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Programme and of the
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UNFPA – Country programmes and related matters

UNITED NATIONS POPULATION FUND

Draft country programme document for Georgia

Proposed indicative UNFPA assistance: \$6.3 million: \$3.3 million from regular resources and \$3.0 million through co-financing modalities and/or other, including regular resources

Programme period: Five years (2011-2015)

Cycle of assistance: Second

Category per decision 2007/42: C

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

	Regular resources	Other	Total
Reproductive health and rights	1.7	1.0	2.7
Population and development	0.7	1.5	2.2
Gender equality	0.4	0.5	0.9
Programme coordination and assistance	0.5	-	0.5
Total	3.3	3.0	6.3



I. Situation analysis

1. Georgia, formerly part of the Soviet Union, regained its independence in 1991. During the subsequent transition period, economic crises, the deterioration of infrastructure, civil unrest and emigration have negatively affected national development.

2. Beginning in the early 1990s, internal conflicts caused the displacement of an estimated 300,000 people, mostly from the regions of Abkhazia and South Ossetia. In August 2008, a conflict between Georgia and the Russian Federation led to additional population displacements. Natural disasters, such as earthquakes, landslides, floods and droughts, have hampered efforts to achieve sustainable development.

3. Reforms initiated by the Government led to rapid economic growth. However, the 2008 military conflict and the global financial crisis affected growth and led to a shortage of foreign investments.

4. Labour out-migration since the early 1990s and a low total fertility rate are the main reasons for the ageing of the population. In 2009, 20.5 per cent of the population was older than 60. Life expectancy at birth is 79 years for women and 69.3 years for men, according to the 2009 demographic yearbook.

5. Reproductive health indicators have improved in recent years. An analysis of mortality and morbidity rates among women of reproductive age reveals three main causes of mortality: cancers of the reproductive system, complications of delivery, and abortion. In 2008, the incidence rate for breast cancer was 43.7 per 100,000 women. For cervical cancer, the incidence rate was 11.6 per 100,000 women. The maternal mortality ratio decreased from 22.3 deaths per 100,000 live births in 2005 to 14.3 in 2008, but is still higher than the national development target of 12.3. According to the 2005 reproductive health survey, induced abortions decreased from 3.7 per 100,000 women in 1999 to 3.1 per 100,000 women in 2005, with a corresponding increase in the contraceptive

prevalence rate from 41 per cent to 47 per cent. The limited government allocation to the health sector does not cover the cost of procuring contraceptives. UNFPA is the main donor of contraceptives.

6. Although HIV prevalence is still low, the HIV incidence rate has increased from 0.004 per cent to 0.008 per cent over the last four years.

7. Despite increased awareness among youth of reproductive health issues, promoting safer sexual behaviour remains a challenge due to a lack of youth-friendly reproductive health information and services.

8. Although the constitution of Georgia ensures gender equality, women's political and economic activity is limited. Only 6 per cent of members of Parliament are women. The development and implementation of a national action plan on gender equality and the development of institutional capacity to address gender issues in the executive branch of government are high priorities. Further efforts are required to develop a national referral mechanism on domestic violence.

9. The availability and reliability of data are a concern. Because of shortfalls in the national budget, the Government has postponed the general census to 2012. The Department of Statistics is being reorganized following the adoption, in late 2009, of the law on statistics.

II. Past cooperation and lessons learned

10. The first UNFPA country programme in Georgia began in 2006, with a budget of \$4.3 million. Due to successful resource mobilization efforts, the budget for the 2006-2010 country programme reached \$8.59 million, with \$3.09 million from regular resources and \$5.5 million from other resources. Government co-funding of UNFPA activities increased from \$166,000 in 2006 to \$733,000 in 2010.

11. UNFPA focused its assistance on reproductive health and rights, gender equality, and population and development issues. The programme incorporated advocacy in all its components. In August 2008, UNFPA established a humanitarian response programme in Georgia.

12. The programme supported national capacity development for censuses, data collection and the analysis of issues related to reproductive health, demography and gender-based violence. Activities supported by UNFPA included a series of surveys in the thematic areas targeted by the programme.

13. The programme supported: (a) the development and dissemination of reproductive health guidelines; (b) the establishment of youth-friendly reproductive health services; (c) training for professionals; (d) the provision of equipment; and (e) reproductive health mobile team operations in several regions. It also supported the creation of the breast and cervical cancer-screening programme in Tbilisi, co-funded by the Government, which received the Pearl of Wisdom award at the European Parliament in January 2009.

