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**UNFPA – Annual report of the Executive Director**

**United Nations Population Fund**

**Progress in implementing the UNFPA strategic plan,  
2022–2025**

**Report of the Executive Director**

*Summary*

This report analyses the progress made in achieving the results of the UNFPA strategic plan, 2022–2025, during the first year of its implementation. It should be read in conjunction with the statistical and financial review, 2022 (DP/FPA/2023/4 (Part I)/Add.1), which provides details of UNFPA expenditures.

In 2022, UNFPA generated momentum to accelerate the achievement of the three transformative results of its strategic plan and to scale up the implementation of the Programme of Action of the International Conference on Population and Development. The report also 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 2022: DP/FPA/2023/4 (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, 2022–2025, during the first year of its implementation.

*Note: The present document was processed in its entirety by UNFPA.*



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

## I. Overview

1. This report analyses the progress made in achieving the results of the UNFPA strategic plan, 2022-2025, during the first year of its implementation. The strategic plan, 2022-2025, is the second of three consecutive strategic plans designed to guide UNFPA in contributing to the achievement of the Sustainable Development Goals of the 2030 Agenda for Sustainable Development and in accelerating progress to implement the Programme of Action of the International Conference on Population and Development (ICPD). The subsequent strategic plan will cover the period 2026-2029.
2. UNFPA began the implementation of its current strategic plan in 2022. Upon adoption of the strategic plan, UNFPA pledged to accelerate the achievement of the three transformative results: (a) ending the unmet need for family planning; (b) ending preventable maternal deaths; and (c) ending gender-based violence and all harmful practices, including female genital mutilation and child, early, and forced marriage.
3. In 2022, UNFPA generated the momentum necessary at all levels to accelerate the achievement of the transformative results and the implementation of the ICPD Programme of Action. The strategic plan, 2022-2025, provided an important blueprint for this acceleration. This momentum also helped to influence the acceleration of the 2030 Agenda for the Sustainable Development. While the available data in 2022 were not sufficient to fully analyse and understand the pace of acceleration to achieve the three transformative results at the global level, UNFPA is nevertheless concerned that, at the current rate of progress, the world may not achieve the three transformative results by 2030.
4. The year 2022 was a “year of extremes” that impacted the lives of millions of people, especially women and young people, in terms of conflict, the effects of climate change, the coronavirus disease (COVID-19) pandemic and economic turmoil. In 2022, UNFPA scaled up its humanitarian support by responding to 60 emergencies and providing lifesaving services to over 30 million women and young people. In Ukraine alone, over a third of all births in 2022 – some 68,500 – were delivered at one of the 51 maternity facilities supported by UNFPA (see annex 2).
5. In 2022, the United Nations Foundation honoured UNFPA with its United Nations Heroes Award in recognition of its contributions on the frontlines to sexual and reproductive health and rights. UNFPA was fully compliant in mainstreaming, throughout the organization, gender equality and the empowerment of women, having met or exceeded all the criteria of the United Nations system-wide Action Plan on Gender Equality and Women’s Empowerment.
6. Figure 1 below highlights the key results achieved in 2022.

**Figure 1.**  
**Key results achieved in 2022 in UNFPA programme countries**



**More results may be found at:**  
[unfpa.org/data/results](https://unfpa.org/data/results)

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

7. In 2022, UNFPA made substantial progress in achieving the six interconnected strategic plan outputs,<sup>1</sup> which highlight UNFPA efforts to accelerate the achievement of the transformative results and the ICPD Programme of Action.

<sup>1</sup> See the UNFPA strategic plan, 2022-2025 (DP/FPA/2021/18), pages 9-11.

8. All the strategic plan outputs demonstrate achievements of over 80 per cent. UNFPA global and regional programmes demonstrated a high level of achievement in 2022; they played an important catalytic role in creating a culture of acceleration to achieve the strategic plan outputs (annex 4).

9. UNFPA continued to play a leading role in population and sustainable development efforts by harnessing the power of data, and by investing in adolescents and youth, especially adolescent girls. UNFPA efforts contributed to the following results:

(a) As of 2022, 86.1 per cent of countries conducted at least one population and housing census in the last 10 years;

(b) During the 2016-2020 period, 60.4 per cent of countries had birth registration data that was at least 90 per cent complete;

(c) As of 2021, 75.4 per cent of births of children under 5 years of age were registered with a civil authority;

(d) In 2022, 6 million girls accessed life-skills programmes;

(e) In 2022, 61 per cent of countries engaged young people in the formulation and implementation of policies and programmes.

10. The evaluation of UNFPA support to population dynamics and data concluded that, from 2014 to 2022, UNFPA provided relevant and timely support to population data, population dynamics, and population and development. The formative evaluation of UNFPA support to adolescents and youth found that UNFPA adolescent and youth programmes have strengthened national agendas and commitments to the Sustainable Development Goals and broadened the discourse around adolescent and youth needs, outcomes and rights. UNFPA is committed to learning from and implementing the recommendations in these and other evaluations.

11. In 2022, UNFPA made several organizational adjustments to accelerate the achievement of the three transformative results and the implementation of the ICPD Programme of Action. In 2022, UNFPA also started a process to review the implementation of the ICPD Programme of Action as part of the thirtieth anniversary of the adoption of the ICPD Programme of Action (ICPD30). Organizational adjustments include:

(a) Revamping the country programming process to focus on accelerating progress to achieve the three transformative results;

(b) Improving resource management functions by establishing a resource management committee;

(c) Strengthening supply chain management functions by establishing a supply chain management unit;

(d) Migrating key business functions to a Quantum-based, joint enterprise resource planning platform. By the end of 2022, 50 per cent of the expected business functions were automated;

(e) Moving from funding to funding and financing by operationalizing initiatives, such as the strategic investment facility, a UNFPA Supplies Partnership matching fund, the scaling up of investment cases to achieve the transformative results, and strengthening collaboration with international financial institutions;

(f) Improving organizational culture, performance and foresight functions, including efforts to ensure that staff feel safe and empowered to speak-up;

(g) Strengthening the institutionalization of the principles of diversity, equity and inclusion. In 2022, UNFPA received EDGE certification, a global assessment methodology and certification standard for workplace diversity, equity and inclusion;

(h) Strengthening the accountability of UNFPA and its partners to ensure protection from sexual exploitation and abuse, and sexual harassment. In 2022, 81 per cent of UNFPA implementing partners were assessed on the prevention of sexual exploitation and abuse;

(i) Launching a new UNFPA human resources strategy, "People Strategy 2030", to ensure that UNFPA has the requisite skills to accelerate the achievement of the three transformative results;

(j) Continuing to strengthen the humanitarian work and capacity of UNFPA through the establishment of the Humanitarian Response Division.

12. UNFPA and its partners succeeded in making these organizational adjustments and in achieving significant development results despite a number of challenges: (a) millions of women and young people suffered due to climate change, conflicts, the COVID-19 pandemic and economic crises; (b) some parts of the world continued to witness pushback on reproductive rights; and (c) in some parts of the world, women and girls were denied their fundamental right to education. Against these challenges, the global community continued to reinforce the importance of the mandate of UNFPA to protect the rights and choices of women and young people.

13. The first-year implementation of the UNFPA strategic plan, 2022-2025, revealed several lessons learned that UNFPA is taking into account, including: (a) the challenge to operationalize the strategic plan accelerators in country programmes in order to make them more impactful; (b) the importance of continued joint accountability in order to promote stronger collaboration, joint planning and implementation, and more effectiveness and efficiency in the context of United Nations development system reforms; (c) the criticality of an integrated approach to accelerate the transformative results, in order to rally all sectors and development partners; and (d) the significance of building resilient systems, including demographic resilience, to enable societies to prevent, respond, and advance amid unfolding megatrends and turbulence.

14. UNFPA will continue to: (a) scale-up partnerships, especially with other United Nations organizations, women-led and youth-led organizations, and other stakeholders; (b) integrate sexual and reproductive health and the ICPD Programme of Action into broader development policies, programmes and frameworks, including the United Nations Sustainable Development Cooperation Frameworks; and (c) continue the focus on building resilient systems and support the factoring of population dynamics into acceleration efforts to achieve the three transformative results and the ICPD Programme of Action

## **II. The 2022 context**

15. The year 2022 was a “year of extremes” that impacted the lives of eight billion people. The COVID-19 pandemic, conflicts, the effects of climate change, and economic turmoil brought misery to many people. Women and young people bore the brunt of it.

16. In 2022, the world witnessed the highest number of violent conflicts since 1945, with more than 103 million people forcibly displaced worldwide, including a large number of women and young people.

17. The world also entered the third year of the COVID-19 pandemic. At least 10,000 people worldwide die from COVID-19 every week, and global inequities continue to hamper the response. Only 1 in 5 people in low-income countries have been vaccinated. An additional 75 million to 95 million people lived in extreme poverty in 2022, compared to pre-pandemic levels.

18. The global economic outlook deteriorated throughout 2022. In several UNFPA programme countries, economic recovery was at risk due to: (a) inflation; (b) rising interest rates; (c) increasing debt burdens; (d) competing priorities; and (e) limited fiscal space. Given this context, many countries experienced challenges in prioritizing health and social interventions.

