

FULFILLING THE PROMISE



EAST AND SOUTHERN AFRICA
ANNUAL REPORT 2018





2018 ANNUAL REPORT

- 2** MESSAGE FROM THE REGIONAL DIRECTOR
- 5** TOWARDS ENDING MATERNAL DEATH
- 12** TOWARDS ENDING UNMET NEED FOR FAMILY PLANNING
- 16** TOWARDS ENDING GENDER-BASED VIOLENCE AND HARMFUL CULTURAL PRACTICES
- 20** TOWARDS ENDING SEXUAL TRANSMISSION OF HIV
- 23** HARNESSING THE DEMOGRAPHIC DIVIDEND FOR SUSTAINABLE DEVELOPMENT
- 24** IMPROVING EFFECTIVENESS AND EFFICIENCY
- 25** INCREASED RESOURCES AND PARTNERSHIPS FOR RESULTS
- 26** 2018 LANDMARK EVENTS
- 28** LOOKING AHEAD: UNFPA50, ICPD25



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MESSAGE FROM THE REGIONAL DIRECTOR

Looking back on our work in 2018, we made great strides in fulfilling our promise to improve sexual and reproductive health and rights in East and Southern Africa (ESA).

Through our evidence-based advocacy and strategic engagement with different partners and stakeholders, we contributed to transforming the policy environment in the region.

Many countries in the ESA region introduced and revised progressive policies regarding sexual and reproductive health and rights (SRHR), especially on HIV prevention, child marriage and comprehensive sexuality education.

Ten ESA countries used our ground-breaking research on the legal environment affecting adolescent sexual and reproductive health and rights (ASRHR) to inform legal and administrative reforms for removing barriers to ASRHR. Four SADC member countries—Malawi, Mozambique, Zambia and Zimbabwe—used the Southern Africa Development Community (SADC)

Photos below: © UNFPA



Model Law on Eradicating Child Marriage and Protecting Children Already in Marriage, supported by UNFPA, to amend their national legislations and develop costed implementation plans.

However, a lot needs to be done to fully translate these policies and reforms into practice. Policies must leap into implementation, and this is where critical challenges remain.

Despite progress, access to SRHR information and services remains limited in many settings and groups, especially adolescents and youth. Significant additional investment in SRHR issues is missing.

Women and youth, people with disabilities, and key populations, remain the most left behind.

In spite of policies to prevent gender-based violence (GBV), female genital mutilation and child marriage, harmful practices remain prevalent in many countries.

Similarly, maternal deaths are still at unacceptable levels—85,000 every year. This shocking haemorrhage of women's lives must stop.

The solution requires stronger efforts to improve health service delivery systems, emphasizing quality of care, client-centred integrated services and universal health coverage.

Stronger efforts are required to meet the unmet need for long-term as well as short-term methods of modern contraception, to improve quality of care provided during pregnancy, delivery and post-delivery, and to reduce sexually transmitted diseases.

In 2018, UNFPA addressed these implementation gaps in many ways. We reached more people with client-centred and youth-friendly services, trained more health workers and teachers, delivered more affordable contraceptives, and strengthened the capacities of our partners, especially institutions representing young people.

A defining moment for UNFPA in the region was, in partnership with the Department of Women in the Presidency of the Republic of South Africa, hosting the first ever East and Southern African Symposium on Menstrual Health Management (MHM) in Johannesburg, South Africa. This resulted in strengthened commitment of policy makers and practitioners to better respond to the MHM needs of people who menstruate throughout their reproductive life cycle. It concluded with a regional Call to Action.

Later in the year, an African Coalition for Menstrual Health Management was established with a leadership structure and strategies for strengthening coordination, evidence-based advocacy and knowledge-sharing to ensure that policy and programmes on menstrual health management are taken to scale across the continent.

Read on to discover the impact of our work in 2018.

Finally, momentum is gathering around Universal Health Coverage in the region, creating a unique opportunity for UNFPA to advocate for the inclusion of comprehensive SRH services in every country's essential health services package.

This, coupled with our ongoing efforts, will get us closer to realizing our transformative results: end preventable maternal death, end unmet need for family planning, end GBV and harmful practices, and end sexual transmission of HIV, with a clear priority of **reaching first those left furthest behind.**



Dr. Julitta Onabanjo
Regional Director



TOWARDS ENDING MATERNAL DEATH

UNFPA assists countries to strengthen their health service delivery systems for improving the four pillars of maternal health: timing and spacing of pregnancies by modern contraceptives; antenatal care, safe delivery and post-delivery care; emergency obstetric care, including obstetric fistulas; and universal coverage of sexual and reproductive health services.

