First regular session 2021
1 to 4 February 2021, New York
Item 8 of the provisional agenda
UNFPA – Country programmes and related matters

United Nations Population Fund

Country programme document for Azerbaijan

Proposed indicative UNFPA assistance: $4.4 million: $2.9 million from regular resources and $1.5 million through co-financing modalities or other resources

Programme period: Five years (2021-2025)

Cycle of assistance: Fifth

Category per decision 2017/23: Pink

Alignment with the UNSDCF Cycle United Nations Sustainable Development Cooperation Framework, 2021-2025

Proposed indicative assistance (in millions of $):

<table>
<thead>
<tr>
<th>Programme outcome areas</th>
<th>Regular resources</th>
<th>Other resources</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outcome 1 Sexual and reproductive health</td>
<td>1.0</td>
<td>0.6</td>
<td>1.6</td>
</tr>
<tr>
<td>Outcome 3 Gender equality and empowerment of women</td>
<td>0.8</td>
<td>0.5</td>
<td>1.3</td>
</tr>
<tr>
<td>Outcome 4 Population dynamics</td>
<td>0.8</td>
<td>0.4</td>
<td>1.2</td>
</tr>
<tr>
<td>Programme coordination and assistance</td>
<td>0.3</td>
<td>-</td>
<td>0.3</td>
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<tr>
<td>Total</td>
<td>2.9</td>
<td>1.5</td>
<td>4.4</td>
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</tbody>
</table>
I. Programme rationale

1. Azerbaijan is the largest country in the South Caucasus, with a territory of 86,600 square kilometres and a population of over 10 million. Urban residents constitute 52.8 per cent of the population. The country has a relatively young population structure although the phenomenon of population aging is becoming visible. Fertility rates have declined steadily over the past several years (down to 1.8 in 2019). The country continues experiencing severely distorted sex ratios at birth, favouring male populations (115 boys per 100 girls).

2. The Common Country Analysis in 2019 confirms that over the course of the past years, Azerbaijan has maintained its status of an upper middle-income country, with a per capita gross domestic product of $5,769 in 2018. The overall Human Development Index for 2019 was high (0.754, 87th rank). Though rich hydrocarbon reserves have contributed to considerable economic growth over the past two decades, underdeveloped institutional capacities continue impeding effective economic and social transformation. Despite substantial reduction in poverty over the last two decades (from 49.0 per cent in 2001 to 4.9 per cent in 2015), an increase was observed in official poverty statistics following currency devaluation in 2015 (5.1 per cent). The Nagorno-Karabakh conflict caused an influx of 700,000 internally displaced persons, which continues to burden the economy, health and social protection systems. The most recent outbreak of the COVID-19 pandemic has also strained existing medical, economic and social systems.

3. The maternal mortality ratio has dropped (down to 12.2 per 100,000 live births in 2018) due to improved quality of services. Women from rural and remote areas, especially those furthest behind, including refugees, internally displaced persons, survivors of violence and those with disabilities, have poor access to healthcare, including reproductive healthcare services. The latest available data from the Demographic Health Survey (2011) revealed that the rate of induced abortions in Azerbaijan is one of the highest in the region (40.9 per cent) due to low demand for family planning. Use of modern contraceptives has remained unchanged (14 per cent) among currently married women for the past ten years. Use of modern contraceptives is lower among women living in rural areas, and those less educated and poor; the unmet need for family planning is 22.7 per cent for women in the general population. There is also a lack of knowledge and information on family planning methods. The vast majority of women with a reported need for contraceptives experienced major difficulties in access due to overstretched health services where resources have been diverted to address the impact of COVID-19 on health (Rapid Gender Assessment, 2020). An effective legal and policy framework on sexual and reproductive health (SRH) is only beginning to take shape, with the national strategy and the law on reproductive health and family planning still pending approval. There is a need to enhance national institutional frameworks and capacities, especially mid-level personnel capacity to provide high-quality integrated sexual and reproductive health information and services. Lack of multi-sectoral cooperation and partnership for providing sexual and reproductive health services during the crisis is also of concern.