19. The conflict in Ukraine reduced global economic growth by 0.9 percentage points, and the risks for women and girls increased twofold. Numerous women and young people could not access sexual and reproductive health services, including 80,000 women of reproductive age.

20. Climate change, which acts as a “crisis multiplier”, exacerbated these situations with increased heat waves, droughts and floods that affected billions of people worldwide, including women and young people.

21. Funding and financing for sexual and reproductive health and rights were also at risk. The economic fallout from COVID-19 and the conflict in Ukraine, together with inflation and high energy prices, affected the prioritization of resources available for sexual and reproductive health and rights.

22. The reproductive rights of women and girls and marginalized populations were threatened, often by the rise in populism. The negative implications of the use of digital technologies to harm people, and their disproportionate impact on women and girls, have proliferated. Misinformation and hate speech have fuelled social instability.

23. These conditions have jeopardized the progress of the 2030 Agenda for Sustainable Development. The world is off track to achieve, by 2030, universal health coverage, gender equality and several other targets of the Sustainable Development Goals.
24. The year 2022 also witnessed a demographic milestone when global population reached 8 billion on 15 November 2022. This resulted from improvements in public health that lowered the risk of death and increased life expectancy.
25. Population trends continued with unparalleled demographic diversity. World population continues to grow, but at a much slower pace. More countries face below-replacement fertility and ageing populations, with two thirds of people living in a country or area with 2.1 or fewer births per woman. Others, mostly low-income countries, have youthful and growing populations. International migration had important impacts on population trends in some countries.
26. Efforts in 2022 to increase access to sexual and reproductive health and reproductive rights resulted in several important milestones:
- (a) Fourteen Governments made commitments to FP2030, the global partnership centred on family planning, including at the 2022 International Conference on Family Planning held in Pattaya, Thailand;
  - (b) The global community made key commitments at the twenty-seventh session of the Conference of the Parties to the United Nations Framework Convention on Climate Change (COP27) that are critical for women and young people;
  - (c) The global community identified key strategies to enhance demographic resilience at the Sixth Global Symposium on Low Fertility and Ageing held in Seoul, the Republic of Korea;
  - (d) At the Africa Regional Forum on Sustainable Development held in Kigali, Rwanda, the Economic Commission for Africa and the African Union adopted an outcome document (ECA/RFSD/2022/6) on gender equality and women's empowerment in Africa;
  - (e) The year 2022 marked the seventh anniversary of the adoption of Security Council resolution 2250 on youth, peace and security. In 2021 and 2022, three UNFPA programme countries adopted youth, peace and security frameworks as a result of joint efforts among United Nations organizations;
  - (f) The United Nations Human Rights Council adopted six thematic resolutions containing explicit language to accelerate the achievement of the three transformative results;
  - (g) The General Assembly adopted resolution 77/196 on the intensification of efforts to end obstetric fistula. UNFPA continued to lead the global campaign to end fistula.

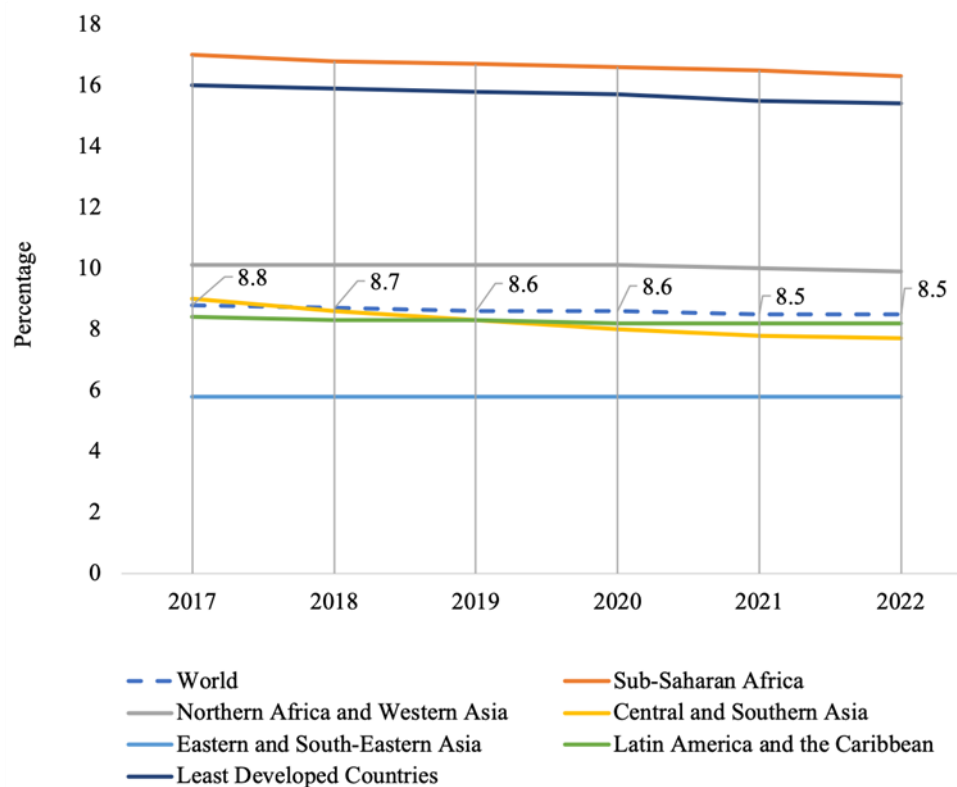
### III. Results achieved during 2022

#### A. Status of the achievement of the strategic plan outcomes

##### **Outcome 1. By 2025, the reduction in the unmet need for family planning has accelerated**

27. The unmet need for family planning for any method decreased by 20 per cent worldwide since the adoption of the ICPD Programme of Action in 1994. With regard to the least developed countries, which are important UNFPA programme countries, the unmet need for family planning for any method decreased by 28 per cent during the same period. However, since 2021, the world's unmet need for family planning for any method has remained at 8.5 per cent (see figure 2).
28. Between 2017 and 2022, Central and Southern Asia reported the highest rate of decline at the regional level with regard to the unmet need for family planning. This is noteworthy because in 2018, UNFPA prioritized the unmet need for family planning as one of the three transformative results of its strategic plan. Since 2017, the countries included in the UNFPA Supplies Partnership (48 countries with the highest rates of unmet need for family planning), reduced their collective unmet need by 5 per cent.
29. The slow pace in reducing the unmet need for family planning can be attributed to a number of factors, including: (a) population growth, which increases the number of women of reproductive age; (b) limited access to and choice of contraceptives, especially in low-income countries; (c) cultural, religious and social norms; (d) gender inequalities that limited women's autonomy regarding their reproductive choices; (e) the lack of favourable legal frameworks; and (f) the COVID-19 pandemic.

**Figure 2.**  
**Percentage of women of reproductive age who have an unmet need for family planning, 2017-2022**



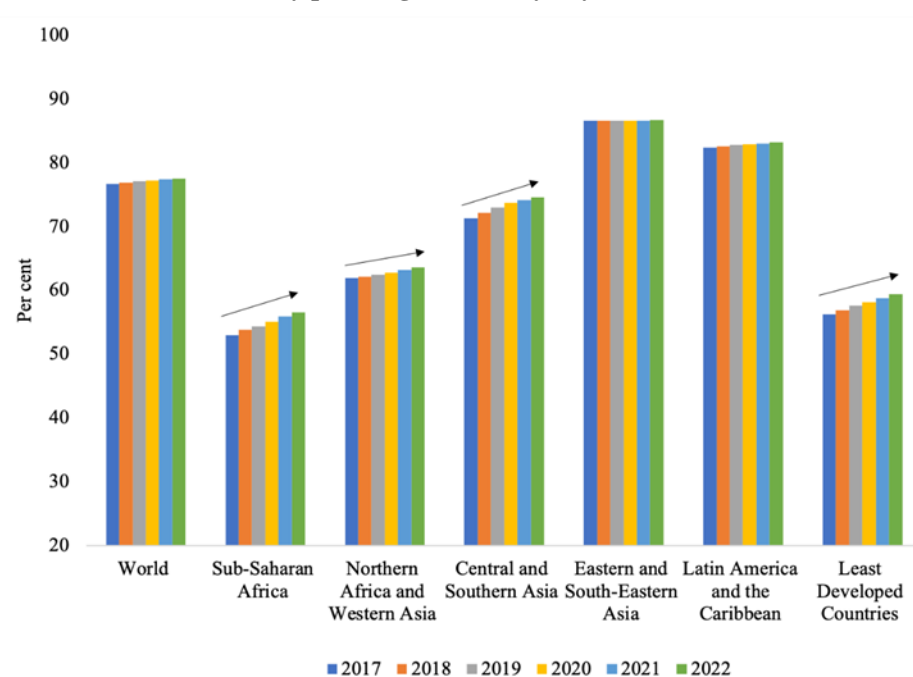
Source: Estimates and Projections of Family Planning Indicators, 2022. Department of Economic and Social Affairs, United Nations

30. Globally, among women who want to avoid pregnancy, 77 per cent used modern contraceptive methods. Regions with the highest proportions of modern contraceptive use among women who want to avoid pregnancy are Eastern and South-Eastern Asia (87 per cent), Australia and New Zealand (85 per cent), Latin America and the Caribbean (83 per cent), and Europe and Northern America (80 per cent).

