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United Nations Population Fund

UNFPA strategic plan, 2022-2025
(DP/FPA/2021/8)

Annex 4
Global and regional programmes

5. Eastern Europe and Central Asia regional programme (2022-2025)

Contents

I.   Programme rationale

1.   Despite progress towards the three transformative results and implementation of the International Conference on Population and Development (ICPD) Programme of Action in the context of the Sustainable Development Goals (SDGs), challenges for those left furthest behind and societies in general in Eastern Europe and Central Asia (EECA) region remain. The diverse countries and territories of the region have made progress in securing the rights of people to universal access to sexual and reproductive health in recent years, which has led to a sustained reduction in maternal mortality, new legal frameworks and positive steps towards building the necessary systems for reproductive rights and gender equality. However, the challenges related to the unfinished ICPD agenda persist. These relate to national concerns around (a) demographic change, particularly low fertility, ageing populations and outmigration; (b) the relatively high unmet need for family planning;(c) the uneven access to information, education and services that ensure sexual and reproductive health for all; (d) a growing conservatism and pushback against women's rights, which reinforces traditional and harmful gender norms and increases discrimination; (e) the limited progress towards ending gender-based violence and harmful practices; and (f) gaps in fulfilling the potential of all young people. The recent increase in conflict and political turbulence as well as the COVID-19 pandemic have further pushed back progress and raised new uncertainties for people in the region, especially those left furthest behind.

2.   Among the particular challenges to achieving the full implementation of the ICPD Programme of Action are the need to (a) build demographic resilience in the region; (b) increase the capacities of Governments to predict demographic shifts and to better understand their implications for individuals, families, communities, municipalities and nations; and (c) develop policy responses based on evidence and human rights. The Eastern Europe, Western Balkans and Caucasus subregions are in the final stages of a demographic transition, with low fertility and ageing as key characteristics. The Central Asian countries are characterized by proportionally higher percentages of young people. Both clusters experience strong migration flows, though these tend to have different directions: in the first cluster, it is primarily oriented towards the European Union, while in the second one, the main destination country is the Russian Federation. Concerns about low fertility or ageing populations – coupled with outmigration, which have been leading to population declines – have resulted in a certain 'demographic anxiety' that is felt in many countries of the region. In some countries, this has led to the formulation of policies – aimed at limiting women's access to sexual and reproductive rights. At the same time, in this political context, the space for progressive civil society is shrinking rapidly across Europe, where civil society organizations have traditionally been instrumental in mobilizing political support for gender equality and sexual and reproductive health and reproductive rights.

3.   Despite being classified as middle-income countries with the assumed concomitant characteristics, many countries in the region are lagging in terms of the maturity of their population data systems for well-informed policymaking, which is based on reliable and transparent evidence.

4.   Challenges also exist concerning achieving sexual and reproductive health and reproductive rights for all, with uneven access to and use of modern contraception and the unmet need for family planning, particularly among people with disabilities, young people, marginalized groups and those living in fragile settings. In six EECA countries, the unmet need for modern contraception is over 40 per cent, while the levels of modern contraception use in some countries are comparable to those of the least developed countries.

5.   While most EECA countries have made impressive gains in terms of maternal mortality, the lifetime risk of maternal death is still high, particularly in Central Asia and the South Caucasus. Cervical cancer incidence and mortality in the region is ten times higher than in the European Union: more than 21,000 deaths and 46,000 new cases registered annually in these countries could be prevented if effective prevention programmes were in place. While the number of new infections of HIV has declined globally by 23 per cent since 2010, the infections in the region have increased by 72 per cent, leading to a total of 1.7 million people living with HIV. In 2020 there were 170,000 new HIV infections and 35,000 new AIDS-related deaths in the region.

6.   The 53 million young people in the region represent an enormous potential for the region. However, many see their hopes and dreams adversely affected by an education system that does not match the needs of labour markets and face youth unemployment. Overall in the region, 12.8 per cent of males and 17.1 per cent of females are not in employment, education or training. While there are signs of improvement, many young people in the region do not have full access to comprehensive sexuality education or access to youth-friendly health services – and the situation is worse for marginalized young people.

7.   Adolescent fertility rates range from 9 per 1,000 in Bosnia and Herzegovina to 57 per 1,000 in Tajikistan; there are large variations also between different youth groups; and many young women and girls become pregnant unplanned, many of whom resort to abortion. HIV is a growing problem, with only 27.7 per cent of youth aged 15-25 years in the region correctly identifying ways to prevent HIV and rejecting major misconceptions about HIV transmission. In light of these developments, a significant number of young people leave their countries to look for opportunities elsewhere.

8.   Young people were dramatically affected by the COVID-19 pandemic. School closures, disruptions to formal and informal work, fractured social networks and diminished access to services will continue to negatively affect young people long after the pandemic is brought under control. Mental health has emerged as a specific concern; during the pandemic but also in general, young people feel a loss of control as they are often marginalized from participating in decision-making processes affecting their lives.

9.   Adverse political and social norms undermine reproductive rights and continue to result in discrimination against women and girls, with a widespread persistence in violence and harmful practices, such as child marriage, gender-biased sex selection and, in some communities, female genital mutilation. In 2019, 70 per cent of women experienced some form of violence in their lifetime, with 31 per cent experiencing physical or sexual violence in Eastern Europe. The COVID-19 pandemic curfews and "lockdown" measures have, unfortunately, led to an increase in gender-based violence (GBV) and undermined existing GBV response efforts. The adoption of the Council of Europe Convention on preventing and combating violence against women and domestic violence (known as the Istanbul Convention) is driving commitments to end GBV.

