



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

Distr.: General  
5 April 2010

Original: English

**Annual session 2010**

21 June to 2 July 2010, Geneva

Item 16 of the provisional agenda

**UNFPA – Country programmes and related matters**

**UNITED NATIONS POPULATION FUND**

**Draft country programme document for Iraq**

Proposed indicative UNFPA assistance: \$30 million: \$8 million from regular resources and \$22 million through co-financing modalities and/or other, including regular, resources

Programme period: 4 years (2011-2014)

Cycle of assistance: First

Category per decision 2007/42: B

Proposed indicative assistance by core programme area (Amounts in USD):

M: Million USD

	Regular resources	Other	Total
Reproductive health and rights	4.0	10.0	14.0
Population and development	2.0	7.5	9.5
Gender equality	1.4	4.5	5.9
Programme coordination and assistance	0.6	-	0.6
<b>Total</b>	<b>8.0</b>	<b>22.0</b>	<b>30.0</b>

## I. Situation analysis

1. Iraq has a well-educated and skilled population, oil revenues and large amounts of agricultural land. However, three decades of war, internal and government turmoil, economic sanctions, population displacements, the marginalization of women, and a high incidence of mortality and disability have hindered development. Development indicators have deteriorated. Life expectancy dropped from 62.5 years in 1995 to 58 years in 2005. Since 2006, over 1.6 million persons have been internally displaced, and another 2 million sought refuge outside Iraq. Twenty-three per cent of the population lives under the poverty line (36 per cent in rural areas).

2. Between 1970 and 2007, the population tripled from 10.2 million to 30.3 million, and is expected to increase fourfold by 2050. Forty-three per cent of the population is under the age of 15, and 20 per cent of youth are of working and reproductive age. The total fertility rate was 4.3 births per women in 2006.

3. The maternal mortality ratio is estimated at 84 deaths per 100,000 live births. This is higher than that of neighbouring countries (41 for Jordan and 65 for Syria). One in four women who will be delivering face serious pregnancy complications, caused by frequent pregnancies, the limited availability of obstetric care, limited referrals, and anaemia (35 per cent among pregnant women). Maternal mortality and poor reproductive health are directly related to the early age at first marriage (22.6 per cent of women are married before 18), low modern contraceptive use (in 2004, only 33 per cent of women of reproductive age used modern contraceptives), and a lack of male involvement in the area of reproductive health.

4. About 71 per cent of the population lives in urban centres. Displacement and poor agricultural, rural and environmental development are driving migration towards urban centres, and generating pressure on urban services. As a result, 57 per cent of urban residents live in slumlike conditions.

5. There were 5.9 million young people aged 15 to 24 in 2007, a figure that is expected to reach 7.5 million in 2015. These numbers constitute an economic opportunity as well as a challenge. A number of youth development indicators are of concern. For example, the enrolment ratio in secondary education is less than 40 per cent, and the illiteracy and youth unemployment rates are high. Only 40 per cent of youth recognize the value of taking part in social and political life. Only 46 per cent of youth can identify ways in which HIV/AIDS is transmitted, and only 26 per cent know how to protect themselves against HIV/AIDS. Data indicate rising incidences of substance abuse, violence and exploitation among youth.

6. A pattern of violence against women has emerged, which has been difficult to document because of its cultural and social roots. Examples include forced marriage and physical and psychological violence. Women's participation in the labour force has decreased over the last few years. Several reports indicate a rising incidence in the trafficking of young girls. Female genital cutting and honour killings exist in the north of the country. Women's social status and their participation in social life have been undermined, particularly in conflict-affected zones. This has resulted in restricted women's mobility and involvement in decision-making processes at home and in society.

7. In 2006, the Government prepared a four-year national development strategy, 2007-2010, to guide national reconstruction efforts. Although this plan achieved many of its targets, the Government was unable to spend 60 per cent of its investment budget over the past four years. In 2009, the Government formulated a new five-year national development plan, 2010-2014, and a poverty reduction strategy, with the involvement of the United Nations system and donors. Both the national development plan and the poverty reduction strategy focused on addressing poverty, rapid population growth, population displacements, rural-to-urban migration, youth development, and gender equality. However, the Government faces a

number of challenges: (a) a lack of people-centred social policies and strategies, including those on youth and gender equality; (b) the centralized government structure, which uses outdated managerial tools and procedures; (c) the 'brain' drain and high turnover of managers, and inadequate managerial skills at subnational levels; (d) a fragmented statistical system for results-based monitoring; and (e) a newly established civil society sector, which lacks coordination.

