

**UNFPA Inputs to the Report of the Secretary General on “Follow-up to and implementation of the SIDS Accelerated Modalities of Action (S.A.M.O.A.) Pathway and the Mauritius Strategy for the Further Implementation of the Programme of Action for the Sustainable DEvelopment of Small Island Developing States (SIDS)**

UNFPA has been asked to submit contributions to the SG report on SIDS through a questionnaire sent by the UN Secretariat (OHRLLS) and in response to UNGA resolution A/RES/76/203.

The report has three parts: Part A dedicated to vulnerability reduction in SIDS; Part B on assessing the implementation of the Samoa Pathway through a quantitative trend analysis of issue areas (outlined in detail in attachment A); and Part C which address qualitative trend analysis such as progress related to the development of national policies (outlined in detail in attachment B). The issue areas were based on linkages between the S.A.M.O.A Pathway, the 2030 Agenda, the Sendai Framework for Disaster Reduction and other relevant development frameworks. Therefore, UNFPA reported on areas related to its mandate for which there is data available.

The Secretariat, in addition to the questionnaire, sent two matrices where additional information and data can be provided in relation to the issue areas.

**QUESTIONNAIRE**

**Implementation of the SAMOA Pathway and the MSI of the BPOA for the Sustainable Development of SIDS**

Please note that **strict word limits** have been established for each question. The Secretariat is unable to consider any information beyond these established word limits. In this regard, you are requested to report only on new or updated information. Information conveyed in previous surveys will not be considered. Previous surveys can be accessed at <https://sidsnetwork.org/> and <https://sdgs.un.org/topics/small-island-developing-states> under reports.

**PART A  
VULNERABILITY REDUCTION IN SIDS**

**1. Enhanced Support for a Resilient Post-COVID-19 Recovery in SIDS**

Vulnerability is one of the most crucial challenges faced by SIDS. Briefly elaborate on any ex-ante interventions or proactive/preventive strategies that have been or are being implemented at national and/or sub-regional levels that aim specifically at reducing exposure to external shocks and improving resilience in SIDS. Please include information on any financial resources expended in this regard, if available (**750 words**).

***Suggested UNFPA contribution to Part A, Part 1:***

UNFPA serves small island developing states in the Caribbean, Pacific and Atlantic, Indian Ocean and South China Sea regions through sub-regional offices and regional offices (particularly the Atlantic, Indian Ocean and South China Sea (AIS) region). UNFPA implements country and sub-regional multi-country

programmes in order to support the development priorities of SIDS as they relate to the implementation of the International Conference on Population and Development (ICPD) Programme of Action (PoA) with emphasis on population data, health, including reproductive health, empowerment of young people, women and girls, gender equality and humanitarian response, . The Pacific sub-regional programme covers fourteen countries. The Caribbean sub-regional programme addresses the development needs of twenty-one countries. In the AIS region, there are individual country programmes. In addition to regional institutional partners such as the Pacific Community (SPC), Organisation of Eastern Caribbean States (OECS) Commission, the Caribbean Community (CARICOM), the African Union and Regional Economic Communities, UNFPA has collaborated with private sector and civil society partners at the national and regional levels.

### **Country and Regional examples**

#### **The Caribbean region (English and Dutch-speaking countries)**

UNFPA established and conducted emergency preparedness processes and activities to help mitigate risks in the event of a crisis, including slow-onset crises. UNFPA's interventions also address human mobility issues including those related to migrants, refugees and internally displaced peoples (IDPs). UNFPA also contributed to the regional humanitarian coordination mechanisms which include the United Nations Sub-Regional Team (UNST), Eastern Caribbean Partners Development Group, and CDEMA, and also in the Caribbean Sub Regional Coordination Platform, for the [Inter-Agency Coordination Platform for Venezuelan Refugees and Migrants](#) (R4V) platform, in response to movement of Venezuelan refugees and migrants in four Caribbean countries (***Guyana, Trinidad & Tobago, Aruba and Curacao***). Relatedly, UNFPA continued to lead the Sub Regional gender-based violence (GBV) Sub Sector under the R4V Platform, as well as, the national GBV Working Group under the Platform in Guyana. In that regard, a key deliverable, the Rapid Assessment Tools for assessing GBV and sexual and reproductive health (SRH) risks and needs during emergencies will be considered by relevant partners in 2022. UNFPA invested significantly in Minimum Initial Service Package (MISP) for SRH in Crisis Situations training in various countries in the region.

