



**Executive Board of the  
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Programme and of the  
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**UNITED NATIONS POPULATION FUND**

**Final country programme document for Haiti**

Proposed indicative UNFPA assistance:	\$20 million: \$6 million from regular resources and \$14 million through co-financing modalities and/or other, including regular, resources
Programme period:	Three years (2009-2011)
Cycle of assistance:	Fourth
Category per decision 2007/42:	A

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

	Regular resources	Other	Total
Reproductive health and rights	3.0	7	10.0
Population and development	1.4	2	3.4
Gender equality	1.3	5	6.3
Programme coordination and assistance	0.3	-	0.3
<b>Total</b>	<b>6.0</b>	<b>14</b>	<b>20.0</b>

## I. Situation analysis

1. Political instability and economic and social crises have affected Haiti over the past two decades. Despite recent improvements in public security and economic recovery, progress remains fragile. Since 2004, the United Nations Stabilization Mission in Haiti has supported government efforts to ensure stability and consolidate institutional reform.

2. With a population of 9.5 million, Haiti is divided into 10 geographical departments. The poorest country in the western hemisphere, Haiti had a per capita gross domestic product of \$390 in 2003. Seventy-one per cent of Haitians live in poverty, and 50 per cent live in extreme poverty. Rapid urbanization and vulnerability to natural disasters hamper the delivery of social services. Haiti, with a very young population structure, is at an early stage of its demographic transition (60 per cent of Haitians are younger than 24).

3. Emigration and the resulting brain drain of qualified workers pose challenges. About 20,000 Haitians emigrate each year. Recent Inter-American Development Bank reports indicate that some 30 per cent of all households and 44 per cent of metropolitan households receive remittances from expatriates, equivalent to approximately \$1.6 billion in 2006.

4. The total fertility rate decreased from 6.3 children per woman in 1987 to 4 children per woman in 2006. The annual population growth rate is 2 per cent, and the average life expectancy is 60.9 years. Adolescent pregnancies declined from 80 births per 1,000 women in 2000 to 69 per 1,000 in 2006, but fertility remains high in this age group.

5. In 2006, only 25 per cent of women in union used modern contraceptive methods. The unmet demand for family planning is estimated at 38 per cent of women in union. Twenty-six per cent of pregnancies from 2000-2005 were unwanted. In 2007, the Government launched an effort to reposition family planning as a development priority.

6. The maternal mortality ratio is 630 deaths per 100,000 live births, despite the fact that 85 per cent of women have access to prenatal care. Only 36 per cent of women have access to post-natal care, and 75 per cent deliver at home. Contributing factors to maternal deaths include financial constraints and a shortage of trained human resources.

7. The HIV prevalence rate (2.2 per cent) has decreased over the past decade, as access to voluntary testing and treatment has improved. However, HIV and AIDS are increasingly affecting women, with the highest rate (4.1 per cent) among women aged 30-34.

8. Gender disparities persist. Only 55 per cent of women make decisions regarding their health care, and 49 per cent regarding contraception. Twenty-seven per cent of women have been victims of physical violence. However, public awareness of women's rights and promotion of their role as decision makers has increased under the leadership of the Ministry of Women's Affairs and the national coalition against gender-based violence.

9. The 2008-2010 poverty reduction strategy paper is structured around three pillars: growth vectors (drivers of growth); human development; and democratic governance. Priorities relevant to UNFPA include preventing early pregnancies and reducing the level of maternal mortality through the provision of high-quality reproductive health services.

## II. Past cooperation and lessons learned

10. UNFPA has provided assistance to Haiti since 1970. The third country programme (2002-2006), which was harmonized with the programme cycles of the United Nations Children's Fund and UNDP, was extended through 2008. This permitted the programme to be aligned with the 2008-2010 poverty reduction strategy paper and the 2009-2011 United Nations Development Assistance Framework (UNDAF). The programme was divided into three subprogrammes: reproductive

health; population and development strategies; and advocacy, with a focus on gender equity, the prevention of gender-based violence, and the 2003 population census. In addition to \$12.6 million in regular resources, UNFPA mobilized \$19.7 million for the programme.

