UNFPA China
Annual Report 2013
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Foreword

The year 2013 implied substantial activity in the lead-up to the global review of the Programme of Action of the International Conference on Population and Development (ICPD) planned to take place in 2014, twenty years after its inception in Cairo, 1994. In addition, the concurrent process of defining the post-2015 development agenda was taking place.

UNFPA also facilitated China’s participation in these global processes to measure progress towards achieving ICPD PoA set 20 years ago, including through hosting of the International Meeting on Monitoring and Implementation of the International Conference on Population and Development (ICPD) Beyond 2014 in Taicang.

On 15 November 2013, at the Third Plenary Session of the 18th Chinese Communist Party Central Committee, the Chinese Government announced its decision to allow couples to have two children if one of the parents is an only child. The policy adjustment represents a small but hopefully important step on the road towards realizing universal access to reproductive health and fully recognizing the reproductive rights of the Chinese people, as called for by the International Conference on Population and Development (ICPD) Programme of Action (PoA).

In 2013, UNFPA in China continued to support national capacity to promote linkages between changing population dynamics and development planning, thus facilitating informed and evidence-based population policies. UNFPA provided technical support to formulate sectoral responses to challenges and opportunities posed by rapid urbanization, migration and ageing, and to consider comprehensive policy options when faced with complex and interlinked changes in population dynamics.

Gender equality remains an important area of collaboration for UNFPA and its partners in China. To address the issue of skewed sex ratio at birth, UNFPA continued to support pilot interventions to challenge gender norms, and to support local officials in making more gender-sensitive decisions. In the fight against gender-based violence (GBV), UNFPA continued to play a lead role in supporting GBV related research, to inform policy interventions and support services for survivors of GBV. UNFPA remained a strong supporter of civil society’s role in preventing and addressing gender-based violence.

In 2013, UNFPA strengthened its support to promote China’s efforts in South-South cooperation and international exchanges in the area of population and development. UNFPA’s strong commitment was demonstrated by participation of Dr. Babatunde Osotimehin, the UNFPA Executive Director, in the Ministerial Forum on China-Africa Health Cooperation in August, and by participation of the UNFPA Deputy Executive Director, Kate Gilmore, in the International Inter-Ministerial Conference on South-South Cooperation for Population and Development in the post-ICPD and MDGs, organized by the Partners in the Population and Development (PPD) in October.

Against this backdrop, towards the end of 2013, UNFPA and its national partners in China took stock of the progress in implementing the UNFPA-China Seventh Country Programme (2011-2015). The joint efforts between UNFPA and national partners in China, including policy advocacy, piloting of targeted interventions and thematic campaigns, are setting a solid basis to strategically review our collaboration and set the course for the new programming cycle in China, well fitted within the evolving national and international contexts.

The year 2014 will mark the start of UNFPA’s new 4-year strategic plan (2014-2017). The new Strategic Plan will have four outcomes focusing on: A) sexual and reproductive health and rights, B) young people, C) gender equality; and D) population dynamics. This annual report has been structured according to these four outcomes set forth in the new strategic plan in presenting the key progress achieved in 2013.

I look forward to another year of successful collaboration with our partners in 2014, as we will join hands to advocate for the ICPD Beyond 2014 and post-2015 development agendas.

I wish to sincerely thank the Ministry of Commerce, our coordinating agency in China, for its strong and unrelenting support to UNFPA’s work in China. My heartfelt thanks go as well to all our national implementing partners, who make it possible to bring about positive changes on a wide range of population and development challenges in China. Finally, my thanks goes to the staff, consultants and interns that are working or have worked with UNFPA during 2013 for their support to the seventh cooperation programme (2011-2015) of China and UNFPA.

Mr. Arie Hoekman
UNFPA China Representative
Ensuring a sustainable future for all requires reliable population data to inform policy-making. Comprehensive and equitable development policies must take into account population trends and dynamics.

Strengthening integration of population dynamics in policy making

Ensuring a sustainable future for all requires reliable population data to inform policy-making. Comprehensive and equitable development policies must take into account population trends and dynamics.

Partners:
- National Development Reform Commission (NDRC)
- China National Committee on Ageing (CNCA)
- National Bureau of Statistics (NBS)
- China Centre for Urban Development (CCUD)
- China Population and Development Research Centre (CPDRC)
- State Council Development Research Centre (DRC)
- Institute of Population Research at Peking University
- Institute of Gerontology at Renmin University
- UNICEF
Making data available for development planning

Everyone counts and everyone should be counted. UNFPA continues to support one of its key national partners - National Bureau of Statistics (NBS) - and its sub-national branches to strengthen the capacity to generate and utilise disaggregated and reliable data to support national development planning. Improved availability of such data supports better monitoring and reporting on national attainments to the internationally agreed goals and frameworks, such as the International Conference on Population and Development (ICPD), Millennium Development Goals (MDGs) and the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW).

With support from UNFPA and UNICEF, the National Bureau of Statistics (NBS) organised an International Seminar on the 2010 Round of Censuses from 19-22 June 2013 in Hangzhou. More than 120 delegates from 14 countries gathered to discuss an in-depth analysis and utilisation of the census results. Special focus was given to the assessment of data quality, ageing, migration and urbanisation, fertility changes, health and mortality, family structures and social security programmes. The initiative was supported under the framework of the joint NBS/UNFPA/UNICEF data project, which focuses on strengthening national capacity in census taking and potential assistance to other countries.