10.   While some countries have legal frameworks and policies to protect the rights and safety of key populations, discrimination, exclusion and violence based on sexual orientation and gender identity persist. Hate speech against key populations has been on the rise in the region and a rise in premeditated and brutal attacks on key populations people have been reported, including in Central Asia. Stigma and discrimination towards key populations at risk of HIV (men who have sex with men, sex workers, transgender people, people who inject drugs and prisoners) and people living with HIV manifest in the region, with more than 70 per cent of the population expressing discriminatory attitudes. All countries in the region criminalize HIV transmission and nearly all criminalize HIV exposure and non-disclosure of HIV status, with some countries criminalizing men who have sex with men and sex workers.

11.   Over the last four years, the number of people that were affected by natural disasters and conflicts in the EECA region has remained extremely high. Peace-responsive and development efforts in a number of countries in the region are affected by emergencies or protracted crises, whether they are natural disasters or man-made conflicts. In addition, the COVID-19 pandemic has affected all 250 million people living in the region, with a particularly high mortality rate among older people and the most vulnerable. As of mid-2021, eight countries in the EECA region are ranked among those most at risk in the world – with an INFORM Risk Index[1] that is either high (Azerbaijan and Armenia) or medium (Turkey, Ukraine, Tajikistan, Georgia, Bosnia and Herzegovina, and Kyrgyzstan) – particularly considering (a) higher exposure to natural and man-made disasters; (b) greater socioeconomic vulnerability of the most vulnerable groups; and (c) greater lack of coping mechanisms.

12.   Opportunities also exist. There are high levels of tertiary education and high, but unequal, levels of access to technology. The availability and affordability of connectivity in countries, such as Albania, Bosnia and Herzegovina, Georgia, Moldova, North Macedonia, Serbia, Turkey and Ukraine, have improved in recent years; in all but Bosnia and Herzegovina and Ukraine, more than 95 per cent of the population were covered by 4G-speed mobile networks or faster in 2019. The price for mobile broadband services has decreased in all countries, except North Macedonia and Ukraine, between 2018 and 2019.

II.   Programme priorities and partnerships

13.   The overall vision of the Eastern Europe and Central Asia regional programme is to amplify UNFPA results in the region through regional advocacy, knowledge management and state of the art technical assistance. Based on the specific role of the regional office to enable country-level results, the regional programme will support country efforts to give greater priority to those left furthest behind to achieve their sexual and reproductive health and rights. It will do so by addressing the various factors described in the previous section and translate them into

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[1] The INFORM Risk Index is a global, open-source risk assessment for humanitarian crises and disasters. It can support decisions about prevention, preparedness and response.

programme results and activities. The programme priorities will address the deeper societal, political, economic and cultural norms and attitudes that act as barriers to the achievement of sexual and reproductive health (SRH) and reproductive rights for all. The regional programme will maximize the potential of the EECA region while taking into account the megatrends across the region. To that end, the programme will build resilience, strengthen sustainability and harness digitalization across all outputs.

14.   Lessons learned from the experience of responding to the COVID-19 pandemic and the development evaluation of the previous programme have been incorporated into the new regional programme. These include further strengthening policy and programming with a priority on the hardest-to-reach vulnerable groups; strengthening advocacy to mobilize political support for the ICPD agenda and address the pushback on SRH and gender equality; developing more agility in programming to tackle emerging priorities; and continued regional office dynamism and innovation, as appreciated by all country offices.

15.   The regional programme will work with a full spectrum of partners, including all United Nations agencies and programmes, long-standing partners such as the European Union, traditional as well as new and emerging non-traditional donors and international financial institutions, to help countries mobilize knowledge and funding in support of this ambitious agenda. The impact of programming will be scaled up through partnerships that are delivering specific results and engage civil society organizations, with special attention given to those led by marginalized groups. In addition, the programme will continue its engagement with academic networks, parliamentarians, local authorities, inter-agency forums, youth and feminist organizations, social influencers and advocates of change, and the private sector. The partnerships will provide opportunities to combine resources and find innovative solutions, leverage the unique competencies of partners, and achieve "win-win" outcomes while tackling multisectoral challenges. South-South and triangular cooperation will be integrated into all thematic areas; also, additional opportunities will be found to leverage such forms of cooperation towards achieving the three transformative results and advancing gender equality and youth engagement, as well as South-South and triangular cooperation in humanitarian contexts.

16.   Leveraging the successes of engagement in regional partnerships platforms and mechanisms, including through issue-based coalitions, the regional office will continue to accelerate joint action towards the achievement of ICPD Programme of Action and the SDGs through the United Nations development system reform efforts. The programme will thereby complement country-level work by creating an enabling policy environment, influencing regional frameworks and processes and providing joined-up technical expertise and tools that will add value across the region.

17.   The Eastern Europe and Central Asia Regional Office will also continue to strengthen its collaboration with other regional offices, building inter alia on work with Asia and the Pacific Regional Office on gender-biased sex selection and population change; and with the Arab States Regional Office on youth, peace and security, and on contraception. It will also work with other regional offices on knowledge sharing related to digital training platforms on SRH; in particular, it will provide the regional offices with access to the online training platform it supports on virtual contraceptive consultation, for further roll-out beyond the EECA region.