31. Since 2017, women in the least developed countries who have had their need for family planning satisfied with modern methods have increased significantly. Sub-Saharan Africa experienced the largest increase in the percentage of demand for family planning satisfied by modern methods, which rose by 3.6 percentage points, from 53 per cent in 2017 to 56.6 per cent in 2022.



**Figure 3.**  
**Demand for family planning satisfied by any modern method**



Source: Estimates and Projections of Family Planning Indicators, 2022. Department of Economic and Social Affairs, United Nations

32. In 2022, UNFPA and its partners made significant strides in financing reproductive health commodities and in accessing and utilizing contraceptives. Twenty-five Governments pledged to spend over \$14 million in 2023 on quality-assured reproductive health commodities, through compact agreements of the UNFPA Supplies Partnership.

33. With the introduction in 2022 of the UNFPA Supplies Partnership matching fund, UNFPA awarded \$3.4 million in matching funds to five countries. This leveraged an additional \$2.6 million in domestic financing for reproductive health commodities.

34. In addition, several countries made commendable efforts to accelerate progress in reducing the unmet need for family planning:

(a) In Bangladesh, with the operationalization of the five-year national family planning strategy and electronic logistics management system, 99.9 per cent of service delivery points of UNFPA-supported districts reported no stock-outs of contraceptives;

(b) In the Philippines, among girls who participated in an innovative model for out-of-school comprehensive sexuality education, there was a 16 per cent increase in the use of family planning methods. In 2022, the Government of the Philippines allocated \$1.1 million to train teachers in in-school comprehensive sexuality education;

(c) In Bolivia, UNFPA signed agreements with 97 municipal governments, representing 28 per cent of all municipalities in the country, to guarantee resources to secure the availability of at least five contraceptives;

(d) In Indonesia, the Government established South-South centres of excellence for training in rights-based family planning. The centres serve 60 countries in the Asia and the Pacific and Africa regions, and, as of 2022, have trained 10,000 health workers and 150 religious leaders;

(e) In 2022, over 370,000 new contraceptive users were reported in nine countries that were part of the Sahel Women's Empowerment and Demographic Dividend Project. This was a result of the

implementation of community-based interventions to distribute contraceptives and deploy nearly 1,000 midwives to remote areas.

35. Investing in family planning brings excellent short- and long-term returns. For every dollar invested in family planning and maternal health in developing countries, benefits to families and societies are estimated to be \$8.40. If additional investment needs are met, this will generate \$660 billion in economic benefits by 2050.

36. UNFPA learned several other lessons:

- (a) Pooled procurements are more efficient than decentralized procurements;
- (b) Country-level joint analyses of funding gaps have been successful in collective efforts to mobilize resources to address reproductive health commodity gaps;
- (c) The mobilization of catalytic funding is important for programme countries and for the coordination of health-system readiness and preparedness when introducing new and lesser-used reproductive health commodities.

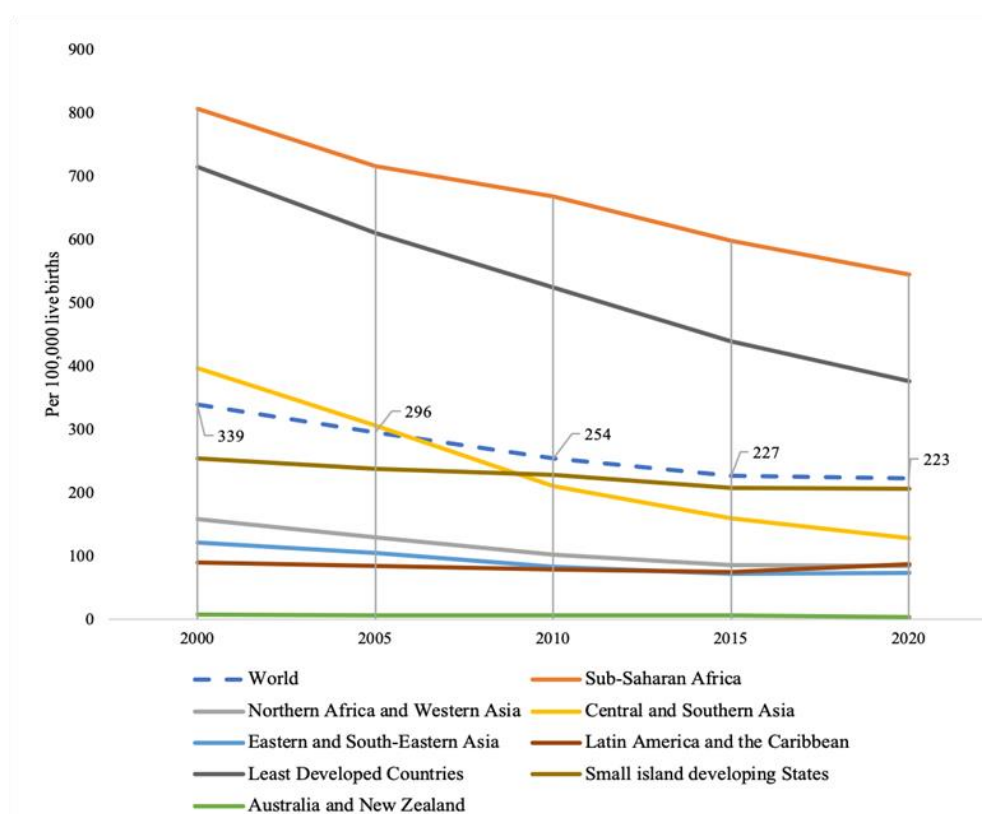
**Outcome 2. By 2025, the reduction of preventable maternal deaths has accelerated**

37. Recent United Nations estimates show that the gains attained at the global level in reducing maternal mortality during the period of the Millennium Development Goals (2000-2015) have stagnated during the first five years of the implementation of the 2030 Agenda for Sustainable Development. Between 2000 and 2015, the annual rate of reduction in maternal mortality was 2.7 per cent per year. Between 2016 and 2020, the annual rate of reduction in maternal mortality was -0.4 per cent, which indicates stagnation. This is a clarion call for the world to invest more in reducing maternal mortality.

38. Maternal mortality estimates showed variations among regions. Between 2000 and 2015, maternal mortality declined significantly in all regions. Between 2016 and 2020, maternal mortality stagnated in most regions, except Australia and New Zealand and Central and Southern Asia.

39. In the least developed countries, the pace of decline was significant, with an average annual reduction in maternal mortality of 2.8 per cent.

**Figure 4.**  
**Trends in maternal mortality, 2000-2020**



Source: *Trends in maternal mortality 2000 to 2020*. United Nations

40. In 2022, several countries introduced initiatives to scale up the reduction of maternal deaths by applying the accelerators in the UNFPA strategic plan, 2022-2025:

(a) In Uruguay, there was an acceleration in the reduction of maternal mortality in absolute numbers. Maternal deaths increased from 6 in 2018 to 20 in 2020 due to the COVID-19 pandemic. By 2022, there was only one recorded maternal death;

(b) Sierra Leone reported a 10 per cent reduction in maternal deaths (from 507 to 454) during 2021-2022, compared to a 7.3 per cent reduction in 2020-2021;

(c) In Cambodia, maternal mortality dropped from 170 in 2014 to 154 in 2022, due to the accessibility of high-quality services. In 2022, Cambodia recorded 99 per cent coverage in skilled birth attendance;

(d) In Colombia, maternal mortality was reduced by 40 per cent between 2021 and 2022 in the Afro-Colombian and indigenous population areas where UNFPA introduced “Partera Vital”, an innovative, community-based midwifery programme;

(e) Gabon introduced a digitized, real-time maternal death surveillance system. The Ministry of Health conducted a review of the 58 maternal deaths that occurred in 2022, in order to reduce maternal deaths;

(f) Moldova enhanced the resilience of seven perinatal hospitals near the Ukrainian border. This resulted in the safe delivery of more than 15,600 newborn children.

41. Despite these gains, the world is not on track to end preventable maternal deaths by 2030. A maternal death occurs almost every two minutes. In 2020, approximately 95 per cent of all maternal deaths occurred in low- and lower middle-income countries. The maternal mortality rate stagnated in 133 countries during 2016-2020.

42. Several challenges hindered the acceleration in the reduction of maternal deaths. In nine countries that faced severe humanitarian crises, maternal mortality was more than double the global average. Since 2020, acute malnutrition of pregnant and breastfeeding women in humanitarian crises increased by 20 per cent. There were also significant maternal death inequities between and within regions.

43. The main challenges faced by countries whose reduction in maternal mortality trends stagnated include: (a) health-system failures; (b) insufficient access to and availability of critical life-saving maternal and neonatal health care for marginalized populations, due to social determinants such as income, education, race and ethnicity; (c) weak supply chains; (d) lack of a competent health workforce; (e) lack of public trust in some health systems; and (f) harmful gender norms.

44. UNFPA will address these challenges by continuing to: (a) strengthen health system resilience; (b) scale up the accessibility to services by marginalized populations; (c) strengthen maternal death surveillance and review systems; (d) scale up the training of the health workforce, including midwives; and (e) strengthen national logistic management systems.

