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**UNFPA – Country programmes and related matters**

**United Nations Population Fund**

**Country programme document for El Salvador**

Proposed indicative UNFPA assistance: \$9.0 million: \$4.5 million from regular resources and \$4.5 million through co-financing modalities and/or other resources, including regular resources

Programme period: Five years (2016-2020)

Cycle of assistance: Eighth

Category per decision 2013/31: Yellow

Proposed indicative assistance (in millions of \$):

Strategic plan outcome areas		Regular resources	Other resources	Total
Outcome 1	Sexual and reproductive health	1.9	2.5	4.4
Outcome 2	Adolescents and youth	0.6	0.9	1.5
Outcome 3	Gender equality and women's empowerment	0.6	0.9	1.5
Outcome 4	Population dynamics	0.9	0.2	1.1
Programme coordination and assistance		0.5	–	0.5
<b>Total</b>		<b>4.5</b>	<b>4.5</b>	<b>9.0</b>



## I. Situation analysis

1. With a total population of 6.4 million, El Salvador is a country largely populated by young people, with 21.5 per cent aged 10-19 years and 18.6 per cent aged 20-29 years. The Directorate General of Statistics and Censuses (2014) estimated that 2032 will see the peak of the demographic bonus. The present Government assumed office in June 2014 and launched the National Development Plan, 2014-2019, in January 2015, in which it defined three pillars: productivity, education and citizen security.

2. El Salvador has dropped 10 positions on the human development index since 2011, ranking 115 of 189 countries in 2013. Since 2005, migration has led to an average of annual net loss of 57,000 in the country's population. Migration patterns have been determined by gang violence, social inequities and discrimination, and the country's vulnerability to natural disasters. El Salvador ranks tenth among countries with the highest disaster risk, and second among countries with the highest economic risk exposure to two or more hazards and the highest percentage of total population at a relatively high mortality risk due to natural disaster.

3. In 2014, the Ministry of Health reported the maternal mortality ratio at 47.5 deaths per 100,000 live births. Almost half of all maternal deaths occurred among women aged 10-24 years; 16 per cent of these were reported as pregnancy-related suicides, mostly among adolescent girls under age 19. Since 2011, the coverage of antenatal care and skilled attendance at birth has decreased, by 14.1 and 7.0 per cent, respectively.

4. The National Family Health Survey 2008 calculated the unmet need for family planning at 12 per cent among women in union aged 15-49 years, which was significantly higher among the rural, poorest, least educated women and among adolescents aged 15-19 years. Over 60 per cent of women aged 20-24 years had their first pregnancy before age 19 and nearly half of these (42 per cent) were aged 12-17 years. Although El Salvador is implementing its adolescent-friendly health services strategy and comprehensive sexuality education, 10.7 per cent of sexually active women aged 20-24 years had their first sexual intercourse before age 15, and only 3 in 10 used protection. In 2013, the public sector reported 1,407 students dropping out of school as a result of pregnancy and sexual violence. Early unprotected sex and sexual violence are important factors conditioning adolescent pregnancy and HIV prevalence among young people. Between 2012 and 2014, over 4,000 HIV-positive cases were reported among people aged 15-24 years, with an even (1:1) gender ratio.

5. El Salvador received 159 recommendations from its second Universal Periodic Review, 69 of which reflected the need to further advance sexual and reproductive rights, particularly in comprehensive sexuality education, adolescents' access to contraceptives, decriminalization of abortion, and development of inclusive policies for women and young people, persons with disabilities, the indigenous and the elderly.

6. Although there is insufficient and inconsistent data, gender-based violence is a major concern. It is estimated that one woman is sexually assaulted every three hours; the female homicide rate has been steadily increasing; it is already among the highest in the world, with 8.4 violent deaths for every 100,000 people. The Ombudsman's Office reported that, between 2005 and 2014, only 5 per cent of femicides reached the judicial stage, underscoring how critical access to justice remains.

7. The population and housing census is scheduled to take place in 2017. However, with no unified national statistics system in place and insufficient resources available

for upgrading the technical capacity of statistical institutions, data gathering, analysis, dissemination and coordination remain a challenge.