18.   Considering the heterogeneity of the countries in the region, in terms of exposure to hazards, the vulnerability of people and the coping capacity of the different Governments and national and local actors, the regional office is mainstreaming preparedness into its longer-term programming to strengthen the resilience of the institutions, communities and individuals, with a particular focus on the most vulnerable groups as well as countries most at risk for humanitarian crises (based on the INFORM index). Additionally, the design of emergency responses in the region will help save lives while building back better, empowering individuals and strengthening services.

Accelerating the reduction of unmet need for family planning, preventable maternal deaths and gender-based violence and harmful practices

A.   Output 1: Policy and accountability

By 2025, sexual and reproductive health and reproductive rights, as well as the prevention and response to gender-based violence and harmful practices, are integrated into universal health coverage-related policies and plans, and other relevant laws, policies, plans, and accountability frameworks.

19.   The regional office will drive policy change and accountability aimed at the integration of sexual and reproductive health and reproductive rights, particularly within universal health coverage, as well as concerning

regional and national policies, plans and accountability frameworks related to population, gender, GBV and youth. It will work closely with the World Health Organization (WHO) regional office for Europe on the implementation of the 2016 WHO regional action plan for sexual and reproductive health.

20.   This output will contribute to the transformative goals by (a) influencing regional inter-agency task forces, professional associations and academic networks to address leaving no one behind in sexual and reproductive health and rights policy frameworks; (b) advancing policy dialogue for integrating and sustaining essential SRH services packages under the universal health coverage (maternal and child health, family planning, cervical cancer, prevention of sexually transmitted infections and HIV, infertility and adolescent and youth-friendly sexual and reproductive health services); (c) supporting the intercountry, triangular and intersectoral cooperation and building thematic alliances for strengthening national institutional capacities and health systems; (d) strengthening policies and plans on readiness in the Minimum Initial Service Package (MISP) for SRH in crisis situations, in line with the outcomes of the MISP readiness assessment in the EECA region; and (e) the integration of prevention and response to GBV in emergencies in national and sectoral preparedness and response plans, with the participation of youth and women in situations of marginalization and vulnerability in these processes.

21.   The programme will also work to strengthen the design and implementation of normative and policy frameworks to advance gender equality and women's rights by spearheading and strengthening partnerships for gender equality and the rights of women and girls, engaging with multilateral institutions to leverage and increase work on gender equality and women's rights and increase and protect the regional political commitment to gender equality and the rights of women and girls.

22.   Likewise, based on the foundation of strong data, the programme will also include interventions focused on "demographic intelligence" and its utilization for policy purposes. The regional demographic resilience programme will support countries in understanding, anticipating and responding to demographic change and its policy implications, such as prevailing population trends, including ageing, population decline and outmigration. It includes advocacy for human rights-based population policies and technical support in their formulation, deployment and monitoring and evaluation.

23.   UNFPA will promote regional policy spaces as bearers of sound principles for policies and participation of young people, particularly those left furthest behind. UNFPA will open doors and make space for the participation of young people and support their participation and leadership, collaborate with and strengthen youth-led and youth-serving organizations. The engagement at the regional and global levels will reinforce the work of country offices. As a result, the challenges, needs and possible policy solutions for young people will be on the regional agendas for governments and organizations.

B.   Output 2: Quality of care and services

By 2025, strengthened capacity of systems, institutions, and communities to provide quality, comprehensive sexual and reproductive health information and services, including supplies, as well as essential services to address gender-based violence and harmful practices

24.   The regional programme will support EECA countries to (a) develop and sustain evidence-based guidelines and high-quality monitoring tools for the human rights-based SRH services; (b) increase public awareness and strengthen institutional capacities of the sexual and reproductive health workforce by developing digital health platforms and mobilizing partners' products: (c) strengthen the professional and academic networking for knowledge management between regional and global institutions and societies (midwives, obstetric/gynaecologists and general practitioners); (d) strengthen human rights-based approaches to reproductive health commodity security by expanding access to a choice of family planning methods for all, with a focus on those most vulnerable and marginalized; and (e) adapt the multisectoral response to GBV to the needs of persons living with disabilities, Roma women and girls and people living with HIV. This will be done while working towards sustainability by advocating for national investment and institutionalizing multisectoral responses at the country and local levels.

25.   UNFPA will provide technical and programmatic support to country offices to advocate for the expansion of the Global HIV Prevention Coalition, with a prioritization on prevention, and securing national ownership of the HIV response, leading to accelerated and sustained HIV prevention in the region. UNFPA will also build the capacities of regional partners to strengthen community-led research and monitoring of the human rights violations of key populations, thus improving the outreach and inclusiveness of HIV policies and programmes. UNFPA will

provide advocacy and awareness-raising and share good practices to address stigma and discrimination towards key populations and people living with HIV, promote stigma-free HIV/SRH/GBV services, increase the uptake of rights-based HIV and STI programming tools, and boost the utilization of digital solutions, resulting in increased access to HIV/SRH information and services by those most marginalized and the communities left furthest behind.

26.   By accelerating HIV prevention and improving the inclusiveness of HIV policies, increasing access to stigma-free HIV/SRH/GBV information and services, strengthening resilience and sustainability of the community-led HIV response and addressing emerging trends in the HIV epidemic, UNFPA will contribute to achieving the three transformative results and eliminating AIDS as a public health threat in the EECA region by 2030.

