Annex 4

Implementation of the global and regional programmes, 2024

Progress in implementing the UNFPA strategic plan, 2022-2025

Report of the Executive Director

Summary

This annex contains the progress in implementing the UNFPA global and regional programmes in 2024.

I. Overview

1.   The UNFPA strategic plan, 2022-2025, focuses on accelerating the achievement of three transformative results and the ICPD Programme of Action as part of its direct contribution to achieving the 2030 Agenda for Sustainable Development. The transformative results are (a) ending the unmet need for family planning, (b) ending preventable maternal deaths, and (c) ending gender-based violence and harmful practices, including female genital mutilation and child, early and forced marriage.

2.   The global and regional programmes are crucial to the delivery of the UNFPA strategic plan. The global and regional programmes complement country programmes and ensure a comprehensive approach to promote the implementation of the International Conference on Population and Development (ICPD) Programme of Action and the 2030 Agenda for Sustainable Development across all levels. Their objectives are: (a) enhancing UNFPA role in positioning the ICPD and the three transformative results in intergovernmental, interagency and other multilateral processes; (b) promoting international norms and standards, including capacity building of partners and countries to strengthen normative and operational linkages; (c) facilitating knowledge exchange and generating and scaling-up innovation and best practices; (d) engaging in and fully leveraging the United Nations system-wide mechanisms to advance the ICPD agenda and the SDGs during the Decade of Action; (e) facilitating system-wide inter-agency coordination for scaling-up humanitarian action; and (f) providing necessary field support.
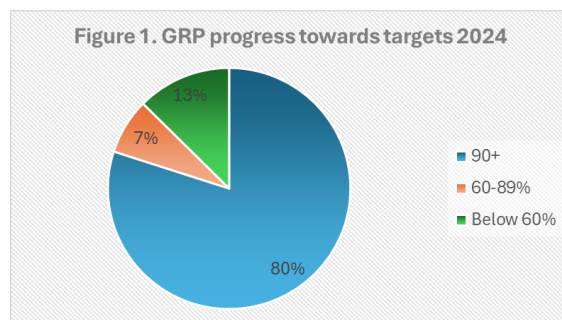
3.   The global and regional programmes constitute a global programme, implemented by headquarters units, and six regional programmes, implemented by the UNFPA regional offices: Arab States (ASRO), Asia-Pacific (APRO), Eastern Europe and Central Asia (EECARO), Eastern and Southern Africa (ESARO), Latin America and the Caribbean (LACRO), and West and Central Africa (WCARO). Each programme has a results and resources framework, which feeds into and is structured along the six outputs of the UNFPA strategic plan, 2022-2025.

4.   This annex highlights, as per the request of the Executive Board in its decision 2021/17, the progress in and expenditures of implementing the global and regional programmes in 2024. The annex shows the programmes performed robustly: 86.5 per cent of the targets for its six regional programmes and, 70 per cent of the targets for its global programme were achieved with a progress of 90 per cent and above.[1] The annex also includes challenges met and lessons learned to keep progress on track towards the strategic plan results.

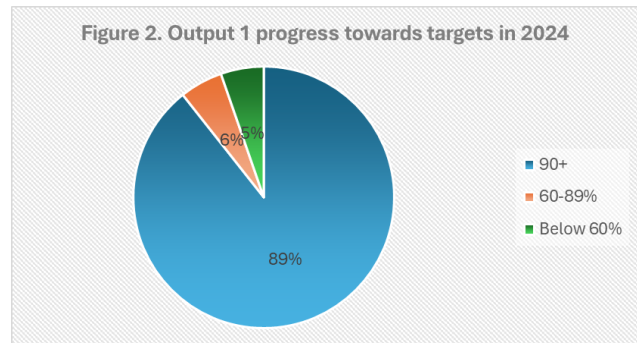# II. Overall achievement of results

5.   In 2024, the global and regional programmes performed robustly in achieving their targets. Figure 1 shows that progress was 90 per cent or above for 80 per cent of these programmes' targets. Regular programme resources expenditures for the global and regional programmes were $51.1 million in 2024 (92.8 percent of the planned budget, $55.0 million).

Output 1. Policy and accountability. **By 2025, improved integration of sexual and reproductive health and reproductive rights, as well as the prevention of and response to gender-based violence and harmful practices, into universal health coverage-related policies and plans, and other relevant laws, policies, plans and accountability frameworks.**

Figure 1. GRP progress towards targets 2024
- 90+
- 60-89%
- Below 60%

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[1] The percentage of indicators which their achievement is 90 percent and above against the target.

6.	In 2024, the global and regional programmes significantly advanced the integration of sexual and reproductive health and rights (SRHR) and gender-based violence (GBV) prevention and response into policies, plans, and accountability frameworks. Figure 2 shows the progress of Output 1 indicators towards targets in 2024, in which 89 per cent of the targets were 90 per cent and above.

Figure 2. Output 1 progress towards targets in 2024

- 90+
- 60-89%
- Below 60%

89% | 6% | 5%

7.	The global and regional programmes' advocacy and intergovernmental and interagency policy dialogues and collaboration activities significantly advanced the ICPD agenda by furthering the integration of the ICPD Programme of Action and the three transformative results into various global and regional processes and frameworks.