45. UNFPA learned the importance of prioritizing interventions that address the specific gaps in accelerating efforts to end preventable maternal deaths. UNFPA also realized the importance of scaling up interventions on well-being and better linking them with maternal health interventions. With this in mind, UNFPA began to develop its maternal and newborn health and well-being strategy.

46. UNFPA also learned that menstrual health and hygiene policies and actions need to be broadened in scope, to achieve a cross-sectoral approach that integrates sexual and reproductive health, education, socioeconomic well-being and hygiene. In 2022, 33 UNFPA programme countries prioritized menstrual health interventions.

47. The midterm review of the maternal health trust fund, implemented in 32 countries with high maternal deaths, concluded that the trust fund:

- (a) Is a comprehensive tool to end preventable maternal deaths;
- (b) Has delivered value for money globally, as well as for individual countries;
- (c) Has made a significant contribution towards ending fistula.

48. The maternal health trust fund helped to: (a) strengthen nearly 800 midwifery schools; (b) establish emergency obstetric and neonatal care facility networks in a number of countries; and (c) support 30 countries in their efforts to end obstetric fistula.

### **Outcome 3. By 2025, the reduction in gender-based violence and harmful practices has accelerated**

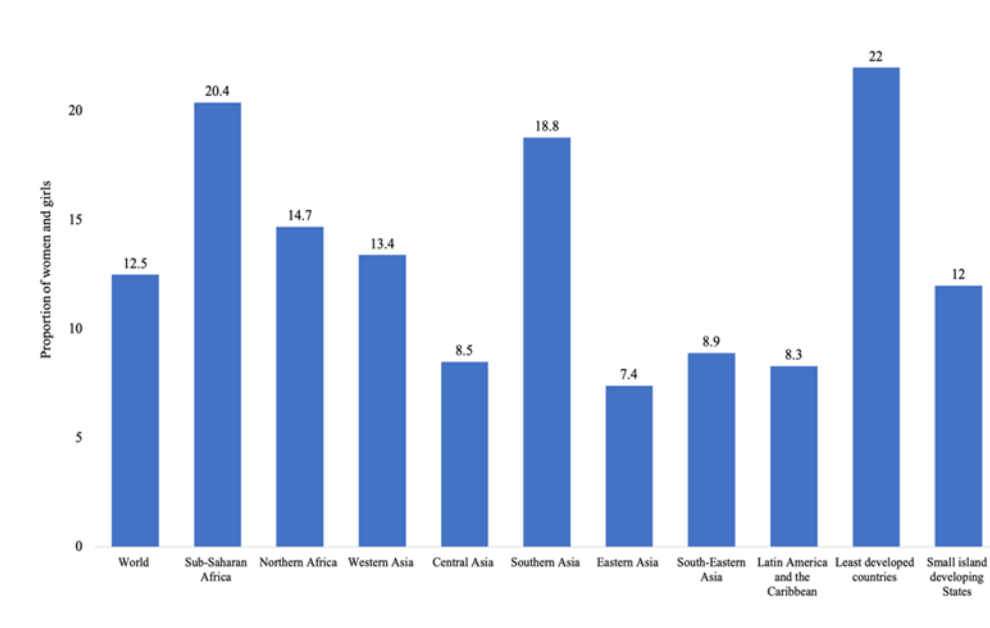
#### ***Gender-based violence***

49. In 2022, the world advanced efforts to end gender-based violence. However, data was not available to track the pace of its acceleration. In 2022, several countries took significant steps to accelerate progress to end gender-based violence:

- (a) In Indonesia, a sexual violence bill adopted in 2022 prioritized the rights of women and girls;
- (b) Madagascar scaled up the implementation of a law combating gender-based violence through improved partnerships;
- (c) Armenia, Georgia and Iraq launched the “Safe You” digital application. Armenia alone handled over 14,000 cases of gender-based violence;
- (d) Tunisia developed the “Netpoly” digital application to respond to cyber violence;
- (e) With the deactivation of the cluster system of the Inter-Agency Standing Committee in Iraq, UNFPA delegated the gender-based violence area of responsibility to the Government. This was done through a transition plan that operationalized the complementarity between humanitarian and development contexts;
- (f) Building on its previous system, Ukraine successfully coordinated and scaled up its provision of services to address gender-based violence during the current conflict. In 2022, more than 120,000 persons received assistance and referrals for gender-based violence through UNFPA-supported protection services.

50. Globally, 26 per cent of ever-partnered women have been subjected to physical and/or sexual violence by a husband or intimate partner at least once in their lifetime. Approximately 12.5 per cent of ever-partnered women and girls aged 15-49 years were subjected to physical and/or sexual violence by a current or former intimate partner in the previous 12 months.

**Figure 5.**  
**Proportion of ever-partnered women and girls aged 15-49 subjected to physical and/or sexual violence by a current or former intimate partner in the previous 12 months**



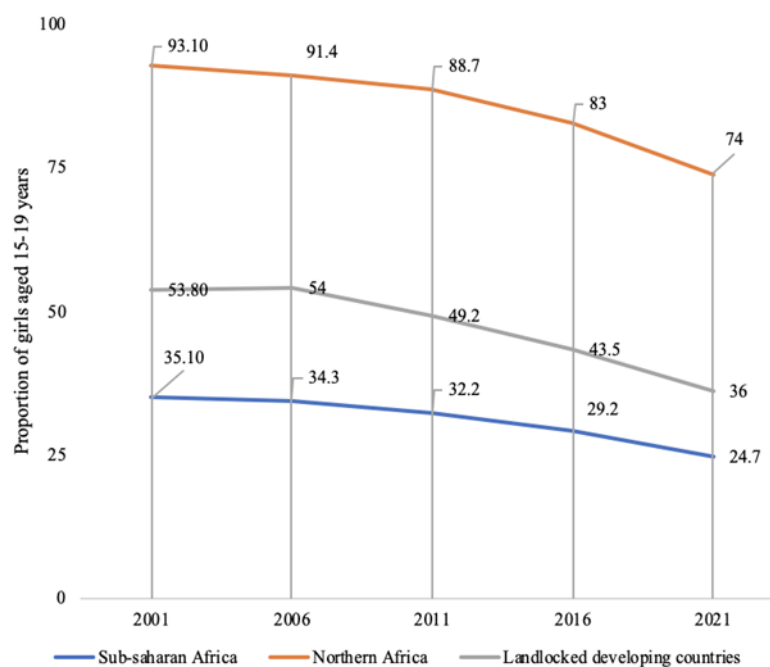
Source: Estimates of the prevalence of violence against women, 2018. United Nations

51. Global awareness of violence against older women is growing, but data are limited. The nature, scale, severity and complexity of such violence is likely underestimated.

#### ***Female genital mutilation***

52. The reduction in female genital mutilation has accelerated since UNFPA prioritized it as one of the three transformative results. The rate of reduction in female genital mutilation was 15 per cent in 2016-2021, compared to 9 per cent in 2011-2016. In sub-Saharan Africa, the reduction in female genital mutilation was greater in 2016-2021, compared to 2005-2010 (figure 6).

**Figure 6.**  
**Trends in female genital mutilation, 2001-2021**



Source: Global databases, 2021, United Nations Children's Fund

53. A number of countries made advances in accelerating the reduction of female genital mutilation. In 2022, nearly 4,000 communities made public declarations to abandon female genital mutilation. Countries that made advances in reducing female genital mutilation include:

- (a) Kenya, where female genital mutilation was reduced from 21 per cent in 2014 to 15 per cent in 2022, as a result of partnerships and high-level political commitment;
- (b) Egypt, where, since 2014, female genital mutilation was reduced by 50 per cent, due to favourable laws, policies and accountability mechanisms.

54. However, the pace of decline of female genital mutilation has been uneven. Over 200 million women and girls alive today have undergone female genital mutilation. Without concerted and accelerated action, 48 million more girls could be subjected to this practice by 2030.

55. In some countries, there has been an alarming trend to medicalize female genital mutilation. Approximately 1 in 4 survivors of female genital mutilation was subjected to the practice by health personnel.

#### ***Child, early and forced marriage***

56. The reduction in child marriage accelerated slightly since UNFPA prioritized ending child marriage as one of the three transformative results. The prevalence of child marriage before the age of 18 decreased by 9 per cent during 2016-2021, compared to 6 per cent during 2011-2016. The prevalence of child marriage before the age of 15 fell by 2 per cent during 2016-2021, compared to 1.4 per cent in 2011-2016.

