AIDS); (b) data analysis; and (c) the elaboration of prospective planning scenarios to formulate, implement, monitor and evaluate public policies.

**IV. Programme management, monitoring and evaluation**

27. National execution continues to be the preferred implementation arrangement for UNFPA. UNFPA will carefully select implementing partners based on their ability to deliver high-quality programmes. UNFPA will also continuously monitor the performance of its partners and periodically adjust implementation arrangements, as necessary. The country office will ensure that the appropriate risk analysis is performed in conformity with the harmonized approach to cash transfers.

28. The UNFPA country office includes staff funded from the UNFPA institutional budget who perform management and development-effectiveness functions. UNFPA will allocate programme resources for staff members who provide technical and programme expertise, as well as associated support, to implement the programme.

29. The programme will promote South-South cooperation to enhance national capacity. National and regional sources will provide technical assistance. In the event of an emergency, UNFPA may, in consultation with the programme country, reprogramme activities, especially life-saving measures, to better respond to emerging issues.
## RESULTS AND RESOURCES FRAMEWORK FOR COSTA RICA

### National priority: promotion of public safety, social coexistence and access to justice
**UNDAF outcome:** public institutions and civil society at national and local levels are strengthened to develop cultural practices that will promote peace and the development of strategies to prevent, and provide treatment for the victims of, violence and crime

<table>
<thead>
<tr>
<th>UNFPA strategic plan outcome</th>
<th>Country programme outputs</th>
<th>Output indicators, baselines and targets</th>
<th>Partners</th>
<th>Indicative resources</th>
</tr>
</thead>
</table>
| Gender equality and reproductive rights are advanced | Outcome 1: Government institutions and civil society organizations have strengthened capacity to provide a coordinated response to prevent and address gender-based violence and sexual violence, including in emergency situations | Output indicators:  
- Number of institutions and civil society organizations that provide a coordinated response to gender and sexual violence according to agreed norms  
  Baseline: 1; Target: 4  
- Number of institutions implementing the inter-institutional protocol on comprehensive care for victims of sexual violence during the first 72 hours after the sexual assault  
  Baseline: 0; Target: 5 | Ministry of Justice; Ministry of Public Security; Social Security Institute; National Women’s Institute; Non-governmental organizations | $1.1 million ($0.8 million from regular resources and $0.3 million from other resources) |

### National priority: promotion of equality, equity and access to opportunities for human development
**UNDAF outcome:** strengthened capacity of public, private and community institutions to analyse, manage and respond to human rights and improve conditions of human development, giving priority to vulnerable populations

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| Young people’s sexual and reproductive health and sexuality education are improved | Outcome 1: Government institutions and civil society organizations have strengthened capacity to implement and monitor the strategic plan of the national policy on sexuality, and the HIV strategic plan, prioritizing men in high-risk groups and young migrants | Output indicators:  
- Number of institutions and civil society organizations that implement, monitor and evaluate the strategic plan of the national policy on sexuality and the HIV strategic plan  
  Baseline: 1; Target: 7  
- Number of intersectoral committees and commissions that include sexual and reproductive health norms or specific actions within their policies, plans and priorities, especially those related to young people and migrants  
  Baseline: 4; Target: 7  
- Number of high school centres that include sexuality education according to the strategic plan of the national policy on sexuality  
  Baseline: 0; Target: 15 | Ministry of Health; Ministry of Public Education; national youth council; Social Security Institute; National networks of young people; non-governmental organizations | $1.9 million ($1.3 million from regular resources and $0.6 million from other resources) |
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</table>
| Output 1: Government institutions have strengthened capacity to harmonize statistical data on population dynamics, gender-based violence, sexual and reproductive health, young people and the elderly, to facilitate evidence-based decision-making and policy formulation, implementation, monitoring and evaluation | **Output indicators:**  
- Number of selected institutions that implement the guidelines of the national statistical system to update harmonized statistics on gender-based violence, sexual and reproductive health, young people and elderly  
Baseline: 1; Target: 5  
- Number of selected institutions that produce and use harmonized data to formulate, implement and monitor public policies focusing on young and elderly people, with an intercultural perspective  
Baseline: 2; Target: 6 | National Institute for Statistics and Censuses; National Institute for Women; national youth council; Ministries of: Economy, Industry and Commerce; Health; Labour and Social Security; National Planning and Economic Policy; Public Education; and Public Security; the justice system; Social Security Institute; universities | $1.2 million ($0.9 million from regular resources and $0.3 million from other resources) |

**Data availability and analysis are improved**

Outcome indicators:
- The 2010 round of population and housing censuses is completed  
Baseline: 0; Target: 1  
- A national household survey enabling the estimation of indicators related to Millennium Development Goal target 5B (relating to the achievement of universal access to reproductive health) has been conducted within the last five years  
Baseline: 0; Target: 1

<table>
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| Output 2: Government institutions and civil society organizations have strengthened capacity to improve access to and the quality of sexual and reproductive health services, especially for underserved youth and adolescents, including migrants and indigenous populations | **Output indicators:**  
- Number of selected counties that implement the model for preventing adolescent pregnancy and providing comprehensive care  
Baseline: 0; Target: 11  
- Number of primary health-care centres that implement user-friendly services or good practices for sexual and reproductive health care for underserved adolescents and migrants and indigenous youth is increased by public and civil society institutions in selected counties  
Baseline: 3; Target: 6 | National priority: strengthening democratic governance  
UNDAF outcome: the capabilities of the national statistical system (law 7839) are strengthened to generate, analyse and use relevant information to develop, implement, monitor and evaluate public policies | | |