C.   Output 3: Gender and social norms

By 2025, strengthened mechanisms and capacities of actors and institutions to address discriminatory laws, social norms and practices that hinder gender equality and women's decision making

27.   UNFPA recognizes that without the transformation of fundamentally unequal gender relations and structures of power, there will be no progress in ensuring that everyone can exercise bodily autonomy, enjoy their rights and access opportunities free from discrimination, exclusion, and violence. Accordingly, the programme will have a strong focus on gender-transformative initiatives, supporting the creation of an enabling environment for gender equality. This will encompass an increase in knowledge on the situation of gender and gender equality in the region through research and analysis of all available data and evidence. Aligned with the transformative result to accelerate the reduction of all forms of gender-based violence and harmful practices, the strategy will work to increase knowledge and evidence on GBV through the collection, analysis and use of data and new evidence on GBV, gender-biased sex selection and other harmful practices to feed into advocacy and sensitization among key stakeholders. It will also work to increase knowledge on the perceptions of gender and gender equality in the region, and on gender equality and the rights of women and girls to understand and adapt its work in light of the global, regional and national political, social and economic changes. The overall knowledge and best practices on engaging men and boys will be shared through the regional MenEngage Platform.

28.   To support the overall enabling environment for gender equality by expanding meaningful work with men and boys to change unequal power relations and engage them as allies and agents of positive change, and also work with relevant partners to develop tools, knowledge and good practices to change harmful social norms and practices. This will be done by working to change policies, including family-friendly policies in the public and private sector, and to support Governments to provide enabling environments for these policies.

29.   As the overall political and social context requires a strong push towards ensuring commitments to gender equality and the rights of women and girls in the region, the regional strategy will catalyse and spearhead mobilization and political support to sexual and reproductive health and rights and gender equality by fostering partnerships for gender equality and the rights of women and girls with other United Nations agencies; civil society organizations and relevant decision-makers.

D.   Output 4: Population change and data

By 2025, strengthened data systems and evidence to account for population changes and megatrends including ageing and climate change, in development policies and programmes, especially those related to sexual and reproductive health, and reproductive rights

30.   Activities will comprise several interventions aimed at strengthening population-based data collection to support the production of demographic intelligence and tracking key indicators related to the SDGs and the ICPD. These efforts will support advocacy, technical assistance and multilateral cooperation, as well as addressing data needs for humanitarian action, an area where the role of UNFPA needs to be strengthened.

31.   The work on population data will serve as a foundation for the other outputs and will support the use of data by country offices to advocate for effective national and subnational planning, implementation and monitoring of the three transformative results. The emphasis on leaving no one behind is strongly reflected by a focus on inequalities, to support processes that allow the identification and visibility of population groups that are the most excluded or marginalized, a prerequisite for taking action. In addition, sustainability will be built into many of the proposed interventions through an emphasis on capacity development and strengthening UNFPA partnerships and

resource mobilization. Digitalization will be harnessed through innovations in data gathering, be it through the increased use of administrative data or computer-assisted interview modalities.

32.   Interventions will focus on support to major statistical data-collection operations, such as population censuses and population-based international surveys as well as the increased use of administrative data to supplement such data. Underlying these aspects is an effort to promote the principle of "open data", to gain better access to and utilization of disaggregated data. In this regard, access to disaggregated data for humanitarian preparedness and response through common operational datasets on population statistics is an important feature.

E.   Output 5: Adolescents and youth

By 2025, strengthened skills and opportunities for adolescents and youth   to ensure their bodily autonomy, leadership and participation, and to build human capital

33.   The regional office will enhance the capacities of country offices to provide evidence, technical guidance and assistance within UNFPA's comparative advantages on young people's participation, including young people in humanitarian action; youth, peace and security; youth indices; voluntary national reviews; the universal periodic review and the SDGs; youth advocacy; investment in young people; addressing social norms; rights and inclusion; and comprehensive sexuality education in schools and out of schools. The country offices will be more effective in providing policy solutions, advocacy, opening spaces for youth participation and supporting young people's organizations. Policies and programmes are more effective in addressing the needs of young people when young people can participate and relevant evidence about their challenges and solutions are presented.

34.   UNFPA will expand models for community-based youth engagement, peer-to-peer online learning and counselling and will advocate for the promotion of healthy lifestyles, HIV awareness and life skills-building, including through comprehensive sexual education and toolkits for young key populations. This will lead to increased awareness on HIV/STIs and safer behavioural practices among young key populations and youth affected by or living with HIV. Support will be provided to regional youth organizations and networks of young key populations to strengthen their capacities and to ensure their meaningful participation and leadership in policymaking and HIV programming.

Enhancing organizational effectiveness and efficiency

F.   OEE 1: Improved programming for results

35.   The regional office will provide guidance and technical support to the country office to ensure the next generation of programmes articulate and implement the transformative ambition of the UNFPA strategic plan, 2022-2025. All ongoing country programmes will be aligned to the new strategic plan so that they support increased acceleration towards achieving the three transformative results, driven by national development priorities and goals, as articulated in respective United Nations Sustainable Development Cooperation Frameworks.

36.   The regional office will continue to strengthen country offices efforts by focusing on collective accountability and institutionalizing learning and adaptability into all practices. It will also strengthen adaptive programming, track the application of results-based management principles and standards, real-time monitoring, and increase the capacity to provide peer-to-peer support, strengthen knowledge management and pursue evaluation-design approaches geared towards maximizing organizational learning.

37.   For accountability, the regional office will promote the in-built capabilities of all business units and mechanisms that advance organizational stewardship of internal and system-wide commitments under United Nations development system reform, the 2020 quadrennial comprehensive policy review recommendations, the ICPD25 voluntary commitments, social and environmental standards, and the use of evaluation.

38.   In addition, the regional office, in collaboration with headquarters, will build the capacity of country offices on scenario planning as part of its resilience-strengthening curriculum, to remain future-ready. The planning and costing of country programmes and humanitarian response plans will be enhanced by using UNFPA evidence-based knowledge packages.

