



**Executive Board of the
United Nations Development
Programme and of the
United Nations Population Fund**

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UNITED NATIONS POPULATION FUND

Final country programme document for Uzbekistan

Proposed indicative UNFPA assistance: \$8.9 million: \$7.8 million from regular resources and \$1.1 million through co-financing modalities and/or other, including regular, resources

Programme period: 6 years (2010-2015)

Cycle of assistance: Third

Category per decision 2007/42: B

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

| | Regular resources | Other | Total |
|---------------------------------------|-------------------|------------|------------|
| Reproductive health and rights | 4.8 | 0.9 | 5.7 |
| Population and development | 1.2 | 0.1 | 1.3 |
| Gender equality | 1.2 | 0.1 | 1.3 |
| Programme coordination and assistance | 0.6 | - | 0.6 |
| Total | 7.8 | 1.1 | 8.9 |

I. Situation analysis

1. Uzbekistan, with more than 27 million inhabitants, has the largest population in Central Asia. The annual population growth rate declined from nearly 2 per cent in the 1990s to 1.3 per cent during 2000-2007. The total fertility rate decreased from 4.6 children per woman at the beginning of the 1990s to 2.6 children per woman at present.

2. Approximately 33 per cent of the population lives in urban areas. In recent years, the rural population has grown faster than the urban population, primarily because of differences in the birth rate, restrictions on rural-to-urban migration, and the emigration of urban residents.

3. The per capita gross domestic product has nearly doubled in recent years, from \$465 in 2004 to \$832 in 2007. Nevertheless, living standards for the majority of the population have not significantly improved. Since 2000, external labour migration, mainly to the Russian Federation and to Kazakhstan, has grown. Remittances play an important role in the economy, especially in rural areas. Human trafficking, especially the trafficking of women, is a serious problem.

4. The country faces challenges stemming from the Aral Sea environmental disaster. Water shortages affect the population of Uzbekistan and the rest of Central Asia. Economic downturns in countries receiving migrant labourers from Uzbekistan may lead to unemployment and deterioration in living standards.

5. Although the Government has identified reproductive and maternal health as a priority, access to services and the quality of care are insufficient, especially at the primary health-care level. Between 2004 and 2007, the maternal mortality ratio decreased from 32 to 24 deaths per 100,000 live births. Even so, maternal mortality is higher than it should be, given the level of government support, the wide coverage of

antenatal care and the fact that nearly all births take place in hospitals.

6. The population is predominantly young. Children under 15 make up more than 40 per cent of the population, while youth under 24 account for nearly two thirds of the population. Although in recent years the Government adopted regulations promoting youth-friendly health services, such services are not widely available or accessible.

7. In recent decades, the Government has increased the availability of and access to family planning services. The contraceptive prevalence rate increased from 13 per cent in 1993 to 63 per cent in 2006. However, the range of available contraceptives is limited. Intrauterine devices are the most frequently used method of modern contraception. The country still relies heavily on donors to supply contraceptives, with less than 20 per cent provided by the Government.

8. There are gaps between women and men in employment, higher education and representation in government. In 2007, women held only 17.6 per cent of seats in parliament, and occupied only 15.9 per cent of posts in national administrative bodies. Although there is no statistical data on gender-based violence, there is growing public concern about this issue.

9. The country faces a growing AIDS epidemic. There were more than 13,000 registered HIV-positive persons by the end of 2008. Most of the cases are attributed to intravenous drug use, though there is an increasing number resulting from sexual transmission. The Government is implementing a national strategic plan on HIV/AIDS for 2007-2011.

II. Past cooperation and lessons learned

10. The previous UNFPA country programme (2005-2009) was approved for \$4 million: \$2.7 million from regular resources and \$1.3 million from other resources.

11. In the area of reproductive health, the programme strengthened the capacity of the health system to provide high-quality reproductive and maternal health care. The programme improved the quality of services at the primary-care level by training health-care providers, developing policies and guidelines, and providing essential equipment. It also helped to establish a viable system for emergency obstetric care, and strengthened the contraceptive logistics system.

12. The programme helped to increase the knowledge of young people about sexual and reproductive health and the prevention of HIV and AIDS through peer education and the media. The programme supported life skills-based education for in-school youth. UNFPA also helped to build the national technical capacity to collect, analyse and use population information for socio-economic policies and strategies.

13. Lessons learned include the need to: (a) increase the national technical capacity to plan, implement, coordinate and monitor programme implementation; (b) improve the skills of national partners in integrating population and development; (c) take into account the difficulty of involving civil society in the programme and the lack of reliable data on poverty, employment, health and other population-related issues; and (d) improve the coordination of programme interventions among government entities and international and bilateral donors.

