UNITED NATIONS POPULATION FUND

Country programme document for Ukraine

Proposed UNFPA assistance: $4.1 million: $2.6 million from regular resources and $1.5 million through co-financing modalities and/or other, including regular, resources

Programme period: 5 years (2006-2010)

Cycle of assistance: First

Category per decision 2005/13: C

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

<table>
<thead>
<tr>
<th>Area</th>
<th>Regular resources</th>
<th>Other</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reproductive health</td>
<td>1.50</td>
<td>1.2</td>
<td>2.70</td>
</tr>
<tr>
<td>Population and development</td>
<td>0.40</td>
<td>0.1</td>
<td>0.50</td>
</tr>
<tr>
<td>Gender</td>
<td>0.40</td>
<td>0.2</td>
<td>0.60</td>
</tr>
<tr>
<td>Programme coordination and assistance</td>
<td>0.25</td>
<td>–</td>
<td>0.25</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2.55</strong></td>
<td><strong>1.5</strong></td>
<td><strong>4.05</strong></td>
</tr>
</tbody>
</table>
I. Situation analysis

1. As of December 2004, the population of Ukraine was approximately 47 million – the fifth largest in Europe. About 68 per cent of the population is urban. Persons aged 25-44 years represent the largest segment of the population – 28.6 per cent. Those aged 45-64 years represent 24.8 per cent of the population, and those aged 15-24 years represent 15.8 per cent.

2. Since 1991, Ukraine has experienced a decline in its population, due to a decrease in its birth rate and external migration. The total fertility rate in 2003 was 1.2 births per woman. Along with depopulation, the health conditions of the population have also deteriorated, as a result of post-Soviet economic and social hardships.

3. The gross domestic product (GDP) during the period January through November 2004 was approximately $55.9 billion. The GDP growth in 2004 was reported as 12 per cent. Despite this, poverty remains the most acute problem in Ukraine. Eleven per cent of the population lives below the poverty line; independent assessments indicate that the percentage is much higher. The unemployment rate is 9 per cent.

4. The health of the population has deteriorated since 1991, mainly due to poor accessibility and quality of health care, especially at the primary health-care level. Life expectancy at birth is 62.6 years for men and 74.1 years for women. The maternal mortality ratio was 18.9 deaths per 100,000 live births in 2003. The maternal mortality ratio has steadily decreased from a high of 36.2 in 1995. The infant mortality rate decreased from 14.7 deaths per 1,000 live births in 1995 to 9.7 deaths per 1,000 live births in 2003.

5. In 2003, the Ministry of Health reported that there were 72.8 abortions per 100 live births. Despite some improvement in this indicator, many women continue to rely on abortion as a method of family planning.

6. The incidence of gonorrhoea increased from 26.0 per 100,000 women in 2003 to 30.1 in 2004. The incidence of syphilis decreased from 53.2 per 100,000 women in 2003 to 36.7 in 2004. However, the registration of cases is poor and the incidence of sexually transmitted infections (STIs) may be higher.

7. The Government has acknowledged reproductive health as one of its priorities. Recent improvements in reproductive health are attributed to the implementation of the intersectoral national family planning programme (1997-2000) and the national reproductive health programme (2001-2005).

8. The incidence of HIV infection in Ukraine is growing. An independent assessment indicates that more than one per cent of the adult population is HIV positive.

9. The Government has not yet adopted a population and development policy. Research on population and development is infrequent, though some research was conducted in connection with the tenth anniversary of the International Conference on Population and Development. The last national census was in 2001.

10. Gender issues are of concern. There is growing evidence of gender-based violence as well as gender gaps in employment and income.

11. The Government adapted the Millennium Development Goals (MDGs) to the current situation in Ukraine and elaborated a list of national development priorities. Ukraine completed its first common country assessment in 2004 and is finalizing its first United Nations Development Assistance Framework (2006-2010). UNFPA is fully involved in the UNDAF process and in assisting the Government in achieving the MDGs.

