

funding for the agency is provided in the form of earmarked contributions presents a challenge for UNFPA. Unlike many

other agencies, UNFPA has not experienced any reduction in financial contributions since the financial crisis.

3. Norway's policy towards UNFPA

UNFPA's mandate is well aligned with the importance Norway attaches to human rights and gender equality, as well as with key Norwegian health priorities and our integrated approach to HIV and AIDS prevention. UNFPA's activities contribute towards attaining Millennium Development Goal (MDG) 5 on reducing maternal mortality and achieving universal access to reproductive health, a goal on which Norway focuses particular attention. UNFPA plays a central role in the implementation of the UN Secretary-General's Global Strategy for Women's and Children's Health within the framework of the H4+ partnership between UNFPA, WHO, UNICEF, UNAIDS and the World Bank. This strategy is an important element of Norway's efforts towards achieving MDG 4 on child mortality and MDG 5. UNFPA also contributes to achieving MDG 3 on gender equality and women's empowerment, and MDG 6 on the prevention of HIV and AIDS, both of which are priority areas for Norway. UNFPA's efforts to promote reproductive health and rights are largely financed through core contributions, but also through Norwegian support for the Maternal Health Thematic Fund and funding provided directly for UNFPA activities at country level, especially in humanitarian situations.

UNFPA is an important partner in the implementation of the Norwegian Government's International Action Plan for Combating Female Genital Mutilation, and supports this work by allocating core resources and by initiating and contributing support for a multi-donor fund that finances efforts to eliminate female genital mutilation. Preventing sexualised and gender-based violence are important priority areas for Norway and a key area of UNFPA's activities.

Norway considers it important to ensure that UNFPA has the working conditions it requires to be able to play its leading role in implementation at both global and country level of the programme of action adopted at the Cairo conference (ICPD), and Norway supports the agency's rights-based approach. Under the terms of reference of the UN Commission on Population and Development, the Commission is to monitor, review and assess the implementation of the ICPD programme of

action, and thus establishes guiding principles for UNFPA's activities. Norway will be a member of the Commission from 2012 to 2016.

Systematic use of population data and analyses is crucial to creating a good basis for development strategies and plans. Norway considers UNFPA's efforts to support national policy development with focus on the link between population and development an important contribution to this process.

In connection with the mid-term review of UNFPA's Strategic Plan, Norway underscores the importance of further narrowing the focus of the agency's efforts and improving its results framework to provide a foundation for better results-based management and reporting. Norway has actively contributed to UNFPA's efforts to put in place independent control and evaluation functions, and to make anti-corruption efforts a high priority. We support the role played by UNFPA's partnership with national partners as a means of strengthening national ownership and achieving sustainable results, but wish to emphasise that this approach must be accompanied by results-based planning and effective monitoring and control procedures, in addition to better monitoring of national partners. Priority must also be given to systematic follow-up of the observations of external and internal auditors. UNFPA has undergone major organisational and policy changes in the past few years, and Norway now emphasises the need for consolidation.

With regard to the UN's reform agenda, Norway urges UNFPA to continue to play a proactive role at the central, regional and country level in line with the report of the UN Secretary-General's High-Level Panel on Reform. Key elements are support for the system of a single Resident Coordinator in charge of UN activities at country level, joint programmes, joint country offices and joint services. We support the ongoing process of relocating the regional divisions from UNFPA headquarters in order to provide better support for the country offices.