#### **Atlantic, Indian Ocean and South China Sea region**

##### **Response to and recovery from the novel coronavirus-19 (COVID-19)**

In ***Cabo Verde***, UNFPA continues to provide support related to the region's development challenges including the response to and recovery from the novel coronavirus-19 (COVID-19) and ongoing drought. UNFPA, in the context of the United Nations Country Team, supported the COVID-19 Vaccines Global Access (COVAX) global initiative through the roll out of the National Vaccination Plan under the leadership of the Government, and in collaboration with WHO, World Bank, and other development partners. UNFPA also supported the integration of the COVID-19 vaccination Monitoring and Evaluation system into the Sanitary Information System (SIS) and District Health Information Software (DHIS). Further, UNFPA and the UNCT will continue to support the government to implement its Communications and Vaccination Plan against COVID-19 (2021-2023). The Plan is focused on mitigating the impact of the pandemic on mental health.

In ***São Tomé and Príncipe***, UNFPA supported the UNCT initiative, the Socioeconomic Impact Assessment (SEIA) and Socioeconomic Response Plan (SERP) to COVID-19, to respond to the identified needs through the establishment of a responsive and scalable social protection system.

In ***Mauritius and Seychelles***, UNFPA contributed to the Socio-Economic Response Plan to Covid-19 which strengthened the identification of vulnerable population groups for inclusion into social protection services. The inclusion of women and youth in sustainable livelihood options was also supported through

the plan in order to build back better from the pandemic.

In *Madagascar*, a joint programme in collaboration with the World Bank on social protection for a total amount USD 114 million has been developed. The components of the programme include assessing the political implications for social protection; improving access to potable water, sanitation and hygiene and the prevention and response to gender-based violence.

### **The Pacific region**

In the Pacific region, UNFPA also focused on the response and recovery from the COVID-19 pandemic by developing a reprogramming template and held consultations with the **8 programme countries (Federated States of Micronesia, Fiji, Kiribati, Marshall Islands, Samoa, Solomon Islands, Tonga, Vanuatu)** to review their budgets for programming interventions in order to making required adaptations to address COVID-19 national responses strategies in the areas of tele-health, reproductive health kits for women and girls and in supporting the capacity needs for maternal health, family planning and adolescent health and access to reproductive health commodities and supporting outreach in rural health facilities to reach the most vulnerable.

Total 758 words

## **2. Enhanced and Tailored Development Cooperation for SIDS**

The COVID-19 pandemic has demonstrated the urgent need to ensure that responses to vulnerability must be at the heart of international policy aimed at supporting SIDS, and that better tailored development cooperation approaches, calibrated to the specific needs, capacity constraints, and economic challenges facing SIDS, are necessary. Briefly elaborate on any planned or ongoing strategies/approaches to improve and deliver on more tailored development support to SIDS. Please include indications of resource allocations, if available **(750 words)**

### ***Suggested UNFPA contribution to Part A, Part 2:***

The UNFPA Strategic Plan 2022-2025 focuses on critical pathways and the strategies necessary to accelerate the achievement of three transformative results: (a) ending the unmet need for family planning; (b) ending preventable maternal deaths; and (c) ending gender-based violence and harmful practices, including female genital mutilation and child, early and forced marriage. UNFPA's interventions are guided by actions that realise the Sustainable Development Goals and relevant evidence from the respective countries.