III. Proposed programme

14. The proposed country programme has been harmonized with the programmes of the United Nations Children's Fund (UNICEF) and UNDP. The Government participated actively in the programme preparation process and in the development of the United Nations Development Framework (UNDAF).

15. The UNFPA programme takes into account national development policies, the goals and objectives of the International Conference on Population and Development and its five- and ten-year reviews, the Millennium Development

Goals and the UNFPA strategic plan, 2008-2011. The programme will mainstream humanitarian concerns and security risks, including the impact of the global economic crisis and environmental concerns. The programme will seek to enhance and strengthen the participation of civil society in the planning and implementation of programme interventions. It will emphasize partnership, coordination and joint programming.

16. The goal of the UNFPA country programme is to improve the quality of life in Uzbekistan by supporting the following UNDAF outcomes: (a) the economic well-being of vulnerable groups is improved; (b) enhanced access to and utilization of high-quality, essential social services; and (c) the effectiveness, inclusiveness and accountability of government at national and local levels are enhanced.

17. The country programme has three components: (a) reproductive health and rights; (b) population and development; and (c) gender equality. Increasing access to high-quality reproductive and maternal health services and promoting reproductive rights will be the focus of the reproductive health and rights component. In the area of population and development, the programme will seek to strengthen the national capacity to incorporate population factors into national development frameworks. In the area of gender equality, the programme will focus on improving national mechanisms to implement the Convention on the Elimination of All Forms of Discrimination against Women. Interventions related to young people, marginalized and excluded populations, emergency preparedness, and humanitarian responses to natural calamities are addressed throughout the programme.

Reproductive health and rights component

18. The first outcome is: increased access to and utilization of high-quality health care, using a continuum of care and primary health-care approach. The three outputs below will contribute to this outcome as well as to reproductive health and rights outcomes 1, 2 and 3, respectively, of the UNFPA strategic plan, 2008-2011(DP/FPA/2007/17).

19. Output 1: Strengthened technical and institutional capacity of the national health-care system to develop and implement comprehensive reproductive health policies and provide an integrated package of essential sexual and reproductive health services. To achieve this output, UNFPA will seek to integrate an essential package of sexual and reproductive health services into public policies and expenditure frameworks. It will conduct advocacy to promote and protect the reproductive rights of individuals and communities, particularly women and young people, including in emergency and humanitarian crisis situations. Activities will include: (a) training service providers on reproductive health, focusing on primary health care and the quality of care; (b) reviewing and revising clinical protocols and guidelines; (c) strengthening the national capacity to prevent sexually transmitted infections and to integrate services on sexually transmitted infections and HIV into primary health care; (d) improving the national capacity to screen for and treat cancers of the reproductive system, including cervical cancer; and (e) supplying reproductive health commodities.

20. Output 2: Improved quality of emergency and essential obstetric and perinatal care in selected geographical areas. This output will be attained by: (a) increasing the skills of health-care workers in providing high-quality emergency obstetric care; (b) establishing a sound referral system; (c) improving the system for collecting data on maternal morbidity and mortality; (d) supplying essential equipment; and (e) increasing awareness of critical obstetric conditions, with a particular focus on male involvement. The programme will seek to increase the capacity of the health-care system to provide maternal care in emergency and humanitarian crisis situations. It will coordinate with existing and planned projects on maternal care implemented by international and bilateral donors.

21. Output 3: Increased capacity of the health-care system to ensure contraceptive commodity security and provide high-quality family planning services. To achieve this output, the programme will introduce a modern contraceptive logistics system. It will advocate the inclusion of

contraceptives on the national essential drug list and the achievement of contraceptive commodity security. UNFPA will strengthen the knowledge and skills of health-care workers to provide high-quality family planning and counselling services to ensure access to a range of modern contraceptives.

22. The second outcome of the reproductive health component is: increased access to and utilization of prevention, treatment, care and support services for HIV and sexually transmitted infections. The following output will contribute to this outcome and to reproductive health and rights outcome 5 of the UNFPA strategic plan, 2008-2011 (DP/FPA/2007/17).

23. Output 4: Strengthened capacity of national institutions to provide high-quality, gender-sensitive, life skills-based education, information, and youth-friendly services for sexual and reproductive health and HIV and AIDS prevention. To attain this output, the programme will support national efforts to strengthen gender-sensitive, life skills-based courses on sexual and reproductive health for secondary schools, colleges, lyceums and universities. The programme will work with national governmental and non-governmental institutions, United Nations partner organizations and other organizations to expand peer education for youth on sexual and reproductive health and HIV/AIDS prevention. UNFPA will help to expand the availability and improve the quality of youth-friendly health services, giving priority to marginalized young girls and adolescents at risk.

