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# TABLE OF CONTENTS

**Foreword** 7  
**Letter from the Representative** 8  
**Sexual and Reproductive Health and Rights** 10  
  Providing Financial and Technical Assistance towards Comprehensive SRHR Legislation 10  
  A Partner in Shaping SRH Policy 11  
  Telemedicine Delivers 11  
  Towards Further Improvements in Maternal and Newborn Health 12  
  Concluding the Cross Border STI Project with China 13  
**Gender** 14  
  The Road to the Approval of the Law to Combat Domestic Violence 14  
  New GBV Project Launched in Partnership with SDC 15  
  Paving the Way for Gender-Sensitive Policies and Programmes 16  
  Dignity First in the Face of Disaster 16  
**Youth** 18  
  Towards Shaping a Comprehensive Youth Policy 18  
  Ensuring SRHR Services for Mongolia’s Young People 20  
  Life Skills Education 21  
**Population Data** 23  
  Providing Support for Policy in Population and Development 23  
  Mid-term Population and Housing Census Conducted 23  
**Management Outputs** 24  
  Harnessing Partnership Developments 24  
  Resource Mobilisation 25  
  UNDAF AND CPD 6 26  
  Successful completion of CPD5 27  
  Operational Effectiveness and Efficiency 27  
  Speaking with One Voice 27  
**Financial Overview** 29
2016 marked the last year and successful conclusion of the UNFPA’s 5th Country Programme 2012-2016 for Mongolia. The successful completion of the Country Programme coincided with the closing of a decade long of support to Mongolia in achieving the Millennium Development Goals (MDGs). In particular, MDG 3: Equal rights for women and men, MDG 5: Reducing maternal mortality, and MDG 6: Combating HIV/AIDS. In 2015, Mongolia succeeded to become one of the only 9 countries that successfully met the target to reduce maternal mortality by 2/3.

The amazing accomplishments of the MDGs and other notable achievements set the stage for Mongolia towards a new era in development, with the adoption of the Sustainable Development Goals (SDGs) 2030 Agenda at the UN General Assembly. It was thus a welcomed development in February 2016, when Mongolia demonstrated its commitment to achieving the SDGs through the approval of the “Sustainable Development Vision 2030” by the Mongolian Parliament. In September 2016, as the new Government Action Plan was approved, the plan was centered on SDGs and the Sustainable Development Vision document which demonstrated the government’s commitment.

Assured with this renewed vision and backed by a longstanding partnership spanning over 4 decades between UNFPA and the Mongolian government, cooperation steered the country steadily through 2016’s accomplishments. The accomplishments from the successful cooperation included the further advancement of maternal and newborn health through the Telemedicine networks, increased knowledge of vulnerable populations influencing their behaviors to reduce and prevent maternal mortality, unwanted pregnancies, and Sexually Transmitted Infections (STIs), support for the approval of the Law to Combat Domestic Violence (LCDV) in December 2016 and finally, enhanced availability of life skills education (LSE) to Mongolian youth.

UNFPA’s goal is to deliver a world where every pregnancy is wanted, every childbirth is safe and every young person’s potential is fulfilled, therefore, UNFPA continues to work with the Government of Mongolia, civil society, development partners including the Swiss Agency for Development and Cooperation (SDC), the Government of the Grand Duchy of Luxembourg, and Oyu Tolgoi LLC, to fulfill its mandate for the country.
I. LETTER FROM THE REPRESENTATIVE

2016 was a pivotal year for Mongolia and for UNFPA, which was ever dynamic and in transition, continuously adapting to the challenges and demands that our world in the new era of Sustainable Development Goals brings.

It was a year marked by endings: the successful conclusion of the 5th Country Programme 2012-2016. Also, it was a year marked by beginnings: the first year of Mongolia committing to the realisation of the new global Sustainable Development Goals with its even more ambitious developmental targets to be attained by 2030; the approval of the UNFPA’s 6th Country Programme 2017-2021 for Mongolia by the UNFPA Executive Board in New York; and the forging of new partnerships both with traditional donors such as the Swiss Agency for Development Cooperation and the Government of Luxembourg, and private sector entities such as Oyu Tolgoi. New partnerships were also established in 2016 with the private sector including the Press Institute of Mongolia, Junior Chamber International Mongolia, and GurvanBileg LLC.

No matter what the changes that the year 2016 has brought to us, UNFPA remained to be Mongolia’s critical partner in development as stalwart as when we began in the early days of cooperation since the 1970s, driven by the mandate that we strive to complete—to focus on sexual and reproductive health and rights, youth participation and development, and gender equality, ultimately aiming “to deliver a world where every pregnancy is wanted, every childbirth is safe and every young person’s potential is fulfilled.”

In 2016, UNFPA’s upstream support for Mongolia as a Middle Income Country continued, providing policy and advocacy assistance. UNFPA worked extremely closely with Parliament, line Ministries, CSOs, and national and international partners to set a legal and policy framework as an enabling environment to address UNFPA’s mandated areas. Financial and technical support as well as advocacy was generated to ensure that UNFPA’s assistance was geared towards the development of the Maternal and Child Health Law, the Youth Development Law, the Youth Policy, and the National Programme on Youth Development, as well as the approval of the revised Law to Combat Domestic Violence (LCDV), the State Policy on Health, and the new National Programme on Maternal, Child and Reproductive Health.

