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UNFPA – Country programmes and related matters

United Nations Population Fund

Country programme document for Jordan

Proposed indicative UNFPA assistance: \$51.3 million: \$2.3 million from regular resources and \$49.0 million through co-financing modalities and/or other resources, including regular resources

Programme period: Five years (2018-2022)

Cycle of assistance: Ninth

Category per decision 2013/31: Pink

Proposed indicative assistance (in millions of \$):

Strategic plan outcome areas		Regular resources	Other resources	Total
Outcome 1	Sexual and reproductive health and rights	1.0	31.0	32.0
Outcome 3	Gender equality and women's empowerment	0.5	15.5	16.0
Outcome 4	Population and development	0.5	2.5	3.0
Programme coordination and assistance		0.3	-	0.3
Total		2.3	49.0	51.3



I. Programme rationale

1. Jordan is a lower middle-income country, having dropped over the last five years from upper middle-income country status within the high human development category. The country's population is approaching 10 million, with over 52 per cent under 25 years of age. A shift in the population age structure may enable a demographic dividend within the next decades due to reduction of total fertility rate, late marriage and use of family planning methods. This projection, however, will only become a reality if demographic changes match economic and social development opportunities for youth, as well as targeted investments into education, health and employability of young people.

2. While significant progress was made on the Millennium Development Goals for education and health, other areas have lagged behind due to a number of factors, including global financial recession, regional instability and influx of refugees. Given the interconnected political, economic, social and institutional aspects of development, strengthening the resilience of systems and institutions are critical for the implementation of Sustainable Development Goals (SDGs) and the Programme of Action of the International Conference on Population and Development (ICPD).

3. Jordan has accepted refugees from successive conflicts, evidenced by a non-Jordanian population of three million. Starting in 2013, the Syrian crisis has changed the country's population dynamics and investment priorities. Jordan hosts 1.3 million Syrians, of which 660,000 are refugees (78 per cent within host communities; 22 per cent in camps). There are 325,000 women of reproductive age; 55,000 of those are pregnant. These factors have created a burden on service delivery systems, particularly the health care system.

4. Increasing the ability of young people to exercise their sexual and reproductive health and reproductive rights (SRHR) is critical to reverse negative trends, such as child, early and forced marriage, gender-based violence and women's limited access to formal employment. Many young people seek information and services related to their SRHR outside of public health facilities, according to a perception survey of youth in Zaatari camp and the UNFPA Y-Peer network. Using youth-centred programmes and services is a more viable option for Jordan where adolescent and youth SRHR services are taboo in many communities.

5. Reducing incidence of child marriage, delaying childbirth and improving opportunities for women's meaningful livelihood will be necessary to ensure better reproductive health outcomes for young women. Furthermore, underage marriages still represent 13.4 per cent of all marriages in Jordan according to a study issued by the Higher Population Council this year. The policies that promote women in the formal workplace need to integrate sexual and reproductive health (SRH) strategies to sustain lower fertility rates and decrease incidence of gender-based violence, especially child marriages, thus laying ground for demographic dividend.

6. Access to social services is high, with varied quality. Nearly all pregnant women (99 per cent) receive antenatal care. The maternal mortality ratio is 19 per 100,000 live births. These gains need to be sustained through improved obstetric and postnatal care, addressing adolescent reproductive health and strengthening maternal death surveillance and response (MDSR). Demand for sexual and reproductive health services will increase, as the number of women of reproductive age is projected to rise from 1.5 million to 2 million by 2020, and focusing on the most vulnerable women will be key for success of SRH programmes.

7. Gender disparities have led to Jordan having one of the lowest rankings in the region on the Gender Development Index (0.864), the Gender Inequality Index (111/188) and the Global Gender Gap Index (134/145). There is a high prevalence of violence against women; one in three ever-married women aged 15 years and above reported having been exposed to physical violence. Nearly 150,000 consultations for gender-based violence have been administered to girls and vulnerable women. The uptake of these services has been steep, providing an indication of the need.