II. Past cooperation and lessons learned

12. UNFPA assistance to Ukraine began in 1997; the total amount of UNFPA assistance to date exceeds $2.3 million. The principal
programme areas have been: (a) developing sexual and reproductive health-care services, including the supply of modern contraceptives; (b) promoting reproductive health and reproductive rights; (c) promoting gender equality and preventing violence against girls and women; (d) promoting safe behaviour among adolescents and youth; and (e) combating the spread of HIV, especially among youth and personnel in the armed forces.

13. UNFPA projects helped to strengthen the capacity of reproductive health-care services and social services for youth, so that service providers could deliver client-friendly, high-quality medical, psychological and social care. Basic reproductive health indicators have improved significantly with UNFPA assistance.

14. UNFPA created an educational programme to prevent STI and HIV infection in the armed services in Ukraine. UNFPA implemented joint projects with the armed forces, the Ministry of the Interior and the police force. United Nations organizations replicated the approach and methodology in other countries of the region.

15. The major lessons learned during the implementation of projects in Ukraine include the need for: (a) a more systematic approach to implement technical assistance, with a focus on national ownership; (b) better monitoring of progress and better selection of output indicators to ensure a results-based approach; (c) more attention to the primary health-care level to increase the availability and accessibility of services; (d) increased participation of beneficiaries and target groups in implementing development assistance; (e) increased support in the area of population and development, given the scale of the demographic transition under way in Ukraine; and (f) securing national resources and building national technical capacity to confront population and development challenges.

III. Proposed programme

16. The proposed UNFPA country programme is based on the UNDAF and has been harmonized with the country programmes of UNDP and the United Nations Children’s Fund (UNICEF). The programme is aligned with the UNFPA multi-year funding framework, 2004-2007. UNFPA and the Government developed the programme in collaboration with national partners, United Nations agencies and donor agencies represented in Ukraine. The programme builds on the experience gained and the partnerships forged during the implementation of previous UNFPA projects.

17. The goal of the country programme is to contribute, in areas within the UNFPA mandate, to an improved quality of life of the people of Ukraine. The country programme has three components: (a) reproductive health, including HIV/AIDS and adolescent reproductive health; (b) population and development; and (c) gender. Human rights, reproductive rights, advocacy and behaviour change communication are cross-cutting issues that will be addressed throughout the programme. The programme will cover all 27 administrative regions of the country.

Reproductive health component

18. The first outcome under the reproductive health component is: increased use of integrated, high-quality sexual and reproductive health services, particularly by young people. Two outputs will contribute to this outcome.

19. Output 1: Increased national capacity to plan, coordinate, manage, monitor and deliver high-quality and integrated sexual and reproductive health services. This output will be achieved by: (a) supporting the development and implementation of national strategies and policies that address sexual and reproductive health needs, including advocacy; technical support and expertise; professional training; the provision of equipment, supplies and contraceptives; and promotional and IEC campaigns; (b) advocating and providing assistance to the development of the national reproductive
health commodity security system; and (c) supporting the development and implementation of a long-term reproductive health commodity security strategy and costed action plan that will include aspects of supply, access and demand, and the creation of an enabling environment.

20. Output 2: Increased awareness of young people about sexual and reproductive health, reproductive rights and gender issues in order to increase demand for improved sexual and reproductive health. This output will be achieved through information, education and communication (IEC) and behaviour change communication activities targeting young people. These activities will include training, peer education and promotional health events for youth. Youth-oriented NGOs, integrated sexual and reproductive health service facilities and the mass media will implement these activities.

21. The second outcome under the reproductive health component is: safer behaviour practiced by young people in order to reduce STI and HIV infection rates. The programme will use a prevention approach to achieve this outcome. One output will contribute to achieving this outcome.

22. Output 3: Increased use of STI and HIV/AIDS prevention practices and services by young people. This output will be achieved by: (a) developing and supporting institutional frameworks to prevent STIs and HIV infections, primarily among the armed services and vulnerable groups, including commercial sex workers, injecting drug users and others; and (b) strengthening the capacity of local NGOs, especially youth-oriented NGOs, to develop and conduct effective behaviour change communication activities to prevent STIs and HIV/AIDS.

