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UNFPA – Annual report of the Executive Director

United Nations Population Fund

Implementation of the UNFPA strategic plan, 2018-2021

Report of the Executive Director

Summary

This report analyses the progress made in achieving the results of the UNFPA strategic plan, 2018-2021, during the first year of its implementation. It should be read in conjunction with the statistical and financial review, 2018 (DP/FPA/2019/9 (Part I)/Add.1), which provides details of UNFPA expenditures.

The report also details the progress made in implementing General Assembly resolution 71/243 on the quadrennial comprehensive policy review of operational activities for development of the United Nations system. The report further describes the progress made in implementing the common chapter of the strategic plans of UNDP, the United Nations Children's Fund (UNICEF), UNFPA and the United Nations Entity for Gender Equality and the Empowerment of Women (UN-Women).

UNFPA made substantial progress in achieving the first-year results of its strategic plan. The report takes stock of the challenges encountered and the lessons learned. The annexes to the report, available on the UNFPA Executive Board website, provide detailed analyses and information on the progress achieved.

Elements of a decision

The Executive Board may wish to:

- (a) Take note of the documents that make up the report of the Executive Director for 2018: DP/FPA/2019/9 (Part I, Part I/Add.1 and Part II);
- (b) Note with appreciation the progress made by UNFPA in achieving the results of the UNFPA strategic plan, 2018-2021, during the first year of its implementation.



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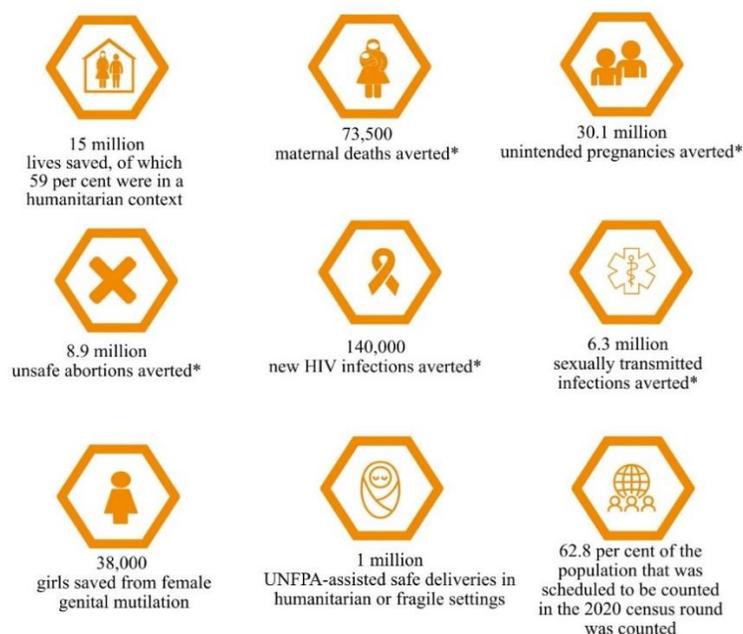
Annexes

- Annex 1: Output scorecard and indicator updates, 2018
- Annex 2: Results achieved at the country level, 2018 (available via [e-annex](#))
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- Annex 5: Results achieved through South-South and triangular cooperation, 2018
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- Annex 7: Implementation of General Assembly resolution 71/243 on the quadrennial comprehensive policy review of operational activities for development of the United Nations system, 2018
- Annex 8: Implementation of the common chapter of the strategic plan, 2018

The annexes are available on the [UNFPA Executive Board website](#).

I. Overview

1. This report details the progress UNFPA made in achieving the results of the UNFPA strategic plan, 2018-2021, during the first year of its implementation. The current strategic plan is the first of three consecutive strategic plans that will guide UNFPA in contributing to the achievement of the Sustainable Development Goals of the 2030 Agenda for Sustainable Development. The two subsequent strategic plans will cover the years 2022-2025 and 2026-2029. This report also details the progress made in implementing General Assembly resolution 71/243 on the quadrennial comprehensive policy review of operational activities for development of the United Nations system, as well as the contributions of UNFPA global and regional interventions in achieving the results of the strategic plan. The report describes the challenges encountered and the lessons learned in implementing the strategic plan in 2018.
2. During the first year of implementation of the strategic plan, UNFPA laid the foundation for achieving the Sustainable Development Goals and the three transformative results of its strategic plan. These transformative results are: (a) an end to preventable maternal deaths; (b) an end to the unmet need for family planning; and (c) an end to gender-based violence and all harmful practices, including female genital mutilation and child, early and forced marriage.
3. UNFPA laid this foundation by:
 - (a) Demonstrating good performance against the commitments set in its strategic plan;
 - (b) Mobilizing the highest level of revenue in the history of UNFPA and joining the ranks of larger organizations in the United Nations system;
 - (c) Launching a change-management process to make UNFPA fit-for-purpose;
 - (d) Aligning UNFPA programmes to achieve the transformative results;
 - (e) Supporting and implementing the reform initiatives of the United Nations Secretary-General;
 - (f) Improving the costing of the three transformative results;
 - (g) Beginning the implementation of the common chapter of the strategic plans of UNDP, UNFPA, UNICEF and UN-Women (see annex 8);
 - (h) Strengthening partnerships to accelerate progress towards achieving the three transformative results.
4. The analysis of the 2018 results shows that UNFPA progressed as planned and achieved the results it sought to achieve. There are 18 strategic plan outputs. For 12 of those outputs, UNFPA progress toward the targets was 90 per cent and above. For four of the outputs, UNFPA progress was between 60 and 90 per cent of the targets. Progress toward the remaining two outputs was less than 60 per cent (see annex 1).
5. In 2018, UNFPA met 90 per cent of the targets for its regional programmes (see annex 6) and 92 per cent of the targets for its global programme. Figure 1 highlights the key results achieved in 2018.

Figure 1: Key results achieved in 2018

* Estimated results obtained from the family planning commodity distribution of UNFPA

6. UNFPA prioritized “leaving no one behind” and “reaching the furthest behind first” in its work. Table 1 below shows that a number of countries are focusing on furthest-behind populations. UNFPA also strengthened cooperation and complementarity between humanitarian and development contexts.

Table 1: Prioritizing furthest-behind populations, 2018

Furthest behind populations	Number of UNFPA offices prioritizing furthest-behind populations
Women and/or young people, particularly adolescent girls, in the two lowest wealth quintiles	79
Adolescent girls aged 10-14 years	76
Women and/or young people living in hard-to-reach areas	78
Women and/or young people, particularly adolescent girls, discriminated against based on their identity, ethnicity and race	49
Persons with disabilities	45
Migrants, internally displaced persons or refugees	56
Key populations	45

Source: UNFPA country office annual reports, 2018

7. UNFPA improved its organizational readiness to attain results. The organization launched a change-management process in 2018, and initiated a managerial certification process to ensure that all managers were trained and certified. UNFPA continued to maintain overall gender parity: by the end of 2018, 50.8 per cent of UNFPA staff were women. UNFPA maintains a zero tolerance policy for all forms of sexual wrongdoing. According to the 2018 staff survey, 72 per cent of staff

felt that UNFPA had dealt effectively with cases of misconduct, including sexual harassment, compared to 61 per cent in 2016.

8. With 11 years remaining before the 2030 deadline for achieving the Sustainable Development Goals, UNFPA will accelerate its work at all levels. During the midterm review of the strategic plan in 2020, UNFPA will scale up its efforts to ensure that the three transformative results can be achieved globally by 2030.

II. The 2018 context

9. UNFPA began the implementation of its current strategic plan in 2018, and committed itself to attaining three transformative results: (a) an end to preventable maternal deaths; (b) an end to the unmet need for family planning; and (c) an end to gender-based violence and all harmful practices, including female genital mutilation and child, early and forced marriage. In 2018, the Executive Board approved a revised integrated budget that supports the strategic plan. It also marked the first year of implementation of the commitments in the common chapter of the strategic plan.

10. In addition, 2018 marked the third year of implementing the 2030 Agenda for Sustainable Development. People are living better lives than they did a decade ago. The proportion of workers worldwide living in extreme poverty declined significantly, from 26.9 per cent in 2000 to 9.2 per cent in 2017. Despite such progress, the achievement of the Sustainable Development Goals remains a long way off.

11. At the end of 2018, the world had an estimated population of 7.6 billion people. At least half of the world's population does not have full coverage for essential health services. Over 800 million people spent at least 10 per cent of their household budgets on health care. About 100 million people are being pushed into extreme poverty to pay for their health care costs.

12. In 2018, Member States made commitments to address emerging needs. In December 2018, world leaders adopted the first-ever Global Compact for Safe, Orderly and Regular Migration. In October 2018, parliamentarians at the seventh International Parliamentarians' Conference on the Implementation of the Programme of Action of the International Conference on Population and Development (ICPD) adopted the Ottawa Statement of Commitment to advance the ICPD Programme of Action. The fifth International Conference on Family Planning took place in Kigali, Rwanda, in November 2018, and concluded with a commitment to advance access to family planning services.