8. Advocacy on human rights in relation to SRH will remain a priority for UNFPA and its partners. The most recent significant success in upholding human rights was the repeal of Article 308 of the Penal Code that allowed charges to be dropped against a rapist if he married his victim.

9. UNFPA succeeded in advocating for three national strategies to take into account the realization of the demographic dividend. UNFPA also supported the provision of over 200,000 reproductive health consultations per year and the promotion of a model facility with zero maternal deaths in Zaatari Camp that is now recognized as a centre of excellence by the Health Care and Accreditation Facility in Jordan. The country office supported the Ministry of Health to develop and endorse protocols for hepatitis and gender-based violence that have helped promote an integrated, rights-based approach in the health system. A youth centre in Zaatari, supported by UNFPA, is the foundation of a participatory approach by youth that utilizes SRH as the main catalyst for improved civic engagement, community leadership and the ability to negotiate conflict constructively, including for addressing gender-based violence.

10. Recommendations from reviews, assessments and evaluations identified the need to: (a) bridge the humanitarian-development gap using a resilience-based approach; (b) engage young people in public policy and ensure incorporation of their voices into SDG-based strategies; (c) strengthen national gender equality mechanisms, policy frameworks and protection systems.; (d) exercise creativity in financing development; (e) strengthen the capacity of service provision at local levels and strengthen the systems' preparedness; and (f) safeguard development gains from being affected by security concerns, especially in the context of human rights, protection, preventing violence in all forms, and good governance.

II. Programme priorities and partnerships

11. The UNFPA partnership with the Ministry of Planning and International Cooperation will be strengthened to ensure alignment of national plans with population and development priorities. The Ministries of Health and Social Development are also partners, as are the Ministry of Youth, the National Council for Family Affairs, the Higher Population Council, Department of Statistics, Family Protection Department and Royal Medical Services, as well as academic institutions and United Nations agencies. New partnerships will be formed with Plan International and CARE. Private-sector initiatives with Microsoft and Oracle are being promoted for youth networking and employability.

12. The proposed programme will contribute to three outcomes of the United Nations Sustainable Development Framework (UNSDF) 2018-2022, supporting the triangulation between people, institutions and opportunity. Within the refugee coordination structure, UNFPA will continue to co-lead the gender-based violence subsector and the gender-based violence information management system task force. It will strengthen synergies with United Nations entities in their areas of comparative advantage through joint advocacy, project implementation, monitoring and tracking, while ensuring that a mechanism for multisectoral provision to gender-based violence prevention is in place.

13. The programme will focus on strengthening the resilience of public institutions and communities to support ICPD goals on SRHR and gender-based violence, and in the broader context the sustainable development agenda. It is aligned with the Jordan National Strategy 2025, and supports the achievement of the SDGs, with a focus on the ICPD in improving the health and well-being of women, adolescents, youth and the vulnerable, by reaching those farthest behind. The Government leadership role and commitment to SDGs achievement and UNFPA comparative advantage and strategic positioning will be leveraged through joint programming initiatives.

14. Bridging the development-humanitarian nexus is vital particularly in light of the Syrian crisis and continued instability in the region. The Jordan Response Plan 2017-2019, a multi-year rolling humanitarian plan, will serve as the key reference point for resilience planning, emergency preparedness and response, including targeted capacity-

building and service delivery supporting vulnerable populations in refugee camps and in host communities.

A. Outcome 1: Sexual and reproductive health

15. *Output 1: Strengthened capacity of national institutions to deliver integrated high-quality SRH information and services, including for maternal death surveillance and response, in humanitarian and development settings.* This will be achieved by: (a) developing a strategy and action plan for delivery of integrated high-quality SRH services, focusing on maternal, neonatal, adolescent and youth health; (b) establishing stakeholders' coalitions for mainstream SRHR issues in national policies and emergency preparedness plans; (c) supporting efforts to increase knowledge and awareness of adolescents and youth of SRH; (d) building capacity in clinical management of rape, delivery of SRH and gender-based violence services, including the Minimal Initial Service Package (MISP), an efficient supply-chain management system; (e) building capacity of health-care providers on integrated high-quality SRH services in targeted comprehensive centres; (f) updating and disseminating national policies, guidelines, norms and standards for MDSR and maternal care, in line with global guidelines and local conditions, including for maternal and perinatal death reporting; and (g) advocating for inclusion of reproductive health and gender-based violence issues within national emergency preparedness/response plans.