(a)	The ICPD Programme of Action priorities were integrated into all prioritised intergovernmental outcomes and processes at the global level, including the global review of the SDGs at the 2024 High-Level Political Forum, the 57th Commission on Population and Development; the Summit of the Future; the General Assembly and Economic and Social Council; the United Nations Conference on the Least Developed Countries, the ICPD30 Review process, including the ICPD30 Global Dialogues, and the Beijing+30 Review process;

(b)	Across regions, the ICPD priorities and the three transformative results were integrated into regional and international processes and outcomes, such as Resolution 5 (V) of the Regional Conference on Population and Development in Latin America and the Caribbean, the Beijing+30 regional and national review reports supported by APRO, ESARO and WCARO;

(c)	The three transformative results and advancing the ICPD Programme of Action were integrated into regional frameworks and initiatives, including Regional Arab Strategy for Youth, Peace, and Security, the Balkan Cluster National Action Plans in the Eastern Europe and Central Asia region, and the High-Level Regional Consultation on Financing for Development in the Asia and the Pacific Region. Joint WCARO and ESARO advocacy and technical support to the African Union in 2024 contributed to the development of the African Union Convention on Ending Violence Against Women and Girls which was adopted in early 2025;

(d)	At the global level, and across all regions, the three transformative results and ICPD priorities were strategically integrated in key conferences and policy dialogues, including the ICPD30 Global Dialogues discussing the critical role of inclusive and right-based policies to achieve sustainable development and addressing demographic diversity, technology, and accountability, the Asia Symposium on Technology-Facilitated Gender-Based Violence, and the Second Regional High-Level Meeting on Young People's Learning, Skilling, and Transition to Decent Work in the Arab States region.

8.	The global and regional programmes provided technical assistance, strengthened capacity and generated evidence for developing and implementing policies and accountability frameworks to accelerate progress towards the three transformative results. Key results included:

(a)	Sexual and reproductive health and reproductive rights (SRH&RR) was integrated into national universal health coverage policies and plans in ten countries in the Arab States region, 13 countries in the Latin America and the Caribbean region, and 11 countries in the Eastern and Southern Africa region, and three countries in the Asia and the Pacific region;
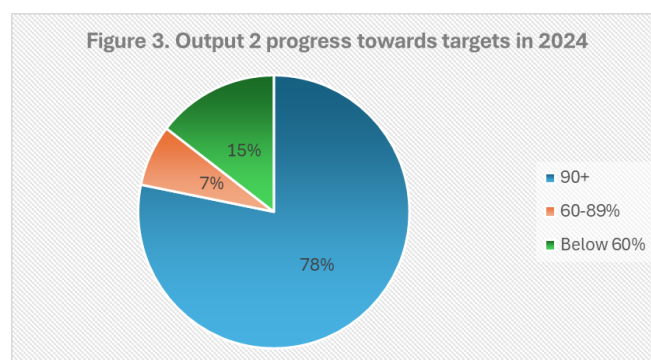
(b)   With support from the regional programmes, 19 countries in West and Central Africa conducted financial modelling exercises, and three Arab States countries conducted budgeting analysis, enabling governments to better track progress on health financing commitments. In the Asia and the Pacific region, seven countries developed investment cases for leveraging domestic resources, four countries developed innovative financing models through Strategic Investment Facility, and six countries formed innovative partnerships with the private sector for integration of SRH services in the workplace;

(c)   Health systems for SRH were strengthened across all regions. Five Latin American and Caribbean countries improved SRH data collection and administrative registers, seven countries in the Eastern Europe and Central Asia region advanced HIV-SRHR integration in their health systems, enhancing service quality and access, and 23 countries in the West and Central Africa region were supported to strengthen SRHR programming, adopting human rights-based and gender-transformative approaches;

(d)   With regional support, two countries in the Asia and the Pacific region (Bangladesh and Cambodia) advanced domestic violence reforms through Universal Periodic Review (UPR) recommendations; two countries in the Latin America and the Caribbean region (Colombia and Peru) adopted policies prohibiting child marriage, Suriname adopted a new civil code that adjusted the minimum age of marriage from 15 years for girls and 17 years for boys to 18 years for both girls and boys; 14 West and Central African countries enhanced legal frameworks for adolescent reproductive health and GBV elimination. Additionally, in the West and Central Africa region, six countries were supported to position SRHR recommendations as part of the UPR process;

(e)   Eleven countries in the Eastern and Southern Africa region integrated SRH into national health financing and benefit packages with digital support

(f)   The 2024 Methodology for Assessing the Economic impact of Adolescent Pregnancy and Early Motherhood Study (MILENA) in Latin American and Caribbean countries identified a $13.1 billion annual opportunity cost from adolescent pregnancy, providing evidence for policy reforms in two countries (Costa Rica and Ecuador).

Output 2. Quality of care and services. **By 2025, strengthened capacity of systems, institutions and communities to provide high-quality, comprehensive sexual and reproductive health information and services, including supplies, as well as essential services, to address gender-based violence and harmful practices.**

9.   In 2024, the global and regional programmes contributed to improving services and quality of care. Figure 3 shows the progress of Output 2 indicators towards targets in 2024, in which 78 per cent of the targets were 90 per cent and above.