## II. Past cooperation and lessons learned

8. The final evaluation of the previous country programme highlighted the following achievements: (a) development of a sexual and reproductive health policy approved by the Ministry of Health; (b) improved access to modern contraceptive methods at public services; (c) all maternity wards in the country implementing the reproductive health commodity security strategy; (d) comprehensive sexuality education incorporated into the public school curricula; (e) integrated model for survivors of sexual violence implemented; (f) strengthened capacity of health personnel in implementing the Minimum Initial Service Package for reproductive health in emergencies; (g) sexual and reproductive health incorporated in migration-related learning tools and services; (h) improved planning and budgeting exercises with updated population projections at national and subnational levels and for Salvadoran populations abroad; and (i) online vital statistics system recording family registration in 262 facilities.

9. Lessons learned from the previous programme indicate that (a) high-level political support is key to achieving strategic initiatives jointly developed by the Government and UNFPA; (b) strengthening governing bodies is essential to achieving inter-institutional and intersectoral coordination for a comprehensive response to national priorities; (c) formulation of a resource mobilization strategy is key to expanding the scope of UNFPA work in line with national priorities; and (d) actively involving decision makers and technical national staff in programme implementation is essential for sustainability.

## III. Proposed programme

10. UNFPA designed the proposed programme based on the ‘Delivering-as-one’ approach and developed it through consultations with the Government and other strategic partners. It builds on previous achievements and lessons learned, in line with national priorities, as reflected in the National Development Plan, 2014-2019, the United Nations Development Assistance Framework (UNDAF), 2016-2020, and the UNFPA strategic plan, 2014-2017. The programme will be guided by the sustainable development goals and the post-2015 development agenda.

### A. Outcome 1: Sexual and reproductive health

11. Output 1: Increase capacity of Ministry of Health to incorporate human rights and gender equality approaches into the provision of integrated quality sexual and reproductive health services, including in humanitarian settings. UNFPA will achieve this by (a) promoting political dialogue to incorporate human rights and gender equality into national norms and standards on sexual and reproductive health, focusing on the most excluded groups, including indigenous people, persons with disabilities, and persons of diverse sexual orientation; (b) enabling intersectoral dialogue to ensure adequate budget allocation for modern contraceptives, including emergency contraception; (c) expanding implementation of the reproductive health commodity security strategy for emergency obstetric care, including for unsafe abortion complications; (d) promoting evidence-based advocacy for the implementation of national strategies for family planning, including behavioural change communication and comprehensive condom programming, focused on adolescents and youth, and on prevention of HIV and adolescent pregnancies; and (e) advocating and providing technical assistance to the national civil protection system and the Ministry of Health

to integrate the Minimum Initial Service Package for reproductive health in emergencies into national preparedness and response plans.

## **B. Outcome 2: Adolescents and youth**

12. Output 1: Strengthened capacities of young people to advocate for the development and implementation of comprehensive laws, policies and regulations on sexual and reproductive health and rights, including comprehensive sexuality education, and the provision of care in humanitarian contexts, focused on the protection of very young adolescent girls aged 10-14 years. UNFPA will achieve this by (a) promoting active participation of adolescents and youth in intersectoral forums and the implementation of programmes that address sexual and reproductive health and rights; (b) generating knowledge on the sexual and reproductive health and reproductive rights of young people and introducing comprehensive sexuality education in the national system; (c) monitoring the quality standards of comprehensive sexuality education and sexual and reproductive health-friendly services, including in humanitarian contexts; (d) promoting the involvement of youth networks in social audits on the provision of integrated and quality sexual and reproductive health services; and (e) generating mechanisms for the prevention of pregnancy-related suicide from psychosocial and human rights-based approaches.