In the area of sexual and reproductive health, we saw in 2016 a very challenging year of observing the reversal of developmental gains we have achieved over the years in the areas of maternal mortality, despite the fact that Mongolia became in 2015 one of the only 9 countries in the world which have successfully achieved the MDG maternal mortality target. A rapid situation
and needs assessment was conducted, leading to emergency supply of contraceptives to avoid unmet need for family planning and unwanted pregnancies particularly amongst Mongolia’s youth, using both UNFPA’s and Mongolia’s state funding. High-level advocacy work with Parliament, the Government and Development Partners was also conducted to ensure a sufficient allocation of the state budget.

In the area of youth development, partnerships with the Swiss Agency for Development Cooperation, the Government of Luxembourg and Oyu Tolgoi LLC continued in 2016. Two new adolescent and youth-friendly clinics in Khanbogd and Zamiin-Uud soums of the Umnogobi province were established, thus totaling 21 youth friendly health clinics available in the country. UNFPA-endorsed Life Skills Education (LSE), so-called “soft skills” required for solid growth of young people to increase the success in their lives and employability, continued to make a headway in reaching more young people through the 16 Youth Development centers countrywide, as well as school and TVET-based LSE Halls.

Towards the run-up to the approval of the revised LCDV, extensive advocacy and communications activities were supported by UNFPA. Mongolia’s young musicians continued to be engaged through the UNFPA’s flagship music event “Orange Sessions,” and they came together to produce a song “Orange the World” for the international music contest as organized by the United Nations’ UNiTE campaign to end violence against women. They went further to mobilise public donations through their concerts, which were used to help 6 UNFPA-supported One Stop Service Centers (OSSCs) for the victims of violence. In partnership with the Swiss Agency for Development Cooperation, a new project on GBV was launched in 2016, which will support the implementation of the LCDV by strengthening the country’s GBV data collection, carrying out educational campaigns, and ensuring the effective provision of integrated services to the victims of violence. 2016 was also a very challenging year when the country was faced with the Dzud (extreme climate conditions affecting many herder families), and UNFPA’s intervention was swift to help women and girls including pregnant mothers, ensuring their dignity, security and safety. UNFPA’s advocacy to national and international partners continued to pay close attention to special needs of women and girls in humanitarian settings.

As much as we commemorate our achievements in 2016, our work is far from done. Upon last year’s approval of the 6th Country Programme, we are committed to prioritizing even more adolescent and youth issues in the national development policies and programmes, specifically the increased availability of comprehensive sexuality education and youth-friendly SRHR services, and to advancing gender equality and empowerment of women and girls, especially the most vulnerable. Truly, the 6th Country Programme takes to heart the UNFPA’s mandate to ensure that no one — especially not the most vulnerable segment of the society — is left behind.

As always, we remain confident in Mongolia’s achievement of Sustainable Development Goals, and we are committed to achieving the new global goals by delivering the new Country Programme outcomes, maintaining traditional and new partnerships, and ultimately making the world a better place for women, girls and youth.

Thank you for your continued faith in and support for us, without which such successes of 2016, and the future goals, would not have been possible.

**Naomi Kitahara**
Country Representative
II. SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS

The SEXUAL AND REPRODUCTIVE Health programme promotes the full realisation of everyone’s sexual and reproductive health and rights (SRHR), which is an essential component of safeguarding universal human rights. UNFPA supports the development of policies, strategies and protocols for SRHR, ensuring that everyone has access to SRHR information and quality services. Specifically, addressing the SRHR needs of women, girls and young people are at the core of UNFPA’s universal mandate.

Providing Financial and Technical Assistance towards Comprehensive SRHR Legislation

In 2016, UNFPA generated technical support for the Parliamentary working group for the finalisation of the Maternal and Child Health Law (MCHL). Once approved, the Law will enforce the universal access to SRHR services for women and youth in Mongolia.

In partnership with the Asian Development Bank, UNFPA assisted the development of the conceptual framework for the State Policy on Health. Further building on a long-established relation-
ship with the Parliamentary Standing Committee on Social Policy, Culture, and Science, UNFPA also provided support for a series of parliamentary hearings on the Youth Development Law. These hearings addressed youth health issues such as SRHR, the increasing sexually transmitted infections (STI) epidemic among young people, promotion of innovations in the social sector, and the State Policy on Health while promoting the SDGs and the International Conference on Population and Development (ICPD) agenda. UNFPA also supported the Ministry of Health (MoH) in integrating SDG health indicators in the National Health Information System by revising primary data reporting forms.

A Partner in Shaping SRHR Policy

UNFPA remains an active partner of the Mongolian government in the formulation of national policies that addresses the SRHR needs of women, girls and young people. With financial and technical assistance from UNFPA, the Fourth National Reproductive Health Programme (2012-2016) was thoroughly evaluated. The evaluation showed that UNFPA’s SRHR programme contributed significantly to Mongolia’s achievement of the maternal mortality ratio (MMR) reduction target of the MDGs, which was an achievement made only by nine countries in the world.

Through UNFPA’s advocacy, technical support for evidence-based policy making, and financial assistance, there was an increase in state funding for SRHR, including the budget for the improvement of maternity care infrastructure, an increased antenatal care (ANC) coverage (95%), strengthened technical capacity and skills of maternity service providers, and the introduction of new and innovative diagnostic and treatment methods. The new National Programme for Maternal, Child and Reproductive Health was subsequently prepared for the Cabinet’s approval in early 2017.

