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UNFPA – Country programmes and related matters

UNITED NATIONS POPULATION FUND

Draft country programme document for South Africa

Proposed indicative UNFPA assistance: \$12 million: \$9.5 million from regular resources and \$2.5 million through co-financing modalities and/or other resources, including regular resources

Programme period: Five years (2013-2017)

Cycle of assistance: Fourth

Category per decision 2007/42: B

Proposed indicative assistance (in millions of \$):

Strategic Plan Outcome Area	Regular resources	Other	Total
Maternal and newborn health	2.3	0.7	3.0
Prevention services for HIV and sexually transmitted infections	2.4	0.8	3.2
Gender equality and reproductive rights	2.0	0.7	2.7
Population dynamics	2.0	0.3	2.3
Programme coordination and assistance	0.8	-	0.8
Total	9.5	2.5	12.0



I. Situation analysis

1. The population of South Africa was estimated at 50.59 million in 2011. Young people aged 14-35 accounted for 42 per cent of the total population, and women accounted for 52 per cent. A middle-income country, South Africa is well-off in economic terms. The annual economic growth rate was estimated at 3.1 per cent in 2011. Nevertheless, approximately 50 per cent of the population lives below the poverty line.

2. With a Gini coefficient of 0.7, the country has one of the highest levels of inequality in the world. Racial and gender disparities persist, as do disparities between rural and urban areas. The unemployment rate is 23.9 per cent, with young people accounting for over 70 per cent of the unemployed. Although government policies are progressive, implementation is weak, due to the limited skills of public civil servants. These limitations are the result of a previously disjointed educational and skills-development system.

3. The total fertility rate declined from 2.92 children per woman in 2001 to 2.35 children per woman in 2011. This is attributed to wider access to information and services on family planning. The contraceptive prevalence rate is 65 per cent. The maternal mortality ratio has more than doubled in recent years, increasing from 150 maternal deaths per 100,000 live births in 1998 to 310 maternal deaths per 100,000 live births in 2011. Between 2008 and 2010, 40.5 per cent of maternal deaths were attributed to HIV infection complicated by tuberculosis and pneumonia. From 2005-2007, there has been a 44 per cent increase in deaths due to abortion.

4. Over 95 per cent of deliveries take place in health institutions. Failure to follow standard protocols and poor initial assessments account for 38.4 per cent of maternal deaths. The teenage pregnancy rate declined from 65 per 1,000 in 2001 to 54 per 1,000 in 2008.

5. HIV and AIDS pose serious health and development challenges. A number of factors are driving the epidemic, including multiple concurrent sexual partnerships, the large number of sero-discordant relations, the low rates of male circumcision and inconsistent condom use, linked to underlying sociocultural and gender inequalities. HIV incidence fell by more than 25 per cent from 2001-2009, due to increased access to condoms and to education about HIV, as well as to efforts to prevent unintended pregnancies. Approximately 8.7 per cent of young people aged 15-24 are living with HIV. The prevalence of HIV among pregnant women aged 15-19 is 14.0 per cent.

6. Gender inequality, including gender-based violence, remains high, despite the commitment of the Government to international agreements and the existence of gender-related policies and implementation plans. Sociocultural norms and practices that undermine women's rights fuel gender inequality. There is a high correlation between sexual and gender-based violence, high levels of HIV prevalence among women, and maternal morbidity and mortality.

7. South Africa formulated a 20-year national development plan (Vision for 2030), which seeks to reduce poverty and inequality. However, the limited availability and utilization of high-quality, reliable socioeconomic data undermines the nation's ability to achieve this vision. This is due to weak technical capacity in demographic analysis and the limited integration of population concerns into development programmes. The Government recently established a ministerial portfolio on performance monitoring and evaluation. There is a need to strengthen national capacity to enable the ministry to carry out its mandate.

II. Past cooperation and lessons learned

8. The third country programme, 2007-2012, expanded strategic partnerships and enhanced national ownership of the programme. The 2009 United Nations Evaluation Group report

highlighted the need to reposition the United Nations and better coordinate support to South Africa as a middle-income country. To this end, UNFPA has sought to enhance its capacity and redefine its programming approaches, including through greater collaboration with other United Nations organizations and development partners.