10.   The global and regional programmes provided technical support, developed tools and guidance, generated evidence, and strengthened capacity for scaling up innovative service delivery approaches and platforms. Highlights included:

Figure 3. Output 2 progress towards targets in 2024
- 90+: 78%
- 60-89%: 7%
- Below 60%: 15%

(a)   The ICPD30 Global Dialogue on Technology convened over 300 experts from more than 60 countries. The dialogue concluded with a call for global cooperation to ensure rights-based digital transformation, including greater investment in digital

infrastructure, capacity building, inclusive innovation and tech-enabled SRH services to reach marginalized communities, robust data governance, ethical safeguard and protection against technology-facilitated gender-based violence;
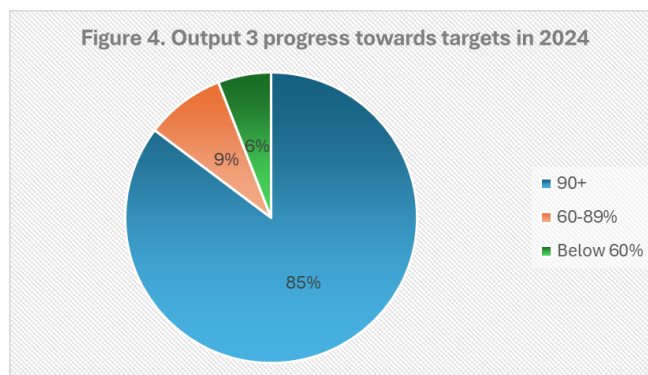
(b)   In the West and Central Africa region, 15 last-mile distribution pilots under the WCARO-Sahel Women's Empowerment and Demographic Dividend (SWEDD) project improved contraceptive access in remote communities, while strengthened national supply chains ensured availability. In Cabo Verde, a digital health pilot introduced electronic prescriptions for SRH services, paving the way for nationwide expansion. Meanwhile, the 2024 Disability Inclusion Clinics in the Arab States region piloted a four-part interactive series to enhance capacity-building for inclusive service delivery;

(c)   Across regions, the Essential Services Package for GBV was expanded. In the Asia and the Pacific region, 16 countries enhanced GBV case management, while Pakistan and Papua New Guinea conducted costing exercises to improve budget allocation. In the Eastern and Southern Africa region, a GBV quality assurance tool was developed and rolled out, alongside technical support to the African Union for continental policy alignment. In the West and Central Africa region, updated standard operating procedures in four countries standardized and improved GBV service provision. In Latin America and the Caribbean region, 12 countries implemented the Essential Services Course, and 400 public officials from Bolivia, El Salvador, Guatemala, and Panama were trained on implementing essential services for GBV survivors;

(d)   Multisectoral GBV responses were enhanced by strengthening coordination and service integration. APRO, in partnership with UN Women and UNICEF, developed the ASEAN Regional Guidance to integrate social work into a unified GBV response across health, justice, and social sectors. EECARO, in collaboration with the Swiss Tropical Health Institute, conducted regional assessments to identify gaps in GBV case management and multisectoral coordination, leading to targeted interventions in seven countries;

(e)   Digital platforms expanded access to SRH services for young people globally. The Teenergizer's online counselling platform in Eastern Europe and Central Asia reached 26,796 youth. In the Eastern and Southern Africa region, the TuneMe app, an interactive space for providing and sharing accurate information and resources on various topics related to SRHR of young people, garnered 59,752 downloads within six months, indicating strong adoption. UNFPA regional offices in Arab States, Asia and the Pacific, and Latin America and the Caribbean provided support to 16 countries in developing GBV response systems. Nine countries in Asia and the Pacific received assistance in Case Management Strengthening, while 10 countries across Asia and the Pacific and Latin America and the Caribbean were supported in GBV Prevention Strategies and Programs. In West and Central Africa, the eConvivial WhatsApp ChatBot for SRH services (including menstrual health/contraceptives/pregnancy monitoring), reached over 50,000 youth, providing accessible information and support;

(f)   Key guidance documents and tools were developed to advance innovation in SRHR and humanitarian response, including "Innovation in the Arab Region – A Strategy Paper to Imagine, Invent, Impact" (ASRO), "Regional Innovation Strategy" (LACRO), "Harmful Practices Social Innovation Toolkit" (ESARO). WCARO developed the "Acceleration Paper on Innovation", a strategic document that provides country offices with tailored innovation roadmaps based on an assessment of their innovation readiness and outlines key guiding principles. The region also piloted the "Design Sprint" methodology in Mali, which enabled civil society organizations to co-develop innovative SRHR solutions in humanitarian settings. AI tools for online conversation analysis were developed by the ESARO to track digital discourse on female genital mutilation (FGM);

(g) APRO, in partnership with the International Confederation of Midwives, developed regional midwifery school accreditation guidance and collaborated with the Burnet Institute on a Training of Trainers Module for the Regional Midwifery Faculty Development Programme. Courses on disability-inclusive care, respectful maternity care, and GBV-responsive care were disseminated across Asia and the Pacific, and midwifery education was strengthened in eight countries in the region.