G.   OEE 2: Optimized management of resources

39.   The regional office will (a) optimize and strengthen the staffing structure and capacity of the country offices to ensure cost-effective programme implementation and achievement of results; (b) adapt its business practices and scale up innovative approaches to achieve operational efficiency gains; (c) focus on risk management, a 'value-for-money' approach and greater accountability, building on the implementation of recent audit recommendations; and (d) maintain a strong performance culture through the "one team" approach.

H.   OEE3: Expanded partnerships for impact

40.   The regional programme has developed an integrated resource mobilization and partnership plan that highlights the context, previous achievements, challenges and opportunities; based on this analysis, it identifies the following key activities for 2022-2025 to maximize donor fundraising and impactful strategic partnership: (a) continue the implementation of existing traditional donor-funded programmes; (b) strengthen resource mobilization relationships; (c) pilot new partnerships and innovative financing models; (d) develop new activities to strengthen domestic co-financing and core contributions; and (e) identify and support of EECA strategic partnership champions. These activities aim to provide a solid foundation for expanded resource mobilization and partnership for both the regional office and the country offices. The plan includes estimated resource mobilization (co-financing) of $8.1 million (in addition to the core resources needed) to achieve the programme objectives.

41.   The partnership strategy reflects several robust choices made on investment in collaboration: objective-driven, based on the type of partnerships and partners, and the modalities of engagement. The partnership plan is fully aligned with the regional resource mobilization strategy and the partnership plans of the country offices.

42.   In support of achieving the regional programme results, the regional office will further expand its communication efforts to strengthen the visibility and profile of UNFPA as a thought leader on ICPD issues and to help generate support for the ICPD agenda and the regional advocacy priorities in the EECA region. A particular focus will be placed on leveraging new and existing partnerships for visibility and outreach to new audiences, strengthening communications capacities across the organization in the region, enhancing efforts to influence social norms, and supporting resource mobilization. The programme aims to strengthen the capacities in the region to respond to misinformation and to promote the core mandate of UNFPA by implementing the 'shield' initiative, in line with the communication strategy of the UNFPA strategic plan, 2022-2025.

III.   Programme and risk management

43.   A robust institutional coordination arrangement will continue to oversee programme and risk management inter alia through the programme team, the senior management team and other mechanisms, such as the new enterprise risk management system. The regional office will continue to follow internal audit processes; it has incorporated the previous recommendations into the new programme and operational procedures. Workplans will be developed, including for relevant external partners, and managed through the enterprise resource planning system, and will be implemented through the harmonized approach to cash transfers with other United Nations agencies to manage financial risks. UNFPA workplans and agreements will ensure the organization's social and environmental standards, including grievance mechanisms and dispute resolution.

44.   The programme will sustain effective linkages with partners, regional bodies and other United Nations agencies to influence the regional environment, engender regional and national ownership and promote mutual accountability. The regional office will continue to harness regional expertise to deliver on the regional and country programmes, such as the International Advisory Panel on Population and Development and other academic networks.

45.   Building on its existing "team" approach, the regional office will ensure responsiveness to country office needs and realities and will ensure thorough knowledge networking, risk management and co-creation through thematic focal points, strategic meetings with representatives and heads of office and with the ad hoc solutions team on critical cross-cutting dimensions, such as leaving no one behind, social norm change and digitalization.

46.   The regional programme takes into account the current COVID-19 context and will use adaptive management to ensure both responsiveness and resilience to the pandemic and other societal "shocks". In light of the fragile

economic situation in the region and for lasting impact, the programme has also integrated sustainability into its interventions.

47. In preparing the programme, the regional office identified the root causes and risks related to the implementation of the ICPD agenda. These include political and social pushback, reduction of public space for civil society, lack of data, inadequate resource allocation and shifting national or donor priorities. Risks also include those posed by conflicts and other emergencies. The relevant business continuity plans are in place for dealing with such contingencies, and programmatic interventions have been developed to mitigate such challenges. Staff capacities are in place but will continue to be enhanced through learning and training.

48. Underachieving in resource mobilization and partnership aspirations risk limiting UNFPA programmes, both in scale and impact. The five activities described under OEE Output 3 are designed to drive and maintain donor and partner engagement while mitigating risks; however, shifting donor priorities in the region and the economic impact of the COVID-19 pandemic are threats that cannot be fully mitigated.

IV. Monitoring and evaluation

49. The regional office will adopt an adaptive management approach where UNFPA staff are agents of change in increasing programme and management effectiveness. This is to evolve from the current linear result-based management approach to a systematic, people-centric model based on continuous learning for adaptation. Change agents need direction, guidance and tools, but not necessarily another framework.

50. The regional office has commissioned a developmental evaluation of the regional programme, the first of its kind at the programme level in UNFPA. The approach draws from learnings from the past and anticipatory action forward. Past information includes evidence from results and changes in context; it allows UNFPA to react and adapt to constant changes. The approach will allow the regional office to proactively generate new opportunities and anticipate changes required to accelerate the transformative results.

51. The regional office is preparing the regional programme integrated results framework, with annual targets against each indicator, and tracking results on an annual basis. Indicator guidelines, which include indicator definitions, data requirements and sources, will be developed to keep measurement consistent over the time frame of the regional programme. The regional office will also provide technical assistance to country offices for developing robust results frameworks for their new country programmes, facilitate real-time monitoring of country programmes and support evidence-based decision-making.