### **Regional examples (reporting period 2021-2022)**

#### **The Caribbean region**

UNFPA directly contributes to:

- equitable access and utilisation of universal, quality and shock-responsive, social protection, education, health and care services through
  - the support provided to government entities and regional institutions enables integrating sexual and reproductive health and reproductive rights (RR) into laws, policies and plans.
  - technical support to reproductive health commodity security interventions with particular attention to strengthening supply chain management systems including logistics management information systems.
- strengthening the capacity of national governments and regional institutions to collect, analyse and utilise data and information to address structural inequalities. UNFPA will continue its

partnership with the University of the West Indies to examine and promote a culture of population data appreciation in the English and Dutch-speaking Caribbean with a particular focus on fertility.

- UNFPA will particularly build on progress made through the Spotlight Initiative regional and five national programmes in which UNFPA leads on prevention of GBV and on access to services.

### **The Atlantic, Indian Ocean and South China Sea region**

UNFPA also supports joint efforts to foster exchange with respect to developing the Multidimensional Vulnerability Index (MVI) for SIDS among **Cabo Verde, Barbados and Samoa**. The United Nations Resident Coordinator's Office spear heads this partnership with the UN Department of Economic and Social Affairs (UNDESA), UN Office of the High Representative for the Least Developed Countries, Landlocked Developing Countries and SIDS (UN-OHRLLS), Professor Jeffrey Sachs and the UN Sustainable Development Solutions Network.

Further, UNFPA supported the provision of PPE for service providers, in **São Tomé and Príncipe**, to assure the continuity of reproductive health-care services including emergency obstetric and new-born care (EmONC) during the pandemic; set up the hands wash points at the entry of key health units and supported awareness campaigns among young people in and out of school. Three mobile clinics were mobilised to support the vaccination against COVID-19. Around USD480,000 USD was mobilised from the regular resources and South-South Cooperation for procurement of PPE.

In **Madagascar**, UNFPA supports the United Nations Sustainable Development Cooperation Framework (UNSCDF) 2021-2023; the Humanitarian Contingency Plan and the Social Protection Plan are being implemented. The plan addresses concrete investments related to access to integrated SRH and RR, family planning and GBV have been integrated in these strategic documents.

In **Comoros**, the National Policy on equity and gender and the 2020-2030 National strategy against GBV have been developed with support from UNFPA and will signal the operationalisation of actions related to GBV in the national development plan Comoros Emergence Plan (PCE) 2020-2030.

### **The Pacific region**

The COVID-19 pandemic gave rise to the need to increase expenditure towards programming in SIDS. The overall expenditure for technical assistance from the Department of Foreign Affairs and Trade (DFAT) of Australia increased between 2020 and 2021, from US \$4,378,660 to US \$5,573,308. As a result, UNFPA's programming support increased by 27% for the financial year 2021. In this regard, critical results were realised through the UNFPA Supplies programme and the DFAT Transformative Agenda Programme such as a marked increase in contraceptives procured in the region, from 38,000 couple-years-of-protection (CYP) in 2018 to 161,000CYP in 2021 was realised; and improved availability of logistic and supply chain data using the Tupaia platform into which the UNFPA Reproductive Health (RH) module is integrated to display real time data on RH commodity availability.

In order to ensure that the essential SRH and RR needs of women and young people are met during humanitarian situations, UNFPA partnered with National Disaster Officers in the region and development partners including DFAT, Ministry of Foreign Affairs and Trade of New Zealand (MFAT) and the United States Agency for International Development (USAID) in order to integrate disaster resilience, GBV in Emergencies and SRH strategies into the respective national disaster action plans to enable building local resilience and development of mechanisms for timely sub-national and community responses to disasters including health disasters such as disease outbreaks and pandemics. These partnerships

further buttressed the implementation of the integrated strategies during the recent tropical cyclone season and the COVID-19 pandemic.