11. The global and regional programmes' focus on innovative financing, leveraging resources and promoting partnerships, played a critical role in improving quality and sustainability of care and services.

(a) Through the Strategic Investment Facility (SIF), APRO secured $1.5 million in Rajasthan, India for adolescent health, achieving a 1:23 return on a $0.067 million investment. This model demonstrates the power of catalytic financing in mobilizing domestic resources;

(b) ESARO secured commitments from 14 countries to increase reproductive health funding;

(c) LACRO mobilized $16.2 million for family planning and strengthened SRHR within national policies and UHC frameworks;

(d) WCARO supported 15 country offices and 3 sub-regional offices in the region in implementing SMART Advocacy, securing increased family planning funding, resulting in 18 national action plans and higher budget allocations in Benin, Gambia, Ghana and Nigeria.

12. The global and regional programmes built national capacity for delivering a human rights-based, comprehensive SRH services package at scale, including expanding innovations in virtual capacity-building, delivery, and self-care. With the programmes' support:

(a) Digital innovations enhanced SRH access and efficiency. In the Asia and the Pacific region, electronic logistic management information systems (eLMIS) improved reproductive health supply tracking, while virtual peer counselling supported at-risk youth on HIV, SRH, and mental health. In Eastern Europe and Central Asia, a Flo app partnership expanded access to SRH information. In Latin America and the Caribbean, the Safe Birth App was integrated into maternal care programs. Sierra Leone's PReSTrack app improved maternal health monitoring. Burkina Faso's QG Jeune platform facilitated over 30 million interactions. In Mali, a design sprint with CSOs co-created SRHR solutions for humanitarian settings;

(b) Emergency response was improved in humanitarian settings through targeted interventions such as the Minimum Initial Service Package (MISP) for SRH training, which institutionalized SRH preparedness in five regions. To bolster humanitarian preparedness and response, in West and Central Africa, humanitarian midwifery rosters were activated in 13 countries.

Output 3. Gender and social norms. **By 2025, strengthened mechanisms and capacities of actors and institutions to address discriminatory gender and social norms to advance gender equality and women's decision-making.**

13. The global and regional programmes in 2024 made progress in addressing discriminatory gender and social norms. Figure 4 shows that 85 per cent of the targets achieved a progress rate of 90 per cent and above.

14. The global and regional programmes' advocacy, policy dialogue activities, and partnerships played critical roles in advancing gender and social norms transformation, with a focus on the most marginalized groups, including women, girls, people of African descent, Indigenous communities, persons with disabilities, and migrants. Key achievements included:

(a) UNFPA partnerships were instrumental in transforming harmful social and gender norms. ASRO partnered with Al-Azhar and other religious institutions to deliver Training of Trainers workshops for students from four countries, equipping future religious leaders with rights-based and gender-sensitive approaches to prevent GBV and harmful practices. EECARO collaborated with UN Women on the *EU 4 Gender Equality* project, fostering measurable shifts in gender

Figure 4. Output 3 progress towards targets in 2024

- 90+ — 85%
- 60-89% — 9%
- Below 60% — 6%

norms in six countries including the impactful *Fathers' Schools* initiative. In the West and Central Africa region, South-South exchanges with ASRO were organized to engage with religious leaders and scholars to end FGM; additionally, 14 countries in the region had their capacity strengthened on programming to transform harmful gendered social norms and end GBV and harmful practices;

(b) APRO supported 10 countries in the region in implementing GBV prevention strategies and programmes. LACRO launched a gender norms transformation strategy in Afro-descendant communities across seven countries. Ten countries in the West and Central Africa region developed action plans to combat FGM and other harmful practices through community engagement;

(c) Critical engagement in key regional dialogues driving discussions and action plans on gender justice, women's rights, and GBV, including the Asia-Pacific Forum on Sustainable Development which emphasized gender-responsive climate action, the ASEAN Regional Consultation which strengthened efforts against technology-facilitated GBV, and the adoption of the General Recommendation No. 5 in Latin America and the Caribbean on preventing GBV against Afro-descendant women;

(d) Capacity-building models were deployed to improve service delivery, such as midwifery training and hybrid approaches that enhanced frontline healthcare in Eastern and Southern Africa, sign language training for 120 providers expanding family planning access for impaired hearing clients in Tanzania, peer-training program in Guatemala empowered young women with disabilities to share sexual and reproductive rights information with their peers and communities, improving access to SRHR information and services in a culturally-relevant way. The World Continuing Education Alliance platform has trained over 116,000 health workers across 11 countries, improving service delivery and access to care. In West and Central Africa, the capacity of 13 country offices was strengthened on reproductive health commodity quantifications; and on HIV prevention resulting in WCA countries with high HIV prevalence, developing HIV prevention roadmaps;

(e) The global and regional programmes strengthened private sector partnerships. Twelve companies in Eastern and Southern Africa joined the Private Sector Coalition Against GBV. EECARO expanded Family-Friendly Workplace policies to nine countries and developed a return on investment (ROI) report on Family-Friendly Workplace initiatives, helping companies quantify the economic value of inclusivity and address gender inequalities in the workforce.

