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Programme, the United Nations  
Population Fund and the United  
Nations Office for Project Services**

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**UNFPA – Country programmes and related matters**

**United Nations Population Fund**

**Country programme document for Thailand**

Proposed indicative UNFPA assistance:	\$5.8 million: \$3.8 million from regular resources and \$2 million through co-financing modalities or other resources
Programme period:	Five years (2022-2026)
Cycle of assistance:	Twelfth
Category:	Tier III
Alignment with the UNSDCF Cycle	United Nations Sustainable Development Cooperation Framework, 2022-2026

*Note:* The present document was processed in its entirety by UNFPA.

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## I. Programme rationale

1. Thailand has achieved notable success in economic growth, highlighted by the achievement of upper-middle-income country status in 2011. With a gross domestic product of \$543.7 billion in 2019, making it the second-largest economy in Southeast Asia, Thailand has seen a significant increase in its Human Development Index level, from 0.572 in 1990 to 0.765 in 2019; it is now categorized as a country with a high level of human development.

2. The Government has shown a strong commitment to the Sustainable Development Goals (SDGs) and the International Conference on Population and Development (ICPD) Programme of Action. The country made voluntary commitments at the Nairobi Summit on ICPD25 and substantial progress in the implementation of the 2030 Agenda; it has achieved most of its SDG targets. Through universal health coverage, sexual and reproductive health services have been widely covered at subnational levels.

Despite the rapid progress, Thailand faces several development challenges, identified in the common country analysis (CCA). A rapid demographic transition effectively shrinks the proportion of working-age people relative to older people. Thailand must find ways to raise productivity, invest in skills development, and further strengthen its healthcare and social protection systems and leverage this 'longevity dividend'. A life-cycle approach is called for to address population ageing. Also, limited opportunities, including access to education, sanitation and financial services, and barriers such as geography, socio-economic status and ethnicity, prevent people from fulfilling their potential and exacerbate inequalities. The population groups identified as most at risk of being left behind include adolescents and youth, women, people with disabilities, ethnic minorities, migrants, and lesbian, gay, bisexual, transgender and intersex (LGBTI) communities.

3. Thailand is experiencing a rapid demographic transition, with a steadily declining fertility rate, resulting in a high dependency ratio. The population is ageing, yet many people are not socio-economically equipped to live healthy and prosperous elderly lives. The number of people aged 60 and over in Thailand stands at about 13 million, accounting for 20 per cent of the population; around 8 million (55 per cent) are women. By 2050, the number of older persons is expected to increase to 20 million in Thailand, accounting for one-third (35.8 per cent) of the total population. This is due largely to the country's continuously low fertility rate since 2000. While most of the older people report that they are satisfied with their financial status, 25 per cent face a higher risk of poverty than the average because of being unable to work or earning a low income. Around 34 per cent of the elderly population lives below the poverty line – a figure that has likely increased because of the COVID-19 pandemic; this may result in a greater reliance of older individuals and their family members on public social support systems that are already under pressure. With the population ageing, gender inequality and poverty is becoming even more challenging. As issues around low fertility and population ageing are evolving, the country will need the right set of policies that can equip individuals, families and societies to address the challenges and maximize the productivity potential of its population.

4. With regards to the three UNFPA transformative results, the CCA highlighted key areas that need special attention. While the country has made good progress in reducing maternal deaths (down to 31 per 100,000 live births, well below the global SDG target), teenage pregnancy is still prevalent. The adolescent birth rate is 31.5 per 1,000 aged 15-19 years in 2019; the figures are higher among the furthest behind population groups. Premarital conception among adolescents is 36 per cent, the highest in the Association of Southeast Asian Nations (ASEAN) region. A 2019 report indicated that the number of deliveries by women below age 20 was 72,566 (including 70,181 aged 15-19 years), with 6,543 being repeat pregnancies.

5. The unmet need for contraception, while low among all women, increased from 6.2 per cent in 2016 to 8 per cent in 2019. The figure is higher among married adolescents (17.1 per cent) and is increasing among unmarried adolescents and youth. The 2019 report also noted that around 40 per cent of those who had an unsafe abortion had never used any methods of

contraception; this indicates a significant unmet need for family planning among adolescents. Young people, especially among ethnic minorities and those with disabilities, lack adequate and comprehensive information and services on sexual and reproductive health. Thailand aims to halve teenage pregnancy by 2026; the emphasis is on young people acquiring family-planning knowledge and skills and exercising their rights on sexual and reproductive health.