In addition to promoting utilisation of existing census data, in 2013, UNFPA supported enhancement of NBS capacity in conducting on-line census. UNFPA China supported a study tour to Australia and New Zealand to learn about Online Census. The NBS officials and census technical experts learnt about the rationale, history, practices and experiences of the online census taking in both countries. The NBS will integrate the learning from this study visit in future census design and implementation, starting from piloting a small-scale online census in the near future.

UNFPA’s partnership with the National Reform and Development Commission (NDRC) on urbanisation commenced in 2009, aiming to extend the coverage of social services provision. In 2012, UNFPA supported a study in Zhengzhou City and the findings indicated that a well-developed registration system would help local government to improve urban planning and services provision. In 2013, the pilots and research work supported under this initiative began to yield concrete results. Five-year experiences from the urbanisation projects from cities of various sizes and development levels in China were included in the national urbanisation strategy paper prepared by NDRC. These cities were Zhengzhou City in Henan Province, Jinan District of Tianjin City, Yanta District of Xi’an City in Shaanxi Province and Changzhu City of Jiangsu Province, were included. In 2014, the paper will be presented to the key decision makers and stakeholders at national level.

While over half of the Chinese people live in urban areas now, not everyone in cities has access to essential social services. Access to those services depends on the person’s hukou, or household registry that would entitle the person to the rights to certain services that come with the place of registry, generally the place where the person is born. Many migrants have flocked to the cities but most still hold a rural hukou, leaving them without access to many of the social services that the urban hukou holders would be entitled to.

Using improved information on the registration of migrants as a basis for social services provisions

In the context of massive domestic migration, accurate data on migrants forms the basis for social services provision. In 2012, UNFPA supported a study in Zhengzhou City and the findings indicated that a well-developed registration system would help local government to improve urban planning and enable migrants to access social services on equal basis with local residents. In 2013, the Government of Zhengzhou established migrants information management system that links the centralised registration information of individual migrants with the provision of social services by different sectors. The registration information will enable migrants to access social security, family planning, education, health, housing, among other services. The comprehensive information system in place, the Zhengzhou Government began to issue new “residence cards” to registered migrants, which entitles them to access social services that were previously available only to the local residents with household registration in Zhengzhou. In addition to improved social services provision, the information system also serves as a tool for urban development planning.
Building stronger capacity to respond to ageing

UNFPA continues to support national capacity building in responding to ageing, and promote healthy and active ageing in China.

Monitoring the national 12th 5-year plan on ageing through a mid-term review

With support from UNFPA, a mid-term review was conducted to monitor the implementation of the national 12th five-year plan on ageing, using both quantitative and qualitative indicators. Heilongjiang, Tianjin, Fujian, Yunnan and Shaanxi provinces have also produced review reports at the provincial level. The report findings, which will be officially released in 2014, will guide the follow-up implementation of the national ageing plan and the formulation of the next Five-year plan on ageing.

Learning from other countries’ experiences on ageing

To foster mutual learning and experience sharing, in 2013, UNFPA supported a study tour of Chinese partners to Thailand to learn about its national response to rapid ageing. Through the meetings with Thai counterparts and field visits, the delegation, consisting of government officials and academics from the China National Committee on Ageing and the National Development and Reform Commission, learnt about Thailand’s experience in policy making on ageing, monitoring and evaluation system, community centers for the elderly as well as the database management. Following the study tour, the delegation identified a number of key areas that can be adopted and included into China’s response to ageing:

- Setting up a multi-pillar old-aged pension system;
- Optimizing medical resources at the grassroots level;
- Establishing a comprehensive database on aged population;
- Boosting grassroots organisations working for the elderly;
- Involving the third party in M&E of the implementation of the 12th 5-year plan on ageing.

UNFPA has been supporting the China Population and Development Research Center (CPDRC) to promote the application of a population projection software - Population Administration Decision Information System (PADIS-INT) - in development planning. Training on PADIS was conducted among local NHFPC (National Health and Family Planning Commission) officials, statisticians and researchers in Chongqing, Henan, Heilongjiang and Zhejiang. Population projections covering trends in total population size, fertility, mortality, migration and urbanisation will be published in 2014 and will be utilised widely in local planning. UNFPA also supported the technical review and deployment of PADIS-Int. at the international level.

Supporting academic research on China’s population and family planning policy

In 2013, UNFPA continued to support the academia to conduct research and further strengthen evidence for national population policy improvements, in response to the complex population dynamics such as rapid ageing and fertility decline below the replacement level. With UNFPA support, a research team from the Development Research Center (DRC) of the State Council undertook a study visit to learn about the evolving fertility policy in Thailand, which is seen as a successful demographic transition model of family planning. Based on the experiences learnt from Thailand and extensive literature review of both national and international studies, the research team submitted a policy paper to the State Council calling for a universal “two-child” policy for all Chinese couples. This was done prior to the Government’s announcement in November of further relaxation of the current fertility policy allowing eligible couples, with one parent being a single child, to have a second birth.
Expanding the availability and use of integrated sexual and reproductive health services

The gains in maternal health and other dimensions of sexual and reproductive health and rights during the past 20 years are among the great successes to celebrate since the ICPD.