15. The global and regional programmes provided technical support, guidance, and tools to ensure a human rights-based approach and inter-agency coordination efforts on gender equality. Key highlights included:

(a) A flagship toolkit launched by the global programme to support country offices in driving social norm change. The toolkit was rolled out through regional webinars, providing technical guidance to 15 countries across Africa, Asia and Latin America;

(b)   A guidance note on delivering out-of-school comprehensive sexuality education (CSE) tailored for LGBTIQ+ youth developed by EECARO, providing practical guidance for CSE sessions and evidence-based tools for peer educators;

(c)   Nine countries in the Asia and the Pacific region developed programmes to address harmful practices and social norms, particularly focusing on child marriage and FGM;

(d)   A Technical Note for Intersectional Approach in GBV developed by LACRO;

(e)   The Gender Justice and Laws Initiative developed by ASRO;

(f)   WCARO and partners have supported and developed technical guidance briefs, including the "Equality Now" guidance note to support civil society organizations in effectively countering anti-rights pushback through a guide on how to build and sustain an effective movement of CSO advocates for ending harmful practices in West and Central Africa, and a joint technical brief with World Food Programme on the interlinkages of child marriage and food insecurity in the region.

16.   The global and regional programmes generated data, evidence, and promoted knowledge sharing to increase capacity in formulating and implementing laws and policies addressing GBV and harmful practices. Key products included:

(a)   Four regional studies by ASRO, EECARO, ESARO, and WCARO highlighted the intersection of climate change, migration, and SRHR, revealing how environmental stressors and displacement heighten vulnerabilities for women and girls, influencing violence, fertility intentions and contraceptive use;

(b)   The Asia and the Pacific regional workshop on "Meta-Synthesis and Meta-Analysis on Child Marriage Interventions," organized in collaboration with UNICEF, provided valuable insights for policymaking and programme development, and strengthened mechanisms for addressing child marriage and building capacities to change social norms for prevention of child marriage in South Asia;

(c)   The Positive Masculinity Position Paper, addressing violence against women, was developed by ESARO, in collaboration with the African Union;

(d)   Social norm change measurement tools were developed by EECARO to measure fathers' support for shared family responsibilities. Additionally, six standardized monitoring tools were implemented to assess shifts in gender norms and stereotypes.
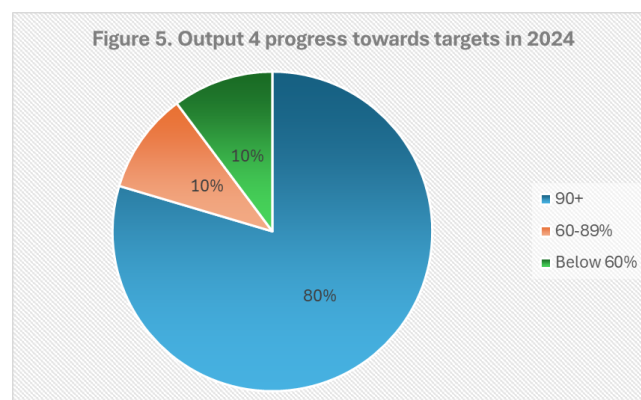
Output 4. Population change and data. **By 2025, strengthened data systems and evidence that take into account population changes and other megatrends (including ageing and climate change), in development policies and programmes, especially those related to sexual and reproductive health and reproductive rights**.

17.   In 2024, the global and regional programmes contributed to strengthening the availability, accessibility, and use of quality population data and evidence for policies and programmes. Figure 5 shows that 80 per cent of the targets achieved a progress rate of 90% and above.

18.   The global and regional programmes provided technical support to strengthen data systems and evidence. Key highlights included:

(a)   In 2024, 86 countries were supported in various phases of census implementation, including questionnaire design, digital data collection, data processing, analysis, capacity building, and integration of administrative data;

Figure 5. Output 4 progress towards targets in 2024

- 90+ — 80%
- 60-89% — 10%
- Below 60% — 10%

(b)   Thirty-eight countries in the Latin America and the Caribbean region developed registry-based census roadmaps, and six countries created population situation analysis roadmaps. In the West and Central Africa region, 16 countries developed Civil Registration and Vital Statistics (CRVS) roadmaps, and 8 countries created civil registration strategies;

(c)   UNFPA continued to lead as the primary UN agency supporting National Transfer Accounts (NTA) across four regions and 48 countries and enhanced the use of population data to inform policy responses on social inclusion and economic inequalities. The *National Inclusion Accounts (NIA)* in Latin America were leveraged to guide policy development. The *CISPop project* in Eastern Europe and Central Asia supported six countries in modernizing their population data collection by transitioning from paper-based to tablet-based census methodologies and integrating administrative data systems. APRO supported seven countries with National Transfer Account analysis, integrating the results into their population and development policy efforts;

(d)   Three countries in the West and Central Africa region were equipped with the skills and knowledge to conduct population situation analyses, focusing on reproductive health and rights, gender equality, and population and development linkages;