4. Although legal guarantees for promotion of women’s human rights are in place, gender-based discrimination and violence still happen on a large scale. The findings of the international men and gender equality survey (2018) showed that approximately one in three men (32.5 per cent) reported perpetrating and almost a similar number of women reported experiencing (32.1 per cent) physical violence, which is one of the major barriers for achieving the transformative result on gender based violence (GBV) and harmful practices including gender-biased sex selection favouring a male child and early marriage. Underdeveloped multi-sectoral cooperation and coordination frameworks and the lack of institutional capacities to prevent or respond to GBV leave hundreds of women, especially those furthest behind, vulnerable to abuse. The patriarchal social norms contribute to multiple forms of violence and discrimination against women. A high proportion of women (43.4 per cent) lacks information on where to seek help if someone experiences domestic
violence (Rapid Gender Assessment, 2020). The effective advocacy action is compromised by a lack of strong civil society efforts for gender equality while the lack of sustainable funding streams and underdeveloped capacities undermines effective operations of local non-governmental organizations for challenging male-dominated power structures.

5. The principal objective of the long-term national population policy reflected in the Concept of Demographic Development of the Republic of Azerbaijan (1999) was to ensure quantitative and qualitative population growth by curbing negative demographic trends, consistent with the long-term national development strategy. There has been notable progress in the generation of reliable socio-economic and demographic data through censuses (including the last one, held in 2019 with UNFPA support), household surveys, civil and vital registration systems. Nonetheless, underdeveloped institutional capacities to generate, analyse and use disaggregated high-quality population data impedes effective utilization of population data systems to advance development processes. Persistent lack of availability and use of national and subnational data as well as population forecasts affects effective planning, resource allocation and service delivery.

6. UNFPA contributed to government efforts to advance the International Conference on Population and Development (ICPD) agenda through the fourth cycle of its programmatic interventions in Azerbaijan. The advocacy and technical support provided by UNFPA led to the development of a new reproductive health strategy. A series of successful evidence-based advocacy and policy initiatives were introduced to prevent and respond to GBV and harmful practices, including the recently adopted national action plan for promoting the value of a girl child. Alongside these, two major projects were launched to improve the rights and well-being of women and girls with disabilities and the elderly.

7. The final evaluation of the fourth country programme revealed a high degree of relevance to national priorities and international development frameworks. The major recommendations were as follows: (a) continue promotion of SRH and rights within the new context; (b) strengthen efforts to monitor the implementation of human rights treaties and ensure institutionalization of behaviour-change communication strategies; (c) continue contributing to evidence and rights-based policy formulation and implementation and strengthening of national institutional capacities to use population data and information.

8. Building on the progress and the lessons/evidence from the previous implementation period, the following strategies will be employed: (a) scale up the approaches to mainstream the needs of those furthest behind; (b) develop and apply mechanisms and tools for institutional adaptation for partner institutions; (c) take advantage of emerging opportunities to boost public-private partnerships to advance ICPD agenda.

9. The set of strategic interventions identified for the next cycle of UNFPA support to the Government of Azerbaijan is complementary to the actions envisioned by the draft United Nations Sustainable Development Cooperation Framework (UNSDCF), 2021-2025 through contribution to government efforts to end preventable maternal deaths, reduce the unmet need for family planning; and eliminate GBV and harmful practices.

10. The UNSDCF has a standalone outcome on gender equality, and UNFPA as the Chair of the Gender Theme Group has been acknowledged by the United Nations country team as the lead agency that will use its unique position with the Government, United Nations and partners for evidence-based advocacy and policy dialogue to foster development of an improved enabling environment for sexual and reproductive health and rights and response to GBV and discrimination. UNFPA roles within the UNSDCF also include strengthening capacities of partners to produce high-quality disaggregated data and analysis for evidence-based policies. To boost the impact, effectiveness and efficiency of the interventions, UNFPA will also recognize and leverage the opportunities for joint efforts with other United Nations agencies by building upon its successful partnerships; these include but are not limited to joint advocacy efforts on SRH with the World Health Organization (WHO), on disability and
data intelligence with UNDP, on youth with UNICEF, and on gender stereotypes and GBV with UN-Women.