14. The UNFPA country programme supported: (a) an improved policy environment; (b) the coordination and development of referral mechanisms on domestic violence; (c) awareness-raising of the population; and (d) the empowerment of women's organizations. As the coordinating organization, UNFPA supported the development and implementation of the United Nations joint programme on gender equality.

15. The programme supported two subregional projects on gender-based violence and sexual and reproductive health for youth. UNFPA coordinated country activities as well as regional activities for the latter project.

16. One of the lessons learned during the programme cycle was the importance of national and regional partnerships in new programme areas. UNFPA established several thematic partnerships within the South Caucasus and the Black Sea region and with the European Union.

17. The previous programme demonstrated the need to be proactive in responding to the needs of the population within the context of health-care reforms by including the private sector, such as insurance companies, in order to make existing basic reproductive health services affordable and accessible.

18. A 2009 UNFPA oversight mission favourably assessed the country programme in Georgia. Annual reviews found programme

performance to be highly satisfactory, with planned targets being exceeded for many components.

III. Proposed programme

19. The proposed UNFPA programme, 2011-2015, is the second country programme in Georgia. It contributes to the UNFPA strategic plan, 2008-2013 (DP/FPA/2007/17), the United Nations Development Assistance Framework (UNDAF), 2011-2015, and the priorities identified in the national strategic development documents. UNFPA and the Government developed the country programme through a participatory approach involving national stakeholders, United Nations organizations and donors. The Government and its partners endorsed the outcomes, outputs and priority activities of the proposed programme in December 2009. The proposed programme has three components: (a) reproductive health and rights; (b) population and development; and (c) gender equality. Reproductive health and development for youth are mainstreamed in all three components. The country programme incorporates preparedness measures to address existing security risks in the country and the region.

Reproductive health and rights component

20. This component has one outcome: vulnerable groups enjoy improved access to high-quality health, education and essential social services. Three outputs will contribute to this outcome.

21. Output 1: Strengthened reproductive health coordination mechanisms and regulatory and monitoring frameworks to meet the demand of vulnerable populations for high-quality sexual and reproductive health services. This output is aligned with outcome 1.1 of the UNFPA strategic plan, and will be achieved by: (a) supporting the National Council on Reproductive Health to strengthen coordination, advocacy and resource mobilization efforts, and to strengthen partnerships with the private sector, including insurance companies; (b) participating in United Nations and joint national efforts for emergency preparedness, to integrate reproductive health and gender issues into contingency planning; (c) expanding partnerships and the sharing of technical

knowledge among technical institutions; (d) supporting the improvement of the reproductive health policy framework and the development of guidelines and protocols; and (e) strengthening partnerships with the mass media to mobilize public support for reproductive health issues.

22. Output 2: Improved access to comprehensive sexual and reproductive health services and gender-sensitive information, with an emphasis on the most vulnerable groups. This output is aligned with outcome 1.2 of the UNFPA strategic plan, and will be achieved by: (a) continuing advocacy efforts and partnerships with the Government to scale up the reproductive health programme; (b) improving the quality and expanding the range of reproductive health services by improving the capacity of health providers, strengthening the monitoring and assessment of services, sharing tools, and supplying reproductive health commodities; (c) supporting outreach reproductive health services in all regions of the country; and (d) supporting educational and behavioural change activities focused on vulnerable populations.

23. Output 3: National capacity is strengthened to provide youth-friendly, gender-sensitive sexual and reproductive health information and services. This output is aligned with outcome 2.5 of the UNFPA strategic plan. UNFPA will focus efforts on youth. In particular, the programme will support: (a) integrating reproductive health education into school curricula; (b) scaling up out-of-school education and behaviour change communication initiatives, with a focus on vulnerable youth; and (c) building the capacity of youth-friendly reproductive health centres to provide high-quality services to young people.

Population and development component

24. The population and development component has one outcome: enhanced capacity of democratic institutions for informed policymaking based on reliable data and clear, fair and participatory legislative processes. The two outputs, aligned with outcomes 2.1 and 2.2 of the UNFPA strategic plan, will contribute to achieving this outcome.

25. Output 1: Strengthened policy dialogue to integrate issues related to population dynamics, gender equality, youth development and

reproductive health into public policies, poverty-reduction plans and expenditure frameworks. This output will be achieved by supporting the millennium development group in Parliament, as well as by strengthening advocacy efforts and policy dialogue with policymakers and the Government on: (a) the development and adoption of a comprehensive youth policy; (b) demography and the ageing of the population; and (c) partnership building.

26. Output 2: Improved capacity of national institutions to collect and analyse data on population dynamics, gender equality, young people, sexual and reproductive health, and HIV/AIDS. This output will be achieved by: (a) providing support to the Department of Statistics to conduct the census; and (b) building the capacity of the Department of Statistics and other national institutions.

