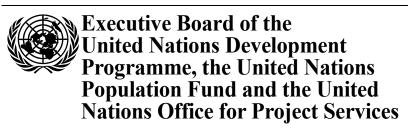
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United Nations Population Fund

Country programme document for Belarus

Proposed indicative UNFPA assistance: \$5.4 million: \$2.9 million from regular resources and

\$2.5 million through co-financing modalities or other

resources

Programme period: Five years (2026-2030)

Cycle of assistance: Fourth

Category: Tier III

Alignment with the UNSDCF Cycle United Nations Sustainable Development

Cooperation Framework, 2026-2030

I. Programme rationale

- 1. Belarus entered the second quarter of the 21st century as an upper-middle-income country. It ranks 65 out of 193 countries and territories in the 2023-2024 *Human Development Report*, with a human development index of 0.82. The incidence of multidimensional poverty remains low at 3.54 per cent as of 2024, according to national estimates.
- 2. Belarus has made strides in gender equity, including high labour force participation of women, the introduction of paternity leave and family-friendly policies in the workplace, and high overall political participation of women. In 2023, the country ranked 27th out of 172 countries globally in the gender inequality index. The share of women in Parliament is over 40 per cent, which is one of the highest among the Commonwealth of Independent States (CIS) countries. The share of women at managerial positions and executive bodies is increasing and reached 49.6 per cent and 47.7 per cent, respectively, in 2023. Women constitute over 50 per cent of the economically active population and 59 per cent of those with higher education but are predominantly engaged in service provision and the social sector of the economy, where jobs are less paid. Consequently, women experience a wage gap of 26.8 per cent. For efficient planning and evaluation of the impact of programmes targeting gender disproportions and stereotypes, the country introduced online platform Gender Statistics. Parental leave benefits have been extended to fathers, entitled to same employment protection and guarantees as mothers on parental leave.
- 3. According to the 2025 data, the population of Belarus stood at 9.1 million, 301,000 people less than at the beginning of 2020. As of January 2025, more than 2.2 million people were of retirement age (58 years for women and 63 years for men), comprising over 24.6 per cent of the total population. Due to the pronounced gender disparity in life expectancy (79.8 years for women and 69.3 years for men), in 2024, women made up 70.4 per cent of the retired population.
- 4. Belarus sets as the key demographic priorities of the country, according to the draft National Sustainable Development Strategy 2040, sustaining the size of the population and improvement of health. Increasing fertility, life expectancy and net migration levels are the main objectives of the national demographic policy. At the same time, stereotypical expectations about the social roles of men and women at work and in the family are still prevalent in society. On average, women spend twice as much time than men on unpaid household chores and caring for dependents, while 71.9 per cent of the population believe that women cope better with taking care of young children than men. Only 1.5 per cent of men who are eligible for parental leave take this opportunity. To emphasize the importance of involved fatherhood for the well-being of the family, the National Day of Fathers was established by a Presidential Decree in 2022.
- 5. The share of people living in cities peaked at 78.9 per cent in 2025 while the rural population has decreased, from 28.2 per cent to 2.1 per cent, over the past 20 years. This shift is mostly due to low birth rates and intensive internal migration from villages to cities. The total fertility rate was 1.1 children per woman in 2024.
- 6. From 2000 to 2024, the maternal mortality ratio decreased from 21 per 100,000 live births to 3 per 100,000 live births. This achievement is credited to political and financial prioritization of high-quality, fully accessible maternal health services and a well-functioning referral system.
- 7. National data show that the estimated satisfied demand for family planning with modern contraception remained almost unchanged in the last five years (71.3 per cent in 2019 and 72.0 per cent in 2023). Similarly, the unmet need for family planning showed little change (10.7 per cent in 2023, compared to 10.9 per cent in 2019).
- 8. Since 2016, Belarus has the World Health Organization (WHO) confirmed status of having eliminated the transmission of HIV from mother to child. At the same time, cervical cancer remains one of the key priorities of the healthcare system. According to statistical data of the Ministry of Health, over 300 women die every year from cervical cancer. In order to increase cervical cancer awareness and reduce morbidity and mortality related to the disease, the healthcare system has strengthened screening programmes achieving an almost tenfold increase in coverage in 2024 and committed to launching human papillomavirus (HPV) vaccination for girls before the end of 2025. Further efforts will be aligned with the WHO Global Strategy for

Cervical Cancer Elimination, aiming to reach a 70 per cent screening and 90 per cent HPV vaccination coverage by 2030.