II. Programme priorities and partnerships

11. The fifth country programme will facilitate achieving the three transformative results set forth by UNFPA on the path toward achieving the 2030 Agenda: (a) ending preventable maternal deaths; (b) ending unmet need for family planning; and (c) ending GBV and harmful practices. The strategic interventions to fulfil this long-term programme objective are informed by the priorities of the national development agenda, in line with the Government commitment to the Sustainable Development Goals (SDGs), the achievement of the ICPD Programme of Action and the Nairobi commitments. This includes prioritization of interventions to improve maternal and child health, promote family planning, eliminate GBV and discrimination, and prioritize the needs of the most vulnerable groups.

12. The evidence-based priorities of the current programme cycle contribute to implementation of the international human rights frameworks Azerbaijan is a party to, including the Convention on the Elimination of All Forms of Discrimination against Women, by complementing inter alia the two strategic priorities of the UNSDCF geared towards strengthening the institutions for better public and social service delivery as well as creation of a gender equitable society that empowers women and girls.

13. The proposed programme aims to enable all women and girls, especially those furthest behind, to utilize integrated SRH services and exercise reproductive rights, free of any form of coercion, discrimination and violence in line with the aspirations for the decade of action. The country programme focuses on institutional accountability and advocacy for improved legal and policy framework on SRH to achieve all three transformative results and related SDGs. It is expected that the proposed programme will contribute to reduction of unmet need for family planning by achieving an increase in the contraceptive prevalence rate by one third. The strategic interventions to fill the gap between women’s reproductive intentions and their reproductive behaviour will include advocacy for increased national allocations for family planning, improved data and evidence on the major determinants of unmet need for the purposes of informed policies, integration of comprehensive sexuality education into the secondary school curricula as well as revision and enforcement of the clinical protocols on family planning counselling and advice. The programme strategies reaffirm UNFPA commitment to the principles of human rights and gender equality and prioritize the needs and expectations of the furthest behind population groups by building inter alia resilience to nationwide pandemic outbreaks. Based on the major principles of UNFPA strategic plan and the recommendations of the evaluation the proposed programme focuses on adolescent girls, women and young people, particularly for those residing in the rural and remote areas, women and girls – survivors of different forms of GBV, women and girls affected by harmful practices, women and young people with different forms of disabilities, and elderly women.

14. The country programme interventions are based on the principles of resilience, sustainability and accountability to explore and operationalize the most sustainable solutions through improved legal and policy frameworks, including in the situations of crises and recurrent vulnerability. Such an approach allows improved adaptability to humanitarian context, including through contingency planning and response efforts envisioned, in partnership with the United Nations country team, in the UNSDCF.

15. The proposed results will be achieved through advocacy, policy dialogue and knowledge management, a strong multisectoral engagement that recognizes existing challenges and opportunities and takes advantage of synergies presented by the changing development financing landscape. Alongside expanding ongoing partnerships with the Government at both national and subnational levels (Ministry of Health, Ministry of Labour and Social Protection of the Population, State Committee for Family, Women and Children's Affairs, State Statistical Committee), the international development sector, civil society, academia and
other partners, UNFPA will build a sustainable strategic alliances with private-sector companies and non-traditional donor Governments to leverage the existing resources and expertise as well as galvanize innovation and sustainability. Specific attention will be paid to strengthening collaboration and integration with United Nations agencies through joint planning and programming. South-South and triangular cooperation will constitute critical components of partnership for achieving the envisioned results.

16. The country programme proposes a series of interrelated and interlinked interventions to ensure universal access to sexual and reproductive health through the following UNFPA Strategic Plan, 2018-2021 outcome areas: (a) sexual and reproductive health and rights; (b) gender equality and women’s empowerment; and (c) population dynamics.