Also in 2016, UNFPA supported several studies on family planning, including the Availability of Modern Contraceptives and Life Saving Maternal/RH Drugs, a Situation Analysis on Family Planning and the Qualitative Study on Family Planning. These technical works of UNFPA gives a comprehensive picture of family planning from the perspective of service providers, clients, health systems and decision makers, and helps sensitise newly appointed government officials on RH and family planning.

Telemedicine Delivers

With the full support of the Government of the Grand Duchy of Luxembourg, the Telemedicine project has been a highly innovative undertaking which established a network of medical professionals and maternity hospitals countrywide, and connected them online to the tertiary level SRHR services in the capital city. Pregnant women in even the remotest areas of Mongolia were able to receive expert consultation and life-saving care without the burden of travelling to the Ulaanbaatar city or exhausting their resources in the effort. At its conclusion, the project delivered several tangible results which contributed to the overall reduction of maternal mortality in the country, notably through early detection and timely management of pregnancy complications at provincial level via the nationwide tele-consultation network, regular consultations among participating hospitals on maternal and neonatal cases, full use of the Maternal and Child Health Surveillance System, introduction of competency-based Emergency Obstetric Care and
on-the-job surgical skills training, and development of eLearning platform at the National Center for Maternal and Child Health (NCMCH) with five continuous medical education modules with an online credit system.

By the end of the project, 70% of all gynecologists and obstetricians working in Mongolia on emergency obstetric care had received training from UNFPA via the Telemedicine project. In order to ensure the sustainability of the project as well as full Government ownership of the past project intervention areas, a major knowledge transfer event regarding implementation of both phases of the telemedicine project (2007-2011 and 2012-2016) was conducted in December 2016.

In July 2016, the Luxembourg Prime Minister, H.E. Xavier Bettel, visited the Telemedicine project site during his visit for the Asian and European Meeting (ASEM), which culminated in the extended agreement to support the Exit Phase of the Telemedicine Project for the period of 2017-2019.

Towards Further Improvements in Maternal and Newborn Health

In 2016, UNFPA responded quickly when maternal mortality doubled from 26 to 348 per 100,000 live births. The initial rapid assessment revealed major stock shortages of modern contraceptives at service delivery points, indicating an increase in unmet needs for contraceptives and unwanted pregnancies. UNFPA immediately commissioned an emergency procurement of contraceptives as a short term measure, while engaging critical discussions and negotiations with national authorities and international financial institutions at senior level to secure the budget for contraceptives in the medium term. Through UNFPA’s advocacy, MoH also conducted an emergency procurement of contraceptives in the amount of USD 52,561 from the state budget, to meet anticipated national needs for the preceding 8 months. Also, UNFPA organized practical training in emergency obstetric care (EMOCS) to medical personnel, especially including young medical graduates. It was designed to complement UNFPA’s continued support for the revision
of the undergraduate obstetric and neonatology curriculum in the Department of Medicine at the Mongolian National University of Medicine and Science. Competency-based ‘SCORPIO’ training methods were introduced and have been expanded to several clinical departments.

Such efforts were complemented by UNFPA’s procurement of essential equipment for maternal and newborn services worth USD 500,000 for the NCMCH as well as regional and provincial maternity homes to improve their quality of care.

In 2016 UNFPA continued its support for the reform agenda of midwifery education and practice, including the revision of the job descriptions of midwives based on standards developed by the International Confederation of Midwives. UNFPA in collaboration with the French NGO Santé Sud, supported Mongolia’s efforts to review and revise the medical and legal framework, job descriptions, training curricula and competencies of midwives. The purpose of the joint collaboration is to pursue a reformed agenda for midwifery in Mongolia, by empowering midwives not only for maternal and child health, but also for primary health care to be embedded in communities.

**Concluding the Cross Border STI Project with China**

The cross-border STI project, which was financed by the Government of Luxembourg, was also completed in 2016. The evaluation findings revealed that as per objectives of the National Strategic Plan on HIV/AIDS and STIs for 2010-2015, HIV/STI vulnerability and risks among most-at-risk populations were substantially reduced by scaling up high-quality prevention and care services. The project likewise addressed the priorities of SRHR needs of youth, adolescents and affected populations. Excellent partnerships were formed at national and local levels in the course of the project. The Joint Steering Committee (JSC), established at the level of UNFPA Country offices in Mongolia and China, provided overall strategic oversight for the project.

The project implemented a series of behavior change communication (BCC) activities among Female Sex Workers (FSWs) and mobile populations, including community-based education and counseling, testing and treatment services. The final project evaluation documented a notable increase in the number of FSWs accessing community-based SRH/STI/HIV testing and treatment services from 180 in 2014 to 1,200 in 2016. The incidence of new syphilis infections among FSWs was reduced threefold over the five years of the project’s duration. The proportion of FSWs with comprehensive and accurate knowledge of HIV/ AIDS also increased from 28.8% in 2012 to 39.7% in 2016. It also increased from 17.2% to 22.9% in five years for the mobile population. The majority (87.5%) of FSWs reported being tested for HIV in the last 12 months, which increased from 74% in 2012.
III. GENDER

The Gender Programme seeks to strengthen the national gender machinery, supporting the country in achieving gender equality in line with SDG 5 (Achieve gender equality and empower all women and girls), and specifically to help end gender-based violence (GBV) through relevant legislation and comprehensive response mechanisms for victims. UNFPA supports partnerships with civil society and engagement with the public, to advocate for and help implement legislations and programmes for gender equality and the elimination of GBV.