Population and development component

24. The outcome of the population and development strategies component is: enhanced capacity of national and local authorities to develop and implement economic and social security policies. One output will contribute to this outcome as well as to population and development outcome 3 of the UNFPA strategic plan, 2008-2011 (DP/FPA/2007/17).

25. Output 1: Strengthened national capacity to collect, analyse and use disaggregated population

data to develop and monitor national development frameworks and conduct evidence-based advocacy. The programme seeks to increase the technical skills of key national institutions on data collection, analysis, utilization and dissemination. It will support surveys and research on population. The programme will conduct evidence-based advocacy to consider and incorporate population factors, including emerging population issues such as migration, into national development frameworks and national plans for emergency preparedness. UNFPA will seek to improve the quality of demographic education in relevant higher education institutions.

Gender equality component

26. This component has one outcome: increased harmonization of national legislation and practices with United Nations treaties, standards and norms. The following output will contribute to this outcome as well as to gender equality outcome 4 of the UNFPA strategic plan, 2008-2011 (DP/FPA/2007/17).

27. Output 1: National mechanisms to implement the Convention on the Elimination of All Forms of Discrimination against Women are strengthened through increased awareness of policymakers and decision makers, and through improved policies, protection systems and legal enforcement. To achieve this output, UNFPA will work with national governmental and non-governmental institutions involved in promoting gender equality and combating gender-based violence. UNFPA will also work with United Nations organizations and other agencies to implement the Convention on the Elimination of All Forms of Discrimination against Women in public life. It will conduct advocacy, focusing on young women and male participation. UNFPA will work on increasing the knowledge and skills of law enforcement personnel and other professionals to prevent domestic violence. It will cooperate with the Government and non-governmental organizations to strengthen the system for protecting and supporting victims of domestic violence and human trafficking. The programme will seek to increase the capacity of

relevant professionals to address gender concerns during emergencies and humanitarian crises.

IV. Programme management, monitoring and evaluation

28. The Government and UNFPA will manage the programme. The Government will implement it in close collaboration with other United Nations organizations within the context of the UNDAF. The programme will employ a results-based management approach and will emphasize continuous monitoring.

29. The Ministry of Public Health will coordinate the reproductive health and rights component of the programme. UNFPA will work closely with the Ministry of Economy, the Ministry of Higher and Secondary Special Education, the Ministry of Labour and Social Security, the Ministry of Public Education, the State Committee on Statistics, and the Women's Committee of Uzbekistan in coordinating the population and development and gender equality components of the programme.

30. The UNFPA country office in Uzbekistan consists of a representative, an assistant representative, several national programme staff and administrative support staff. UNFPA will earmark programme funds for three national programme officers and three support staff within the framework of the approved country office typology. The UNFPA regional office for Eastern Europe and Central Asia in Bratislava, Slovakia, and the UNFPA subregional office in Almaty, Kazakhstan, will provide integrated programme and technical support.