A. Sexual and reproductive health

17. Output 1. Increased institutional capacities for development of an enabling environment to deliver integrated sexual and reproductive health services to all women and young people, with a focus on those furthest behind.

18. This output contributes to the Cooperation Framework’s outcome 2 on public and social service delivery by ensuring that all women and young people can utilize high-quality SRH services. Strategic interventions will include: (a) developing policy frameworks and institutional mechanisms for provision of high-quality integrated SRH services; (b) enhancing multisectoral partnerships for improved provision of SRH services during humanitarian crises; (c) strengthening capacities of the health workforce, especially mid-level personnel, for delivery of high-quality SRH services; (d) establishing partnerships with the State medical insurance agency to advocate for provision of affordable SRH services, especially to those furthest behind; (e) advocating for integration of an age-appropriate reproductive health education module into the secondary school curriculum, including through an out-of-school peer education model in partnership with the civil society actors.

B. Gender equality and women empowerment

19. Output 2. Improved enabling environment for delivery of multisectoral services to prevent and respond to GBV and harmful practices, with a focus on international human rights standards.

20. The proposed output will contribute to the Cooperation Framework’s outcome 5 by building national mechanisms to ensure that the women and girls are protected from discrimination and violence. The strategic interventions will include: (a) developing and operationalizing multisectoral partnership frameworks to prevent/respond to GBV and harmful practices, including the skewed sex ratios at birth; (b) strengthening multisectoral capacities to prevent and respond to GBV and harmful practices; (c) advocating for improved accountability mechanisms to advance gender equality and empower women and girls to exercise their reproductive rights; (d) mobilizing civil society action to foster gender-transformative approaches for the elimination of discriminatory social norms and harmful practices, including the phenomenon of ‘son preference’.

C. Population dynamics

21. Output 3. Improved institutional capacities to produce, analyse and use data and evidence for informed policy and decision-making to track emerging population dynamics and foster sustainable development

22. The proposed output contributes to the Cooperation Framework’s outcome 3 on data and evidence by ensuring availability and use of disaggregated high-quality data for informed decision-making: (a) enhancing institutional capacities for continued production and use of disaggregated high-quality population data in a user-friendly format for informed programming, planning and monitoring of progress on the Nairobi commitments and the SDGs; (b) building up a knowledge base through assessment and in-depth analysis of
population dynamics, SRH and gender equality, with particular focus on those furthest behind; (c) advocating for mainstreaming demographic intelligence to analyse correlations between demographic changes and socio-economic development processes; (d) continuing policy dialogue for improved understanding of inter-linkages between population trends and sustainable development.

III. Programme and risk management

23. The proposed programme represents a product of a participatory negotiation process with the Government of Azerbaijan, civil society actors, United Nations organizations, bilateral stakeholders and beneficiaries, including representatives of those furthest behind. The document provides a conceptual framework for mutual accountability as regards UNFPA contribution to national priorities and development needs.

24. The fifth programme of cooperation between UNFPA and the Government of Azerbaijan will be implemented in coordination with the Ministry of Foreign Affairs, using direct execution as a preferred implementation modality. The rights and results-based programming principles will be used to secure effective programme implementation. UNFPA will maintain well-established and effective partnerships while pursuing new alliances based on its comparative advantage, strategic positioning and ability to deliver high-quality programme results.

25. UNFPA will maintain strong collaboration and coordination with other United Nations agencies in the framework of the UNSDCF and the Common Chapter to ensure a coherent, integrated and effective response in support of national priorities and commitments for achieving the three UNFPA transformative results and the related SDGs.

26. An integrated partnerships and resource mobilization plan will guide efforts to leverage strategic partnership opportunities with the Government, international multilateral and bilateral partners, the private sector, and United Nations organizations to secure the critical support and resources necessary for effective programme implementation, in line with the respective UNFPA policies and procedures.