23. Activities will include developing materials, training trainers, developing curricular and extracurricular education and programmes, organizing IEC campaigns, promoting voluntary counselling and testing, and improving the quality of counselling.

Population and development component

24. The programme has one outcome under the population and development component: the national population and development strategy considers the consequences of current demographic changes and their implications on poverty, the labour force and other development issues. There is one output under the population and development component.

25. Output 1: Strengthened national capacity to develop and implement population and development strategies. The strategies will contribute to halting depopulation, improving the quality of life, reducing poverty and improving the economic situation in the country. This output will be achieved by: (a) promoting policy dialogue with the Government and civil society on the current demographic situation and its consequences; (b) supporting research on demographic trends and projections; and (c) providing technical assistance to the Government in developing a comprehensive population and development strategy for Ukraine.

Gender component

26. The gender component of the country programme has one outcome: gender equality in sexual and reproductive health and rights. This outcome will be attained through two outputs.

27. Output 1: Increased national capacity to develop and implement programmes on male involvement in promoting gender equality to ensure better sexual and reproductive health and reproductive rights for men and women. UNFPA and the Government will: (a) organize advocacy and training activities for policy makers to initiate the development of strategies and programmes on male involvement; and (b) provide training on male involvement for NGOs and support their male-involvement activities. The aim is to create a supportive and responsible attitude by men on issues of sexual and reproductive health, women's rights, reproductive rights and family planning. STI and HIV/AIDS prevention activities in the armed forces and
other uniformed services will also be considered entry points for male-involvement programmes.

28. **Output 2: National gender and women’s NGOs strengthened to empower women and fight gender-based discrimination.** To attain this output, UNFPA will build the capacity of national NGOs to advocate gender equality, promote and protect women's rights, and prevent gender-based discrimination. UNFPA will provide technical support to participating NGOs, which will participate in regional and global networks focusing on women's empowerment.

**IV. Programme management, monitoring and evaluation**

29. The national execution modality will be used to execute and implement the programme. UNFPA and the Government of Ukraine will cooperate closely with other United Nations agencies and development partners in coordinating programme implementation, monitoring and evaluation. The programme will use a results-based management approach. Annual programme reviews and the final programme evaluation will be organized in accordance with UNDAF schedules.

30. The Ministry of Economy will be responsible for coordinating the programme. To ensure national ownership, national institutions will be selected as implementing agencies. The UNFPA country office in Ukraine will increase its fundraising activities to attract supplementary funds to implement the programme.

31. The UNFPA country office in Ukraine consists of a non-resident UNFPA country director based in Bucharest, Romania; an assistant representative; a programme associate; and one support staff member. Programme funds will be earmarked for two national programme posts and three administrative support posts, within the framework of the approved country office typology. National project personnel may also be recruited to strengthen project and programme implementation. The UNFPA Country Technical Services Team in Bratislava, Slovakia, will provide technical support.
## RESULTS AND RESOURCES FRAMEWORK FOR UKRAINE

**National priorities (2006-2010):** (a) improve maternal health and reduce child mortality; (b) reduce and slow down the spread of HIV/AIDS and tuberculosis

**UNDAF outcome:** by 2010, increased access to quality health and basic social services with priority on HIV/AIDS, tuberculosis and maternal and child health, consistent with international standards