- Fact sheet on Health, ICPD Beyond 2014 Global Review Report

China has made tremendous progress in sexual and reproductive health, especially in reducing maternal and neonatal deaths. Further policy improvements are needed in order to achieve universal access to sexual and reproductive health and rights, especially among more vulnerable and at risk groups, including migrants, ethnic minorities and young people. UNFPA works with national partners to make policy improvements to respond to persisting challenges and complex population dynamics. UNFPA programme supports specific interventions to increase the availability and use of integrated sexual and reproductive health services.

Partners:
- National Health and Family Planning Commission (NHFPC)
- National Centre for Women and Children’s Health (NCWCH)
- Red Cross Society of China (RCS)
- China Maternal and Child Health Association (CMCHA)
- China Population Development and Research Centre (CPDRC)
- China Railways Cooperation (CRC)
- China Family Planning Association (CFPA)
- National Centre for AIDS/STD Control and Prevention (NCAIDS)
- China Youth Network (CYN)
- China Red Cross Training Centre
- Center for Disease Control of Er’lian City
- Red Cross Society of Qinghe County
- Zamiin-Uud Red Cross
- Yunnan Reproductive Health Research and Development Centre (YRHRDC)
- UNFPA Mongolia Office

Young doctor and her clients in a township hospital in Gyamda in Tibet
By Chen Jianzhong
Evidence-based advocacy on population and family planning policy improvement

Building on the consensus reached at the high level policy seminar in May 2012, UNFPA has been working with the local governments and national partners in project provinces of Zhejiang, Shanghai, Chongqing, Guangdong, Heilongjiang and Jilin, to produce evidence and undertake advocacy for the current fertility policy improvement. Supported by UNFPA, the population situation analysis in Heihe prefecture of Heilongjiang province conducted in June 2013 shows that out of 27,000 households surveyed, 97% expressed their wish to have maximum two children, hence indicating that the policy relaxation option, then under government’s discussion, will not lead to excessive population growth, as feared by national authorities. The survey methodology was adopted by and applied to the entire Heilongjiang province, the results of which arrived to a similar conclusion.

UNFPA and the national experts engaged in policy discussions with the local officials on other related topics such as protection of human rights and expansion of services beyond family planning to other aspects of sexual and reproductive health. As a result of the advocacy with provincial officials, for instance, the informed choice of contraceptives is now fully adopted in the project-supported Yunfu prefecture and Jiangmen Prefecture of Guangdong province.

Strengthening the implementation of the national programme to prevent cervical and breast cancer and common gynecological diseases

Since 2009, the Ministry of Health started a screening programme among rural women for prevention of cervical and breast cancer. The programme was designed in such a way that women screened for cancer, were also examined for other common gynecological disorders. An international consultant was invited from the UK to review the effectiveness of the programme. Based on the discussions with national experts and recommendations provided by the consultant, the government agreed to review the current design of the programme in order to maximize its public health benefit, while efficiently using available resources.

In 2013, UNFPA also supported the following activities to strengthen the implementation of the programme for prevention of cervical and breast cancer:

- Completing the M&E tool of the national programme on screening of cervical and breast cancer;
- Developing a guide book on publicity, communication and community mobilisation to promote utilisation of preventive services;
- Introducing multi-sectoral cooperation approach in the project areas to enhance the utilisation of screening services for cervical and breast cancer;
- Conducting research on financing the screening services for cervical and breast cancer, including the possibility of increasing support from the New Rural Cooperative Medical System.

Moreover, UNFPA China supported a study visit by senior health policy makers to Sweden to learn about cervical cancer screening services management. The visit exposed the policy makers to the streamlined management of screening services. Their recommendations formed the proposal to set up a comprehensive national system for prevention and treatment of cervical cancer.

Advocating for recognition of midwifery in national health and education systems

In 2013, with support of UNFPA, the China Maternal and Child Healthcare Association conducted a review of the midwifery profession in China and followed the evolving status of midwives in the health system at different historical periods. In fact, as early as 1928, China had a law on midwifery and a formal midwifery education. The review also compares the international situation of midwife profession and midwifery education, presenting the international definition of midwives and their roles and functions. It points to the need for midwives in promoting natural delivery and enhancing women’s reproductive health in China. The review findings were disseminated at a policy roundtable meeting in November 2013, with the participation of relevant departments of the National Health and Family Planning Commission, the Ministry of Education, the Ministry of Human Resources and Social Security and the National Development and Reform Commission. The meeting agreed on key actions to be followed up to address this situation.
Improving maternal health among ethnic minorities in remote areas

No Women Should Die Giving Life.

According to 2010 National MCH Surveillance data, maternal mortality ratio (MMR) in western region was 2.5 times higher than that in eastern region. To reduce regional disparity in maternal health, UNFPA works with national partners to strengthen maternal health service networks at the grassroots level in remote ethnic minority areas.

Through pilot interventions in six counties in Yunnan, Guangxi and Tibet, the government implementing partners and UNFPA hope to develop a model that leads to improved access of ethnic women to maternal health care. At national level advocacy is also supported to explore alternative policy options in addition to promoting hospital delivery, which is still not a viable choice for many women living in extreme poverty in hard-to-reach remote ethnic regions.

In 2013, UNFPA also supported the following interventions and advocacy:

- Conducting mapping of maternal health needs and community resources: in project townships, 28 “maps” detailing names, locations and needs of every pregnant woman in every village;
- Organizing community support groups and regular meetings to mobilize support needed to assist hospital visits for ante-natal care (ANC) and delivery, such as vehicles or domestic help with farming or house work;
- Providing township and county maternal health hospitals with technical training on quality ANC and basic emergency obstetric care;
- Conducting training on assisted home delivery in places that face extreme difficulties to accessing hospital services due to poor road conditions and poverty;
- Advocating for considering assisted home delivery as an alternative measure, in addition to promoting hospital delivery.