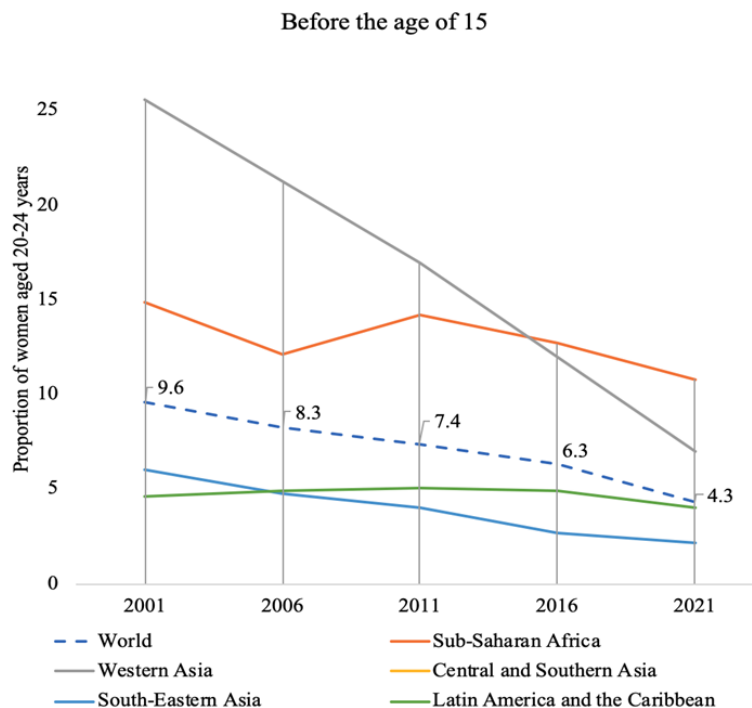
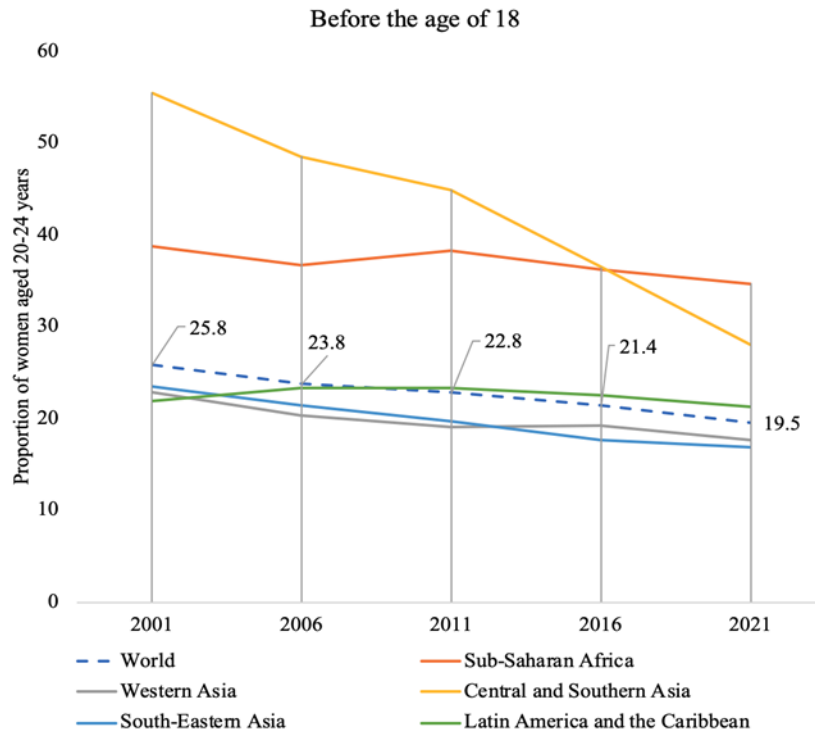
57. Central and Southern Asia had the largest acceleration in the prevalence of child marriage between 2016-2021 and 2011-2016 (figure 7).

58. Bangladesh reduced child marriage from 59 per cent in 2017/2018 to 51 per cent in 2019. In 2022, other countries sought to accelerate the reduction of child early and forced marriage. For example:

- (a) Cuba formulated a rights-based family code addressing child, early and forced marriage;
- (b) The Republic of the Congo adopted the first law criminalizing violence against women. The law also provides a framework for the eradication of child marriage.

59. Globally, approximately 21 per cent of young women were married before their eighteenth birthday. The current rate of decline in child marriage is insufficient to meet the 2030 target. Without accelerating the reduction in child marriages, more than 150 million additional girls under 18 years of age will marry by 2030.

**Figure 7.**  
**Trends in child marriage, 2001-2021**



Source: Global databases, 2022, United Nations Children's Fund

60. UNFPA and its partners faced numerous challenges in their efforts to end gender-based violence and harmful practices, which are often the result of entrenched gender inequality. The world is not on track to achieve gender equality by 2030.

61. Gender-based violence and harmful practices have intensified with the increase in humanitarian crises. In the Horn of Africa, there was a rise in harmful practices due to drought. In Ukraine, women and girls were at an increased risk of violence due to the conflict. Other challenges include:

- (a) Discriminatory laws and legal gaps that prevent women from enjoying their human rights;
- (b) Insufficient investments in gender-responsive budgeting. According to the United Nations, only 26 per cent of 105 survey countries had comprehensive systems to track public allocations for gender equality. Less than 1 per cent of global humanitarian funding is allocated to sexual and gender-based violence;
- (c) The lack of investments in gender statistics. Less than half the data required to monitor Sustainable Development Goal 5 (Achieve gender equality and empower all women and girls) are currently available.

62. UNFPA learned several lessons in accelerating the reduction of gender-based violence and harmful practices. These include:

- (a) The importance of addressing the intersectionality of harmful practices. Among the 130 million girls married in childhood and the nearly 140 million who underwent female genital mutilation, over 40 million girls experienced both practices. Girls with no education were three times more likely to be married before the age of 18 than those with some education;
- (b) The importance of scaling up cross-border approaches to address harmful practices;
- (c) The importance of scaling up the engagement of young people to address harmful practices. In 2022, the UNFPA and UNICEF Joint Programme to Eliminate Female Genital Mutilation launched the global youth consortium against female genital mutilation. Current membership includes young people from 45 countries;
- (d) The importance of cash and vouchers as a tool to save lives, alleviate risks and help marginalized women and girls escape abusive environments;
- (e) The importance of filling the digital gap to achieve gender equality to end gender-based violence and harmful practices. In 2022, 259 million more men than women were online. Only 22 per cent of those working globally in artificial intelligence are women.

63. UNFPA and UNICEF continue to lead the two largest global programmes that seek to: (a) eliminate female genital mutilation; and (b) eliminate child, early and forced marriage. Female genital mutilation rates steadily declined in 10 of the 17 countries covered under the joint programme to eliminate female genital mutilation. In 2022, 6.3 million girls benefited from services to prevent child, early and forced marriage, as a result of the joint programme to end this practice.

64. Since 2017, the European Union - United Nations Spotlight Initiative, which seeks to eliminate all forms of violence against women and girls has helped 1.6 million women worldwide to access services related to gender-based violence. The Initiative also achieved an eightfold increase in national budget allocations that address violence against women and girls.

## **B. Performance and results of the strategic plan outputs**

65. In 2022, UNFPA made substantial progress in achieving the six interconnected strategic plan outputs, as reported in section A of this report. This demonstrates UNFPA efforts to accelerate the achievement of the transformative results and the implementation of the ICPD Programme of Action.

66. As of 2022, UNFPA fully achieved the 2022 targets of the outputs of: (a) policy and accountability; (b) quality of care and services; (c) humanitarian action; and (d) adolescents and youth (figure 8). UNFPA partially achieved the outputs of: (a) gender and social norms; and (b) population change and data.