- 9. Reproductive health related education for youth aged 15-17 years is provided through educational programmes of schools and colleges and vocational training, aiming to prepare them for family life and improve their healthy lifestyle skills. At the same time, data from a 2023 survey on risky sexual behaviour found that just 25.6 per cent of respondents aged 18-29 years had adequate knowledge about HIV and sexually transmitted infection prevention.
- 10. According to the preliminary data of the National Statistical Committee 2024 household survey on the status of health and wellbeing of women, 14.3 per cent of women aged 18-69 years experienced physical violence at least once in their lifetime, 5 per cent reported sexual violence, while 30.4 per cent experienced psychological violence. The Ministry of Interior in 2024 confirmed a 12.5 per cent decrease in the number of cases, compared to 2022, with around 72,000 reports on domestic violence received by police departments. The Ministry of Labour has reported an increase in women receiving support after experiencing domestic violence, up from 8,000 in 2021 to 12,255 in 2023.
- 11. The new country programme will build on the achievements of the previous programme cycle, which contributed significantly to strengthening the national demographic data system and improving the quality of databases. It supported national action plans and strategies for active ageing, engaged the private sector in enhancing digital literacy for older people and persons with disabilities, promoted men's involvement in childcare and helped to create conditions for both parents to combine career and household duties. The previous country programme also introduced innovative solutions to support maternal health, implemented capacity-building initiatives for cervical cancer, and supported efforts to introduce a nationwide HPV vaccination programme.
- 12. The new country programme will apply strategic accelerators for its maximum impact. These include: (a) providing advice on using the demographic resilience framework to achieve the three transformative results and address diverse demographic challenges; (b) strategically integrating reproductive health, domestic violence, data design and management; and (c) leveraging digitalization and innovation to enhance the programme impact and align demographic resilience with the broader socioeconomic development efforts.

II. Programme priorities and partnerships

- 13. The vision of the Decade of Action toward 2030 is that all members of society, especially those left furthest behind, enjoy equal rights to a healthy life, free from stigma and violence, live with dignity, and have opportunities to realize their full potential. In 2026-2030, UNFPA will focus on an evidence-based life-course approach for building demographic resilience by:
 (a) improving demographic literacy and data management; (b) empowering individuals; and (c) strengthening systems. UNFPA will support national efforts to remove societal barriers to improving the well-being of the population, particularly those left furthest behind.
- 14. Priority will be given to persons with disabilities (6.1 per cent of the population); older persons (24.6 per cent); youth (aged 15-29 years: 17.9 per cent); people living with HIV (22,000 cases in 2022); and women with multiple vulnerabilities. These groups need stronger support in the areas of reproductive health, domestic violence prevention, and participation in public life, as youth demonstrated risky behaviour (evidenced by the 2023 survey), and women with disabilities are more likely to experience domestic violence. Disaggregated data by age, sex, disability and location will be used to guide inclusive and evidence-based programming.
- 15. Special focus will be placed on establishing sustainable partnerships among national actors (from the Government, the private sector, civil society and academia) to combine human, financial and administrative resources for maximum impact. The principle of inclusion and a strong focus on the local level will accelerate implementation and impact. Focus areas include family-related policies; addressing population ageing through a life-course approach; reproductive health; mental health support; and demographic data management, in support of the 2030 Agenda for Sustainable Development.