**PART B**  
**QUANTIFYING IMPLEMENTATION OF THE SAMOA PATHWAY:**  
**TRENDS ANALYSIS OF ISSUE AREAS**

In accordance with General Assembly resolution 74/217, a monitoring and evaluation framework has been developed for the implementation of the SAMOA Pathway. The framework is fully aligned with the Sustainable Development Goals (SDGs), the Sendai Framework, the Paris Agreement, and the Addis Ababa Action Agenda. The Framework is available at **Attachment A** to this questionnaire.

The objective of the Framework is to quantify the progress made in each of the SIDS regions on implementation of the SAMOA Pathway, in the lead up to the preparations for the 4th international conference on SIDS, scheduled for 2024.

Using the data available in the Global SDG Data Portal (<https://unstats.un.org/sdgs/dataportal>) and, where appropriate, from the UN regional commissions, Member States, custodian agencies and other relevant stakeholders are kindly requested to provide a Thematic Area by Thematic Area status update on the implementation of the SAMOA Pathway, following the monitoring and evaluation Framework referenced above (Attachment A).

***Suggested UNFPA contribution to Part B:***

UNFPA's Strategic Plan 2022-2025 is aligned to the ICPD PoA and directly contributes to the **achievement of all 17 Sustainable Development Goals in SIDS, but directly contributes to the Goal 1** (end poverty in all its forms everywhere); **Goal 3** (ensure healthy lives and promote well-being for all at all ages); **Goal 5** (achieve gender equality and empower all women and girls); **Goal 10** (reduce inequality within and among countries); **Goal 13** (take urgent action to combat climate change and its impacts); **Goal 16** (promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels); **Goal 17** (strengthen the means of implementation and revitalise the Global Partnership for Sustainable Development). The Strategic Plan also addresses the implementation of **paragraphs 125-133** (Data, monitoring and follow-up) of the **Addis Ababa Action Agenda**; and **paragraph 30(j) of the Sendai Framework for Disaster Risk Reduction**.

Given the objective of accelerating the achievement of three transformative results: (a) ending the unmet need for family planning; (b) ending preventable maternal deaths; and (c) ending gender-based violence and harmful practices, including female genital mutilation and child, early and forced marriage; the transformative results cannot be achieved at the current rate of progress. The COVID-19 pandemic has and is expected to continue to negatively impact attaining the transformative results and implementing the S.A.M.O.A. Pathway, the 2030 Agenda and other global development frameworks. Monitoring the implementation of the same is, therefore, instrumental.

UNFPA provides much needed support related to **strengthening national statistical systems with a focus on population data**. Across all regions, the limited capacity in data collection, production, dissemination, popularisation and in-depth analysis remains pervasive, in some cases there is no data

collection on GBV. The [UNFPA Population Data Thematic Fund](#) is a mechanism through which UNFPA provides census technical support to more than 125 countries by collaborating with governments, UN country teams, the United States Census Bureau, and the population and data sectors across the world. UNFPA also supports countries to monitor the implementation of SDG 5.6 (ensure universal access to sexual and reproductive health and reproductive rights) through the indicators [SDG 5.6.1](#) and [SDG 5.6.2](#).

As outlined in Attachment A, UNFPA's thematic interventions in SIDS across regions are aligned with the actions required for the implementation of the SAMOA Pathway. UNFPA provides updates on progress related to policy design and implementation related to sexual and reproductive health and reproductive rights; legislative issues; strengthening national statistical systems as it relates to the collation and use of population data; strengthening DRR responses as they relate to ensuring the provision of SRH services; elimination of GBV, including sexual, intimate partner and domestic violence; and investments required to empower women and girls.