16. *Output 2: Improved young people's ability to exercise SRH rights in development and humanitarian settings.* This will include: (a) integrating SRHR curricula within youth and adolescent programmes; (b) promoting innovative approaches for knowledge transfer on youth SRHR, and peace and security; and (c) advocating for inclusion of adolescent and youth SRHR in national strategies and policies, including emergency preparedness plans.

B. Outcome 3: Gender equality and women's empowerment

17. *Output 1: Strengthened national capacities to prevent and respond to gender-based violence, with focus on advocacy, data and coordination in development and humanitarian settings.* This will include: (a) enhancing capacities of national partners to address gender-based violence through a multisectoral, survivor-centred approach by leading and supporting inter-agency gender-based violence coordination mechanisms; (b) producing analytic reports on gender-based violence response, identifying gaps and proposing corrective action, capitalizing on the UNFPA leadership role in the gender-based violence information management system task force; (c) enhancing gender-based violence service delivery through the provision of specialized case management and psychosocial support services to safe spaces; and (d) enhancing a coordinated referral system to address gender-based violence among the health, social services, police and justice sectors by providing support to the rollout of the essential services package.

18. *Output 2: Strengthened national capacities to address child, early and forced marriage.* This will include: (a) elaborating and implementing communication for behavioural impact and communication for social change strategies engaging key stakeholders and decision-makers to address deep-rooted norms perpetuating practices such as child, early and forced marriage; and (b) advocating with different stakeholders on the elimination of such practices.

C. Outcome 4: Population and development

19. *Output 1: Increased national data systems' capacity for integration of population dynamics for the realization of the demographic dividend, including in humanitarian contexts.* This will include: (a) advocating for integration of data into national strategies that may lead to a demographic dividend; (b) supporting the integration of ICPD-SDGs monitoring and reporting systems; (c) producing position papers and policy briefs on critical population issues, including the humanitarian situation; and (d) targeted technical assistance to support monitoring, tracking and managing gender-based violence in line with international standards and norms.

III. Programme and risk management

20. The country programme will be nationally executed by key line ministries and selected strategic implementing partners that focus on government and civil society organizations with wide outreach and policy-level influence. Implementing partners will be selected based on their comparative advantage and capacity to deliver high-quality programmes.

21. UNFPA, in partnership with other United Nations agencies, will identify underlying vulnerabilities and strengthen contingency planning for timely and effective response to affected populations in emergencies, particularly women and girls. Programme-specific risk management strategies will be adjusted as needed. Assurance activities, including micro-assessments, spot checks and audits, will be conducted in line with the harmonized approach to cash transfers.

22. Given the protracted nature of the refugee crisis, the widening gap between the general population and the displaced and vulnerable is a key challenge. This requires sufficient development funding to equitably address vulnerabilities and bridge the gap. The resource mobilization plan will be regularly adjusted to the evolving development context and changes in the donors' humanitarian and development funding priorities.

23. UNFPA operates through its main office in Amman and its sub-office in Ruwashed, covering the north of the country, including refugee issues at the Berm. The country office staff will be funded from the UNFPA integrated institutional budget and from regular and other resources. In the UNFPA central office in Amman, high staff turnover will be addressed through improved staffing contracts where fixed-term and temporary assignments are replacing non-staff contracts. The merging of programme staff in an integrated structure under the Humanitarian Programme Coordinator will strengthen the capacity of the country office to deliver on humanitarian, resilience and development programmes.

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

IV. Monitoring and evaluation

25. The country programme will be supported by a robust monitoring and evaluation plan that contains performance measures that are well aligned with the integrated results framework of the UNFPA strategic plan, with clear linkage to the results envisaged in the results and resources framework of the UNSDF and the SDG-related indices.

