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**Final common country programme document for Pakistan
and the
UNFPA results and resources framework, 2013-2017***

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* UNDP, UNFPA and UNICEF jointly developed the draft common country programme document for Pakistan, 2013-2017, with a common narrative and complementary organization-specific results and resources frameworks.

Introduction

1. UNDP, UNFPA and UNICEF have developed a common country programme document (CCPD) for 2013-2017 and complementary agency-specific results and resources frameworks. The aim of the three organizations is to further promote United Nations coherence, enhance joint programming, strengthen effective delivery of support to Pakistan and accelerate a joint United Nations approach to 'delivering as one'.

2. Following Pakistan's previous 'One United Nations' programme, 2009-2012, which was one of the eight 'delivering as one' pilots, the new CCPD reflects the strategic priorities and key results in a 'second-generation' One United Nations' programme, based on the three organizations' comparative advantages. It offers the three organizations and their respective executive boards an opportunity to review cross-cutting issues, strengthen synergies, identify gaps and remove duplications, thereby enhancing efficiency. The CCPD also reduces the review burden for the Government and enables the participating organizations to show complementarities and harmonization, as well as to articulate areas of cooperation. It has been formulated in close consultation with the Government, other development partners and provincial governments, so that it is aligned with national and provincial priorities. It is guided by internationally agreed development targets, including the Millennium Development Goals, as well as United Nations treaties and other international instruments.

I. Situation analysis

3. Pakistan is the sixth most populous country in the world, with a current population of 177.1 million, growing at an annual rate of 2.05 per cent.¹ The country has made positive strides in recent years to address its development challenges. The Government's Framework for Economic Growth (2011) seeks to respond to these challenges through a structural transformation of the economy, including through productivity enhancement, effective governance, competitive markets, creative cities, and enhanced youth and community engagement. Development plans of provinces/areas mirror these goals at the local level, including in specific sector plans that will need to be translated into concrete interventions.

4. In recent years, Pakistan has experienced macroeconomic stress, fiscal retrenchment and balance-of-payment difficulties. While the economy has stabilized, the macroeconomic situation remains under pressure. The global financial crisis, rising food and fuel prices, challenges in meeting energy demands and recurring natural disasters have had a significant economic impact. The real gross domestic product growth rate, which has historically averaged 5 per cent per annum, has averaged less than 3 per cent since 2007-2008. It is expected to average 3.6 per cent in 2011-2012.²

5. A challenging security situation and multiple crises have affected people's lives and livelihoods and resulted in loss of development gains. Affected families and hosting communities need continued humanitarian support. In addition, the families voluntarily returning to their areas require early recovery support to restore their livelihoods and community infrastructure. Moreover, Pakistan is also

¹ Economic Survey of Pakistan, 2010-2011.

² Ibid.

home to the largest refugee population in the world, with 1.7 million registered Afghan refugees and 1 million unregistered currently living in the country. The protracted presence of refugees adds to the development challenges of the hosting and affected areas and poses additional challenges to attaining durable solutions.

6. While the 2011 Human Development Report notes an improving trend in the nation's Human Development Index value since 1981, Pakistan is ranked 145 out of 187 countries. Poverty incidence decreased from 34.5 per cent in 2000-2001 to 22.35 per cent in 2005-2006, the latest year for which official figures are available. Poverty is high in rural and remote areas with limited social services and economic opportunities.

7. The highest priority is to ensure that Pakistan can accelerate progress towards meeting its Millennium Development Goal targets, particularly in poverty and hunger, universal primary education, maternal health and environmental sustainability. Achieving the 2015 targets and reducing poverty and inequality will require broad-based and inclusive economic growth as well as targeted pro-poor investments and programmes. It also calls for further strengthening of national and provincial capacities and efforts to accelerate progress. The government response has encompassed special programmes such as the Benazir Income Support Programme, which provides cash grants, skills development and social safety net support to 6 million poor families.

8. The national average maternal mortality ratio is 276 per 100,000 live births. At subnational level, the differences between and within provinces are significant, indicating issues of access and use of services.³

9. Schooling disparities are also worrisome. In 2009, the average number of years of schooling was 5.7, but the disparity between the poorest income quintile and the richest ranged from 2.4 years to 8.9 years. Girls living in urban areas in the highest income quintile received an average of 9.4 years of schooling, compared to 1 year for rural girls in the lowest quintile. The challenge remains for federal and provincial/area authorities and other stakeholders and partners to focus on poor people in providing basic social services and social protection. An increase in equity-focused expenditure on basic social services is crucial to ensure inclusive development.