6. Gender-based violence, underpinned by harmful social norms, remains prevalent and is a barrier to women's empowerment in Thailand. Around 15 per cent of all women experience psychological, physical or sexual violence in their lifetime. One in six of them has faced intimate partner violence; and more cases are underreported. Gender-based violence response services, including for intimate partner violence, are neither effective nor coordinated between line ministries, due to the lack of policy harmonization.

7. The CCA highlighted that data from different sources remain inconsistently collated and analysed, and their use in policy deliberations and decision-making has been limited. While Thailand has a strong national capacity to collect and analyse data and to generate demographic analysis, using digital solutions and innovative approaches such as big data and national transfer accounts, there are some gaps. The country is facing the challenge of insufficiently disaggregated data for assessing its SDG indicators and for addressing inequalities and gender-based violence.

8. As indicated in the CCA, in 2020, the COVID-19 pandemic in Thailand was relatively well contained. However, the resurgence of COVID-19 cases in April 2021 put substantial pressure on the health systems, harmed the socio-economic health of the country and exposed and exacerbated pre-existing imbalances, inequalities, vulnerabilities and risks. Analysis shows the COVID-19 pandemic has had a disproportionate impact, in terms of employment, access to services and an increase in violence, on vulnerable populations, including women, the elderly, youth, LGBTI persons, people with disabilities, the poor and migrants.

9. According to the CCA, Thailand is vulnerable to climate change. It ranked fifth globally (2008-2018) in terms of the number of people affected and the economic cost of disasters, in particular floods and droughts, with the impact greatest on vulnerable groups, particularly women and girls. Disaster and climate risk pose a considerable and increasing threat to the country's development trajectory, requiring increased efforts to invest further in resilience and strengthen disaster preparedness and response.

10. The design of the new country programme has been informed by the recommendations and lessons learned from the evaluation of the previous country programme: (a) continue engaging youth in the upstream policy dialogue, which has proven to be effective in making a more youth-focused priority in the Prevention and Solution of the Adolescent Pregnancy Problem Act, 2016 (AP Act); (b) explore innovations and expand the utilization of the sexual reproductive health and rights youth advocate tool, jointly initiated with youth organizations and partners, which has empowered youth to monitor the effectiveness of the AP Act; (c) continue to advocate ending gender-based violence and supporting women who are vulnerable to gender-based violence; (d) continue to support surveys and research studies to better understand population dynamics and their interlinkages to adolescent and youth sexual and reproductive health and rights, and promote a life-cycle approach with evidence-based advocacy and communications to increase public awareness; and (e) strengthen the relevance of capacity-building through a variety of channels, including bilateral/trilateral cooperation, South-South cooperation and multilateral frameworks.

11. Drawing on well-established partnerships with the Government and civil society organizations working to accelerate the implementation of the ICPD Programme of Action, UNFPA is in a unique position to convene diverse stakeholders and facilitate integrated responses for the achievement of the SDGs. The UNFPA comparative advantages include (a) providing leadership and upholding the sexual and reproductive health and rights of young people; (b) addressing harmful social norms that perpetuate male privilege and limit women's autonomy; (c) bringing expertise in data to address gaps in evidence on ageing to address the phenomenon; (d) promoting a life-cycle approach in addressing issues around an ageing population; (e) promoting innovations and digitalization to increase the engagement

and participation of young people and women, especially those from vulnerable groups, including young people with disabilities, ethnic minorities and those who are poor; (f) promoting learning, including through South-South and triangular cooperation; and (g) supporting the generation, analysis and use of population data for evidence-based planning, contributing to national priorities across the humanitarian-development continuum.