11. In the area of reproductive health, support focused on reducing maternal mortality and preventing HIV. The programme helped to: (a) develop a national plan to reduce maternal mortality; (b) enhance the delivery of obstetric care in three regional departments; (c) revise reproductive health norms and define an essential package of reproductive health services; (d) advocate a national reproductive health commodity security strategy; (e) provide services that integrate HIV prevention, family planning and income-generation initiatives; (f) provide youth-friendly HIV and AIDS services; (g) strengthen community outreach programmes for vulnerable groups and people living with HIV and AIDS; and (h) provide reproductive health services in areas affected by humanitarian crises.

12. Under the population and development component, results included: (a) the consolidation of the population census database and increased availability of census data; (b) the integration of population, reproductive health and youth issues into the national poverty reduction strategy; (c) a graduate centre for population and development at the University of Haiti; and (d) a network of government and non-government institutions informing decision makers on how to use population data in policy development.

13. The advocacy component scaled up the national capacity to protect women and girls from violence and supported gender mainstreaming in national policies and programmes. Key results included: (a) a national policy and referral networks for victims of gender-based violence; (b) the monitoring of the national plan on gender-based violence; (c) statistics for evidence-based gender mainstreaming in sector-specific policies; (d) databases on marginalized groups,

including people living with HIV, to support advocacy for improved human rights policies; and (e) South-South cooperation with Brazil to assist victims of gender-based violence.

14. Lessons learned during the previous programme include: (a) efforts to reduce maternal mortality were hindered by a lack of trained human resources, a weak reproductive health commodity management system, financial limitations and a lack of information on cultural factors; (b) stigmatization and discrimination hinder HIV prevention strategies; (c) addressing the needs of youth requires a broad-based national policy; (d) the national platform on gender-based violence has been an effective coordination mechanism; and (e) the use of demographic data at municipal levels is limited.

### III. Proposed programme

15. The proposed programme is based on the priorities identified in the poverty reduction strategy paper and the UNDAF. It takes into account national priorities, the Millennium Development Goals, the Programme of Action of the International Conference on Population and Development (ICPD) and the UNFPA strategic plan, 2008-2011.

16. The programme, which incorporates a gender and human rights approach, has three components: (a) reproductive health and rights; (b) population and development; and (c) gender equality. It will support: (a) an evidence-based national youth policy and the participation of youth in implementing the policy; (b) national-level policies, focusing on geographical areas in greatest need, in coordination with inter-agency initiatives; and (c) South-South cooperation. Strengthening national capacity remains a challenge, requiring strong partnerships with public institutions and non-governmental organizations (NGOs), as well as joint programming with United Nations organizations.

*Reproductive health and rights component*

17. The outcome of this component is: public institutions and civil society guarantee and promote the right of couples and individuals, including youth, and the poor and vulnerable, to access and demand sexual and reproductive health information and services, with a gender perspective.

18. Output 1: Government institutions and civil society are supported to increase access to high-quality information and services on reproductive health and rights, including in emergency situations. This will be achieved by: (a) supporting the implementation of reproductive health policies and norms, including service-provider training; (b) strengthening institutional capacity, including that of the national school of nurse midwives, and that of service providers to reduce maternal mortality; (c) enhancing the planning capacity of the Ministry of Public Health and Population and integrating HIV and AIDS into reproductive health services; (d) improving monitoring indicators for reproductive health services; and (e) integrating the minimum initial service package into early warning systems, contingency planning and emergency response.

19. Output 2: Young people are better informed of their rights, including their right to youth-friendly, integrated sexual and reproductive health information and services, as part of the national youth policy. This will be achieved by supporting: (a) qualitative studies on the needs of different groups of youth; (b) the development of gender-sensitive youth policies and programmes; (c) the implementation of sex education programmes in formal and informal educational settings; and (d) the development of communication strategies that address the needs of youth.

20. Output 3: National institutions are able to implement broad-based strategies to ensure sexual and reproductive health commodity security. This will be achieved by supporting: (a) the implementation of a national-level

reproductive health commodity security plan in coordination with the Government, donors and NGOs; (b) the implementation of the condom programming strategy developed during the previous country programme; and (c) the use of norms and indicators for logistics management.

*Population and development component*

21. The outcome of this component will ensure that demographic data and population dynamics are taken into account in implementing the poverty reduction strategy paper and its expenditure framework. The outcome will also ensure that the goals of the ICPD and the Millennium Development Goal indicators are included in monitoring the poverty reduction strategy paper, in order to reduce poverty and take advantage of the demographic dividend.