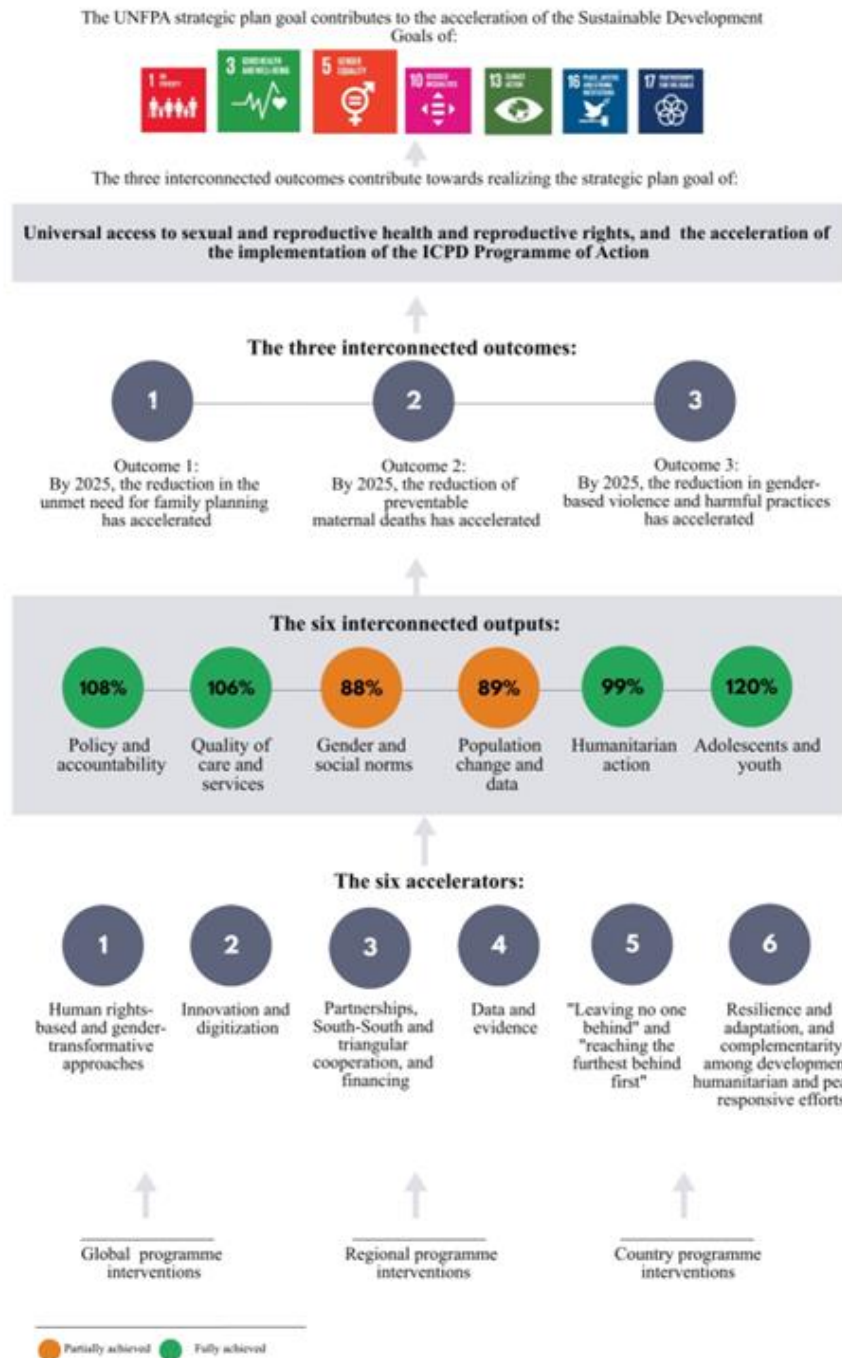


67. UNFPA country offices and partners faced several challenges in addressing harmful gender and social norms due to: (a) increased humanitarian and fragile situations; (b) the pushback from some stakeholders; (c) inadequate resources; (d) insufficient innovative strategies; and (e) the COVID-19 pandemic.

68. Most UNFPA programme countries are still struggling to recover from the COVID-19 pandemic. As a result, interventions on population change and data, such as censuses, were not prioritized.

69. During the remaining period of the strategic plan, UNFPA will further prioritize efforts to address harmful gender and social norms.

**Figure 8.**  
**Six plus six frameworks with output performance**



70. In 2022, UNFPA improved the integration of sexual and reproductive health into national policies and development frameworks, including those related to universal health coverage benefit packages. In 2022, 20 additional countries integrated sexual and reproductive health and reproductive rights into policies, plans and accountability frameworks related to universal health coverage.

71. UNFPA scaled up the availability, acceptability, affordability and quality of services to accelerate progress to achieve the three transformative results. As of 2022, 65 per cent of countries had met their minimum midwifery requirements. In 2022, UNFPA programme countries introduced over 100 adaptations to improve the availability, accessibility, acceptability and quality of services related to the transformative results.

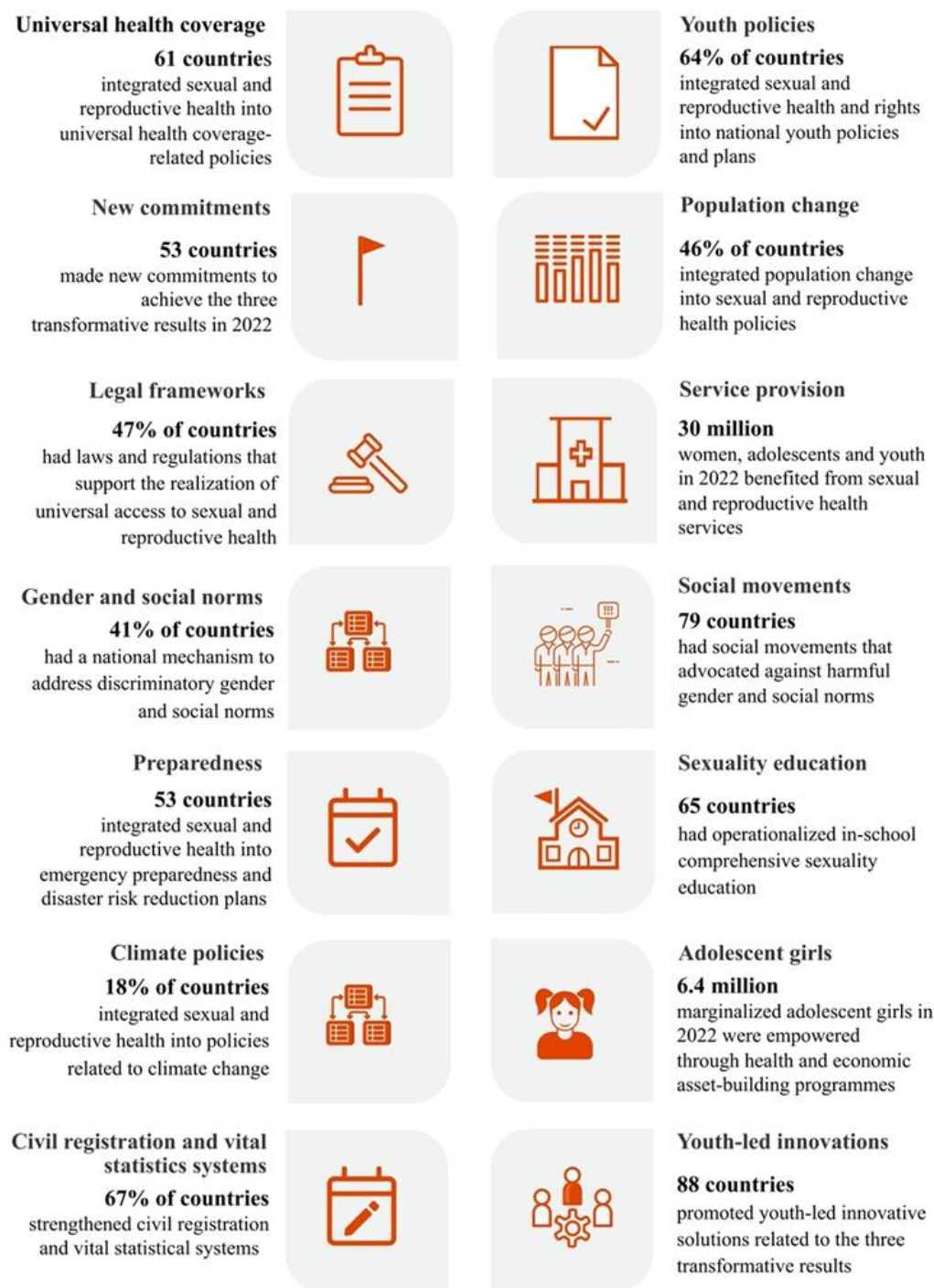
72. UNFPA continued to strengthen the skills of adolescents and youth to enable them to make informed decisions about their lives, including their sexual and reproductive health and rights. UNFPA also promoted adolescent and youth participation in development and climate-related processes. It identified innovative solutions that focus on accelerating the achievement of the three transformative results. In 2022, with support from UNFPA, nearly 90 programme countries promoted innovative, youth-led initiatives to accelerate the achievement of the transformative results.

73. Despite the challenges mentioned in paragraph 67, UNFPA scaled up interventions to address harmful gender and social norms. In 2022, a majority of UNFPA programme countries prioritized interventions to address harmful gender and social norms. UNFPA spent approximately 14 per cent of its total resources for such interventions.

74. In 2022, UNFPA prioritized preparedness and early and anticipatory action to ensure the complementarity of humanitarian, development and peace-responsive efforts, and to respond to the effects of climate change. UNFPA continued to coordinate the areas of gender-based violence and sexual and reproductive health in humanitarian settings. In 2022, 79 per cent of countries affected by humanitarian crises had a functioning inter-agency coordination mechanism or platform to address gender-based violence.

75. Figure 9 below highlights some of the other output-level achievements that contributed to the formation of a culture in UNFPA that seeks to accelerate the achievement of the three transformative results.

**Figure 9.**  
**Key milestones, as of 2022**



**More results may be found at:**

[unfpa.org/data/results](https://unfpa.org/data/results)

***Positioning the three transformative results***

76. UNFPA continued to position the three transformative results in internal and external global, regional and national development frameworks.

77. By 2022, over 20 per cent of the voluntary commitments to accelerate the achievement of the three transformative results and the ICPD Programme of Action made during the ICPD25<sup>2</sup> follow-up process had been implemented.

78. In 2022, several countries integrated the voluntary country commitments to accelerate the achievement of the three transformative results into their national policies and programmes. A number of other countries also developed national mechanisms to track the implementation of their commitments.

79. The three transformative results were prioritized in voluntary national reviews. Of the 40 voluntary national reviews in 2022: (a) 75 per cent included maternal health; (b) 66 per cent included family planning; (c) 87.5 per cent included gender-based violence; (d) 60 per cent included child, early and forced marriage; and (e) 37.5 per cent included female genital mutilation.

80. By 2022, all new UNFPA country programmes addressed one or more of the three transformative results. The transformative results were integrated into nearly all United Nations Sustainable Development Cooperation Frameworks and common country assessments developed in 2022.

81. The development of investment cases for the three transformative results aided countries in prioritizing the transformative results in their policies and programmes. For example, as a result of the investment cases developed in Peru, the transformative results were integrated into the country's United Nations Sustainable Development Cooperation Framework.