12. UNFPA has a strong commitment to enhancing coherence and synergies with the United Nations system-wide efforts in Thailand, as reflected in the United Nations Sustainable Development Cooperation Framework (UNSDCF), through active participation in the United Nations interagency working groups for the implementation of SDGs 3 and 5, as the co-chair of the United Nations country team (UNCT) joint team on gender-based violence, together with UN-Women, and as co-chair of the UNCT joint team on youth, together with UNICEF. As a key contributor to the UNCT joint team on data and communications, UNFPA will create awareness of the rapid demographic transition and the ageing population in Thailand as an evolving area for the United Nations system. UNFPA will make efforts to coordinate and partner with other United Nations agencies to work jointly to enhance efficiency, effectiveness and sustainability.

13. The proposed country programme will focus on “leaving no one behind”, with programmes reaching out to the most vulnerable groups that are identified through systematic situation analysis (including the CCA), population situation analysis and country programme evaluations.

## **II. Programme priorities and partnerships**

14. The programme envisions preparing Thailand for an ageing society that is rights-based and inclusive and is designed to support the Decade of Action and the global vision to achieve the three transformative results while aligning with the national priorities, as outlined in the 13th five-year National Economic and Social Development Plan (NESDP), 2022-2026. The programme is designed to accelerate the achievement of the 2030 Agenda, with strong linkages with the ICPD25 voluntary commitments, including through an emphasis on integrated and multidisciplinary policy and programme responses. As Thailand is an ageing society, new thinking and innovations need to address this phenomenon within the broader context of the life-cycle approach.

15. The programme was developed in partnership with the Government, civil society organizations and United Nations agencies, based on the principles of inclusion, human rights and equity, taking into account the needs of vulnerable groups, to ensure that no one is left behind. Extensive participatory consultations were undertaken with beneficiaries and partners, ensuring their needs and priorities were included. The main beneficiaries are women, adolescents, youth, people living with disabilities, those from ethnic minority groups and those living in poverty. UNFPA will apply innovative approaches to reach those furthest behind, including creating innovative solutions with partners to address bottlenecks, enabling the transition to scaling-up innovations that have proven to be successful, and partnering with innovators from the public and private sectors.

16. The interventions are designed to reduce gender-based violence and the unmet need for family planning among young people with disabilities, those from ethnic minority groups, and those living in poverty, especially adolescent girls and women. In line with Thailand’s Sufficiency Economy Philosophy, which seeks to balance the multiple dimensions of sustainable development, they will directly contribute to the 13th NESDP goal on human capital development and to UNSDCF outcome 2 (human capital needed for social and inclusive development is improved through strengthening of institutions, partnerships, and the empowerment of people) and outcome 3 (people living in Thailand, especially those at risk of being left furthest behind, are able to participate in and benefit from development, free from all forms of discrimination). UNFPA will also collaborate with other United Nations agencies to contribute to the achievement of UNSDCF outcome 1 on climate change-

related issues, with a focus on addressing the impact on women and girls through the programme interventions that ensure the integration of initiatives on sexual reproductive health and rights and gender-based violence prevention and response into disaster preparedness and response, where possible.

17. Aligned with the UNFPA Strategic Plan, 2022-2026, the three programme outputs contribute to two strategic plan outcomes: (a) reducing the unmet need for family planning; and (b) reducing gender-based violence. The output on adolescents and youth will focus on youth empowerment to reduce the unmet need for family planning among the most marginalized groups, and the output on gender-based violence aims to reduce gender-based violence through better policy implementation. The output on population and development is a shared output that is designed to support the achievement of both outcomes. The programme will support the country's efforts to address the unfinished agenda of the ICPD Programme of Action, achieve SDG targets and fulfil its voluntary national commitments on ICPD25 made at the Nairobi Summit as well as its other normative and national commitments, including those related to the Universal Periodic Review, the Convention on the Rights of Persons with Disabilities and the Convention of the Elimination of All Forms of Discrimination against Women.

18. To accelerate progress, interventions will aim to address implementation gaps in policy frameworks, to enhance the use of population and development data and evidence-based policy-making and to promote knowledge management and institutional capacity development. A comprehensive strategy addressing the social determinants of reproductive health, well-being and the development of adolescents and youth will focus on the prevention of adolescent pregnancy, meeting the demand for access to sexual and reproductive health information and services, including rights-based family planning, and improving their agency. In response to the two significant demographic challenges Thailand faces, low fertility and population ageing, UNFPA will apply a life-cycle approach that emphasizes investment in health and socioeconomic opportunities to reduce inequalities across all stages of life. The approach will allow comprehensive oversight to ensure the best start in early life, protect and promote health during life's transition periods, create healthy environments and improve the conditions of daily life. Further, building on the underlying theory of change, UNFPA will support strengthening the integration of prevention and response to gender-based violence into the universal health coverage and tackling discriminatory social norms to accelerate a reduction in gender-based violence. The programme will use people-centred rights-based approaches focused on achieving the aspirations of those left behind and tailor the interventions to their needs and unique circumstances. It will also apply strong gender-aware and culturally sensitive approaches.