22. Output 1: Public administration and planning institutions have improved capacity to collect and analyse population data and to use the data to implement and monitor poverty reduction strategy policies and programmes, including at the subnational level. This will be achieved by: (a) continued advocacy and policy dialogue on the linkages between ICPD goals, the Millennium Development Goals and the poverty reduction strategy paper; (b) scaling up the graduate and research programme on population and development, and promoting the use of studies in policy implementation; and (c) ensuring an updated national population database by supporting resource mobilization and technical assistance for the next population census and the demographic and health survey.

23. Output 2: Enhanced capacity of national planning institutions to address the multisectoral needs of youth and ensure that their socio-economic needs are included in development plans. This will be achieved by: (a) increasing the availability of data and analyses on youth, including on training and employment needs, to serve as a basis for the development of youth policies; (b) developing a youth policy and national norms for youth centres at the subnational level; and (c)

supporting the participation of youth in rights-based policies and programmes.

24. Output 3: Strengthened capacity of government institutions to address and monitor emerging population issues (especially migration, urbanization, population and the environment, and natural disasters) in implementing the poverty reduction strategy paper. This will be achieved by supporting: (a) data collection and the analysis of population and the environment; (b) the capacity to collect, analyse and use data for disaster preparedness and mitigation and rapid assessments in crisis situations, in partnership with national institutions and other United Nations organizations; and (c) demographic data collection and studies, emphasizing youth, to formulate a migration policy with a rights perspective.

#### *Gender equality component*

25. The outcome of this component is: gender equality, reproductive health and rights, and the empowerment of vulnerable groups are promoted through an enabling environment that protects the rights of women, young people and adolescents, including their right to be free from violence.

26. Output 1: The advancement of gender equity, women's rights and women's health and education, including their sexual and reproductive health, is promoted. This will be achieved by: (a) developing training, advocacy and communication strategies to eliminate gender inequity; (b) increasing the availability of data disaggregated by gender for evidence-based advocacy; (c) conducting studies to advance women's rights to health and education; (d) promoting male participation in women's health; and (e) linking reproductive health services and income-generation activities for women and young girls.

27. Output 2: Government and community-based organizations and networks are strengthened to prevent and address gender-

based violence, including at the subnational level and in emergency settings. This will be achieved by: (a) strengthening the national policy on gender-based violence and institutionalizing it at the subnational level, including support in police stations for the victims of such violence; (b) strengthening evidence-based advocacy; (c) promoting male involvement; (d) promoting South-South cooperation; and (e) addressing gender-based violence in early warning systems, contingency planning and emergency response.

28. Output 3: Enhanced capacity of the Government and civil society to promote and protect the human rights of vulnerable and marginalized groups, emphasizing reproductive rights. This will be achieved by: (a) strengthening the capacity of government and community-based organizations to provide services to vulnerable groups; and (b) building the capacity of vulnerable groups to exercise their rights.

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

29. UNFPA and the Government will be jointly responsible for managing the programme. The Ministry of Planning and External Cooperation will oversee a coordination mechanism that includes key partners. UNFPA and the Government will conduct programme monitoring through field visits and an annual review mechanism that includes government, donor and NGO representatives. UNFPA technical advisers, along with national and international consultants, will provide technical assistance.

30. The country office in Haiti consists of a representative, a deputy representative, an assistant representative, an operations manager, a national programme officer and administrative support staff. UNFPA will earmark programme funds for international and national programme staff as well as for support personnel in order to strengthen programme implementation and resource mobilization.