13. Several other initiatives implemented in 2018 accelerated the implementation of the ICPD Programme of Action:

- (a) For the first time, UNFPA developed a global monitoring framework to track progress in implementing the Programme of Action;
- (b) Five regions conducted reviews to assess, at the 25-year mark, progress in implementing the Programme of Action;
- (c) Over 100 countries prepared ICPD national reports.

14. In 2018, Member States adopted General Assembly resolution 72/279 on repositioning the United Nations development system in the context of the quadrennial comprehensive policy review of operational activities for development of the United Nations system.

15. To support the repositioning process and inter-agency coordination, UNFPA coordinated two groups: (a) the strategic financing results group of the United Nations Sustainable Development Group, together with the United Nations Conference on Trade and Development; and (b) the redesign of the United Nations Development Assistance Framework, together with the United Nations Educational, Scientific and Cultural Organization (UNESCO).

16. The past year witnessed unprecedented increases in the scope, frequency and complexity of humanitarian emergencies. By the end of 2018, 136 million people required humanitarian aid, compared to 128 million in 2017. This included an estimated 34 million women of reproductive age, 5 million of whom were pregnant. The estimated economic losses attributed to disasters totalled over \$300 billion, among the highest in recent years. In 2018, there were 22 inter-agency humanitarian response plans, compared to 12 in 2008.

17. Climate change presented another challenge. The past four years were the warmest ever recorded. Extreme weather affected 60 million people in 2018. The world continued to experience rising sea levels and increasing concentrations of greenhouse gases.

18. The past year also witnessed a rise in populism and extremism that affected policies, institutions and services. Although net official development assistance increased from member countries of the Development Assistance Committee of the Organisation for Economic Co-operation and Development, bilateral aid to the least developed countries fell by 3.9 per cent in real terms from 2017 levels.

19. UNFPA will respond to these challenges by further expanding partnerships. The midterm review of the strategic plan will provide an opportunity for UNFPA to prioritize those challenges.

20. To respond to the repositioning of the United Nations system and equip UNFPA to achieve the results of its strategic plan, UNFPA continued to implement its change-management process.

Box: Progress in implementing UNFPA change-management initiatives, 2018

In 2018, UNFPA advanced the implementation of change-management initiatives. These included: (a) repositioning intergovernmental and multilateral affairs; (b) restructuring the Programme Division; (c) launching the regional operations shared services centre in the East and Southern Africa region; (d) providing field-focused technical services; (e) advancing the information and communication technology transformation; and (f) reviewing the humanitarian response architecture. In addition, 14 UNFPA country offices realigned their human resources to the strategic plan.

UNFPA launched six other change initiatives in late 2018; the organization will report on these initiatives in the report of the Executive Director for 2019.

III. Results achieved in 2018

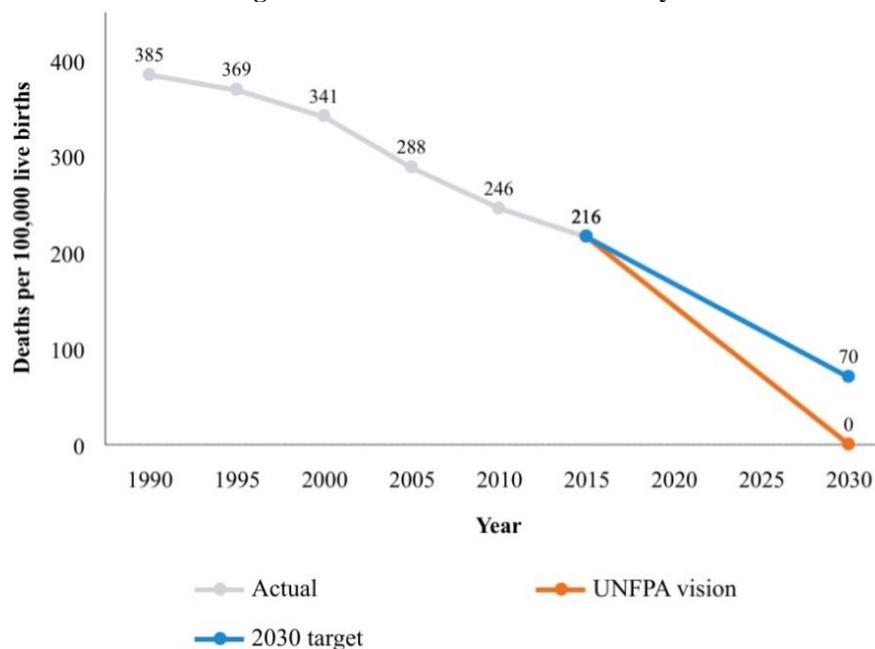
A. Status of the three transformative results

21. Although the world has made progress in achieving the three transformative results, progress must be accelerated to achieve the targets by 2030. In 2018, UNFPA established the foundation for achieving the transformative results of its strategic plan.

Ending preventable maternal deaths

22. Maternal deaths declined from 532,000 in 1990 to 303,000 in 2015, a 43 per cent reduction since 1990. In 2018, UNFPA averted 73,500 maternal deaths by providing contraceptives. While progress is substantial, it is not at the level required to achieve the 2030 targets. To end preventable maternal deaths by 2030, countries must accelerate their annual rates of reduction by at least 7.5 per cent.

Figure 2: Trends in maternal mortality



Note: Assumes that all maternal deaths are preventable

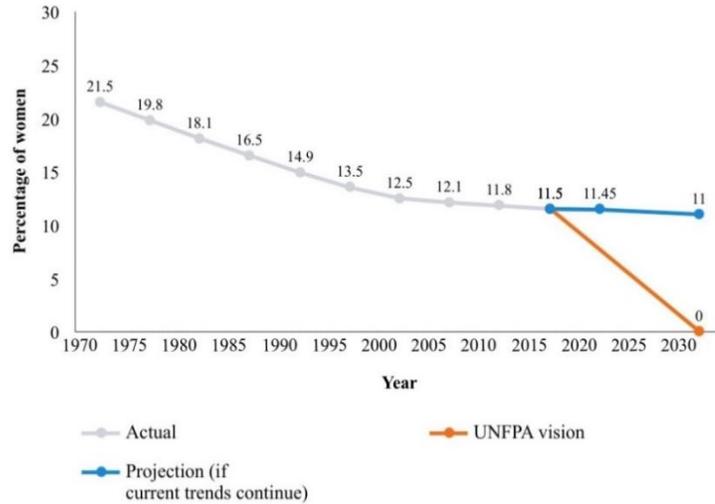
23. Every day, approximately 830 women die from preventable causes related to pregnancy and childbirth. Worldwide, 99 per cent of all maternal deaths occur in developing countries, and more than half of maternal deaths occur in fragile contexts.

24. UNFPA is the leading United Nations organization supporting sexual and reproductive health and rights. It has five strategic objectives to guide programme planning to end preventable maternal mortality: (a) reducing inequities in access to and the quality of sexual, reproductive, maternal and newborn health care; (b) ensuring universal health coverage for comprehensive sexual, reproductive, maternal and newborn health care; (c) addressing all causes of maternal mortality, reproductive and maternal morbidities, and related disabilities; (d) strengthening health systems to respond to the needs and priorities of women and girls; and (e) ensuring accountability to improve the quality of care and equity.

Ending the unmet need for family planning

25. The unmet need for family planning declined from 21 per cent in 1970 to 11.5 per cent in 2015. In Eastern and Southern Africa, the unmet need for modern methods dropped by three percentage points since 2012.

Figure 3: Trends in the unmet need for family planning

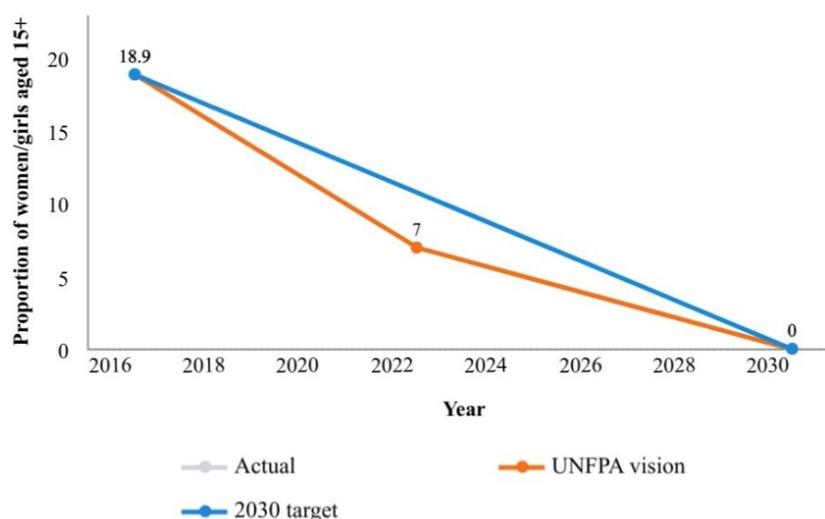


26. Of 807 million women of reproductive age in developing regions who wish to control their pregnancies, 130 million have an unmet need for family planning. Women with an unmet need for modern contraception account for 84 per cent of all unintended pregnancies in developing regions.