The Road to the Approval of the Law to Combat Domestic Violence

Over decades, UNFPA has been part of the movement to prevent and effectively respond to GBV and domestic violence (DV). One of the critical outcomes of such engagements and support by UNFPA in 2016 was the approval of the revised Law to Combat Domestic Violence (LCDV). The law was approved in May 2016, but withdrawn in September for further revisions and approval, which took place in December 2016. Simultaneously, elements to strengthen the protection from violence were included in other relevant laws including the Law to enforce the Law, the Law on Police Operations, the Criminal Code, and the Violation Law. Despite the prolonged process, UNFPA continued to provide technical and financial support for the national consultations, and conducted advocacy to key decision and policy makers. There was also very strong and unwavering support from the public to make sure that the revised LCDV was approved without
delay by the Parliament. It was a testament to GBV/DV being publicly recognized as one of the critical issues that needs to be resolved in society. Furthermore, it was an encouraging assurance that UNFPA’s sensitisation and advocacy work has been very effective. The women MPs, the Parliamentary Women’s Caucus, the MP Gender Champions, the Ministry of Justice and Home Affairs (MoJHA) at very senior levels, and key CSOs played a significant role in getting the LCDV approved.

New GBV Project Launched in Partnership with SDC

In June 2016, UNFPA signed the contributions agreement with the Swiss Agency for Development and Cooperation (SDC) to partner for the implementation of the project “Combating GBV in Mongolia.” The new project was then successfully launched in September 2016, with the MoJHA on behalf of the Government of Mongolia. This game-changer ensures that for the first time in Mongolia, there will be a comprehensive, multi-sectoral response to GBV including data collection, awareness raising, advocacy and sensitisation of GBV issues, and the provision of essential and integrated services for the victims of violence. It will be implemented in close collaboration with relevant Ministries and CSOs, modeling the benefits of public-private partnership for prevention and responses to GBV.

To kick off the project implementation, the process of conducting Mongolia’s first ever GBV prevalence survey was initiated by NSO. The survey will use internationally recognized methodologies, and cover all ‘aimags’. The project will also ensure the provision of the essential service package in the One Stop Service Centers (OSSCs), enhancing the 6 OSSCs which UNFPA helped to establish in the past years. OSSCs provide integrated services and support through, physical care, psychological counseling, police protection, legal services, and social assistance
to the survivors of violence at one physical location rather than making the victim move around in order to access resources. In addition, there is the setting-up of local multi-disciplinary teams to ensure coordination of public services in each locality.

Paving the Way for Gender-Sensitive Policies and Programmes

UNFPA supported the preparation of guidelines on gender sensitive budgeting (including indicators and check lists), which were presented to the Ministry of Finance (MoF), the Ministry of Population Development and Social Protection (MoPDSP), and the Baghanur District Governor’s office. In addition, following the integration of Gender Sensitive Budgeting (GSB) into the Academy of Management which offers postgraduate training to civil servants, a 24 hour training package on GSB was developed. The training package includes online training course curricula, power point presentations on each topic, a video session on GSB, links to literature and web sites for more information, self-evaluation tools, and self-study materials. 25 staff from the MoF and 25 gender focal points from the Ministries and districts piloted the online course in 2016.

UNFPA provided financial and technical support for the evaluation of the mid-term strategy to implement the Law to Promote Gender Equality (2013-2016), and it was discussed at the National Seminar. The final report has been submitted to the Cabinet for discussion and approval. In addition, a working group to develop the new National Programme on Gender Equality (2017-2021) was formed and a comprehensive consultation process involving Ministries and agencies at the national and regional levels was supported.

The guidelines for the development of sectoral gender sub-programmes were submitted to the Cabinet for approval, which were then used by the MoH and MoF. In addition, three provincial gender sub-programmes (Bayankhongor, Gobi-Altai and Zavkhan) were developed and approved in 2016.

UNFPA helped prepare the 8th and 9th National Reports on the Implementation of Resolutions from the Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW), and supported the process of consultation meetings and the presentation of the reports in Geneva. A working group was established at the National Committee for Gender Equality (NCGE) to follow up on the recommendations from the CEDAW Committee.

Dignity First in the Face of Disaster

A total of USD 473,131 was mobilised from the United Nations Central Emergency Response Fund (CERF) to provide assistance to herders affected by the Dzud in 2016. Through CERF, UNFPA sought to preserve, protect and promote the dignity of women and girls affected by the disaster by providing assistance to 69 soum health centers in 6 aimags, reaching out to 1,333 women (943 pregnant and 390 postpartum women) and giving them access to life saving SRHR services during the harsh climate conditions. Dignity kits, which consist of necessary sanitary and health items, were provided to 7,962 women in 4,390 target households in six selected provinces of Mongolia. UNFPA partnered with the National Emergency Management Agency (NEMA), allowing for timely response to the disaster and paying particular attention to the spe-
UNFPA Mongolia 2016 · Annual Report

Women from herder families affected by the Dzud (extreme winter conditions) received UNFPA Dignity Kits containing articles of clothing, toiletries, and sanitary items to help them maintain hygiene and a sense of dignity in the wake of the disaster.

special needs of women and girls. UNFPA also supported the Office of the Deputy Prime Minister in organizing a national workshop to increase preparedness of communities and educational institutions for natural disasters, in order to ensure that such national efforts fully take account of meeting special needs of women and girls in emergencies.
IV. YOUTH

The Youth Development Programme aims to provide young people the opportunity to reach their full potential, specifically through the realisation of their SRHR, and through personal development enabled by their access to quality life skills education (LSE). UNFPA works with partners in government and NGOs to help develop a national youth policy, increase availability of LSE, promote youth empowerment, prevent GBV in educational environments, and ensure access to adolescent and youth-friendly health services, especially for those in underserved communities or those who are marginalised.

