EVALUATION OF THE 2005-2011 COUNTRY PROGRAM: UNITED NATIONS POPULATION FUND KYRGYZSTAN COUNTRY OFFICE

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I have talked with many extraordinary people in the course of undertaking this evaluation. I will long remember their devotion to the well-being of their fellow citizens and to the development of a just, compassionate and prosperous Kyrgyzstan.
List of Acronyms

CEDAW – Convention on the Elimination of all Forms of Discrimination Against Women
CEMD – Confidential Enquiry into Maternal Death
CIS – Commonwealth of Independent States
CO – Country Office
GBV – Gender-Based Violence
GTG – Gender Theme Group
ICPD – International Conference on Population and Development (Cairo, 1994)
IEC – Information, Education and Communications
KRSU – Kyrgyz Russian Slavic University
MCH – Maternal and Child Health
NGO – Non-Governmental Organization
NMCR – Near Miss Cases Review
NSC – National Statistical Committee
OHCHR – Office of the High Commissioner for Human Rights
PHC – Primary Health Care
RH – Reproductive Health
STI – Sexually Transmitted Infections
SWAp – Sector-wide approach (health care reform)
UNCT – UN Country Team
UNDP – United Nations Development Program
UNEP – UN Environment Program
UNFPA – United Nations Population Fund
UNICEF – United Nations Children’s Fund
UNIFEM – United Nations Development Fund for Women
VAW – Violence Against Women
YFHS – Youth Friendly Health Services
WHO – World Health Organization
EXECUTIVE SUMMARY

The UNFPA Kyrgyzstan Country Office (CO) oversees an evolving program focusing on three major areas of focus: population and development, reproductive health and gender – all fundamental components foundational to the accomplishment of UNFPA’s overarching mission. This mission - as stated in the UNFPA 2008-2011 Strategic Plan guiding the work of the organization across the world - is “to support countries in using population data for policies and programmes to reduce poverty and to ensure that every pregnancy is wanted, every birth is safe, every young person is free of HIV/AIDS and every girl and woman is treated with dignity and respect” and is a reflection of the Programme of Action of the International Conference on Population and Development.

The UNFPA CO works in close collaboration with the government ministries whose mandates encompass its scope of work (particularly the National Statistical Committee and the Ministry of Health), UN agencies (particularly WHO, UNDP, UNICEF and UNIFEM) and an array of highly motivated and dedicated non-governmental partners active in its areas of concern. UNFPA, in its work in Kyrgyzstan, supports the development of a wide array of educational efforts in population and development, reproductive health and gender through a diverse program of face-to-face professional training courses, conferences and seminars, through print (manuals, handbooks, curricula, brochures and leaflets) and audio-visual media. It plays an essential and central role in supporting updated training and continuing education for professionals working in demographic and statistical areas, health personnel working in reproductive health, and public and private sector professionals active in gender policy and programs.

Highlights of the accomplishments, as well as challenges faced by each programmatic component in the period from 2005-2010 follow, along with recommendations:

The work of the UNFPA Population and Development Component in technical and financial support of Kyrgyzstan’s decennial census, conducted in 2009, was critical in enabling the census to go forward successfully. UNFPA staff called on international expertise, supported by the regional office and international resources, to provide vital technical assistance; UNFPA funds supported training of senior census staff, as well as field enumerators. Population and Development support has been critical in providing sorely needed cross-training between professional statisticians working for the National Statistical Committee and professional statisticians working with the Republican National Medical Center and the State Registry System. UNFPA support enabled the NSC to continue to produce the valuable Women and Men of the Kyrgyz Republic.

While UNFPA has successfully worked with elected officials in the Parliament of Kyrgyzstan to address population and development issues through the Population and Development Committee, it has encountered difficulties in working with the country’s executive branch in support of a high level body focusing on population and development issues at the highest levels of the government. Such an entity was finally established after
much effort under the office of the president, along with a commitment to integrate population and development issues into government-wide planning, but in the wake of the significant changes in the governance of Kyrgyzstan in 2009, this body was abolished. With the coming of a new administration in 2010, UNFPA advocacy efforts gained the support of the newly elected president to institutionalize population policy within the governmental structure. An agreement was reached to establish an Expert Board focusing on population and development. Sustained efforts will have to be undertaken to ensure that the newly established government seriously analyzes and integrates population and development issues into its planning and implementation of policies and programs.

UNFPA has been working to develop a future cadre of well-trained professional statisticians through its support of the demographic certificate program at the Kyrgyz, Russian Slavic University. It would be valuable for UNFPA to explore opportunities to enrich and expand the partnership, perhaps bringing in additional academic institutional collaborators with new perspectives to contribute to the shared activities. In general, it would be useful for UNFPA to develop a systematic schedule for intensive consultations with its implementing partner agencies, including both program managers and program participants to explore program strengths and areas needing additional support/resources/reframing. The CO’s initiative in late 2010 commissioning expert demographic forecasts on future developments in diverse sectors of Kyrgyzstan society should help catalyze constructice thinking by the public and private sector on policy and programmatic consequences of these forecasts.

UNFPA’s reproductive health efforts has played a major role in supporting the re-education and training of a significant proportion of the Kyrgyz Republic’s physicians in the most current approaches to family planning and obstetrical care with particular attention to antenatal, neonatal and emergency obstetrical care. The agency has worked with the country’s medical colleges, its institute for continuing medical education, as well as the Ministry of Health (MOH), in recruiting trainers, preparing and publishing manuals and guidelines laying out best practices in antenatal, neonatal and emergency obstetrical care. UNFPA has provided needed equipment, ranging from computers and furniture to reproductive health kits to be used in obstetrical care in emergency situations. It has also supported the publication and dissemination of a wide range of materials addressing reproductive health issues. The CO plays a critical role in supplying contraceptives for use by lower income individuals, as well as institutionalizing the use of logistical systems and software programs in the Ministry of Health to track the flow of contraceptives from supplier to end user. The UNFPA Kyrgyzstan office has also worked to support the implementation of a confidential inquiry into maternal death and near miss cases review. UNFPA CO work in reproductive health includes support to an array of education and outreach initiatives – most prominently Y-PEER, a highly regarded peer education program addressing youth needs for information on reproductive issues, as well as more general information on HIV prevention and healthy lifestyles.
The UNFPA Kyrgyzstan Office has also promoted the development and expansion of Youth Friendly Health Services – providing particular attention within a clinical medical setting to the special needs of adolescents for advice and counsel on reproductive health issues in a friendly and supportive environment. Working with the Republican Health Promotion Center, UNFPA has worked with lyceums and academic educational institutions in disseminating publications on healthy lifestyles. UNFPA has been particularly successful in its outreach efforts to the Muslim community in addressing family planning issues. Working with the country imams, muftis and the public foundation, Mutakalim – a particularly strong NGO founded by a Muslim woman and focused on Muslim women’s human rights – UNFPA has widely disseminated publications focusing on family planning and Islam.