- 16. The programme will leverage and scale up interventions from the previous country programme to cover all regions and empower local actors and communities to advocate for and actively participate in initiatives that drive social change, promote well-being, and encourage healthy lifestyles. It remains committed to the three transformative results and strengthening demographic resilience, building on the national success in reducing maternal mortality to further reduce preventable reproductive health-related deaths.
- 17. UNFPA will leverage its comparative advantages as a leader in demographic resilience, gender equality and domestic violence prevention and response. It will continue to integrate demographic intelligence in policymaking and foster innovations and private-sector partnerships to address the needs of populations in vulnerable situations.
- 18. The country programme is aligned to the priorities of the National Strategy for Sustainable Development, the National Active Ageing Strategy, the national strategic plans for healthcare, social protection and employment, and the National Gender Equality Action Plan. The programme will contribute to the achievement of Sustainable Development Goals (SDGs) 1, 3, 4, 5, 8, 10, 11, 16 and 17, with the overarching goal of strengthening demographic resilience, by supporting the national census, applying innovative population-based socioeconomic forecasting tools, addressing the ageing phenomenon, advancing gender equality policies, focusing on equal roles for men and women in professional life and family duties, and promoting access to health services.
- 19. The United Nations Sustainable Development Cooperation Framework (UNSDCF) identified four strategic priorities areas: human development and well-being for all; inclusive and sustainable economic transformation; climate change and environmental protection; and peace for development. The country programme is fully aligned with the UNSDCF and directly contributes to three outcomes: (a) equitable and quality education, healthcare, social and child protection; (b) equitable and sustainable economic transformation; and (c) inclusive, equitable and safe environment and increased participation in decision-making processes for all.
- 20. For maximum impact, UNFPA will collaborate with UNDP, UNICEF, UN-Women, the Office of the United Nations High Commissioner for Refugees (UNHCR), WHO and the International Organization for Migration (IOM) to target those left furthest behind for transformative impact. Together with UN-Women, UNFPA will co-lead the United Nations Results Group on Gender and coordinate joint United Nations efforts for gender equality.
- 21. Strategic partnerships will be leveraged to advance demographic resilience and contribute to two unmet transformative results: ending gender-based violence; and eliminating unmet need for family planning. UNFPA will strengthen multisectoral collaboration with Government entities, civil society organizations (CSOs) and the private sector, to expand access to high-quality family planning services, scale up domestic violence prevention and response mechanisms, and promote rights-based, people-centred approaches across sectors.
- 22. The programme was developed in close consultation with the Government, academia and civil society stakeholders, to ensure national ownership, alignment with national priorities and sustainability of results.
- 23. UNFPA will implement the programme through advocacy and policy dialogue, evidence-based policy advice, knowledge management, capacity-building and partnerships, including South-South and triangular cooperation on demographic data management, family policies, gender equality (including male engagement), reproductive health, and ageing.
- 24. The programme will scale up innovative and digital approaches to address gaps in reproductive health, domestic violence prevention and population ageing initiatives. Planned tools include artificial intelligence (AI) driven health data dashboards, mobile applications (apps) for maternal and reproductive health tracking (adapted for persons with disabilities), e-learning platforms and campaigns on healthy ageing, as well as digital campaigns for youth on safe behaviours. Sustainability will be achieved through partnerships with national institutions for maintenance and scale-up.
- 25. By engaging stakeholders in high-level upstream dialogue, programme implementation, and monitoring and evaluation, UNFPA will leverage and strengthen partnerships and synergies with

the Government, Parliament, academia, the private sector, civil society and volunteer groups (such as the network of 'silver volunteers') to create more opportunities to change behaviours and transform the lives of women, men, young people and older persons.

- 26. The programme will support the Government in strengthening emergency preparedness related to reproductive health and prevention of violence against women to ensure comprehensive and effective preparedness and response mechanisms that meet the needs of women and girls during crises.
- 27. To fulfil the national commitments to the International Conference on Population and Development (ICPD) agenda, the country programme will focus on: (a) supporting strengthening demographic intelligence and the 2030 census; (b) developing and introducing policies and practices to strengthen gender equality at the workplace and at home and to protect women, including those with disabilities and the elderly, from domestic violence; (c) strengthening knowledge management and applying innovative approaches to address population ageing and improve maternal and reproductive health; (d) developing digital tools and mechanisms to address the needs of those left furthest behind; (e) creating sustainable partnerships and stakeholder coalitions to support and empower older and young people and people living in rural areas; and (f) developing inclusive communication strategies and mechanisms.
- 28. The range of partners available to provide financial support directly to UNFPA is extremely limited. There is no legal precedent for the Government, the private sector or the public to transfer funds to United Nations entities, and the donor base is limited. Consequently, UNFPA focuses on using core resources to catalyse change through a funding-to-financing approach.