Gender equality component

27. The gender equality component has one outcome: enhanced protection and promotion of human rights and access to justice and gender equality, with a focus on the rights of minorities and of marginalized and vulnerable groups. Two outputs will contribute to achieving this outcome.

28. Output 1: Strengthened national gender-equality mechanisms and capacity for improved policy development, implementation, monitoring and coordination. This output is aligned with outcome 4.1 of the UNFPA strategic plan. It will be achieved through the implementation of the United Nations joint programme that focuses on: (a) institutional development and national capacity-building of the national gender-equality system; (b) the development, monitoring and evaluation of a gender-equality national action plan; (c) strengthening coordination between donors and civil society; and (d) strengthening gender mainstreaming in United Nations programming.

29. Output 2: Support to coordination and monitoring mechanisms, policy frameworks and protection systems for improved responses to domestic violence. This output is aligned with outcome 4.3 of the UNFPA strategic plan. This output will be achieved by supporting the national coordination mechanism to: (a) develop, update,

monitor and evaluate the action plan on domestic violence; (b) improve national policy and legislation; (c) strengthen the national referral mechanism by developing the capacity of service providers; and (d) raise awareness of gender-based violence and gender-equality issues among the general population, with a focus on youth.

IV. Programme management, monitoring and evaluation

30. The Office of the Prime Minister will coordinate the country programme. The UNFPA country office in Georgia will collaborate with several line ministries and the Government.

31. The programme will include a monitoring and evaluation plan aligned with the UNFPA strategic plan, the UNDAF, 2011-2015, and national priorities. UNFPA, the Government and partner organizations will undertake joint participatory reviews and will monitor and evaluate programme implementation.

32. UNFPA will seek additional resources from international and bilateral donors, and will engage in joint programming with other United Nations organizations.

33. The UNFPA country office in Georgia consists of a non-resident UNFPA country director based in Ankara, Turkey, and national staff, as per the approved country office typology. UNFPA may recruit national project personnel to strengthen programme implementation, and will obtain additional technical assistance from national and international consultants. The UNFPA Regional Office for Eastern Europe and Central Asia will provide additional technical and programme assistance.

RESULTS AND RESOURCES FRAMEWORK FOR GEORGIA

National priority: alleviation of poverty				
Programme component	UNDAF/country programme outcomes, indicators, baselines and targets	Country programme outputs, indicators, baselines and targets	Partners	Indicative resources by programme component
Reproductive health and rights	<p><u>Outcome:</u> Vulnerable groups enjoy improved access to high-quality health, education and essential social services</p> <p><u>Outcome indicators:</u></p> <ul style="list-style-type: none"> ● Maternal mortality ratio Baseline: 14 deaths per 100,000 live births Target: 12 deaths per 100,000 live births ● Contraceptive prevalence rate Baseline: 50 per cent Target: 55 per cent ● Abortion rate per 1,000 live births Baseline: 394 Target: 350 ● Percentage of deliveries in health-care facilities Baseline: 99.6 per cent Target: 99.6 per cent 	<p><u>Output 1:</u> Strengthened reproductive health coordination mechanisms and regulatory and monitoring frameworks to meet the demand of vulnerable populations for high-quality sexual and reproductive health services</p> <p><u>Output indicators:</u></p> <ul style="list-style-type: none"> ● Number of reproductive health guidelines and protocols developed Baseline: 8 Target: 23 ● Donor coordination matrix in reproductive health field is developed, operational and updated regularly Baseline: Donor coordination matrix on reproductive health field is in place Target: Donor coordination matrix is operational and is updated twice a year <p><u>Output 2:</u> Improved access to comprehensive reproductive health services and gender-sensitive information, with an emphasis on the most vulnerable groups</p> <p><u>Output indicators:</u></p> <ul style="list-style-type: none"> ● Number of clients served by reproductive health mobile teams in the districts of Georgia Baseline: 0 Target: 37,500 ● Number of reproductive health providers trained on reproductive health issues Baseline: 0 Target: 750 <p><u>Output 3:</u> National capacity is strengthened to provide youth-friendly, gender-sensitive reproductive health information and services</p> <p><u>Output indicators:</u></p> <ul style="list-style-type: none"> ● Number of youth reached by outdoor education sessions Baseline: 0 Target: 10,000 ● Number of centres providing youth-friendly services Baseline: 16 Target: 25 	<p>Cabinet of Ministers and the Prime Minister's Office; Department of Statistics; Ministry of Education; Ministry of Labour, Health and Social Affairs; Municipality of Tbilisi; Parliament</p> <p>National Council on Reproductive Health; Zhordania Institute for Human Reproduction</p> <p>Non-governmental organizations; the private sector</p> <p>Bilateral and multilateral donors; United Nations organizations</p>	<p>\$2.7 million (\$1.7 million from regular resources and \$1 million from other resources)</p>

