

UNAIDS 2020

United Nations Population Fund (UNFPA)

Unified Budget Results and Accountability Framework
(UBRAF) 2016-2021

Organizational report 2018-2019

the 1990s, the number of people with diabetes has increased in all industrialized countries, and this increase is continuing at a rapid rate.

Diabetes is a chronic disease, and the long-term consequences of the disease are determined by the degree of glycaemic control. The most serious complications of diabetes are cardiovascular disease, nephropathy, retinopathy, and neuropathy. The prevalence of these complications is directly related to the duration and severity of the disease. The most common complication of diabetes is cardiovascular disease, which is the leading cause of death in people with diabetes. The prevalence of cardiovascular disease is directly related to the duration and severity of the disease.

The most common complication of diabetes is cardiovascular disease, which is the leading cause of death in people with diabetes.

The prevalence of cardiovascular disease is directly related to the duration and severity of the disease.

The most common complication of diabetes is cardiovascular disease, which is the leading cause of death in people with diabetes.

The prevalence of cardiovascular disease is directly related to the duration and severity of the disease.

The most common complication of diabetes is cardiovascular disease, which is the leading cause of death in people with diabetes.

The prevalence of cardiovascular disease is directly related to the duration and severity of the disease.

The most common complication of diabetes is cardiovascular disease, which is the leading cause of death in people with diabetes.

The prevalence of cardiovascular disease is directly related to the duration and severity of the disease.

The most common complication of diabetes is cardiovascular disease, which is the leading cause of death in people with diabetes.

The prevalence of cardiovascular disease is directly related to the duration and severity of the disease.

The most common complication of diabetes is cardiovascular disease, which is the leading cause of death in people with diabetes.

The prevalence of cardiovascular disease is directly related to the duration and severity of the disease.

The most common complication of diabetes is cardiovascular disease, which is the leading cause of death in people with diabetes.

The prevalence of cardiovascular disease is directly related to the duration and severity of the disease.

The most common complication of diabetes is cardiovascular disease, which is the leading cause of death in people with diabetes.

The prevalence of cardiovascular disease is directly related to the duration and severity of the disease.

The most common complication of diabetes is cardiovascular disease, which is the leading cause of death in people with diabetes.

The prevalence of cardiovascular disease is directly related to the duration and severity of the disease.

The most common complication of diabetes is cardiovascular disease, which is the leading cause of death in people with diabetes.

The prevalence of cardiovascular disease is directly related to the duration and severity of the disease.

The most common complication of diabetes is cardiovascular disease, which is the leading cause of death in people with diabetes.

The prevalence of cardiovascular disease is directly related to the duration and severity of the disease.

Contents

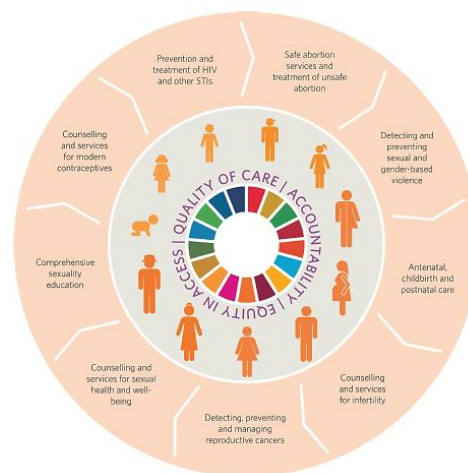
Key strategies and approaches to integrate HIV into broader agency mandate	2
Contributing to progress towards the SDGs	3
Case study: Reaching sex workers in Indonesia	7
Knowledge products	7

Key strategies and approaches to integrate HIV into broader agency mandate

UNFPA strives for a world in which every pregnancy is wanted, every birth is safe and every young person’s potential is fulfilled. Responding to HIV is a critical element of an essential sexual and reproductive health package and reaching universal access to SRHR, a key contribution to UHC.

The intrinsic connections between HIV and SRHR are well-established, and elaborated in the Essential Package: [SRHR: An Essential Element of Universal Health Coverage](#), produced for the Nairobi Summit on ICPD25 held in November 2019. HIV is predominantly sexually transmitted, which subsequently increases the risk of vertical transmission from mother to child.