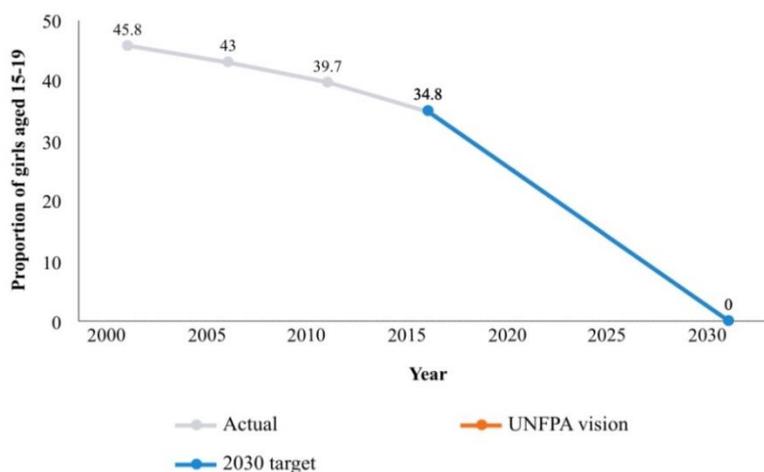
Ending gender-based violence and all harmful practices, including female genital mutilation and child, early and forced marriage

27. Globally, 1 in 5 ever-partnered adolescent girls aged 15-19 years has experienced physical or sexual violence by an intimate partner in the last 12 months.

28. More than one third of women worldwide have experienced either physical or sexual violence at some point in their lives. Research indicates that the cost of violence against women could amount annually to approximately 2 per cent of global gross domestic product, equivalent to \$1.5 trillion.

Figure 4: Targets in intimate partner violence

29. Female genital mutilation has declined over the last three decades. In the 30 countries with nationally representative prevalence data, approximately 1 in 3 girls aged 15 to 19 today has undergone the practice. To achieve the 2030 target of ending female genital mutilation, the rate of reduction must be accelerated 13-fold over the current rate.

Figure 5: Trends in female genital mutilation

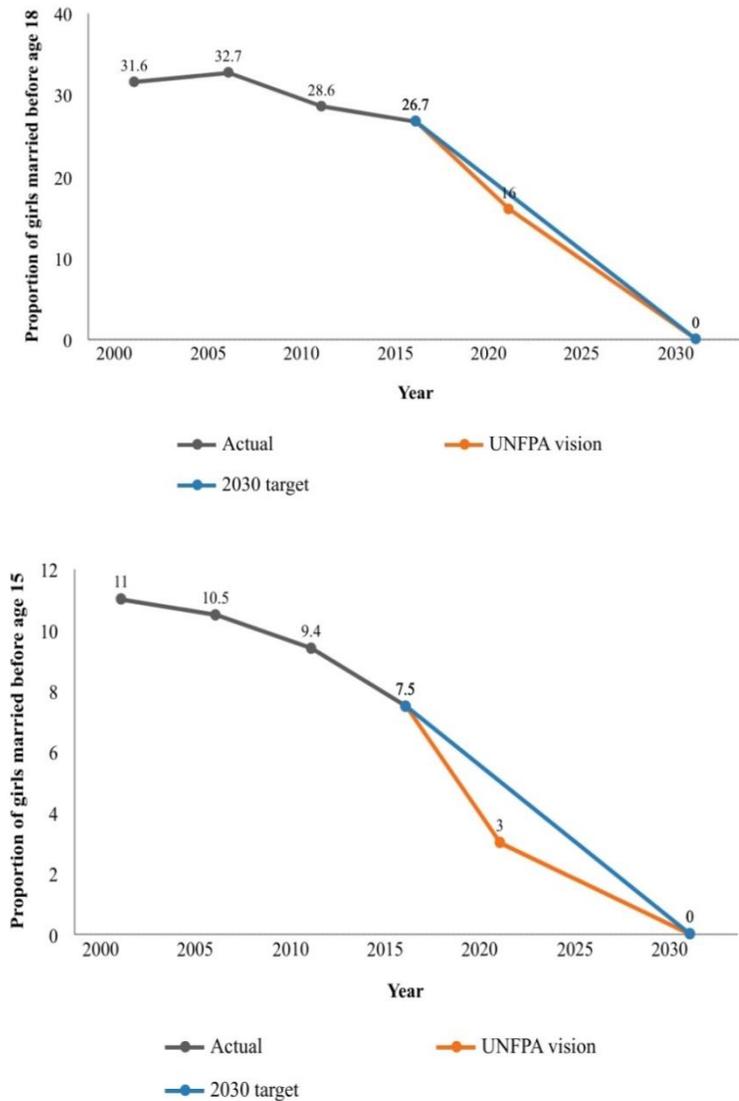
30. Over 200 million women and girls living today have experienced female genital mutilation. Without concerted and accelerated action, a further 68 million girls could be subjected to this harmful practice by 2030. The risk of female genital mutilation is especially high in furthest-behind communities in rural areas.

31. The pace of decline of female genital mutilation has been uneven. The fastest decline among girls aged 15-19 years occurred in Burkina Faso, Egypt, Kenya, Liberia and Togo.

32. Child marriage continued to decline. Globally, the proportion of young women who were married as children decreased by 15 per cent, from 1 in 4 to approximately 1 in 5. South Asia witnessed the largest decline in child marriage in the last 10 years; there, a girl’s risk of marrying before her 18th birthday dropped by more than a third, from nearly 50 per cent to 30 per cent.

33. The current rate of decline in child marriage is insufficient to meet the 2030 target to end child marriage. Without further accelerating the reduction in child marriages, more than 150 million additional girls under 18 will marry by 2030. In order to meet the 2030 target, global progress must be 12 times faster than the rate observed over the past decade. To end child marriage in the least developed countries, progress must be 14 times faster than the current rate.

Figure 6: Trends in child marriage



34. An estimated 12 million girls are married in childhood each year. The global number of child brides living today is estimated at 650 million girls and women. The global burden of child marriage is moving from South Asia to sub-Saharan Africa. In sub-Saharan Africa, levels of child

marriage declined only modestly. In West and Central Africa, the region with the highest prevalence of child marriages, progress has been the slowest. Population growth threatens to result in an even higher number of child brides in sub-Saharan Africa during the coming years.

The way forward

35. As of 2018, 105 UNFPA country programmes had prioritized at least one of the three transformative results. To date, 94 UNFPA country offices have leveraged additional resources to support the achievement of the transformative results, while 105 UNFPA country offices expanded their partnerships to achieve the transformative results.

36. The United Nations Development Assistance Frameworks developed in 2018 reflected as a priority the transformative results:

- (a) 69 per cent prioritized ending preventable maternal deaths;
- (b) 50 per cent prioritized ending the unmet need for family planning;
- (c) 85 per cent prioritized ending gender-based violence and harmful practices.

37. The three transformative results cannot be achieved unless: (a) an integrated approach is applied; (b) inequalities are reduced and the furthest behind are prioritized; (c) sufficient investments are directed to achieving the transformative results; (d) innovation is prioritized; and (e) interventions are accelerated.

38. UNFPA will continue to have a leadership role at global, regional and country levels to prioritize the achievement of the transformative results by 2030. As part of the midterm review of its strategic plan, UNFPA will strengthen its programmes and operations to accelerate progress towards the achievement of the transformative results.

39. In 2019, UNFPA and the Governments of Kenya and Denmark will convene a high-level summit to reflect the progress and identify ways to accelerate implementation of the ICPD Programme of Action and to advance achievement of the transformative results.

B. Progress in achieving the outcomes of the UNFPA strategic plan

Outcome 1: Every woman, adolescent and youth everywhere, especially those furthest behind, has utilized integrated sexual and reproductive health services and exercised reproductive rights, free of coercion, discrimination and violence.

Outcome 1 has contributed to achievement of the following Sustainable Development Goals:



40. Global trends demonstrate notable progress in increasing the utilization of integrated sexual and reproductive health services. During 2018, 24 million women and young people in UNFPA priority countries, including countries in fragile contexts and those experiencing humanitarian crises, utilized integrated sexual and reproductive health services.