19. UNFPA will play a convening role to facilitate multisectoral coordination on sexual and reproductive health and rights, gender equality, and youth empowerment and development issues. UNFPA will advocate for a rights-based life-cycle approach to inform and underpin policy responses to emerging issues related to demographic changes such as the ageing population. The goal is to ensure that policies and programmes respond to these changes, recognize and emphasize people's lifelong flexible choices and promote healthy ageing. This approach will include joint programming under the UNSDCF and a commitment to work with other United Nations entities for greater efficiency. UNFPA will also encourage mutually beneficial South-South and triangular cooperation to facilitate technical knowledge exchange and capacity building.

20. Four modes of engagement recommended by the UNFPA strategic plan are fully applied to ensure the success of the programme: (a) advocacy and policy dialogue and support between right holders and policymakers; (b) knowledge management of good practices and lessons learned among key strategic partners; (c) technical support to strengthen institutional capacity development of key implementing organizations on adolescent and youth, data and evidence, and gender-based violence; and (d) coordination, partnership and South-South and triangular cooperation, sharing Thailand's good practices on data and ageing, sexual and

reproductive health and rights and gender-based violence with other countries, to accelerate the three transformative results.

21. The following key accelerators will be used throughout the interventions: (a) strengthening youth participation through innovative and digitalized platforms; (b) engaging young people, women and girls from those groups furthest left behind first, especially in policy dialogues and knowledge sharing; (c) applying human rights-based and gender transformative approaches; (d) using data and evidence for upstream policy work; and (e) partnerships with the private sector, promoting financing as a key catalyst to achieve results.

#### **A. Unmet need for family planning**

22. The country programme will contribute to UNSDCF outcome 2 (human capital needed for social and inclusive development is improved through strengthening of institutions, partnerships and the empowerment of people) and support the focus areas on improving accessibility, responsiveness and the quality of public services as enablers for Thailand's transformation.

23. The programme will work towards a reduction of the unmet need for family planning among young people aged 15-24 years, especially those with disabilities, ethnic minorities and those who are poor, through strengthened platforms for adolescents and youth to acquire family planning knowledge and skills, exercise their rights to sexual and reproductive health and have opportunities to participate in the implementation and monitoring of policies, in particular, the AP Act. The prevention of gender-based violence will be comprehensively addressed in the implementation of the programme approaches.

24. *Output 1. The platforms for adolescents and youth to acquire knowledge and skills on sexual and reproductive health and rights, focusing on family planning, and to participate in the implementation and monitoring of policies related to the Prevention and Solution of the Adolescent Pregnancy Problem Act, 2016 (AP Act) are functional and inclusive.*

25. This will be achieved, through existing platforms, by (a) strengthening strategic partnerships to advocate for accessibility and to share experiences among stakeholders on improving the quality of rights-based family planning and gender-based violence prevention by addressing discriminatory gender and social norms, as well as knowledge and information on sexual and reproductive health and rights within the context of comprehensive sexuality education. Interventions are designed for in-school and out-of-school youth, especially those from vulnerable groups; (b) improving available sexual and reproductive health and rights knowledge and information platforms, with a focus on reducing the unmet need for contraception for young people and on adolescent pregnancy prevention, by using youth-led innovative solutions, digital technologies and rights-based and gender-transformative approaches; (c) linking with prior interventions, generating evidence for policy advocacy, to improve access to comprehensive sexual and reproductive health services, as indicated by the AP Act, for every young person, including youth with disabilities, ethnic minority youth and the poor; and (d) strengthening the capacity of young people and youth networks to participate in advocacy and decision-making on issues that affect their bodily autonomy, development and overall well-being, across the humanitarian-development continuum.