26. UNFPA will continue to function as an active member of the United Nations country team monitoring and evaluation task force to facilitate coordination, joint programming and harmonized results-based management approaches. It will actively support the functioning of the systems and tools developed to monitor and track performance results for the new UNSDF.

27. Use of existing national data and monitoring and evaluation systems will be maximized, and capacity for the generation of high-quality programme data will be strengthened. UNFPA will build on the work currently underway with the Government; in collaboration with UNICEF and UNDP, it will lead the process to strengthening monitoring and evaluation systems, undertaking results-based monitoring and reporting of progress towards attainment of the targets of the country programme. Country programme evaluations at key milestones and evaluation of high-investment programme areas, will be conducted to improve programme effectiveness.

RESULTS AND RESOURCES FRAMEWORK FOR JORDAN (2018-2022)

UNFPA strategic plan outcome	Country programme outputs	Output indicators, baselines and targets	Partner contributions	Indicative resources
<p>National priority: Improving the institutional framework for the health-care sector</p> <p>UNSDF outcome: Strengthened institutions. Institutions in Jordan at national and local levels are more responsive, inclusive, accountable, transparent and resilient</p> <p>Indicator: Number of laws and policies which are adopted or modified in line with international standards and conventions</p> <p>UNSDF outcome: Empowered people, especially the most vulnerable, proactively claim their rights and fulfil their responsibilities for improved human security and resilience</p> <p>Indicator: Proportion of the population benefiting from universal health and education services</p>				
<p>Outcome 1: Sexual and reproductive health</p> <p>Every woman, adolescent and youth everywhere, especially those furthest behind, have fully exercised their reproductive rights and have access to sexual and reproductive health services free of coercion, discrimination and violence</p> <p><u>Outcome indicators:</u></p> <ul style="list-style-type: none"> Family planning unmet need <i>Baseline: 12 %; Target: 10%</i> Adolescent birth rate <i>Baseline: 22.64 (2015); Target: 20 (by 2022)</i> 	<p><u>Output 1:</u> Strengthened capacity of national institutions to deliver integrated quality SRH information and services, including for maternal death surveillance and response, in humanitarian and development settings</p>	<ul style="list-style-type: none"> National strategic plan on the delivery of quality integrated SRH services in place <i>Baseline: No; Target: Yes</i> Number of women, girls and youth served at facilities that provide integrated SRH services <i>Baseline: 20,000; Target: 220,000</i> Percentage of national emergency plans (preparedness, response, contingency) that include MISP, including for youth and adolescents <i>Baseline: 0%; Target: 100%</i> Percentage of maternal death reports compliant with the Maternal Death Surveillance and Response (MDSR) protocol <i>Baseline: 0%; Target: 95%</i> Number of high-level national advocacy events on MDSR supported <i>Baseline: 0; Target: 5</i> 	Ministries of Planning and International Cooperation; Health; Jordanian Society of Obstetricians and Gynaecologists; Royal Medical Services, Higher Population Council, international and national NGOs, private-sector hospitals; USAID	\$28.7 million (\$0.9 million from regular resources and \$27.80 million from other resources)
	<p><u>Output 2:</u> Improved the ability of young people to exercise SRH rights in development and humanitarian settings</p>	<ul style="list-style-type: none"> Number of national and humanitarian institutions adopting UNFPA SRH curriculum <i>Baseline: 1; Target: 5</i> Number of national strategies and policies that mainstream youth and adolescent SRH issues in humanitarian and development contexts <i>Baseline: 2; Targets: 5</i> 	Ministries of Planning and International Cooperation; Health; Youth; UNDP, UNICEF, UNESCO, UNHCR, UNV, NGOs, academia; private sector	\$3.3 million (\$0.1 million from regular resources and \$3.2 million from other resources)
<p>National priority: Faster and efficient response to violence against women through enhanced social protection</p> <p>UNSDF outcome: Empowered people, especially the most vulnerable, proactively claim their rights and fulfil their responsibilities for improved human security and resilience</p> <p>Indicator: Number of people benefiting from access to social welfare and protection services</p> <p>UNSDF outcome: Strengthened institutions</p> <p>Indicator: 1.2% of annual budgetary public and Official Development Assistance resources allocated to empowerment of vulnerable groups and gender equality and women's empowerment, under key national programmes, schemes and mechanisms</p>				
<p>Outcome 3: Gender equality and women's empowerment</p> <p>Gender equality, empowerment of all women and girls, and reproductive rights are achieved through a focus on addressing gender-based violence and harmful</p>	<p><u>Output 1:</u> Strengthened national capacities to prevent and respond to gender-based violence, with focus on advocacy, data and coordination in development and humanitarian settings</p>	<ul style="list-style-type: none"> Number of Gender-Based Violence Information Management System analytical products (policy briefs/advocacy documents/reports) <i>Baseline: 2; Target: 6</i> Number of women and girls who receive gender-based violence specialized case management and psychosocial support services 	Ministries of Planning and International Cooperation; Health; UNHCR; UNICEF; UN-Women; National Council for Family Affairs; NGOs	\$9.60 million (\$0.30 million from regular resources and \$9.3 million from other resources)