9. In the area of sexual and reproductive health, UNFPA, in collaboration with the World Health Organization, supported: (a) the review of guidelines for contraception and for screening cervical cancer; (b) capacity-building among health-care workers to implement sexual and reproductive health policies; (c) the development of a national training curriculum on family planning; and (d) the training of youth leaders to create demand for sexual and reproductive health care, including HIV counselling and testing, and services to prevent unintended pregnancies and alcohol abuse. Further capacity-building is required to improve: (a) the implementation of policy guidelines and protocols; (b) the integration of sexual and reproductive health and HIV services; and (c) behaviour change communication efforts, particularly for adolescents and young people.

10. UNFPA supported universities to develop and undertake training programmes in population studies at the national level, and to address gaps in technical capacity at provincial and local levels. There is a need to: (a) expand internship programmes that introduce young people to the formal employment sector; (b) build on advocacy efforts and technical assistance to Statistics South Africa to conduct the 2011 census, by supporting data analysis and utilization to inform policy implementation; and (c) generate evidence of the 'demographic dividend' to promote the engagement of young people in a national discourse on development. There is also a need to continue South-South cooperation on population and development to support the key role played by South Africa in the region and in international forums.

11. In the area of gender equality, UNFPA supported the newly established Ministry for Women, Children and People with Disabilities to develop the national gender strategy, 2011-2014, and the national gender equality policy. Technical support is needed to further facilitate the implementation of these policy frameworks. The programme helped to generate evidence on the prevalence of harmful traditional practices. Among senior traditional leaders in the Eastern Cape province, the programme helped to develop skills to prevent gender-based violence. Due to prevailing sociocultural practices, there is a need to expand capacity-building efforts to reach traditional leadership structures in additional provinces. National policy dialogue on male involvement in reproductive health services and efforts to prevent gender-based violence are also needed.

12. Lessons learned from the third country programme evaluation include: (a) the importance of community-level partnerships in sustaining pilot programmes at the Government level; and (b) the establishment of the National Coordinating Forum on the country programme and similar structures at the provincial level in order to enhance national ownership, integrated programme delivery and mutual accountability.

III. Proposed programme

13. UNFPA and the Government formulated this programme through a multi-stakeholder consultative process drawing from the United Nations – Government of South Africa Strategic Cooperation Framework, 2013-2017 outcome areas. The programme is aligned with the UNFPA revised strategic plan, 2008-2013; Vision for 2030; and the National Population Policy+10 Review. South Africa has a broad resource base, presenting an opportunity to leverage government resources to achieve programme results. UNFPA and the Government will implement the programme in collaboration with other United Nations organizations, development partners and civil society. UNFPA will continue to work at the national and subnational levels with targeted

interventions in eight of the 52 districts that have the least progressive indicators on poverty, maternal mortality, HIV/AIDS prevalence, and gender-based violence, including sexual violence and harmful cultural practices.

14. The goal of the proposed programme is to contribute to reducing poverty and inequalities by: (a) supporting interventions to improve the quality and utilization of sexual and reproductive health services, including services for maternal health, family planning and HIV prevention efforts; (b) supporting programming that is responsive to population dynamics, with an emphasis on environmental sustainability, rural women, women in informal urban settlements, adolescents and unemployed young people; (c) advancing gender equality and reproductive rights; and (d) promoting regional development and international cooperation through South-South collaboration.

Maternal and newborn health

15. Output 1: Improved quality of emergency obstetric care, family planning and HIV-prevention services in health facilities and communities in targeted districts. To achieve this output, the programme will: (a) build the technical capacity of health-care workers to apply standard reproductive health protocols; (b) build the capacity to implement prong 1 (primary prevention of HIV) and prong 2 (prevention of unintended pregnancies among HIV-infected women) of the prevention of mother-to-child transmission programme; (c) partnerships to provide training and enhance institutional capacity to deliver emergency obstetric care; (d) develop the skills of health-care providers to provide comprehensive sexual reproductive health services, with a focus on family planning and the prevention of HIV; and (e) advocate a review of the midwifery training programme.