10. Good progress has been made in increasing net primary enrolment rates across the board, reducing gender disparities. However, 7.3 million children of primary school age are not enrolled, 57 per cent of them girls.⁴ The Government committed to increase enrolment in Article 25A of the 18th Amendment to the Constitution, which guarantees the right to education: "The State shall provide free and compulsory education to all children of the age of 5 to 16 years in such manner as may be determined by law." This creates an enormous opportunity for a multi-pronged approach to mobilizing both rights-holders and duty-bearers to ensure fulfilment of this legal obligation while building provincial capacities and addressing socio-cultural norms that keep children out of school.

11. While the population growth rate is decelerating, the total fertility rate has levelled off at around four births per woman, with significant differentials among income groups. According to the Pakistan

³ Pakistan Demographic and Health Survey, 2006-2007.

⁴ UNESCO Institute for Statistics, *Education for all Global Monitoring Report 2011* (statistics as of 2009).

Demographic and Health Survey, 2006-2007, the total fertility rate of the lowest wealth quintile was 5.8 births, while that of the richest quintile was 3. Women in the youngest reproductive age group of 15-19 had a fertility rate of 51 births per 1,000 women, illustrating that early marriage and childbearing persist. However, the unmet need for family planning was 20 per cent among women in the 15-19 age group, indicating that, with better access to services, fertility rates in this age group would decline.

12. Currently, 28 per cent of the population is between the age of 15 and 29 years. Translating this 'youth bulge' into a 'demographic dividend' is a principal challenge. Overall, the country's labour force is increasing at 3.2 per cent per annum. By 2030, the working-age population is expected to be around 67 per cent of the total, compared to the current 55 per cent, with corresponding demand for employment. However, 32 per cent of the youth are uneducated, and most of them lack vocational or life skills. According to a survey by the Centre for Poverty Reduction and Social Policy Development, unemployment is the second-biggest problem faced by young people, after education. The Government's Framework for Economic Growth sees opportunities to develop marketable skills among young people to increase their access to decent and productive employment. With approximately half of the population below 21 years old, the country must improve the health and education of all children and adolescents, particularly those living in persistent poverty.

13. Thirty-seven per cent of the Pakistan population lives in urban areas, and growing urbanization is increasing pressure on the provision of quality services. Equitable access to high-quality basic social services – including health, reproductive health, nutrition, water and sanitation, hygiene promotion and education – is constrained by the multiple dimensions of disparities. For example, lack of investment in the health sector has caused gaps in access to primary health care services, especially in preventive health care. The Expanded Programme of Immunization coverage is insufficient; it varies significantly between provinces/areas and districts. The Lady Health Worker Programme continues to be the backbone of the community-based health care system, but its capacity is limited due to insufficient resources. Addressing these issues requires strategic interventions and careful policy adjustments in order to improve economic conditions and expand social services. This includes health and education opportunities for children and adolescents, particularly those living in persistent poverty.

14. The under-5 mortality rate in Pakistan is one of the highest in Asia. The rate drops from 102 per 1,000 live births for children whose mothers have no education to 59 per 1,000 for mothers with higher education. Among the lowest wealth quintile, the probability of a child dying before its fifth birthday is 121 per 1,000 live births compared with 60 per 1,000 for the wealthiest quintile. The most common causes of infant deaths are diarrhoea, respiratory infections, malnutrition and birth asphyxia. This clearly indicates the close links among health systems, maternal health and cross-sectoral issues such as nutrition, water, sanitation and hygiene promotion, and education.

15. The maternal mortality ratio, 276 deaths per 100,000 live births nationwide, ranges from 319 in rural areas to 175 in urban areas. Inequitable access to quality maternal and newborn health services is a key barrier. Only 18 per cent of deliveries take place in a facility, and this proportion is even lower in rural areas. Only 39 per cent of births are assisted by skilled birth attendants – with a significant number of these attendants working in the private sector. Among the poorest wealth quintile, 16 per cent of births had the benefit of skilled birth attendance compared with 77 per cent for the richest

quintile. In addition, the latest demographic and health survey indicates that around 50 per cent of girls get married before age 20, and 14 per cent before the legal age of 16, most of them in rural areas. This contributes to increased maternal mortality and vulnerability to maternal morbidities. According to the Pakistan Population Policy 2010, the contraceptive prevalence rate has stagnated at 30 per cent over the last decade. With unmet needs at 25 per cent, the result is a high level of unplanned pregnancies, a major barrier to achieving the target for Millennium Development Goal 5 on maternal mortality. It has been a challenge for the health system to deliver efficient preventive and contraceptive care, emergency obstetric and neonatal care, and other reproductive health services, especially in rural areas.