<p>practices in development and humanitarian settings. <u>Outcome indicator:</u></p> <ul style="list-style-type: none"> SDG 5.3.1: Proportion of women aged 20-24 years who were married before 18 <i>Baseline: 8% (DHS 2012); (UNICEF early marriage study 2014)</i> <i>Target: 5% (by 2022)</i> 		<p><i>Baseline: 148,363 (2016); Target: 445,000 (by 2022)</i></p> <ul style="list-style-type: none"> A system for monitoring and tracking of family violence in place and functional at national level <i>Baseline: 1 for humanitarian only; Target: 2 for humanitarian and development</i> Essential services package for women and girls subject to violence has been applied <i>Baseline: No ; Target: Yes</i> 		
	<p><u>Output 2:</u> Strengthened national capacities to address child early and forced marriage</p>	<ul style="list-style-type: none"> Communication strategy to address child early and forced marriage endorsed and implemented <i>Baseline: No; Target: Yes</i> Number of advocacy initiatives to address CEFM <i>Baseline: 0; Target: 4</i> 	<p>Ministries of Health; Social Development; National Council for Family Affairs; NGOs, Family Protection Department; UNICEF, UNHCR, UN-Women</p>	<p>\$6.4 million (\$0.2 million from regular resources and \$6.2 million from other resources)</p>
<p>National priority: Protection and empowerment of those in need and providing decent life UNSDF outcome: Strengthened institutions Indicator: Number of sectors within which the SDGs are integrated, budgeted, being implemented and reported on UNSDF outcome: Opportunities Indicator: Proportion of population who have engaged in a social media campaign for civic or social ends</p>				
<p>Outcome 4: Population and development Everyone, everywhere is counted, and accounted for, in the pursuit of sustainable development <u>Outcome indicators:</u></p> <ul style="list-style-type: none"> Proportion of sustainable development indicators produced at the national level with full disaggregation when relevant to the target, in accordance with fundamental principles of official statistics <i>Baseline: No; Target: Yes</i> Youth's development index <i>Baseline: 0.586 (2016); Target: 0.60 (2022)</i> 	<p><u>Output 1:</u> Increased national data systems' capacity for integration of population dynamics for the realization of the demographic dividend, including in humanitarian contexts</p>	<ul style="list-style-type: none"> Youth strategy action plans inclusive of demographic dividend recommendations on SRH and youth participation <i>Baseline: No; Target: Yes</i> Monitoring and evaluation system to monitor and track ICPD and SDGs in place <i>Baseline: No; Target: Yes</i> A system for monitoring and tracking of family violence cases in place and functional at national level <i>Baseline: No; Target: Yes</i> Subnational data from line ministries available for ICPD indicators <i>Baseline: No; Target: Yes</i> 	<p>Ministry of Planning and International Cooperation; Health; Higher Population Council; Department of Statistics; UNDP, UNICEF, UN-Women, WHO, National Council for Family Affairs</p>	<p>\$3.0 million (\$0.5 million from regular resources and \$2.5 million from other resources)</p> <hr/> <p>Programme coordination and assistance: \$0.30 million from regular resources</p>