27. A non-resident UNFPA country director based in Ankara will oversee programme implementation, with national staff performing management and development effectiveness functions. It is expected that the functions of the Assistant Representative will be assumed by the Head of Office following a reclassification of the post. The country office will also rely on national and international expertise and seek technical support from the regional office, headquarters and other units, including through South-South and triangular cooperation, as needed.

28. The proposed programme is informed by an analysis of the risks. These include but are not limited to escalation of the conflict in and around the Nagorno-Karabakh region of the Republic of Azerbaijan in 2020; recurrent outbreaks of the COVID-19 pandemic; lack of common understanding regarding the country obligations under international human rights treaties; funding and financing shortage; deeply entrenched patriarchal attitudes and behaviours that limit opportunities for women and girls; limited and underdeveloped civil society capacities.

29. The series of mitigation strategies address these risks through expanded partnerships, optimized resources and opportunities, systematic monitoring of programme interventions and quality assurance, advocacy for prioritization of reproductive health and rights in the political agenda, and regular engagement with senior government officials, development partners, civil society and community groups.

30. This country programme document outlines UNFPA contributions to national results and serves as the primary unit of accountability to the Executive Board for results alignment and resources assigned to the programme at the country level. Accountabilities of managers at the country, regional and headquarters levels with respect to country programmes are
prescribed in the UNFPA programme and operations policies and procedures, and the internal control framework.

IV. Monitoring and evaluation

31. UNFPA and the Government of Azerbaijan agreed that the proposed programme will be monitored to assess the impact, effectiveness and efficiency of the strategic interventions, tracking and reporting on programme results, as well as ensuring greater accountability and ownership.

32. Nationally owned sources of data and evidence will be used alongside available international sources to track progress on national commitments towards achieving the transformative results and the related SDGs. The programme will be monitored using a clearly defined results and resources framework, with specific targets for each output indicator.

33. A monitoring and evaluation framework will be deployed alongside the corporate strategic information system, to periodically track progress and make adjustments, through a set of specific and measurable performance indicators, in line with the strategic plan requirements and evolving country needs.

34. The tracking tools for field monitoring visits will be used to ensure timely implementation of monitoring recommendations as a mechanism to inform and adjust programme design and execution. The health management information systems will be further strategized to ensure the availability of SRHR data, including on family planning, and to support health planning and monitoring. The implementation of the country programme will benefit from the annual reviews. An independent evaluation of the country programme will be conducted in the penultimate year of implementation, in accordance with UNFPA evaluation guidelines, to assess the relevance, coherence, efficiency, effectiveness, impact and sustainability of UNFPA support as well as making recommendations to guide the next programme cycle. The evaluation will be carried out as an inclusive and participatory exercise. The country programme deliverables will also be assessed as part of the UNSDCF evaluation process.

35. UNFPA will continuously strengthen the national institutional capacity of the State Statistics Committee for producing disaggregated high-quality population data in a user-friendly format for better monitoring of the transformative results, the SDGs and progress on the ICPD agenda.
## RESULTS AND RESOURCES FRAMEWORK FOR AZERBAIJAN (2021-2025)

### NATIONAL PRIORITY: Stronger institutions for better public and social services delivery

**UNSDCF OUTCOME INVOLVING UNFPA:** By 2025, people furthest behind benefit from enhanced national capacities and governance structures for social protection and quality public and social services, in line with Azerbaijan’s international commitments

**RELATED UNFPA STRATEGIC PLAN OUTCOME:** Sexual and reproductive health

<table>
<thead>
<tr>
<th>UNSDCF outcome indicator(s), baselines, target(s)</th>
<th>Country programme outputs</th>
<th>Output indicators, baselines and targets</th>
<th>Partner contributions</th>
<th>Indicative resources</th>
</tr>
</thead>
</table>
| UNFPA Strategic Plan Outcome indicator(s):      |                           | Number of basic SRH services at primary and secondary levels incorporated into the national health insurance package  
Baseline: 0 Target: 10  
Number of national policies, programmes and legislative acts on SRH endorsed at the national level  
Baseline: 3 Target: 8  
Number of regions that have capacity to implement MISP at the onset of crisis  
Baseline: 15 Target: 25 | Ministry of Health, TABIB national health insurance company, State Committee for Family, Women and Children’s Affairs, Ministry of Labour and Social Protection of the Population, State Statistical Committee, National Parliament, UN agencies, civil society organizations, media | $1.6 million  
($1.0 million from regular resources and $0.6 million from other resources) |

