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UNFPA – Country programmes and related matters

UNITED NATIONS POPULATION FUND

Draft country programme document for Equatorial Guinea

Proposed indicative UNFPA assistance: \$19.8 million: \$5 million from regular resources and \$14.8 million through co-financing modalities and/or other resources, including regular resources

Programme period: Five years (2013-2017)

Cycle of assistance: Sixth

Category per decision 2007/42: A

Proposed indicative assistance (in millions of \$):

Strategic Plan Outcome Area	Regular resources	Other	Total
Maternal and newborn health	0.9	5.0	5.9
Family planning	0.8	-	0.8
Young people's sexual and reproductive health and sexuality education	0.8	-	0.8
Gender equality and reproductive rights	1.25	0.7	1.95
Data availability and analysis	0.5	9.1	9.6
Programme coordination and assistance	0.75	-	0.75
Total	5.0	14.8	19.8



I. Situation analysis

1. Equatorial Guinea has a stable sociopolitical environment, with a democratically elected government. It is divided into two regions: an insular region where the capital city of Malabo is located, and a larger mainland region that is home to 80 per cent of the population. The population is estimated at one million.

2. The country recently experienced rapid economic growth, due to revenues from the oil and gas industry. The per capita gross domestic product increased from \$5,420 in 2000 to \$23,570 in 2010. Nevertheless, access to basic services remains a challenge. Seventy per cent of the population lives in poverty.

3. The lack of reliable data hampers the planning and monitoring of programmes. Although the Government carried out censuses in 1994 and 2001, the data are now obsolete. Most indicators were not calculated, and data were not disaggregated by age or sex. The publication of the demographic and health survey, scheduled for mid-2012, is expected to improve the situation.

4. The maternal mortality ratio was estimated at 352 maternal deaths per 100,000 live births in 1994 and has not been recalculated since then. This high ratio is due to inadequate human capacity in emergency obstetric and neonatal care, as well as inadequate implementation of national policy and monitoring mechanisms. Skilled birth attendants assist 52 per cent of deliveries.

5. The national contraceptive prevalence rate is 2.8 per cent (0.7 per cent in rural areas and 2.9 per cent in urban areas). The low rate is attributed to a lack of trained personnel, and to stock-outs due to the absence of a commodities logistics management system. There is also a lack of information and awareness about family planning.

6. The population is young, with 39.3 per cent in the 0-14 age group. In 2010, the average age of the population was 20.3 years. The median age for first sexual intercourse is 14 years for girls. Sociocultural barriers and a lack of information limit the access of young people to reproductive health services. The lack of a policy and specific strategy to target the needs of young people has limited the availability of such services. There is a need for data on the sexual and reproductive health of young people.

7. Gender equality is a concern. Although women's rights are enshrined in the constitution ratified in 2011, discrimination persists. Women's representation in decision-making bodies is low, due to: (a) the persistence of sociocultural factors that discriminate against women; (b) the absence of a family code; (c) the low educational levels of women; and (d) the lack of protective laws and laws promoting gender equity.

8. In the area of education, there is parity in access to primary education for boys and girls. However, this is not the case for secondary and university education, due to the high drop-out rate among girls, as well as the prevalence of teenage pregnancy and early marriages. The proposed programme addresses these issues.

II. Past cooperation and lessons learned

9. The objective of the fifth UNFPA country programme, 2008-2012, was to help reduce poverty and improve the quality of life of the population by supporting policy and programme development and implementation in the areas of population and development, reproductive health, and gender.

10. Achievements in population and development included enhanced national capacity to collect, process and analyse data. The programme supported the completion of the first demographic and health survey in

Equatorial Guinea, as well as the planning of the fourth population census. The latter has not taken place due to a lack of funds. Gaps remain in the publication and utilization of survey data. There is also a need to advocate, and provide technical assistance to the Government, to mobilize resources for the census.

11. In the area of gender, the programme supported the drafting of a bill to protect the rights of women and children. Its adoption is still pending in Parliament. The Government is also in the process of drafting an individual and family code. In addition, UNFPA provided support to the Government to assess its institutional capacity. The remaining gap is in implementing the capacity-development plan.

12. In the area of maternal and neonatal health, UNFPA provided technical assistance to the Government to draft a road map to accelerate the reduction of maternal and infant mortality by 2020. This document served as the analytical framework and basis for the development of the current reproductive health programme.

