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# UNITED NATIONS POPULATION FUND

## Final country programme document for Ukraine

Proposed indicative UNFPA assistance:\$6.5 million: \$5 million from regular resources and<br/>\$1.5 million through co-financing modalities and/or<br/>other, including regular, resourcesProgramme period:Five years (2012-2016)Cycle of assistance:SecondCategory per decision 2007/42:C

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

	Regular resources	Other	Total
Reproductive health and rights	3.75	1.0	4.75
Population and development	0.50	0.3	0.80
Gender equality	0.50	0.2	0.70
Programme coordination and assistance	0.25	_	0.25
Total	5.00	1.5	6.50

#### I. Situation analysis

1. Ukraine, with a population of 45.4 million, is a lower middle-income country. The per capita gross national income, based on purchasing power parity, was \$6,535 in 2008. The Government has had some success in combating absolute poverty, and gross domestic product rose by nearly 78 per cent in the 2000-2007 period. Nevertheless, 26 per cent of the population lived in poverty in 2009.

2. Population groups most vulnerable to poverty include rural residents, families with children, and older persons. Socio-economic and human development in Ukraine is among the lowest in Europe. Of the 169 countries on the UNDP Human Development Index, Ukraine ranked 69.

3. After falling by 6.3 per cent in 2009-2010, the annual gross domestic product has resumed its growth. During 2010, the gross domestic product increased by 4.1 per cent. In 2010, the Government embarked on an ambitious social and administrative reform programme. Overall spending on social benefits is high, accounting for 26 per cent of the gross domestic product in 2007.

4. Nevertheless, only 56.8 per cent of people living below the absolute poverty line receive social assistance, and only 23 per cent of social transfers reach the poor. Increased financing for health care and education has failed to translate into increased access to services or to an improvement in service quality, suggesting a need for reforms to improve the management of these sectors.

5. Ukraine is undergoing a demographic crisis, a result of a decrease in population combined with deterioration in the health and well-being of its citizens. The population of Ukraine peaked in 1992 at 52.2 million. By 2010, the population had decreased to 45.8 million. Ukraine is an urbanized country, with approximately 69 per cent of the population living in urban settings.

6. Ukraine also has a high percentage of older people: 15.7 per cent of the population is aged 65 or older. Two thirds of this elderly

population is female. About 26 per cent of the population, or 11.8 million people, are women of reproductive age.

7. The total fertility rate was 1.46 children per woman in 2009, with fertility in rural areas 1.3 times higher than in urban settlements. The last national population census was carried out in 2001; the next census is planned for 2012.

8. The poor health status of the population, largely due to environmental and behavioural factors, and the limited access to high-quality health care, especially in rural areas, constitute a critical development challenge. Average life expectancy at birth is 63.8 years for men and 74.9 years for women.

9. The mortality rate for men aged 30-59 years is three times higher than the mortality rate for women. Should existing morbidity and mortality patterns persist, about one third of the people in Ukraine will die before the age of 65. About 55 per cent of such early deaths are preventable.

10. The maternal mortality ratio in Ukraine was 25.8 deaths per 100,000 live births in 2009, an increase from 15.2 deaths per 100,000 live births in 2006. Inadequate maternal health care accounts for about one fifth of preventable maternal deaths. The prevalence of labour and delivery complications was 36.7 per cent in 2009. The infant mortality rate decreased from 9.8 deaths per 1,000 live births in 2006 to 9.4 deaths per 1,000 live births in 2009.

11. Achievements in the area of family planning contributed to a decrease in the abortion rate, from 34.1 abortions per 1,000 women of reproductive age in 2000 to 16.4 in 2009. Nevertheless, many women still rely on abortion as a family planning method. The contraceptive prevalence rate for modern methods was 30.8 per cent in 2008.

12. The incidence of sexually transmitted infections has held steady for the last five years. The incidence of syphilis is more than 7.5 times higher than the European Union average, and the incidence of gonorrhoea is more than 4.5 times as high.

13. Ukraine has the highest HIV adult prevalence rate (1.1 per cent) among any country in Europe and Central Asia. Annual HIV diagnoses have more than doubled since 2001. The HIV epidemic, which is concentrated among injecting drug users and sex workers, mostly affects young people. Sexual transmission is increasing. The HIV incidence among men was 49.3 per 100,000 in 2008, and the incidence among women was 34.0 per 100,000. The mother-to-child HIV transmission rate is 6.2 per cent.