### NATIONAL PRIORITY: A gender-equitable society that empowers women and girls

**UNSDCF OUTCOME INVOLVING UNFPA:** By 2025, women and girls, including those furthest behind, benefit from enhanced national mechanisms that ensure they are protected from discrimination and violence and empowered to participate in all spheres of life

**RELATED UNFPA STRATEGIC PLAN OUTCOME:** Gender equality and women’s empowerment

<table>
<thead>
<tr>
<th>UNFPA Strategic Plan Outcome indicator(s):</th>
<th>Country programme outputs</th>
<th>Output indicators, baselines and targets</th>
<th>Partner contributions</th>
<th>Indicative resources</th>
</tr>
</thead>
</table>
| Proportion of births attended by skilled health personnel  
Baseline: 89%; Target: 93%  
Contraceptive prevalence rate (modern methods)  
Baseline: 14%; Target 20% | Output 1: Improved enabling environment for delivery of multisectoral services to prevent and respond to GBV and harmful practices, with a focus on international human rights standards | Number of community-level platforms to eliminate discriminatory sociocultural norms and harmful practices that affect women and girls are established and used for grass roots advocacy  
Baseline: 100; Target: 200  
GBV Essential Service Packages are integrated into the national institutional framework and operationalized  
Baseline: No; Target: Yes  
Number of institutions with improved capacities to carry out monitoring of recommendations and obligations on sexual and reproductive health and rights and gender equality as part of engagement with international human rights mechanisms | State Committee for Family, Women and Children’s Affairs, Ministry of Health, Ministry of Labour and Social Protection of the Population, State Statistical Committee, Ministry of Internal Affairs, Ministry of Justice, National Parliament, UN agencies, civil society organizations, media | $1.3 million  
($0.8 million from regular resources and $0.5 million from other resources) |
**NATIONAL PRIORITY:** Stronger institutions for better public and social services delivery

**UNSDCF OUTCOME INVOLVING UNFPA:** By 2025, quality, disaggregated and timely data is available and used to inform decision-making and policies that leave no one behind

**RELATED UNFPA STRATEGIC PLAN OUTCOME:** Everyone, everywhere, is counted, and accounted for, in the pursuit of sustainable development

| UNFPA Strategic Plan Outcome indicator(s): | Output 1: Improved institutional capacities to produce, analyse and use data and evidence for informed policy and decision-making to track emerging population dynamics and foster sustainable development | Number of UNFPA-prioritized SDG indicators developed and incorporated into the national population database for informed programming, planning and monitoring of progress on ICPD agenda  
*Baseline: 320; Target: 370*  
*Population projections at national and subnational levels, disaggregated by age, sex and location available to analyse correlations between demographic changes and socio-economic development processes  
*Baseline: No; Target: Yes*  
*Number of qualitative and quantitative research studies, reports and surveys on population dynamics, SRH and gender equality, with particular focus on those furthest behind  
*Baseline: 30; Target: 37* | State Statistical Committee, Ministry of Labour and Social Protection of the Population, State Committee for Family, Women and Children’s Affairs, Ministry of Health, Ministry of Youth, National Parliament, UN agencies, civil society organizations, media  
*Output 1: Improved institutional capacities to produce, analyse and use data and evidence for informed policy and decision-making to track emerging population dynamics and foster sustainable development* | $1.2 million ($0.8 million from regular resources and $0.4 million from other resources) |

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requirements, particularly with CEDAW

Baseline: 10; Target: 20