The following data points for various years underscore that the interventions outlined in Attachment A are warranted:

- **Adolescent birth rates** remain unacceptably high:
  - 69 per cent of the countries having an adolescent birth rate above 40 births per 1,000 girls aged 15-19 years (**Caribbean**)
  - The rising adolescent birth rates in 8 of 14 Pacific States and the increasing total fertility rate in 6 States (**Pacific**)
  - 151 per 1,000 girls aged 15-19 years with adolescent pregnancies linked to cultural practices of early sexual initiation and a high proportion of child marriages, with 40% of girls aged 20-24 years married before the age of 18, and 15% married before the age of 15 (**Madagascar**)
  - 74.4 per 1,000 girls aged 15-19 years, and is higher among adolescents in rural areas further, adolescent pregnancies have had a negative impact on primary school completion rates for girls, which stands at 70 per cent, compared to 90 per cent rate for boys (**Comoros**)
- **Health**
  - Some Pacific states have made good progress in reducing maternal mortality with a maternal mortality ratio above the Sustainable Development Goal target of 70/100,000
  - family planning needs remain unmet and early pregnancy is still high at 27.3% despite progress, 92.5% of births are attended by a health professional; 97% of health facilities provide maternal and child health services and family planning; overall prevalence rate for HIV/AIDS was 0.5 per cent in 2014; the rate was 1.7 per cent for Principe; the HIV prevalence for young people aged 20-29 years was 0.8 per cent for females and 0.5 per cent for males in 2014 (**Sao Tome and Principe**)
  - unmet need for family planning remained stagnant (at 18 per cent) between 2012 and 2018, varying by age and socio-economic conditions with 21.9% for the poorest of society and 19.4% for adolescents; HIV prevalence among the population aged 15-49 years was estimated at 0.3% in 2018 and an estimated 0.35 per cent among adolescent and young people;; the maternal mortality ratio has remained unchanged over the last ten years, with about 408 maternal deaths per 100,000 live births according to the third PHC in 2018, falling below the 2020 target of 300 per 100,000 live births established by the National Roadmap for the Accelerated Reduction of Maternal Mortality; a third of the maternal deaths occurs among adolescents aged 15-19 years (**Madagascar**)
  - 88% of health facilities offer family-planning services but only 64% provide at least three

modern contraceptive methods **(Comoros)**

- **Population related indicators**

- 69.9% of the population living in women-headed households; 75.1% of the population living in adolescent-headed households, and 80.2% of people living with disabilities are poor. Adolescents and young people are particularly affected by poverty: 75.1% for adolescents aged 15-19 years and 76.7% for young people aged 20- 24 years **(Madagascar)**

Please see the attached questionnaire (Attachment A) for a detailed outline of UNFPA's interventions and those which are carried out jointly with other UN agencies and other development partners for the following clusters.

- Cluster 51-52: Disaster Risk Reduction
- Cluster 72 – 75: Health And Non-communicable Diseases
- Cluster 76-77 Gender Equality and Women's Empowerment
- Cluster 78-79 Social Development
- Cluster 83-86 Promoting Peaceful Societies and Safe Communities
- Cluster 97-101 Partnerships.
- Cluster 112-115 Data and statistics

### **PART C**

#### **ASSESSING IMPLEMENTATION OF THE SAMOA PATHWAY: ASSESSMENT OF POLICY PROGRESS**

The SAMOA Pathway contains a number of action areas that require policy formulation, programmes or projects to be implemented at national, subregional and/or regional levels. These have been identified as part of the monitoring Framework and are available at **Attachment B** to this questionnaire. By highlighting the changes in the national policies, their results and impact, the proposed analysis could further spotlight any progress in key priority areas of the SAMOA Pathway.

Using the framework referenced at Attachment B, Member States, relevant custodian agencies together with the Resident Coordinators/Offices in SIDS, are kindly requested to provide a brief status update for your country/region, under the overall coordination of the UN regional commissions, where appropriate.