OUR IMPACT 2018



800

health workers trained on Maternal and Perinatal Death Surveillance and Response (MPDSR) systems



1,079

health-care workers trained on emergency obstetric and newborn care



3,326

women underwent surgery to repair obstetric fistulas



152,800

women and girls reached with UNFPA humanitarian assistance on SRH and GBV



Despite progress in reducing maternal mortality, more than

85,000 women

still die of maternal causes every year in the region.

Of these maternal deaths, one quarter are adolescent girls, and more than half occur in humanitarian settings. As the majority of maternal deaths are preventable, this is simply unacceptable.

KEY ACHIEVEMENTS

Making pregnancy and delivery safer

- **Maternal and Perinatal Death Surveillance and Response (MPDSR)**—information on how many women died, where, why, and how to prevent similar deaths—is a low-cost, high-impact tool to reduce maternal mortality. MPDSR is crucial for evidence-based planning, financing and delivery of maternal and neonatal health services. With assistance from UNFPA and other UN agencies, all ESA countries have set up MPDSR systems. UNFPA provides technical support to bring MPDSR coverage, reliability, timelines and use to optimal levels.
- Well-trained midwives represent the difference between life and death for mothers and babies. UNFPA invested substantial resources to support quality, client-centred **midwifery training and practice in 16 countries**. Along with WHO, UNFPA assisted countries with adapting evidence-based standard midwifery curricula to better prepare midwives for providing quality integrated Reproductive Maternal, Neonatal, Child and Adolescent Health (RMNCAH) services.
- UNFPA effectively supported revival of the continent-wide Confederation of African Midwives Association (CONAMA), established in 2013 to **advance the midwifery profession and improve access to quality RMNCAH services** in the region. UNFPA facilitated strategic discussions and convened a strategic planning meeting that led to the drafting of the five-year CONAMA Strategic Plan, which aims to improve midwifery training, regulation, practice, career progressing and motivation.

- UNFPA supported governments to **generate the evidence needed to strengthen their health systems**, and to inform national strategies and plans for improving emergency obstetric and newborn care (EmONC). In 2018, with support from UNFPA, the skills of 1,079 health workers were improved on EmONC.
- **Regional Campaign on Early and Unintended Pregnancy (EUP).** Our programme Safeguard Young People technically supported a UNESCO-led situational analysis on EUP in Lesotho, Eswatini, Kenya, Malawi, Namibia, South Africa, Tanzania, Uganda, Zambia, and Zimbabwe. **The assessment found that EUP is increasing in all 10 countries studied.** Factors behind high EUP include poverty, GBV, social norms, child marriage and other harmful cultural practices. While most countries have policies to prevent EUP, implementation of large-scale programmes is scanty.

Improving quality of care and tackling stigma

- WHO and UNFPA, under the umbrella of the 2gether 4 SRHR Programme, **enhanced the skills of 48 health professionals**—including obstetricians and gynaecologists from Botswana, Eswatini, Lesotho, Malawi, Namibia, Uganda, Zambia and Zimbabwe—to improve the quality of post-abortion care and safe abortion in the context of local laws.
- In partnership with UNAIDS, UNICEF and WHO, and under the banner of the 2gether 4 SRHR Programme, UNFPA convened two values clarification workshops in 2018—one with UN Country Teams from the countries participating in 2gether 4 SRHR, to sensitize them on

how to balance their personal beliefs and values with their professional duties around post-abortion care and safe abortion in the context of national laws, and meeting the SRH needs of key populations. The second was with UNFPA staff on key issues relating to UNFPA's mandate in relation to working with key populations.

Progress towards eliminating fistula

- Despite progress, **obstetric fistula continues to disable thousands of women** each year, preventing them from participating fully in economic, household and social activities. Most of them suffer in solitude and shame. UNFPA supported countries to accelerate progress towards fistula elimination. With UNFPA's support, all of the high burden countries in the region developed a fistula elimination road map, and treatment and financial support were provided to 3,326 women and girls living with fistula.

Accelerating innovation for SRHR

- In 2018, UNFPA supported 19 social enterprises created under the UNFPA Innovation Accelerator project. One year after inception, 30 per cent of the start-ups were making a profit. They secured investments or contracts totalling \$195,000 and won prizes worth \$100,000 in total. Funds were secured in Kenya, Rwanda, Tanzania and Uganda to run additional innovation challenges. A revised and expanded model has been designed based on feedback from the beneficiaries.



In South Sudan,
1 in 26
women
is likely to die
from pregnancy-
related causes

"I watched my neighbour bleed to death during childbirth"

Lilian Nyomon was in her teens when she watched her neighbour bleed to death during childbirth.

"That emboldened me to enrol in midwifery school," said Ms. Nyomon. "The woman assisting her had no idea how to deal with haemorrhage."

This tragedy is all too common in South Sudan, which has one of the highest maternal mortality ratios in the world. One in 26 women is likely to die from pregnancy-related causes during her lifetime in South Sudan.