16. Chronic and acute malnutrition remain at critical levels. Mothers and children suffer from micronutrient deficiencies, particularly iron deficiency, anaemia, zinc and vitamin A. Disruption of livelihoods, lack of access to food, deterioration in hygiene and sanitation, and declining access to sufficient and clean water have exacerbated the risk of malnutrition. Its direct and underlying causes include early and frequent childbearing, inadequate feeding practices for infants and young children, inappropriate care-seeking behaviour and prevalence of diarrhoea, due to inadequate access to clean water and safe sanitation. Root causes include socio-cultural barriers, lack of education, especially for women, insufficient health care and limited awareness of proper nutrition.

17. The gravity of the nutrition situation countrywide led to development of the Pakistan Integrated Nutrition Strategy. It establishes clearer accountability structures, including cross-sectoral linkages, as well as participation by stakeholders ranging from the Government and civil society organizations to international organizations and donors.

18. The prevalence of HIV is concentrated among at-risk populations and is low in the general population. However, a sustained public health response is required to maintain this low prevalence rate.

19. The Government of Pakistan has increased its attention to protection of women and children from abuse, exploitation and violence, including through important legislation. Legislation has been passed to stop bonded labour and honour killings, and bills have been introduced to address domestic violence and corporal punishment. The weaknesses in protection systems require a systemic response, including building on increased recognition by governmental authorities and civil society of their roles and responsibilities.

20. Child protection issues such as low birth registration, child marriage, child labour, children living and/or working on the street, children in institutions and corporal punishment in schools and elsewhere are all related to poverty, underemployment and low levels of education, especially among women. These issues need stronger monitoring, reporting and action to bring Pakistan into compliance with the Convention on the Rights of the Child and the Optional Protocol on the sale of children, child prostitution and child pornography. (The Government ratified this protocol in 2011.) Also in 2011, Pakistan signed the Convention on the Rights of Persons with Disabilities, a positive development for both children and adults. It needs to be followed up with legislation and budgetary allocations.

21. Women's political participation has improved due to legal reforms and allocation of reserved seats in parliament. The women parliamentarians' caucus has provided a strong forum for championing women's causes. Pakistan has passed landmark legislation to strengthen the protection of women against discrimination and harmful traditional practices and to criminalize acid-throwing. While women's status and quality of life have improved in recent years, women's economic advancement remains a major challenge, as evidenced by their 21 per cent participation in the labour force. So does their access to justice, legal aid and reproductive health services. Women's rights to own and inherit property have been strengthened by recent legislation, though many women still face difficulties in accessing rights and controlling resources. Capacity and policy gaps, inadequate knowledge, attitudes and law enforcement remain to be addressed for effective implementation of such legislation.

22. Pakistan has resiliently faced devastating natural disasters, including floods, earthquakes, landslides and droughts, and tackled crisis-related challenges. The 2010 floods alone affected more than 18 million people, destroyed or damaged 1.9 million houses and ruined 6.2 million acres of crops. Damage to infrastructure, habitat and loss of livelihoods, increased food and nutrition insecurity, and the trauma of displacement have added to the challenges, both short term and long term. The impact of these crises has been particularly severe for the most vulnerable groups. The Government has shown its strong commitment to disaster management by signing the Hyogo Framework for Action 2005 and creating a disaster management framework. Additional efforts are needed to enhance disaster risk management capacities and institutional linkages for an effective multi-hazard response, including preparedness, mitigation, recovery and coordination.

23. Pakistan also faces considerable vulnerability to climate change and environmental degradation. The burden falls disproportionately upon the poor and most vulnerable due to loss of livelihoods. These environmental challenges are compounded by natural resource management problems such as insufficient water and solid waste management, loss of forest cover and land degradation. The Government has made encouraging progress in approving environmental legislation and building capacities to address environmental challenges. Additional efforts are needed to promote climate change adaptation through institutional strengthening and policy adjustments, as the climate change and environmental challenges are likely to accelerate with population and economic growth and rising energy demands. Renewable energy strategies also need to be promoted, particularly for the poor, and public policies and measures need strengthening to engage civil society and build stronger public-private partnerships.

24. Overall, the country's ability to meet its socioeconomic goals rests on its capacity to promote effectiveness, transparency, accountability and responsiveness of public institutions at both federal and provincial/area levels, as well as to increase targeted pro-poor investments and programmes and ensure a stronger equity focus. Key priorities include strengthening democratic institutions and enhancing rule-of-law capacities, structures and mechanisms to ensure greater people's participation and public trust. The 18th Amendment to the Constitution represents a key milestone of governance reform. It further enhances decentralization through delegation of a number of key functions. These include development planning, local government/rural development, labour, agriculture, education, health, environment, population, welfare, youth and women. Moreover, the seventh National Finance Commission Award (which distributes resources from the federal Government to the provinces) has

increased the quantity of resources transferred annually to provinces/areas. Dedicated efforts are needed to address policy and institutional capacity gaps and translate new provincial mandates and added responsibilities into development results that will reduce inequities and improve delivery of quality services for vulnerable groups.