14. The gender inequality index value of Ukraine was 0.463 in 2008, ranking it 44 of 138 countries. Although there are no implicit or explicit barriers to accessing education and health care on the basis of gender, gender gaps persist, particularly with regard to income and the labour market. Women are underrepresented in decision-making positions. Gender-based discrimination and violence, including domestic violence, are of concern.

### II. Past cooperation and lessons learned

15. The first country programme (2006-2011) had a budget of \$3.2 million from regular resources and \$7.7 million from other resources. Government co-funding of the country programme accounted for \$1.7 million.

16. In the area of reproductive health, the first country programme supported: (a) the nationwide integration of reproductive health services, resulting in improved access to services: (b) improved availability of reproductive health services for women and girls living with HIV; (c) the development of institutional systems to prevent HIV infection in the uniformed services; (d) the promotion of healthy lifestyles and safe behaviour people and vulnerable among voung populations through information, education and behaviour change communication; and (e) the development of social services for injecting drug users.

17. Under the population and development programme component, UNFPA supported:(a) the development of the national strategy on demographic development;

(b) comprehensive demographic research;
(c) the creation of an evidence base on the demographic factors of social changes;
(d) the preparation for the 2012 national population census; and (e) national implementation of the International Plan of Action on Ageing at the policy and service-delivery levels.

18. In the area of gender equality, the country programme: (a) strengthened the capacity of civil society to prevent gender-based discrimination and violence; and (b) fostered the involvement of men in promoting gender equality and reproductive health and rights.

19. Lessons learned during the first programme cycle, as identified by the endline programme evaluation, point to the need to: (a) improve positioning the UNFPA agenda with the Government at national and levels; (b) regional strengthen UNFPA interventions in the area of maternal health and family planning; (c) ensure synergistic programmatic and policy support to utilize available resources, with a focus on defined rural areas and populations that are most at risk; and (d) strengthen the strategic linkages between programme components and improve coordination with other United Nations organizations and development partners.

#### **III.** Proposed programme

20. The proposed programme is the second UNFPA country programme for Ukraine. The programme is aligned with: (a) the national programme of economic reforms of Ukraine for 2010-2014; (b) the national Millennium Development Goals; (c) the UNFPA strategic plan, 2008-2013 (DP/FPA/2007/17); and (d) the Ukraine-United Nations Partnership Framework, 2012-2016, particularly its thematic areas of social development and governance.

#### Reproductive health and rights component

21. This component contributes to the thematic area of social development of the Ukraine-United Nations Partnership Framework, 2012-2016. The component also

contributes to the reproductive health outcomes of the UNFPA strategic plan.

22. Output 1: Improved national capacity to develop, implement and monitor reproductive health and family planning policies and standards of care. This output will be achieved by: (a) reviewing and revising existing policies, programmes and standards of care to advance the policy and regulatory environment for reproductive health and rights; (b) supporting the development of a new national reproductive health programme; (c) improving coordination and monitoring and evaluation mechanisms for reproductive health and family planning services; (d) improving the reproductive health data management systems; (e) promoting advocacy, policy dialogue and technical ensure the availability support to of reproductive health commodities for the most vulnerable population groups; and (f) developing a strategy and an operational plan to respond to emergency situations.

23. Output 2: Improved quality of maternal health and family planning services in underserved rural areas. To achieve this output, the programme will: (a) develop the capacity of health professionals to plan, manage and deliver high-quality maternal health services; (b) support the adoption and implementation of 'Beyond the Numbers', part of a package of maternal health tools developed and adopted by the World Health Organization; (c) strengthen reproductive health and family planning services, including youth-friendly clinics, in underserved rural areas; and (d) strengthen the linkages between reproductive health and HIV programmes, including the integration of reproductive health and family planning services for women living with HIV.

24. <u>Output 3: Health-seeking behaviour</u> promoted among young people and key populations in selected regions to improve sexual and reproductive health. This output will be achieved by: (a) developing and implementing behaviour change communication interventions for young people and marginalized groups, including sex workers; and (b) promoting sexual and reproductive health and rights education in secondary and vocational training institutions, including peer education programmes.

#### Population and development component

25. The population and development component addresses the social development thematic area of the Ukraine-United Nations Partnership Framework. Two outputs of this component contribute to outcomes 1.3 and 1.4 of the UNFPA strategic plan.

