



**Executive Board of the
United Nations Development
Programme and of the
United Nations Population Fund**

Distr.: General
16 July 2010

Original: English

UNITED NATIONS POPULATION FUND

Final country programme document for China

Proposed indicative UNFPA assistance: \$22 million: \$20 million from regular resources and \$2 million through co-financing modalities and/or other, including regular, resources

Programme period: Five years (2011-2015)

Cycle of assistance: Seventh

Category per decision 2007/42: C

Proposed indicative assistance by core programme area (in millions of \$):

	Regular resources	Other	Total
Reproductive health and rights	9.6	0.5	10.1
Population and development	9.6	1.5	11.1
Programme coordination and assistance	0.8	-	0.8
Total	20.0	2.0	22.0

I. Situation analysis

1. China is one of the countries that have been least affected by the global economic crisis. It is increasingly engaged in international development, with a focus on Africa. China is the first developing country to have achieved Millennium Development Goal 1 (eradicate extreme poverty and hunger) before the proposed deadline. As of 2005, 10.4 per cent of the rural population lived below the poverty line; of those, 51 per cent belonged to minority groups. The country faces a number of challenges, including addressing socio-economic disparities between rural and urban areas and between population segments; strengthening the rule of law; and promoting the participation of civil society in development. In addition, large segments of the population are increasingly vulnerable to the effects of climate change.

2. The population is estimated at 1.3 billion. A population census is scheduled for November 2010. As of 2008, 54 per cent of the population lived in rural areas. Continued rapid urbanization is expected to add pressure on urban service delivery. About one third of the population was under 25; those above 60 constituted 14 per cent. The share of working-age people is expected to decrease as early as 2010. The contraceptive prevalence rate has been stable, at around 89 per cent. The total fertility rate is below replacement level.

3. The maternal mortality ratio ranges from 8 deaths per 100,000 live births to 265 deaths per 100,000 live births. The coverage and quality of skilled attendance at birth in remote areas and in areas with large minority populations are limited. Health sector reform seeks to address these disparities. The HIV prevalence rate is below 1 per cent. However, the epidemic is showing signs of spreading to the general population, mainly through sexual transmission. This calls for integrating HIV-prevention efforts into reproductive health information and service delivery, and for targeting young people, who represent an increasing percentage of new infections.

4. Sexual and reproductive health services are geared towards married people, not towards unmarried people and youth. Research indicates that the attitudes and behaviour of youth towards sexuality are not being addressed by existing services. Of the estimated 200 million internal migrants, 46 per cent are below 25 and half are women. Disaggregated data on underserved groups, including those with disabilities, are not systematically available.

5. Although policies on women's rights are well developed, implementation of those policies varies. Gender discrimination is evident in the imbalanced sex ratio at birth, which is 119 males per 100 females. Awareness about responsible sexual behaviour and violence against women is limited, and data on these issues are scarce.

II. Past cooperation and lessons learned

6. UNFPA assistance to China began in 1979. The programme expanded from specific demographic and family planning assistance to a comprehensive sexual and reproductive health approach at the county level, with an increased focus on emerging issues such as urbanization, the sex ratio imbalance, and ageing. UNFPA also expanded its programme to respond to emergencies and to address the needs of minorities.

7. The sixth country programme helped to: (a) increase the knowledge and skills of service providers regarding the quality of care of reproductive health services (including family planning and informed contraceptive choice) through the development of training materials, the lifting of restrictive rules, and increased awareness of reproductive rights in programme areas; (b) identify linkages between HIV prevention and reproductive health service delivery for sex workers and migrants and help to prevent HIV by using the railway system; (c) improve the capacity for analysing data related to development indicators and for evidence-based policy formulation; (d) increase the availability of national data on the sexual behaviour of youth and on their

unmet need; (e) increase the participation of youth in sexual and reproductive health programmes and partnerships with national institutions; (f) establish a multisectoral mechanism for addressing violence against women; (g) initiate the process of developing a national strategy on urbanization; (h) support the inclusion of sexual and reproductive health and psychosocial support in health disaster preparedness; and (i) promote continuous policy dialogue on population issues.

8. Lessons learned from the sixth country programme indicate the need to: (a) work 'upstream', with a focus on policy reform initiatives at the provincial level, in line with the Programme of Action of the International Conference on Population and Development (ICPD); (b) ensure consistent government commitment for scaling up documented programme success; (c) ensure that the value of cooperation is systematically communicated at the outset to leadership in intervention areas; (d) shift the focus from service delivery support to technical support for quality assurance; (e) address the policy gap and unmet need for youth-friendly sexual and reproductive health services; (f) diversify partnerships for programme delivery to respond to emerging needs; (g) advocate engaging with civil society and building its capacity to participate in population and development issues; and (h) reinforce the capacity of institutes engaged in international development.