(e)   In the Asia and the Pacific region, nine countries were supported in collecting and analysing violence against women prevalence data from national surveys and secondary data analysis; five countries were supported to implement Maternal and Perinatal Death Surveillance and Response (MPDSR) systems, including developing methodologies, protocols, and training packages, and reviewing existing policies; and two countries were supported to strengthen health management information system data and its use;

(f)   National capacities to harness the demographic dividend were strengthened. In the West and Central Africa region, UNFPA led targeted capacity-building for national stakeholders to strengthen implementation of the African Union's Demographic Dividend Roadmap. Twelve SWEDD countries used data-driven advocacy to influence state budget allocations in support of key demographic priorities, and ten countries established national observatories to institutionalize monitoring of the demographic dividend.
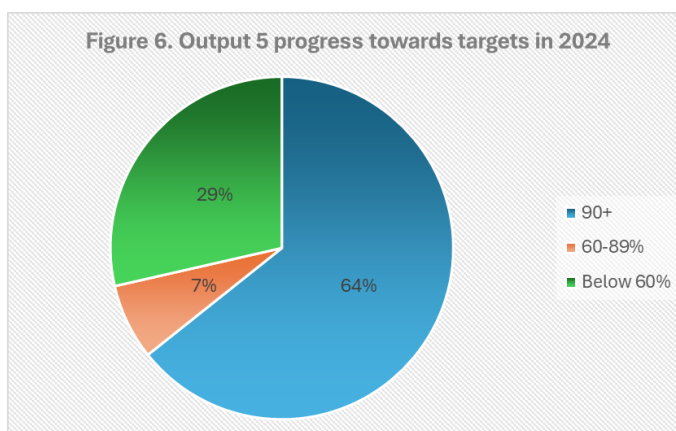
19.   The global and regional programmes contributed to interagency products, developed and rolled out knowledge products and tools to strengthen data and statistical capacity, and supported evidence-based population policies and programmes that advance the three transformative results. Key products included:

(a)   The Principles and Recommendations for the 2030 Census Round, developed in collaboration with the United Nations Statistics Division to provide global standards and best practices;

(b)   The Census Toolkits and Guidelines, developed by EECARO and UNFPA headquarters to support countries with standardized methodologies and digital innovations in census processes;

(c)   Knowledge products produced and widely disseminated, including the Administrative Data Operational Guidance (APRO), the Analysis of Data Availability for SDGs 3 and 5 Indicators (EECARO), Technical Note on CRVS Quality and Coverage (LACRO), and Guidelines for SRHR Indicators from Routine Health Management Information Systems (ESARO);

(d)   Data tools to prevent GBV were further rolled out across four regions, including the Sex, Age, Disability (SAD) Disaggregated Data Collection Tool, Impact Goal Estimating Model (IGEM), and Regional Dashboards on GBV Services. This was accompanied by capacity-building efforts, including training on the LACRO Administrative Records Guide, Prevalence Surveys Guide, and Asia and the Pacific GBV Administrative Data Operational Guidance;

(e)   The Global Dialogue on Demographic Diversity convened governments, UN agencies, and experts to exchange policy solutions and strategies for addressing evolving demographic trends. Outcomes included calls to prioritize investments in education, health, and decent work to harness demographic opportunities; strengthen social protection systems for ageing populations; and reject coercive population control narratives in favour of policies grounded in gender equality, human rights, and individual choice.

Output 5. Humanitarian action. **By 2025, strengthened capacity of critical actors and systems in preparedness, early action and in the provision of life-saving interventions that are timely, integrated, conflict- and climate-sensitive, gender-transformative and peace-responsive.**

20.   In 2024, the global and regional programmes contributed to UNFPA humanitarian action, with 64 per cent of targets reaching a 90 per cent or higher progress rate, as shown in Figure 6.

21.   The ever-growing humanitarian crises, caused by armed conflict, political instability and climate induced environmental disasters exacerbated already existing vulnerabilities especially after COVID-19 and introduced new risks for women, girls and other at-risk population groups. However, funding

Figure 6. Output 5 progress towards targets in 2024

- 90+ : 64%
- 60-89% : 7%
- Below 60% : 29%

gaps, operational limitations and logistical constraints have hindered humanitarian efforts. The substantial obstacles to humanitarian operations presented by escalating humanitarian crises and critical emergencies in 2024 necessitate a renewed dedication to humanitarian action. This involves prioritizing the allocation of resources and funding to humanitarian endeavours, alongside advocating for heightened international cooperation and collaboration to effectively address these urgent and intricate challenges.

