## **Format for the Country Programme Performance Summary**

**A.** Country Information

Country name: GEORGIA								
Category per decision 2013/31:	Current progra	mme period: 20	016-2020	Cycle of assistance: 3				
B. Country Programme Outputs Achievement (please complete for all your CP outputs)								
Output 1 Strengthened evidence-based policy frameworks and institutional mechanisms to deliver integrated sexual and reproductive health services for women, adolescents and youth with focus on vulnerable populations and in humanitarian settings								
Indicators		Baseline	Target	End-line data				
☐ Number of evidence-based protocols for her adopted for achieving universal access to hi sexual reproductive health and family plann including for youth	gh-quality	□ 15	□ 20	□ 23 SRH guidelines/prot ocols were developed/upd ated with UNFPA support, and approved by MoH.				
☐ Routine practice of maternal near-miss case in selected comprehensive emergency obstenewborn care facilities		□ No	□ Yes	□ Yes				
☐ The model for the national organized cervic screening programme based on evidence fro adopted by the Government		□ No	□ Yes	□ Yes				
☐ Number of community-led and non-govern organizations supported by UNFPA to addressexual and reproductive health needs of key	ess HIV and the	□ 0	□ 5	□ 6				
Key Achievements (input also from the last UNFPA has substantially contributed to the dev Sexual Reproductive Health and Rights (SRH vulnerable groups, including women and girls in of the MoH supported the elaboration of the Na and a 3-year costed Action Plan.  UNFPA has contributed to the reduction of mate Care Regionalization flagship program, followed endorsed by MoH. UNFPA has successfully supported the national roll-out of the hospital-ba mortality and morbidity. In cooperation with national	relopment of the na R) and HIV preve conflict-affected re ational Maternal and ernal and new-born by the developme pported the MoH to sed Near-Miss Cas	entive services, fegion of Abkhazia de Newborn Health mortality and mortality and matter of a sound nation introduce the Bee Review as an in	ocusing on a, Georgia. Ulth and RH Strong orbidity through antenatal eyond the Nunportant contract.	needs of underserved and NFPA, under the leadership rategy (MNHS) 2017-2030 agh support to the Perinatal care regionalization model mber methodology and has ibutor to avoiding maternal				

based, national Cancer Registry which should become a breakthrough for improving cancer prevention, treatment and care in Georgia.. UNFPA is a leading partner of the MoH for promoting the highest attainable standard in reproductive health through development/adaptation of clinical guidelines, service protocols and standard operating procedures. Under the special

business case for Abkhazia, Georgia, UNFPA-supported reproductive health and family planning services (including free provision of modern contraceptives), cancer screening and STI services have directly responded to the critical unmet needs of conflict-affected women and girls to access safe and quality SRH services.

UNFPA's contribution is significant in support to strengthening the HIV prevention for the key populations including young key populations (YKPs) through policy work and capacity development for delivering integrated SRHR and HIV prevention services. In partnership with other counterparts supported development of National HIV/AIDS Strategic Plan (NSP) 2019-2022, Elimination of Mother to Child Transmission (EMTCT) of HIV, Syphilis and Hepatitis B action plan and HIV prevention standards for key populations for promoting comprehensive sets of HIV prevention services and prioritizing high-impact and low-cost HIV prevention interventions after the Global Fund financial support ends in Georgia. Professional development was supported, through the creation of a web-based training platform and the development of accredited online training modules to improve national capacity for delivering quality SRH/FP and HIV prevention services. UNFPA is one of only a few organizations in Georgia, who provided significant support for the integration of SRH and healthy lifestyle in the formal education system at primary and basic education levels and has supported its roll-out.