III. Proposed programme

9. The proposed programme is based on the United Nations Development Assistance Framework (UNDAF), 2011-2015; discussions with partners on priorities in social policy reform initiatives; and the twelfth national five-year development plan. It contributes to the achievement of all three UNDAF priority areas: (a) the poorest and most vulnerable persons increasingly participate in and benefit equitably from social and economic development; (b) the Government and other stakeholders ensure environmental sustainability, address climate change, and promote a 'green', low-carbon economy; and (c) enhanced

participation of China in the global community brings wider mutual benefits.

10. The programme will use rights-based, gender-sensitive and culturally appropriate approaches, and will include joint programme initiatives. The programme will seek to build the capacity of rights holders and duty bearers to ensure that individual choices and rights are respected.

11. UNFPA will provide policy advice, drawing on lessons learned from the previous country programme and from the experiences of other countries. UNFPA will support interventions primarily at provincial and county levels. The programme will target specific geographical sites, based on the relevance of interventions, and will explore programme synergies to the fullest extent. The programme will: (a) focus on vulnerable and underserved groups as well as those with high-risk behaviour; (b) address disparities through a focus on remote areas; (c) select intervention sites based on the commitment of local leadership for policy reform and innovation; (d) continue joint programming endeavours; and (e) support research and advocacy on emerging issues. UNFPA will also pursue cost-sharing arrangements with the Government.

Reproductive health and rights component

12. The reproductive health and rights component has two outcomes: (a) national and subnational regulations and policies address gaps in sexual and reproductive health and rights; and (b) vulnerable groups have increased demand for, access to, and utilization of sexual and reproductive health services and information, including on HIV prevention and reproductive rights.

13. Output 1: By 2015, policymakers at national and subnational levels will update population and health policies on issues such as sexual and reproductive health and family planning, including for youth. The programme will: (a) advocate the application, among policymakers, of ICPD principles for the formulation and implementation of laws and

regulations related to health, population and urbanization at national and subnational levels; (b) strengthen the capacity for documenting results and best practices and evidence-based policymaking; (c) build the capacity of key partners to develop a multisectoral strategy on sexual and reproductive health for youth; and (d) promote reproductive health-related issues among sectors and line ministries, including the minimum initial service package for reproductive health in emergency situations.

14. Output 2: By 2015, vulnerable groups in programme areas will have increased knowledge of reproductive health, including counselling and information and services to prevent HIV and sexually transmitted infections. The programme will focus on promoting a comprehensive model of the linkages between HIV and sexual and reproductive health, targeting the most vulnerable groups at subnational levels.

15. Output 3: By 2015, strengthened capacity of institutions in programme areas to provide high-quality, gender-sensitive sexual and reproductive health information, education and services for unmarried youth. The programme will: (a) strengthen youth participation and partnerships between youth and adults; (b) provide technical assistance for sexual and reproductive health and rights education for vulnerable youth; (c) build the capacity for youth-friendly sexual and reproductive health services; and (d) support the use of modern communication methods for disseminating information on sexual and reproductive health and rights.

16. Output 4: By 2015, sexual and reproductive health services will be strengthened for vulnerable groups in programme areas. The programme will support: (a) capacity-building for service providers on sexual and reproductive health services, including counselling and HIV prevention, and culturally sensitive approaches for vulnerable groups; and (b) building and strengthening partnerships between the Government and civil society on sexual and reproductive health services for vulnerable groups.

Population and development component

17. There are two outcomes under the population and development component: (a) policymakers make better use of disaggregated data and research findings for decision-making related to population, urbanization, migration, climate change and ageing; and (b) civil society and the Government support policies and multisectoral mechanisms to reduce discrimination and violence against women.

18. Output 1: National statistical institutions can better integrate indicators related to the Millennium Development Goals and the ICPD Programme of Action into national and subnational statistical systems. Strategies will include: (a) advocacy and policy dialogue for systematically integrating such indicators; (b) capacity-building to improve data management and data quality; and (c) knowledge sharing among policymakers through thematic analysis. This output will contribute to other outputs to promote policy change and dialogue.

19. Output 2: Selected pilot sites have policy options for equitable urbanization endorsed by local and central governments. Strategies include: (a) capacity-building for policymakers on integrating social services into urban planning; and (b) technical assistance in methodology and monitoring for scaling up interventions.