22.   The global and regional programs provided technical support, developed guidelines and tools, generated data and evidence, and strengthened the capacity of countries and stakeholders. Key results included:

(a)   Across regions, SRH&RR and GBV were integrated into humanitarian and emergency response. Twenty-two countries in West and Central Africa developed Annual Minimum Preparedness Actions (MPAs) to improve emergency readiness. Twenty-five countries in Asia and the Pacific integrated SRH and GBV into emergency responses, strengthening government and humanitarian coordination, and 11 countries institutionalized SRH and/or GBV in national emergency preparedness and response plans, ensuring that women, adolescents, and marginalized populations have better access to life-

saving services in future emergencies. A regional preparedness checklist was developed by EECARO, boosting humanitarian preparedness and coordination across the region;

(b) National and subnational data on SRHR and GBV in eight Arab States countries were collected in disaster and crisis response. Minimum Initial Service Package (MISP) Readiness Assessments were conducted in five countries in the Asia and the Pacific region, fostering nation commitment;

(c) Cash and voucher assistance was piloted in 10 operations in the Arab States. In West and Central Africa, new cash transfers operations were launched in four countries;

(d) Global emergency response preparedness capacity was strengthened through the training of over 1,154 participants across 54 countries, certifying 112 master trainers in the Minimum Initial Service Package and Clinical Management of Rape, and equipping 507 service providers with essential skills in GBV and SRH;

(e) The surge personnel roster was expanded by 25 per cent (425 to 552) in 2024, enhancing response capacity across sectors through targeted vetting. New training programs, including Humanitarian 101 with 14 thematic modules and Surge Induction, strengthened staff readiness for rapid deployment;

(f) With APRO's support, the inclusion of Accountability to Affected Populations (AAP) approaches in humanitarian programming resulted in more community-centred, responsive interventions in eight countries, ensuring that the voices and needs of affected populations, especially women and girls, were reflected in service design and delivery;

(g) $323,197 worth of prepositioned supplies were distributed across 34 emergency responses in eight countries in the Asia and the Pacific region, reaching 31,216 people (25,019 females and 6,197 males, including an estimated 821 people with disabilities), through the Regional Prepositioning Initiative. Nine countries had supplies prepositioned which were available to be distributed and utilized in a crisis.

23. The global and regional programmes led coordination at global and regional levels, mobilised resources, expanded partnerships and South-South and triangular cooperation to benefit from shared decision-making and existing infrastructure for humanitarian delivery.

(a) The Asia and the Pacific regional GBV in Emergencies Working Group, co-chaired by UNFPA and the GBV Area of Responsibility, strengthened collaboration on risk mitigation and survivor-centred approaches and supported 18 countries in the region with strengthening GBV coordination mechanisms;

(b) In the Eastern Europe and Central Asia region, UNFPA and the United Nations Refugee Agency co-led the Regional GBV Working Group for the Ukraine Refugee Response, enhancing cross-border coordination and service delivery. In Latin America and the Caribbean, the regional programme provided a GBV Coordinator to the Regional Platform for Refugees and Migrants from Venezuela and co-led the GBV sub-sector across 17 countries, ensuring the integration of GBV priorities into the 2025–2026 Regional Refugee and Migrant Response Plan;

(c) To strengthen coordination, WCARO led the Regional Working Group on GBV in Emergencies (GBViE) and has also developed the first regional dashboard focusing on access to GBViE services.
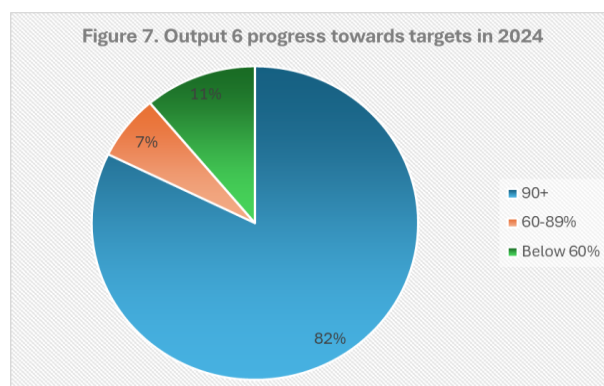
***Output 6. Adolescents and youth*. By 2025, strengthened skills and opportunities for adolescents and youth to ensure bodily autonomy, leadership and participation and to build human capital.**

24. The global and regional programmes performed robustly in contributing to enhancing the skills of adolescents and youth, empowering and promoting adolescent and youth participation in development and

climate-action processes, humanitarian and peace efforts, and accelerating the achievement of the three transformative results. Figure 7 shows that 82 per cent of the targets in 2024 achieved a progress rate of 90 per cent and above.

25.   The global and regional programmes enabled youth participation in intergovernmental processes, developed networks and platforms, and promoted interagency coordination and extended partnerships for increasing youth participation in policy frameworks. Key highlights included:

Figure 7. Output 6 progress towards targets in 2024

(a)   The programmes supported youth engagement in the ICPD30 Global Youth Dialogue in Benin, leading to the development of the Eastern Europe and Central Asia Youth Call to Action and the Asia-Pacific ICPD30 and SRHR Youth Innovation Challenge, and ensured youth voices from the dialogue in Benin were represented at both the 57th Commission on Population and Development and the Summit of the Future;

(b)   ASRO supported youth engagement in key forums to drive climate action, enabling youth participation in COP29, the Regional Conference on Youth in the Middle East and North Africa 2024, and the Youth, Peace, and Security Global Forum;

(c)   WCARO supported the launch of National Youth, Peace, and Security Coalitions in four countries (Benin, Guinea, Liberia, and Niger) and provided technical support to seven countries (Benin, Cameroon, Chad, Guinea, Liberia, Senegal, and the Gambia) in advancing the development of National Action Plans on Youth, Peace, and Security;

(d)   In Asia and the Pacific, a regional action plan was developed and launched on the sidelines of the Asia-Pacific Ministerial Conference on the Beijing+30 Review to further galvanize support for adolescent girls.