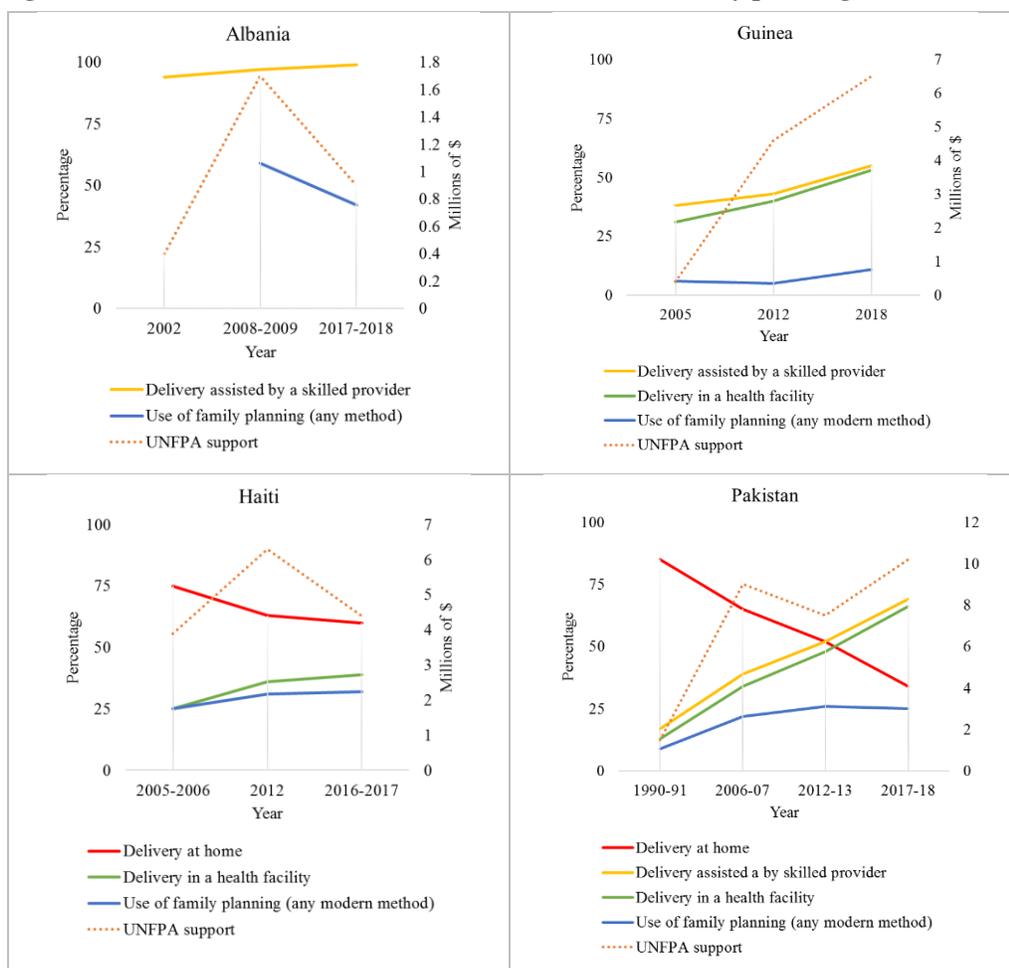
41. Globally, access to modern family planning services increased from 74.9 per cent in 2000 to 77.4 per cent in 2018. In the least developed countries, which are primarily the UNFPA priority countries, the proportion of women who are married or in a union and have their need for family planning satisfied with modern methods increased from 39.4 per cent in 2000 to 58.5 per cent in 2018.

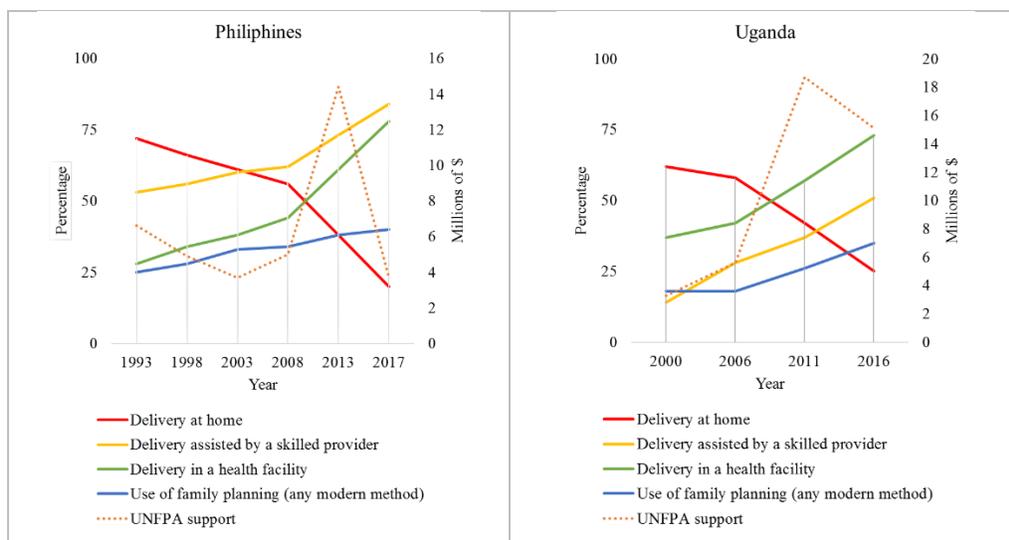
42. Contraceptive use at the country level showed significant improvements.

- (a) In Burundi, the percentage of women in a union using a modern contraceptive method increased from 18 per cent in 2010 to 23 per cent in 2017;
- (b) In Ghana, the percentage of currently married women using a modern contraceptive method increased from 16 per cent in 2007 to 25 per cent in 2017;
- (c) In Guinea, the demand for family planning satisfied with modern methods doubled, from 16 per cent in 2012 to 32.1 per cent in 2018;
- (d) In Senegal, the use of modern contraceptives increased from 23 per cent in 2016 to 26 per cent in 2017.

43. Globally, births attended by skilled birth attendants increased by 12 per cent, from 69.9 per cent in 2010 to 78.5 per cent in 2016. The increase was faster (23 per cent) in the least developed countries; in South Asia, it almost doubled. In Tajikistan, almost 9 in 10 births are delivered in a health facility, and almost all births are delivered with the assistance of a skilled provider. Figure 7 below shows the trends in the use of maternal health and family planning services in selected countries.

Figure 7: Trends in the use of maternal health services and family planning in selected countries

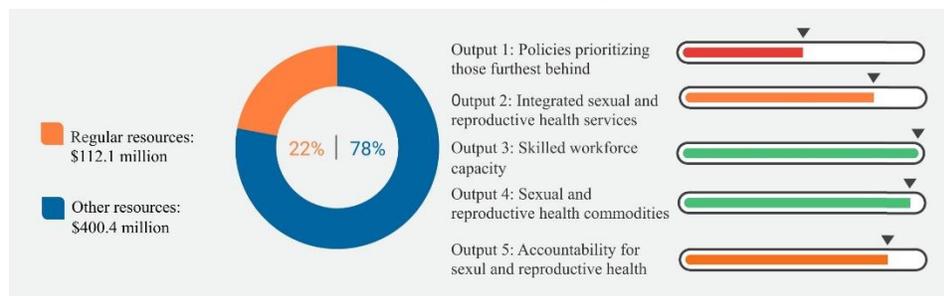




Source: Demographic and health surveys published in 2018

44. UNFPA made good progress in achieving four of the five outputs of the strategic plan on increasing the utilization of sexual and reproductive health services. UNFPA made 51 per cent progress in the output on prioritizing furthest-behind populations in policies and programmes. Reaching the furthest-behind populations proved to be resource-intensive and required new skills for UNFPA staff and their implementing partners. Figure 8 below illustrates the key achievements in utilizing sexual and reproductive health services in 2018.

Figure 8: Key achievements in utilizing sexual and reproductive health services, 2018



Sexual and reproductive health plan

38 countries had a national sexual and reproductive health plan that prioritized services for marginalized group



Emergency preparedness

28 countries integrated sexual and reproductive health into emergency preparedness and response plans or disaster risk reduction plans



Couple years of protection

68.2 million couple years of protection for contraceptives procured by UNFPA



Fistula

19,702 women and girls living with obstetric fistula received treatment



Integrated services

24 million women and young people were reached with sexual and reproductive health services



Humanitarian

2,520 health facilities provided emergency obstetric care in humanitarian settings



Midwifery deployment

36 per cent of newly graduated midwives were deployed at public health facilities, with support from UNFPA



Disability

38 countries included the needs of persons with disabilities in the pre-service curricula for midwives



Minimum initial service package

11,359 health service providers and managers were trained as trainers on the minimum initial service package



Logistics management information system

51 countries had a logistics management information system that reached the last mile



More results may be found at:
unfpa.org/data/results

45. At the country level, examples of key results achieved include:
- (a) Health facilities in Chad that provide emergency obstetric and neonatal care with at least one midwife doubled from 12 per cent in 2017 to 24 per cent in 2018;

- (b) Ninety-six per cent of health facilities in Côte d'Ivoire in 2018 offered at least three modern contraceptive methods compared to 75 per cent in 2013;
- (c) A health law adopted in the Democratic Republic of Congo authorizes family planning access for all women of reproductive age, including minors, without parental consent;
- (d) In 2018, Kiribati had no contraceptive stock-outs;
- (e) Liberia revised a public health law to include safe abortion-care services up to 24 weeks and access to family planning services by adolescents without parental consent;
- (f) Rwanda adopted legislative reforms enabling adolescents to access sexual and reproductive health services without parental consent and improved access to abortion services for minors;
- (g) Uganda approved a national policy for sexual and reproductive health and rights.