20. Output 3: Policy research on population issues is conducted and disseminated to better inform national and subnational government bodies on policy formulation. Topics for research will include urbanization, migration, climate change and ageing.

21. Output 4: Improved capacity of policymakers to coordinate and manage gender-sensitive, multisectoral interventions to address an increasing ageing population and to support active and healthy ageing in programme areas. Strategies will focus on: (a) capacity-building for policymakers to improve multisectoral policy options and

interventions on ageing; and (b) advocacy to promote the participation of older persons in the development of ageing-related policies.

22. Output 5: Improved management and technical capacity of national partners to engage in South-South and triangular cooperation on population and development issues. Strategies include: (a) capacity-building for South-South partner institutions; and (b) knowledge sharing and documentation of best practices.

23. Output 6: By 2015, government agencies and civil society organizations in at least five programme areas will have an enhanced capacity to strengthen multisectoral mechanisms to reduce and respond to discrimination and violence against women and girls. Strategies include: (a) building the capacity of stakeholders, including through the Central Party School, to address discrimination and violence against women; (b) providing technical assistance to strengthen multisectoral collaboration mechanisms; (c) strengthening partnerships to reduce discrimination and violence against women; and (d) strengthening data collection on violence against women.

24. Output 7: Civil society, media, women and men in programme areas promote responsible sexual behaviour, prevent violence against women, and address the imbalance in the sex ratio at birth. Strategies will focus on: (a) raising awareness through the media; (b) supporting platforms and outreach networks for male participation and community involvement; and (c) supporting research on male involvement in and attitudes of men and boys on the above issues.

IV. Programme management, monitoring and evaluation

25. Government agencies, international and national non-governmental organizations and civil society will implement the country programme, under the aegis of the Ministry of Commerce. UNFPA and the Government will collect baseline and end-line data for programme outputs. The

Government and UNFPA will also develop and update annually a monitoring and evaluation plan. The programme will be reviewed annually with stakeholders, which will contribute to the UNDAF review.

26. The UNFPA country office will continue to participate in joint United Nations programmes in the areas of culture and development among minorities, youth employment and migration, HIV/AIDS, violence against women, and the sex ratio at birth. The UNFPA country office will also continue to participate in joint field visits and reviews.

27. The UNFPA country office consists of a representative, a deputy representative, two assistant representatives, a national programme officer, an operations manager, and programme and administrative staff. The office will seek technical support from national, regional and international institutions and experts, the Asia and the Pacific Regional Office and UNFPA headquarters.

RESULTS AND RESOURCES FRAMEWORK FOR CHINA

National priority: equitable growth for the most vulnerable persons				
UNDAF outcome: the poorest and most vulnerable persons increasingly participate in and benefit equitably from China's social and economic development				
Programme component	Country programme outcomes, indicators, baselines and targets	Country programme outputs, indicators, baselines and targets	Partners	Indicative resources by programme component
Reproductive health and rights	<p><u>Outcome 1:</u> National and subnational regulations and policies address gaps in sexual and reproductive health and rights</p> <p><u>Outcome indicator:</u></p> <ul style="list-style-type: none"> Population policies and provincial family planning regulations updated to incorporate policy recommendations, in line with the ICPD Programme of Action <p><u>Outcome 2:</u> Vulnerable groups have increased demand for, access to, and utilization of sexual and reproductive health services and information, including on HIV prevention and reproductive rights</p> <p><u>Outcome indicators:</u></p> <ul style="list-style-type: none"> Condom use at last high-risk sexual encounter among vulnerable groups in programme areas Multisectoral mechanisms in place to address the unmet reproductive health needs of youth 	<p><u>Output 1:</u> By 2015, policymakers at national and subnational levels will update population and health policies on issues such as sexual and reproductive health and family planning, including for youth</p> <p><u>Output indicators:</u></p> <ul style="list-style-type: none"> Number of official recommendations submitted from the provincial family planning commission to the provincial government for the revision of family planning regulations, in line with the ICPD Programme of Action Inclusion of adolescent reproductive health and gender perspectives in the textbooks of medical universities <p><u>Output 2:</u> By 2015, vulnerable groups in programme areas will have increased knowledge of reproductive health, including counselling and information and services to prevent HIV and sexually transmitted infections</p> <p><u>Output indicator:</u></p> <ul style="list-style-type: none"> Percentage of individuals with increased knowledge of sexual and reproductive health <p><u>Output 3:</u> By 2015, strengthened capacity of institutions in programme areas to provide high-quality, gender-sensitive sexual and reproductive health information, education and services for unmarried youth</p> <p><u>Output indicator:</u></p> <ul style="list-style-type: none"> Percentage of outlets in programme areas offering high-quality, youth-friendly sexual and reproductive health information, counselling and services <p><u>Output 4:</u> By 2015, sexual and reproductive health services will be strengthened for vulnerable groups in programme areas</p> <p><u>Output indicator:</u></p> <ul style="list-style-type: none"> Percentage of service delivery points providing high-quality, essential sexual and reproductive health services and an HIV linkage package adapted for vulnerable groups in programme areas 	<p>National Development and Reform Commission; National Population and Family Planning Commission; National Working Committee on Children and Women</p> <p>Ministry of Health; health bureaux</p> <p>All-China Women's Federation; China Family Planning Association; local family planning commissions</p> <p>United Nations organizations; local governments and communities</p>	\$10.1 million (\$9.6 million from regular resources and \$0.5 million from other resources)