26. <u>Output 1: Availability of disaggregated</u> population data for national and sectoral development policymaking, programming and <u>public use</u>. Activities include: (a) supporting the planning and implementation of the 2012 national population census, as well as disseminating census data and promoting its use; and (b) facilitating scientific research on population processes and trends to provide data for policies and programmes.

27. Output 2: Strengthened national capacity to address emerging population issues. The programme will achieve this output by: (a) developing an advocacy strategy to mainstream population issues in national development strategies; (b) supporting the development and implementation of the national policy on population ageing in accordance with the International Plan of Action on Ageing and United Nations principles relating to older persons; and strengthening national (c) capacity to implement social policies that enable older people to lead active and healthy lives.

#### Gender equality component

28. This component contributes to the social development and governance thematic areas of the Ukraine-United Nations Partnership Framework, 2012-2016. It also contributes to development outcome 3.4 of the UNFPA strategic plan.

29. <u>Output 1: Women's empowerment and</u> <u>gender equality promoted through gender-</u> <u>sensitive policies and the prevention of</u> <u>gender-based violence</u>. Activities under this output include: (a) improving national legislation on domestic and gender-based violence; (b) supporting research for evidence-based advocacy to ensure the incorporation of gender equality in policies and programmes; (c) undertaking advocacy campaigns to prevent gender-based violence, including campaigns that promote male involvement; (d) building the capacity of the national mass media to portray women and girls in a gender-sensitive manner; and (e) preventing gender-based violence at the community level and providing integrated support services in selected regions for vulnerable groups.

# IV. Programme management, monitoring and evaluation

30. The Ministry of Health, the Ministry of Education, Science, Youth and Sports, the Ministry of Social Policy, and the government Statistics Service will serve as the main government implementing partners of the country programme. UNFPA will also work with other government institutions, local administrations, faith-based organizations, non-governmental organizations and the media.

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

32. UNFPA and the Government will develop a monitoring and evaluation plan, aligned with the UNFPA strategic plan, the Ukraine-United Nations Partnership Framework and national development frameworks.

33. Programme implementation will be based on the results-based management approach and will emphasize continuous monitoring. The programme will use vital statistics, service statistics, and data from research, surveys and the 2012 census. With the participation of the Government, UNFPA will organize annual programme reviews, a midterm evaluation of outcomes and an endline programme evaluation.

34. The UNFPA country office in Ukraine consists of a UNFPA chief of operations, an assistant representative, an administration/finance associate, and an

executive assistant. The programme will earmark funds for two national officer posts and two support staff to strengthen programme implementation. UNFPA may also recruit national project personnel to strengthen programme implementation.

35. UNFPA will obtain technical assistance from national and international consultants. The UNFPA regional office for Eastern Europe and Central Asia will also provide technical and programme support.

<b>National priorities</b> : (a) improve maternal health by halving the maternal mortality ratio; and (b) reduce and slow and the spread of HIV/AIDS by decreasing the HIV prevalence rates by 13 per cent							
Programme component	Country programme outcomes, indicators, baselines and targets	Country programme outputs, indicators, baselines and targets	Partners	Indicative resources by programme component			
Reproductive health and rights	<u>Outcome 1</u> : Improved access to and utilization of high-quality health, education and social services <u>Outcome indicators</u> : • Information and services on family planning methods provided to rural residents Baseline: partial coverage; Target: 80 per cent coverage • Percentage of most-at-risk populations and HIV-infected pregnant women reached by prevention programmes Baseline: 59 per cent of sex workers; 98 per cent of HIV-infected pregnant women Target: 70 per cent of sex workers; more than 98 per cent of HIV-infected pregnant women <u>Outcome 2</u> : More people adopt healthy and safe behaviour <u>Outcome 2</u> : More people adopt healthy and safe behaviour <u>Outcome 5</u> . • Percentage of maternal deaths attributed to abortion Baseline: 9.5 per cent; Target: 4.5 per cent • Percentage of women and men aged 15- 49 who had more than one partner in the past 12 months and who used a condom during their last sexual intercourse Baseline: 61 per cent; Target: 80 per cent	<ul> <li>Output 1: Improved national capacity to develop, implement and monitor reproductive health and family planning policies and standards of care</li> <li>Output indicators: <ul> <li>Percentage of national standards and protocols of care adhering to international standards</li> <li>Baseline: to be established; Target: 100 per cent</li> <li>National reproductive health statistics comply with international standards</li> <li>Baseline: not available; Target: to be determined</li> </ul> </li> <li>Output 2: Improved quality of maternal health and family planning services in underserved rural areas</li> <li>Output indicators: <ul> <li>Percentage of health-care facilities in selected regions using national protocols and standards on sexual and reproductive health and family planning</li> <li>Baseline: 0 per cent; Target: 80 per cent</li> <li>Beyond the Numbers guidelines adopted nationwide</li> <li>Baseline: No; Target: Yes</li> <li>Percentage of patients in selected regions participating in programmes that seek to prevent mother-to-child transmission of HIV who received family planning counselling</li> <li>Baseline: to be established; Target: 100 per cent</li> </ul> </li> <li>Output 3: Health-seeking behaviour promoted among young people and key populations in selected regions aged 15-24 possessing accurate, comprehensive knowledge of HIV/AIDS Baseline: to be established; Target: increase by 50 per cent</li> <li>Percentage of vocational training institutions in selected regions that have integrated sexual and reproductive health and rights education into the curricula Baseline: 0 per cent; Target: 20 per cent</li> </ul>	Local authorities in selected regions; Ministry of Education, Science, Youth and Sports; Ministry of Health Non- governmental organizations Bilateral and multilateral donors United Nations organizations	\$4.75 million (\$3.75 million from regular resources and \$1.0 million from other resources)			