II. Past cooperation and lessons learned

25. The One United Nations Programme, 2009-2012, provided the United Nations system in Pakistan with opportunities for cooperation through a strong platform to enhance inter-agency cooperation under the leadership of the United Nations country team and allowed for coherent responses to national development priorities. Several reviews and evaluations of the five joint programmes constituting the One United Nations Programme – Agriculture, rural development and poverty reduction; Disaster risk management; Education; Environment; Health and population – highlighted some good practices and results, including improved provincial and regional engagement; increased capacity to deliver, as shown by an expanded resource envelope; and effective experiences in joint programming. The United Nations system delivered strongly together during the previous programme cycle, including through humanitarian frameworks. The United Nations country team can build on this strong coordination experience so that joint programming can strengthen the links between humanitarian and development interventions during the new programme cycle.

26. Another success of the previous programme was innovations in the health sector; for example, public-private partnerships were pursued simultaneously with strengthening of provincial health systems. In addition, interactions among multiple education stakeholders created a common platform for advocacy. Other achievements include the targeted response to natural resource needs identified at local level, through provincial/area implementation committees under the joint environment programme; effective joint multi-sector support to Afghan refugees and their host communities; and joint capacity building of national disaster management institutions and mainstreaming of disaster risk management. This collaboration further linked humanitarian responses and development efforts.

27. A number of areas for improvement also were identified, providing lessons learned upon which the three organizations can build within the CCPD framework, in close collaboration with the United Nations country team. The management structure of the previous programme made it difficult for stakeholders to approve project proposals and allocate resources in a timely manner. It also increased transactional costs. High budget estimates and lower than expected donor interest in joint programmes led to a significant resource gap and unmet expectations. Recurrent natural disasters affected the achievement of planned development results. Future initiatives will stress the need to ensure a timely start to early recovery efforts in tandem with relief operations as well as integration of disaster risk reduction measures. More effort is also required to ensure mainstreaming of cross-cutting issues of human rights, gender equality and environmental sustainability.

28. The 18th Amendment to the Constitution has had a significant impact on programme management. A number of federal ministries were closed down, with all functions devolved to provincial governments, including health, education, labour, agriculture, population and women. Furthermore, improving overall impact and sustainability has been identified as key to ensure, among other benefits, maximum potential for working at scale, strengthened national ownership and improved alignment to annual provincial development plans. Another area for improvement is results-

based management and a well-articulated monitoring and evaluation framework based on reliable benchmarks.

29. The new programme will build on the important lessons learned and results achieved during the previous programming cycle as well as the specific operational context in which the programme shall be implemented. Additional support will be given to capacity development of national and subnational government institutions, alignment of management structures and improved coordination and communication among partners.

III. Proposed programme

30. As noted in section I, the proposed common country programme is aligned with national development priorities reflected in the Pakistan Framework for Economic Growth and in the new One United Nations Programme. Within the new framework, UNDP, UNFPA and UNICEF will work closely together and the three organizations will collaborate with the rest of the United Nations country team and other development partners to provide coherent and complementary policy and institutional support to the Government of Pakistan. Contributions of the three organizations, as indicated in the respective results and resources framework, form part of the new country programme action plan at output level.

31. The overall goal of the common country programme is to assist Pakistan in achieving national and provincial development goals and targets. These include the Millennium Development Goals (and the development goals to be agreed beyond 2015) as well as the rights enshrined in international conventions to which Pakistan has acceded. The programme will be implemented through a human rights-based approach, aiming to advance inclusive and sustainable growth and ensure equity in access to quality basic services and social protection.

32. The common programme will focus particularly on key areas for which the three organizations have recognized mandates and proven comparative advantages. The organizations shall adhere to their respective mandates and complement their activities in line with the new One United Nations Programme to avoid duplication and fragmentation. These are reflected in the commitments to outcome-level results in the six priority areas of the new programme. Activities will be designed utilizing sound impact analysis based on authentic baselines and indicators. Shared strategies include capacity development of duty-bearers; mainstreaming actions that address gender inequality; and effective implementation of the 18th Amendment. Strategic shifts in the common country programme include more attention to the rapidly growing urban population; tapping the potential of the large numbers of young people; disaster risk reduction and other measures to strengthen the development and humanitarian links, and promoting climate change adaptation and mitigation.

33. The common country programme will also support relevant international commitments such as the Convention on the Elimination of All Forms of Discrimination against Women; Convention on the Rights of the Child and its Optional Protocols; Convention on the Rights of Persons with Disabilities; Programme of Action of the International Conference on Population and Development; World Summit on Sustainable Development; Hyogo Framework for Action; World Fit for Children outcome document; and other mandates originating from United Nations resolutions.