## **C. Outcome 3: Gender equality and women's empowerment**

13. Output 1: Strengthened capacities of national government institutions and civil society organizations to incorporate gender-based violence prevention and care and sexual and reproductive rights into national policies and programmes, focused on very young adolescent girls, youth and women. UNFPA will achieve this by (a) advocating for earmarked funds in national budgets to address sexual violence; (b) advocating for the establishment of a specialized system to provide care and restitution for adolescent girls who survive sexual violence, with special focus on very young adolescents; (c) promoting evidence-based advocacy and policy dialogue with a wide range of national stakeholders, including civil society, to harmonize and align existing norms and standards on sexual and reproductive rights, and on gender-based and sexual violence; (d) facilitating harmonization among national institutions to implement public policies, protocols and programmes that protect sexual and reproductive rights, focused on young people and adolescents; (e) facilitating articulation among national institutions and civil society organizations to monitor and advocate for national implementation of international recommendations on human rights, focused on sexual and reproductive rights; and (f) promoting the creation of a social network to engage men and boys on gender equality (including new masculinities and gender-based violence), sexual and reproductive health and reproductive rights.

## **D. Outcome 4: Population dynamics**

14. Output 1: Strengthened capacities of national institutions to generate, use and disseminate timely, high-quality disaggregated socio-demographic data for evidence-based decision-making. UNFPA will achieve this by (a) advocating to include the development of the population and housing census as a priority of the national agenda; (b) fostering knowledge management through the conduct of research studies on human rights and gender equality, sexual and reproductive health, youth migration and gang violence; (c) advocating for easy public access to socio-demographic online information and databases; (d) facilitating policy dialogue among national institutions to incorporate harmonized socio-demographic information, focused on migration, in existing national and subnational surveys and administrative registries; (e) advocating and providing technical assistance to harmonize existing data collection tools on

migration to be shared among countries of the northern triangle (El Salvador, Honduras, Guatemala) and Mexico; (f) advocating and developing the capacities of government institutions to use existing tools on socio-demographic data in emergency situations; and (g) advocating for the implementation of a gender-based violence information and monitoring system.

15. Output 2: Strengthened capacities of government institutions and civil society organizations in the analysis and utilization of socio-demographic evidence to incorporate population dynamics into public policies and programmes related to sexual and reproductive health and gender equality, focused on adolescents and youth, including in humanitarian contexts. UNFPA will achieve this output by: (a) enabling inter-institutional coordination towards the creation of a national statistical system; (b) promoting the development of specialized studies from existing databases of national surveys and records; (c) promoting the development of a country-specific population situational analysis to generate evidence for public policy programming; and (d) sensitizing decision makers to use evidence on population dynamics in the formulation of rights-based public policies on youth, migrants and their families.

#### **IV. Programme management, monitoring and evaluation**

16. UNFPA, the Ministry of Foreign Affairs, through the Vice Ministry for Cooperation and Development, and the Planning Technical Secretariat of the Presidency will jointly monitor, articulate and coordinate the implementation of the programme applying a results-based management approach, the 'Delivering-as-one' framework and the UNDAF, 2016-2020, for planning, implementing, monitoring and evaluating the programme and partners' performance.

17. National execution will be the preferred modality through selected implementing partners based on their ability to deliver programmes. UNFPA will rely, to the extent possible, on national monitoring systems and will develop joint programmes with other United Nations organizations. In the event of humanitarian crises, UNFPA and the Government may reprogramme activities.

18. The country office includes staff funded through the UNFPA institutional budget who perform management and development effectiveness functions. UNFPA will allocate programme funds to ensure adequate staff capacity to provide technical and programmatic expertise.

19. The country office will seek technical support, including through South-South cooperation, from the Latin America and the Caribbean Regional Office and UNFPA headquarters. The programme will also use national, regional or international expertise as required.

20. UNFPA will develop a partnership plan and a resource mobilization strategy to engage government institutions, civil society, bilateral donors and the private sector to strengthen alliances and leverage resources.