26. The output on population and development will also play a significant role in achieving this outcome through the provision of disaggregated population data, strengthening evidence-based policy and dialogues on population and development, and supporting knowledge management and sharing, including through partnerships and South-South and triangular cooperation.

#### **B. Preventable maternal deaths**

27. Thailand has successfully reduced maternal mortality to 37 deaths per 100,000 live births. Underlying the theory of change and priorities in the NESDP and the UNSDCF, the programme is not designed to have a direct focus on this particular outcome. However, interventions under the country programme to reduce the unmet need for family planning

and gender-based violence will also contribute to the achievement of this outcome. Although there are no direct interventions under this outcome, UNFPA will continue to coordinate with the Ministry of Public Health in its efforts to further reduce preventable maternal death, in particular among those most at risk and most left behind, such as teen mothers with repeat pregnancies, young women and adolescent girls, and those from ethnic minority and poverty backgrounds for whom services may be hard to reach.

### **C. Gender-based violence and harmful practices**

28. The programme will focus on strengthening the environment and systems to prevent and respond to gender-based violence, which includes social norm change and strengthening data and evidence-based policy advice and decision-making processes. The output will contribute to UNSDCF outcome 3 (people living in Thailand, especially those at risk of being left furthest behind, are able to participate in and benefit from development, free from all forms of discrimination).

29. *Output 2. Strengthened policy implementation for the prevention of and response to gender-based violence.*

30. Priority will be given to strengthening the implementation of existing policies, including universal health coverage, the National Strategy on Prevention and Solution towards Violence Against Children and Women, and the Domestic Violence Victim Protection Act B.E. 2550 (2007). This will be done through (a) evidence-informed policy advocacy for national and subnational governments on the timely implementation of existing commitments to addressing gender-based violence through a multisectoral coordination mechanism; (b) technical support in strengthening the response to survivors of gender-based violence in the universal health coverage package, in line with international standards, including in humanitarian settings; (c) technical support in updating operational guidance and procedures for one-stop crisis centres to provide comprehensive and multisectoral gender-based violence services, including in humanitarian contexts, in line with international standards; (d) support for community mobilization aiming to transform harmful gender and social norms and prevent gender-based violence, including against LGBTI persons, based on an evidence-informed costed strategy.

31. This output will be integrated with (a) the output on adolescents and youth, particularly in improving rights-based family planning, gender-based violence prevention by addressing discriminatory gender and social norms, sexual and reproductive health and rights knowledge and information, within the context of comprehensive sexual education; and (b) with the output on population and development in efforts to strengthen disaggregated data, evidence generation, policy mapping and analysis.

### **D. Population change and data**

32. The output on population and development is designed to support the achievement of the other two outputs of the country programme and contributes to UNSDCF outcome 3 (people living in Thailand, especially those at risk of being left furthest behind, are able to participate in and benefit from development, free from all forms of discrimination).

33. *Output 3. The policy environment is strengthened through the utilization of evidence on population changes and megatrends, including population ageing and climate change, for the development and monitoring of population policies and programmes.*

34. This output will be achieved by (a) strengthening the capacities of government partners to generate and incorporate disaggregated population data by key vulnerability criteria to track the progress of the NESDP, the SDGs, ICPD Programme of Action, the Universal Periodic Review, the Convention on the Rights of Persons with Disabilities, the Convention on the Rights of the Child, the Convention of the Elimination of All Forms of Discrimination against Women, and for humanitarian preparedness and response, with a focus on technical support to the upcoming census and relevant population surveys and data digital transformation; (b) strengthening knowledge management and institutional capacities for the utilization of innovative data analysis tools for policy-making, planning and monitoring of

implementation, and linkages with climate vulnerability, and life-cycle and gender-transformative approaches; (c) strengthening policy dialogue on population change and sustainable/inclusive development, focused on addressing the implications of population ageing and low fertility, in partnership with government agencies, academia, the private sector and marginalized groups; (d) providing technical support on strengthening the inclusion of gender-based violence response and sexual and reproductive health and rights into the national preparedness and disaster and climate change-related frameworks; (e) co-creating innovations with civil society organizations, private-sector partners and young people to strengthen an intergenerational relationship model; and (f) supporting the sharing of knowledge, experiences and innovative practices regarding population policies, including on ageing and low fertility, gender equality, climate change and youth empowerment, through South-South and triangular cooperation and partnerships that facilitate resource mobilization for ICPD implementation.