46. UNFPA supports innovative initiatives that increase the utilization of sexual and reproductive health services. UNFPA introduced a geographic information system (GIS) to improve the availability and quality of emergency obstetric and newborn care facilities. UNFPA Belarus developed a mobile application to provide menstrual cycle predictions and personalized daily health insights that reached 14 million women and girls. As an alternative means of menstrual hygiene management, 4,500 menstrual cups were distributed in Malawi with support from UNFPA.

47. UNFPA was instrumental in global and regional developments that increased the utilization of sexual and reproductive health services:

- (a) Sexual and reproductive health was included in the primary health-care declaration endorsed at the 2018 Global Conference on Primary Health Care;
- (b) The African Coalition for Menstrual Health Management was established in 2018;
- (c) The Arab States region developed a regional reproductive, maternal, newborn, child and adolescent health strategy in 2018;
- (d) The Southern African Development Community approved a regional strategy for sexual and reproductive health and rights for 2019-2030;
- (e) The West and Central Africa region developed a regional strategy to eliminate obstetric fistula.

48. UNFPA thematic funds played important roles in accelerating the utilization of sexual and reproductive health services. For example, the UNFPA Supplies programme, which is the global leader in procuring family-planning commodities, enabled approximately 20 million women and girls to have access to family-planning services in 2018. The UNFPA Maternal Health Thematic Fund, which seeks to improve maternal and newborn health, began its third phase in 2018. By the end of phase II, the fund had contributed to averting over 119,000 maternal deaths in 39 priority countries with the highest maternal mortality and morbidity rates.

49. The midterm evaluation of the UNFPA Supplies programme found that the programme: (a) expanded access to commodities and services; (b) improved the efficiency of the procurement and supply of sexual and reproductive health and family-planning commodities; (c) improved supply-chain management capacity; and (d) contributed to increasing the demand for family-planning services.

50. Partnerships played an essential role in increasing the utilization of integrated sexual and reproductive health services:

- (a) The Family Planning 2020 partnership, whose reference group UNFPA co-chaired, enabled more than 309 million women and adolescent girls to use modern contraception by 2017, an increase of 38.8 million since the launch of the partnership in 2012;

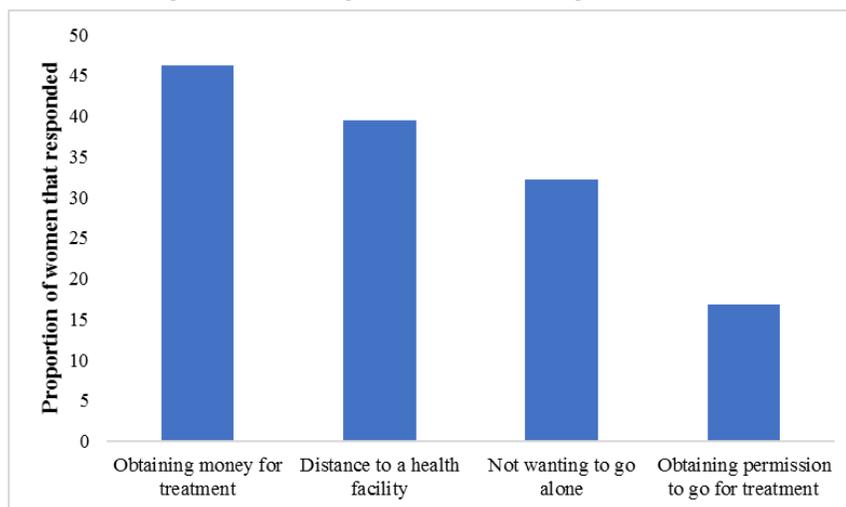
- (b) Commitments to the Every Woman Every Child partnership, of which UNFPA is a member, have reached 28 million women with contraceptives services since 2015;
- (c) The H6 partnership brings together UNAIDS, UNFPA, UNICEF, UN-Women, the World Health Organization and the World Bank Group to support the implementation of Every Woman Every Child initiatives;
- (d) UNFPA, as a member of the Global Financing Facility, provides technical assistance to countries to finance the health outcomes of their populations.

51. Achieving increased utilization of integrated sexual and reproductive health services revealed the following:

- (a) The one-size-fits-all approach in strengthening health systems to improve the utilization of sexual and reproductive health services does not work;
- (b) Countries that do not prioritize sexual and reproductive health and rights have disproportionately poorer health indicators;
- (c) Reaching the “last mile” to serve furthest-behind populations requires infrastructure investments, such as road construction;
- (d) Universal access to financial risk-reduction schemes without complex eligibility requirements and premium structures is important to achieve high coverage with minimal transaction costs;
- (e) The promotion of universal access to sexual and reproductive health requires supportive arguments from economic and political perspectives;
- (f) Integrating family-planning services into maternal health services is an effective strategy for reducing unmet need, especially in situations where maternity care is a woman’s primary contact with the health-care system.

52. According to the findings of the 2018 demographic and health surveys, the greatest challenge to accessing health care among women of reproductive age remains obtaining money for treatment (see figure 9). Other challenges include the distance to health facilities, not wanting to visit health facilities alone, and requiring permission to go for treatment.

Figure 9: Challenges faced in accessing health care



53. UNFPA is addressing the challenges faced in accessing health care by: (a) introducing a comprehensive sexual and reproductive health package; (b) supporting risk pooling and pre-payment schemes; (c) supporting the health infrastructure through partnerships; and (d) promoting gender equality, the empowerment of women and girls, and the promotion, protection and fulfilment of the human rights of women and girls.

54. The midterm evaluation of the UNFPA Supplies programme identified several supply-chain challenges in reaching the “last mile” with contraceptives. These include: (a) lack of funding for in-country distribution; (b) poor infrastructure in national and local warehouses; and (c) underfunded vehicle maintenance.

Outcome 2: Every adolescent and youth, in particular adolescent girls, is empowered to have access to sexual and reproductive health and reproductive rights, in all contexts.

Outcome 2 has contributed to achievement of the following Sustainable Development Goals

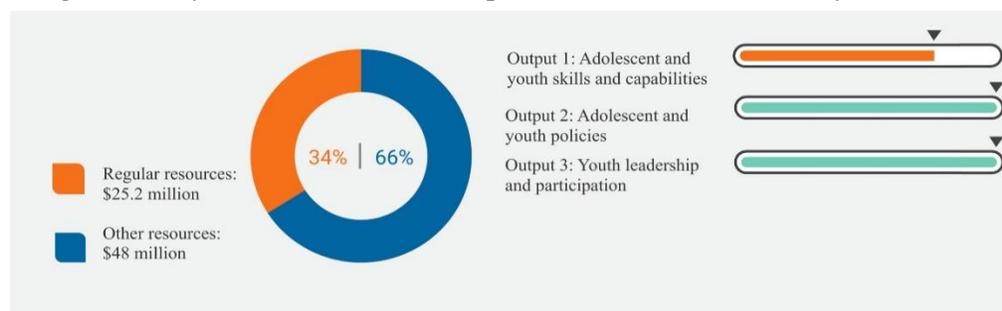


55. Progress in adolescent and youth empowerment continued in 2018. Available data at the country level indicate this progress. In Tajikistan, the percentage of young women with comprehensive knowledge about HIV increased from 9 per cent in 2012 to 12 per cent in 2017. In Albania, 35 per cent of young women and 45 per cent of young men aged 15-24 have comprehensive knowledge of HIV.

56. In Benin, the percentage of young men aged 15-24 who have had sex before age 15 decreased from 16 per cent in 2011-2012 to 8 per cent in 2017-2018; for young women, the percentage decreased from 14 per cent in 1996 to 12 per cent in 2017-2018. In South Africa, the percentage of young women aged 15-24 who have had sex before age 15 decreased from 8 per cent in 1998 to 6 per cent in 2016.

57. According to the most recent global data available, the percentage of men and women aged 15-24 who have the correct knowledge to prevent the sexual transmission of HIV was 21 per cent for women and 30.8 per cent for men in UNFPA programme countries.

58. UNFPA made good progress against its strategic plan outputs on the empowerment of adolescents and youth. Figure 10 highlights these achievements.

Figure 10: Key achievements for the empowerment of adolescents and youth, 2018**More results may be found at:**

unfpa.org/data/results

59. UNFPA made noteworthy progress in prioritizing adolescents and youth in policies and programmes in 2018. In West and Central Africa, 13 countries integrated the demographic dividend into their national development plans, while in East and Southern Africa, Angola and Uganda integrated the demographic dividend into their national development plans. Cape Verde integrated the demographic dividend into its national plan for sustainable development, its national plan for employment, 2018-2023, and its youth employment action plan.

60. Several other countries prioritized adolescent and youth empowerment:

- (a) Benin developed a migration policy that integrates the sexual and reproductive health of young people into the policy;
- (b) In 2018, the Lao People's Democratic Republic prioritized the needs and rights of adolescent girls as a result of the UNFPA advocacy campaign, "Noi".
- (c) Madagascar established general rules governing reproductive health and family planning, including free access to family planning information and services for adolescents and young people;

- (d) Mongolia adopted a law on youth development, the first law that addresses young people;
- (e) UNFPA, in partnership with UNICEF, launched the child and youth friendly municipalities programme in Ukraine.