While UNFPA has made a major investment in staff time and resources in its work in the reproductive sector, significant challenges remain. Monitoring of the training provided to physicians has lagged, due to insufficient staff resources. There has been insufficient follow-up to ensure that techniques taught are correctly applied and utilized by trainees, Major problems remain in the condition of health facilities, particularly in rural and remote areas with poor infrastructure, limited access to information technology, inadequate resources and personnel to provide emergency transportation to patients and to health providers.

The country’s medical system is facing a continuing drain of human resources with health personnel leaving the country to work in Kazakhstan, Russia and other countries able to provide higher salaries and better working conditions. HIV is increasing in Kyrgyzstan, with young people of reproductive age particularly vulnerable, and often avoiding medical care for fear of stigma and loss of employment. Particular efforts are needed from UNFPA staff working on youth programs, to reach out to youth in remote areas, and youth from economically marginal and poor urban households, to become part of Y-PEER and other young-focused programs. Young people from these socio-economic groups are currently insufficiently represented in UNFPA’s youth programmatic work. It is important, as well, to ensure that young men of all backgrounds learn of UNFPA’s youth work and become engaged in it.

The innovative and complex work of determining the causes for “near misses” of maternal deaths and the mounting of a confidential inquiry into the causes of maternal deaths has run into conflict of interest problems and the threat of prosecution of those seen to have caused maternal deaths. UNFPA will need to reconfigure the membership of the medical committee working on these issues and consult more frequently with the secretariat providing the staff support to these efforts. UNFPA should ensure that prosecutors and ombudsmen are informed about the Confidential Enquiry and, along with the relevant Ministry of Health officials, strongly encouraged to support this effort.

UNFPA’s gender programmatic work, a separate component only since 2008, has given priority in its work to gender-based violence (GBV) – with particular attention to working with the country’s Muslim religious community in this area. It has supported an important baseline studies on the factors contributing to gender-based violence.
Following important preparatory work, facilitated by an expert in working with religious authorities, UNFPA initiated a landmark study of attitudes of religious leaders throughout the country toward an array of practices both contributing to and constituting gender based violence. Roundtable sessions were convened, as well, including religious leaders along with leadership of civil society and government bodies.

UNFPA’s gender component has collaborated with the county’s NGOs focused on women’s issues in seeking to work with the changing governmental mechanisms for addressing gender issues including gender equity and GBV. This has been a difficult undertaking as the personnel tasked with responsibilities in this area were often changing and too frequently not well grounded in the issues – often with minimal to no resources made available by government bodies such as the office of the president, government ministries and oblast, rayon and municipal authorities to accomplish this work. UNFPA has worked in concert with other UN agencies and civil society in both disseminating information regarding the Convention on Elimination of all Forms of Discrimination Against Women (CEDAW) and advocating for the government of Kyrgyzstan, a signatory to the convention, to adhere to its provisions. The CO’s gender component has worked with gender experts to develop engaging educational materials focusing on GBV for the public-at-large; it has developed outreach programs as part of the 16 Days Against Violence program of events and convened meetings of NGOs and government ministries providing diverse services to survivors of GBV. UNFPA has been deeply involved in the work of the UN Gender Theme Group, working to collaborate on gender programmatic efforts and has been tasked as a lead agency in the work of the UN Kyrgyzstan’s Joint Program on Eliminating Violence Against Women.

Challenges before the gender component include reaching out to broader segments of the country’s population with information describing the country’s legal commitments to gender equity and human rights and the resources available for help in gaining and securing these rights. In a climate characterized by increasing return to traditional customs and religious practices, it is critical that UNFPA enhance its outreach to the country’s observant population and its religious leaders and include them in the dialogues it convenes on gender equity and GBV. The gender component work well complements the work of UNFPA’s reproductive health component work with youth; the two sectors should allocate staff time and resources to more collaborative work. UNFPA’s gender component should increase its outreach to organizations working with boys and men to foster dialogue on gender equity issues. It should work with the Ministry of the Interior to develop a welcoming environment for women police officers and work with schools and colleges to encourage women to enter careers in law, law enforcement and the military. UNFPA should also explore opportunities to enable women to play more significant roles in peacebuilding and peacemaking activities through developing special education and training programs in mediation, negotiation and conflict resolution.

With a significant component of UNFPA’s financial resources dedicated to supporting refresher and updated training for professionals, it is imperative to carefully monitor the application by trainees of the new approaches and techniques demonstrated and modeled in the multi-day training sessions and keep abreast of their difficulties in completely
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erstanding the material taught and integrating the new directions into ongoing professional practice. There is need for more frequent and more searching exchanges with partners delivering the training sessions to identify needed areas for improvement in teaching approaches, instructional materials and trainee comprehension.

The three major areas of UNFPA Kyrgyzstan country focus – population and development, reproductive health and gender – intersect, interpenetrate and cross-cut in many ways. It is important to ensure that the UNFPA country team, as it has just done in a December retreat at Issyk-Kul, share information on program activities, both underway and in the planning stages, and highlights of their programs which may be relevant and applicable to the work of other UNFPA program sectors. In the very busy UNFPA country office, it is a useful investment for staff members to allocate the time necessary to learn each others accomplishments and challenges.

The work of UNFPA is going well in a turbulent setting. With additional resources, it could better meet the needs it has identified and addressed to the extent possible within its constraints in such areas as: expansion of pilot programs in such areas as Youth Friendly Health Services, increased focus on rural communities, broader outreach in the area of gender violence prevention, larger print runs for publications (including manuals and guidelines for health professionals).

While the UNFPA CO is well situated to oversee its portfolio, so important to the successful development of Kyrgyzstan, and is a respected and esteemed partner to governmental, NGO and international donor agencies, significant challenges accompany the important programmatic responsibilities vested in it. UNFPA needs to work to expand its partnerships with non-governmental organizations, reaching out to a broader range of institutions with diverse memberships and concerns. Religious organizations and institutions should be involved in the broad array of UNFPA work; staff time should be expended in outreach to the leadership of such organizations. To expand its reach, UNFPA needs to increase the trainings and publications it provides in the Kyrgyz language. To capitalize on its rich knowledge base and linkages to a wide range of international organizations, the UNFPA CO should explore opportunities to conduct original research, facilitate research partnerships and identify research resources to address issues in its spheres of interest that are currently receiving insufficient or no attention.