### **III. Programme and risk management**

35. The country programme will be nationally executed with the National Economic and Social Development Council and the Ministry of Foreign Affairs of Thailand as the government coordination body, and with the Ministry of Public Health as a key implementing partner. The programme will engage with a range of implementing partners, such as civil society organizations, the private sector, media partners and academia. Focusing on innovation and scaling-up, UNFPA will work with selected strategic partners, including the rights holders, to ensure the achievement of the three transformative results and the country programme results. Quality assurance activities will be conducted on an ongoing basis, including through spot checks, monitoring and regular review meetings.

36. The UNFPA country office will align staffing with programme needs while continuing to receive technical and programmatic support from the UNFPA Regional Office for Asia and the Pacific, various headquarters units and multidisciplinary expertise across United Nations entities. Other sources will also be utilized, as required.

37. Several risks that could affect the programme delivery include (a) sustained disruption to health systems, capacity constraints of implementing partners and a reduction of domestic and other resources due to the impact of the COVID-19 pandemic; (b) a lack of coordination between sectors; (c) the shrinking space for human rights and civil society; and (d) climate-induced natural disasters. To mitigate these risks, operational and programmatic risk assessment and mitigating strategies will be put in place and reviewed annually together with key stakeholders. UNFPA will address these risks by forging strong partnerships and pursuing a multi-path resource mobilization strategy, including with the private sector, to complement regular resources and improve coordination; strengthening data harmonization and evidence-based communication and policy advocacy; conducting a regular socio-political scanning; and engaging with the highest levels of governments on “leaving no one behind” to ensure accountability and sustainability. As part of the UNCT, UNFPA support to the national immediate and longer-term response to the pandemic will help the Government mitigate the impact of the COVID-19 pandemic and its recovery efforts. In emergencies, including climate-induced disasters, UNFPA, as part of the UNCT, may, in consultation with the Government, reschedule programme activities and explore reprogramming funds toward activities to mitigate impacts and enhance resilience.

38. UNFPA will seek additional resources from international institutions and the private sector and will proactively participate in joint initiatives under the UNSDCF. An integrated partnership, resource mobilization and South-South cooperation plan will guide the country office to leverage programme funding; multisectoral partnerships with the Government, civil society, youth groups, the private sector, social media influencers, media and academia as well as bilateral and multilateral development partners; and South-South and triangular cooperation, within the context of regional integration among ASEAN countries. Social and environmental risks related to programme implementation will be monitored and mitigated, as required.



39. 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 concerning country programmes are prescribed in the UNFPA programme and operations policies and procedures, and the internal control framework.

#### **IV. Monitoring and evaluation**

40. UNFPA will join the UNCT in establishing a framework to monitor and evaluate the UNSDCF, which aligns with the global and national SDGs monitoring framework. UN-Info, the joint planning, monitoring and reporting platform that digitizes the UNSDCF and its corresponding joint work plan, will be used to track progress on UNSDCF results. The platform will provide an overview of progress at the country level and reflects United Nations development system efforts to improve transparency and accountability and better address the national needs and priorities. UNFPA will provide technical support in the design and implementation of the UNSDCF monitoring and evaluation system and framework, and data quality assurance. It will guide the UNSDCF working groups and the UNCT on evidence-based progress reporting, including by participating in the final evaluation of the UNSDCF. UNFPA will also join the United Nations system to support the Government in its SDG monitoring and reporting, including the voluntary national reviews and the Universal Periodic Reviews.

41. UNFPA will engage in joint monitoring and evaluation initiatives, in line with the UNSDCF and the NESDP monitoring and evaluation framework. UNFPA will monitor their performance and ensure the implementation of control mechanisms, including periodical programme monitoring and evaluation not only within UNFPA but also within the UNSDCF. UNFPA will also ensure the participation of youth and women in the monitoring process.