Integrating reproductive health in national emergency response plans

In order to integrate reproductive health services and prevention of gender-based violence into emergency response during humanitarian situations in China, in 2013, together with National Health and Family Planning Commission (NHFPC) and the Red Cross Society of China, UNFPA continued to advocate for and support the implementation of the Minimum Initial Service Package for SRH in Crisis Situations (MISP) in emergency response settings.

UNFPA supported the National Center for Women & Children’s Health (NCWCH) and Health Emergency Response Office (HERO) of NHFPC to participate in a 5-day regional MISP training in Bangkok. Afterwards, NCWCH organized a national MISP ToT workshop in Beijing, with technical support from UNFPA. Following these two workshops, national partners organised cascade trainings with the national health and Red Cross sectors. Officials and service providers were sensitised on why and how to implement MISP in humanitarian situations.

To respond better to the needs of affected communities, including pregnant women, the elderly, and young people, a community-based training and simulation exercises are regarded as future priorities in implementing MISP.

In the meantime, both health and Red Cross sectors in China have been improving their respective contingency plans for Sexual and Reproductive Health Services in emergency settings. NCWCH is committed to including SRH contingency plans in national and provincial public health emergency preparedness systems. Red Cross Society in Guangxi and Hainan provinces have planned to include SRH services in provincial emergency preparedness plans.

As a result of national advocacy efforts, a few non-project Red Cross branches, such as Liaoning and Jilin provinces, have shown great interest in the MISP concept. Both provinces have considered, by learning from international and national experiences, integrating RH services provision into the respective provincial Red Cross emergency response plans to enhance the preparedness to respond to future disasters.
HIV prevention among key affected population groups

In recent years, China’s response to HIV has been significantly strengthened at all levels, from top-level leadership to grassroots interventions. However, despite impressive commitment and progress, major challenges remain. UNFPA focuses on reducing sexual transmission of HIV among vulnerable groups, including low income female sex workers, migrant workers and young people. With funding support from the Government of Luxembourg, UNFPA also supports cross-border HIV prevention among sex workers along with Sino-Mongolian border.

Reaching the hardest to reach: HIV prevention among low income sex workers

According to official data, sexual transmission of HIV has been on the rise in recent years. Together with NCAIDS, UNFPA has focused its HIV prevention efforts on project sites on low income sex workers, the group that is very hard to reach with HIV and STI information and services. Most of them engage in sex work due to poverty, therefore are less willing to pay for condoms, and are in a weaker position to negotiate with clients on condom use. Due to illegality of sex work in China, and low educational level of low income sex workers, there are very few community-based organizations that are engaged in HIV/STI prevention.

Intervention strategies employed in 2013:
- Peer education by trained sex workers to promote condom use and to disseminate HIV/STI prevention messages among low-income sex workers;
- Interventions targeting male clients by recruiting male peer educators to do outreach with condoms and HIV/STIs/RH prevention messages;
- Providing counseling and clinical reproductive health services to low income sex workers by health professionals in a non-discriminatory way, and including contraception and pregnancy related issues, STIs’ symptoms treatment in services offered;
- Community Neighborhood Committee (CNC) also plays a role in addressing HIV prevention services among low income sex workers coming to CNC for dealing with housing rental and temporary residential permit issues.
- Involving sex workers’ communities as a means to strengthen programmes and increase sex workers’ participation in programme design, implementation and evaluation, and uptake of services.

Cross-border HIV prevention in China-Mongolia border areas

With funding from the Luxembourg Government, UNFPA continues to support the cross-border HIV prevention project among Mongolian and Chinese female sex workers, long-distance truck drivers, traders and migrant workers. The project aims to establish an effective model of HIV prevention among key affected population in Sino-Mongolian border areas.

HIV prevention among migrant workers

As China urbanises rapidly, hundreds of millions of Chinese people are leaving the countryside to seek opportunities elsewhere. Some of them are recruited as construction workers along newly built and expanded railways. As other mobile population groups, migrant workers face certain health risks, including HIV and other STIs. The UNFPA-supported intervention is led by the China Railways Cooperation (former Ministry of Railways) to help protect the migrant workers from HIV and other sexually transmitted infections, while working and living along the railway construction sites.

In a small scale survey among migrant workers along railway construction sites, conducted by Shanghai Railway Bureau, only 18.5% of the interviewees reported that they would use condoms when having casual sex. Nearly half of them reported that they never used condom with casual sex partners. Only 49% have been found to have correct knowledge about HIV. These workers, mostly sexually active men below the age of 40, face significant sexual and reproductive health risks by practicing unsafe sex.

The project supported Zhengzhou, Chengdu, Wuhan and Kunming railway bureaus to pilot HIV prevention among migrant workers along railway construction sites, through tailored health education using peer education, outreach and promotion of condom use and VCT. If proven effective, the model will be scaled up across the railway systems in China.