Given the country’s recent experience with complex humanitarian crises, as well as long exposure to natural disasters such as earthquakes and avalanches, UNFPA needs to strengthen its capability of responding to emergencies by providing staff training, developing informational materials for distribution to those caught in such emergency situations, and stockpiling resources in-country to be used in disaster settings. In its future planning, UNFPA should also consider potential expansion of its youth work to encompass exploration of employment and work options for young people. Such a focus would enable UNFPA to involve a broader range of young people in its activities, model gender equity in the guidance and options it would provide, and address economic privation -- a major contributing factor to gender-based violence.
INTRODUCTION

A brief note on the context and methodology of this evaluation

This evaluation was conducted under a number of significant constraints which have had an impact on the depth and degree of scrutiny possible on the array of programs and projects undertaken under the UNFPA 2005-2011 Country Program in Kyrgyzstan:

- Political conditions in the country dramatically reflected the unsettled nature of governance in the country, with armed conflict and explosions taking place during the course of the evaluation visit.
- I was not able to reach some former UNFPA Country Office staff who could have shed light on some developments during the 2005-2010 period. Quantitative information was not always available for assessment of certain areas of program work.
- During the early afternoon of my second working day in Kyrgyzstan, I fell while exiting the UN Security booth at UN House, and fractured one ankle and seriously sprained a second. All my subsequent interviews were held in my hotel room. This situation, while eliminating my planned field trip out to Talas, Jalalabad and Osh, did have the positive dimension of providing the opportunity for extended conversations with unusually knowledgeable individuals playing important roles in the areas of population and development, reproductive health and gender in Kyrgyzstan.

The observations, findings and recommendations in this report are based on several complementary sources of information. Both prior to my visit to Kyrgyzstan, during my stay in the country and following my return to the United States, I was given access to a wide range of policy and program documents including: the UNFPA strategic plan, government policy and program documents, mid-term evaluation reports, annual work plan, annual reports, studies carried out by the UNFPA country office. While a number of critical documents were available to me in English, I was shown Russian language copies of manuals and protocols used in reproductive health training (the materials were only published in the Russian language) whose publication was often supported by UNFPA. As I only saw these publications at the close of my stay in Kyrgyzstan, I did not have the time available to work with a translator to carefully review these important training materials. I was also unable to see a detailed compilation of all the programmatic activities (trainings, roundtables, education and informational session) and a listing of all the publications associated with UNFPA’s gender component.

While in the Kyrgyz Republic, I conducted intensive interviews with UNFPA country staff, other UN agency staff (WHO, UNICEF, UNHCR, UNIFEM, key government officials, directors and senior staff of non-governmental organizations (many of whom partnered with UNFPA in varied programs and projects). As a consequence of staff schedules, I was only able to meet briefly with some highly knowledgeable individuals with only limited time available for discussion. I did, however, richly benefit from the opportunity – both in Kyrgyzstan and in the United States – to talk with journalists,
researchers and a number of knowledgeable observers of developments in Kyrgyzstan who provided most useful contextual insights and reflections.

Within these constraints, I do believe that I have been able to identify some important areas in which UNFPA can enhance its delivery of its already high quality services in population and development, reproductive health and gender. I have been very fortunate in the level of openness and candor shared with me by important stakeholders in Kyrgyzstan’s public life. I trust that the observations presented in this report will contribute to the further strengthening of UNFPA’s contributions to the ongoing development of this beautiful and vulnerable country.

**UNDERSTANDING THE COUNTRY CONTEXT**

The Kyrgyz Republic, former Soviet republic and an independent nation since August 31, 1991, neighbors China, and the three Central Asian nations of Kazakhstan, Uzbekistan and Tajikistan. While a relatively small country in terms of land area of 199,951 square kilometers (86th in size of the 186 countries compared by the CIA World Factbook in 2010), its geographic location gives it particular strategic importance and it is the current home to military bases of both the United States and Russia. The US Bureau of the Census estimates the population of the Kyrgyz Republic on July 2010 at 5,508,626 – 110th in population of the 186 countries listed. According to the statistics provided by the National Statistical Committee of the Kyrgyz Republic, the country’s resident population as of January 1, 2009 was 5,276,100 – with 2,667,000 women and 2,609,000 men. Nearly twice as many people lived in rural areas (3,448,652), as lived in urban areas (1,827,440) in January 2009.

Since independence from the Soviet Union, poverty has increased in Kyrgyzstan. According to the April 2010 Kyrgyzstan Fact Sheet of the UNDP-UNEP Poverty and Environment Initiative, an estimated 31.7% of Kyrgyzstan’s populations lives below the poverty line, and 6% live in extreme poverty. Some 51% of the rural population lives in poverty compared to 30% of the urban population. In five of eight oblasts (provinces), the poverty rate is over 50%. In 2010, the highly-regarded UNDP Human Development Index (HDI) – a composite index combining in one figure a measure of life expectancy, educational attainment and wealth – ranked Kyrgyzstan as 109th of the 169 countries assessed. According to the National Statistical Committee of the Kyrgyz Republic, work in agriculture, hunting and forestry employed the largest proportion of the population in 2008 (34.2% of women and 33.8% of men). Employment in trade and repair services, education, manufacturing, health and social services (17.7% women, 12.3% men;

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12.8% women and 3.0% men; 8.6% women and 7.8% men, and 7.3% women and 1.5% men, respectively) employed the next largest percentages of the population.\(^5\)

The country’s transportation infrastructure is poor. The extent of the road network (both paved and unpaved portions) in this mountainous country is 115\(^{th}\) of the 186 countries assessed by the CIA 2010 World Factbook, and the total route length of its railway network is 116\(^{th}\) in the world. The poor coverage of road and rail networks within the country significantly impacts residents’ ability, particularly that of rural citizens, to access emergency medical services and for health care providers to reach patients. Poor transport infrastructure significantly constrains the economic possibilities of rural residents, particularly small and medium sized entrepreneurs, to market their goods and services—and limits women’s opportunities to develop economic autonomy and decrease dependence on husbands and extended families, with their resultant control over women’s lives and possibilities.

Poor water supply infrastructure and difficulties in wastewater purification has led to serious problems with water pollution, with many people getting their water directly from contaminated streams and wells; water-borne diseases are prevalent. Many areas of the country experience shortages of electricity, and heating in winter is often unreliable.

The Kyrgyz Republic is a transit point for Southwest Asian narcotics bound for Russia and the rest of Europe. There is limited illicit cultivation of cannabis and opium poppy for CIS markets in Kyrgyzstan, with limited government eradication of illicit crops.\(^6\) The implications of this commerce for the health and well-being of the country’s residents are profound. Narcotics users are at serious risk of HIV/AIDS as a result of sharing of needles; under the influence of narcotics – often combined with alcohol – violent behavior can be triggered, with spouses and children easy targets of opportunity. According to the Columbia University’s Global Health Research Center of Central Asia, an estimated 30,000 residents of Kyrgyzstan were injecting drug users (IDUs) as of the first of January 2009; with only 6,574 men and women officially registered as IDUs at that time.\(^7\)

The time span for this evaluation of the UNFPA Kyrgyzstan Country Program—for the years 2005-2011, with the program extending into 2011 – coincides with what can be arguably termed the period of the greatest internal conflict and seismic jolts to the country’s governance system and its internal cohesion. The removal of the country’s first president, Askar Akayev, in March 2005; his replacement by Kurmanbek Bakiyev and a new team of senior government officials, as well as a new Parliament (Jogorku Kenesh); ongoing changes in government structures – with new entities emerging and then disappearing – significantly affected the planning and implementation of UNFPA programs and projects – resulting in delays in program inception and execution.