61. Global and regional developments supported by UNFPA provided a conducive environment for empowering adolescents and youth at the country level. UNFPA contributed to the development of the United Nations youth strategy, Youth 2030. In 2018, UNFPA updated the youth strategy in line with the United Nations youth strategy. At the 2018 International Conference on Family Planning, UNFPA launched the demographic dividend atlas to track the progress of youth development. In the Arab States, UNFPA supported the first Arab youth forum. With support from UNFPA, the European Youth Goals prioritized the needs and rights of youth in Europe.

62. In addition, several intergovernmental organizations made youth a priority in their sustainable development efforts. The South Asian Association for Regional Cooperation organized a regional dialogue on youth participation in implementing the Sustainable Development Goals. To date, 177 countries have ratified the Convention on the Rights of Persons with Disabilities.

63. Partnerships were critical in empowering adolescents and youth in 2018. UNESCO developed, with inputs from UNFPA, international technical guidance on sexuality education, while UNFPA and the United Nations Peacebuilding Support Office conducted an independent study on youth, peace and security. This study assisted in the adoption of Security Council resolution 2419, the second Security Council resolution on youth, peace and security.

64. UNFPA and its partners learned the following lessons from empowering young people:
- (a) Sexual and reproductive health interventions for young people are more effective when combined with livelihood programmes;
 - (b) Sexuality education – in or out of schools – does not increase sexual activity or sexual risk-taking behaviour;
 - (c) Gender-focused sexuality education programmes are more effective than gender-blind programmes at achieving health outcomes;
 - (d) Comprehensive knowledge of sexual and reproductive health and rights improves with levels of education. For example, in the Philippines, only 7 per cent of young women without any education have comprehensive knowledge of how to prevent HIV, compared to 35 per cent of young women with a post-secondary education;
 - (e) Empowering young people as change agents has the power to change laws and policies. For example, engaging Mozambican youth in the implementation of the Universal Periodic Review resulted in the revision of the penal code to criminalize the sexual abuse of children in Mozambique.

65. Youth unemployment has challenged the empowerment of young people. Some 71 million young people are unemployed, and many millions more work in the informal sector. UNFPA supports the Global Initiative on Decent Jobs for Youth, coordinated by the International Labour Organization.

Outcome 3: Gender equality, the empowerment of all women and girls, and reproductive rights are advanced in development and humanitarian settings.

Outcome 3 has contributed to achievement of the following Sustainable Development Goals

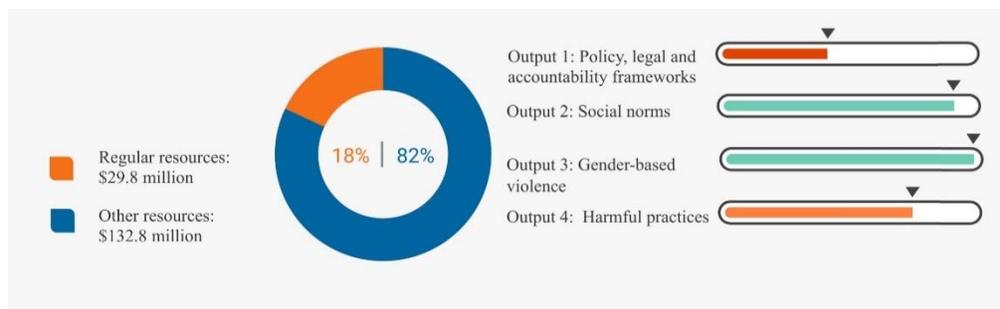


66. Gender equality and the empowerment of women and girls continued to make progress. The most recent data show that 53.4 per cent of women aged 15-49 make their own informed decisions regarding sexual relations, contraceptive use and health care. Child marriage and female genital mutilation continued to decline globally.

67. This progress is evident in many countries. In Albania, only 3 per cent of married women in 2018 reported suffering some form of intimate partner violence at some point in their lifetime, and 2 per cent reported experiencing such violence during the last 12 months. In Uganda, the percentage of ever-married women aged 15-49 who reported having experienced violence by their husband or partner declined from 60 per cent in 2011 to 56 per cent in 2016.

68. UNFPA made good progress against the strategic plan outputs of outcome 3, except for the output on advancing policy, legal and accountability frameworks. This output focuses on prioritizing marginalized populations; country offices require more guidance to reach such populations.

69. The evaluation of UNFPA support to the prevention of, response to and elimination of gender-based violence and harmful practices, 2012-2017, concluded that UNFPA had made significant contributions to respond to gender-based violence and harmful practices at all levels. Figure 11 highlights some of the key results achieved.

Figure 11: Key achievements in gender equality and the empowerment of women, 2018**More results may be found at:**

unfpa.org/data/results

70. With support from UNFPA, countries made significant progress in their quest to achieve gender equality and the empowerment of all women and girls.

- Armenia developed an action plan to combat gender-based sex selection;
- Bangladesh developed a national plan of action to eliminate child marriage;
- Burkina Faso passed a criminal code law to address violence against women;

- (d) Comoros developed a national policy to combat gender-based violence;
- (e) The Democratic Republic of Congo developed a law to protect vulnerable people, including survivors of sexual violence;
- (f) Somalia adopted a comprehensive sexual offences bill.

71. UNFPA was instrumental in global and regional developments that advanced gender equality and the empowerment of all women and girls. The UNFPA partnership with the Southern African Development Community and the East African Community produced a model law to eradicate child marriage. In 2018, Malawi and Mozambique applied this model. UNFPA also launched the first guidelines to provide rights-based and gender-responsive services for women and young persons with disabilities. With input from UNFPA and UNICEF, the African Union launched its campaign to end female genital mutilation.

72. Partnerships played an important role in advancing gender equality and the empowerment of women and girls:

- (a) The European Union and the United Nations launched the Spotlight Initiative, a global multi-year partnership that seeks to eliminate all forms of violence against women and girls;
- (b) The United Nations Joint Global Programme on Essential Services for Women and Girls Subject to Violence, a partnership of UNDP, UNFPA, the United Nations Office on Drugs and Crime, UN-Women and WHO, provides essential multisectoral services for women and girls who have experienced gender-based violence;
- (c) UNFPA, in cooperation with UNICEF, leads the largest global programme to accelerate the abandonment of female genital mutilation. Female genital mutilation rates have steadily declined in 10 countries. Thirteen of the countries in the programme have introduced national laws banning female genital mutilation, and 600,000 women and girls have accessed health, social and legal services related to female genital mutilation;
- (d) In 2016, UNFPA and UNICEF launched a global programme to accelerate action to end child marriage. In 2018, the programme reached over 700,000 girls through its support to life skills and school attendance. The programme supported over 7,500 schools to improve the quality of education for adolescent girls. As of 2018, 8 of 12 programme countries – Burkina Faso, Ethiopia, Ghana, Mozambique, Nepal, Nigeria, Uganda and Zambia – had developed national action plans or strategies to end child marriage.

73. UNFPA encountered challenges in advancing gender equality and the empowerment of women and girls. These challenges included conflicts and disasters that exacerbated gender inequalities. Natural disasters on average kill more women than men, and kill women at a younger age than men.

74. Gender differences in laws affect gender equality and the empowerment of women and girls. Globally, over 2.7 billion women are legally restricted from having the same choice of jobs as men. Of 189 economies assessed in 2018, 104 economies have laws preventing women from working in specific jobs.

75. UNFPA and its partners learned the following lessons in advancing gender equality and the empowerment of women and girls:

- (a) Cross-border initiatives are critical to eliminating harmful practices;
- (b) The prevalence of certain harmful practices is more dependent on ethnicity rather than on the country itself;
- (c) In Jordan, complementarity between humanitarian and development streams avoids duplication and improves the quality of services for survivors of gender-based violence;
- (d) The integration of interventions related to female genital mutilation into all health and social services is essential for eliminating this harmful practice;

(e) Poverty and living in rural areas are strongly associated with child marriage globally. In West and Central Africa, child marriage is more than twice as common in rural areas as it is in urban areas. Child marriage is over three times more common among those in the poorest wealth quintile compared to those in the richest wealth quintile.

Outcome 4: Everyone, everywhere, is counted, and accounted for, in the pursuit of sustainable development.