RESULTS AND RESOURCES FRAMEWORK FOR UZBEKISTAN

| National priority: National Millennium Development Goals target: reduce poverty by half by 2015 UNDAF outcomes: (a) the economic well-being of vulnerable groups is improved; and (b) enhanced access to and utilization of high-quality, essential social services Note: Key results and indicators are summarized below. UNFPA and the Government will establish remaining indicators, baselines and targets during the first year of the programme. | | | | |
|---|---|--|---|---|
| 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 | <p>Outcome: Increased access to and utilization of high-quality health care, using a continuum of care and primary health-care approach</p> <p>Outcome indicators:</p> <ul style="list-style-type: none"> ● Maternal mortality ratio Baseline: 24 deaths per 100,000 live births; Target: 15 deaths per 100,000 live births ● Percentage of service delivery points offering at least three family planning methods. Baseline: 95%; Target: 100% <p>Outcome: Increased access to and utilization of prevention, treatment, care and support services for HIV and sexually transmitted infections</p> <p>Outcome indicator:</p> <ul style="list-style-type: none"> ● Condom use with non-regular partners. Baseline: 60.5%; Target: 90% | <p>Output 1: Strengthened technical and institutional capacity of the national health-care system to develop and implement comprehensive reproductive health policies and provide an integrated package of essential sexual and reproductive health services</p> <p>Output indicators:</p> <ul style="list-style-type: none"> ● Percentage of mid-level primary health care providers in programme provinces who received training on reproductive health within the last five years. Target: 80% ● Percentage of primary health care physicians in programme provinces who received training on reproductive health within the last five years. Target: 80% ● Number of amendments to existing national policies and guidelines on sexual and reproductive health in line with international standards initiated by the Ministry of Public Health. Baseline: 0; Target: at least two per year <p>Output 2: Improved quality of emergency and essential obstetric and perinatal care in selected geographical areas</p> <p>Output indicators:</p> <ul style="list-style-type: none"> ● Caesarean sections as % of all births. Baseline: 6%; Target: 5%-15% ● Percentage of pregnant women receiving antenatal care in accordance with World Health Organization (WHO) standards. Target: 100% <p>Output 3: Increased capacity of the health-care system to ensure contraceptive commodity security and provide high-quality family planning services</p> <p>Output indicators:</p> <ul style="list-style-type: none"> ● Percentage of primary health-care facilities with stock levels that ensure the availability of contraceptives. Target: 100% ● Percentage of national contraceptive needs covered from the national budget. Baseline: 15%; Target: 75% <p>Output 4: Strengthened capacity of national institutions to provide high-quality, gender-sensitive, life skills-based education, information, and youth-friendly services for sexual and reproductive health and HIV and AIDS prevention</p> <p>Output indicators:</p> <ul style="list-style-type: none"> ● Percentage of young people aged 10-24 with comprehensive knowledge on preventing HIV. Baseline: 35.3%; Target: 90% ● Percentage of schools teaching a comprehensive course covering essential aspects of sexual and reproductive health and HIV and AIDS prevention. Baseline: 0; Target: 100% | <p>Ministries of: Higher and Secondary Education; Public Education; Public Health</p> <p>Women's Committee of Uzbekistan</p> <p>Joint United Nations Programme on HIV/AIDS; UNICEF; United Nations Educational Scientific and Cultural Organization; World Health Organization (WHO)</p> <p>National non-governmental organizations</p> | <p>\$5.7 million (\$4.8 million from regular resources; and \$0.9 million from other resources)</p> |

| National priority: National Millennium Development Goal target: reduce poverty by half by 2015 UNDAF outcome: the economic well-being of vulnerable groups is improved | | | | |
|--|---|--|---|--|
| Programme component | 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 national and local authorities to develop and implement economic and social security policies</p> <p><u>Outcome indicator:</u></p> <ul style="list-style-type: none"> ● Compliance of national population-related statistical techniques and indicators with international standards <p>Target: All techniques comply with international standards</p> | <p><u>Output 1:</u> Strengthened national capacity to collect, analyse and use disaggregated population data to develop and monitor national development frameworks and conduct evidence-based advocacy</p> <p><u>Output indicators:</u></p> <ul style="list-style-type: none"> ● Number of national and sectoral plans utilizing high-quality, gender-disaggregated population data. Target: at least two per year ● Number of population-related studies and surveys conducted with UNFPA support. Baseline: 0; Target: at least two per year | <p>State Committee on Statistics; Ministries of: Economy; Labour and Social Security</p> <p>National university; academic research institutions</p> <p>UNICEF; UNDP</p> | \$1.3 million (\$1.2 million from regular resources and \$0.1 million from other resources) |
| National priority: Welfare Improvement Strategy, 2008-2010: improving living standards, including through better governance UNDAF outcome: the effectiveness, inclusiveness and accountability of governance at national and local levels is enhanced | | | | |
| Gender equality | <p><u>Outcome:</u> Increased harmonization of national legislation and practices with United Nations treaties, standards and norms</p> <p><u>Outcome indicator:</u></p> <ul style="list-style-type: none"> ● Compliance of national gender-related legislation with United Nations treaties, standards and norms <p>Target: All legislation complies with United Nations treaties, standards and norms</p> | <p><u>Output 1:</u> National mechanisms to implement the Convention on the Elimination of All Forms of Discrimination against Women are strengthened through increased awareness of policymakers and decision makers, and through improved policies, protection systems and legal enforcement</p> <p><u>Output indicators:</u></p> <ul style="list-style-type: none"> ● Percentage of decision makers in programme provinces who are aware of domestic violence issues. Target: 80% ● Percentage of relevant law enforcement personnel in UNFPA programme provinces trained to identify and manage cases of domestic violence. Target: 80% | <p>Women's Committee of Uzbekistan</p> <p>UNDP; UNICEF; United Nations Office on Drugs and Crime; WHO</p> <p>National non-governmental organizations</p> | <p>\$1.3 million (\$1.2 million from regular resources and \$0.1 million from other resources)</p> <hr/> <p>Total from programme coordination and assistance: \$0.6 million from regular resources</p> |