HIV prevention among key affected population groups

Intervention strategies employed in 2013:
- Peer education among target groups.
- Peer education sessions through trained Mongolian and Chinese sex workers on HIV prevention and condom use have proven to be effective. The project also supported peer education targeting truck drivers, miners and traders on HIV/STI prevention messages.
- Health education on HIV/STI prevention through public awareness campaigns and outreach by local CDC and Red Cross staff to sex workers and mobile populations.
- Provision of clinical services on HIV/STIs and RTIs, including mobile VCT services.
To protect young people from increasing sexual and reproductive health risks that they face, UNFPA China promotes provision of tailored information and services, including through community-based youth centers, and hospital-based youth-friendly sexual and reproductive health services. In all its endeavors, UNFPA supports youth participation to enable young people to take charge of the issues affecting their lives.

Acting with and for youth towards full realization of young people's potential

Partners:
- China Family Planning Association (CFPA)
- National Health and Family Planning Commission of China (NHFPC)
- China Population and Development Research Center (CPDRC)
- The National Center for Women’s and Children’s Health (NCWCH)
- China Youth Network (CYN)
- Sohu.com (Sohu)
Forum held on adolescent pregnancy to launch the 2013 State of World Population (SWOP) Report in China

Following the global launch of the 2013 State of World Population Report “Motherhood in Childhood: Facing the Challenge of Adolescent Pregnancy” UNFPA China organised a national Forum on Adolescent Pregnancy to present the global report in China, discuss similar challenges faced by the Chinese young people and explore solutions. Experts, advocates and young people participated in the Forum.

Motherhood in childhood is a salient global problem, especially in developing countries, where every year, 7.3 million girls under the age of 18 give birth, according to the 2013 SWOP. The report offers a new perspective on adolescent pregnancy, looking not only at the girls’ behaviour as a cause of early pregnancy, but also at the actions, or lack of, of their families, communities and governments.

“Even though the majority of unmarried Chinese youth are open to having sex before marriage, only a very small portion of them—less than 5 per cent, are well informed about reproductive health. Less than 15 per cent had correct knowledge about preventing HIV infection…”

Ms. Zhang Lei, Population Research Institute of Beijing University

“We must know that informed choices of the right contraceptives do not harm young people, and there is no ‘harmless’ abortion as advertised by public and private health providers…”

Ms. Wu Shangcun, leading expert in reproductive health and contraceptives

“I see it is actually a process of empowerment when my friends and I get involved in volunteering as peer educators to disseminate sexual and reproductive health messages among our peers…”

Mr. Yu Yang, student from Renmin University and a member of the China Youth Network, youth-led group supported by CFPA and UNFPA China

“Comprehensive sexuality education will equip young people with necessary knowledge to protect them from unsafe sex. The lack of school-based comprehensive sexuality education attributes to the increasing risks of unwanted pregnancies among young people…”

Dr. Liu Wenli, Beijing Normal University, Researcher and practitioner of sexuality education

“I have seen girls coping with consequences of unwanted pregnancies around me when I was in middle school and university. Still there is a lack of sexuality education, and the taboo to talk about sex prevails in the society…”

Ms. Jiang Fangzhou, a celebrity young writer, Acting for Youth Advocate invited by UNFPA China

“Adolescents and young people stand at the center of the solutions. They can be active actors and drivers for change.”

Mr. Arie Hoekman, Representative, UNFPA China

As adolescent pregnancy issue was highlighted by the World Population Day and State of World Population Report in 2013, UNFPA China and Sohu.com, one of the largest Chinese portal website, initiated a joint web-based campaign – “Acting for Youth”. The campaign encouraged young people to voice their views, concerns and stories on sexual and reproductive health issues, including through a web-based mini-movie contest and other interactive elements. The campaign attracted a well-known writer, a young woman with 8 million followers on Weibo, who was invited to become its Youth Advocate. The campaign website (http://gongyi.sohu.com/s2013/foryouth/) attracted nearly 3 million viewers as of end December 2013.

The list of Winners of Acting for Youth Short Movie Contest

- Best Film: Acting for Youth
- Best Visual Effects: Long Time
- Best Creativity: Spring
- Best Acting: Zhu Yu
- Special Awards: My Life with AIDS
- Special Awards: Spring
- Special Awards: Secretary
- Special Awards: My Life with AIDS
- Special Awards: Secretary

View award-winning movies on UNFPA China website (www.unfpa.cn) or UNFPA China’s video channel on Youku: http://i.youku.com/unfpachina
Reaching out to young people through community-based health clubs

Through a joint collaboration with the China Family Planning Association, 12 community-based youth health clubs in three project counties were supported in 2013 to provide sexual and reproductive health information and education to young people, including young migrant workers.

In Changsha County of Hunan province, an integrated sexual and reproductive health support system was formed, covering 30,000 young people through various networks involving schools, households, communities, as well as service providers. Ten youth clubs were established in vocational schools, universities and communities, in order to provide sexual and reproductive health information to young people. At the community level, youth health clubs function as “youth-friendly spaces” for young people. Similar youth clubs were set up together with few private companies to provide reproductive health information to the young migrant workers.

Local young people, teachers and other stakeholders provided positive feedback to the establishment of youth clubs in improving SRH knowledge among young people. The local governments have become more supportive in expanding coverage of youth clubs in communities.

Supporting youth-friendly services in the health sector

In 2013, more than 100 service providers of maternal and child health hospitals and general hospitals in three pilot provinces received training on youth-friendly services (YFS), through a 3-day adolescent sexual and reproductive health training. In addition, 25 delegates participated in on-the-spot training at the MSI-supported ASRH clinic located in Qingdao of Shandong province, learning from an international experience on YFS provision.