When Ms. Nyomon heard about a UNFPA midwifery scholarship on the radio, she applied for it that same day. Along with 58 classmates, she was enrolled at the midwifery school in Kajo Keji, 150 km South of Juba, the capital.

But in 2017 gunfire stopped their studies. South Sudan had spiralled into civil war in 2013 and fighting eventually reached Kajo Keji. Most residents fled into the bush. The midwifery students stayed put at school, thinking they would be safe – until gunshots rang through the school grounds, and they fled too.

"I took my uniform and left behind my books and everything else," recalls Ms. Nyomon. What worried her most was that she might not be able to continue her studies.

The students sought refuge in Uganda, where they remained until the midwifery school was relocated to Juba.



In 2018, her second year, Ms. Nyomon, 25, recently assisted in her first delivery at a maternity clinic in Juba. "It was thrilling!" she says, beaming.

Ms. Nyomon says that fewer mothers would die if they knew how important it is to seek skilled care during pregnancy. "People do not know about haemorrhaging, about eating well during pregnancy and treating illnesses like malaria."

When peace comes, she plans to return to her hometown, Kajo Keji, and help mothers live to see their children grow up.



Building momentum for strategic shifts

UNFPA aided key strategic shifts to accelerate progress towards the Fund's transformative goals in a sustainable way:

1. Sexual and Reproductive Health and Rights (SRHR) and Universal Health Coverage (UHC)

UNFPA has established strategic partnerships with key players – including continental and regional institutions, governments, development partners, civil society organizations and sister agencies – to ensure SRHR is a core element of UHC conversations, policies and schemes at country and regional level. The expansion of the UHC movement has created an opportunity for UNFPA to ensure that comprehensive SRH services are included in countries' UHC essential health service packages. By doing so, UNFPA aims to improve the quality and coverage of SRH services, ensuring they are client centred; ensure sustainable financing of SRH services; and accelerate progress towards our transformative goals.

2. People-centred integrated service delivery

UNFPA is documenting practical ways for providing patient-centred integrated services at the primary health-care level in select countries. These models could be adapted by other countries for enhancing safety, effectiveness and patient-centred primary health-care services, in particular for integration of HIV and SRHR services.

3. FP2020 commitment

FP2020 supports the UN Secretary-General's Global Strategy for Women's, Children's and Adolescents' Health as well as UNFPA's transformative objective of ending unmet need for family planning. UNFPA engaged with key FP2020 players to encourage governments, parliamentarians and non-state actors to advocate for increased investment in and better delivery of voluntary family planning and SRH services to accelerate progress towards FP2020 commitments.



OUR IMPACT 2018

*Health workers
trained in provision
of youth-friendly
health services*

1,613

*Total couple-years
of protection for
contraceptives
procured by UNFPA,
including condoms*

**3.9
million**

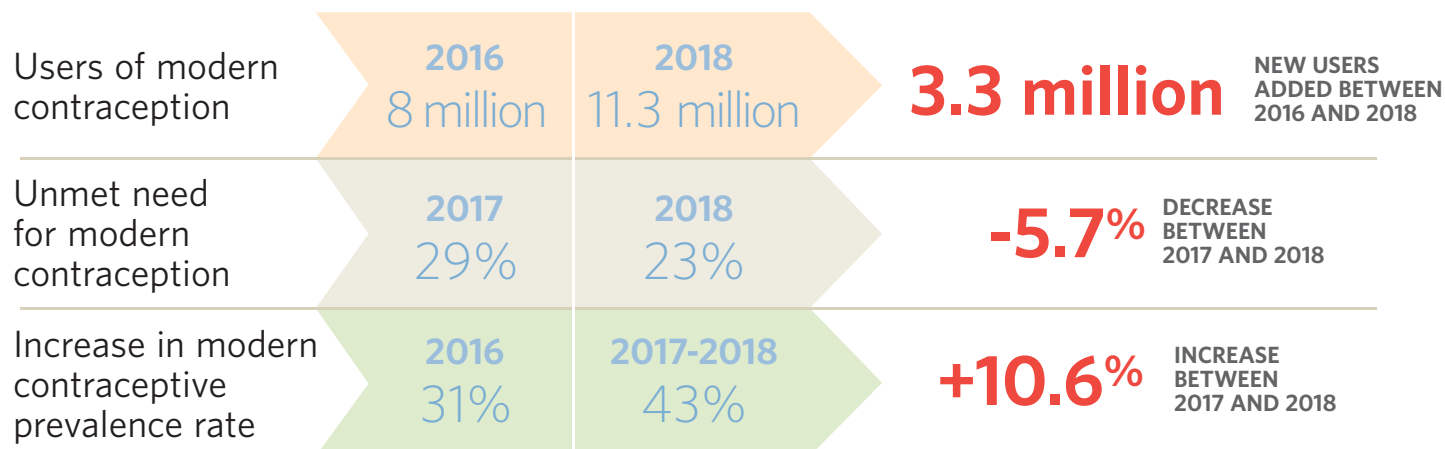
TOWARDS ENDING UNMET NEED FOR FAMILY PLANNING

UNFPA works towards rights-based services and increasing access to modern contraceptive methods to meet the needs of people, in particular for youth and other marginalized populations, by:

- Ensuring availability of a full range of affordable contraceptive methods
- Ensuring informed choice
- Using a variety of public and private sector delivery channels, including mobile outreach, community-based distribution of short-term contraceptives, drug shops and pharmacies
- Improving health worker skills to improve quality of care
- Addressing commodity shortages to ensure access and satisfy demand at facility and community levels
- Strengthening supply chain management systems from national warehouses to the last mile



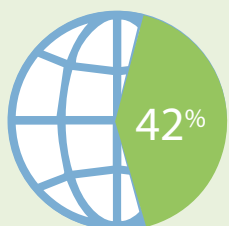
Results Achieved (2016-2018)



Investing in the region in 2018



Globally, UNFPA procured US\$112 million worth of family planning commodities for its 46 priority countries. Of these, **29%, worth US\$32.2 million**, went to the ESA region.



Generics offer the best value for money. Of all generics purchased globally by UNFPA, 42% were for the ESA region.



For every dollar
INVESTED
in contraception



More than \$2.2 is
SAVED
in pregnancy-related costs.

KEY ACHIEVEMENTS

Youth-friendly health services

UNFPA strengthens the capacity of health service providers and promotes demand creation to facilitate youth's access to SRHR services. Up to September 2018, 1.87 million adolescents and young people had used integrated HIV and SRH services supported by UNFPA.

Adolescents' rights

More than 10 countries have to date used our *Framework for the Harmonization of the Legal Environment on Adolescent Sexual and Reproductive Health in East and Southern Africa* to inform legal reforms to create a more conducive environment for adolescents' SRHR.

Comprehensive Sexuality Education (CSE)

UNFPA's youth programme builds the capacity of institutions to deliver quality CSE in and out-of-school through the development of educational materials and standard monitoring and observation tools.

In 2018, more than half a million out-of-school adolescents and young people received CSE and 931 teachers were trained through the online teacher training module. Since 2015, over 4,000 teachers from 13 countries have been trained. Ethiopia and Madagascar began CSE training in 2018.

Youth, peace and security and humanitarian action

In collaboration with the World Organization of Scouts, UNFPA, under the Safeguard Young People programme, developed and tested a training package on youth, peace and security and humanitarian action to be used globally.

Ashley Mukaya, 21, dropped out of high school in 2015 when she became pregnant. She had a baby boy and in 2017 a baby girl. Ms. Mukaya and her partner didn't want a bigger family and she wanted to go back to school. Long-acting reversible contraceptives had just been introduced in the public health system in Namibia, with the support of UNFPA, and Ms. Mukaya was among the first group of young women to benefit. One year down the road, she is very happy with the implant, raising her children, and completing grade 12.

"The implant is the best option for me. I don't have to think about contraceptives for three years."



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OUR IMPACT 2018

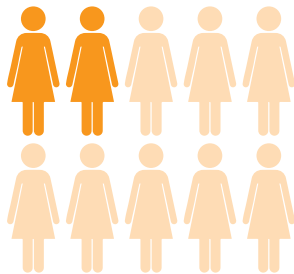
240
Communities

committed to eliminating harmful practices,
including child, early and forced marriage,
and female genital mutilation (FGM)

TOWARDS ENDING GENDER-BASED VIOLENCE AND HARMFUL CULTURAL PRACTICES

UNFPA works to advance gender equality and women's empowerment, and to address the physical and emotional consequences of gender-based violence (GBV).

Our programmes train service providers to manage GBV cases, offer psychosocial assistance, rape kits and medical treatment to survivors, and promote the right of all women and girls to live free of violence and abuse.



2 in 10 women
in the region have
experienced physical
violence by their
intimate partner.



Nearly
4 in 10 girls
are married
by age 18.

OUR IMPACT 2018

Gender Responsive Oversight Model

UNFPA, through the Safeguard Young People programme, supported the Regional Women's Parliamentary Caucus of the SADC Parliamentary Forum in developing and piloting the Gender Responsive Oversight Model (GROM). GROM is a tool to monitor the implementation of CSW Resolution 60/2, which commits Member States to address the societal and structural drivers of HIV infections among girls and young women.

Ending Child Marriage

More than 282,000 girls aged 10-19 years in Ethiopia, Uganda, Mozambique and Zambia, acquired skills, knowledge, decision-making abilities and access to social and health services, including family planning, through the UNFPA/UNICEF Global Programme to Accelerate Action to End Child Marriage

UNFPA launched A Guide to Using the Model Law on Eradicating Child Marriage and Protecting Children Already in Marriage. This is a practical tool for advocacy by civil society, parliamentarians and youth advocates. To date, Malawi, Mozambique, Zambia and Zimbabwe have used the Model Law to amend national legislation and develop national costed implementation plans.