13. Implementation, however, has been limited, primarily due to a lack of government financing and the inadequate quantity and quality of human resources. The final evaluation of the past programme noted no substantial gains in youth interventions and identified the need to focus on youth.

14. The evaluation also included the following observations: (a) the National Statistics Institute established by law is not yet operational; (b) different government departments do not regularly produce the statistical data required to constitute a database; and (c) the absence of regular sociodemographic and economic surveys due to the lack of financing and trained technical staff make it difficult to ensure sound planning, monitoring and evaluation in line with the focus on results-based management.

The evaluation identified the lack of counterpart funds as a major problem.

III. Proposed programme

15. The Government, with the participation of UNFPA, formulated the proposed programme within the framework of the International Conference on Population and Development and the Millennium Development Goals. The programme takes into account the conclusions of the final evaluation of the country programme, as well as the priorities of the road map for the acceleration of the reduction of maternal and neonatal mortality in Equatorial Guinea, 2008-2025, and the Equatorial Guinea national economic and social development plan, 2020.

16. This programme will contribute to the realization of the goal of the new UNFPA strategic plan, which is “to achieve universal access to sexual and reproductive health, promote reproductive rights, reduce maternal mortality and accelerate progress towards the objectives of the International Conference on Population and Development and Millennium Development Goal 5 (A and B)”.

17. The programme focuses on: (a) increasing the access of women and youth to reproductive health services; (b) enhancing gender equality; and (c) increasing the availability of data.

18. The programme is based on three of eight United Nations Development Assistance Framework (UNDAF) outcomes: (a) the population, in particular women, boys, girls and young people, enjoy improved levels of health (outcome 4); (b) strengthened capacity of public institutions to promote and defend human rights and gender equality (outcome 5); and (c) a national statistics system is in place, providing reliable, periodic data for public policy development and monitoring (outcome 6). The proposed programme is in line with the UNFPA strategic plan, 2012-

2013, and contributes to the following strategic plan outcome areas.

Maternal and newborn health

19. Output 1: Strengthened national capacity for emergency obstetric and newborn care. This will be achieved by providing technical assistance for: (a) advocacy to mobilize resources to implement the national road map for the reduction of maternal and neonatal mortality; (b) capacity development for staff in charge of emergency obstetric and neonatal care; (c) the strengthening of mechanisms for coordination, monitoring and evaluation; and (d) the strengthening of capacity to implement sexual and reproductive health policies and programmes.

Family planning

20. Output 1: Strengthened national systems for reproductive health commodity security. This will be achieved by improving the national capacity in logistics management systems to avoid stock-outs and by creating demand for reproductive health services, including family planning.

Young people's sexual and reproductive health services and sexuality education

21. Output 1: Improved programming for essential sexual and reproductive health services for marginalized adolescents and young people. To achieve this output, UNFPA will support: (a) capacity development for national institutions to develop youth policies and programmes; (b) assistance in designing strategies to integrate age-appropriate sexuality education for girls, boys and young people into the school system; and (c) the strengthening of structures in charge of information, education and communication for behaviour change activities, based on the national communication strategy for youth development.

Gender equality and reproductive rights

22. Output 1: Strengthened national capacity to implement international agreements, national legislation and policies in support of gender equality and reproductive rights. This will be achieved through the following strategies: (a) institutional capacity development for the ministry in charge of women's promotion and protection; (b) technical support to amend laws protecting women, including the individual and family code; and (c) advocacy aimed at government and national institutions, as well as capacity development for civil society organizations, to enable them to lobby for gender equity and equality and reproductive health rights.

Data availability and analysis

23. Output 1: Enhanced national capacity to produce, analyse and disseminate high-quality statistical data on population dynamics, youth, gender equality and sexual and reproductive health, including in humanitarian settings. This output will be achieved through: (a) capacity-building for the Ministry of Planning, Economic Development and Public Investments in rendering the National Institute of Statistics operational, in conjunction with other line ministries; (b) technical support to the Ministry of Planning, Economic Development and Public Investments to plan and conduct the fourth general population and housing census and to analyse and disseminate the results of the census, as well as provide support to conduct the second demographic and health survey; and (c) the provision of technical support to design strategies to create awareness regarding the importance of sociodemographic indicators for development planning, monitoring and evaluation.