UNFPA

United Nations Population Fund

1. Facts and figures

Type of organisation: Fund financed through voluntary contributions

Established in: 1967

Headquarters: New York

Number of country offices: 129

Head of organisation: UN Under-Secretary-General and Executive Director Dr. Babatunde Osotimehin (Nigeria)

Dates of Board meetings 2011: 31 January–3 February, 6–17 June (Annual Session), 6-9 September

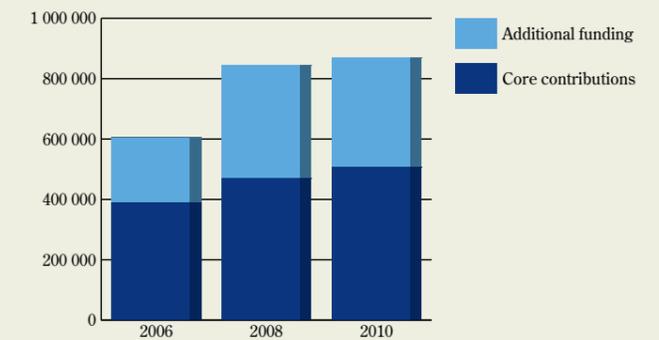
Norway's representation on Board: Participation as an active observer in 2010-2011 due to substantial Norwegian contributions. Executive Board member 2012-2013

Number of Norwegian staff: 2

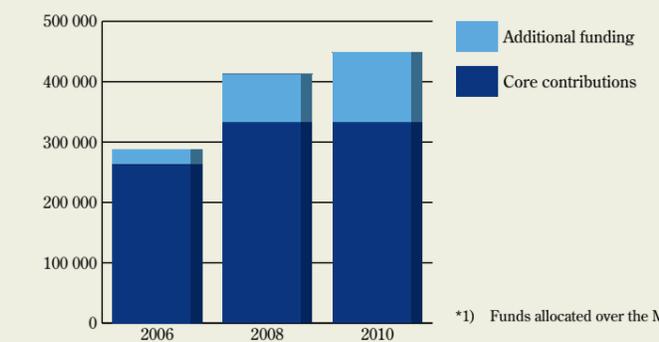
Responsible ministry: Norwegian Ministry of Foreign Affairs (MFA)

Website: www.unfpa.org

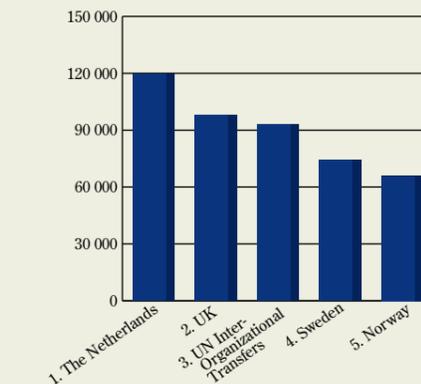
Total revenues (in US\$ 1000)



Norway's contributions^{*)} (in NOK 1000)



The five largest donors, including Norway, 2010 (in US\$ 1000)



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<http://www.regjeringen.no/en/dep/ud/selected-topics/un>.

Mandate and areas of activity

UNFPA's mandate is to promote reproductive health and gender equality, and support the development of population programmes to reduce poverty. After the 1994 International Conference on Population and Development (ICPD) in Cairo, UNFPA was given a leading role in assisting member states to implement the adopted programme of action. UNFPA's mandate was thus concretised in a way that makes the rights of individuals, in particular sexual health and reproductive rights, the pillar of the agency's activities.

UNFPA's Strategic Plan (2008 – 2013) defines three main goals:

1. Systematic use of population dynamics analyses in shaping national policies
2. Universal access to sexual and reproductive health and prevention of HIV and AIDS
3. Gender equality and women's empowerment

Results achieved in 2010

A central goal in UNFPA's focus area of population and development is promoting systematic use of population data and analyses as a basis for development strategies and plans. Providing technical assistance for censuses is an important task. UNFPA contributed to raising the percentage of countries that have carried out the "2010 round" of national censuses and household surveys to 42 per cent in 2010, from 31 per cent the year before. A total of 76 countries received support to conduct censuses and household surveys in 2010, including four countries in a state of humanitarian emergency (Afghanistan, Democratic Republic of Congo, Iraq and Sudan). Young people are a core focus area for UNFPA, and the percentage of national development plans that address young people's needs increased slightly to 59.5 per cent in 2010, from 58 per cent the previous year. UNFPA has helped to ensure that the percentage of countries with new development strategies that utilise analyses of the interlinkage between population dynamics and poverty increased to 75.7 per cent in 2010, up from 72.2 per cent in the baseline year 2007. However, this is a slight decline compared with 78.8 per cent in 2009.