34. The United Nations will use its convening power to bring together stakeholders and coordinate actions. Capacity development will be supported to promote a multidimensional approach to poverty reduction. This will include revision of legislative frameworks or adoption of new legislation to better address the needs of vulnerable and marginalized groups. Policy-level support will be complemented by community-level interventions in targeted geographic areas, with specific focus on districts with low human development. Programme delivery will be based on strong partnerships with relevant institutions at federal and provincial/area levels and civil society organizations.

35. The United Nations will draw upon its global and regional knowledge networks to share international best practices. It will also take advantage of opportunities to improve public-private partnerships and South-South cooperation. Lastly, it will advocate with policymakers to address inequality in policy processes and to ensure that the voices of the most vulnerable are heard.

36. Through the proposed common country programme, the three organizations will contribute to achievement of selected outcomes identified under the six interdependent strategic priority areas of the new One United Nations Programme, complementing work planned by other United Nations agencies:

(a) *Vulnerable and marginalized populations have equitable access to and use of quality services.*

(i) The proposed programme will contribute to the achievement of One United Nations Programme outcomes 1.1, 1.2 and 1.3 – on equitable access to and use of quality services for vulnerable and marginalized populations. This will emphasize approaches that support federal and provincial/area governments in addressing barriers to delivery of quality services, particularly for women, youth, children and vulnerable groups. The programme will take into account gaps in the Millennium Development Goals targets as well as emerging challenges, including devolution of power, integration of services and private-sector service delivery.

(ii) Evidence-based policy, legislative, budgetary and accountability mechanisms will be strengthened to support equitable access to basic services for inclusive human development, including in humanitarian settings. The proposed programme also will support strong advocacy for behaviour change and adoption of positive social norms. It will raise public awareness about the needs of women, youth, children and vulnerable populations. Communities will be empowered to change social norms, such as open defecation or child labour. Individual and institutional capacities for equitable and results-based service delivery will be strengthened at all levels, with reforms aimed at ensuring efficiency and accountability. High-level, evidence-based advocacy will address issues of early marriage, family planning and gender-based violence, among others.

(b) *Inclusive economic growth through the development of sustainable livelihoods.*

(i) The proposed programme will contribute to the achievement to three of the four outcomes in Strategic Priority Area One of the One United Nations Programme, namely, outcomes 2.1, 2.2 and 2.4 – supporting inclusive and sustainable economic growth, with

particular focus on poor people, youth and women. Support will be given particularly to implementation of the Framework for Economic Growth through support to provincial/area governments in formulating their development strategies and plans. These will promote inclusive and sustainable growth and work to accelerate poverty reduction and achieve the Millennium Development Goals through policy reforms, institutional capacity-building and targeted multi-sectoral approaches.

(ii) The programme will emphasize policy dialogue and evidence-based policy and regulatory reforms that promote entrepreneurship and the business opportunities among poor people and women. It will focus on small and medium-size enterprises and foster skills development through public-private partnerships. Initiatives to help poor people will be undertaken, providing them with incentives to enhance the production and use of low-cost, sustainable energy. Particularly, 'green' development will be promoted at household, community and national levels.

(iii) In addition, the programme will address the key causes and consequences of population growth by generating evidence on emerging issues of population dynamics. These include the growing numbers of young people, the resultant potential demographic dividend and rapid urbanization, and their links with the needs of young people (including adolescents), sexual and reproductive health (including family planning), gender equality and poverty reduction. The programme will emphasize greater use of data for more informed decision-making and policy formulation.

(c) *Increased national resilience to disasters, crises and external shocks.*

(i) The proposed programme will help achieve outcomes 3.1, 3.2 and 3.3 – on resilience to disasters, crises and external shocks, through support for institutional development. This will ensure effective disaster and crisis management and improve planning and coordination capacities, including child-sensitive and gender-sensitive approaches. Capacity development will be supported at federal, provincial, district and community levels. Systems for multi-hazard mapping and planning will be established, as will early warning and community-based disaster risk management.

(ii) Particular attention will be paid to ensuring that vulnerable populations benefit from crisis prevention and mitigation measures, sustainable environmental management practices and climate change mitigation and adaptation programmes. In addition, the programme will aim to strengthen continuum from humanitarian response, including early recovery, to development assistance. This will provide vulnerable communities most affected by disasters and crises with improved socioeconomic opportunities, livelihoods and social protection.

(d) *Strengthened governance and social cohesion.*

(i) The proposed programme will support the achievement of outcomes 4.1, 4.2, 4.3 and 4.4, on strengthened governance and social cohesion. This will be achieved through support aimed at strengthening the capacity of democratic institutions and promoting stronger accountability. It will address areas such as improvement of electoral procedures and civic and

voter education, with an emphasis on women; evidence-based policymaking and parliamentary oversight; and oversight of aid policy and coordination. The overall aid policy aims to support efforts to increase aid effectiveness and coordination, ensuring that it aligns with national and provincial development goals, the Millennium Development Goals and the Paris Declaration on Aid Effectiveness.