## RESULTS AND RESOURCES FRAMEWORK FOR EL SALVADOR (2016-2020)

<b>National priority:</b> Construction of the national comprehensive health-care system from a rights-based approach <b>UNDAF outcome:</b> The population benefits from universal, equal coverage and access of quality basic goods and services				
UNFPA strategic plan outcome	Country programme outputs	Output indicators, baselines and targets	Partners	Indicative resources
<b>Outcome 1: Sexual and reproductive health</b> Increased availability and use of integrated sexual and reproductive health services, including family planning, maternal health and HIV, that are gender-responsive and meet human rights standards for quality of care and equity in access  <u>Outcome indicators:</u> <ul style="list-style-type: none"> <li>Maternal mortality ratio <i>Baseline: 47.5; Target: 35</i></li> <li>Prevalence in the use of contraceptive methods (modern) <i>Baseline: 72; Target: 76</i></li> <li>Budget allocation for procurement of total need of contraceptives <i>Baseline: \$1.5 million; Target: \$5 million</i></li> </ul>	<b>Output 1:</b> Increased capacity of Ministry of Health to incorporate human rights and gender equality approaches into the provision of integrated quality sexual and reproductive health services, including in humanitarian settings	<ul style="list-style-type: none"> <li>Number of guidelines and standards developed with technical support from UNFPA and adopted by Ministry of Health that include a gender and human-rights approach to the provision of sexual and reproductive health services <i>Baseline: 0; Target: 4</i></li> <li>National capacity to implement Minimum Initial Service Package at the onset of a crisis in place <i>Baseline: No; Target: Yes</i></li> <li>National strategy for social behaviour change, communication strategies for adolescent and youth, including from key populations, in place <i>Baseline: No; Target: Yes</i></li> <li>Number of national institutions supported by UNFPA that implement the comprehensive condom programming strategy <i>Baseline: 0; Target: 1</i></li> </ul>	Ministries of Health; Interior; National Institute for the Development of Women; National Institute of Youth	\$4.4 million (\$1.9 million from regular resources and \$2.5 million from other resources)
<b>National priority:</b> Construction of the national comprehensive health-care system from a rights-based approach <b>UNDAF outcome:</b> The population enjoys universal, equal coverage and access to high-quality basic goods and services				
<b>Outcome 2: Adolescents and youth</b> Increased priority on adolescents, especially on very young adolescent girls, in national development policies and programmes, particularly increased availability of comprehensive sexuality education and sexual and reproductive health  <u>Outcome indicator(s):</u> <ul style="list-style-type: none"> <li>Number of public policy instruments which provide adolescents with access to sexual and reproductive health services <i>Baseline: 1; Target: 2</i></li> <li>Specific fertility rate in adolescents <i>Baseline: 89 per 1,000; Target: 87 per 1,000</i></li> </ul>	<b>Output 1:</b> Strengthened capacities of young people to advocate for the development and implementation of comprehensive laws, policies and regulations on sexual and reproductive health and reproductive rights, including comprehensive sexuality education, and the provision of care in humanitarian contexts, focused on the protection of very young adolescent girls aged 10-14 years	<ul style="list-style-type: none"> <li>Number of subnational offices of the Ministry of Education that implement comprehensive sexuality education in schools with UNFPA support <i>Baseline: 0; Target: 7</i></li> <li>Youth platforms supported by UNFPA that advocate with national and local decision makers for increasing investment in youth and adolescent programmes <i>Baseline: 0; Target: 3</i></li> </ul>	Ministries of Education; Health; Ombudsman's Office; national institutions related to women and children's rights; National Institute for the Development of Women; non-governmental organizations (NGOs)	\$1.5 million (\$0.6 million from regular resources and \$0.9 million from other resources)
<b>National priority:</b> Strengthening the provision of integrated services for the protection and care of (comprehensive and specialized) victims and witnesses of violence, especially children, adolescents and women <b>UNDAF outcome:</b> El Salvador enjoys essential country consensus, guaranteeing the population full use of their rights; the population lives within a safe environment under equitable and inclusive power relations and with access to justice				
<b>Outcome 3: Gender equality and women's empowerment</b> Advanced gender equality, women's and girls' empowerment and reproductive rights, including for the most vulnerable and marginalized women, adolescents and youth  <u>Outcome indicator(s):</u>	<b>Output 1:</b> Strengthened capacities of national government institutions and civil society organizations to incorporate gender-based violence prevention and care and sexual and reproductive rights into national policies	<ul style="list-style-type: none"> <li>Number of public institutions supported by UNFPA that comply with Universal Periodic Review recommendations on the sexual and reproductive rights of women, girls and adolescents <i>Baseline: 0; Target: 2</i></li> <li>Number of civil society organizations supported by UNFPA that implement a social monitoring mechanism on sexual and reproductive rights</li> </ul>	Ministries of Education; Health; Ombudsman's Office; National Institute for the Development of Women; NGOs; justice sector	\$1.5 million (\$0.6 million from regular resources and \$0.9 million from other resources)