# Output 2 Strengthened capacity of public and civil society organizations, and national human rights institution to advance gender equality and reproductive rights, including prevention of gender-based violence and harmful practices

Indicators	Baseline	Target	End-line data
☐ National action plan(s) addressing child marriage, gender- biased sex selection, and violence against women updated and adopted	□ No	□ Yes	□ Yes
☐ Number of studies to establish evidence on harmful practices, gender inequality and gender-based violence for informed policy making conducted and disseminated	□ 3	□ 5	□ 7

#### **Key Achievements** (input also from the last CP evaluation)

UNFPA has contributed to improved regulatory framework on gender issues and advocated effectively against Gender-Based Violence (GBV) and harmful practices. It has actively cooperated with the national gender machinery by co-chairing the Task Force on Early Marriages and Other Harmful Practices with the Government Commission on Gender Equality, Violence against Women and Domestic Violence and by cooperating with the Gender Equality Council of the Parliament of Georgia. In bearing with the objectives of the National Strategy for Human Rights (2014- 2020), UNFPA cooperated with UNDP and UN Women to support the Interagency Commission on Gender Equality, Violence against Women and Domestic Violence (DV/VAW) to draft two National Action Plans: Action Plan 2018-2020 on Implementation of UNSC Resolutions on Women, Peace and Security endorsed by Government Order # 173 of 10.04.2018 and Action Plan 2018-2020 against GBV and Family Violence endorsed by Government Order # 175 of 11.04.2018. UNFPA, contributed creation of a national referral mechanism for responding to DV/VAW. In 2018, two normative acts were approved, Documentation for Ambulatory Care (MoH Ministerial Decree N01-41/n) and Regulations for Documentation for Stationary Hospital Care (MoH Ministerial Decree N108/n), enabling primary healthcare professionals to document cases of DV/VAW appropriately. UNFPA advocated and contributed to the decision of the Administration of Muslims of All Georgia that underage marriage and FGM are unacceptable and of the Spiritual Council of Yezidis in Georgia not to conduct marriages of people younger than 18.

# Output 3 Strengthened body of evidence for formulation of rights-based policies through cutting-edge analysis on population dynamics and its interlinkages with sustainable development

Indicators	Baseline	Target	End-line data
☐ A database with population-based data disaggregated by sex	□ No	□ Yes	□ Yes
and age accessible by users through web-based platform			
that facilitates mapping of socioeconomic and demographic			
inequalities exists			

#### **Key Achievements** (input also from the last CP evaluation)

UNFPA has remained the main institutional partner of the National Statistics Office of Georgia. Having helped to conduct the Census 2014, UNFPA's support during this country program cycle was provided in the form of assistance to analyzing census data. This support resulted in five reports viewed as an important input to policy making, creation of the census data-

base and re-estimation of the population figures for years 2013-1994 (for national and regional levels). Based on the Population Situation Analysis (2015), UNFPA advocated and supported the Parliament of Georgia in developing "The Concept of Demographic Security" and "State Policy Concept on Population Ageing in Georgia", both of which were approved by the Parliament in 2016.

C. National Progress on Strategic Plan Outcomes <sup>1</sup>	Start value	Year	End value	Year	Comments
Outcome 1: Increased availability and use of integrat planning, maternal health and HIV) that are genderand equity in access					
Percentage in which at least 95% of service delivery points in the country have seven life-saving maternal/reproductive health medicines from the WHO priority list	NA	NA	NA	NA	Almost 100% of SRH service providers have seven life-saving medicines from the WHO priority list
Contraceptive prevalence rate (total)	53,4%	2010	40,9%	2018	RHS, MICS
Proportion of demand for contraception satisfied (total)	81%	2010	40,9%	2018	RHS, MICS
Percentage in which at least 60% of service delivery points in the country have no stock-out of contraceptives in the last six months	NA	NA	NA	NA	
Percentage in which at least 80% of live births in the country are attended by skilled health personnel	99%	2016	100%	2018	NCDC
Number of adapted and implemented protocols for family planning services in the country that meet human rights standards including freedom from discrimination, coercion and violence	1	2016	3	2019	
Percentage of women and men aged 15-49 who had more than one sexual partner in the past 12 months who reported use of a condom during their last intercourse (female/male)	NA	NA	NA	NA	
Has the country increased the national budget for sexual and reproductive health by at least 5 per cent?			Yes	2018	

### **Summary of National Progress**

In recent years, the Government of Georgia has put significant efforts in improving access to healthcare and eliminating health disparities among the general population. Since the introduction of universal healthcare in 2013, the government's expenditure

<sup>&</sup>lt;sup>1</sup> The format is aligned to the UNFPA Strategic Plan outcomes, 2014-2017.

on health has substantially increased. However, Georgia still holds one of the last places in terms of state contribution in total health care expenditure (36% in 2015) as well as in GDP (3% in 2017) and in the state budget (8.6% in 2015) among the countries of the European Region. The Maternal Mortality Ratio has reduced from 40 per 100,000 live births in 2010 to 25 per 100,000 live births in 2017, nevertheless it is still above the regional average. 99.9% of births have been attended by skilled health personnel since 2015. Unmet need for modern contraception is 31 per cent (2018), at its highest level among women from rural, ethnic minority and poor households. Due to the incomplete coverage with cervical cancer screening, especially in rural areas (9 per cent in 2017), 40 percent of cases are diagnosed at later stages.