GBV survivors transformed at one-stop centre

Services for survivors of gender-based violence are integrated under one roof at the Family Protection Centre in Juba Teaching Hospital, in Juba, South Sudan. This ensures that they receive the full range of care, including clinical treatment for rape, psychological first aid, counselling and legal support.

“We opened the centre eight months ago, and every day women, young and old, walk into the facility, crying, afraid, depressed, needing someone to talk to, and with high hopes that they have come to the right place,” said social worker Roseline Pita.

The centre, supported with funding from the governments of Canada and Sweden, is already making a difference.

“We have witnessed a transformation from victims to empowered and well-informed survivors,” Ms. Pita said. “After weeks of undergoing counselling and psychosocial support, they come back to the centre and you can barely tell that they were the same women.”

*“We have witnessed a
transformation from victims
to empowered and well-
informed survivors”*

Placing violence against women and girls in the spotlight

The Spotlight Initiative, a global partnership to eliminate all forms of violence against women and girls, was launched by the United Nations Secretary-General and the European Union High Representative and Vice President in 2017. UNDP, UNFPA and UN Women are core to the initiative, along with UNICEF involvement.

A total of €250 million is to be invested in Africa.

The focus areas for the Africa programme are sexual and gender-based violence (SGBV), harmful practices (FGM and child marriage), and SRHR, with an overall goal that all women and girls should be free from violence and harmful practices. The initiative will operate at two levels. At country level, the focus in the ESA region will be on Malawi, Mozambique, Uganda and Zimbabwe.

At the regional level and led by UNFPA, the programme will support the elimination of SGBV and harmful practices, and promote SRHR.

PEOPLE LIVING
WITH HIV IN THE
ESA REGION

19.6 million

NEW
INFECTIONS
IN 2017

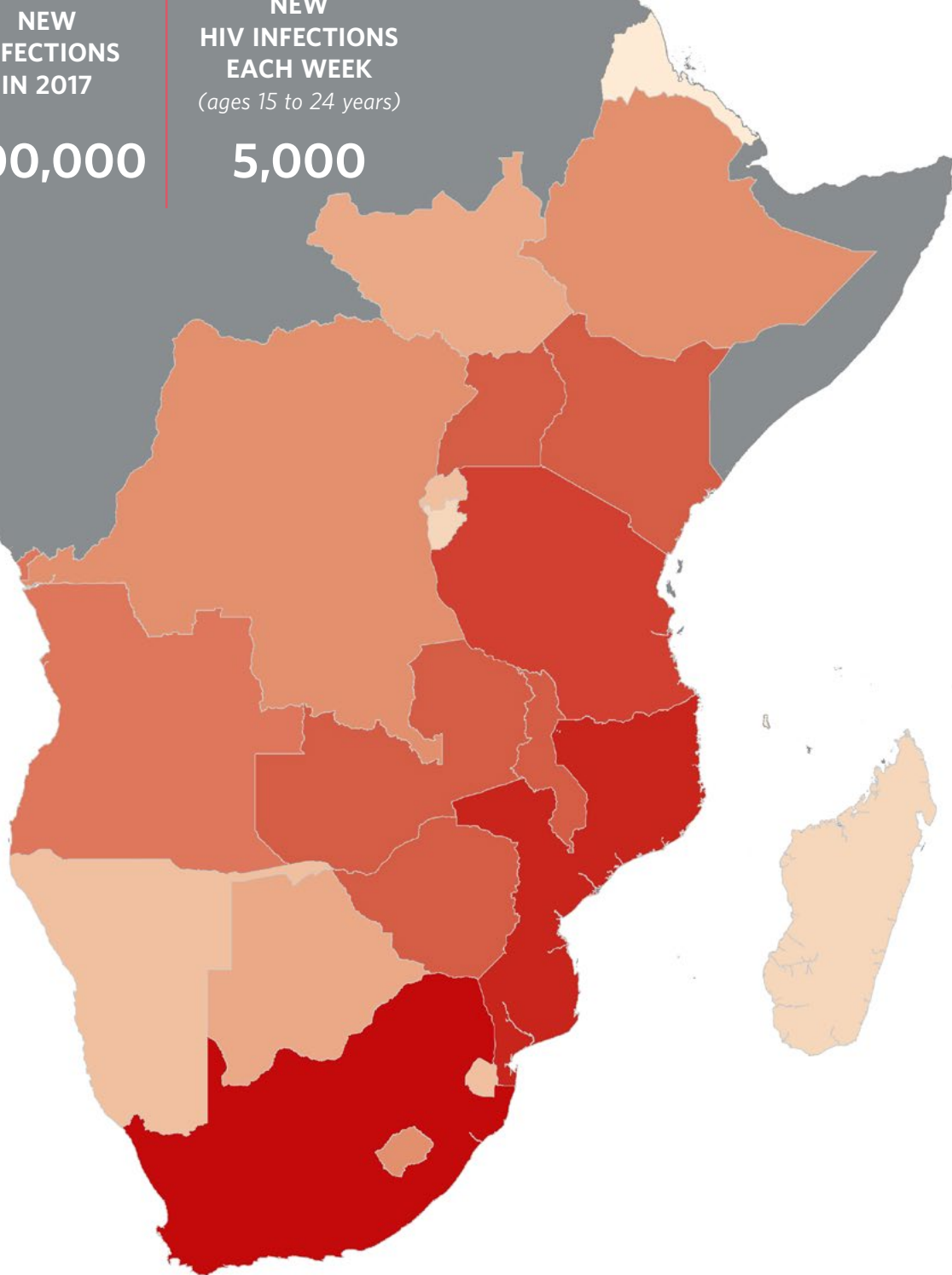
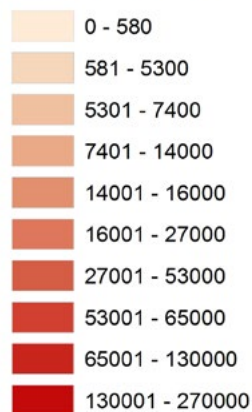
800,000