<ul style="list-style-type: none"> <li>• Policies or national plans that include sexual and reproductive rights <i>Baseline: 1; Target: 2</i></li> <li>• At least two national agencies have adopted measures based on accepted Universal Periodic Review recommendations concerning reproductive rights from previous reporting periods <i>Baseline: 0; Target: 2</i></li> <li>• Number of organizations that have supported the institutionalization of programmes to engage men and boys on gender equality, sexual and reproductive health and reproductive rights, in partnership with UNFPA <i>Baseline: 0; Target: 3</i></li> </ul>	and programmes, focused on very young adolescent girls, youth and women	<p><i>Baseline: 0; Target: 4</i></p> <ul style="list-style-type: none"> <li>• Number of public institutions supported by UNFPA that implement a specialized system to provide attention and care to adolescent girls survivors of sexual violence <i>Baseline: 0; Target: 3</i></li> </ul>		
<p><b>National priority:</b> Continue to develop a government with the capacity to plan and manage development, and professional public administration to ensure access and quality in the delivery of public goods and services</p> <p><b>UNDAF outcome:</b> The population benefits from universal, equal coverage and access to quality basic goods and services; the population is resilient when addressing disasters, environmental degradation and the negative effects of climate change</p>				
<p><b>Outcome 4: Population dynamics</b> Strengthened national policies and international development agendas through integration of evidence-based analysis on population dynamics and their links to sustainable development, sexual and reproductive health and reproductive rights, HIV and gender equality</p> <p><u>Outcome indicator(s):</u></p> <ul style="list-style-type: none"> <li>• At least one census of good quality that is processed, analysed and disseminated following internationally agreed recommendations <i>Baseline: 0; Target: 1</i></li> <li>• New policies, strategies and programmes address population dynamics by including population trends and projections in the definition of development objectives <i>Baseline: 2; Target: 3</i></li> <li>• There is an existing government budget to execute census of population and housing <i>Baseline: 0; Target: 1</i></li> </ul>	<p><u>Output 1:</u> Strengthened capacities of national institutions to generate, use and disseminate timely, high-quality disaggregated sociodemographic and reproductive health data for evidence-based decision-making</p>	<ul style="list-style-type: none"> <li>• Surveys and/or administrative registries conducted with UNFPA support where key domestic variables related to demographic dynamics have been included (sexual and reproductive health, migration) <i>Baseline: 1 Target: 2</i></li> <li>• Number of national institutions supported by UNFPA that generate sociodemographic and reproductive health data based on harmonized methodology allowing for data aggregability and comparability <i>Baseline: 0 Target: 3</i></li> <li>• Number of new or updated disaggregated sociodemographic databases accessible to the public to enable the follow-up of socioeconomic and demographic inequalities <i>Baseline: 7; Target: 10</i></li> </ul>	<p>Department of Statistics and Census; Technical and Planning Secretariat of the Presidency; Ministries of Foreign Affairs; Health; national civil protection system; Ombudsman's Office, National Council for Migrants; National Institute for the Development of Women; National Institute of Youth; United Nations organizations</p>	<p>\$0.8 million (\$0.7 million from regular resources and \$0.1 million from other resources)</p>
<p><u>Output 2:</u> Strengthened capacities of government institutions and civil society organizations in analysis and utilization of sociodemographic evidence to incorporate population dynamics into public policies and programmes related to sexual and reproductive health and gender equality, focused on adolescents and youth, including in humanitarian contexts</p>	<ul style="list-style-type: none"> <li>• Number of studies and reports developed with UNFPA support that address population dynamics to identify development trends in sexual and reproductive health, gender and youth <i>Baseline: 8; Target: 16</i></li> <li>• The country has conducted the population situation analysis with UNFPA support <i>Baseline: 0 Target: 1</i></li> <li>• Number of public policies developed with UNFPA support to protect the rights of migrants and their families <i>Baseline: 0 Target: 1</i></li> </ul>	<p>\$0.3 million (\$0.2 million from regular resources and \$0.1 million from other resources)</p>		<p>Total for programme coordination and assistance: \$0.5 million from regular resources</p>