Linking HIV and SRHR is also a key delivery platform for HIV prevention and critical for reaching SDG targets for human rights, gender equality and health targets. During the first biennium of implementation of UNFPA’s new Strategic Plan (2018–2021), UNFPA laid the foundation for supporting achievement of the SDGs through a primary focus on three transformative results by 2030: (a) ending preventable maternal deaths; (b) ending unmet need for family planning; and (c) ending gender-based violence and all harmful practices, including female genital mutilation and child, early and forced marriage. In eastern and southern Africa, UNFPA has a fourth transformative result—ending sexual transmission of HIV.



UNFPA works with partners in over 150 countries to support member states to help girls and women to access SRHR. UNFPA promotes integrated HIV and SRH services for young people, key populations, women and girls, and people living with HIV, focusing support on the most vulnerable and those left furthest behind. Towards ensuring equitable access to quality SRHR services for all, UNFPA works to overcome financial, social and cultural barriers through strategic partnerships. It has increasingly supported integration of HIV, including in family planning, contraception and comprehensive sexuality education (CSE), leading CSE efforts in the out of school context.

An independent evaluation of the organization’s HIV work from 2016–2019 is being published in 2020. It points to the importance of the UNAIDS Division of Labour as an organizing framework and notes that UNFPA has been active in forging partnerships on critical aspects of the HIV response, coordinating support to the HIV response at all geographical levels. It

also acknowledges the organization's efforts to promote the rights of the most vulnerable and to promote linkages between SRHR/HIV/SGBV (sexual and gender-based violence). One of the main recommendations is for UNFPA to develop an HIV Strategy to balance the Fund's outward-facing leadership ambition and inward-looking priority setting and action.

Contributing to progress towards the SDGs

Key UNFPA results in 2018-2019



UNFPA works with governments, partners and other UN agencies to catalyse progress towards numerous SDGs—in particular Goal 3 (health), Goal 4 (education) and Goal 5 (gender equality) as well as many other SDGs, as outlined in the UNFPA results report (<https://www.unfpa.org/sdg>).

Global HIV Prevention Coalition

Under UNFPA's co-convenorship of the GPC, Botswana, the Islamic Republic of Iran and Myanmar joined in 2018–2019, bringing the number of focus countries to 28. Norway, the Southern African Development Community and the Reproductive Supplies Coalition also joined. The GPC held four Working Group meetings and two meetings of National AIDS Directors.

The GPC reinforced prevention leadership. A consultation in May 2018 on HIV Prevention with Adolescent Girls and Young Women focused on improving geographic coverage, identifying service delivery platforms, policy actions and strengthened monitoring of programmes for adolescent girls and young women and their male sexual partners. At the Nairobi Summit on ICPD25, a concurrent session focused on HIV prevention challenges among adolescent girls and young women, and a high-level ministerial meeting described the status of national prevention efforts and led to a re-commitment to accelerate the pace of implementation of commitments to HIV prevention and SRHR.

The GPC enhanced regional and country support, including south-south learning, to strengthen prevention programmes and capacities along 10 Road Map actions, focusing investment on 5 pillars as well as measurement using scorecards, posters and participatory country consultations.

Work with youth and on CSE

Key UNFPA achievements for adolescent and youth empowerment, 2018-2019.



UNFPA contributed to the UN Strategy on Youth: Youth2030. In full alignment with this, UNFPA's Adolescents and Youth Strategy "My body, my life, my world" (<https://www.unfpa.org/youthstrategy>) supports the empowerment of young people to realize their health and rights to exercise well-informed decisions about their own bodies, lives and world.

UNFPA supported Member States in the provision of youth-friendly SRH clinical services, including contraception, HIV/STI testing, management and referrals, counselling and other SRH support. UNFPA advocated with ministries of health to lower the age of consent for accessing SRH services. UNFPA supported development and use of youth-led technology and innovative approaches in SRHR, including HIV prevention, and in- and out-of-school CSE. A three-year out-of-school CSE programme was initiated in five countries (Colombia, Ethiopia, Ghana, Islamic Republic of Iran, and Malawi) with financial support from Norway. Support to youth-led initiatives such as Safeguard Young People also continued.

Condoms and other reproductive health commodities

In 2018–2019, UNFPA supplied 2.53 billion male condoms (US\$ 56.5 million) and 28.8 million female condoms (US\$ 13.0 million). UNFPA was able to reduce the price of female condoms from US\$ 0.45 million in 2017 to US\$ 0.37 million in 2018. In 2018–2019, UNFPA-supplied condoms averted over 12.5 million STIs and nearly 300 000 HIV infections.