\(^6\) See the CIA World Factbook entry for Kyrgyzstan.

\(^7\) Personal communication, January 6, 2011 from Danil Nikitin, Country Representative and Project Manager, Columbia University Global Health Research Center of Central Asia.
Following this unsettled period, early 2010 saw increasing polarization in the country’s political elite – culminating in violent conflict between supporters and opponents of President Bakiyev and his removal from office in April 2010.

This breakdown in the country’s governance -- followed by the outbreak of violent ethnic conflict between Kyrgyz and Uzbek communities in Osh in June 2010 – resulted in the temporary cessation of some UNFPA programs, difficulties in implementing planned activities and in enhancing existing programs. Planned UNFPA work was superseded by emergency humanitarian assistance in the area of reproductive health to hospitals and health care providers in the Osh region, and staff attention focused on provision and logistical efforts to ensure the safe arrival of critical obstetric health kits.

During the period covered by this evaluation, the UNFPA CO underwent significant staff changes with the UNFPA Assistant Representative, Dr. Gulnara Kadyrkulova, leaving her UNFPA position to move to the UNFPA sub-regional office in Almaty, Kazakhstan. The position of Assistant Representative was then filled on an interim basis in by Ms. Nurgul Kinderbaeva, whose areas of specialization lay in gender issues. Ms Kinderbaeva served in her interim role until April 2010 when Dr. Meder Omurzakov, previously with the WHO Country office in Kyrgyzstan and a surgeon and hospital administration specialist by training, assumed this position. Against this backdrop of significant external and internal change, with periods in which staff vacancies placed a heavy workload burden on incumbent CO staff, the UNFPA Kyrgyzstan county office team has successfully implemented a wide array of programs in its three focal areas: Population and Development, Maternal and Child Health and Gender (which began as separate program focal area in 2008).
FINDINGS AND CONCLUSIONS

It is important to underscore that the members of the staff of the UNFPA Kyrgyzstan Country Office approach their work in population and development, reproductive health and gender with a strong commitment to planning, designing and implementing programs particularly attentive to human rights and gender issues – programs which model respect for the principles set forth in the Universal Declaration of Human Rights and key UN Human Rights treaties affirming human dignity and the equal worth of all people. UNFPA CO programs and publications pay special attention to informing the citizens of the Kyrgyz Republic of their rights under the UN conventions ratified by their government and guaranteed under the laws of the Kyrgyz Republic.

POPULATION AND DEVELOPMENT

RELEVANCE

Alignment with priorities and strategies of the government of Kyrgyzstan, other UN agencies and donors active in UNFPA mandated areas

UNFPA plays a unique role in Kyrgyzstan, as in many other developing countries, through its promotion and support of the Programme of Action of the International Conference on Population and Development (ICPD). The Kyrgyz Republic is a signatory to the ICPD. The Programme of Action, with its focus on effective population policies in the context of sustainable development, underscores the vital role of collection of data on diverse facets of the country’s population joined to expert demographic analysis and calls for integrating population factors in poverty reduction strategies. As UNFPA has underlined, population dynamics – including growth rates, age structure, fertility and mortality and migration – affect every aspect of country development.

The UNFPA CO has been implementing a number of programs focusing on Population and Development issues in cooperation with the National Statistical Committee (NSC) in Kyrgyzstan – the governmental body responsible for collection of national statistics – to strengthen the country’s statistical/demographic capacity.

UNFPA at the country, sub-regional and regional levels, has played a pivotal role in supporting the planning and implementation of the 2010 Census in Kyrgyzstan (actually conducted in 2009). Responding to requests by Central Asian countries for technical and/or other assistance with the preparation of their 2010 censuses, in 2007, UNFPA fielded about a dozen missions by international consultants in the region, including Kyrgyzstan. Additionally, UNFPA provided logistical, technical, and financial support to three training workshops organized by the United Nations Economic Commission for Europe (UNECE) aimed at census officials from Central Asia and Azerbaijan. These
workshops focused on census management, census questionnaire design, and census technology.

The UNFPA CO provided critical support for the NSC in its important work on mounting and implementing the 2010 decennial Census on Population and Housing (housing being an element newly introduced into the census) – a major priority for the government of Kyrgyzstan. UNFPA also played a central role in securing the significant financial support of the United Kingdom’s international aid agency, the Department for International Development (DFID) for the training of census enumerators and publication of census results. UNFPA’s contribution to this foundational component of the country’s ability to utilize demographic data for national planning is detailed below.

Recruitment and retention of well-trained demographers is a challenge well recognized by the National Statistical Committee as a number of senior officials have indicated. Well-trained demographers who began their careers during Soviet times and were trained in Soviet institutions are now reaching retirement age. Others have left the country to work in Russia, Kazakhstan and Europe or have entirely left the professional field. Hence, the need for training of a young cohort of demographers is urgent if Kyrgyzstan is to have the ability to assess its population dynamics and plan for emerging population needs and services (a critical component of the ICPD Programme of Action). UNFPA CO contributions to this important priority of the government of Kyrgyzstan are described in detail below in the section on national capacity development.

Vulnerable populations

Through the publication of Women and Men of the Kyrgyz Republic, supported over many years by UNFPA, an expanded national audience has been provided the opportunity to see, in an easily accessible fashion, an objective picture of the county’s social and economic conditions. The publication’s chapters dealing with the Millennium Development Goals, Population, Health, Education, Work and Unemployment, State Power and Governance, Standards of Living and Crime enable government officials, as well as leadership of non-governmental organizations concerned with economic and social issues, to have access to factual data – even if sometimes imprecise – to assess national conditions. Advocacy within government agencies and from without is advanced through the annual collection of statistics showing yearly developments in areas of concern. While the print run of the publication is too small for the public-at-large to view the paperback volume, it serves as an invaluable resource in enabling population data to be brought to the table by knowledgeable advocates. Support for Women and Men of the Kyrgyz Republic was provided by the Country Office’s Population and Development program through 2009. Beginning in 2010, financial support for this important publication is provided through the budget of the CO Gender program.

Increased attention is now directed by NGOs concerned with gender-based violence on the collection of statistics addressing this issue. This is a priority area for the UN Joint Program on Eliminating Violence Against Women. Such data would strengthen advocacy efforts calling for greater government support for programs focused on violence.
reduction in an array of areas and help catalyze public concern and engagement on this issue.