42. The country office has a comprehensive monitoring and evaluation strategy in place. UNFPA and the Government, through the National Economic and Social Development Council and the Ministry of Foreign Affairs of Thailand, will coordinate and monitor the country programme, following UNFPA policies and procedures, using adaptive results-based management and accountability frameworks. UNFPA and the Government will systematically carry out annual reviews of the country programme with the participation of stakeholders. Regular field monitoring visits will be conducted jointly with relevant stakeholders to assess how policy and system-level interventions benefit and meet the needs of young people, women and the most vulnerable and marginalized groups and promote their well-being. The programme is designed to contribute to the achievement of the UNSDCF priorities, and the monitoring and evaluation plan will be carefully linked to it. The UNSDCF monitoring plan is based on the global and national SDG monitoring framework. Output indicators are to be monitored annually, as per the annual review process of the UNSDCF; these will allow for a review of progress made in contribution to higher-level outcomes.

43. A costed evaluation plan will be implemented and reviewed periodically. This will ensure adequate resources allocation for monitoring and evaluation of the programme and use of evidence from evaluation and monitoring in programming. A midterm review of the programme will be conducted to analyse progress made and assess the reorientation of programme strategies. A country programme evaluation will be conducted in the penultimate year of the country programme, to allow the identification of lessons learned and priorities for the following cooperation cycle.

44. As in previous programme cycles, a limited amount of resources is set aside for programme coordination and assistance dedicated to specific activities with direct relevance for the programme as a whole but which cannot be attributed to a specific programmatic area.

## RESULTS AND RESOURCES FRAMEWORK FOR THAILAND (2022-2026)

<b>NATIONAL PRIORITY:</b> Human capital development towards Thailand's transformation.				
<b>UNSDCF OUTCOME:</b> Human capital needed for social and inclusive development is improved through strengthening of institutions, partnerships, and the empowerment of people.				
<b>RELATED UNFPA STRATEGIC PLAN OUTCOME(S):</b> By 2025, the reduction in the unmet need for family planning has accelerated.				
<b>UNSDCF outcome indicators, baselines, targets</b>	<b>Country programme outputs</b>	<b>Output indicators, baselines and targets</b>	<b>Partner contributions</b>	<b>Indicative resources</b>
<p><u>UNSDCF Outcome indicators:</u></p> <ul style="list-style-type: none"> <li>Proportion of adolescents (aged 15-19 years) who have their need for family planning satisfied with modern methods <i>Baseline: 81% (2020); Target: 86% (2027)</i></li> </ul>	<p>Output 1. The platforms for adolescents and youth to acquire knowledge and skills on sexual and reproductive health and rights, focusing on contraception, and to participate in the implementation and monitoring of policies related to the Prevention and Solution of the Adolescent Pregnancy Problem Act, 2016 (AP Act) are functional and inclusive.</p>	<ul style="list-style-type: none"> <li>Number of policies related to sexual and reproductive health and rights, including family planning, that integrated specific recommendations of vulnerable young people <i>Baseline: 1 (2020); Target: 2 (2026)</i></li> <li>Number of functional online and offline youth platforms on family planning and SRHR established at subnational and national levels and accessible by vulnerable young people, including those from low-income families, ethnic minority groups and with disabilities <i>Baseline: 1 (2020); Target: 3 (2026)</i></li> </ul>	<p>Department of Health, Ministry of Public Health, Children and Youth Council under the Department of Youth Empowerment and Development, Thai Health Promotion Foundation, youth networks, "leaving no one behind" groups, non-governmental organizations, academia, civil society organizations, the private sector, United Nations organizations</p>	<p>\$2.0 million (\$1.0 million from regular resources and \$1.0 million from other resources)</p>
<b>NATIONAL PRIORITY:</b> Thailand as a high opportunity society.				
<b>UNSDCF OUTCOME:</b> People living in Thailand, especially those at risk of being left furthest behind, are able to participate in and benefit from development, free from all forms of discrimination.				
<b>RELATED UNFPA STRATEGIC PLAN OUTCOME(S):</b> By 2025, the reduction in gender-based violence and harmful practices has accelerated.				
<b>UNSDCF outcome indicators, baselines, targets</b>	<b>Country programme outputs</b>	<b>Output indicators, baselines and targets</b>	<b>Partner contributions</b>	<b>Indicative resources</b>
<p><u>UNSDCF Outcome indicators:</u></p> <ul style="list-style-type: none"> <li>Number of children and women subjected to physical violence and abuse seeking medical treatment at hospitals, total <i>Baseline: 14,237 (2018) [6,182 children/youth (43.4%); 13,265 female/alternative gender (93.2%); Target: Declining trend (2027)</i></li> </ul>	<p>Output 2. Strengthened policy implementation for the prevention of and response to gender-based violence.</p>	<ul style="list-style-type: none"> <li>Availability of the universal health coverage package that includes services to survivors of gender-based violence, as per international standards <i>Baseline: No (2020); Target: Yes (2026)</i></li> <li>Number of operational guidelines and protocols for one-stop crisis centres updated and developed for a multisectoral response to survivors of gender-based violence, as per international standards <i>Baseline: 1 (2020); Target: 2 (2026)</i></li> <li>Number of provinces implementing a costed strategy for transforming harmful social norms through</li> </ul>	<p>Ministry of Public Health, National Health Security Office, National Police Bureau, Department of Local Administration, Ministry of Interior, non-governmental organizations, academia, civil society organizations, United Nations organizations</p>	<p>\$1.5 million (\$1.0 million from regular resources and \$0.5 million from other resources)</p>