UNFPA worked with USAID, Bill & Melinda Gates Foundation, the Africa Beyond Condom Donation coalition and the Global Fund, undertaking market research demonstrating the decline of condom use among young people. In 2019 the Global Fund committed catalytic funding to countries with an increased focus on comprehensive condom programming in its next cycle. Evidence from seven countries shows that condom availability programmes do not increase sexual activity, do not lead to a greater number of sexual partners, and do not lower the age of sexual initiation.

During the biennium, UNFPA invested US\$ 174.5 million on reproductive commodities (including emergency contraceptives, male and female condoms, HIV test kits and lubricants) in 22 UNAIDS Fast-Track countries. This led to health-care savings of an estimated US\$ 765.9 million (e.g. unintended pregnancies, abortions and unsafe abortions averted; maternal deaths and child deaths averted; and maternal and child DALYs averted), generating an effective return on investment of 4:1.

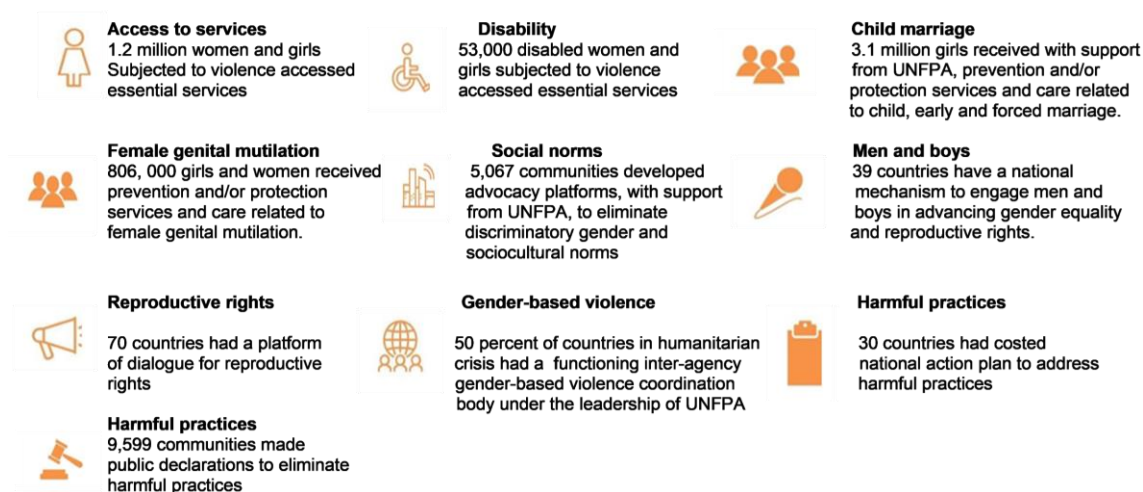
Key populations

Promotion and rollout of the key population HIV implementation tools remained a priority during the biennium, with additional focus on young key populations including a toolkit on HIV prevention for and with adolescent and young key populations developed with UNICEF and UNDP. Development of the SADC Key Population Strategy increased support for community empowerment and an enabling regional environment. At the country level, UNFPA supported development programmes for key populations in 18 countries in 2018 and in 42 countries during 2019.

As GPC co-chair, UNFPA helped re-shape the key population prevention agenda around 90% coverage targets for groups at highest risk. UNFPA advocacy and dissemination efforts included engagement with the Global Network of Sex Work Projects, MPact and IRGT, including at AIDS 2018 and for the Nairobi Summit on ICPD25. UNFPA helped facilitate "UN for All" workshops with UNDP, which to date have reached 8 000 UN staff with regard to LGBTI sensitization and acceptance.

End GBV and all harmful practices

Key UNFPA achievements in gender equality and the empowerment of women, 2018-2019.



UNFPA has consistently advocated that violence against women and girls is a human rights violation and that combating this is a public health priority. It is one of the organization's three transformative results. Addressing gender inequality has consistently been undertaken via holistic and integrated responses.

The European Union-UN Spotlight Initiative has further broadened the scope of addressing gender inequality as it covers broader issues of child marriages, female genital mutilation and the scaling up of multisectoral services for gender-based violence. UNFPA provided technical guidance for the Essential Services Package to support the successful rollout in more than 65 countries.