Consideration of partner’s capacity in the development of program design

UNFPA CO staff members have worked closely with the senior leadership of the National Statistical Committee in identifying NSC needs and determining the optimum use of UNFPA resources to supplement the human and financial resources available to the Committee in meeting its many statistical responsibilities. In interviews with this consultant, senior leadership of the NSC underscored the excellent collaboration they have experienced with UNFPA and their assessment of the partnership as an excellent one. Indeed, a major challenge facing NSC, in a climate of financial constraint, is identifying the internal resources to meet the growing staff desire for professional development, so well catalyzed and realized through UNFPA assistance. Further discussion of the collaborative efforts between UNFPA and NSC to develop effective professional development programs follows.

Strategies to promote national capacity development

Cross-Training of Government Statistical Personnel

A significant milestone in improving the accuracy of Kyrgyzstan’s statistical information was achieved during the latter part of the 2005-2011 Country Program. An ongoing challenge for the National Statistical Committee and users of the government’s statistical/demographic information has been the discrepancies between the “formal” statistics compiled by the NSC and those figures found through studies conducted by individual researchers. Statistics on such matters as the number of migrants and the number of abortions vary considerably between governmental and non-governmental sources. Partly, this is due to lack of formal registration by migrants, or non-registration of abortions, sometimes provided outside physicians’ offices – so that there is no official record of these individuals or incidents in the governmental statistical system.

One area where discrepancies have long caused frustration has been in the statistics on births and deaths in the county. The recording of such critical demographic information has been the purview of the State Registration System. Migrants and those without proper identity documents (propiska) would find it difficult to gain birth certificates for their children and, hence, these births would not be recorded in the State Registration System. Further, problems abounded in the area of coding of the cause of deaths – with the vague “old age” or some general category substituting for a specific cause of death (a very vital statistic in allocating public health funds in such areas as addressing illness of senior citizens). Such statistics were generally transmitted by hospitals and family medical practices to the Republican Medical Information Center.

In 2009/2010 UNFPA, supported the joint training of professionals working in the recording and analysis of vital statistics – bringing together individuals from the National Statistical Committee, the State Registration System and the Republican Medical Information Center of the Ministry of Health. One senior demographer at the National
Statistical Committee found these trainings, conducted initially in Osh (2009) and later in Bishkek (2010) and four northern oblasts, to be transformative. She exclaimed that “never in twenty years” had people doing such inter-related work experienced joint training. With a common understanding of shared problems and determination of shared approaches to work within existing constraints, a number of staff members of the National Statistical Committee observed that the flow and accuracy of information was now much improved.

Population Center and Certificate Program at Kyrgyz Russian Slavic University

In Kyrgyzstan, UNFPA has been working to build the capacity of current professional staff within the National Statistical Committee, as well as both promote interest and develop competence of a younger generation of Kyrgyzstani men and women in careers as professional demographers. It has worked to this end, by supporting over the past five years the Kyrgyz Russian Slavic University (KRSU) certificate program in demography and in supporting the Population Center which it helped establish at the university. UNFPA equipped the Population Center with a computer and furniture. There are some 15-17 students in the certificate program, mandatory for all students in the economic theory program at KRSU (which hosts the certificate program), and unavailable to other KRSU students in other departments. The three course certificate consists of courses in demography, migration and modern issues of population. Enrollment in the certificate program, however, will expand in 2011, as the university becomes part of the EU-wide Bologna process, enabling other students to enroll in its courses.

Many of the 75-100 holders of the certificate have found work in various Kyrgyzstan government agencies, but it appears that few are actually working as demographers. Several graduates of the program have expressed to this evaluator their frustration at a lack of practical, applied work and their lack of training in Stata, a data analysis, data management and graphic software program commonly employed in demographic/statistical work across the world. It does not appear to me that there is not any significant cooperation between the theoretical economics faculty, which supervises the certificate program, and such KRSU faculties as sociology, which could serve as potentially promising partners.

UNFPA has supported visits by expert demographers to KRSU where they have presented seminars both to university students and to staff of the National Statistical Committee, funded study tours for faculty and graduate students to the Czech Republic (Prague), Russia (Moscow) and India (New Delhi) to meet with faculty and students working in demographic and statistical teaching and research. The learning agenda for these visits is quite intensive. The appropriate duration of these visits needs to be carefully assessed, ensuring that sufficient time is available for participants to both adequately learn the requisite concepts and have sufficient hands-on practice to fully assimilate the training and feel professionally ready to undertake such analyses in Kyrgyzstan.
The need for significant attention to hands-on applied work in demographic analysis was further underscored by a graduate of the KRSU program who found herself woefully unprepared to undertake the applied demographic work considered as quite routine by graduate Indian statistical students. There was a call, by several associated with the KRSU program, as well, for training in the use of Stata. Members of the professional staff at the National Statistical Committee, I was informed, work with Stata.

**Catalyzing Demographic Forecasting**

In the Extension of the UNFPA 2005-2009 Country Plan to 2010-2011, the Government of Kyrgyzstan and the UNFPA noted the crucial need for analytical and forecasting activities to enable the incorporation of population factors in Kyrgyzstan’s social and economic development. The Plan called for such analytical work to be evidence-based, utilizing reliable quality data and building interagency coherence in data collection and analysis.

UNFPA has directed specific attention to strengthening the country’s capacity in analytical forecasting through several approaches. As described above, the certificate program has sought to lay the foundation for this skill set, but still has some way to go in building this capacity into its certificate program. Study tours have been a further step in this direction, but concern has been voiced by participants that the time allocated for training is insufficient.

During the later part of 2010, UNFPA initiated an innovative project with the potential for enhancing Kyrgyzstan’s professional forecasting and demographic analysis knowledge base. To meet the country’s need for expert demographic forecasting and analysis, UNFPA has assembled a Working Group of expert demographers from Kyrgyzstan, as well as a distinguished demographer from Russia (M. Denisenko from Moscow State University who is heading the group) and from the US (M. Guillot from the University of Wisconsin, Madison) to develop forecasts on national demographic trends. The sectors to be studied are: an overall view of the demographic situation in Kyrgyzstan, analysis of the population’s age and sex structure, analysis of marital status (marriages/divorces), analysis of mortality and life expectancy, international migration trends, demographic projections, economic development, macro-economic indicators, education, birth and family planning, and the health status of the population. Additionally, UNFPA, in partnership with UNDP, has initiated a study on interlinkages of demographic and social-economic processes in Kyrgyzstan. These reports are to be finalized in the first quarter of 2011 and presented at a roundtable in Bishkek to be attended by government, academic and NGO observers concerned with planning and meeting the needs of the country’s population.

**Information-sharing and Advocacy Work with Members of Parliament**

UNFPA has been particularly successful in working with members of the country’s Parliament (Jogurku Kenesh) in catalyzing parliamentary focus on issues of population and development, indeed helping to make the Parliamentary committee dealing with population and development one of the most popular committees in the entire Parliament.
The Parliamentary Committee explored varied dimensions of government policy closely tied to population and development and held roundtables, open to all citizens, focusing on such issues as the high levels of maternal mortality in the county.