Georgia is one of those countries in the EECA region where the steady increase (25%) in HIV incidence has been observed during the recent years, remains to be a low HIV prevalence country with HIV prevalence in the general population at 0.4% with concentrated epidemics among MSM. Even though the prevalence remains low in the general population, there is a risk that epidemic could worsen because of the growing number of new cases among key populations, especially PWIDs and MSM, including young key populations (YKPs). State programs operate for HIV/AIDS prevention and control, including the HIV/AIDS Prevention and Treatment Program, Safe Blood Program, and Prevention of Mother to Child Transmission (PMTCT) Program. Under national HIV and hepatitis C elimination programmes country introduced tandem screening for HIV and HCV for drug users and people receiving harm reduction services within the Global Fund to Fight AIDS.

#### **UNFPA's Contributions**

The interventions supported by UNFPA has contributed to a stronger legal and policy framework to deliver quality integrated Sexual and Reproductive Health and Rights (SRHR) and HIV preventive services and information for women and youth, key populations, women and girls in the conflict-affected region of Abkhazia, Georgia. UNFPA has contributed to the reduction of maternal and new-born mortality and morbidity through support to the Perinatal Care Regionalization flagship program, followed by the development of a sound national antenatal care regionalization model endorsed by MoH. UNFPA, as an important contributor in avoiding maternal mortality and morbidity has successfully supported the MoH to introduce the Beyond the Number methodology and has supported the national roll-out of the hospital-based Near-Miss Case Review. UNFPA's contribution was significant in supporting professional development through creating the training platform and the development of accredited online training modules to improve national capacity for delivering quality SRHR, FP and HIV prevention services. UNFPA, has advocated for the the quality integrated SRH/HIV prevention services and first ever time the needs of key population, YKPs and transgender people was reflected into the National HIV/AIDS Strategic Plan (NSP) 2019-2022 as well as development of HIV prevention standards for separately for MSM, SWs, YKPs for promoting comprehensive sets of SRHR/HIV prevention services and prioritizing high-impact and low-cost HIV prevention interventions after the Global Fund financial support ends in Georgia.

Outcome 2: Increased priority on adolescents, especially on very young adolescent girls, in national development policies and programmes, particularly increased availability of comprehensive sexuality education and sexual and reproductive health							
Percentage of young women and men aged 15-24 who correctly identify ways of preventing the sexual transmission of HIV and who reject major misconceptions about HIV transmission (female/male)	17.4%	2014	11.5/15.3 (F/M)	2018 (MICS)			
Does the country have laws and policies that allow adolescents (regardless of marital status) access to sexual and reproductive health services?	Yes	2016	Yes	2020	From age 14 adolescents can access the SRH services without parental		

#### **Summary of National Progress**

Young people aged 14-29 years make up 18% of the population in Georgia. Almost one third of those who do not participate in the labor force are youth. Number of young people aged 15-24, who are neither in employment, education or training (NEET) has decreased only by 1% since 2015, equaling 26.9 in 2018. HIV prevalence among the same age group is less than 0.1%,

however based on 2014 data, only 17.4% of young people hold comprehensive knowledge about HIV Prevention. According to the MoESCS Department of Preschool and General Education Development, newly revised standards for teaching biology include elements of human sexuality education and include topics such as HIV/AIDS, family planning, puberty and harmful practices like early marriage. The first National Youth Policy Document adopted in 2014 recognized youth as a significant asset for country development. Following its completion this year, a National Youth Policy Concept 2020-2030 was already developed, which is expected to be adopted by the Parliament of Georgia in summer 2020. Later this year, a relevant national youth strategy and action plan will be developed integrating five key priority areas, including 1. Active Participation in public life; 2. Promoting youth development and supporting realization of their potential; 3. Health and well-being; 4. Economic empowerment 5. Improving and strengthening the state's youth policy.