52. The availability of good-quality evaluations supports UNFPA accountability to stakeholders on programme performance and achievements and generates knowledge and advice for future programming. These evaluations require timely planning, the availability of skilled experts to conduct evaluations, and sufficient resources to implement evaluations. To do this, the regional office is helping country offices prepare a regional budgeted biennial evaluation plan, including regional and country programme evaluations, for the Evaluation Office to submit to the Executive Board. In addition, the regional office will conduct a final evaluation of the regional programme in 2023. The key objective of the final evaluation will be to draw lessons from the new adaptive management.

Annex 1: Results and resources framework for the Eastern Europe and Central Asia regional programme (2022-2025)

UNFPA strategic plan, 2022-2025, Goal: Achieved universal access to sexual and reproductive health and realization of reproductive rights, and accelerated progress on the implementation of the ICPD Programme of Action	
UNFPA strategic plan, 2022-2025, Outcome 1: By 2025, the reduction of preventable maternal deaths has accelerated	**Indicative resources** $6.5 million: ($4.05 million from regular resources and $2.45 million from other resources
UNFPA strategic plan, 2022-2025, Outcome 2: By 2025, the reduction of unmet need for family planning has accelerated	**Indicative resources** $8.6 million ($5.4 million from regular resources and $3.2 million from other resources)
UNFPA strategic plan, 2022-2025, Outcome 3: By 2025, the reduction in gender-based violence and harmful practices has accelerated	**Indicative resources** $6.5 million: ($4.05 million from regular resources and $2.45 million from other resources)
Organizational Effectiveness and Efficiency	**Indicative resources** $2.1 million: ($2.1 million from regular resources and $0 from other resources)

Regional Programme output	Output indicators, baselines and targets	Partner contributions	Indicative resources
<u>Output 1:</u> By 2025, improved integration of sexual and reproductive health and reproductive rights, as well as the prevention of and response to gender-based violence and harmful practices, into universal health coverage-related policies and plans, and other relevant laws, policies, plans, and accountability frameworks	• Number of EECA countries with national SRH/RR policies, programmes and actions plans in which UHC (to at least 4 Maternal Health, FP, CxCa, HIV) essential SRH services) are mainstreamed with support of RO Baseline (2021): 0; 2022Target: 2, 2023Target: 5 2024Target: 7, 2025Target: 8 (cumulative) • Number of priority countries that pilot the implementation of a newly developed regional strategy to enable Roma women and girls to fulfil their SRHR. Baseline (2021): 0; 2022Target: 2, 2023Target: 3 2024Target: 4, 2025Target: 5 (cumulative) • Number of countries participating in the regional cervical cancer prevention alliance. Baseline: 0; 2022 Target: 5, 2023 Target: 8, 2024 Target: 15, 2025 Target: 17 (cumulative)	WHO, ANSER, EEIRH, SEEHN, IARC, ICCPA, private sector, ROMA Action Alliance and CSOs, HelpAge, UNECE, academia (Charles University, Higher School of Economics, Russian Academy of Sciences) Population Europe, Titchfield City Group on Ageing (TCGA), European Commission.	$4.0 million: ($4.0 million from regular resources and $0 million from other resources)

	• Number of priority EECA countries that benefit from RO technical expertise, knowledge products and advocacy to ensure LNOB principles integrated into new SRH/RR policies, action plans and monitoring frameworks. Baseline (2020): 0; 2022 Target: 3, 2023 Target: 5 2024 Target: 7, 2025 Target: 8 (cumulative) • Number of declarations, official statements and official agendas that include GE and SRHR in EECA with support from UNFPA. Baseline (2021): 0; 2022Target: 3, 2023Target: 6 2024Target: 8, 2025Target: 10 (cumulative) • Numbers of countries (among the 8 priority countries with the highest INFORM index in EECA in 2021that improve their readiness to implement the MISP at the onset of a crisis, with the support of the regional office) Baseline (2021): 0; 2022Target: 0, 2023Target: 0, 2024Target: 0, 2025Target: 5 (cumulative) • Number of countries with national and a sectoral preparedness and response plan that use the integrated prevention of and response to GBV in emergencies prioritized via the INFORM index in EECA Baseline (2020): 0; 2022Target: 2, 2023Target: 2, 2024Target: 3, 2025Target: 7 • Number of EECA countries and territories where regional office supported rights-based population policies to address demographic challenges or opportunities. Baseline (2020): 7; 2022Target: 9, 2023Target: 11 2024Target: 13, 2025Target: 15 (cumulative) • Number of EECA countries and territories with national development policies and programmes in which ageing is mainstreamed with the support of the regional office. Baseline: 3; 2022Target: 5, 2023Target: 7 2024Target: 9, 2025Target: 11 (cumulative) • Number of regional intergovernmental processes with dedicated space for equal youth participation. Baseline: 1; 2022Target: 1; 2023Target: 1 2024Target: 2; 2025Target: 2 (non-cumulative)		