8. The current health strategy seeks to develop a strong primary health-care system. There is a need to integrate reproductive health programmes into the primary health-care system and to adopt technical norms, management practices and tools to strengthen primary health care.

## II. Past cooperation and lessons learned

9. Between 1971 and 1991, UNFPA supported a number of population and family planning projects. UNFPA recommended its support to Iraq in 1996. In 2003, UNFPA provided medical kits and supplies. Since 2004, UNFPA has supported reproductive health interventions, including: (a) enhancing obstetric care in 24 hospitals and 84 health centres through the provision of medical equipment and supplies, staff training and the rehabilitation of facilities; and (b) implementing a community-based project in the southern marshlands.

10. Since mid-2007, UNFPA has used core resources to launch several initiatives, including support for the census, youth activities and services to combat violence against women. These initiatives were funded from the United Nations Development Group Iraq Trust Fund and other resources. These projects included a large South-South component; some of them also included monetary contributions from the Government.

11. Since the 2003 explosion at the United Nations premises in Baghdad, the UNFPA office has been based in Amman, Jordan, with a limited presence in Iraq. An increase in UNFPA staff in Iraq, along with frequent missions to Iraq by Jordan-based staff, has improved programme delivery.

12. Lessons learned from the previous period indicate the need for: (a) institutional capacity-building and systems development in national entities; (b) increased participation at the subnational level and by civil society; (c) intersectoral coordination among government and civil society entities; (d) national execution to ensure national ownership and sustainability; (e) the promotion of male involvement; (f) emergency preparedness in programme design; and (g) an increased UNFPA presence inside Iraq.

## III. Proposed programme

13. The proposed programme is aligned with national priorities, and with the findings of the common country assessment. It will contribute to three outcomes of the United Nations Development Assistance Framework (UNDAF), 2011-2014: (a) improved governance and protection of human rights; (b) increased access to high-quality essential services; and (c) investment in human capital and the empowerment of women and youth.

14. Using human rights-based, gender-sensitive and culturally sensitive approaches, the programme will build the capacity of: (a) rights holders to claim their rights and make their own choices; and (b) government and civil society entities, as duty bearers, to fulfil their obligations. The programme will promote local and regional partnerships through South-South cooperation.

15. The programme will support interventions for partners at the central level, in selected governorates, and in underserved districts. UNFPA and the Government will select target areas in consultation with Iraqi partners.

### *Reproductive health and rights component*

16. The two outcomes for this component will contribute to the UNDAF priority of increased access to high-quality, essential services. These outcomes are: (a) enhanced efficiency of primary health care and referral systems to offer a comprehensive reproductive-health package; and (b) increased utilization by women and youth, in underserved areas, of gender- and age-sensitive reproductive health, family planning, and psychosocial services. Three outputs will help to

achieve these outcomes.

17. Output 1: Technical and institutional capacity is strengthened at national and subnational levels to plan, manage and monitor the implementation of a package of high-quality reproductive health services, as an integral part of the primary health-care system and health-sector reform efforts. Strategies include: (a) enhancing management skills and tools at all levels; (b) reinforcing the national management and logistics system for reproductive health and family planning commodities; (c) improving the skills and competencies of reproductive health providers, particularly female nurses and midwives, through pre-service and in-service training; (d) integrating reproductive health into the primary health-care system and the health-sector reform process; (e) adapting reproductive health norms, protocols and guidelines to the realities and challenges of the primary health-care system; and (f) supporting health-systems research.

18. Output 2: Community-based sensitization on reproductive health and family planning issues, targeting women and men, is intensified in underserved districts. Strategies include: (a) encouraging partnerships between the health-care system and local non-governmental organizations (NGOs); (b) supporting outreach health education through female health volunteers; and (c) working with community and religious leaders to support dialogue and male-involvement initiatives.

19. Output 3: Youth health, development and protection programmes, including awareness-raising, are established within government and community-based services in selected areas, with a focus on youth who are most at risk. Using a participatory youth approach, strategies include: (a) supporting life skills-based peer education and empowerment among in-school and out-of-school youth; (b) institutionalizing youth-friendly health services in health centres; (c) strengthening rehabilitation and social reintegration services for those youth who are most at risk; and (d) capacity-building of the educational system to integrate life skills, healthy lifestyles, and gender equality into extracurricular activities in schools.