National priorities: reduce poverty by: (a) decreasing the percentage of the population that is poor to 25 per cent by reducing the number of children and employed people who are poor; and (b) by the year 2015, decreasing by 10 times the number of people whose daily consumption is below the actual subsistence minimum

		people whose daily consumption is below the actual subsistence minimum		
poor; and (b) by the Population and development	<ul> <li>year 2015, decreasing by 10 times the number of Outcome 1: Social development policymaking at national and subnational levels is evidence-based Outcome indicators:</li> <li>Percentage of social development policies based on disaggregated data Baseline: to be established; Target: 100 per cent</li> <li>National population census is completed and user-friendly data are available Baseline: not available; Target: to be</li> </ul>	<ul> <li>people whose daily consumption is below the actual subsistence minimum Output 1: Availability of disaggregated population data for national and sectoral development policymaking, programming and public use Output indicators:</li> <li>National population census is implemented successfully and data are disseminated according to international standards Baseline: not available; Target: to be determined</li> <li>Number of population studies conducted resulting in policy recommendations Baseline: 9; Target: 15 Output 2: Strengthened national capacity to address emerging</li> </ul>	Government Statistics Service; Ministry of Social Policy; National Academy of Science institutions Non-	\$0.8 million (\$0.5 million from regular resources and \$0.3 million from other resources)
National prioritic	<ul> <li>determined</li> <li><u>Outcome 2</u>: People are aware of their rights and are able to exercise them, thereby reducing their vulnerability</li> <li><u>Outcome indicator</u>:</li> <li>Number of United Nations principles relating to older persons implemented Baseline: 13; Target: 18</li> </ul>	<ul> <li>population issues</li> <li><u>Output indicators</u>:</li> <li>National policy on population ageing adopted by the Government</li> <li>Baseline: not available; Target: to be determined</li> <li>Number of regions where communities and non-governmental organizations focusing on the elderly promote the capacity to enjoy an active and healthy longevity</li> <li>Baseline: 6; Target: 16</li> </ul>	governmental organizations Bilateral and multilateral donors; United Nations organizations bodies and high-	level executive
-	<ul> <li>a) halving the gap in incomes between women in <u>Outcome 1</u>: People are aware of their rights and are able to exercise them, thereby reducing their vulnerability <u>Outcome indictor</u>:</li> <li>Percentage of women who experienced physical violence in the past 12 months Baseline: 8.8 per cent; Target: 5 per cent <u>Outcome 2</u>: The Government facilitates the participation of women in public, economic and political life <u>Outcome indicator</u>:</li> <li>Women's participation in political life Baseline: local authorities 37 per cent; Target: local authorities 50 per cent</li> </ul>		Local authorities in selected regions; Ministry of Education, Science, Youth and Sports Non- governmental organizations Bilateral donors; United Nations organizations	\$0.7 million (\$0.5 million from regular resources and \$0.2 million from other resources) Total for programme coordination and assistance: \$0.25 million from regular resources