National priority: democratic development through balanced, independent, fair and participatory governance systems and processes is promoted at all levels, based on rule of law, human rights and equality principles				
Programme component	UNDAF/country programme outcomes, indicators, baselines and targets	Country programme outputs, indicators, baselines and targets	Partners	Indicative resources by programme component
Population and development	<p><u>Outcome:</u> Enhanced capacity of democratic institutions for informed policymaking based on reliable data and clear, fair and participatory legislative processes</p> <p><u>Outcome indicators:</u></p> <ul style="list-style-type: none"> Millennium Development Goal coordination mechanisms are established and functional in Parliament <p>Baseline: No Millennium Development Goal coordination mechanism is in place Target: Millennium Development Goal coordination mechanism is established and functional <ul style="list-style-type: none"> High-quality census is implemented and the results are disseminated <p>Baseline: No census implemented Target: Census implemented</p> </p>	<p><u>Output 1:</u> Strengthened policy dialogue to integrate issues related to population dynamics, gender equality, youth development and reproductive health into public policies, poverty-reduction plans and expenditure frameworks</p> <p><u>Output indicators:</u></p> <ul style="list-style-type: none"> Youth policy is developed <p>Baseline: No youth policy is in place; Target: Youth policy is in place <ul style="list-style-type: none"> Number of thematic partnerships at national and regional levels developed <p>Baseline: 0; Target: 5</p> <p><u>Output 2:</u> Improved capacity of national institutions to collect and analyse data on population dynamics, gender equality, young people, sexual and reproductive health, and HIV/AIDS</p> <p><u>Output indicators:</u></p> <ul style="list-style-type: none"> Census Coordination Board is established and operational <p>Baseline: No Census Coordination Board Target: Census Coordination Board established <ul style="list-style-type: none"> Number of studies and surveys conducted and disseminated through UNFPA support <p>Baseline: 0; Target: Six surveys and studies during 2011-2016</p> </p></p>	<p>Department of Sports and Youth Affairs; Department of Statistics; Parliament</p> <p>Bilateral and multilateral donors; European Parliamentary Forum; United Nations organizations</p> <p>Non-governmental organizations; the private sector</p>	\$2.2 million (\$0.7 million from regular resources and \$1.5 million from other resources)
Gender equality	<p><u>Outcome:</u> Enhanced protection and promotion of human rights and access to justice and gender equality, with a focus on the rights of minorities and of marginalized and vulnerable groups</p> <p><u>Outcome indicators:</u></p> <ul style="list-style-type: none"> National gender-equality mechanism is sustainable and operational within the legislative and executive branches of the Government <p>Baseline: Gender-equality mechanism is established in Parliament Target: Gender-equality mechanism is established and sustainable in Parliament</p>	<p><u>Output 1:</u> Strengthened national gender-equality mechanisms and capacity for improved policy development, implementation, monitoring and coordination</p> <ul style="list-style-type: none"> National action plan on gender equality developed and updated <p>Baseline: Two-year gender-equality national action plans have been developed regularly; Target: 2011-2013 gender-equality national actions plans developed and updated as appropriate <ul style="list-style-type: none"> Quarterly donor coordination meetings conducted <p>Baseline: 0; Target: Four donor coordination meetings are conducted annually</p> <p><u>Output 2:</u> Support to coordination and monitoring mechanisms, policy frameworks and protection systems for improved response to domestic violence</p> <p><u>Output indicators:</u></p> <ul style="list-style-type: none"> Two-year action plans on domestic violence are developed <p>Baseline: Two-year action plans have been updated regularly Target: Two-year action plans are updated and in place (2011, 2014) <ul style="list-style-type: none"> Number of service providers trained on national referral mechanism on domestic violence <p>Baseline: 0; Target: 150</p> </p></p>	<p>Ministry of Defence; Ministry of Interior; Parliament of Georgia Advisory Council on Gender Equality; State Inter-agency Council on Domestic Violence</p> <p>Bilateral and multilateral donors; United Nations Organizations</p> <p>Non-governmental organizations</p>	<p>\$0.9 million (\$0.4 million from regular resources and \$0.5 million from other resources)</p> <hr/> <p>Total for programme coordination and assistance: \$0.5 million from regular resources</p>