NEW
HIV INFECTIONS
EACH WEEK
(ages 15 to 24 years)

5,000

Legend

New HIV Infections 2017



TOWARDS ENDING SEXUAL TRANSMISSION OF HIV

UNFPA, as one of the lead UN agencies on prevention of sexual transmission of HIV, continuously advocates among political leaders for greater investment on primary prevention of HIV, especially among women, youth and key populations.

OUR IMPACT 2018

1.87 million *adolescents and young people reached with SRHR and HIV services*

KEY ACHIEVEMENTS

UNFPA in collaboration with UNAIDS has developed **a guide to strengthening integrated HIV programming for adolescent girls and young women and their partners.**

The guide will assist national programme managers to define a package of interventions and proposes a methodology for target setting by SADC Member States.

UNFPA in collaboration with UNDP has supported the SADC Parliamentary Forum to develop **Minimum Standards for the Protection of Key Populations** in the SADC region.

Two regional workshops on condom programming built the capacity of condom focal points in governments, NGOs, communities and 19 UNFPA country offices on people-centred condom and lubricant programming, monitoring of

condom accessibility and usage, new tools for estimating country condom needs and resources, and developing national roadmaps.

The SADC Ministers of Health **endorsed the HIV 2020 Prevention Roadmap** and a **Regional Score Card** to monitor progress in HIV prevention.

A regional dialogue on expanding the manufacturing of quality condoms in the SADC region was organized by UNFPA in 2018. This brought together condom manufacturers to agree on a road map for the production of quality assured condoms and UNFPA's possible support for the pre-qualification of the manufacturing plant. UNFPA provided support on the quality aspect, in collaboration with Procurement Service Bureau (PSB).

A young woman's journey through life with HIV



"Support for young people living with HIV will help curb new infections."

In 2000, aged 5, Masedi Kewamodimo lost both parents to AIDS. In 2004, aged 10, she asked why she was taking pills daily. "My aunt took me to the clinic and a counsellor broke the news. I was born HIV-positive," she recalls.

Looking back, Ms. Kewamodimo, 23, realizes how unprepared and alone she was.

Botswana has the world's third largest HIV prevalence, yet she had little help in developing the coping skills needed to navigate through life as a young person living with HIV.

"As a child, I feared I was going to die soon and I feared telling my friends. When I started dating, I faced rejection," she said. "I have cried endlessly and that made me a better HIV advocate."

Today, Ms. Kewamodimo volunteers at Sentebale Network Club, sharing her experience to help young people live positively with HIV, especially when they enter college or work.

"Without support systems," says Ms. Kewamodimo, "young people struggle to cope with HIV. They may default on their treatment and not disclose their HIV status to loved ones, friends and new partners."

In Botswana:

Young people aged 15-24 account for 1/3 of new HIV infections.

7 in 10 new infections are young women.

61 young women are infected each week.

HARNESSING THE DEMOGRAPHIC DIVIDEND FOR SUSTAINABLE DEVELOPMENT

Many countries in the region are facing a critical window of opportunity to benefit from a demographic transition. To secure that future, governments need to tailor investments to maximize the opportunity.

UNFPA has partnered with African Institute for Development Policy (AFIDEP) to support the 23 governments in the region to assess their countries' prospects of harnessing the demographic dividend (DD) and explore priority policy options that they can adopt.