**EFFECTIVENESS**

*Achieving program results/progress toward achievement*

UNFPA initiatives in the area of population and development have clearly led to the professional development of employees of the National Statistical Committee in a number of areas: training for implementation and analysis of the country’s recent Population and Housing Census, cross-training off NSC, Republican Medical Information Center and State Registry System staff, participation in seminars given by visiting demographic experts at the Kyrgyzstan Russian Slavic University. UNFPA has further contributed to the achieving of greater professional capacity at NSC through commissioning forecasting studies by demographic experts to be shared with and studied by NSC staff. UNFPA has also supported the Certificate Program in Demography at KRSU, which has provided exposure for undergraduates to diverse elements of demographic research – providing a foundation for further and more wide-ranging studies at a more advanced level.

*Contribution of the country program to enhancing quality, coverage, inter-agency coherence of demographic data. Evidence that census and research results provide help to better understanding of population dynamics. Results produced by census and research studies used in policy and program development.*

UNFPA, building on the support it gave to the government of Kyrgyzstan in conducting the country’s First National Population Census, conducted in 1999, played a leadership role in providing a wide range of assistance in the preparation and implementation of the 2010 Population and Housing Census. Working with the National Statistical Committee, UNFPA at both the regional and country office level provided technical support, resource mobilization and continued capacity building through the period of its second Country Program 2005-2011. This wide-ranging assistance included

- **Technical support** for questionnaire design, tabulations review and compliance to the UN and EuroStat standards
- **Capacity building** of NSC staff at all levels through local, regional, CIS and other trainings on census management
- Provision of necessary **equipment, software and training for cartographic materials**
- Support to NSC in **resource mobilization** efforts (through UNFPA CO financial resources as well as assistance from DFID, the World Bank and technical missions from the UN Economic Commission for Europe).

The latest decennial census in this mountainous country with many remote and hard to reach areas, was successfully completed with initial data available in a printed version at
the close of 2009 and more detailed results and in-depth reports produced in 2010, despite unsettled conditions within the national government during parts of this period. Senior staff at the NSC, with many years of experience in the organization, indicated to this consultant the significant impact of UNFPA support on their ability to execute the census. Indeed, one senior staff member called on UNFPA to provide support for the publication by the NSC of a volume documenting the methodology used in the just completed census and the lessons learned in implementing this methodology. This volume would serve as guidance to NSC staff in the conduct of the census to take place in 2019.

As noted earlier, an important contribution to the development of a knowledge base among the professional staff members of government ministries, as well as professional associations and NGOs, was the development of the publication *Women and Men of the Kyrgyz Republic* – with gender disaggregated statistics for men and women available in an attractive paperback format (beginning in 1998). Each year, the reach of the publication expands, with additional material being added. Beginning in 2010, in response to a concern by UNFPA, the UN Joint Program on Eliminating Violence Against Women, and a number of gender-focused NGOs to have formal documentary evidence of the extent of gender violence in the country, increasing attention will be paid to the collection of statistics in this area. The statistics presented in *Women and Men of the Kyrgyz Republic* are frequently cited in studies and reports developed by a wide array of organizations. The scope of the publication has continued to expand over the years into new subject areas. It would certainly be helpful if copies of this important snapshot of Kyrgyzstan society were available to more people (particularly useful would be its presence in secondary schools, both academic and vocational, in higher education institutions and in libraries).

The cross-training program described above, initiated and supported by UNFPA, is playing a valuable role in enhancing the quality and coherence of demographic data and ensuring the accuracy and validity of the statistics provided.

**EFFICIENCY**

*Efficient use of human, technical and financial resource to achieve given outputs*

UNFPA has worked closely with the top leadership of the National Statistical Committee and its senior staff to identify areas where UNFPA support can make an important difference in the professional development of NSC staff, enhance professional relationships with other State bodies gathering statistical information (such as the Republic Medical Information Center and the State Registry System. UNFPA has identified demographic expertise within Kyrgyzstan to contribute to its efforts to improve the quality of national statistics and strengthen analytical capacity in demographic forecasting. UNFPA has called, as well, upon international expertise to provide the highest quality guidance to NSC both in the conduct of the 2010 National Population and Housing Census and in training in more general analytical work.
Overlap and duplication of similar interventions

UNFPA is well apprised of the activities of other UN agencies, bi-lateral and multi-lateral donors in the area of population and development. In conjunction with work on the 2010 Population and Housing Census in Kyrgyzstan, UNFPA regional and the Kyrgyzstan Country offices were in close contact with the secretariat of the Statistical Division of the UN Economic Commission for Europe, which provided expertise on methodological and technical issues involved in the fielding of the census.

SUSTAINABILITY

Creation and strengthening of local/regional networks and partnership to implement and sustain country program activities

As a result of high level advocacy by UNFPA, an expert advisory board under the president of Kyrgyzstan was to be created for regular monitoring of demographic trends, study of emerging population factors and issues and application of the insights gained in development of policy recommendations for decision making at all levels. With the organizational changes ensuing in the government of Kyrgyzstan in 2009, the fate of this board was unclear. As initially envisaged, it which would have played an important ongoing role in both advocating for and monitoring national efforts focused on population and development issues. With the coming of a new administration in 2010, UNFPA advocacy efforts gained the support of the newly elected president to institutionalize population policy within the governmental structure. An agreement was reached to establish an Expert Board focusing on population and development. Sustained efforts will have to be undertaken to ensure that the newly established government seriously analyze and integrates population and development issues into its planning and implementation of policies and programs.

Over the duration of the 2005-2010 UNFPA Country Program, UNFPA has provided support to the Kyrgyzstan parliamentary committee focusing on population and development. This committee has played an ever-increasing role on scrutinizing and questioning government policies addressing population and development issues and has held hearings on issues of concern. This attention from nationally prominent political leaders through an important national political platform has served to alert and inform the public on these issues through articles and broadcasts by the national media.

Support by UNFPA for parliamentarians to attend international parliamentary gatherings was a fine investment. Kyrgyzstan parliamentarians have attended international meetings of Asian Parliamentarians focusing on population ad development in Bangkok, Thailand and traveled to Addis Ababa, Ethiopia for the 2009 meetings commemorating and reflecting upon ICPD plus 15, the High Level Meeting on MDG5 and to the ICPD/15 Forum in Istanbul. Parliamentarians who attended the Ethiopia meeting found the worldwide exchange on population and development issues indicated to me that they found exposure to international perspectives on ICPD extremely valuable.
Interviews with senior NSC staff have indicated that the professional ties formed among NSC and State Registry System personnel cross-trained together will be continuing into the future. Further, ongoing relationships have developed between KRSU faculty and demographic experts who have visited Kyrgyzstan and taught seminars at KRSU, with joint research projects undertaken.