Towards Shaping a Comprehensive Youth Policy

In 2016, as a result of advocacy efforts by UNFPA, implementing partners and young people, a historic decision was made by the Government to create a dedicated youth agency, setting the foundation for the youth development system and sector in Mongolia.

Specifically, the first ever established government youth body, the Family, Children and Youth Development Agency was formed under the MoLSP. The Family, Children and Youth Development Agency is mandated to carry out specific government functions and services related to youth development, and plans to improve the legal and policy environment for youth, create youth development funds, ensure cross-sectoral coordination, train youth workers, set up a youth development information and management system, and promote youth studies.
Moreover, the 2016-2020 action platform adopted by the new government reflects key priority issues promoted by UNFPA, including LSE and health education (with an emphasis on reproductive health education), safe schools that prevent GBV, and the youth development law and national programme.

Promoting the meaningful participation of young people, particularly regarding decisions and policies that affect them, is an important means to ensure impactful policy making on youth development. UNFPA has partnered with the Center for Citizenship Education to build the capacity of youth-led CSOs and to implement youth-led advocacy initiatives that set the standards for meaningful youth participation firmly rooted in human rights principles. Specifically, with UNFPA support, youth-led advocacy and monitoring and evaluation (M&E) guides have been developed for Youth Development Centers (YDCs), youth CSOs, and youth-oriented service providers. These guides were followed up by capacity development workshops, relevant small grants for youth-led initiatives along with coaching, technical guidance and support for their implementation. Furthermore, advocacy events promoting youth participation in decision making, calling for increased investments in youth and improved legal and policy frameworks have been conducted on relevant international days. These events reached 101,550 young people and members of the public in 2016, which has more than tripled the 2015 figure.

The State Policy on Youth Development was finalised with the MoPDSP before the mid-year parliamentary elections. After the elections, the newly structured Ministry of Labour and Social Protection (MoLSP) made significant headway on the development and adoption of a youth development law, detailing the rights and responsibilities of young people, the duties and responsibilities of government agencies, and the key mechanisms for funding, coordinating and supporting youth development. Moreover, commitment and contributions for youth development has increased among sub-national authorities, as proven by the development and approval of youth policies and programmes with funding allocations. Specifically, provincial youth sub-pro-
grammes have been approved with total funding of MNT 115 million in Zavkhan, Umnugovi, and Orkhon aimags as well as the Khan-Uul district in Ulaanbaatar. Thus, in 2016, a holistic framework for youth development, including the draft law submitted to the parliament, draft state policy, and national programme on youth development, was advanced to ensure an environment conducive to youth development for the first time in Mongolia.

Key advocacy messages explaining the linkage between the Sustainable Development Goals (SDGs) and the youth agenda, supported by data and evidence, were effective and resulted in renewed commitment at both national and sub-national levels among newly appointed government officials.

**Ensuring SRHR Services for Mongolia’s Young People**

In collaboration with the MoH, UNFPA established two adolescent and youth-friendly clinics (AYFC) in Khanbogd and Zamiin-Uud soums of Umnugobi aimag in 2016. As a result, there are now 21 AYFCs established by UNFPA and partner agencies in the selected 11 aimags and 4 districts of Ulaanbaatar that are functional and providing adolescents and youth with STI services, counseling, management of general and specific health problems, referrals and peer education.

According to the data generated by the UNFPA supported routine information system on adolescent and youth friendly health services at NCMCH, a total of 32,143 youth used AYFC services in 2016. This marks a considerable achievement as it has reached beyond our original target of 24,000 youth in the year. Referral services from YDCs to AYFCs benefitted 545 young people.

Furthermore, UNFPA supported NCMCH and MoH to improve the skills of service providers by conducting a number of training workshops on topics including: management of common conditions and disorders in adolescent girls and boys, counseling skills, implementation of adolescent and youth friendly health services guidelines, job descriptions, and supportive supervision skills as well as the use of the CHANNEL programme for RH commodity supply. The training benefitted 150 service providers, including AYFC doctors, counselors and reproductive health coordinators, and logistics managers at the aimag and district hospitals.

The Y-Peer network was further strengthened with UNFPA support through a series of training workshops and campaigns conducted during the reporting period. Y-Peer training of trainers (ToT) was conducted in 8 aimags (Uvs, Khovd, Bayan-Ulgii, Govi-Altai, Dornogovi, Bayankhongor, Dornod, and Khanbogd soum of Umnugovi aimag) and 1 district (Bayanzurkh) of UB. As a result of the ToTs and the activities of Y-Peer network peer educators, 305 youth became peer educator trainers and 50 youth became peer educators. The expanded network has reached a total of 15,520 youth in 2016 with information on family planning and sexual and reproductive health.

The Public Health Institute (PHI) has been supported to develop and implement plans for systematic BCC interventions targeting young people on issues related to their SRHR, including STIs and GBV prevention. More specifically, PHI developed training modules on BCC, conducted training among public health professionals and service providers, school teachers, doctors and social workers, and developed, piloted and distributed various BCC materials for young people, with positive messages on family planning, RH, STI prevention and GBV prevention.
The project midterm evaluation (MTE) has been completed and the qualitative and quantitative data related to the youth, the project interventions, and its impact was gathered. The survey findings show, for instance, that 34.2% of youth aged 15-34 years correctly identified ways of preventing HIV. This represents an increase of 12.2 percentage points over the baseline level of 22% (2012), exceeding the target set for 2016.