Outcome 4 has contributed to achievement of the following Sustainable Development Goals

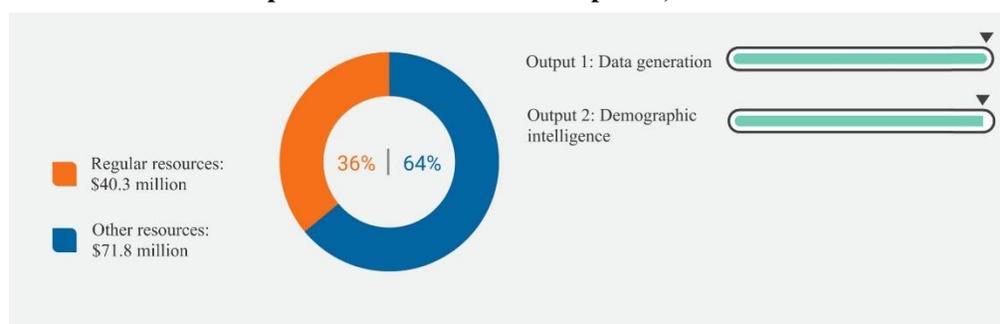


76. Noteworthy progress was made in counting and accounting for everyone, everywhere in the pursuit of sustainable development. As of 2018:

- (a) 62.8 per cent of the population scheduled to be counted in the 2020 census round was counted;
- (b) 89 per cent of countries conducted at least one population and housing census in the last 10 years;
- (c) 58.4 per cent of countries have birth registration data that are at least 90 per cent complete;
- (d) 60.4 per cent of countries have death registration data that are at least 75 per cent complete;
- (e) The births of 73.1 per cent of children under 5 years of age have been registered with a civil authority by age.

77. Figure 12 below illustrates key achievements in counting and accounting for everyone, everywhere in the pursuit of sustainable development in 2018.

Figure 12: Key achievements in counting and accounting for everyone, everywhere in the pursuit of sustainable development, 2018



<p>Census data</p> <p>41 per cent of countries had census results that were disaggregated by age and sex for each enumeration area and were publicly accessible online</p>		<p>Disability in censuses</p> <p>100 per cent of censuses implemented in 2018 included questions on disability</p>	
<p>Migration in censuses</p> <p>100 per cent of censuses implemented in 2018 included questions on migration</p>		<p>Vital statistics</p> <p>55 countries generated and published annual vital statistics based on civil registration</p>	
<p>Support for the Sustainable Development Goals</p> <p>80 per cent of countries produced at least 5 of 17 UNFPA-prioritized Sustainable Development Goal indicators</p>		<p>Population projections</p> <p>48 per cent of countries generated publicly available population projections</p>	
<p>Development plans</p> <p>In 57 per cent of countries, national development plans explicitly integrated demographic dynamics</p>		<p>Small-area estimations</p> <p>13 countries generated and used small-area estimations</p>	

More results may be found at:

unfpa.org/data/results

78. UNFPA achievements at the country level in counting and accounting for everyone, everywhere in the pursuit of sustainable development include the following:

- (a) For the first time, real-time data for planning and policy formulation was generated from the Somali Health and Demographic Survey, with technical support from UNFPA;
- (b) In the absence of census data, UNFPA applied a geostatistical modelling approach to predict the population in Afghanistan;
- (c) The Parliament of Barbados approved the establishment of a population commission to integrate population dynamics into policies and programmes;

(d) For the first time, Kiribati conducted a demographic and social development indicator survey, with assistance from UNFPA and UNICEF;

(e) With UNFPA support, 15 countries prioritized ageing in their policies and programmes.

79. UNFPA global and regional initiatives were crucial in counting and accounting for everyone, everywhere in the pursuit of sustainable development. Under UNFPA leadership, the methodology for Sustainable Development Goal indicator 5.6.2 on laws and regulations that guarantee women's access to sexual and reproductive health care, information and education was finalized. UNFPA supported data availability for Sustainable Development Goal indicator 5.6.1 with nine new surveys. In 2018, UNFPA revised its strategy to support the 2020 census round. UNFPA is developing an open data platform to enable public access to population data. With support from UNFPA, the League of Arab States and ministers of social affairs from the Arab States endorsed a regional strategy on ageing.

80. Partnerships played an important role in counting and accounting for everyone, everywhere. UNFPA, the Department for International Development of the United Kingdom, and the Bill and Melinda Gates Foundation launched the Geo-Referenced Infrastructure and Demographic Data for Development, known as GRID. GRID is a multi-country initiative to facilitate the production, collection, use and dissemination of high-resolution population, infrastructure and other geo-referenced data.

81. UNFPA learned important lessons in counting and accounting for everyone, everywhere:

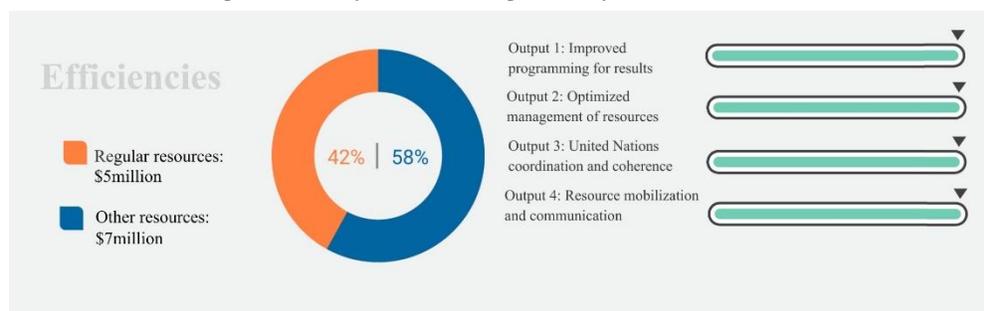
(a) The application of geographic information systems improves census quality and coverage;

(b) The hybrid census approach can complement a traditional census in inaccessible or insecure areas. This approach, which combines remote sensing technologies with other population data sources, is under way in Mozambique, Nigeria and Zambia, and has begun in the Democratic Republic of the Congo and South Sudan.

82. Challenges in counting and accounting for everyone, everywhere include conflicts and fragile contexts that hampered the viability of undertaking traditional censuses.

Organizational effectiveness and efficiency

83. UNFPA made progress in organizational effectiveness and efficiency to support the achievement of the three transformative results. UNFPA achieved 100 per cent of the targets for four outputs under organizational effectiveness and efficiency. Figure 13 shows the key efficiencies gained by UNFPA in 2018.

Figure 13: Key efficiencies gained by UNFPA in 2018**Surge deployment**

The turnaround time for deployment improved by 33 per cent between 2016 and 2018

**Lead time for recruitment**

The lead time for human resource recruitment decreased from 3.2 months in 2017 to 2.3 months in 2018

Partner assessments

UNFPA saved \$152,000 by conducting implementing partner micro-assessments jointly with other United Nations partners

**One human resource initiative**

The price per job classification decreased from \$220 to \$140 due to the one human resource initiative

Generic contraceptives

Over \$1.3 million was saved in 2018 through the use of generic contraceptives

**Implementation rate**

The proportion of non-core donor agreements expiring in a given year that have spent 95 per cent of the amount in the original agreement increased from 83 per cent in 2017 to 90 per cent in 2018

Stock-outs

122 stock-outs in 27 countries were averted through the bridging funding mechanism

**Improved programming for results**

84. In 2018, UNFPA strengthened programming for results. The evaluation by the Joint Inspection Unit of results-based management in the United Nations system concluded that UNFPA had fully mainstreamed results-based management at all levels.

85. UNFPA programmes at global, regional and country levels performed well. In 2018, 88 per cent of country programmes were rated as “good” performers and met the strategic plan target. In 2018, UNFPA met 90 per cent of the targets for its regional programmes and 92 per cent of the targets for its global programme.

86. Country programme evaluations conducted in 2018 found that the majority of country programmes were effective, and that all of them were relevant to the country context and the UNFPA strategic focus. Sixty-three per cent of UNFPA country programmes developed in 2018 integrated disability into their programmes. In 2018, UNFPA implemented 89 per cent of the evaluation recommendations. In 2018, UNFPA took steps to strengthen programming for results. For example, UNFPA is:

- (a) Conducting a development evaluation to improve its results-based culture;
- (b) Innovating results-based management by introducing a results-based management seal of recognition and results-based management fund initiatives;
- (c) Developing an action plan to improve the results-based management culture of UNFPA;
- (d) Updating the enterprise resource planning system;
- (e) Developing and updating corporate strategies and guidance in programme and operational areas, including “leaving no one behind”, reaching persons with disabilities, and gender.

87. The process of altering staff perceptions and practices to embrace and execute results-based management has been slower and more difficult in country offices without staff dedicated to monitoring and evaluation. UNFPA will further strengthen staff capacity in results-based management in the coming years.

Optimized management of resources

88. UNFPA improved its financial management. It obtained a clean external audit opinion (an unqualified opinion) in 2018. It also achieved a 78 per cent implementation rate for internal audit recommendations. UNFPA developed a “last mile audit concept” for countries in the UNFPA Supplies programme. In addition, it continues to strengthen its financial management performance monitoring process. In 2018, all UNFPA units completed an enterprise risk assessment, prepared action plans and responded to all critical and high risks.

89. With regard to the revised integrated budget, 2018-2021, UNFPA achieved a net reduction of \$11 million in the institutional budget component through a comprehensive review of resources, which focused on headquarters business units. The review enabled units to improve efficiencies, cohesiveness and synergies to respond to countries’ needs. This led to a net reduction of 25 institutional budget positions in headquarters and a merger of some business units.

90. UNFPA implemented a “bridge financing” mechanism, which accelerated the procurement of reproductive health commodities. In 2018, UNFPA operationalized the humanitarian response reserve mechanism to accelerate its humanitarian response. UNFPA provided bridge funding of \$1.5 million during the last quarter of 2018 for the operationalization of the reserve mechanism.