(ii) Emphasis will be given to the rule of law in selected areas in order to strengthen public trust, social cohesion and stability. It will also aim to improve access to justice through both formal and informal mechanisms, with a focus on the rights of women and vulnerable populations. The proposed programme will support the engagement of civil society, the media and academia as integral elements of the democratic process. In particular, it will work to strengthen decentralized governance under the 18th Amendment. Approaches will include capacity development and evidence-based legislative reform, as well as research and advocacy for administrative and fiscal decentralization. In addition, the proposed programme will support improvements to accountability and access to quality social protection, social cohesion and legal services for vulnerable people. Capacities of provincial and federal institutions to implement child protection systems and provide child-sensitive social protection, including birth registration, will be strengthened to ensure benefits to the most disadvantaged children. Cost-effective systems and innovative technologies will be employed.

(e) *Gender equality and social justice.*

(i) The common programme will contribute to the achievement of outcomes 5.1, 5.2 and 5.3 – on gender equality and social justice. It will focus on enhancing women's participation in political processes, legislation and public sector decision-making. This will be based on electoral reforms and capacity development initiatives such as networking among women parliamentarians in the region.

(ii) Economic participation will be strengthened through support to regulatory reforms and targeted initiatives, emphasizing women's access to property, entrepreneurship and income-generation opportunities in selected regions. In addition, gender-responsive budgeting will be strongly advocated. So will establishment of mechanisms to strengthen monitoring of the implementation of the Convention on the Elimination of All Forms of Discrimination against Women and gender-related issues in the Convention on the Rights of the Child. The Ministry of Human Rights and the Human Rights Commission will be supported to integrate protection of child rights and justice for children into a strengthened protective environment.

(iii) The programme also will help to promote and protect the political, economic, social, cultural and civil rights of children and vulnerable groups. This will be achieved through targeted policy support, institutional strengthening and capacity development assistance to human rights institutions, improving their ability to support and promote integration of human rights at all levels.

(f) *Food and nutrition security for the most vulnerable groups.*

(i) The programme will support the achievement of outcomes 6.1 and 6.2 – on improved food and nutrition security for the most vulnerable groups. It will focus on support to development and implementation of nutrition-specific interventions in every province/area. These will be complemented by integrated, cross-sectoral strategies and plans to address malnutrition, particularly among the most disadvantaged children.

(ii) An integrated response in water, sanitation and hygiene and education will be promoted, as well as strengthened facilities to provide more comprehensive mother and child support. Integration of nutrition subjects into formal and non-formal education curricula likewise will be promoted. So will policies, legislation and capacity development and behaviour change communication for better nutrition of people living in the most vulnerable areas.

IV. Programme management, monitoring and evaluation

37. The common country programme will be implemented within the management and accountability structure of the new One United Nations Programme; accordingly, the results and resources frameworks of the three organizations are integral parts of the one country programme action plan, to be signed by the United Nations and the Government of Pakistan. Implementation of the programme will be anchored in the principles of aid effectiveness, such as national ownership and the use of national systems and mechanisms. In exceptional cases, where relevant, the direct implementation modality and the non-governmental organization (NGO) execution mode will be employed, in concurrence with the Government's Economic Affairs Division. Management of the programme will be supported by a coherent governance structure, with clear lines of accountability and decision-making, a resource mobilization strategy, and a robust monitoring and evaluation plan that will be duly agreed to by the United Nations Resident Coordinator and submitted to the Government's Economic Affairs Division for endorsement. Overall programme management and coordination will be the joint responsibility of the Government and the three organizations.

38. Building on lessons learned from the previous country programme, the management approach for the new programme is flexible, cost-effective, sensitive to potential risks and based on evidence. It will support joint programming to enable innovation and integrated approaches without compromising accountability and transparency. The management structure will take into account the structural and functional changes of the Government under the 18th Amendment and accompanying provincial/area specificities.

39. As part of overall management and oversight arrangements, a high-level committee will be formed, co-chaired by the Secretary of the Government's Economic Affairs Division and the United Nations Resident Coordinator. It will consist of federal and provincial/area governments, United Nations agencies and donors. It will provide policy guidance on the One United Nations Programme and its links with national priorities and processes. It will also decide on significant programmatic changes and funding allocations not included in the agreed framework. A provincial steering committee will be established for each of the eight provinces/areas. Members will come from provincial, regional and federal governments, including line departments, as well as from the United Nations. These steering committees will report to the high-level committee.