## RESULTS AND RESOURCES FRAMEWORK FOR HAITI

<p><b>National priorities:</b> (a) national institutions implement effective strategies to reduce poverty and inequalities, by increasing the availability of and access to basic social services; (b) national institutions conduct their activities with respect for human rights and in accordance with transparent and efficient use of resources, while ensuring women's rights and gender mainstreaming; and (c) environmental management is improved, thereby contributing to sustainable development while ensuring economic security and social services for the poorest segments of the population</p> <p><b>UNDAF outcomes:</b> by 2011, (a) the Government implements efficient and equitable public policies to reduce poverty, ensuring access to basic social services related to health, education and employment; (b) national institutions are engaged in environmental protection and integrate environmental risks and disaster prevention and mitigation in local development; and (c) the principles of transparency and efficiency govern public administration, with respect for human rights</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> Public institutions and civil society guarantee and promote the right of couples and individuals, including youth, and the poor and vulnerable, to access and demand sexual and reproductive health information and services, with a gender perspective</p> <p><b>Outcome indicators:</b></p> <ul style="list-style-type: none"> <li>• Increase in use of facilities with essential obstetric care and emergency obstetric care</li> <li>• Increase in skilled attendance at birth (hospital deliveries)</li> <li>• Decrease in unmet demand for contraception</li> <li>• Decrease in percentage of adolescent pregnancies</li> <li>• Increased use of modern contraceptives</li> <li>• Better practices to prevent HIV</li> </ul> <p><b>Baseline:</b> Morbidity, mortality and service utilization survey; national report on the Millennium Development Goals; the 2003 general census of population and housing</p>	<p><b>Output 1:</b> Government institutions and civil society are supported to increase access to high-quality information and services on reproductive health and rights, including in emergency situations</p> <p><b>Output indicators:</b></p> <ul style="list-style-type: none"> <li>• Increase in percentage of providers trained with updated norms</li> <li>• Increase in number of trained nurse midwives in department-level hospitals</li> <li>• Increase in percentage of health-care centres providing minimum reproductive health package</li> </ul> <p><b>Baseline:</b> Morbidity, mortality and service utilization survey; Ministry of Public Health and Population administrative statistics; patient satisfaction surveys; situation analyses; field visit reports; qualitative studies</p> <p><b>Output 2:</b> Young people are better informed of their rights, including their right to youth-friendly, integrated sexual and reproductive health information and services, as part of the national youth policy</p> <p><b>Output indicators:</b></p> <ul style="list-style-type: none"> <li>• Youth policy includes sexual and reproductive health objectives</li> <li>• Percentage of informed youth utilizing sexual and reproductive health services and counselling</li> <li>• Percentage of government entities and associations trained in youth rights</li> <li>• Number of multidisciplinary spaces and structures providing sexual and reproductive health information for youth</li> </ul> <p><b>Baseline:</b> Service statistics; partners' reports; qualitative studies and surveys on youth</p> <p><b>Output 3:</b> National institutions are able to implement broad-based strategies to ensure sexual and reproductive health commodity security</p> <p><b>Output indicators:</b></p> <ul style="list-style-type: none"> <li>• Percentage of centres with continuous availability of sexual and reproductive health commodities</li> <li>• Increased percentage of central and peripheral warehouses replenished with reproductive health commodities on a continuous basis</li> <li>• Condom strategy operational</li> <li>• Percentage of norms and indicators for logistics management implemented</li> </ul>	<p>Ministries of: Education and Vocational Training; Public Health and Population; Social Affairs and Labour; Women's Affairs; Youth, Sports and Civic Service</p> <p>Civil society; media; local communities; private sector</p> <p>NGOs</p>	\$10 million (\$3 million from regular resources and \$7 million from other resources)
Population and development	<p><b>Outcome:</b> Demographic data and analysis of population dynamics are taken into account in implementing the poverty reduction strategy paper and its expenditure framework, and ICPD and Millennium Development Goal indicators are included in the monitoring of the poverty reduction strategy paper, in order to reduce poverty and take advantage of the demographic dividend</p> <ul style="list-style-type: none"> <li>• Percentage of poverty reduction strategy components related to the ICPD implemented</li> <li>• Percentage of ICPD indicators monitored</li> <li>• Youth-related indicators monitored</li> </ul>	<p><b>Output 1:</b> Public administration and planning institutions have improved capacity to collect and analyse population data and to use the data to implement and monitor poverty reduction strategy policies and programmes, including at the subnational level</p> <p><b>Output indicators:</b></p> <ul style="list-style-type: none"> <li>• Number of local-level institutions trained in use of population data and indicators</li> <li>• Number of institutions using population data in their programme design and implementation</li> <li>• Number of students with population and development degree</li> <li>• Number of studies, analyses and assessments on emerging population issues</li> <li>• Indicators for monitoring and evaluating development plans integrating population issues are in place</li> </ul> <p><b>Baseline:</b> Poverty reduction strategy reports; annual review reports on population and development strategies; reports of the National Institute of Statistics</p>	<p>Ministries of Education and Vocational Training; Planning and External Cooperation; Public Health and Population</p>	\$3.4 million (\$1.4 million from regular resources and \$2 million from other resources)