In 2013, nearly 100 young people were trained as peer educators and approximately 9,000 young people received SRH information in project sites. Young people’s participation remains an important strategy for UNFPA’s work in China. In July 2013, the second national peer education training camp in Guiyang City was supported by UNFPA, together with CFPA and CYN. More than 50 young volunteers from colleges, communities and private companies participated in the workshop. During the five-day training programme, trainers from CYN and Y-PEER educators discussed about knowledge sharing on sexual and reproductive health, as well as skills required for effective peer education. The workshop also focused on the capacity building of volunteers in order to mobilise more young people to join the network of peer educators throughout China.

China Youth Network, a youth-led volunteer organisation, continues to play a significant role in engaging peers through social media, peer education sessions, and creative youth campaigns on health. In 2013, CYN further strengthened and expanded its partnership with different grassroots youth organisations and carried out a significant number of peer education and advocacy activities throughout the country. China Youth Network also actively participated in different international events and meetings and established close collaboration with international Y-PEER networks and YouthLead, exchanging experiences in advocacy on youth sexual and reproductive health.

Enhancing youth participation

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Promoting gender equality

The empowerment of women and gender equality remain unfulfilled, requiring further actions to ensure women’s leadership in public spheres, equality before the law and in practice for economic transactions, elimination of all forms of violence, and empowerment of women in exercising their sexual and reproductive health and rights.

---from ICPD Beyond 2014 Global Review Report

Women’s empowerment and gender equality are pivotal to creating the enabling conditions, in which half the global population can take advantage of life opportunities, expand their capabilities, and fully contribute to society.

In China, UNFPA works with the government partners, academia, civil society, media and other UN agencies to promote gender equality. In particular, UNFPA supports national partners to address two priority gender issues: sex ratio at birth (SRB) and gender-based violence (GBV).

Partners:
- All China Women’s Federation (ACWF)
- National Health and Family Planning Commission (NHFPC)
- National Centre for Women and Children’s Health, China CDC (NCWCH)
- China Population and Development Research Center (CPDRC)
- China White Ribbon Network (WRN)
- Anti-Domestic Violence Network of China (Beijing Fan Bao)
- UN Theme Group on Gender
- Partners for Prevention (P4P)
The revised village regulations in Zhoushan include changes to longstanding practices reinforcing son preference. This has benefited approximately 230,000 villagers directly and has far-reaching impact among the communities.

Changes led by the Changfeng County Government:

- Establishment of a project leading group, comprising of members from 21 sectoral departments, and headed by the Country Mayor.
- Issuance of Guidelines for the Project Implementation by all involved sectors, including detailed monitoring plan.
- Commitments to provide matching fund to support the project intervention, with RMB 500,000 allocated in 2013.
- Revised rules and regulations in 45 villages and communities.
- Issuance of a new policy on the mandatory appointment of a full-time designated chairperson of all township women’s federations at the level of a Deputy Section Chief.
- Adoption of a number of gender-sensitive measures to address traditional gender norms, such as increasing numbers of stalls or seats in public toilets for women, indicating more gender equitable decisions related to resources distribution, etc.

Changfeng’s progress made it stand out as a “good practice” county and a learning site for others, with its experiences documented and reported extensively by national and local media, including CCTV and China Women’s Daily. At a national SRB training for counties with highly skewed SRB, organized by NHFPC, Changfeng’s experiences were introduced, indicating a potential of scaling up.

Common features of the revised village rules:

- Inclusion of provisions promoting diversified old-age care, supporting reform of the traditional partrilocal marriage and settlement pattern;
- Introducing changes to conventions for naming children—allowing children to be named after either mothers or fathers;
- Encouraging men to share household chores;
- Promoting equal economic entitlements for divorced or widowed women, who were previously deprived of such entitlements by traditional village rules;
- Promoting women’s participation in village affairs by agreeing a minimum proportion of women in village committee.

Promoting gender equality

Gender-based Violence

An estimated one in three women worldwide report they have experienced physical and/or sexual abuse, mostly at the hands of an intimate partner, making this form of violence against women and girls one of the most prevalent forms of human rights violations worldwide.

---From Factsheet on Dignity and Human Rights on ICPD Beyond 2014 Global Review Report

To address GBV issues in China (focusing on violence against women and girls), UNFPA supports intervention programmes, data collection and research, and awareness campaigns, through partnership with national and local governments, civil society, media and other UN agencies in China.

Promoting multi-sectoral response model to violence against women and girls

With support from UNFPA, ACWF and NHFPC, worked together to strengthen multi-sectoral responses in Luiyang of Hunan Province and Chengde of Hebei Province to address violence against women and girls (VAWG). A series of trainings were arranged to enhance various service providers' capacity to respond to violence, including hotline operators, policemen and health providers, to enable them to provide appropriate interventions and support to women who have experienced violence. The partners also prepared a plan to develop a database that will serve the needs of different sectors in the referral system in 2013. Once pre-tested and finalised in 2014, the database will greatly improve the system of data sharing and case management in project sites.

To fight against GBV, UNFPA seeks reliable data in order to gain deeper understanding of underlying causes and drivers of violence.

In 2013, UNFPA and partners in China launched the results of the first quantitative and qualitative studies in China, which looked at GBV from the perspective of masculinity and its association with violence. The research studies are part of a regional study—the UN Multi-country Study on Men and Violence - conducted in seven countries in Asia Pacific, with support by the Partners for Prevention (P4P), a joint UN regional programme on gender-based violence in Contemporary China.