40. The management structure for the common country programme will be finalized as mutually agreed to through consultation among the three organizations. The management structure, to be co-chaired by the Government's Economic Affairs Division and the United Nations Resident Coordinator, will include the Representatives of the three organizations and involve relevant federal and provincial/area government representatives. The three organizations will hold annual reviews with the Government, represented by the Economic Affairs Division, the United Nations Resident Coordinator and other stakeholders to take stock of progress. These reviews will be complemented by quarterly financial and narrative reporting through designated government reporting systems. Civil society organizations and other development partners will be consulted to ensure inclusiveness, transparency and aid effectiveness.

41. A midterm review of the One United Nations Programme will take place to ensure continued alignment with national priorities. Final outcome evaluations will be conducted for each of the six priority areas. These reviews and evaluations will encompass an assessment of the contribution of the common country programme to the results achieved in the strategic priority areas and outcomes. They will also assess how the achievements of the common country programme contribute to results in the country programme action plan and the results and resources frameworks. The three organizations will ensure prior consultations with the national Government and provincial/area governments before disseminating and launching all studies and results reflecting the economic, social or environmental situation in the country. Information will be uploaded as PDFs onto the website of the Government's development assistance database.

Annex

UNFPA RESULTS AND RESOURCES FRAMEWORK FOR PAKISTAN

| One programme and national strategic priority area 1: Vulnerable and marginalized populations have equitable access and use of quality services Indicative resources strategic priority area 1: \$30 million from regular resources; \$40 million from other resources | | | |
|--|--|---|---|
| Related UNFPA revised development results framework, 2012-2013, outcome 2: increased access to and utilization of quality maternal and newborn health services; Outcome 6: improved access to sexual and reproductive health services and sexuality education for young people, including adolescents | | | |
| One programme outcome indicators | Programme approaches, outputs, indicators, baselines and targets | Partners and partnership frameworks | Indicative resources |
| <p>Outcome 1.1: Policy environment, legislation, budgetary allocation and accountability mechanisms strengthened in support of equitable access to social and basic services for human development</p> <p>Outcome indicators: (with UNICEF)</p> <ul style="list-style-type: none"> • Percentage of national and provincial budget allocated to basic social services • Number of evidence-based policy documents that specifically address the needs of the most vulnerable and excluded populations | <p>Programme approaches for Outcomes 1.1, 1.2 and 1.3: Support federal and provincial/area governments in addressing barriers to delivery of quality reproductive health/family planning, HIV/AIDS and gender-based violence services, taking into account emerging challenges including devolution, integration of services, service delivery through the private sector, and addressing the needs of adolescents and young people. More specifically, the programme will: (a) develop institutional capacity to promote results-based management to deliver quality reproductive health; (b) support the health sector reform with special attention to strengthen female human resources; (c) provide technical assistance to support efficient and effective delivery of reproductive health services, especially through increased public-private partnerships; (d) integrate humanitarian preparedness and response into mainstreamed plans and programmes to ensure application of Minimum Initial Service Package (MISP) for universal access to reproductive health including in disaster situations; (e) integrate gender-based violence in reproductive health service delivery; and (f) ensure behavioural change through communication campaigns that target community gatekeepers, such as parents and religious leaders, towards delayed marriage and birth spacing among young people/couples.</p> <p>Output 1.1.1: Provincial health policies, plans and budgetary frameworks integrate the goal of universal access to reproductive health, including for emergency preparedness.</p> <p>Output indicators:</p> <ul style="list-style-type: none"> • Number of provincial health plans incorporating costed activities to ensure universal access to reproductive health Baseline: 0; Target: at least 3 • Number of provinces/areas with dedicated budget for sexual and reproductive health commodities allocated with an annual increase of at least three per cent from provincial budget from 2015 Baseline: 0; Target: at least 3 | <p>Federal: National Planning Commission, Ministries of: Human Rights; and Religious Affairs,</p> <p>Provincial: Provincial Departments of: Planning; Health; Population Welfare in Punjab, Sindh and Khyber Pakhtunkhwa; Provincial AIDS Control Programme</p> <p>Others: UNICEF, World Health Organization, UN-Women, the joint United Nations Programme on HIV/AIDS (UNAIDS), World Bank; civil societies; academic institutions, Youth</p> <p>Partnership frameworks: H4+ for maternal health</p> | <p>\$10 million (\$5 million from regular resources and \$5 million from other resources)</p> |