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 (continued)	<p><b>Outcome indicator:</b></p> <ul style="list-style-type: none"> <li>Improved access to basic services in areas affected by natural disasters</li> </ul> <p><b>Baseline:</b> National Millennium Development Goal report; poverty reduction report; reports on access to services in crisis situations</p>	<p><b>Output 2:</b> Enhanced capacity of national planning institutions to address the multisectoral needs of youth and ensure that their socio-economic needs are included in development plans</p> <p><b>Output indicators:</b></p> <ul style="list-style-type: none"> <li>Global youth policy document adopted, including emerging population issues</li> <li>Percentage of strategies targeting socio-economic insertion of youth included in plans</li> </ul> <p><b>Baseline:</b> Poverty reduction annual report, special reports, analysis and qualitative studies</p> <p><b>Output 3:</b> Strengthened capacity of government institutions to address and monitor emerging population issues (especially migration, urbanization, population and the environment, and natural disasters) in implementing the poverty reduction strategy paper</p> <p><b>Output indicators:</b></p> <ul style="list-style-type: none"> <li>Population issues and data on migration, urbanization and linkages between population and the environment are reflected in government programmes and policies</li> <li>Percentage of population data collected in risk assessments and disaster-prevention initiatives</li> <li>Number of studies and assessments on population and the environment and migration</li> </ul> <p><b>Baseline:</b> Ministry of Youth, Sports and Civic Service reports; qualitative studies; poverty studies</p>	<p>Ministries of: Environment; Planning and External Cooperation; Public Health and Population; Social Affairs and Labour; Youth, Sports and Civic Service</p> <p>National Institute of Statistics</p>	
Gender equality	<p><b>Outcome:</b> Gender equality, reproductive health and rights, and the empowerment of vulnerable groups are promoted through an enabling environment that protects the rights of women, young people and adolescents, including their right to be free from violence</p> <p><b>Outcome indicators:</b></p> <ul style="list-style-type: none"> <li>Increased participation of women in decision-making at the political level</li> <li>Increased advocacy on the reproductive rights of women</li> <li>Increased budget for the Ministry of Women's Affairs (up from 1 per cent)</li> <li>Increased recording and follow-up of gender-based violence cases</li> </ul> <p><b>Baseline:</b> National report on the Convention on the Elimination of All Forms of Discrimination against Women; <i>Human Development Report</i></p>	<p><b>Output 1:</b> The advancement of gender equity, women's rights and women's health and education, including their sexual and reproductive health, is promoted</p> <p><b>Outcome indicators:</b></p> <ul style="list-style-type: none"> <li>Number of public debates, events and educational sessions at national and subnational levels focusing on gender equity, women's rights and health</li> <li>Number of initiatives and institutional partnerships promoting male involvement</li> </ul> <p><b>Baseline:</b> Ministry of Women's Affairs reports, analysis and qualitative studies</p> <p><b>Output 2:</b> Government and community-based organizations and networks are strengthened to prevent and address gender-based violence, including at the subnational level and in emergency settings</p> <p><b>Output indicators:</b></p> <ul style="list-style-type: none"> <li>National plan to reduce risk factors of gender-based violence is prepared and a mechanism established</li> <li>Percentage increase in available data supporting advocacy initiatives to reduce gender-based violence</li> <li>Percentage of community-based associations engaged in gender-based violence mechanisms</li> </ul> <p><b>Baseline:</b> Monitoring results of the Convention on the Elimination of All Forms of Discrimination against Women report; gender-based violence policy data collection results</p> <p><b>Output 3:</b> Enhanced capacity of the Government and civil society to promote and protect the human rights of vulnerable and marginalized groups, emphasizing reproductive rights</p> <p><b>Output indicators:</b></p> <ul style="list-style-type: none"> <li>Sexual and reproductive health issues of vulnerable groups addressed in national policies and programmes</li> <li>Number of NGOs and institutions involved in advocacy to protect rights of vulnerable groups</li> <li>Percentage of groups and associations with access to income generation or support systems</li> </ul> <p><b>Baseline:</b> Monitoring reports and studies relating to sexual and reproductive health among vulnerable groups</p>	<p>Ministries of: Planning and External Cooperation; Social Affairs and Labour; Women's Affairs; Youth, Sports and Civic Service</p> <p>NGOs; University of Haiti</p>	<p>\$6.3 million (\$1.3 million from regular resources and \$5 million from other resources)</p> <hr/> <p>Total for programme coordination and assistance: \$0.3 million from regular resources</p>