Human rights

UNFPA brought increased attention to marginalized women's poorer SRH outcomes, including building national accountability on gender equality and SRH rights, including HIV prevention, by documenting progress and strengthening data on SDG targets (including 5.6.1 and 5.6.2) and engaging with national and international human rights mechanisms. In 2018 UNFPA built the capacity of and enabled cross learning among 11 national human rights institutions (NHRIs) globally on conducting national inquiries and country assessments on SRH. In 2019 UNFPA also launched a guide to support NHRIs in conducting national inquiries and country assessments on SRH.

HIV integration

Key UNFPA achievements in utilizing integrated SRH services in 2018-2019



Sexual and reproductive health plan

55 countries have a national and reproductive health plan prioritizing services for marginalized people



Integrated services

60 million women and young people reached with integrated sexual and reproductive health services

As a co-chair of the GPC, UNFPA took a lead role in convening partners and stakeholders to develop a global advocacy plan on HIV and SRHR integration, plus work with UNAIDS Joint Teams on supporting national advocacy plans. UNFPA and WHO continue to co-lead the Inter-Agency Working Group on SRHR/HIV Linkages. UNFPA published its Business Plan (2018–2022) for the Maternal Health Thematic Fund, including efforts to reduce the impact of HIV and STIs on women, their infants and families. The Fund operates in 39 countries and focuses on issues such as vertical transmission. UNFPA also supported development of the H6 Implementation Plan (2018–2020) and associated Indicator Framework, including HIV and STI monitoring and reporting. The ESA Linkages programme "2gether 4 SRHR" continued in 10 countries in eastern and southern Africa, and the regional database has been strengthened with 500 data points related to 15 additional indicators for SRHR, HIV and sexual and gender-based violence across the countries, consistent with the SADC SRHR strategy and its monitoring and evaluation plan.

Approximately 60% of UNFPA country offices in the JPMS during 2019 advanced a wide range of SRHR linkages and integrated service packages. These included: integrated adolescent SRH services (20 countries); integrated primary health care packages (10 countries); integrated services for key populations (9 countries); integration with sexual and gender-based violence programming and broader AGYW services (5 countries); and comprehensive PMTCT services (3 countries).




Case study: Reaching sex workers in Indonesia

UNFPA Indonesia has played an important implementation role in the country’s Global Fund-financed HIV programme by managing the outreach programme to scale up testing and treatment for female sex workers. In 2018–2019, UNFPA managed programme implementation as well as grant management to four national sub-recipients covering 88 districts, coordinating with the Ministry of Health (principal recipient), Indonesia AIDS Coalition and other partners (including support from 244 peer leaders and 1763 peer educators). The programme helped address barriers to UHC for female sex workers, many of whom lack an identity card that would normally exclude them from receiving services. Altogether, the project reached 289 730 female sex workers, including 124 379 (43%) who were tested for HIV and 3603 (2.8% of total tested) who tested HIV-positive and were provided with treatment.



Knowledge products

	<p>Sexual and Reproductive Health and Rights: An Essential Element of Universal Health Coverage (2019). This document defines and describes the key components of a comprehensive life-course approach to SRHR.</p>
	<p>Rights and choices for all adolescents and youth: a UNFPA global strategy. “My Body, My Life, My World!” is UNFPA’s new global strategy for adolescents and youth. It puts young people—their talents, hopes, perspectives and unique needs—at the very centre of sustainable development.</p>

	<p><u>Implementation of the HIV Prevention 2020 Road Map - 3rd Progress Report.</u> The Global HIV Prevention Coalition (the Coalition) was established in October 2017 to galvanize greater commitment to—and investment in—HIV prevention in order to achieve the 2020 prevention targets.</p>
	<p><u>The Maternal and Newborn Health Thematic Fund.</u> The Maternal and Newborn Health Thematic Fund is UNFPA’s flagship programme for improving maternal and newborn health and well-being. Launched in 2008 to boost global funding and attention to maternal health, the MHTF is now entering its third phase, from 2018 to 2022, after having completed Phase I (2008–2013) and Phase II (2014–2017).</p>
	<p><u>ICPD25: Accelerating accountability for SRHR.</u> In 2019, the marked its 25th anniversary in Cairo, where 179 governments adopted a landmark Programme of Action which set out to empower women and girls for their sake, and for the benefit of their families, communities and nations.</p>

More data available at <https://www.unfpa.org/data/results>.

UNAIDS

20 Avenue Appia
CH-1211 Geneva 27
Switzerland

+41 22 791 3666

unaids.org