<p>National priority: to reduce consumption, protect the environment and ensure equitable growth for the most vulnerable persons UNDAF outcomes: (a) the poorest and most vulnerable persons increasingly participate in and benefit equitably from China's social and economic development; (b) the Government and other stakeholders ensure environmental sustainability, address climate change and promote a 'green', low-carbon economy; and (c) China's enhanced participation in the global community brings wider mutual benefits</p>				
Programme component	Country programme outcomes, indicators, baselines and targets	Country programme outputs, indicators, baselines and targets	Partners	Indicative resources by programme component
Population and development	<p><u>Outcome 1:</u> Policymakers make better use of disaggregated data and research findings for decision-making related to population, urbanization, migration, climate change and ageing</p> <p><u>Outcome indicators:</u></p> <ul style="list-style-type: none"> Increased number of Millennium Development Goals and ICPD goals are integrated into national and subnational statistical systems Increased number of research recommendations used for policymaking <p><u>Outcome 2:</u> Civil society and the Government support policies and multisectoral mechanisms to reduce discrimination and violence against women</p> <p><u>Outcome indicator:</u> Issues such as discrimination and violence against women, the sex ratio at birth, and safe and responsible sexual behaviour are reflected in national policy and regulatory frameworks</p>	<p><u>Output 1:</u> National statistical institutions can better integrate indicators related to the Millennium Development Goals and the ICPD Programme of Action into national and subnational statistical systems</p> <p><u>Output indicator:</u></p> <ul style="list-style-type: none"> Percentage of indicators disaggregated by gender, age and ethnicity in national and subnational databases <p><u>Output 2:</u> Selected pilot sites have policy options for equitable urbanization endorsed by local and central governments</p> <p><u>Output indicator:</u></p> <ul style="list-style-type: none"> Number of policy options including social components endorsed by local and national governments <p><u>Output 3:</u> Policy research on population issues is conducted and disseminated to better inform national and subnational government bodies on policy formulation</p> <p><u>Output indicator:</u></p> <ul style="list-style-type: none"> Number of policy studies published <p><u>Output 4:</u> Improved capacity of policymakers to coordinate and manage gender-sensitive, multisectoral interventions to address an increasing ageing population and to support active and healthy ageing in programme areas</p> <p><u>Output indicator:</u></p> <ul style="list-style-type: none"> Increased number of ageing-related action plans that encourage the social participation of older persons in programme areas <p><u>Output 5:</u> Improved management capacity of national partners to engage in South-South and triangular cooperation on population and development issues</p> <p><u>Output indicator:</u></p> <ul style="list-style-type: none"> Number of institutions and experts involved in the South-South and triangular virtual platform <p><u>Output 6:</u> By 2015, government agencies and civil society organizations in at least five programme areas will have an enhanced capacity to strengthen multisectoral mechanisms to reduce and respond to discrimination and violence against women and girls</p> <p><u>Output indicator:</u></p> <ul style="list-style-type: none"> Percentage of service delivery points providing routine screening and care <p><u>Output 7:</u> Civil society, media, women and men in programme areas promote responsible sexual behaviour, prevent violence against women, and address the imbalance in the sex ratio at birth</p> <p><u>Output indicator:</u></p> <ul style="list-style-type: none"> Data on the attitudes of men and boys on gender roles 	<p>National Bureau of Statistics; National Development Reform Commission; National Population and Family Planning Commission; China National Committee on Ageing; Ministries of Civil Affairs, Commerce and Health</p> <p>All-China Women's Federation; anti-domestic violence network; community-based organizations; research institutes; media; South-South training institutes; United Nations organizations</p>	<p>\$11.1 million (\$9.6 million from regular resources and \$1.5 million from other resources)</p> <hr/> <p>Total for programme coordination and assistance: \$0.8 million from regular resources</p>