The dissemination of demographic information through the Internet enables broader public knowledge of Kyrgyzstan population data and the sharing of information. The NSC web site – www.stat.kg – makes available census information through its Web site – enabling informed exchanges and discussions of the data and their implications.

Further initiatives to generate interest in census and other demographic data on the part of policy makers and the general public include NSC-published thematic flyers on population, education and sources of income, and calendars with user-friendly census data. Atlases with census data in a map form and user-friendly multimedia discs with information on census data were to be produced, as well.

REPRODUCTIVE HEALTH

RELEVANCE

*Alignment with priorities and strategies of the government of Kyrgyzstan, other UN agencies and donors active in UNFPA mandated areas*

UNFPA activity in the health sector in Kyrgyzstan takes place under an extremely well organized framework, bringing together the various components of the UN system including independent UN agencies, bi-lateral and multilateral donors such as the World Bank, and important NGO partners. Through the Manas National Healthcare Reform Program (2002-2006), The Manas Taalimi Program (2006-2011) and a SWAp or sector wide approach of the multiple entities concerned with improving the quality of the country’s health care, a highly systematized and effective process has been put in place for coordinating the strengths of the diverse institutional stakeholders working in the varied components involved in the improvement of health care in Kyrgyzstan.

UNFPA works closely with the Maternal and Child Health team led by UNICEF which, in addition to UNFPA, includes WHO, USAID and ABT (a well regarded contractor with extensive experience working in health reform in the former Soviet Union). The issues under the purview of the committee are reproductive health strategy, perinatal care, and confidential inquiry into maternal death and near miss maternal deaths. Through the mechanism of the annual Health Summit – and its antecedent reviews of specific health sectors – UNFPA has participated along with the Ministry of Health of Kyrgyzstan, its UN partners (particularly WHO, UNICEF, GTZ and USAID) and bi-lateral donors in laying out the overall approach of the donor community to the improvement of health in Kyrgyzstan, and in defining the specific roles to be fulfilled by the UNFPA CO in this effort.
Through the rigorous analytical process, institutionalized as an integral component of the preparation for the semi-annual Health Summit, involving the financiers, development partners and the MOH, a detailed accounting of achievement, challenges and priorities going forward in the next six-month period is set forth to which all partners agree. This process has been vital in ensuring that all stakeholders, including UNFPA, are maximizing their specific contributions to improving the quality of health care and health services in Kyrgyzstan.

UNFPA has provided technical support to the MOH in developing the Reproductive Health Strategy for the period 2006-2015. It is clear that the MOH, in its planning and implementation relies on UNFPA to aid in support of continuing education and training of obstetricians and gynecologists, as well as family practitioners, midwives and feldshers. UNFPA help is seen as essential in supply of contraceptives, and in public education in reproductive health to young people. As many studies have underscored over the years, Kyrgyzstan’s medical facilities lack essential infrastructure. UNFPA has played an important role in providing furniture, equipment for delivery rooms and clinical practice rooms in family planning and family practice centers.

Vulnerable populations

The UNFA Kyrgyzstan Country Office portfolio in the area of Reproductive Health is a broad one and touches, as well, on population and development, as well as gender concerns. The RH portfolio encompasses the following areas:

I. Comprehensive Reproductive Health and Maternal Health
   A. Technical Support to Health Care Reform (Manas Taalimi)
   B. Ensuring Safe Motherhood with Effective Perinatal Care
   C. Implementation of near-miss case review and confidential inquiries into maternal deaths

II. Commodity Security on Reproductive Health Issues
   A. Supply of Contraceptives – based on government determined needs (customs, distribution plan, advocacy, capacity building, strategy) through the Logistical Management Information System and CHANNEL software program
   B. Community mobilization on reproductive health issues and reproductive rights with involvement of religious leaders
   C. Family Planning and Reproductive Choice

III. Improved access to information and services on reproductive health for young people to change behavior and prevent HIV, sexually transmitted infections (STI), and Gender-Based Violence (GBV)
A. Strengthening implementation of Youth Peer Education (Y-PEER) programs

B. Implementation of youth friendly services in the area of reproductive health

C. Healthy Life Style education for students within the vocational education system

As will be described in greater detail below, UNFPA’s RH sector work is particularly targeted to the needs of vulnerable populations – reproductive-age women in rural and urban areas, often living at or near the poverty level, youth and people with HIV. UNFPA has been active as well, in providing emergency medical assistance in conditions of humanitarian disasters.

According to all accounts, Kyrgyzstan has one of the highest (if not the highest) maternal mortality rates among former Soviet republics. Official statistics on the maternal mortality rate show an increase in this rate over the past four years (2005 – 61.0; 2006 – 53.0; 2007 – 62.5; 2008 – 58.9; 2009 – 75.3\(^8\) – with many experts believing that even these high percentages are underestimates of the extent of the program, with some citing material mortality rates as high as 104 per 100,000. The country’s poor economic conditions with limited resources available in the health sector, particularly in rural, remote areas, practitioners with inadequate clinical skills have contributed to the high mortality rate.

The country adopted a Reproductive Rights law in 2008 and has prioritized maternal and newborn health, creating a national Maternal and Child Health Unit under the country’s Ministry of Health. The achievement of Millennium Development Goals 4 (reduce by two-thirds between 1990 and 2015, the under five mortality rate) and 5 (reduce by three quarters, between 1990 and 2015, the maternal mortality ratio) are seen as country priorities.

UNFPA, in its focus on improving both the physical conditions for reproductive health service delivery and strengthening the competencies of providers of reproductive health services, is addressing the needs of women of all economic backgrounds – but particularly those women living in remote, rural areas – which are among the economically most deprived in the country. In its work with Y-PEER, the peer network of young men and women providing education and training in reproductive health and broader healthy lifestyle issues, UNFPA is addressing the needs of an often overlooked population in the area of reproductive health. In its work on contraceptive issues, UNFPA works directly with the MOH which has developed a process for ensuring that the free contraceptives provided by UNFPA are allocated to the neediest by the family planning and family practice centers. Further, UNFPA, through its small grants program to NGOs such as the Kyrgyz Family Planning Association, has brought education and outreach programs to remote and economically depressed areas. Such programs have enhanced community knowledge and led to support by respected community elders (aksakals) and influencers for reproductive education and access to contraceptives. Support for Healthy

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\(^8\) These statistics were confirmed, and the 2009 maternal mortality rate provided by Norgul Smankulova, National Program Officer, Reproductive Health, UNFPA Country Office, Kyrgyzstan.
Lifestyles curricula in lyceums also addresses the needs of youth for guidance in healthy lifestyle practices and knowledge of reproductive health issues.

**Contraceptives for the Poor and Vulnerable Population in Kyrgyzstan**

In keeping with the commitment of the ICPD Programme of Action supporting access to family planning for all, irrespective of their economic circumstances, the UNFPA Kyrgyzstan country office has been working with the Ministry of Health through a Working Group to determine the country’s contraceptive needs for poor and vulnerable populations. The Working Group has established criteria for support through this UNFPA-funded program, and contraceptives are made available to family planning centers and midwives for distribution to those deemed eligible for this support.