**Life Skills Education**

In 2016, UNFPA contributed to the increased availability of LSE and strengthened the capacity of human resources to provide LSE to youth through continued close partnership with the Ministry of Education, Culture, Science and Sports (MoECSS), and its subsidiary agencies, the National Center for Lifelong Education, the Institute for Teachers’ Professional Development, and the State University of Education. The pilot of the previously established 32 LSE Halls (5 at general education schools, 11 at lifelong education centers, 12 at TVETs, and 4 at teacher training institutes) was continued. The LSE Halls showcase the enabling environment conducive to learning that can support the integration of LSE programmes into the curricula of educational institutions. During the reporting period, 20,612 young people participated in activities and training sessions organised through the LSE Halls. Teachers and methodologists from regional methodological centers for lifelong education and for TVETs benefitted from a training of trainers program, which strengthened the capacity to provide methodological guidance and monitoring of LSE programmes. Life skills facilitators’ manuals were re-printed and distributed nationwide, and the LSE manual for youth with disabilities was finalised, published and distributed to special needs schools and YDCs throughout the country.

16 UNFPA-supported YDCs have provided LSE training for young people, including for vulnerable youth who are not able to receive educational services elsewhere. During the reporting period, 6,324 youth participated in life skills training at YDCs. The YDP MTE shows that the satisfaction level for LSE among young people is consistent and very high, with approximately 9 out of 10 young people stating that they were satisfied with the LSE programmes.

In 2016, UNFPA contributed to the sustainability of YDCs through advocacy efforts targeting the Agency on Family, Children and Youth Development and its provincial and district level departments. Under the guidance of the Agency, all 16 YDCs created with UNFPA support, continued providing supportive services to adolescents and youth aged 15-34, particularly vulnerable youth. Specifically, YDCs promote youth development through LSE, support groups and interest club activities, facilitate productive leisure time, and assist facilitating youth-led initiatives and participation in decision-making processes. A five-day capacity development training was conducted for YDC staff, with topics including facilitation and development of support groups, strength-based approaches to community mobilisation, creating a shared vision, and results-based planning and reporting of youth development activities.

All youth development activities supported by UNFPA in 2016 were either gender-mainstreamed or gender and GBV prevention-specific. For instance, the LSE programmes introduced in general education schools, lifelong education centers, teacher training universities and YDCs include a module on GBV prevention, while gender equality-related concepts are mainstreamed throughout all other modules. All YDC staff were trained on the second phase of the SASA! approach for preventing violence against women, and on the concept of masculinity as a key transformative
element for societal change. Gender equality has also been mainstreamed into advocacy and public awareness raising messages. In 4 selected schools in Zavkhan, Umnugobi, Bayan-Ulgii and Chingeltei district in Ulaanbaatar where the “Safe school” initiative for GBV prevention in educational settings is being piloted, a total of 4,768 students, parents and teachers have been reached by awareness raising activities. The number of youth reached through GBV prevention activities (campaigns, events, forums) has quadrupled, from 38,454 in 2015 to 158,279 in 2016. A micro assessment exercise on the outcomes of the “Safe school” initiative has been carried out at the 4 targeted general schools in the project targeted areas (Bayan-Ulgii, Dalanzadgad soum of Umnugovi, Zavkhan and Chingeltei district).

The Project MTE findings showed that the percentage of youth with correct knowledge about GBV has increased by 9.2 percent compared to the baseline of 37.5%. Survey results show that 6 percent more women than men correctly identified GBV. Across age groups, young people aged 15-19 were 10% more likely to identify GBV correctly.
V. POPULATION DATA

The Population and Development Programme aims to ensure that accurate data on population, including population dynamics, youth SRHR and gender, are analysed and utilized for policy development. UNFPA provides support for the development and implementation of national policies, data collection, and the analysis and use of population data towards decision-making processes in government.

Providing Support for Policy in Population and Development

In 2016, UNFPA continued to provide financial and technical assistance to develop and finalise the State Population Policy. The policy was approved by Government in May 2016, providing a framework for all sectoral Ministries (i.e. health, social welfare, labor and education) to promote the SDGs and ICPD agenda. For the first time, an individual’s right to receive family planning information and services was explicitly mentioned, thus safeguarding the right of couples in sexual and reproductive health. Also, a monitoring framework for the State Population Policy was developed by the MoLSP.

Mid-term Population and Housing Census Conducted

UNFPA partnered with the National Statistical Office (NSO) to conduct the first-ever mid-term population and housing census, which provided a rich source of data for planning, budgeting and strategy development to address the socio-economic challenges currently facing Mongolia. For the first time, Mongolia used a registration-based statistical method which is the most cost-effective method of data collection and processing. This method also allowed for quality assurance of data collected through direct monitoring of information uploaded into the database.
VI. MANAGEMENT OUTPUTS

Harnessing Partnership Developments

A Memorandum of Understanding was signed with the Junior Chamber International (JCI) Progress to mobilise successful young business people to mentor and coach selected youth at YDCs and to support their entrepreneurship efforts. The initiative identified Bayangol, Khan-Uul, and Chingeltei districts of Ulaanbaatar, and Darkhan-Uul and Orkhon aimags in 2016 and 2017 as target areas, directly benefitting young people aged 15-34 years old.