A. Output 1. Improved quality and accessibility of demographic data to support the 2030 census and national and regional socioeconomic strategies.

- 29. This output, which contributes to UNSDCF outcome 4 (by 2030, national normative frameworks and systems are better aligned with international obligations enabling an inclusive, equitable and safe environment and increased participation in decision-making processes for all), focuses on strengthening demographic intelligence and using demographic data for evidence-based decision-making and programme design, targeting both the national and local levels. It will enhance the quality of socioeconomic programmes and contribute to the efficient use of resources based on the projected needs of the population.
- 30. UNFPA will provide technical support to: (a) assist the National Statistical Committee in conducting the 2030 census, based on administrative data and internet self-enumeration, using electronic means of data collection and AI census data processing; (b) improve accessibility of demographic data available in statistical platforms for national and local-level stakeholders to enable broader access and use of demographic data and population survey results; (c) introduce innovative approaches and build capacities for applying national transfer accounts for planning and forecasting by government entities, while supporting Belarus in joining the international national transfer accounts community; (d) strengthen South-South and international cooperation in collecting and using demographic data for sustainable socioeconomic development.

B. Output 2. Expanded opportunities for women and men of all ages to participate in socioeconomic development and family duties, maintaining good health.

- 31. This output aims to address social norms and stereotypes by enhancing skills and knowledge, attitudes and practices of individuals and communities to lead active, safe and healthy lives, combining career development and family duties. This will be achieved by expanding existing educational programmes on inclusion, reproductive health and ageing. These activities will be supported through targeted social and digital media campaigns aimed at changing the perceptions of groups in vulnerable situations and fostering an inclusive informational environment.
- 32. Contributing to UNSDCF outcome 1 (on full access to quality education, health and social protection for all) and outcome 3 (on developing holistic solutions for safe environment and efficient resource management), UNFPA will support national efforts to engage all generations in societal and economic participation, empower women and promote inclusive decision-making to

build demographic resilience. This will be achieved by: (a) partnering with the Ministry of Labour and Social Protection to design and introduce an online educational course for people aged 25 years and above, aimed at promoting active and healthy ageing for both women and men and preparing them for age-related changes; (b) working with civil society and communities to develop and conduct national and local inclusive awareness-raising initiatives to combat stereotypes about various population groups, especially persons with disabilities, older people, youth, people affected by HIV, and women with multiple vulnerabilities; (c) collaborating with healthcare institutions to conduct information campaigns addressing the key risk factors contributing to low male life expectancy; (d) partnering with local authorities and communities to organize national digital and local-level offline campaigns on reproductive health, targeting especially youth with and without disabilities and promoting involved fatherhood among men, women and couples; (e) strengthening intergenerational solidarity through joint volunteering for healthy lifestyle initiatives involving both young people and older adults, including engagement of young SDG ambassadors and older "silver" activists; and (f) expanding access to digital tools for older persons and persons with disabilities, in partnership with the private sector.

C. Output 3. Strengthened structures and policies for inclusive social support for sustainable demographic resilience.

- 33. This output aims to strengthen national capacities for designing and implementing social support and healthcare policies. This will be achieved by mobilizing expertise, developing training programmes and educating service providers.
- 34. Contributing to the UNSDCF outcome 2, UNFPA will support national efforts in designing new mechanisms and policies, and in building capacities of national counterparts. This will be achieved by: (a) providing expert support to update obstetrics and gynaecology protocols, in line with international standards, and designing training programmes for healthcare and social support providers based on these updated guidelines; (b) developing guidelines for the information technology sector and digital service providers to address technology-facilitated violence against women and girls; (c) expanding educational programmes and projects for youth on reproductive health, safe behaviours and healthy relationships; (d) scaling up "orange safe spaces" and "orange solution hubs" at crisis centres, to support women in vulnerable situations with reproductive and mental health support and family planning; and (e) providing technical and expert support to the Government in establishing a national domestic violence hotline covering all regions.