In 2018, UNFPA supported Angola in the development of a national profile. DD reports were launched in Botswana and Zimbabwe.

UNFPA is working with governments to translate their DD study findings and other demographic intelligence into national Development Plans.

In 2018, key recommendations from Rwanda's DD profile were integrated into its National Strategy for Transformation 2017-2024 and the Rwanda Health Sector Strategy 2018 -2024.

Zambia's 7th National Development Plan, which was informed by its DD study, and its Implementation Framework are influencing actions by the public sector and serve as an entry point for private sector partnerships. Analysis of socio-economic data is informing sub-national profiles and DD demonstration sites scheduled for implementation in 2019.

Findings from Namibia's Demographic Dividend profile supported the development of its 5th National Development Plan and sectorial plans.

Addis Ababa Declaration on Population and Development (AADPD) +5 Review

UNFPA supported the African Union and UNECA in reviewing progress of the **Addis Ababa Declaration on Population and Development (AADPD) in Accra, Ghana**. This declaration provides guidance on full implementation of the International Conference on Population and Development (ICPD) beyond 2014 in Africa. In the region, 21 national reports out of 23 countries were produced, noting major progress in health outcomes, especially preventable maternal death, and identifying challenges for reaching the most vulnerable. These findings will assist realization of the Demographic Dividend and ultimately, sustainable development in line with the African Union's Agenda 2063 and the 2030 Agenda.

Data for Development

Crucially, the 2020 census round generates the subnational data necessary for SDG implementation and reporting, in addition to data required for national and sub-national planning and decision-making.

In 2018, UNFPA strengthened the capacity of governments and policy makers to use population and geospatial data and information to inform advocacy, policy and programmes. We supported the census processes in Madagascar, Comoros and Malawi. Malawi's preliminary results were released in December 2018, within 3 months. We also supported the planning of upcoming digital censuses in the DRC, Ethiopia, Kenya, Namibia and Zambia.

Analysis and publication of data from vital registration systems were supported in Eswatini and Kenya. The Vital Statistics reports were launched by the national departments that manage civil registration, and aid understanding of the main causes of deaths.

IMPROVING EFFECTIVENESS AND EFFICIENCY

A tailored response for Middle Income Countries

In late 2018 we launched the Middle Income Country (MIC) Technical Expertise Hub, which aims to **leapfrog SRHR** along a sustainable pathway using a flexible, country-categorization approach. In the Start-up Phase, socio-economic development landscape profiles are being used to guide country engagements.

In this phase, the hub and the initial set of countries seek to:

- Define clear theories of change towards the 2030 transformative results, informed by disaggregated socio-economic evidence across programme cycles;
- Define new ways of securing astute thought leadership on SRHR and critical investments in political capital, with linkages with national efforts towards the SDGs;
- Give attention to social accountability and economic governance parameters as complementary institutional levers;
- Prime MICs on the interdependence of delivery across development, humanitarian and peace actions (triple nexus), which will benefit UNFPA programme delivery and contribute valuable lessons to the body of evidence on influencing long-term systemic change;
- Continuous learning and exchange of knowledge will be a key feature in 2019.

Improving operational efficiency

- The UNFPA Regional Operations Shared Service Centre (ROSSC) implements a cost-effective and efficient back-office function for UNFPA in Botswana, Eswatini, Lesotho, Namibia and South Africa. ROSSC benefits include improved funding proposals and work

plan costing, more effective inventory management oversight, simplification of approval requirements for lower value and risk transactions, and savings in procurement costs.

Nurturing a culture of innovation

Understanding and promoting a culture of innovation as a catalyst for change is a norm for UNFPA in the region. The Fund is putting into effect its **corporate innovation strategy, as guided by a holistic Innovation Action Plan.**

In 2018, five countries implemented dedicated innovation country action plans, allowing for the mapping of social innovation players and innovation-related donors—140 in total—to facilitate the establishment of innovation-inspired partnerships. Also mapped were 106 bottlenecks, including 21 key bottlenecks, that limit the achievement of UNFPA's four transformative results. A collective commitment was made to address these using a human-centred design approach in 2019.

UN Reform

The UN system is implementing a **bold reform plan**, described by UN Secretary-General Antonio Guterres as “the most ambitious and comprehensive transformation of the UN development system in decades.” In synergy with UN reform, UNFPA is streamlining its operations to be more efficient and effective and partnering with other UN system agencies to deliver on collective results.

INCREASED RESOURCES AND PARTNERSHIPS FOR RESULTS

We field midwives in remote posts, produce manuals for CSE, train community health workers to provide modern contraception. We advocate with parliamentarians to end child marriage and FGM. We promote the right to informed reproductive choices for young people with disabilities, a forgotten constituency.

The work we do with our partners and donors goes a long way towards completing the region's unfinished agenda on SRHR.