Also, UNFPA formalised a new partnership with the Press Institute of Mongolia, the premier organization for journalists in the country which espouses professionalism and excellence in the industry. The partnership seeks to strengthen the capacity of journalists and members of the
media to accurately report, address and tell stories about GBV. Several capacity development trainings, media contests, and gender sensitive monitoring will be conducted as part of the new partnership.

UNFPA recognizes the immense potential for advancing the fight against GBV with the help of the private sector. In 2016, GurvanBileg LLC, a renowned trading and manufacturing Mongolian company specialising in women’s apparel and cosmetics, sought to make a generous donation of women’s underwear and clothing to victims of domestic violence through UNFPA. UNFPA has since worked with the company to help the victims of domestic violence serviced by the UNFPA-supported OSSCs and shelters countrywide.

The “Orange Sessions” are on its fourth year since conception, and in continued collaboration with Mongolia’s young musicians, live concerts have been organized to spread the message calling for an end to GBV. “Orange Sessions”, a signature event of UNFPA Mongolia, found its roots in support of the United Nations’ UNiTE to End Violence against Women campaign and in alignment with UNFPA’s mandate to mobilise public engagement towards ending GBV/DV. A notable achievement in 2016 was when the volunteer musicians for the “Orange Sessions” composed the original, catchy theme song entitled “Orange the World.” The talented youth volunteer musicians, also produced an artistic and dynamic video which reiterates the message that we must all work together to end GBV. The video was successfully launched during the worldwide “16 Days Campaign to End Violence Against Women”, made its debut on social media, and culminated in a week-long showing on the mega-screen in Sukhbaatar Square, at the very center of Mongolia’s capital, Ulaanbaatar. The song and video were submitted on behalf of Mongolia in the UNiTE to End Violence against Women song contest organized by UN Women Asia-Pacific.

Lastly, our private sector partner OyuTolgoi LLC, Mongolia’s largest mining company with whom UNFPA signed a landmark project agreement in 2015 to collaborate on the establishment of a Youth Development Center (YDC), an Adolescent and Youth-friendly Clinic (AYFC), a peer education network, and other youth development interventions in Khanbogd soum of Umnogobi province, continued with their support of the project. Approximately 1,600 youth benefitted from the access to LSE, training opportunities, counseling services, and positive peer interactions.
through the YDC. Also, 661 young people received the services offered by the newly-established AYFC.

**Resource Mobilisation**

The GBV project proposal to the SDC valued at USD 4.3 million was finalised and the contributions agreement was signed in 2016. The project was officially launched in October 2016 and will provide necessary support to the Mongolian Government to implement newly approved Revised Law to Combat Domestic Violence.

Despite economic difficulties and changes to local and global funding environments, UNFPA Mongolia has successfully mobilised additional funding to promote the UNFPA’s mandate and serve the country’s most vulnerable populations. A project proposal to support female herders affected by the Dzud was developed, and the country office mobilised USD 492,000 from the UN CERF. Using the UN CERF funding, UNFPA reached 11,702 women and girls from 6,243 herder families across 69 soums in 6 provinces over a 3 month period. In addition, UNFPA reached 1,333 pregnant and postpartum women through mobile health clinics in 69 soums across 6 aimags. 10.6% of pregnant women had signs of pregnancy-related complications and were brought to soum or provincial hospitals for treatment and safe delivery with a skilled birth attendant. In total, UNFPA reached 13,035 women, including pregnant and postpartum women, with its CERF intervention.

On occasion, beneficiaries from the herder families who received the Dignity Kits directly expressed appreciation for the assistance provided by CERF, through phone calls to UNFPA. Observations made during follow-up missions also confirmed that kits were complete and that all of them were of high quality, as confirmed by the women who received them.

An agreement was reached with the Government of Luxembourg for an exit phase project scheduled for February 17, 2019 to consolidate the results of the past telemedicine projects on maternal and child health and ensure its sustainability. Luxembourg assured an agreement to the exit phase for USD 1.8 million.
UNDAF AND CPD 6

In 2016, the United Nations Development Assistance Framework (UNDAF) 2017-2021 was signed with the Ministry of Foreign Affairs (MoFA) in September. UNFPA was an active participant in the UNDAF process, taking the lead in the group tasked with Outcome 3 on voice and accountability.

Also in the same year, the 6th UNFPA Country Programme Document (CPD6) was finalised and approved during the Executive Board session in September 2016. CPD6 is fully reflected in the UNDAF 2017-2021 and it is expected that joint UNDAF work plans will be developed. CPD6 will focus on youth SRHR, youth empowerment and participation, and GBV as priority areas of UNFPA’s support, primarily using policy and advocacy as modes of engagement.

Successful Completion of CPD5

The 5th Country Programme wrap-up meeting was held in December 2016 and it was concluded that the fifth CPD had contributed significantly to national development priorities in the area of SRH, youth development, and gender equality. In this programme, UNFPA supported the establishment of 16 YDCs, 21 AYFCs, 6 OSSCs and the nationwide telemedicine network for maternal and child health.

Through its 5th CPD, UNFPA provided extensive technical and financial assistance to the Government of Mongolia, making the policy and regulatory environment friendly and favorable for women and young people. The CPD5 also marked a successful transition from downstream to upstream support, as materialized at the MTR and CPAP revision process in 2014.

Operational Effectiveness and Efficiency

In 2016, more streamlined and speedy operations response was achieved. Two training workshops were organized for UNFPA’s Implementing Partners (IPs), which ensured higher compliance of IPs to UNFPA’s rules and regulations and increased their preparedness for annual project audit exercise as commissioned by UNFPA HQ.