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| <p>Outcome 1.2: Increased public awareness/behaviour change to ensure vulnerable and excluded populations practice safe behaviour, as well as access and use quality services, including housing</p> <p>Outcome indicators: (with UNICEF)</p> <ul style="list-style-type: none"> • Proportion of teenagers who have begun childbearing • Birth rate among adolescent girls per 1,000 • Proportion HIV positive | <p>Output 1.2.1: Adolescent and youth, especially the most marginalized, in selected districts have access to integrated sexual and reproductive health information and services according to provincial standards on youth-friendly services to address early marriage and early pregnancies.</p> <p>Output indicators:</p> <ul style="list-style-type: none"> • Percentage of service delivery points in selected districts supported by UNFPA providing youth friendly services and information according to provincial standards Baseline: 0; Target: 75% • Number of districts supported by UNFPA with mechanisms in place to sensitize local communities and gatekeepers on the importance of sexual reproductive health services for adolescents and youth Baseline: 0; Target: at least 3 • Number of districts supported by UNFPA that introduced newlyweds counselling services Baseline: 0; Target: 3 | | <p>\$8 million (\$5 million from regular resources and \$3 million from other resources)</p> |
| <p>Outcome 1.3: Capacity for equitable social service delivery improved at all levels, including using innovative technology</p> <p>Outcome indicators: (with UNICEF)</p> <ul style="list-style-type: none"> • Number of public-private partnership programmes focusing on equitable basic social service delivery • Number of basic social service delivery offices that utilize innovative technologies to improve service delivery | <p>Output 1.3.1: Provincial health departments have strengthened capacity to plan, implement and monitor universal access to reproductive health with special focus on family planning, including in humanitarian settings.</p> <p>Output indicators:</p> <ul style="list-style-type: none"> • Percentage of health service delivery points supported by UNFPA providing family planning services as part of reproductive health services package as per provincial standards Baseline: 0; Target: at least 50% • Number of provincial health departments supported by UNFPA that have an operational contingency plan based on the MISP for reproductive health and gender- based violence Baseline: 0; Target: 3 • Number of districts supported by UNFPA with functioning public-private partnership mechanisms in place for ensuring universal access to reproductive health Baseline: 10; Target: 20 • Number of trained community midwives deployed to primary health care facilities Baseline: 6,263 (2010); Target: at least 12, 000 | | <p>\$52 million (\$20 million from regular resources and \$32 million from other resources)</p> |

| One programme and national strategic priority area 2: Inclusive economic growth | | | |
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| Indicative resources strategic priority area 2: \$5 million from regular resources; \$3 million from other resources | | | |
| Related UNFPA revised development results framework; 2012–2013, outcome 1: Population dynamics and its interlinkages with the needs of young people, including adolescents, sexual and reproductive health, including family planning, gender equality and poverty reduction addressed in national and sectoral development plans and strategies. | | | |
| One programme outcome indicators | Programme approaches, outputs, indicators and targets | Partners and partnership frameworks | Indicative resources |
| <p><u>Outcome 2.4:</u> Key causes and consequences of population growth addressed</p> <p><u>Outcome indicators:</u></p> <ul style="list-style-type: none"> • Total fertility rate of the two lowest income quintiles; • Number of federal and provincial policies and programmes formulated and implemented to address key causes and consequences of population growth | <p><u>Programme approaches:</u> The programme aims at increasing national capacity to conduct evidence-based policy advocacy and creating an enabling environment for implementing the core area of the programme, the integrated maternal health, family planning and gender-based violence services. It will generate evidences to advocate for new and emerging issues on population dynamics, reproductive health, family planning and gender.</p> <p>The programme will: (a) support population, reproductive health and gender research for evidence-based policy advocacy; (b) strengthen national capacity for incorporation of population, reproductive health and gender issues in national and provincial/area programmes and plans; and (c) strengthen national capacity to utilize population, reproductive health and gender data from census, demographic surveys, and health information system for decision-making and advocacy.</p> <p><u>Output 2.4.1:</u> Planning and Statistics Departments at the national and provincial level have increased capacity to utilize policy research and data on population, reproductive health and gender equality for evidence-based advocacy and policy reforms.</p> <p><u>Output indicators:</u></p> <ul style="list-style-type: none"> • Number of key government officials trained to incorporate population, reproductive health and gender issues in national plans and programmes Baseline: 22 (2011); Target: at least 150 • Number of institutions supported by UNFPA to incorporate results of the population census and surveys in selected national and provincial policies and plans Baseline: 0; Target: at least 10 | <p>Federal: National Planning Commission, Pakistan Bureau of Statistics</p> <p>Provincial: Provincial Departments of: Planning; Health; Population Welfare, Youth</p> <p>Others: Civil society and academic institutions; media, UNDP</p> | <p>\$8 million (\$5 million from regular resources and \$3 million from other resources)</p> <hr/> <p>Total for programme coordination and assistance: \$1 million from regular funds</p> |

Resources for 2013-2017

Regular: \$36 million

Other: \$43 million

Total: \$79 million