<p><u>Related UNFPA Strategic Plan Outcome indicator(s):</u></p> <ul style="list-style-type: none"> <li>Proportion of countries that have conducted at least one population and housing census during the last 10 years <i>Baseline: 0 (2021); Target: 1 (2023)</i></li> </ul>		<p>evidence-informed and context-adapted interventions <i>Baseline: 0 (2020); Target: 2 (2026)</i></p>		
<p><b>NATIONAL PRIORITY:</b> Thailand as a high opportunity society.</p>				
<p><b>UNSDCF OUTCOME:</b> People living in Thailand, especially those at risk of being left furthest behind, are able to participate in and benefit from development, free from all forms of discrimination.</p>				
<p><b>RELATED UNFPA STRATEGIC PLAN OUTCOME(S):</b> By 2025, the reduction in the unmet need for family planning has accelerated. By 2025, the reduction in gender-based violence and harmful practices has accelerated.</p>				
<p><b>UNSDCF outcome indicators, baselines, targets</b></p>	<p><b>Country programme outputs</b></p>	<p><b>Output indicators, baselines and targets</b></p>	<p><b>Partner contributions</b></p>	<p><b>Indicative resources</b></p>
<p><u>UNSDCF Outcome indicators:</u></p> <ul style="list-style-type: none"> <li>Availability rate of SDG indicator data (proxy for 17.18.1) <i>Baseline: 51 (2020); Target: 55 (2026)</i></li> </ul> <p><u>Related UNFPA Strategic Plan Outcome indicator(s):</u></p> <ul style="list-style-type: none"> <li>Proportion of countries that have conducted at least one population and housing census during the last 10 years <i>Baseline: 0 (2021); Target: 1 (2026)</i></li> </ul>	<p>Output 3. The policy environment is strengthened through the utilization of evidence on population changes and megatrends, including population ageing and climate change, for the development and monitoring of population policies and programmes.</p>	<ul style="list-style-type: none"> <li>Number of national strategies and reports on population and development, including population ageing, that utilized the latest population data disaggregated by key vulnerability criteria, including ethnicity, disabilities, and age <i>Baseline: 0 (2020); Target: 2 (2026)</i></li> <li>Number of government organizations using innovative methods for generation of population data and analyses of population change and megatrends to inform population policies <i>Baseline: 0 (2020); Target: 2 (2026)</i></li> <li>Number of good practices shared and exchanged between Thailand and other countries through South-South and triangular cooperation initiatives to implement the ICPD Programme of Action <i>Baseline: 0 (2020); Target: 3 (2026)</i></li> </ul>	<p>National Economic and Social Development Commission, National Statistical Office, Thailand International Cooperation Agency, “leaving no one behind” groups, the private sector, young social entrepreneurs, non-governmental organizations, academia; civil society organizations; United Nations organizations</p>	<p>\$1.9 million (\$1.4 million from regular resources and \$0.5 million from other resources)</p> <hr/> <p>Programme coordination and assistance: \$0.4 million from regular resources</p>