The UNFPA State of the World Population Report is an important global tool for population data and analysis. The report is published annually and deals with a variety of topics within UNFPA's mandate. In 2010, 20.9 per cent (USD 76.6 million) of UNFPA's core resources went to the programme area of population and development.

Through the focus area of sexual and reproductive health and rights, UNFPA advances efforts to achieve Millennium Development Goal 5 on reducing the maternal mortality ratio and achieving universal access to reproductive health by 2015. Access to a full range of reproductive health services, including programmes on sexual health, family planning, safe births and prevention of unsafe abortions, and combating female gender mutilation and sexualised violence, are key elements. UNFPA helped to increase the percentage of births super-

vised by qualified health personnel in developing countries to 63 per cent in 2010, up from 61 per cent since the baseline year 2007. Through its global programme for reproductive health supplies and medicines, UNFPA assisted 34 countries in 2010 to prepare their national distribution systems by expanding capacity and developing strategies and programmes of action. All the countries covered by the programme had good access to reproductive health supplies and medicines in 2010. UNFPA's central procurement office for reproductive health supplies and medicines qualified for ISO certification in 2008, as the first of its kind, and its certification was renewed in 2010. UNFPA helped to increase use of the agency's standard reproductive health package for use in humanitarian emergencies from 72.2 per cent in 2009 to 80.3 per cent in 2010. Little progress has been made in terms of increasing use of contraceptives, and ensuring access to contraceptives is a priority focus. The number of health facilities in developing countries that offer modern contraceptives increased from 34.6 per cent in 2009 to 36.6 per cent in 2010. UNFPA also contributed to the prevention of HIV and AIDS among women, young people and particularly vulnerable groups through a variety of educational programmes and treatment of HIV-positive pregnant women. The percentage of secondary school curricula that address the issues of sexual and reproductive health and HIV prevention rose to 42.9 per cent from 36.4 per cent the year before. A total of 47.5 per cent (USD 174 million) of UNFPA's core resources went to the focus area of reproductive health and rights in 2010.

Within its focus area of gender equality, UNFPA participates in the implementation of the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) and Security Council Resolution 1325 on women, peace and security (SR 1325). The percentage of countries that included reproductive health in reporting on their implementation of CEDAW rose from 62.1 per cent in 2007 to 74.1 per cent in 2010, and the group of countries in conflict and post-conflict countries that are implementing SR 1325 is reported to have increased from 77.7 per cent to 91.5 per cent. However, there was only a small increase in the group of countries that include reproductive rights in national human rights instruments, from 66.7 per cent in 2009 to 69.2 per cent in 2010. Other tasks within this focus area include efforts to prevent sexualised violence, which include training for health workers and the police and establishment of counselling services for victims. Although a substantial increase in the availability of such services in 2010 has been reported, there is still a large gap in relation to need. In partnership with UNICEF, UNFPA is implementing the world's largest programme for the elimination of female genital mutilation. This joint initiative supports national and local efforts to promote positive social change in 17 countries. Estimates indicate that the percentage of women who are subjected to female genital mutilation has declined significantly in Burkina Faso, Egypt, Eritrea, Kenya, Nigeria and Senegal. A total of 11.9 per cent (USD 43.5 million) of UNFPA's core resources went to the focus area of gender equality in 2010.

Less than half of all births in Tanzania take place in safe surroundings, and the risk that a Tanzanian woman will experience complications in connection with childbirth is high. The pregnancy-related condition obstetric fistula is common. UNFPA has helped to increase the number of women treated for fistula by 60 per cent by providing assistance to national partners. In collaboration with UNFPA, a hospital in Tanzania has established a system for transferring money by mobile phone to women suffering from fistula. The money enables the women to buy a bus ticket so that they can travel to a hospital for medical treatment.