D. Output 4. Strengthened implementation of national plans and strategies for improved quality of life and well-being amid demographic shifts.

- 35. This output will support national partners in the development and implementation of the National Action Plan on Gender Equality and reproductive health-related strategies.
- 36. Contributing to UNSDCF outcome 2, UNFPA will support the development of policies and implementation of initiatives focused on domestic violence prevention and family planning, to promote an inclusive, equitable and safe environment for all. UNFPA will: (a) support the development of a motivation package (certification) and guidance for companies and enterprises to adopt a systemic approach in designing and implementing parent-friendly workplace policies and expand the pool of parent-friendly companies; (b) provide expert support to the Ministry of Labour in designing of gender-responsive family support policies, with the focus on demographic resilience and social support for families; (c) expand, in collaboration with the Ministry of Health, private sector and information technology partners, the existing digital tools for maternal health and equitable parenting (online courses and mobile apps) by incorporating modules tailored for persons with disabilities, addressing their reproductive health and maternal health needs; (d) broaden, together with the Ministry of Health and healthcare institutions providing maternal and reproductive health services, the family planning concept to support the reproductive plans of families and individuals, including persons with disabilities, using innovative solutions and digital tools; and (e) support the integration of cervical cancer screening into digital maternal health platforms, building on previous successes; and (e) organize, jointly with the Ministry of Health, a nationwide educational and informational campaign to promote HPV vaccination.

III. Programme and risk management

- 37. The country programme will support achievement of the UNSDCF outcomes and outputs; it is aligned with the UNSDCF in management, monitoring, review and evaluation, under the leadership of the United Nations country team and the Resident Coordinator, and in close coordination with relevant government entities. Government ministries and institutions, civil society organizations and United Nations organizations will jointly implement the agreed actions to achieve the results outlined in the Cooperation Framework.
- 38. The Ministry of Foreign Affairs will coordinate the implementation of the country programme. UNFPA will maintain effective well-established partnerships while pursuing new partners based on their capacity to deliver high-quality programmes. UNFPA will collaborate with government institutions as the main partners in programme implementation local authorities, civil society organizations (including faith-based organizations), other United Nations entities, and the media.
- 39. UNFPA, the Government and partner organizations will be accountable for delivering the expected results through joint monitoring and reviews and a final programme evaluation. They will also ensure the implementation of audit recommendations.
- 40. The programme will ensure the meaningful engagement of key stakeholders including women, youth, persons with disabilities, and civil society organizations representing groups in vulnerable situations in the implementation, monitoring and review of interventions. Their participation will help strengthen accountability, inform adaptive programming, and promote inclusive national ownership.
- 41. The country office has developed a partnership and resource mobilization strategy aimed at leveraging donor resources and building sustainable partnerships with the private sector and the Government. UNFPA will proactively participate in joint programmes and projects related to demographic resilience and reproductive health, demographic data management, gender equality, social inclusion, population ageing and youth.
- 42. The office will align its human resources structure with the strategic direction outlined in the country programme and empower its staff to strengthen capacity for efficient implementation of planned interventions, provision of timely expert support and high-quality administrative and financial management of its portfolio.
- 43. The programme will utilize the integrated technical and programmatic support from UNFPA headquarters and the regional office, as well as from cooperation with other country offices.
- 44. External risk factors that may affect programme implementation include: (a) a shifting geopolitical environment limiting funding sources; (b) humanitarian and crisis situations that neglect reproductive health needs and violence against women; and (c) environmental risks, including natural disasters, which can disrupt the livelihoods of groups in vulnerable situations, such as women, girls and persons with disabilities. UNFPA will address these challenges through innovative resource mobilization; enhanced partnerships; strengthened implementation partner management; increased inclusion of vulnerable populations in decision-making; robust advocacy and communication; a strong accountability framework; leadership in preventing and responding to violence against women; and demographic policy and risk analysis. To reduce the risk of a disruption of essential services, UNFPA will support mobile reproductive health and domestic violence protection services to ensure uninterrupted support.
- 45. Internal risk factors that may affect programme implementation include: (a) cybersecurity threats that could lead to data breaches and compromise the right to privacy, requiring enhanced technical readiness, organizational capacity and workforce training; and (b) labour market disruptions that could affect programme budgets and human resource availability. To mitigate these risks, UNFPA will conduct regular risk assessments and implement mitigation strategies, such as developing a human resources strategy, investing in staff capacity-building, applying corporate security systems to protect data, and working with the Government and the private sector partners to educate older persons, persons with disabilities, women and girls on digital