	• New regional outcome documents from regional bodies that recognized specific topics raised by young people, or address issues prioritized by young people. Baseline:0; 2022Target:2, 2023Target: 4 2024Target: 6, 2025Target: 8 (cumulative)		
Output 2: By 2025, strengthened capacity of systems, institutions and communities to provide high-quality, comprehensive sexual and reproductive health information and services, including supplies, as well as essential services to address gender-based violence and harmful practices.	• Number of countries where essential SRH service guidelines have been updated with RO support. Baseline: 0; 2022Target: 2, 2023Target: 5 2024Target: 8, 2025Target: 10 (cumulative) • Number of countries that successfully applied EECA road map for ending the unmet need for family planning to prioritize FP/RHCS in SRH/RR policies, strategies and costed actions plans in line with 25 recommended actions. Baseline: 0; 2022Target: 2, 2023Target: 4 2024Target: 6, 2025Target: 8 (cumulative) • Number of countries applying the regional SRH eLearning, knowledge-sharing platforms and other digital tools and with the support of the RO Baseline: 0; 2022Target: 2, 2023Target: 5 2024Target: 8, 2025Target: 10 (cumulative) • Number of countries with comprehensive MSR packages tailored to address identified excluded or marginalized groups, including women living with disabilities, Roma women, and others. Baseline: 0; 2022Target: 5, 2023Target: 8 2024Target: 12, 2025Target: 15 (cumulative) • Number of countries in EECA that are either members of the Global HIV Prevention Coalition or adopt an action plan for accelerating HIV prevention (cumulative). Baseline: 1; 2022Target: 2, 2023Target: 3 2024Target: 4, 2025Target: 4 • Number of CSOs and community networks that benefit from new regional initiatives and/or digital knowledge solutions addressing stigma and discrimination and increasing access to HIV/SRHR information and services for key populations (cumulative) Baseline: 0; 2022Target: 3, 2023Target: 6 2024Target: 9, 2025Target: 10	WHO, UNDP, UNICEF, UNAIDS, Global Fund, EEIRH, ESC, EBCOG, IARC, IFCPC, ECOM, EWNA, SWAN, EHRA.	$3.5 million: ($3.2 million from regular resources and $300,000 from other resources)

	• Number of countries where evidence from regional community-led studies on key populations incorporated in national HIV policies and responses (cumulative) Baseline: 0; 2022Target: 1, 2023Target: 3 2024Target: 4, 2025Target: 5 • Number of regional community-based organizations and networks of key populations that have developed new strategic plans and can access external funding, including through GFATM (cumulative): Baseline: 0; 2022Target: 1, 2023Target: 2 2024Target: 3, 2025Target: 4 (cumulative)		
Output 3: By 2025, strengthened mechanisms and capacities of actors and institutions to address discriminatory gender and social norms to advance gender equality and women's decision-making	• Number of countries that promote gender-responsive family-friendly policies in private sector companies and governments that offer gender-responsive family-friendly policies. Baseline: 5; 2022Target: 10, 2023Target: 15 2024Target: 15, 2025Target: 15 (non-cumulative) • Number of evidence, good practices and lessons learned documents and initiatives on engaging boys and men in gender equality and/or spearheading positive masculinities. Baseline: 4; 2022Target: 5, 2023Target: 6 2024Target: 10, 2025Target: 12 (non-cumulative) • Number of national and regional social norms surveys and analyses (IMAGES and other social norms surveys) conducted with UNFPA support. Baseline: 8; 2022Target: 10, 2023Target: 12 2024Target: 15, 2025Target: 15 (cumulative) • Number of civil society organizations participating in regional and international forums supported by UNFPA. Baseline:0; 2022Target: 4, 2023Target: 8 2024Target: 10, 2025Target: 20 (cumulative)	Private sector; Promundo; EC; IBC Gender; Academia; CSOs; UNFPA NY; APRO	$5.6 million: ($2.3 million from regular resources and $3.3 million from other resources)
Output 4: By 2025, strengthened data systems and evidence that take into account population changes and other megatrends including ageing and climate change, in development programmes and policies, especially those related to sexual and reproductive health and reproductive rights	• Number of EECA countries and territories conducted a population and housing census in the 2020 census round in agreement with international standards and recommendations. Baseline:1; 2022Target:1, 2023Target: 2 2024Target:3, 2025Target:3 (cumulative)	NSOs, UNECE, ESCAP, UNSD, Global Data Barometer (GDB), Higher Academia (Moscow Higher School of Economics, Hungarian	$6.1 million: ($2.1 million from regular resources and $4

	• Number of EECA countries and territories whose Civil Registration and Vital Statistics are assessed as "adequate" with support of regional office Baseline: 10; 2022Target: 10, 2023Target: 12 2024Target: 13, 2025Target: 15 (cumulative) • Number of EECA countries and territories where the RO has contributed to improved ODIN scores regarding population data Baseline: 7; 2022Target: 8, 2023Target: 10; 2024Target: 13, 2025Target:15 (cumulative) • Number of EECA countries and territories in which work on National Transfer Accounts is supported by the RO. Baseline:5; 2022Target:5, 2023Target: 6 2024Target: 7, 2025Target: 8 (cumulative) • Number of EECA countries and territories with ongoing work on producing national and subnational population projections. Baseline: 5; 2022Target: 5, 2023Target: 6 2024Target: 8, 2025Target: 10 (cumulative)	Demographic Institute, Bilgi University).	million from other resources)
Output 5: By 2025, strengthened capacity of critical actors and systems in preparedness, early action and in the provision of life-saving interventions that are timely, integrated, conflict- and climate-sensitive, gender-transformative and peace-responsive	• Priority countries that included sex and age disaggregated data at the subnational level in publically available national preparedness or response plans with regional office support. Baseline: 8; 2022Target: 8, 2023Target: 8 2024Target: 9, 2025Target: 12 (cumulative) • Number of countries that adopt key principles of the Compact for Young People in Humanitarian Action in national preparedness plans with regional office support. Baseline: 0; 2022Target: 1, 2023Target: 2; 2024Target: 3, 2025Target: 4 (non-cumulative) • Number of countries with updated Youth indices with RO support. Baseline: 4; 2022Target: 4, 2023Target: 5 2024Target:5, 2025Target: 6 (cumulative) • Number of COs implementing YPS programme with RO support. Baseline: 6; 2022Target:6, 2023Target: 6 2024Target: 8, 2025Target: 9 (cumulative)	Teenergizer, NSOs, OCHA, UNHCR, Y-Peer, European Youth Parliament, United Nations agencies, BZgA, IPPF, European Youth Forum.	$2.3 million: ($1.8 million from regular resources and $500,000 from other resources)