#### *Population and development component*

20. This component will contribute to the UNDAF priorities of improved state governance, and the empowerment of women and youth. The outcome of this component is: enhanced government responsiveness to priority population and gender equality issues, and evidence-based policymaking, within the context of poverty reduction and the Millennium Development Goals. Three outputs will help to achieve this outcome.

21. Output 1: The user-oriented national statistical system is strengthened to produce, disseminate and promote the utilization of high-quality population data at national and subnational levels. Strategies include: (a) strengthening national institutions to implement and utilize data from the 2010 census and surveys; (b) supporting the modernization of a national statistical system to produce and disseminate population data; and (c) enhancing the analysis and utilization of data at national and subnational levels for good governance.

22. Output 2: A multisectoral national youth strategy is formulated and monitored, with the participation of youth, at national and subnational levels. Strategies include: (a) promoting research, policy dialogue, and communication on youth rights; (b) supporting an intersectoral mechanism and participatory youth structures at local and national levels; and (c) providing technical support for youth-friendly district initiatives in selected governorates.

23. Output 3: The capacity of national and subnational entities is strengthened to develop and monitor action plans on priority population issues, including rapid population growth, population displacement, rural-to-urban migration, youth and gender equality. Strategies include: (a) supporting the establishment and activities of inter-ministerial commissions to address priority population issues; (b) enhancing the capacity of parliamentary commissions to lead evidence-based advocacy efforts; and (c) supporting research centres to analyse population issues and their impact on socio-economic development.

#### *Gender equality component*

24. The outcome of this component will contribute to the UNDAF priority of investing in

human capital and empowering women and youth. The outcome is: institutionalizing services and operational mechanisms for protecting and empowering women and young girls, in line with Security Council resolution 1325 on women, peace and security. Two outputs will help to achieve this outcome.

25. Output 1: The institutional, technical and operational capacity of line ministries and local non-governmental organizations are strengthened to secure services for survivors of violence against women. Strategies include: (a) building the knowledge of stakeholders on the extent, forms and effects of violence against women; (b) integrating measures to combat gender-based violence into sectoral action plans and local services; (c) developing norms for, and the technical skills of, field workers from line ministries on managing cases of gender-based violence; and (d) building partnerships and coordination structures among stakeholders.

26. Output 2: The capacity of women's non-governmental organizations is strengthened to advocate gender equality, women's rights and reproductive health, and to promote women's empowerment and participation in the peacebuilding and development of Iraq. In line with Security Council resolution 1325, strategies include: (a) institutional capacity-building of grass-roots women's associations; (b) supporting outreach sensitization efforts among women regarding their social rights; (c) supporting networking among women's NGOs at local and national levels; and (d) collaborating with religious and community leaders to promote male involvement in efforts to combat violence against women.

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

27. UNFPA will undertake joint programming with other United Nations organizations in its programme areas. To promote institutional capacity-building, UNFPA will encourage South-South cooperation with regional entities.

28. Along with direct programme execution, UNFPA will gradually introduce national

execution, which involves government departments at national and subnational levels, and national NGOs. UNFPA will explore co-financing with Iraqi partners to enhance ownership of the programme.

29. In collaboration with the Ministry of Planning and Development Cooperation, UNFPA will establish a programme steering committee with national partners and other United Nations organizations. UNFPA and the Government will organize programme reviews annually, and will carry out a programme evaluation in 2014.

30. As the security situation improves, UNFPA will gradually move its office to Iraq, with a sub-office in the Kurdistan region. The UNFPA office is headed by a representative based in Amman, Jordan, with a chief of operations in Baghdad, a programme coordinator in the Kurdistan region, and national officers in Baghdad and Erbil, along with finance and administrative staff. The UNFPA Arab States Regional Office will provide programme and technical assistance.