safety. Mobile reproductive health and domestic violence protection services will also be supported to ensure uninterrupted support.

46. This country programme document outlines UNFPA contributions to national results and serves as the primary unit of accountability to the Executive Board for results alignment and resources assigned to the programme at the country level. Accountability of managers at the country, regional and headquarters levels with respect to country programmes are prescribed in the UNFPA programme and operations policies and procedures, and the internal control framework.

IV. Monitoring and evaluation

- 47. As an integral part of the Cooperation Framework, programme implementation will be regularly monitored and assessed, in collaboration with the Government, the United Nations, development and civil society partners, for its contribution to achieving the 2030 Agenda. Reporting will be conducted in accordance with the results and resource framework and guided by a monitoring and evaluation plan, using UN-Info to track progress and results achieved.
- 48. To evaluate the country programme's contribution to UNSDCF implementation, UNFPA has developed a costed evaluation plan outlining the timelines, purposes and costs of the planned evaluation. An independent final programme evaluation will be conducted to assess the performance of the country programme. The final evaluation will be synchronized with the evaluation of the UNSDCF to avoid duplication. The final evaluation will serve both as an accountability tool and to inform the formulation of the next country programme.

RESULTS AND RESOURCES FRAMEWORK FOR BELARUS (2026-2030)

NATIONAL PRIORITY: Quality education focused on technological development and new life needs.

UNSDCF OUTCOME: By 2030, national normative frameworks and systems are better aligned with international obligations enabling an inclusive, equitable and safe environment and increased participation in decision-making processes for all.

RELATED UNFPA STRATEGIC PLAN OUTCOME(S): 1: By 2025, the reduction in the unmet need for family planning has accelerated; 2: By 2025, the reduction of

preventable maternal deaths has accelerated; 3: By 2025, the reduction in gender-based violence and harmful practices has accelerated.

UNSDCF outcome indicators, baselines, targets	Country programme outputs	Output indicators, baselines and targets	Partner contributions	Indicative resources
UNSDCF outcome indicator(s): • Has at least one population and housing census been carried out during the last 10 years Baseline: 1 (2025); Target: 1 (2030)	Output 1. Improved quality and accessibility of demographic data to support the 2030 census and national and regional socioeconomic strategies.	 National 2030 census conducted Baseline: No (2025); Target: Yes (2030) National statistical population register developed Baseline: No; Target: Yes Number of national institutions engaged in the socioeconomic planning that use national transfer accounts for their projections Baseline: 0 (2025); Target: 3 (2030) Number of developed national and regional strategies and plans that apply socio-demographic profile of the country/region in their design Baseline: 0 (2025); Target: 7 (2030) 	National Statistical Committee; Ministries of: Economy; Foreign Affairs; Labour and Social Protection; Health; Belarusian State University; other universities; research institutions; civil society organizations (CSOs); the private sector; regional and local authorities; United Nations Economic Commission for Europe	\$2.5 million (\$1.2 million from regular resources and \$1.3 million from other resources)

NATIONAL PRIORITY: Strengthening family values and ensuring ample opportunities for human development.