	• Number of countries in the EECA region that are reported to provide Comprehensive Sexuality Education. Baseline: 0; 2022Target: 0, 2023Target: 1 2024Target: 2, 2025Target: 3 (non-cumulative) • Percentage of young women and men aged 15-24 who both correctly identify ways of preventing the sexual transmission of HIV and who reject major misconceptions about HIV transmission (UNAIDS GAM) (cumulative): Baseline: 27.7%; 2022Target: 30%, 2023Target: 35% 2024Target: 40%, 2025Target: 45% • Number of countries that benefit from RO technical advice and knowledge solutions for better leadership and participation of young key populations in policymaking and HIV programming (cumulative): Baseline: 0; 2022Target: 2, 2023Target: 4 2024Target: 6, 2025Target: 8 • Number of regional youth organizations that apply out-of-school CSE and YKP programming tools to reach out to those furthest behind youth (cumulative): Baseline: 0; 2022Target: 1, 2023Target: 2 2024Target: 4, 2025Target: 5		
OEE 1: Improved programming for results	• Proportion of new country programmes that meet organizational quality standards: (a) technical quality; (b). Results-based management and evidence-based programming quality; (c). Addresses the needs of persons with disabilities criteria. (non-cumulative) Baseline: 67; 2022Target: 100, 2023Target: 100; 2024Target: 100, 2025Target: 100 • Proportion of evaluation reports assessed at least "good", as per the UNFPA evaluation quality assessment tool (non-cumulative) Baseline: 100; 2022Target: 100, 2023Target: 100 2024Target: 100, 2025Target: 100 • Proportion of accepted evaluation recommendation actions for which the actions due in the year have been completed. Baseline:100; 2022Target: 90, 2023Target: 90; 2024Target: 90, 2025Target: 90 (non-cumulative)	United Nations Evaluation Group, United Nations Country Team in EECA, Professional bodies e.g., European Evaluation Society.	$0.5 million: ($0.5 million from regular resources and $0 from other resources)

OEE 2: Optimized management of resources	- Proportion of offices in the EECA region with financial performance above 97% (non-cumulative). Baseline: 63% in 2020; 2022 Target: 70%, 2023Target: 75% 2024 Target: 80%, 2025Target: 85% - Implementation rate for regular resources (non-cumulative) Baseline: 91% in 2020; 2022Target: 97%, 2023Target: 97% 2024Target: 97%, 2025Target: 97% - Proportion of audit recommendations implemented by the due date (non-cumulative). Baseline: 25% in 2020; 2022Target: 75%, 2023Target: 80% 2024Target: 85%, 2025Target: 90% - Percentage of risk mitigation plans implemented for the offices which conducted risk assessment (non-cumulative). Baseline: 0 in 2020; 2022Target: 50%, 2023Target: 60% 2024Target: 70%, 2025Target: 80%	UNFPA COs in EECA, UNFPA NY.	$0.2 million: ($0.2 million from regular resources and $0 from other resources)
OEE 3: Expanded partnerships for impact	**Partnerships and SSTC**: - Proportion of regional IBCs co-chaired by UNFPA in the framework of the United Nations regional collaborative platform. Baseline: 30%; 2022Target: 30%, 2023Target: 30% 2024Target: 30%, 2025Target: 30% - Level of Regional Offices' support to SSTC (non-cumulative) Baseline: Low; 2022Target: Medium, 2023Target: Medium; 2024Target: Medium, 2025Target: High **Resource Mobilization**: - Proportion of annual resource mobilization targets met - **core** resources. Baseline: [2021 result]; 2022Target: 30%; 2023Target: 50%; 2024Target: 60%; 2025Target: 80% (non-cumulative) - Proportion of annual resource mobilization targets met - **non-core** resources Baseline: [2021 result or 2020 result = 83%)]; 2022Target: 70%, 2023Target: 80% 2024Target: 85%, 2025Target: 90% (non-cumulative) **Communication**:	Regional United Nations system; RCP; UNCTs and results groups; EECACOs; UNFPA NY; UNOSSC.	$1.4 million: ($1.4 million from regular resources, $0 million from other resources.)

	• Number of times UNFPA is mentioned in the media. Baseline: 3850 (2020); 2022Target: 4000, 2023Target: 4200; 2024Target: 4400, 2025Target: 4620 (cumulative) • Number of page views on the regional website. Baseline: 68,000 (2020); 2022Target: 71,740, 2023Target: 75,300 2024Target: 79,000, 2025Target: 83,000 (cumulative) • Number of followers on Facebook. Baseline: 5840 (2020); 2022Target: 6100, 2023Target: 6400; 2024Target: 6700, 2025Target: 7000 (cumulative) • Number of followers on Twitter. Baseline: 3138 (2020); 2022Target: 3300, 2023Target: 3500; 2024Target: 3700, 2025Target: 3900 (cumulative) • Number of followers on Instagram. Baseline: 2750 (2020); 2022Target: 2900, 2023Target: 3050 2024Target: 3200, 2025Target: 3400 (cumulative)		

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