The allocation of a contingency budget for emergency response to a shortage of contraceptives allowed UNFPA to provide support in a prompt manner. Within just four weeks, UNFPA was able to assess the situation, work with the MoH to formulate a strategy, and pull together USD100,000 from savings. UNFPA then mobilised the funding to replenish contraception supplies at critical service points that were reported to be suffering from a low inventory. The supplies distributed have been calculated to adequately cover Mongolia’s contraceptive needs for 8 months.

Finally, joint UN activities resulted in fewer processes and higher gains. UNFPA cooperated and coordinated with other UN agencies by consolidating processes, such as combined procurement efforts for supplies and services. This translated into a more efficiency in administrative work for all the agencies involved.
Speaking with One Voice

In 2016, the UNFPA Mongolia Staff retreat took place where team members participated in the UNFPA One Voice Action programme. The interactive team-building exercise was designed to empower each and every member of the staff to align with the UNFPA’s global efforts, apply it to the Mongolian context, and enable UNFPA as an organisation to speak with One Voice. The programme emphasised that whether an individual works in programming, operations, human resources or communications, everyone has a role to play in pursuing common priorities articulated in the UNFPA’s corporate Strategic Plan. Ultimately, the 2 day retreat was facilitated by the UNFPA Asia-Pacific Region Communications Advisor from Bangkok, who helped the Mongolia CO team align their actions with that of the global organisation at all levels and to speak clearly about the results.
## FINANCIAL OVERVIEW 2016

### SUMMARY OF RESOURCE ALLOCATIONS AND EXPENDITURES (USD)

<table>
<thead>
<tr>
<th>RESOURCES</th>
<th>BUDGET</th>
<th>EXPENDITURES</th>
<th>BALANCE</th>
<th>IMPLEMENTATION RATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regular Resources</td>
<td>1,159,063</td>
<td>1,157,050</td>
<td>2,013</td>
<td>100%</td>
</tr>
<tr>
<td>Other Resources</td>
<td>2,928,244</td>
<td>2,698,015</td>
<td>230,228</td>
<td>92%</td>
</tr>
<tr>
<td>Institutional Support Budget</td>
<td>460,938</td>
<td>449,424</td>
<td>11,514</td>
<td>98%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>4,548,245</strong></td>
<td><strong>4,304,489</strong></td>
<td><strong>243,755</strong></td>
<td><strong>95%</strong></td>
</tr>
</tbody>
</table>

### DEVELOPMENT PARTNERS (OTHER RESOURCES)

<table>
<thead>
<tr>
<th>DONOR</th>
<th>BUDGET</th>
<th>EXPENDITURES</th>
<th>BALANCE</th>
<th>IMPLEMENTATION RATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Swiss Agency for Development and Cooperation (Youth Development)</td>
<td>1,165,471</td>
<td>1,070,931</td>
<td>94,540</td>
<td>92%</td>
</tr>
<tr>
<td>Swiss Agency for Development and Cooperation (GBV)</td>
<td>216,547</td>
<td>129,355</td>
<td>87,192</td>
<td>60%</td>
</tr>
<tr>
<td>Government of Luxembourg (Telemedicine)</td>
<td>888,327</td>
<td>855,492</td>
<td>32,835</td>
<td>96%</td>
</tr>
<tr>
<td>Government of Luxembourg (STI)</td>
<td>168,809</td>
<td>166,605</td>
<td>2,204</td>
<td>99%</td>
</tr>
<tr>
<td>CERF</td>
<td>446,851</td>
<td>443,513</td>
<td>3,338</td>
<td>99%</td>
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<tr>
<td>Oyu Tolgoi LLC</td>
<td>41,693</td>
<td>31,648</td>
<td>10,044</td>
<td>76%</td>
</tr>
<tr>
<td>Local contribution raised</td>
<td>547</td>
<td>473</td>
<td>74</td>
<td>86%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>2,928,244</strong></td>
<td><strong>2,698,015</strong></td>
<td><strong>230,228</strong></td>
<td><strong>92%</strong></td>
</tr>
</tbody>
</table>
## EXPENDITURES, BY COMPONENTS

<table>
<thead>
<tr>
<th>Component</th>
<th>Regular Resources &amp; ISB</th>
<th>Other Resources</th>
<th>Total Expenses, BY COMPONENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender equality, GBV</td>
<td>278,617</td>
<td>573,340</td>
<td>851,957</td>
</tr>
<tr>
<td>Population &amp; Development</td>
<td>239,588</td>
<td>10,090</td>
<td>249,677</td>
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<tr>
<td>Youth</td>
<td>212,559</td>
<td>1,083,056</td>
<td>1,295,615</td>
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<tr>
<td>Sexual &amp; Reproductive Health</td>
<td>302,086</td>
<td>1,031,529</td>
<td>1,333,615</td>
</tr>
<tr>
<td>Programme Coordination Assistance</td>
<td>124,200</td>
<td>-</td>
<td>124,200</td>
</tr>
<tr>
<td>Institutional Support Budget</td>
<td>449,424</td>
<td></td>
<td>449,424</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>1,606,474</strong></td>
<td><strong>2,698,015</strong></td>
<td><strong>4,304,489</strong></td>
</tr>
</tbody>
</table>

### TOTAL EXPENSES, BY COMPONENTS

- **Institutional Support Budget** (10%)
- **Programme Coordination Assistance** (3%)
- **Sexual & Reproductive Health** (31%)
- **Gender Equality** (20%)
- **Population & Development** (6%)
- **Youth** (30%)