UNSDCF OUTCOMES: By 2030, all people, including most vulnerable, have enhanced well-being and resilience, with equal access to gender responsive and quality education, healthcare, social and child protection. By 2030, all people benefit from more efficient resource management through engagement of a broad range of stakeholders and holistic solutions that strengthen climate resilience, prevent environmental degradation and biodiversity loss.

RELATED UNFPA STRATEGIC PLAN OUTCOME(S): 1: By 2025, the reduction in the unmet need for family planning has accelerated; 3: By 2025, the reduction in gender-

based violence and harmful practices has accelerated.

UNSDCF outcome indicators, baselines, targets	Country programme outputs	Output indicators, baselines and targets	Partner contributions	Indicative resources
 UNSDCF outcome indicator(s) Proportion of persons aged over 75 and persons with disabilities covered by social services and care Baseline: 19 (2023); Target: 23 (2030) 	Output 2. Expanded opportunities for women and men of all ages to participate in socioeconomic development and family duties, maintaining good health.	 Number of private-sector companies that include course for promotion of active and healthy ageing into employee training programmes Baseline: 0 (2025); Target: 30 (2030) Share of people aged 65-74 engaged in volunteer initiatives Baseline: 13 (2024); Target: 17 (2030) Share of publicly available state media products related to 65+ people and persons with disabilities developed in accordance with standards of the inclusive strategy Baseline: 0 (2025); Target: 15% (2030) 	Ministries of: Labour and Social Protection; Economy; Health; Department for Humanitarian Affairs of the Presidential Administration; Belarusian State University; other universities; research institutions; regional and local authorities; CSOs; the private sector.	\$1.2 million (\$0.7 million from regular resources and \$0.5 million from other resources)

DP/FPA/CPD/BLR/4

NATIONAL PRIORITY: Competitive and accessible business environment, achieving a balance of interests between business and state

UNSDCF OUTCOME: By 2030, all population groups benefit from equitable and sustainable economic transformation based on innovation, digital advancements, socially responsible entrepreneurship and women's economic empowerment.

RELATED UNFPA STRATEGIC PLAN OUTCOME(S): 1: By 2025, the reduction in the unmet need for family planning has accelerated; 3: By 2025, the reduction in gender-based violence and harmful practices has accelerated.

UNSDCF outcome indicators, baselines, targets	Country programme outputs	Output indicators, baselines and targets	Partner contributions	Indicative resources
UNSDCF outcome indicator(s): • Number of women, adolescents and youth, including women and young people with disabilities, who benefited from gender-based violence protection (including services related to mental health and psychosocial support), with United Nations support Baseline: 17,500 (2020); Target: 25,000 (2030)	Output 3. Strengthened structures and policies for inclusive social support and sustainable demographic resilience. Output 4. Strengthened implementation of national plans and strategies for improved quality of life and well-being amid demographic shifts.	 Functioning national network of GBV hotlines is accessible and covers all the regions of the country <i>Baseline: 3 regions</i> (2025); <i>Target: 7 regions</i> (2028) Number of private and state companies that have introduced and are applying gender-responsive family-friendly policies <i>Baseline: 120 (2024); Target: 300 (2030)</i> Number of girls covered by free HPV vaccination <i>Baseline: 0 (2025); Target: 13,000 (2030)</i> Share of young people aged 18-24 years out of the total covered by the digital campaign on safe behaviour and family planning, including persons with disabilities <i>Baseline: 0 (2025); Target: 40% (2030)</i> 	Ministries of: Labour and Social Protection; Economy; Ministry of the Interior; Health; Foreign Affairs; regional and local authorities; CSOs. Ministry of Health; Belarusian Medical University; Medical Academy of Post-Graduate Studies; medical institutions at the central, regional and local levels; regional and local authorities; UNICEF; WHO; the private sector	\$0.4 million (\$0.3 million from regular resources and \$0.1 million from other resources) \$0.9 million (\$0.3 million from regular resources and \$0.6 million from other resources)
Programme coordination and assistant	ee		1	\$0.4 million from regular resources.

10