<table>
<thead>
<tr>
<th>Programme component</th>
<th>Country programme outcomes, indicators, baselines and targets</th>
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<th>Partners</th>
<th>Indicative resources by programme component</th>
</tr>
</thead>
</table>
| Reproductive health | **Outcome 1:** Increased use of integrated, high-quality sexual and reproductive health services, particularly by young people  
**Outcome indicators:**  
- Maternal mortality rate decreases by 15%  
- Abortions reduced by 15%  
- Adolescent fertility rate decreased by 10%  
- Contraceptive prevalence rate increased by 10%  
**Baseline:** 2004 Ministry of Health statistics | **Output 1:** Increased national capacity to plan, coordinate, manage, monitor and deliver high-quality and integrated sexual and reproductive health services  
**Indicators:**  
- Percentage of service delivery points offering at least three reproductive health services increased by 20%  
- Percentage of service delivery points offering at least three modern contraceptive methods increased by 20%  
- Percentage of service delivery points providing quality reproductive health services in accordance with established protocols increased by 20%  
**Baseline:** 2004 Ministry of Health reports | Ministry of Health; Ministry of Youth and Sports; Ministry of Education; Ministry of Defence; Ministry of the Interior; State Security Service; border guards  
Regional health administrations  
NGOs  
United Nations country team  
UNICEF; World Health Organization | Regular resources: $1.5 million  
Other resources: $1.2 million |
|                     | **Outcome 2:** Safer behaviour practiced by young people in order to reduce STI and HIV infection rates  
**Outcome indicators:**  
- HIV prevalence among 15-24 year old pregnant women decreased by 15%  
- Incidence of STIs decreased by 15%  
- Condom use among youth during last high-risk sex increased by 20%  
- Proportion of the population aged 15-24 years with comprehensive knowledge of HIV/AIDS and consistent condom use  
**Baseline:** 2004 Ministry of Health statistics, 2003 adolescent health survey | **Output 2:** Increased awareness of young people about sexual and reproductive health, reproductive rights and gender issues in order to increase demand for improved sexual and reproductive health  
**Indicators:**  
- Number of visits to integrated services by young people increased by 15%  
- Proportion of young people knowledgeable about their sexual and reproductive health and reproductive rights increased by 20%  
**Baseline:** 2004 Ministry of Health statistics; 2003 adolescent health survey | | |
|                     | **Outcome 3:** Increased use of STI and HIV/AIDS prevention practices and services by young people  
**Indicators:**  
- STI and HIV/AIDS prevention programmes in the armed forces and other uniformed services functional  
- Behaviour change communication programmes for youth available  
**Baseline:** STI and HIV/AIDS prevention programmes partially available in the armed forces and police | | |
National priorities (2006-2010): (a) halve the number of people whose daily consumption is below $4.3, measured in average purchasing power parity; (b) reduce the numbers of poor by one third (based on a nationally defined poverty level).

UNDAF outcome: by 2010, poverty reduced through equitable, area-based economic growth.

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<td>Population and development</td>
<td><strong>Outcome:</strong> The national population and development strategy considers the consequences of current demographic changes and their implications on the poverty, the labour force and other development issues.</td>
<td><strong>Output 1:</strong> Strengthened national capacity to develop and implement population and development strategies</td>
<td>Ministry of the Economy; National Statistics Committee; Institute of Economy of the National Academy of Sciences</td>
<td>Regular resources: $0.4 million</td>
</tr>
</tbody>
</table>
| Baseline: 2004 national statistics | **Indicators:**  
- Proportion of population consuming below $1 per day (purchasing power parity) decreased  
- Population and poverty linkages explicit in national development policies | **Indicators:**  
- Population and development needs assessment completed  
- National population and development concept elaborated  
- Intersectoral mechanisms to review development and sectoral plans are functional | Other resources: $0.1 million |
| Gender | **Outcome:** Gender equality in sexual and reproductive health and rights | **Output 1:** Increased national capacity to develop and implement programmes on male involvement in promoting gender equality to ensure better sexual and reproductive health and reproductive rights for both men and women | Swedish International Development Cooperation Agency | Regular resources: $0.4 million |
| Indicators:  
- Mechanisms in place to monitor and reduce gender-based violence  
- Civil society partnerships actively promoting gender equality, women's and girls' empowerment and reproductive rights | **Indicators:**  
- Male involvement programmes available and operational | UNDP | Other resources: $0.2 million |
| **Output 2:** National gender and women's NGOs strengthened to empower women and fight gender-based discrimination | **Indicators:**  
- Number of NGOs capable of empowering women and fighting gender-based discrimination increased | NGOs | Programme coordination and assistance: $0.25 million from regular resources |