IV. Programme management, monitoring and evaluation

24. National execution is the preferred implementation arrangement for the sixth country programme, in adherence with UNFPA procedures. Funding for the programme will also come from government funds for the UNDAF, 2013-2017.

25. UNFPA will develop a plan for resource mobilization. The plan will focus on the resources available through the government budget and from support from bilateral and multilateral partners.

26. The Ministry of Foreign Affairs, International Cooperation and Francophonie will coordinate the implementation of the programme in collaboration with four sectoral ministries, namely, the Ministry of Health and Social Welfare, the Ministry of Planning, Economic Development and Public Investments, the Ministry of Social Affairs and Women's Promotion, and the Ministry of Information and Tourism. Civil society organizations will also be involved in programme execution.

27. Partners will hold four monitoring committee meetings throughout the year to examine and assess project execution, in line with UNFPA guidelines and procedures and within the context of the UNDAF, using the principles of results-based management and the programme outcomes framework. UNFPA and the Government will develop and implement a monitoring and evaluation plan.

28. 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. The country office will conform to the minimum operating security standards.

29. The UNFPA Regional Office for Africa and headquarters divisions will provide technical assistance as required. This

assistance will be provided in addition to that provided by national and international consultants. Because Spanish is an official language in the country, the UNFPA country office will also solicit technical support from the Latin America region.

30. The UNFPA country office in Equatorial Guinea includes basic management and development effectiveness functions funded from the UNFPA institutional budget. UNFPA will allocate programme resources for staff providing technical and programmatic expertise, as well as associated support, to implement the programme. At the beginning of the programme, UNFPA will assess the staffing situation. Additional staff may be recruited, if required.

RESULTS AND RESOURCES FRAMEWORK FOR EQUATORIAL GUINEA

<p>National priorities: (a) improve the socioeconomic and cultural well-being of the population; (b) enhance good governance; and (c) promote a sustainable environment</p> <p>UNDAF outcome number 4: the population, in particular women, boys, girls and young people, enjoy improved levels of health</p>				
UNFPA strategic plan outcome	Country programme outputs	Output indicators, baselines and targets	Partners	Indicative resources
<p>Maternal and newborn health</p> <p><u>Output indicators:</u></p> <ul style="list-style-type: none"> Maternal mortality ratio <p>Baseline: 352 maternal deaths per 100,000 live births (1994);</p> <p>Target: to be based on analysis of data from the demographic and health survey by mid-2012</p>	<p><u>Output 1:</u> Strengthened national capacity for emergency obstetric and newborn care</p>	<p><u>Output indicators:</u></p> <ul style="list-style-type: none"> Public financing obtained for the road map for reducing maternal and infant mortality <p>Baseline: 0 CFA francs in 2011; Target: 2 million CFA francs (2017)</p> <ul style="list-style-type: none"> Percentage of health districts that offer emergency obstetric and neonatal care <p>Baseline: 0% (2011); Target: 100% (2017)</p>	<p>Ministry of Health and Social Welfare; Ministry of Information and Tourism</p> <p>Cuban Cooperation Agency; Foundation for the Development of Nursing; Jhpiego (formerly Johns Hopkins Program for International Education in Gynecology and Obstetrics); Spanish Federation of Nursing Sisters; United Nations Children's Fund; World Health Organization</p>	<p>\$5.9 million (\$0.9 million from regular resources and \$5 million from other resources)</p>
<p>Family planning</p> <p><u>Output indicator:</u></p> <ul style="list-style-type: none"> Contraceptive prevalence rate <p>Baseline: 2.8% (1994);</p> <p>Target: to be based on analysis of data from the demographic and health survey analysis, by mid-2012</p>	<p><u>Output 1:</u> Strengthened national systems for reproductive health commodity security</p>	<p><u>Output indicator:</u></p> <ul style="list-style-type: none"> Percentage of national personnel in health establishments trained in logistics management <p>Baseline: 57% (2005); Target: 100% (2017)</p>	<p>Ministry of Health and Social Welfare; Ministry of Information and Tourism</p> <p>Cuban Cooperation Agency; Foundation for the Development of Nursing; Jhpiego (formerly Johns Hopkins Program for International Education in Gynecology and Obstetrics); Spanish Federation of Nursing Sisters; United Nations Children's Fund; World Health Organization</p>	<p>\$0.8 million from regular resources</p>
<p>Young people's sexual and reproductive health and sexuality education</p> <p><u>Output indicator:</u></p> <ul style="list-style-type: none"> National in-school sexuality education strategy in place. Baseline: not in place; Target: in place 	<p><u>Output 1:</u> Improved programming for essential sexual and reproductive health services for marginalized adolescents and young people</p>	<p><u>Output indicators:</u></p> <ul style="list-style-type: none"> Number of policies for young people elaborated and implemented by the Government <p>Baseline: 0; Target: 1</p> <ul style="list-style-type: none"> Programme focusing on the sexual and reproductive health of young people elaborated <p>Baseline: 0; Target: 1 (2017)</p>	<p>Ministry of Health and Social Welfare; Ministry of Information and Tourism</p> <p>Cuban Cooperation Agency; Foundation for the Development of Nursing; Jhpiego (formerly Johns Hopkins Program for International Education in Gynecology and Obstetrics); Spanish Federation of Nursing Sisters; United Nations Children's Fund; World Health Organization</p>	<p>\$0.8 million from regular resources</p>