## RESULTS AND RESOURCES FRAMEWORK FOR IRAQ

<p><b>National priority:</b> promoting a public, primary health-care system to reduce morbidity and mortality among the population, particularly among children and mothers</p> <p><b>UNDAF outcome 4:</b> increased access to high-quality essential services, mainly through: (a) a participatory policy framework and implementation mechanisms; (b) access of youth to and completion of high-quality basic, vocational and non-formal education; and (c) access to and utilization of high-quality primary health care</p>				
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><b>Outcome:</b> Enhanced efficiency of primary health care and referral systems to offer a comprehensive reproductive health package</p> <p><b>Outcome indicators:</b></p> <ul style="list-style-type: none"> <li>• Contraceptive prevalence rate</li> <li>• Percentage of deliveries attended by skilled providers</li> <li>• Percentage of health budget allocated to reproductive health</li> </ul> <p><b>Outcome:</b> Increased utilization by women and youth, in underserved areas, of gender- and age-sensitive reproductive health, family planning, and psychosocial services</p> <p><b>Outcome indicators:</b></p> <ul style="list-style-type: none"> <li>• Percentage of women satisfied with services provided</li> <li>• Percentage of young people satisfied with the quality of care and rehabilitation services</li> <li>• Percentage of women and men knowing three modern family planning methods and three means of HIV transmission</li> </ul>	<p><b>Output 1:</b> Technical and institutional capacity is strengthened at national and subnational levels to plan, manage and monitor the implementation of a package of high-quality reproductive health services, as an integral part of the primary health-care system and health-sector reform efforts</p> <p><b>Output indicators:</b></p> <ul style="list-style-type: none"> <li>• Percentage of primary health-care centres and district hospitals providing a high-quality reproductive-health package, including three family planning methods</li> <li>• Number of facilities providing basic and/or comprehensive emergency obstetric care per 500,000 inhabitants</li> <li>• Percentage of health centres with skilled providers and midwives</li> <li>• Percentage of health directorates, at all levels, adopting and correctly using a reproductive health commodity management and logistics system</li> </ul> <p><b>Output 2:</b> Community-based sensitization on reproductive health and family planning issues, targeting women and men, is intensified in underserved districts</p> <p><b>Output indicators:</b></p> <ul style="list-style-type: none"> <li>• Number of health facilities having collaborative agreements with local associations</li> <li>• Number of communities with female volunteers conducting outreach activities</li> <li>• Number and percentage of health centres conducting outreach activities</li> </ul> <p><b>Output 3:</b> Youth health, development and protection programmes, including awareness-raising, are established within government and community-based services in selected areas, with a focus on youth who are most at risk</p> <p><b>Output indicators:</b></p> <ul style="list-style-type: none"> <li>• Number and percentage of health centres providing youth-friendly health services</li> <li>• Percentage of educational and recreational youth facilities conducting life-skills training and empowerment programmes through peer educators</li> <li>• Percentage of secondary schools and vocational facilities integrating life skills into their extracurricular activities</li> <li>• Percentage of youth released from reformatories provided with reintegration assistance</li> </ul>	<p>Ministries of: Education; Health; Labour and Social Affairs; Youth and Sports</p> <p>Food and Agriculture Organization of the United Nations; International Labour Organization (ILO); United Nations Children's Fund (UNICEF); United Nations Educational, Cultural and Scientific Organization (UNESCO); World Health Organization</p> <p>NGOs; research centres</p>	<p>\$14 million (\$4 million from regular resources and \$10 million from other resources)</p>
<p><b>National priorities:</b> (a) formulating and implementing effective national policies favouring balanced population growth, composition and spatial distribution; and (b) promoting the empowerment and capacity of youth to face social challenges and to contribute to community development</p> <p><b>UNDAF outcome 1:</b> improved governance, including the protection of human rights, mainly through efficient, accountable and participatory governance at national and subnational levels</p> <p><b>UNDAF outcome 5:</b> investment in human capital and the empowerment of women, youth and children, mainly through the active participation of youth in the social development process</p>				
Population and development	<p><b>Outcome:</b> Enhanced government responsiveness to priority population and gender equality issues, and evidence-based policymaking, within the context of poverty reduction and the Millennium Development Goals</p>	<p><b>Output 1:</b> The user-oriented national statistical system is strengthened to produce, disseminate and promote the utilization of high-quality population data at national and subnational levels</p> <p><b>Output indicators:</b></p> <ul style="list-style-type: none"> <li>• Number of in-depth studies based on data from the census and other surveys</li> <li>• Number of statistical policies and protocols drafted and approved</li> <li>• Number of statistical subsystems developed as part of a national statistical system, and capable of using existing population-related data</li> </ul>	<p>Ministries of: Education; Health; Labour and Social Affairs; Planning and Development Cooperation; Youth and Sports</p> <p>Central Organization for Statistics and Information Technology; Council of Ministers;</p>	<p>\$9.5 million (\$2 million from regular resources and \$7.5 million from other resources)</p>