91. In 2018, UNFPA fully implemented its Global Programming System. This permitted faster submission and processing of funding requests from 1,247 implementing partners, 87 per cent of whom were paid in less than 15 days. The Global Programming System enabled the full automation of over 11,520 financial transactions; improved the efficiency of the transaction process; and reduced the risk of clerical and accounting errors. UNFPA also launched a policy on the management of programme supplies that contributed to more effective supply-chain management.

92. UNFPA strengthened its organizational response to sexual exploitation, abuse and harassment by: (a) certifying all managers on these issues; (b) establishing in all units office focal points in sexual exploitation, abuse and harassment; and (c) implementing the model policy on sexual harassment of the United Nations System Chief Executives Board for Coordination. UNFPA mainstreamed “protection from sexual exploitation and abuse” into the 2018 risk assessment and trained all staff on preventing sexual exploitation and abuse. UNFPA launched mandatory anti-fraud training for its staff and its implementing partners, and updated its policy on protection against retaliation.

93. UNFPA prioritized work on the harmonization and simplification of business practices within the United Nations system:

- (a) UNFPA, along with seven other United Nations organizations, signed a formal agreement for the mutual recognition of policies and procedures;
- (b) UNFPA continued to implement the harmonized approach to cash transfers for implementing partners, in collaboration with UNDP and UNICEF;
- (c) UNFPA, together with UNDP, the United Nations Capital Development Fund and UN-Women, launched anti-fraud training for staff;
- (d) UNFPA agreed to participate in the asset disposal auction system with the Office of the United Nations High Commissioner for Refugees;
- (e) UNFPA, along with UNDP, UNICEF and UN-Women, prepared an inter-agency review of the cost-recovery model, including options for adjustments;
- (f) UNFPA, in cooperation with UNDP and UNICEF, issued guidance on financial management for implementing partners;
- (g) UNFPA strengthened its partnership with United Nations Volunteers and employed 112 United Nations volunteers in 2018.

94. UNFPA is a climate-neutral organization. In 2017, UNFPA reduced per capita emissions by 0.6 tons of carbon dioxide equivalent. UNFPA, together with condom suppliers, reduced solid waste in condom production by more than 132,000 kilograms per month, saving more than 5 million kilowatt hours in 2018.

95. In 2018, UNFPA surge deployment increased by 50 per cent, compared to 2016. UNFPA reduced the overall vacancy rate from 15 per cent to 14 per cent. In 2018, UNFPA deployed 96 humanitarian specialists (66 per cent of whom were women) to 29 countries.

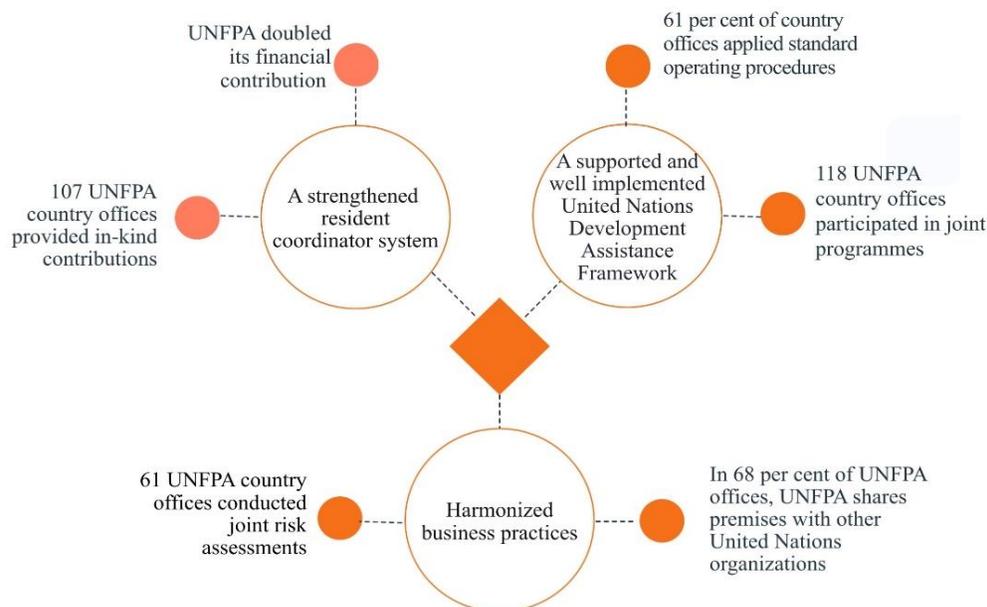
96. In 2018, UNFPA invested in leadership development, and introduced (a) managerial certification programmes; (b) team coaching and individual coaching for managers; and (c) decentralized learning and training design and delivery.

97. UNFPA faced the following challenges in managing human resources: (a) a high volume of staff movements due to the rotation exercise and the change-management process; (b) the length of time required to obtain government clearance for UNFPA representative positions; and (c) low interest for posts in non-family duty stations. To address these challenges, UNFPA will strengthen its leadership pool and develop a talent acquisition and sourcing strategy. It will also review policies that support mobility in some of the more challenging locations.

Increased contribution to United Nations system-wide results, coordination and coherence

98. UNFPA made significant contributions to United Nations system-wide results, coordination and coherence in 2018. Figure 14 below presents some of those contributions.

Figure 14: UNFPA contributions to United Nations system-wide results, 2018



99. Committed to collaboration and coherence, UNDP, UNFPA, UNICEF and UN-Women began implementing the common chapter of their strategic plans in 2018. Results and progress in the six areas of collaboration are summarized in the joint report (annex 8) on the implementation of the common chapter.

100. UNFPA continued to support the implementation of the business operations strategy of the United Nations Sustainable Development Group. The Evaluation Office of UNFPA served as co-convenor of the interest group on decentralized evaluation functions within the United Nations Evaluation Group.

101. UNFPA continued to strengthen the resident coordinator system. UNFPA was one of first organizations to double its financial contribution to support the reinvigorated system. UNFPA demonstrated the value of working together at the country level:

- (a) Under UNFPA leadership, an inter-agency working group was established in Kenya to support the country's 2019 population and housing census. UNFPA serves as the lead agency for the implementation of three United Nations Development Assistance Framework outcomes in Kenya;
- (b) In the Regional Office for Latin America and the Caribbean, UNFPA, together with other United Nations organizations, initiated nine joint long-term agreements, which led to a 20 per cent reduction in administrative costs;
- (c) Under UNFPA leadership, the first joint annual work plan for the operationalization of the United Nations Development Assistance Framework in Malawi was developed;

(d) UNFPA, along with UNDP, UN-Women and WHO, jointly raised funds for disability programmes in Nepal in 2018. UNFPA also co-chaired the inter-agency working group on harmful practices, which raised \$250,000 in 2018;

(e) UNFPA, as chair of the United Nations theme group on young people, developed a three-year joint United Nations framework for young people in the State of Palestine;

(f) In the Philippines, UNFPA led the operationalization of the common chapter of the strategic plan by identifying initiatives to accelerate its implementation.

Enhanced communication, resource mobilization and partnerships for impact

102. In 2018, UNFPA recorded total contributions of \$1,249 million, the highest amount of contributions to date. UNFPA raised \$379 million for core resources, surpassing its target of \$350 million. UNFPA surpassed its target for co-financing resources by 166 per cent, reaching a total of \$870 million. Overall, 123 donors contributed to UNFPA in 2018.

103. To mobilize more resources, UNFPA established the Humanitarian Action Thematic Fund in 2018. UNFPA also introduced resource mobilization targets at regional and country levels.

104. UNFPA increased its partnerships with the private sector, foundations, academia and other civil society entities, in accordance with its strategic partnerships strategy. UNFPA introduced partnership and coordination, including South-South and triangular cooperation, as a mode of engagement for programming. In 2018, UNFPA established 279 new partnerships for implementing UNFPA-supported programmes, including partnerships with 192 non-governmental organizations.

105. UNFPA signed 59 new agreements with private-sector partners in 2018. UNFPA received \$24.4 million in contributions from the private sector, exceeding its target of \$17 million. In 2018, UNFPA reached 72 million people through partnerships that ensured high visibility for the organization. UNFPA launched the first individual giving strategy and implemented two individual giving campaigns, one for Bangladesh and the other for Yemen.

106. UNFPA continued to expand its global media outreach. In 2018, UNFPA was mentioned 23,978 times in the media.

C. Looking ahead

107. The present report reflects significant progress in 2018, yet the world is still far from perfect for women and young people, especially adolescent girls. Going forward, UNFPA will continue to seek innovative solutions, use high-quality population data to make the invisible visible and reach those furthest behind, and broaden and strengthen its partnerships. This includes strengthening collaboration with its United Nations partners to accelerate progress towards the achievement of the three transformative results and joint commitments under the common chapter of the strategic plan, to contribute together to the realization of the 2030 Agenda for Sustainable Development and a world where no woman or girl is left behind.