Prevention services for HIV and sexually transmitted infections

16. Output 1: Strengthened capacity of civil society organizations to improve social and behaviour change communication to promote safe sexual behaviour among key populations. In partnership with the co-sponsors of the Joint United Nations Programme on HIV/AIDS, this output will support civil society to: (a) promote gender-sensitive and youth-friendly sexual and reproductive health programming; (b) incorporate sociocultural issues that contribute to HIV transmission in behaviour change communication programmes; (c) support comprehensive condom programming; and (d) partner with the media and civil society to mobilize the community to prevent unintended pregnancies and HIV.

Gender equality and reproductive rights

17. Output 1: Strengthened capacity of national and provincial departments and district municipalities to implement policies and programmes to prevent gender-based violence, including sexual violence. The programme will achieve this output by: (a) enhancing the capacity of national gender mechanisms to implement policies to prevent gender-based violence; (b) expanding prevention programmes that address sociocultural practices through male involvement in activities relating to HIV and gender-based violence; and (c) supporting, through a joint programme with the United Nations Children's Fund, the recently established National Council Against Gender-Based Violence in efforts to advocate, coordinate and implement the 365 Days National Action Plan to End Gender Violence.

Population dynamics

18. Output 1: Strengthened capacity of provincial departments and district municipalities to integrate population dynamics, especially youth development, HIV/AIDS and environmental sustainability,

into development plans and programmes. The programme will achieve this output by: (a) supporting curriculum development and training to enhance provincial and local capacity to integrate population priorities; and (b) partnering with the International Labour Organization to build the capacity of young people and youth-led institutions to advocate the consideration of youth issues in the development of policies and programmes.

19. Output 2: Strengthened government institutional capacity to generate, analyse and utilize data to inform, monitor and evaluate policy and programme implementation. The programme will achieve this output by: (a) supporting the generation, dissemination and use of evidence to inform interdepartmental policy and programme implementation in the areas of gender, sexual and reproductive health and the prevention of HIV; and (b) strengthening institutional capacity to analyse and use census data and to carry out monitoring and evaluation.

IV. Programme management, monitoring and evaluation

20. The national coordination forum on the UNFPA country programme will coordinate programme implementation, monitoring and reporting, under the guidance of the Inter-Ministerial Committee on the Population Policy. At provincial and district levels, provincial population units will coordinate the programme in collaboration with the offices of provincial premiers and municipal mayors. UNFPA and the Government will monitor programme implementation through the United Nations – Government of South Africa Strategic Cooperation Framework, 2013-2017.

21. The UNFPA country office includes staff funded from the UNFPA institutional budget who perform management and development-effectiveness functions. UNFPA will allocate programme resources for staff members who provide technical and programme expertise, as

well as associated support, to implement the programme.

22. National execution continues to be the preferred implementation arrangement for UNFPA. Implementing partners will be carefully selected based on their ability to deliver high-quality programmes. UNFPA will also continuously monitor partner performance and periodically adjust implementation arrangements as necessary. The country office will ensure that the appropriate risk analysis is performed in conformity with the harmonized approach to cash transfers.

23. In the event of an emergency, UNFPA may, in consultation with the Government, reprogramme activities, especially life-saving measures, to better respond to emerging issues.