	<p><u>Outcome indicators:</u></p> <ul style="list-style-type: none"> <li>• Number of sectoral and local plans monitored using a disaggregated database</li> <li>• Satisfaction rate of planners and data users</li> <li>• Level of compliance with the United Nations Statistical Division's Fundamental Principles of Official Statistics</li> <li>• Percentage increase in the budgetary allocation to priority population issues</li> <li>• Level and percentage of youth participation in decision-making at their schools and within their communities</li> </ul>	<ul style="list-style-type: none"> <li>• Number of dissemination activities related to census and survey data</li> </ul> <p><u>Output 2:</u> A multisectoral national youth strategy is formulated and monitored, with the participation of youth, at national and subnational levels</p> <p><u>Output indicators:</u></p> <ul style="list-style-type: none"> <li>• Number of sectoral strategies integrating youth issues into action plans</li> <li>• Number of participatory youth structures established at national and local levels</li> <li>• Number of districts implementing a package of interventions targeting youth</li> </ul> <p><u>Output 3:</u> The capacity of national and subnational entities is strengthened to develop and monitor action plans on priority population issues, including rapid population growth, population displacement, rural-to-urban migration, youth and gender equality</p> <p><u>Output indicators:</u></p> <ul style="list-style-type: none"> <li>• Number of national and sectoral action plans developed</li> <li>• Amount of legislation submitted by parliamentary commissions</li> <li>• Number of population-related research studies published</li> <li>• Compliance of action plans with human resources, Millennium Development Goals and the Programme of Action of the International Conference on Population and Development</li> </ul>	<p>Parliament</p> <p>ILO; UNDP; United Nations Economic and Social Commission for Western Asia; UNESCO; UNICEF; United Nations Statistical Division</p> <p>NGOs; research centres</p>	
<p><b>National priority:</b> promoting an enabling environment for women's empowerment and development that broadens their capacity and choices, and secures gender equality</p> <p><b>UNDAF outcome 5:</b> investment in human capital and the empowerment of women, youth and children, mainly through: (a) improved knowledge, attitudes and practices regarding the roles and rights of women and youth; (b) institutionalized policies, plans and budgets related to women's issues; and (c) preventive and protective mechanisms to combat gender-based violence</p>				
<p>Gender equality</p>	<p><u>Outcome:</u> Institutionalizing services and operational mechanisms for protecting and empowering women and young girls, in line with Security Council resolution 1325 on women, peace and security</p> <p><u>Outcome indicators:</u></p> <ul style="list-style-type: none"> <li>• Percentage of cases involving violence against women prosecuted</li> <li>• Percentage change in the attitudes and behaviour of men and women towards violence against women</li> <li>• Utilization and satisfaction rates for established services</li> </ul>	<p><u>Output 1:</u> The institutional, technical and operational capacity of line ministries and local non-governmental organizations are strengthened to secure services for survivors of violence against women</p> <p><u>Output indicators:</u></p> <ul style="list-style-type: none"> <li>• Implementation rate of national and sectoral strategies that combat violence against women</li> <li>• Number of statistical reports and studies produced by relevant sectors and civil society on violence against women</li> <li>• Number of sectoral and civil society services providing violence management</li> <li>• Participation rate of sectors and civil society in coordination mechanisms</li> <li>• Quality of care provided by sectoral and civil society services</li> </ul> <p><u>Output 2:</u> The capacity of women's non-governmental organizations is strengthened to advocate gender equality, women's rights, and reproductive health, and to promote women's empowerment and participation in the peacebuilding and development of Iraq</p> <p><u>Output indicators:</u></p> <ul style="list-style-type: none"> <li>• Number and percentage of districts that have at least one local women's association</li> <li>• Number of communities provided with women's outreach activities</li> <li>• Percentage of women who are members of local associations</li> <li>• Number of sensitization events conducted with the involvement of local community and religious leaders</li> <li>• Number of women's associations that are part of established networks</li> </ul>	<p>Ministries of: Education; Health; Interior; Labour and Social Affairs; Women's Affairs</p> <p>Parliament</p> <p>UNDP; United Nations Development Fund for Women; United Nations High Commissioner for Refugees; World Health Organization</p> <p>NGOs; research centres</p>	<p>\$5.9 million (\$1.4 million from regular resources and \$4.5 million from other resources)</p> <hr/> <p>Programme coordination and assistance: \$0.6 million from regular resources</p>