82. The High-level Commission on the Nairobi Summit, established in 2020, continued to review the follow-up to ICPD25. In November 2022, the Commission launched its second report, which noted the progress achieved on the global voluntary commitments. The report also called for ambitious, deliberate and comprehensive action to accelerate progress on these commitments.

83. Advancements in data, evidence gathering and the analysis of population dynamics enabled UNFPA and its partners to prioritize and position the three transformative results in policies and programmes.

**C. Advances in organizational effectiveness and efficiency**

84. Advances in organizational effectiveness and efficiency contributed to generating momentum to accelerate the achievement of the three transformative results. These advances include:

- (a) Aligning programmes, projects and operations to the six interconnected outputs of the UNFPA strategic plan;
- (b) Applying the six accelerators in the strategic plan;
- (c) Operationalizing the 12 key strategic shifts<sup>3</sup> of the UNFPA strategic plan.

85. Overall, UNFPA made significant progress in all three of the outputs under organizational effectiveness and efficiency: (a) improved programming for results; (b) optimized management of resources; and (c) expanded partnerships for impact.

86. UNFPA achieved key operational efficiencies in 2022, including an overall operational efficiency gain of \$34.7 million. Of this amount, \$12.7 million were a result of cost savings; \$3.7 million were a result of cost avoidance; and \$18.3 million were a result of staff time reduction. Of the overall operational efficiency gain of \$34.7 million, \$29 million were generated from UNFPA-specific initiatives and \$5.7 million were a result of bilateral initiatives with partner United Nations organizations. Box 1 displays the key efficiencies gained by UNFPA in 2022.

<sup>2</sup> See the website for the Nairobi conference: <https://www.nairobisummiticpd.org/>.

<sup>3</sup> See the UNFPA strategic plan, 2022-2025 (DP/FPA/2021/8), page 5.

**Box 1.**  
**Key efficiencies gained by UNFPA in 2022**

**Surge deployment**

- Surge deployment was achieved with the lead response time increased from 85 per cent to 90 per cent between 2021 and 2022.

**Cost savings due to generic contraceptives**

- The cost savings from procuring generic contraceptives increased from \$4.8 million in 2021 to over \$5.1 million in 2022.

**Implementation rate for non-core donor agreements**

- The financial implementation rate for non-core donor agreements increased from 76 per cent in 2021 to 84 per cent during 2022.

**Prevention of waste and losses**

- By employing its last-mile assurance process, UNFPA prevented waste and losses in excess of \$3.4 million in 2022, through the management of reproductive health commodities to partners.

***Improved programming for results***

87. The continued prioritization of a results culture contributed to the overall performance of UNFPA. UNFPA programmes at global, regional and country levels performed well in 2022 and contributed to the achievement of strategic plan results. In 2022, UNFPA achieved 85 per cent of the indicators of its global and regional programmes (annex 4). In addition, 91 per cent of UNFPA country programmes were rated as good performers, having exceeded the 2022 target of 89 per cent. In 2022, 88 per cent of UNFPA country programmes integrated disability inclusion into their programmes, surpassing the strategic plan target of 70 per cent.

88. Country programme evaluations conducted in 2022 found that the majority of country programmes were effective, and that all were relevant to the country context and the strategic focus of UNFPA. In 2022, UNFPA implemented 95 per cent of the follow-up actions of the evaluation recommendations, surpassing the strategic plan target of 90 per cent.

89. UNFPA continued to strengthen its results-based management. In 2022, UNFPA operationalized the first adaptive management framework to institutionalize learning, agility and adaptation. UNFPA also strengthened the capacity of 80 per cent of its offices in results-based management. In addition, UNFPA piloted a results-based management “seal” that recognizes country offices that have improved their results-based management capacity.

90. By the end of 2022, the majority of UNFPA programmes were aligned to the strategic plan. In 2022, UNFPA developed more than 10 key policies and strategies to support the operationalization of the strategic plan. Some of these included: (a) the strategy for family planning, 2022-2030; (b) the strategy on gender transformation; and (c) the policy on country programming.

91. Innovations in UNFPA contributed to the acceleration of results. In 2022, UNFPA: (a) expanded the partners in its equalizer accelerator fund; (b) supported women-led social enterprises in programme countries to scale up innovative solutions; (c) expanded partnerships with the technology sector and academia to advance gender-transformative and women-focused innovative solutions; and (d) strengthened capacity-building and the UNFPA innovation architecture. Over 50 per cent of UNFPA offices scaled up innovative solutions in 2022.

92. UNFPA strengthened its culture initiative to ensure that it is fit for purpose to accelerate the achievement of three transformative results. In 2022, UNFPA also developed a toolkit on organizational culture.

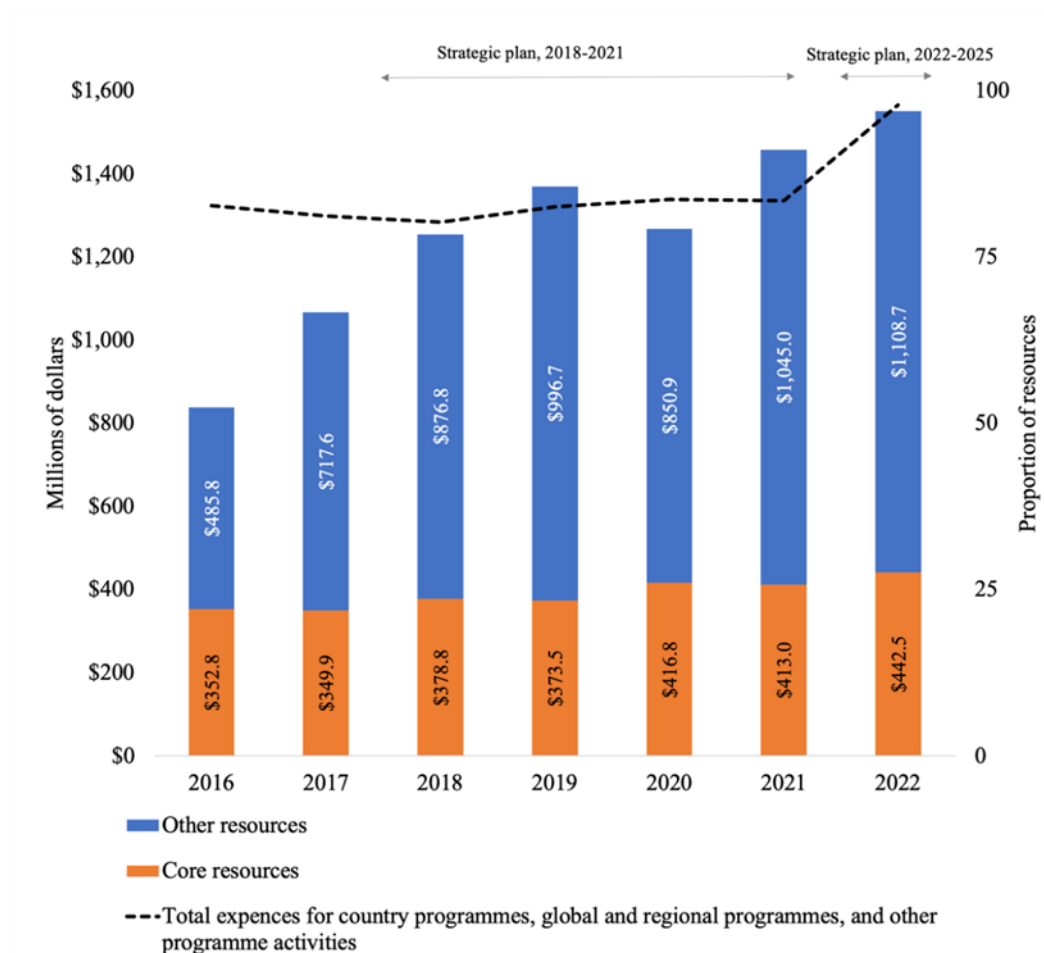
***Optimized management of resources***

93. UNFPA continued to maintain a healthy financial position. UNFPA revenue exceeded \$1 billion for the sixth year in a row, surpassing the targets of the strategic plan. Regular resources, which

surpassed the strategic plan target by 17.4 per cent, were \$442.5 million during 2022, an increase of 7.2 per cent from 2021. Co-financing resources increased by 9.4 per cent in 2022 compared to 2021. In 2022, UNFPA unveiled a new corporate resource mobilization strategy, which seeks in part to advance the shift from funding to funding and financing in order to help to fill the \$222 billion gap in resources to achieve the three transformative results by 2030. UNFPA continued to strengthen its internal capacity and engagement with international financial institutions, and to develop a pathway to increase collaboration with them.

94. UNFPA continued to be a field-focused organization. During 2022, UNFPA spent over 81.9 per cent of its resources in the field.