Resources needed

UNFPA's Regional Programme for 2018 to 2021 requires US\$400 million.

Cost-effective investments

For every additional US\$1 invested in contraception, the cost of pregnancy-related care is reduced by US\$1.47.

As of December 2018, UNFPA in ESA had raised US\$148 million, achieving 136 per cent of the target.

Top 10 donors to UNFPA ESA in 2018

1	United Kingdom	\$34,804,561
2	Canada	\$26,649,905
3	Sweden	\$4,660,097
4	Netherlands	\$4,373,681
5	Republic of Korea	\$2,914,961
6	Japan	\$2,300,000
7	European Commission	\$1,758,650
8	Ireland	\$1,750,673
9	Denmark	\$627,232
10	Germany	\$515,222

2018

LANDMARK EVENTS

FEBRUARY

At the 8th Africa Conference on Sexual Health and Rights (ACSHR), in Johannesburg, South Africa, the UN Secretary-General's **Envoy on Youth, Jayathma Wickramanayake**, advocated for global and regional action to address the needs of young people, including FGM, child marriage, SRHR and gender-based violence.

The 2gether 4 SRHR Programme, a \$45 million Joint UN Regional Programme to strengthen SRHR in the region and funded by Sweden, was launched at the 8th ACSHR. The programme aims to improve the SRHR of all people in the region, with a specific focus on 10 countries in East and Southern Africa.

MARCH

The **SheDecides flagship event**, held in South Africa, promoted harmonization on laws and policies concerning ASRHR.

The **2gether 4 SRHR Programme** held its inaugural Regional Programme Steering Committee Meeting, comprising Permanent Secretaries or delegated representatives from participating countries. This meeting approved work plans and budgets for participating countries to commence programme implementation.

MAY

The first **ESA Menstrual Health Management (MHM) Symposium** took place in Johannesburg, South Africa. It led to the establishment of the African Coalition for MHM, which seeks to cascade action across the continent on this area, which is critical to women's health and dignity.

JUNE

UNFPA **Goodwill Ambassador Ashley Judd's** special mission to South Sudan highlighted the plight of vulnerable and marginalized women, girls and young people, and served as their voice to tell the world of their suffering.

JULY

The phase one evaluation of the **Regional Operations Shared Service Centre (ROSSC)** was completed.

OCTOBER

The African Union (AU) led a five-year review of the commitments to the **2013 Addis Ababa Declaration on Population and Development**.

The **2nd International Conference on Maternal, Newborn and Child Health in Africa** was organized by the Republic of Kenya and the African Union Commission, with technical support from UNFPA, to maintain momentum towards ending preventable maternal and child deaths.

In collaboration with the Arab and North Africa region, UNFPA organized a **Horn of Africa Strategy Meeting** to address the humanitarian and SRHR needs of vulnerable populations in the region.

NOVEMBER

At the 2nd African Girls Summit in Accra, Ghana, the AU announced the launch of the second phase of the **African Union Campaign to End Child Marriage** 2019–2023.

The **5th International Conference on Family Planning** (ICFP) in Kigali, Rwanda, saw UNFPA leadership, headed by Executive Director Dr. Natalia Kanem, strengthen understanding of the existing barriers to family planning, the consequences, and the steps necessary to advance towards the FP2020 goals.

Ministers of Health of the Southern African Development Community formally adopted the **SRHR Strategy for the SADC Region (2019–2030)** and its corresponding **score card**. Under the auspices of the 2gether 4 SRHR programme, UNAIDS, UNFPA, UNICEF and WHO provided technical support to the SADC Secretariat to develop the SRHR Strategy and score card. The strategy provides a policy and programming framework for SADC Member States to accelerate the attainment of sexual and reproductive health and rights for all people in SADC. The score card is an accountability tool that will be used to measure progress across the region.



2019

LOOKING AHEAD

This is a historic year for UNFPA. 2019 marks its 50th anniversary and 25 years of the “Cairo Declaration” of the International Conference on Population and Development (ICPD).

The Programme of Action adopted at the ICPD emphasized that women’s interests are fundamental to population matters. It introduced the concepts of sexual and reproductive health and reproductive rights. A new definition of population policy was advanced, giving prominence to reproductive health and the empowerment of women.

UNFPA will be hosting a series of events throughout the year, including a global summit on ICPD25. The events, including the summit, aim to re-energize the ICPD movement, reconfirm commitment to its vision and forge new partnerships to fulfil the promise of Cairo.

It will also offer an inclusive platform for Member States and a broad range of other public and private sector stakeholders to come together to discuss and agree the actions we will take to achieve the goals of the ICPD.



Ensuring rights
and choices
for all



ICPD25
International Conference on
Population and Development





Delivering a world where
every pregnancy is wanted,
every childbirth is safe and
every young person's
potential is fulfilled



Ensuring rights and choices for all

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