#### **UNFPA's Contributions**

UNFPA has been playing a catalytic role for advancing youth agenda in Georgia, including support provided by UNFPA in elaboration of theNational Youth Policy and the National Action Plan for 2014-2020, National Youth Policy Concept 2020-2030, supporting programming for youth empowerment, participation and development, for improved access to quality education and health, including through developing non-formal peer to peer education capacity. UNFPA has provided technical assistance to the Ministry of Education and Science of Georgia to integrate SRH and healthy lifestyle principles in the formal education system, which was a 'revolutionary achievement' and 'breakthrough thinking.

Outcome 3: Advanced gender equality, women's and girls' empowerment, and reproductive rights, including for the most vulnerable and marginalized women, adolescents and youth							
Does the country have the gender equality national action plans that integrate reproductive rights with specific targets and national public budget allocations?	Yes	2016	Yes	2020	UNFPA contributed the elaboration of Gender Equality chapter under the Human Rights Action Plan		
Proportion of taken actions by the country on all of the Universal Periodical Review (UPR) accepted recommendations on reproductive rights from the previous reporting cycle	No	2015	Yes	2020	70 SRHR related recommenda tions were raised during Georgia's second review, approximate ly 34% of the total 203 recommenda tions raised.		
Percentage of women aged 15–49 who think that a husband/partner is justified in hitting or beating his wife/partner under certain circumstances	NA	2015	78% of women and 69% of men think that it is never justifiable for a man	2017			

	to beat his	
	wife.	

#### **Summary of National Progress**

The Constitution of Georgia, the Law of Georgia on the Elimination of All Forms of Discrimination (2014), Law of Georgia on Violence against Women and/or Elimination of Domestic Violence, Protection and Support of Victims of Violence (2006) and the Gender Equality Law of Georgia (2010) are the major legal documents regulating different aspects of gender equality. Even though, at the level of legal, policy and institutional frameworks, there are no glaring gaps in the implementation of the international obligations in the area of human rights, gender equality and women's empowerment, the main challenges with respect to human rights and gender equality commitments still prevail at the level of consistent implementation of the existing obligations in practice. Gender discrimination is still manifested in gender-based violence and harmful practices. Georgia's Gender Inequality Index of 0.35 is considered as relatively high, ranking the 78th in the list of 189 countries (the higher index is indicative of higher inequality). Although Early Marriage is illegal in Georgia, every 4th 20-24 year old woman living in rural areas was married before 18 (2018). Despite the downward trend in the sex ratio at birth (107.6, 2019), son preference is still prevalent, especially in rural areas and among ethnic minorities. Every 7th woman (2017) has experienced violence in her lifetime. Violence against women with disabilities is acute considering the lack of specialised services and gaps in data collection. Deeply entrenched social norms justify gender discrimination and violence. 21 per cent of women (aged 15-49) don't make their own informed decisions regarding sexual relations and reproductive health, majority belonging to rural, low income and ethnic minority households. Housework responsibilities are quite starkly gender-segregated with women doing nearly all the household chores. Besides, providing routine care of children is still largely the purview of mothers. According to IMAGES conducted in Georgia in 2019, about half of all fathers said they had never changed their child's diapers or clothes and almost as many said they had never bathed the child. 1 in 4 fathers said they had never helped the child with their homework and about 1 in 5 fathers said they had never talked to their children about their personal issues

#### **UNFPA's Contributions**

UNFPA contributed to the establishment of a gender equality machinery within the executive branch of government, and the establishment of a dedicated Gender Equality Department in the Public Defender's Office of Georgia; UNFPA contributed to strengthening policy framework and institutional setup of the gender equality and anti-domestic violence structure in Georgia; in particular by enshrining of gender mainstreaming principles across a number of policy areas through the new 2017-20202 National Action Plan on Gender Equality, the National Action Plan on Domestic Violence 2017-2020, and the National Youth Policy of Georgia; and bringing Georgian legislation in line with international standards and commitments; UNFPA's multi-year advocacy efforts resulted in the introduction of the amendments to the Civil Code of Georgia increasing the legal age of marriage till 18 without any exceptions. Moreover, amendments were introduced in the Criminal Code of Georgia criminalizing harmful practices of forced marriage and female genital mutilation; UNFPA's TA ensured regular monitoring of the women's sexual and reproductive health and well-being as an integral part of the Human Rights monitoring framework under the competency of the PDO; UNFPA triggered the process of gender mainstreaming in the education system through a systematic integration of SRH RR and gender equality issues in the National Curriculum and general education subject standards (Biology and Civic Education) as a mandatory part of the curriculum in Georgian schools; UNFPA significantly contributed to the positive perception change of the population regarding gender equality through implementing gender-transformative programming;