<p>National priorities: (a) improve the socioeconomic and cultural well-being of the population; (b) enhance good governance; and (c) promote a sustainable environment</p> <p>UNDAF outcome number 5: strengthened capacity of public institutions to promote and defend human rights and gender equality</p>				
UNFPA strategic plan outcome	Country programme outputs	Output indicators, baselines and targets	Partners	Indicative resources
<p>Gender equality and reproductive rights</p> <p><u>Outcome indicator:</u></p> <ul style="list-style-type: none"> Percentage of women in Parliament <p>Baseline: 10% (2009); Target: 50% in 2017</p>	<p><u>Output 1:</u> Strengthened national capacity to implement international agreements, national legislation and policies in support of gender equality and reproductive rights</p>	<p><u>Output indicators:</u></p> <ul style="list-style-type: none"> Family code approved and promulgated <p>Baseline: a draft has been drawn up; Target: Code promulgated (2015)</p> <ul style="list-style-type: none"> Law on gender-based violence approved <p>Baseline: no law is in existence; Target: Law is approved and promulgated by 2014</p> <ul style="list-style-type: none"> Number of functional structures for the implementation of the gender policy at the provincial level <p>Baseline: 2; Target: 7</p>	<p>Ministry of Social Affairs and Women's Promotion; Ministry of Justice, Religious Affairs and Penitentiary Institutions; National Human Rights Commission; Office of the Prime Minister; United Nations Entity for Gender Equality and the Empowerment of Women</p>	<p>\$1.95 million (\$1.25 million from regular resources and \$0.7 million from other resources)</p>
<p>National priorities: (a) improve the socioeconomic and cultural well-being of the population; (b) enhance good governance; and (c) promote a sustainable environment</p> <p>UNDAF outcome number 6: a national statistics system is in place, providing reliable, periodic data for public policy development and monitoring</p>				
<p>Data availability and analysis</p> <p><u>Outcome indicator:</u></p> <ul style="list-style-type: none"> Regular availability of statistics disaggregated by age, sex and residence <p>Baseline: not available; Target: available by 2017</p>	<p><u>Output 1:</u> Enhanced national capacity to produce, analyse and disseminate high-quality statistical data on population dynamics, youth, gender equality and sexual and reproductive health, including in humanitarian settings</p>	<p><u>Output indicators:</u></p> <ul style="list-style-type: none"> National Institute of Statistics operational <p>Baseline: not operational; Target: operational by 2015</p> <ul style="list-style-type: none"> National statistical system provides updated, reliable and accessible information <p>Baseline: updated and reliable data not provided; Target: updated and reliable data available in the system</p> <ul style="list-style-type: none"> Population and housing census undertaken <p>Baseline: the last census undertaken in 2001; Target: census undertaken by 2017</p> <ul style="list-style-type: none"> Sector-specific statistical monographs in place <p>Baseline: 1; Target: 4 by 2017</p>	<p>Line ministries (Agriculture, Education, Health, Labour); Ministry of Economy; Ministry of Planning; Treasury Department</p> <p>African Development Bank; Food and Agriculture Organization of the United Nations; World Bank</p>	<p>\$9.6 million (\$0.5 million from regular resources and \$9.1 million from other resources)</p> <hr/> <p>Total for programme coordination and assistance: \$0.75 million from regular resources</p>