RESULTS AND RESOURCES FRAMEWORK FOR SOUTH AFRICA

National development priority or goal: a long and healthy life for all South Africans UNDAF outcome: strengthened government capacity to accelerate progress towards the sustainable achievement of the health-related Millennium Development Goals (on sexual and reproductive health, maternal, neonatal and child health, health emergencies, health systems and non-communicable diseases) UNDAF outcome indicators: (a) maternal mortality ratio; and (b) prevalence of HIV among young people				
UNFPA strategic plan outcome	Country programme outputs	Output indicators, baselines and targets	Partners	Indicative resources
Maternal and newborn health <u>Outcome indicator:</u> <ul style="list-style-type: none"> Maternal mortality ratio Baseline: 310 maternal deaths per 100,000 live births (2009) Target: 270 maternal deaths per 100,000 live births (2014)	<u>Output 1:</u> Improved quality of emergency obstetric care, family planning and HIV-prevention services in health facilities and communities in targeted districts	<u>Output indicators:</u> <ul style="list-style-type: none"> Number of health-care workers trained to deliver high-quality maternal and emergency obstetric care Baseline: 263; Target: 563 <ul style="list-style-type: none"> Number of facilities with trained health-care workers delivering 80 per cent of the comprehensive emergency obstetric care, HIV prevention and sexual and reproductive health services package in eight supported districts Baseline: 2; Target: 16	Department of Health; provincial governments	\$3 million (\$2.3 million from regular resources and \$0.7 million from other resources)
Prevention services for HIV and sexually transmitted infections <u>Outcome indicator:</u> <ul style="list-style-type: none"> HIV prevalence in youth (15-24 years) Baseline: 8.7% (2008); Target: 4.4% (2016)	<u>Output 1:</u> Strengthened capacity of civil society organizations to improve social and behaviour change communication to promote safe sexual behaviour among key populations	<u>Output indicators:</u> <ul style="list-style-type: none"> Number of organizations with the capacity to integrate sexual and reproductive health and HIV services for young people and populations who are at risk Baseline: 3; Target: 10 <ul style="list-style-type: none"> Number of young people reached through the social behavioural change communication programme Baseline: 1,500; Target: 5,000	National AIDS Council; provincial governments Civil society; institutions of higher learning	\$3.2 million (\$2.4 million from regular resources and \$0.8 million from other resources)
National development priority or goal: all people in South Africa are safe and feel safe UNDAF outcome: strengthened capacity of State systems to provide access to justice and social welfare services for victims, survivors, and those at risk of violence, abuse and exploitation UNDAF outcome indicator: incidence of sexual offences. Baseline: 132.4/100,000 people (2010); Target: 122/100,000 people (2017)				
Gender equality and reproductive rights <u>Outcome indicator:</u> <ul style="list-style-type: none"> Number of policies and mechanisms advancing gender equality and reproductive rights supported by UNFPA Baseline: 3; Target: 7	<u>Output 1:</u> Strengthened capacity of national and provincial departments and district municipalities to implement policies and programmes to prevent gender-based violence, including sexual violence	<u>Output indicators:</u> <ul style="list-style-type: none"> Number of organizations with the capacity to implement policies, advocacy efforts and programmes that seek to prevent gender-based violence. Baseline: 2; Target: 7 <ul style="list-style-type: none"> Number of district municipalities in UNFPA-supported provinces offering at least 80 per cent of the package of preventative services to combat gender-based violence. Baseline: 1; Target: 8	Departments of: Health; Local Government and Traditional Affairs; Social Development; and Women, Children and People with Disabilities; National Youth Development Agency; civil society	\$2.7 million (\$2 million from regular resources and \$0.7 million from other resources)

National development priority or goal: an efficient, effective and development-oriented public service and empowered, fair and inclusive citizenship UNDAF outcome: strengthened national capacity to implement policies aimed at promoting decent work for youth, women, persons with disabilities and other vulnerable groups UNDAF outcome indicator: unemployment rate. Baseline: 23.9% (2011); Target: 18.9% (2017)				
UNFPA strategic plan outcome	Country programme outputs	Output indicators, baselines and targets	Partners	Indicative resources
Population dynamics <u>Outcome indicator:</u> <ul style="list-style-type: none"> Number of UNFPA-supported government development plans and poverty reduction strategies that address population dynamics and its interlinkages with the multisectoral needs of young people, sexual and reproductive health, gender equality and sustainable development and poverty reduction Baseline: 7; Target: 15	<u>Output 1:</u> Strengthened capacity of provincial departments and district municipalities to integrate population dynamics, especially youth development, HIV/AIDS, and environmental sustainability into development plans and programmes	<u>Output indicators:</u> <ul style="list-style-type: none"> Number of individuals trained to integrate population dynamics and its interlinkages into development planning and programming Baseline: 400; Target: 1,500	District municipalities; national and provincial departments Universities	\$2.3 million (\$2 million from regular resources and \$0.3 million from other resources)
	<u>Output 2:</u> Strengthened government institutional capacity to generate, analyse and utilize data to inform, monitor and evaluate policy and programme implementation	<u>Output indicator:</u> <ul style="list-style-type: none"> Number of institutions that produce and utilize high-quality data to monitor, evaluate and inform youth development, gender, sexual and reproductive health and HIV-prevention policies and programmes Baseline: 5; Target: 10	National Youth Development Agency; national, provincial and municipal governments; Statistics South Africa Research institutions	Total for programme coordination and assistance: \$0.8 million from regular resources