In 2013, UNFPA China focused more on engaging civil society to promote male involvement in the efforts to address GBV: UNFPA supported Dr. Fang Gang, a member of the Secretary-General’s Network of Men Leaders, to establish the China White Ribbon Volunteers Network in early 2013 with the aims to engage more Chinese men and boys to fight against GBV.

Since its establishment, China White Ribbon Volunteers Network has mobilised support from different sectors to work as volunteers and provide hotline counselling services (Hotline number: 4000 110 391) to those who experienced violence, who perpetrated violence and those who are inclined to commit acts of violence. Through working with media, China White Ribbon Volunteers Network campaigned to raise awareness on gender-based violence and what men can do to prevent and respond to it.

At its first annual meeting held before the International EVAW Day, China White Ribbon Volunteers Network announced that a well-known movie stars couple, Mr. Feng Yuanzheng and Ms. Liang Danni, have accepted its invitation to act as spokespersons for the China White Ribbon Network.

Building evidence to understand the root causes of GBV

Partnering with civil society to promote male involvement to end GBV

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South - South cooperation and international exchanges

UNFPA China attaches great importance to promoting China's stronger role in South-South cooperation and international exchanges, in particular in the areas of reproductive health, population and development and gender equality. During his mission to China in August 2013, UNFPA Executive Director, Dr. Babatunde Osotimehin met with His Excellency Gao Hucheng, Minister of the Ministry of Commerce and discussed how to deepen South-South cooperation with China.

Continued high level support to China- Africa Health Collaboration

On the occasion of the 50th Anniversary of the China Medical Teams sent to Africa, the first Ministerial Forum on China-Africa Health Development was launched in Beijing on 16 August. UNFPA Executive Director, Dr. Babatunde Osotimehin, was invited by the Government of China to attend this milestone event in the China-Africa health cooperation. Participants from 48 African countries and eight international organisations, including WHO, UNAIDS and UNFPA, attended the Forum. The Forum identified priority areas in the China-Africa Health Development, referred to international agreements related to reproductive health among its guiding strategies and interventions.

Chinese government to ensure that more Chinese suppliers, especially suppliers of contraceptives and life-saving medicines, meet international technical requirements so that high quality and affordable life-saving commodities can be made available to more people in need. He pledged UNFPA's support in helping Chinese manufacturers to comply with international standards.

The Beijing Declaration, the outcome document of the Ministerial Forum of the China-Africa Health Development, refers to international agreements related to reproductive health among its guiding strategies and interventions.

Advocacy support on ICPD Beyond 2014

UNFPA has been supporting the China-Africa health cooperation since 2012, when the Government of China requested relevant UN agencies to play an advisory role in the respective health areas. As the leading agency for the reproductive health task force, UNFPA China has proactively supported the Government of China to identify priority areas for potential collaboration, including through close consultation with UNFPA offices in Africa.

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UNFPA's key recommendations on reproductive health, including reproductive health commodities, were reflected in the Fourth International Roundtable on China-Africa Health Cooperation held in Botswana in May 2013.

Supporting South- South and Triangular cooperation in promoting ICPD PoA and MDGs

The Partners in Population and Development (PPD) and the National Health and Family Planning Commission of China (NHFPC) jointly organised an International Inter-Ministerial Conference on “South-South Cooperation for Population and development in the post ICPD and MDGs” in Beijing from 22-23 October 2013. The conference was held to emphasise the criticality of the population and development issues and challenges in the context of the Post-2015 development agenda setting. In her opening statement, Ms. Kate Gilmore, Deputy Executive Director of UNFPA, reiterated UNFPA's commitments to advance South-South cooperation with emphasis on the sexual and reproductive health and reproductive rights of women, youth and adolescents in pursuit of sustainable development.

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Management highlights

Ensuring financial accountability and results-based programme delivery

UNFPA attaches great importance to accountability. Annual training on the financial and programme management as well as operational issues was provided to the Implementing Partners (IPs). In addition, UNFPA applies a vigorous mechanism to ensure financial accountability, including bi-annual National Coordination Committee meetings, bilateral meetings with partners on a quarterly basis, regular spot checks and monthly financial accountability checklists.

As a result of committed efforts to ensure sound programme and financial management, all national Implementing Partners (IPs) received “unqualified” audit opinions during the audit of projects executed by them. The audit was conducted by an international audit firm in March 2013. This annual audit confirmed once again that UNFPA resources have been managed in accordance with relevant financial regulations and rules and in line with International Public Sector Accounting Standards (IPSAS).

Enhancing communication capability

At the end of 2013, UNFPA China launched its official bilingual website (www.unfpa.cn). It is a comprehensive platform to learn about UNFPA and its national partners in China, and on-going programme efforts to jointly respond to the complex population dynamics. The website contains updates of key events and messages on priority issues at national, regional and global levels. Numerous resources can be accessed in various formats to support policy analysis and strategy development.

To strengthen programme reporting and external communications, UNFPA China staff received basic training to better document field missions and events.

Financial Overview

CP7 Financial Overview

CP7 provides assistance in two major function areas: Reproductive Health/Family Planning (RH) including HIV/AIDS and Population and Development strategies (PD) including Ageing, Urbanization and Gender. A total programme budget of $22 million will be made available over 5 years (2011-2015), among which $2 million is expected to come from co-financing resources.