#### ***Suggested UNFPA contribution to Part C:***

UNFPA's engagement in SIDS across regions in relation to national policies, their results and impact, the proposed analysis which signals progress in key priority areas of the SAMOA Pathway, remains guided by national priorities and the UNFPA Strategic Plan 2022-2025 alongside the ICPD agenda, Agenda 2030, other relevant global and regional development frameworks provides. UNFPA provides support to governments in SIDS on concrete ways in which to develop policies laws and plans and related to population (including data), women's empowerment and gender equality, youth, and health and better able to integrate sexual and reproductive health and reproductive rights into laws, policies and plans. Please see a subset of examples below:

- Gender equality
  - the proportion of seats held by women in the national parliament has doubled to 18 per cent in 2014, from 9 per cent in 2012; despite gains in overall literacy rates have reached 93 per cent for men aged 15-49 years, and 85 per cent for women, the 2014 gender

development index rating was 0.891, ranking it 115 out of 187 countries, with a low equality rating between men and women on the human development index, owing largely to the maternal mortality ratio and adolescent fertility rate (**Sao Tome and Principe**)

- the enactment of the law on GBV, the integration of CSE into the school curriculum and the strengthening of the national network of emergency obstetric and neonatal care, aimed at eliminating preventable maternal deaths (**Madagascar**)
- Violence including sexual and GBV
  - Most countries have comprehensive laws on domestic and sexual violence, though the definition of gender-based violence is limited, for example, the definition of rape in some jurisdictions is, for instance, limited to forced sexual intercourse outside marriage (**Caribbean**)

Further, please see the attached questionnaire (Attachment B) for a detailed outline of UNFPA's interventions and those which are carried out jointly with other UN agencies and other development partners for the following clusters.

- Cluster 51-52: Disaster Risk Reduction
- Cluster 72 – 75: Health and Non-communicable Diseases
- Cluster 76-77 Gender Equality and Women's Empowerment
- Cluster 78-79 Social Development
- Cluster 83-86 Promoting Peaceful Societies and Safe Communities
- Cluster 112-115 Data and statistics

Further, in relation to the development and implementation of national policies related to the implementation of paragraphs 3, 77 (f) which address actions related to the ICPD Programme of Action of the S.A.M.O.A Pathway, please see the regional and country level interventions spearheaded by UNFPA:

#### **Regional examples (reporting period 2021-2022)**

##### **The Caribbean region**

In 2021, UNFPA continued to support governments with their population policies. The Ministry of Economic Affairs and Investment in **Barbados** finalised the National Population Policy with UNFPA's support. The policy document will serve as the framework for the attainment of a modern, innovative and productive economy underpinned by inclusive development, environmental sustainability, ecological balance, ensuring security (including food security), universal access to sexual and reproductive health, social inclusion, gender equality and human rights.

Similarly, the Population and Health Unit within the Planning Institute of **Jamaica**, supported by stakeholders including UNFPA, submitted the Draft Jamaica National Population and Sustainable Development Policy and its accompanying Programme of Action (PoA) to Cabinet for approval as a Green Paper. The Policy and PoA were tabled in the House of Parliament and consultations will now proceed as the next phase. UNFPA has committed to provide support to this process to ensure that the policy and the supporting documents, including the Monitoring, Implementation & Evaluation Plans, are completed with the aim of initiating implementation after approval of the framework.

##### **The Atlantic, Indian Ocean and South China Sea region**

In **Madagascar**, with UNFPA's support, the Government has implemented several frameworks geared



towards fostering an enabling environment for the promotion of youth. These frameworks include the National Youth Policy; National Roadmap on Demographic Dividend; National Adolescent and Youth Health Policy; Adolescents and Youth Reproductive Health National Strategic Plan; Peer Education Harmonisation Document; Peer Education Harmonisation Document; Adolescent and Youth Reproductive Health training curriculum for non-health and health workers; Life-Skills Manual; Comprehensive Sexuality Education Guidance Framework and policy guidance for teachers and parents; Training of Parents Curriculum.

Further, in **Mauritius**, UNFPA provided lead support for the revision of Mauritius National Population Policy which responds to the country's population dynamics, including low fertility, onset of ageing and concomitant impacts on socio-economic development.

In the **Seychelles**, the National Population Policy and Implementation Plan is scheduled for review and implementation in 2022.