Outcome 4: Strengthened national policies and international development agendas through integration of evidence-based analysis on population dynamics and their links to sustainable development, sexual and reproductive health and reproductive rights, HIV and gender equality

Has the country had at least one census of good quality that was processed, analyzed and disseminated following internationally agreed recommendations (during the last 10 years)?	Yes				Next Census is scheduled for 2023
Has the country collected, analyzed and disseminated a national household survey that allows for the estimation of key population and reproductive health indicators (in the last 5 years)?	Yes	RHS 2010	Yes	2018 MICS Round 6	
Has the country completed evaluations on strategic interventions around sexual and reproductive health and adolescent and youth?	No	2016	Yes	2020	National Maternal and Newborn

		Health and RH Strategy (MNHS) 2017-2030 and a 3-year Action Plan. assessment ( currently)
Proportion of new national development plans that address population dynamics by accounting for population trends and projections in setting		
development targets		

#### **Summary of National Progress**

The National Statistics Office of Georgia conducted the General Population Census in 2014, which is a unique source of data on social, economic, and demographic situations on the population in the country. To improve the way the SDG targets are integrated in national policy and better monitor the achievements, the government intends to integrate data gathering into monitoring and evaluation frameworks and develop population data systems, based on the Population and Housing Census data, that will enable to better identify and address inequalities and strengthen evidence-based policy making. The in-depth analysis of Census data on Youth, Older Persons and Ageing provided valuable information for tailored policy-making. The Multiple Indicator Cluster Survey 6 was launched in Georgia in September 2018 with the start of data collection that lasted until the end of the same year. It has collected data from over 14,000 households in Georgia, and it was conducted by the National Statistics office of Georgia with support from national and international organizations. The survey provides nationally and regionally representative data on 48 per cent of the United Nations Sustainable Development Goal indicators, including on the ones related to SRH, integrated into the MICS through UNFPA advocacy and technical support. As a result, the country has obtained reliable information on key SRHR related SGG indicators, including 5.6.1. In Georgia, the Demographic and Health Surveys (DHS) have not been done, but instead there have been Reproductive Health Surveys (RHS), that are largely comparable to the DHS. The last Georgian RHS was implemented in 2010 (and before that in 2005 and 1999), which provide baseline data for trend identification.

#### **UNFPA's Contributions**

Country Drogramma Dagaurage

UNFPA has remained the main institutional partner of the National Statistics Office of Georgia. UNFPA's contirubion in conducting Census 2014 and analyzing census data was significant. The analyzed data is important input to policy making, creation of the census data-base and re-estimation of the population figures for years 2013-1994 (for national and regional levels). Based on the Population Situation Analysis (2015), UNFPA contributed development of "The Concept of Demographic Security" and "State Policy Concept on Population Ageing in Georgia", both of which were approved by the Parliament in 2016

D. Country Programme Resources									
SP Outcome	Regular Resource (Planned and Final		Others (Planned and					otal and Final	
Choose only those relevant to your CP	Expend		(Planned and Final Expenditure)		`	nditure)			
Increased availability and use of integrated sexual and reproductive health services	2,236,919	2,203,914	474,145	464,502	2,711,064	2,668,416			

Advanced gender equality, women's and girls' empowerment, and reproductive rights	241,980.00	239,585.00	2,200,192	2,117,444	2,711,064	2,357,029
Strengthened national policies and international development agendas through integration of evidence-based analysis on population dynamics	389,237	385,475	354,027	345,664	743,264	731,139
Programme coordination and assistance	291,216	285,601			291,216	285,601
Total	3,159,352	3,114,575	3,028,364	2,927,610	6,165,392	5,756,584

Note: Info on final expenditures will be adjusted in January 2021.