Apart from the total programme budget, the Institutional Budget (IB) is another resource factor which comprises of development effectiveness, UN development coordination and management costs including security, human resources and other operations costs.
Management monitors budget and expense positions as key indicators to assess the country office's ability to conduct its operations. In 2013, the total fund allocation was US$5.52 million and the total expense was US$5.24 million. The implementation rate was kept high across the different funding sources. Unqualified audit opinion given by independent auditors for prior three consecutive years proves sound financial management under national execution.

Table 2 and Table 3 below show the total yearly programme budgets and expenses under regular funding and co-financing respectively. The allocations in 2011 were lower than average given that the Country Programme was approved late in that year. High implementation rates over the period 2011-2013 have been achieved.

Table 2 CP7 Annual Regular Budget and Expense Report for 2011-2015

<table>
<thead>
<tr>
<th>Project Year</th>
<th>Ceiling (A)</th>
<th>Project Budget (B)</th>
<th>Budget Utilization (C)</th>
<th>Project Budget Remaining (D)</th>
<th>Implementation Rate (C/A)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011</td>
<td>2,500,000</td>
<td>2,500,049</td>
<td>2,383,109</td>
<td>116,940</td>
<td>95%</td>
</tr>
<tr>
<td>2012</td>
<td>4,795,921</td>
<td>4,615,442</td>
<td>4,541,120</td>
<td>74,322</td>
<td>95%</td>
</tr>
<tr>
<td>2013</td>
<td>4,260,981</td>
<td>4,061,723</td>
<td>3,987,006</td>
<td>74,717</td>
<td>94%</td>
</tr>
</tbody>
</table>

(2014 (Projected))

<table>
<thead>
<tr>
<th>Project Year</th>
<th>Project Budget</th>
<th>Expense</th>
<th>Project Budget Remaining</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011</td>
<td>4,300,000</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>2015 (Projected)</td>
<td>4,300,000</td>
<td>–</td>
<td>–</td>
</tr>
</tbody>
</table>

Total: 20,156,902 11,177,214 10,911,235 265,979

Table 3 CP7 Annual Co-financing Budget and Expense Report for 2011-2015

<table>
<thead>
<tr>
<th>Project Year</th>
<th>Project Budget</th>
<th>Expense</th>
<th>Project Budget Remaining</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011</td>
<td>662,347</td>
<td>583,461</td>
<td>78,886</td>
</tr>
<tr>
<td>2012</td>
<td>420,076</td>
<td>351,152</td>
<td>68,920</td>
</tr>
<tr>
<td>2013</td>
<td>222,135</td>
<td>220,466</td>
<td>1,669</td>
</tr>
</tbody>
</table>

(2014 (Projected))

<table>
<thead>
<tr>
<th>Project Year</th>
<th>Project Budget</th>
<th>Expense</th>
<th>Project Budget Remaining</th>
</tr>
</thead>
<tbody>
<tr>
<td>2014 (Projected)</td>
<td>184,480</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>2015 (Projected)</td>
<td>140,000</td>
<td>–</td>
<td>–</td>
</tr>
</tbody>
</table>

Total: 1,629,039 1,155,079 149,481

Table 4 Summary of Resources Allocations and Expenses 2013

<table>
<thead>
<tr>
<th></th>
<th>Ceiling</th>
<th>Expense</th>
<th>Balance</th>
<th>Spent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regular Resources</td>
<td>4,260,981</td>
<td>3,987,006</td>
<td>273,976</td>
<td>94%</td>
</tr>
<tr>
<td>Co-Financing</td>
<td>222,135</td>
<td>220,466</td>
<td>1,669</td>
<td>99%</td>
</tr>
<tr>
<td>Institutional Budget</td>
<td>1,038,721</td>
<td>1,034,531</td>
<td>4,190</td>
<td>100%</td>
</tr>
<tr>
<td>Total</td>
<td>5,521,837</td>
<td>5,242,003</td>
<td>279,834</td>
<td>95%</td>
</tr>
</tbody>
</table>

Financial Assistance under Regular Resources by Program Area

Under the new Global Strategic Plan of UNFPA 2014-2017, four outcome areas have been identified: RH, PD, Gender and Youth. Analysing the financial resources flow according to these areas, excluding programme coordination costs, the RH component has by far the highest level of budget and expenses. The PD makes up one fourth of the total programme resources, while Gender and Youth take 12% and 8% respectively.
Co-Financing Resources

For CP7, US$ 2 million was planned to come through co-financing modalities. By 2013, with the support of a cross-border programme with Mongolia, financed by the Luxembourg and regional support funds from UNAIDS, the Country Office has thus far been able to mobilise approximately US$1.44 million, 72% of the total target. In 2013, a total of US$ 222,135 were allocated from co-financing resources, most of which were spent mainly on HIV/STI prevention among key affected populations.

The Government Voluntary Contribution

The Chinese Government’s annual contribution in 2013 to UNFPA was US$1.27 million which went to the UNFPA Global Resources. This includes two portions: core contribution to UNFPA Global and support to the operations of the UNFPA China Office. In addition to the annual contribution, the Government hosted and covered all local costs of the International Meeting on Monitoring and Implementation of the International Conference on Population and Development (ICPD) Beyond 2014, which was held in November 2013 in Taicang, Jiangsu Province.

Financial Overview

Regular Resources Allocation/Expense by Programme Areas 2013

Currency: US$
UNFPA, the United Nations Population Fund, works to deliver a world where
every pregnancy is wanted,
every childbirth is safe and
every young person’s potential is fulfilled.

UNFPA-Because everyone counts.