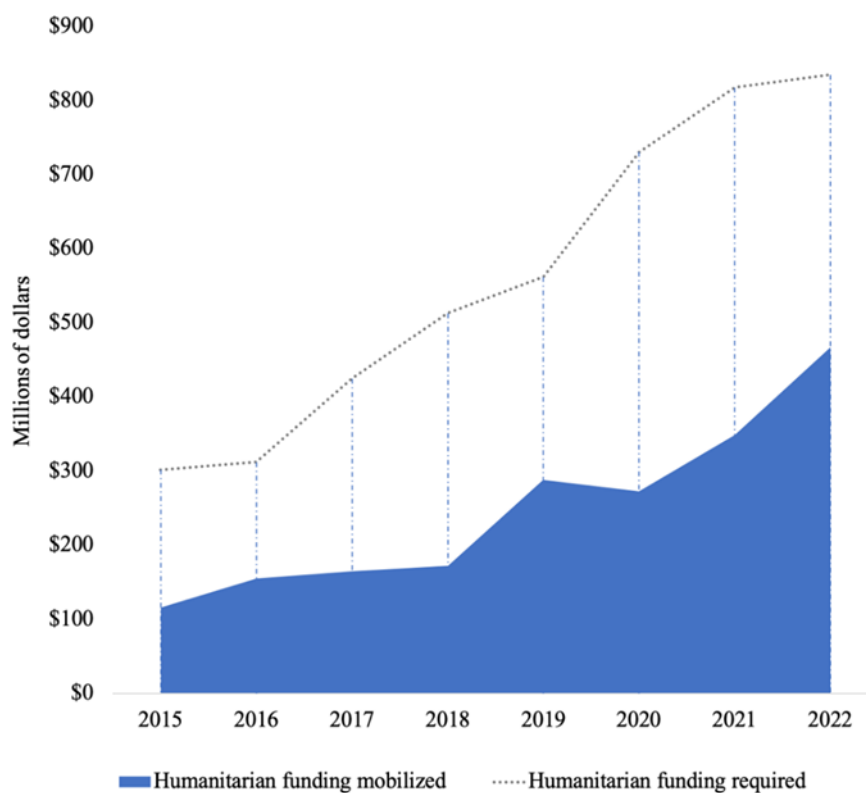
**Figure 10.**  
**Contribution revenue and total expenses for country programmes, the global and regional programme, and other programme activities, 2016-2022**



Source: UNFPA

95. In 2022, UNFPA mobilized \$467.6 million for humanitarian funding, equalling 41% of total co-financing and the highest level to date. UNFPA continued to diversify funding sources and explore new funding mechanisms.

**Figure 11.**  
**Humanitarian funding trends, 2015-2022**



Source: UNFPA

96. UNFPA introduced several initiatives to implement the shift from funding to financing:
- UNFPA implemented the first blended finance impact bond in Kenya;
  - Thirty-seven UNFPA programme countries are set to develop investment cases for the three transformative results;
  - UNFPA implemented its strategic investment facility, which produced significant returns.
97. In 2022, 16 UNFPA country offices benefited from the strategic investment facility. In Rwanda, UNFPA established 18 health posts in hard-to-reach areas using a public/private community partnership investment model. As a result, over 100,000 women and young people benefited from high-quality sexual and reproductive health services.
98. UNFPA increased contributions from United Nations inter-agency transfers – from \$494.6 million in 2021 to \$944.9 million in 2022, a 91 per cent increase. Private-sector contributions were \$45.4 million in 2022 against the target of \$27 million. The number of multi-year agreements rose from six in 2021 to 18 in 2022.
99. UNFPA anti-fraud controls were effective in 2022, based upon the results of the UNFPA enterprise risk management and control self-assessment processes.
100. In 2022, UNFPA adopted an enterprise risk management policy aligned to: (a) the enterprise risk management model of the Committee of Sponsoring Organizations; (b) the risk maturity model requirements developed by the High-level Committee on Management; and (c) the report of the Joint Inspection Unit, “Enterprise risk management: approaches and uses in United Nations system organizations”.

101. UNFPA undertook the following initiatives in 2022 to operationalize its enterprise risk management policy:

- (a) Updated its risk governance structure by moving the position of chief risk officer from the Division of Management Services to the Office of the Executive Director;
- (b) Issued its first-ever “risk appetite statement” in November 2022;
- (c) Enhanced its tool that maintains an inventory of risks and exposures;
- (d) Issued its enterprise risk management calendar for 2022-2023;
- (e) Developed an enterprise risk management guidebook and a risks and controls catalogue to support office risk management processes.

102. In 2022, UNFPA received an unqualified audit opinion from the United Nations Board of Auditors for the financial year that ended on 31 December 2021, the twelfth consecutive year that it has done so. UNFPA has fully implemented 80 per cent of the 30 recommendations that were outstanding at the beginning of the 2021 financial year.

103. In 2022, UNFPA improved the coordination and consolidation of its resource management functions by: (a) establishing a resources management committee; and (b) merging the non-core fund management and resource planning functions. UNFPA also strengthened the efficiency and effectiveness of its financial management in 2022 by:

- (a) Adopting a revised cost-recovery policy;
- (b) Linking its financial controls to its internal control framework, which is included in the new enterprise resource planning system;
- (c) Launching an implementing partner assurance strategy and guide.

104. UNFPA made notable advances in human resources in 2022. In addition to launching the ‘People Strategy 2030’, these include:

- (a) Attaining gender parity;
- (b) Continuing its commitment to implementing a zero-tolerance policy with regard to protection from sexual exploitation and abuse and sexual harassment. By 2022, all UNFPA offices had a focal point for protection from sexual exploitation and abuse and sexual harassment.
- (c) A commitment to building awareness and fostering inclusion and diversity in the workplace, and a commitment to ensuring that UNFPA is anti-racist;
- (d) Providing psychosocial support and promoting the mental health and well-being of its staff, in accordance with the United Nations system mental health and well-being strategy;
- (e) Developing a new delegation of authority matrix for human resources management and decisions, and further establishing accountability;
- (f) Reducing the global vacancy rate from 17.8 per cent in 2021 to 12.9 per cent in 2022;
- (g) Updating flexible working arrangements. In 2022, nearly 44 per cent of staff utilized the flexible working modality;
- (h) Ensuring that staff in managerial positions complete their managerial certification within one year of being named to their managerial posts. To date, 73 per cent of staff in managerial positions have done so.

105. UNFPA continues to minimize the environmental footprint of its operations. Between 2020 and 2021, UNFPA reduced its per capita emissions by 23 per cent. In 2022, 42 countries operationalized social and environmental standards for programming. UNFPA also developed a strategy to integrate social and environmental standards into evaluations.

106. UNFPA is facing reduced levels of regular resources (core resources) and a decline in the number of core donors, and is concerned about the impact of global economic stressors on 2023 funding. In 2022, only 93 governments supported UNFPA with core funding, compared to 101 in 2021.

#### ***Expanded partnerships for impact***

107. UNFPA was seen as a trusted partner among stakeholders. In 2022, UNFPA established over 100 new partnerships and mobilized \$45.4 million through such partnerships. There was a 138 per cent



increase in 2022 in donors opting to provide monthly donations to UNFPA as part of the individual giving programme, compared to 2021.

108. With regard to partnerships, UNFPA developed: (a) a framework for strategic partnerships; (b) a foundation and philanthropy strategy; (c) a strategy to engage civil society organizations and parliamentarians; and (d) a coalition for reproductive justice in business.

109. UNFPA made significant contributions to United Nations system-wide results, coordination and coherence in 2022. The meta-synthesis of UNFPA country programme evaluations found that UNFPA had maintained strong working relationships with other United Nations entities.

110. In 2022, UNFPA conducted the first formative evaluation of UNFPA engagement in the reform of the United Nations development system. The evaluation concluded, inter alia, that:

- (a) All levels of UNFPA engaged actively to advance the reform;
- (b) UNFPA engagement in reforming the United Nations development system helped to advance the repositioning processes of the United Nations.

111. In 2022, UNFPA, together with UNDP, UNICEF and UN-Women operationalized common and complementary indicators that measure results in their respective integrated results and resources frameworks. This approach helped UNFPA to demonstrate joint accountability in achieving its strategic plan results (see annex 1 for progress related to common and complementary indicators).

**Box 2.**

**UNFPA harmonization of business practices and contributions to United Nations system-wide results**

1. UNFPA was the first United Nations entity to sign a service provision agreement with UN FLEET, which provides vehicle leasing services to United Nations organizations.
2. In 2022, 93 per cent of UNFPA country offices participated in 397 joint programmes.
3. UNFPA offices that shared premises with other United Nations organizations increased from 72 per cent in 2021 to 73 per cent in 2022.
4. In 2022, 82 per cent of UNFPA country offices conducted joint risk assessments.
5. In 2022, UNFPA harmonized implementing partner capacity assessments and increased the number of participating United Nations organizations from three to six.
6. In 2022, UNFPA chaired or co-chaired 33 per cent of results groups in United Nations country teams.
7. UNFPA contributed to the development of the United Nations output indicator framework to support the measurement of the United Nations system-wide contribution to the Sustainable Development Goals; the updated system-wide guidance note on joint programmes; and the results-based management handbook.

#### **IV. Midterm review of the UNFPA strategic plan, 2022-2025**

112. UNFPA has already begun discussions with other United Nations organizations to harmonize the process of the midterm review of its strategic plan, 2022-2025. The midterm review will focus on institutionalizing the key strategic shifts outlined in the strategic plan. The review of the strategic plan will be combined with the annual report of the Executive Director for 2023, which UNFPA will present at the annual session 2024 of the Executive Board.