2. Assessments: Results, effectiveness and monitoring

UNFPA has a relatively good system for results-based management and reporting. The Strategic Plan operationalises the mandate by defining three main goals and outcomes with a related development results framework. The results framework has relatively well articulated goals, indicators and baseline data, and UNFPA reports annually under the Plan. UNFPA has established systems and procedures for its country offices' feedback reporting on national achievement of results, and the aggregated results are presented in the agency's annual report. Although the results framework for the Strategic Plan is considered to be relatively good, there is room for improvement.

By contributing to ongoing capacity development in recipient countries, UNFPA is instrumental in ensuring national ownership and sustainable development. National execution of development activities is a key means of achieving this objective. In the past few years, UNFPA has attached growing importance to national execution, and large parts of the budget are now channelled through national partners. National execution entails greater risk for UNFPA in terms of monitoring and reporting on funds than if the agency were to implement activities itself at country level. UNFPA is currently initiating a number of measures to improve monitoring of national partners, such as effective monitoring and control mechanisms, promotion of leadership accountability and provision of training for employees and national partners.

In the past few years, UNFPA has taken significant steps to improve its evaluation function, but it will be some time before the full impact of these measures will be seen. An important change is that UNFPA will now evaluate current country programmes before presenting drafts for new country programmes to the Executive Board. This will ensure that lessons learned from past experience are incorporated into the design of new plans, especially evaluations carried out by the country offices. Thematic evaluations are now also submitted to the Board. The quality and availability of evaluation reports still need to be improved, and a new evaluation policy is to be adopted in 2012. The independence of the evaluation function is ensured by the fact that biennial reports are submitted directly to the Executive Board and that the function's budget is adopted by the Board.

Several changes have also been made to improve control functions and procedures. The independence of the internal audit office is ensured by the fact that annual reports are submitted directly to the Executive Board and that the office's budget is approved by the Board. A coherent framework for

risk management is currently being introduced. UNFPA gives high priority to anti-corruption activities. A separate ethics office has been established, which reports directly to the Executive Board, guidelines have been drawn up and training is provided to increase staff awareness of ethical issues. Measures have also been put in place for the systematic follow-up of reported instances of misconduct (an integrity hotline and an special investigation unit). An international Multilateral Organisation Performance Assessment Network (MOPAN) considers UNFPA's internal audit and anti-corruption guidelines to be good, and in some respects extremely good. External audits are carried out by the UN Board of Auditors, and reports are submitted to the Executive Board on the follow-up of external audit reports. Audits have uncovered weaknesses in country offices' compliance with procedures for monitoring national cooperation partners.

Sexual and reproductive health and rights are among the most politicised areas of international cooperation, and involve political, religious and moral issues. UNFPA's culture-sensitive approach, which includes collaboration with religious leaders, councils of elders and civil society, has made it possible to address these issues effectively. The agency has long been subject to political pressure targeting the part of its mandate that concerns sexual and reproductive health and rights, particularly in connection with family planning. However, UNFPA enjoys strong support from member states, including a number of Arab countries.

UNFPA adopts a human rights-based approach to its work. Gender equality is mainstreamed in all areas of the agency's activities, in addition to being a separate focus area. There is a need to further highlight such cross-cutting concerns as the environment and vulnerable groups. Key parts of UNFPA's mandate are politically and culturally sensitive in many countries.

Protecting reproductive rights in humanitarian emergencies is an important priority for UNFPA, and the agency has a strategy for work in humanitarian crises and emergency relief situations which focuses particularly on women's reproductive rights and prevention of sexualised violence. An evaluation of UNFPA's humanitarian work showed weaknesses in the coherence of the agency's approach, although UNFPA can point to good individual results.

Compared with other UN agencies, UNFPA receives a large portion of its support in the form of core contributions (57.8 per cent in 2010). However, the fact that a growing share of