26.   The global and regional programmes developed guidance and tools, and strengthened capacity to enhance youth participation:

(a)   The Youth Compact Resource Library was developed to ensure that tools and guidance are available to support humanitarian work with, for, and by young people. This was part of a broader effort to develop guidance and tools that support youth participation in humanitarian work;

(b)   Capacity on youth-responsive humanitarian action in six countries in the Arab States was strengthened through a regional capacity strengthening programme.

(c)   The *Youth Power Hub* campaign, *Power Up! Podcast*, and *Masterclass on Digital Literacy* for youth leaders, launched by African Youth and Adolescent Network for the East and Southern Africa region (AfriYAN ESA), successfully equipped youth leaders with the knowledge and skills to combat technology-facilitated GBV, empowering them to lead digital advocacy and foster safer online environments;

(d)   In the West and Central Africa region, in-school CSE was successfully implemented in 16 countries through capacity building and developing resources, such as French-language CSE guidelines. Out-of-school CSE programs were implemented in 11 countries;

(e)   Across regions, youth-led innovation initiatives were supported to advance SRHR and gender equality. The "Juventudes Transformadoras" in Latin America and the Caribbean engaged Afro-

descendant youth in co-creating strategies to prevent adolescent pregnancy, leading to campaigns like *"My Body, My Decision, My Future."*. The "Pro'Tech Her Hackathon" in West and Central Africa fostered tech-driven solutions to GBV. The Youth Innovation Hacklabs in Eastern and Southern Africa supported mental health and adolescent SRHR innovations, with the 2024 Climate Change HackLab exemplifying this model. In West and Central Africa, the regional programme expanded support for girl-centred programs to 23 countries, to end child marriage and FGM. The ongoing success of these programmes highlights the transformative impact of youth empowerment on broader development goals;

(f)   APRO conducted the Regional Investment Case for the Prevention of Adolescent Pregnancy and Child Marriage for five countries, using novel economic modelling. The report presents compelling results at the regional and country level that describe the health and economic benefits from investing in and scaling up multisectoral interventions for girls over the medium and long term.

Organizational effectiveness and efficiency

27.   The UNFPA global and regional programmes steadily contributed to increasing organisational effectiveness and efficiency in leading the acceleration toward the three transformative results. The new UNFPA integrated results and resources management platform, QuantumPlus, has streamlined asset management across the organization, centralizing processes and saving field offices an estimated $700,000 in staff time globally. Additionally, the global rollout of the new travel module generated cost avoidance of $100,000 within the first four months of implementation.

28.   The global and regional programmes strengthened results-based management in all contexts, including humanitarian. Regional offices actively strengthened staff and partner capacity in results-based management through initiatives like EECARO and APRO's quarterly webinars, ESARO's annual training, and WCARO's training sessions. Regional offices also emphasized the need for RBM materials tailored for implementing partners (IPs).

29.   The global and regional programmes fostered innovation through initiatives like the 4HerPower Innovation Challenge and the Climate Change Research Challenge, providing mentorship and seed grants to 20 young women-led teams. In 2024, the global and regional programmes played a critical role in expanding private sector partnerships, raising $63 million—far exceeding its Strategic Plan target—and securing over $130 million in multi-year commitments from philanthropies and foundations. Beyond fundraising, UNFPA influenced corporate partners by launching workplace SRHR metrics with Accenture and convening the first group of champions (Amref, Bayer, Essity, Ferring, MSC Shipping), collectively impacting hundreds of thousands of women.

III.   Challenges and lessons learned

30.   The global and regional programmes identified following challenges:

(a)   *Financial constraints and resource mobilization*. Volatile donor investments and budget constraints hindered the full implementation of projects, impacting overall progress;

(b)   *Coordination and collaboration*. Misaligned priorities, varying stakeholder capacities, and a lack of donor coordination slowed progress. Strengthening partnerships through interagency workshops and joint initiatives was crucial in addressing these challenges, improving coordination and alignment.

31.   The global and regional programmes identified the following as lessons learned to improve acceleration in achieving the three transformative results and ICPD Programme of Action during the final year of the current strategic plan:

(a) *Strengthening partnerships*. Interagency collaboration and joint initiatives have been vital in overcoming coordination challenges, fostering improved communication for effective country programme delivery;

(b) *Strategic planning and early action*. Early initiation of budgeting, procurement, and implementation processes has been critical in mitigating delays. For example, proactive planning in census activities has resulted in more effective outcomes;

(c) *Capacity building and knowledge sharing*. Regional engagements with country offices, peer learning and tailored technical assistance, including in-person support for country offices, have been essential in strengthening local capacities and ensuring more effective implementation;

(d) *Leveraging innovation and technology*. The use of digital tools has improved data quality and service delivery, with long-term benefits for outreach, as seen in census activities. Hybrid training approaches have also proven effective in capacity building, offering flexible and scalable solutions and more cost-efficiency.

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