Kyrgyzstan does not manufacture its own contraceptives and the UNFPA funding for contraceptive purchase for the poor and vulnerable constitutes about 35% of the contraceptives imported into the country (other contraceptives are supplied by bi-lateral donors such as USAID and commercial importers). Since 2006, UNFPA has contributed significantly to the smooth operation of the contraceptive management process through its utilization of the Logistical Management Information System (LMIS) – which is a commodity management system enabling the tracking of the contraceptives procured through UNFPA. During the years 2005-2010, six trainings on LMIS operation have been conducted as well as trainings on the use of the newly developed contraceptives manual at the primary health care level, and medical eligibility criteria for contraceptives. During these training courses, participants learned how to input data into reference and operational electronic sheets, prepare reports and invoices, calculate average monthly contraceptive consumption using data reported from every Family Medicine Center (“Report on the contraceptive flow” -- Form 12-2) to identify minimum and maximum levels of the contraceptive stocks in the warehouses. Through the UNFPA and the Ministry of Health collaboration, the contraceptive information management system is gradually being introduced in the country to monitor quality and effectiveness of recording, flow and use of contraceptives.

In addition to LMIS, UNFPA, through its New York headquarters office, has introduced the CHANNEL software system which enables precise tracking of the delivery of contraceptives to the end user. CHANNEL has been piloted in the Talas region and three trainings on implementation of CHANNEL were conducted for health care providers, family planning coordinators and information technology specialists. While there have been initial technical difficulties in the use of CHANNEL (as is often the case with the rollout of new databases), following training and some modification of the software, the system is now working well.

To ensure users guaranteed and sustainable access to contraceptives in Kyrgyzstan, a number of actions are necessary: extending the spectrum of contraceptives offered to insured individuals under the complementary Drug Additional Package and reducing the required patient co-payment; ensuring ongoing data collection and analysis of contraceptive use; and further dissemination of the CHANNEL software with the updates
necessary to integrate it into the unified health information system. Other recommended actions included eliminating the regulatory limitations impeding broad accessibility to contraceptives and providing alternative dissemination mechanisms, such as social marketing and community-based services, as well as procuring contraceptives through NGOs.

It is clear that government ministries supported by UNFPA both desire and need further assistance in taking their work forward. With regard to contraceptive use, the Republican Medical Information Center, would like to expand the use of CHANNEL software to be applicable to contraceptives delivery through other donors.

Work with Youth

A vital component of UNFPA’s work in Kyrgyzstan over a number of years has been the support of Y-PEER activities. The Y-PEER approach, targeted to youth, seeks to engage young people in creative and culturally relevant education, training and outreach activities in the area of reproductive health and sexual well-being, defined in the broadest sense. It aims to promote a healthy lifestyle through a peer to peer approach, empowering young people to make responsible decisions. This approach is very much in keeping with the focus of the Programme of Action of the International Conference on Population and Development, as enunciated in Chapter 6, a section of which follows:

6.15. Youth should be actively involved in the planning, implementation and evaluation of development activities that have a direct impact on their daily lives. This is especially important with respect to information, education and communication activities and services concerning reproductive and sexual health, including the prevention of early pregnancies, sex education and the prevention of HIV/AIDS and other sexually transmitted diseases. Access to, as well as confidentiality and privacy of, these services must be ensured with the support and guidance of their parents and in line with the Convention on the Rights of the Child. In addition, there is a need for educational programmes in favour of life planning skills, healthy lifestyles and the active discouragement of substance abuse.

The idea of establishing the Y-PEER network was originally discussed in 1999 by a UN interagency group on youth, development and security. Since that time, with the initiative and support of UNFPA, the Y-PEER network has expanded and now includes youth from Central and Eastern Europe, Central Asia, the Middle East, north and east Africa and most recently, Brazil. Y-PEER was established in Kyrgyzstan in 2003.

In conservative areas, there is not much medical attention to contraceptive/reproductive health issues for young people. Y-PEER is important in opening up these questions. Young people in Kyrgyzstan tend to receive their advice on sexual and reproductive matters from friends – advice that can often be erroneous and harmful. With the abolition of the Soviet system of providing physicians with a special focus on adolescent health, young Kyrgyzstani men and women have lost knowledgeable medical advice and guidance in an area with serious implications for the health and futures.

While the incidence of HIV has been rising in Kyrgyzstan (as it has been in Central Asia generally) in the overall population, younger people are at particular risk and show the
largest number of registered cases. The figures for registered HIV cases do not reflect the total number of people with HIV, as many people (particularly younger people) do not consult physicians and even if they did, might not be tested for HIV. The growth in the number of people with HIV underscores the importance of UNFPA’s work in disseminating information on safe sexual practices, promoting the use of condoms, and supporting and strengthening the work of Y-PEER in its peer-to-peer educational programs addressing sexual and reproductive health, sexually transmitted infections and more generally healthy lifestyles.

Within the 2005-2010 period, the UNFPA Kyrgyzstan Country Office adopted Y-PEER tools on peer education, behavior change communication, prevention of HIV/STI and GBV, and involved young people in participating in the planning, implementation and evaluation of youth programs. Y-PEER Kyrgyzstan, within the 2005-2010 period, has evolved from an informal network to a formal non-governmental organization, registered in Kyrgyzstan in 2010. With its own executive director and small staff (program coordinator, finance manager and Web administrator), the organization is now able to more easily seek funding from diverse donors, in addition to UNFPA.

Closely related to the work of Y-PEER are the pilot initiatives promoted by UNFPA in developing Youth Friendly Health Services in three clinics in Kyrgyzstan. With the demise of health services targeted to adolescents, which was a feature of Soviet medicine, young people in Kyrgyzstan who have issues concerning reproductive health, must visit a family health center or family planning center – a setting in which they may feel quite uncomfortable and intimidated. Indeed, shy young people may feel so awkward in such settings whose clients are generally older individuals that they may well refuse to seek medical advice on important reproductive issues. In 2009/2010 three pilot Youth Friendly Clinics were established -- each one under a somewhat different organizational framework: one supported by government, one supported by the NGO Alliance for Reproductive Health and the third by a shared government/NGO model. Y-PEER volunteers may also provide support and counsel to young people visiting the Youth Friendly clinics.

Healthy Lifestyles

UNFPA has supported the development of a Healthy Lifestyles curriculum focused on students in Kyrgyzstan’s lyceums or vocational schools. The curriculum seeks to promote knowledge among young people of healthy choices in diet, exercise, avoidance of smoking and excessive alcohol and has also more recently moved into the area of reproductive health choices. The curriculum, which was developed with the support of the Republican Center for Health Promotion, was initially launched in the lyceums in 2002 with an initial manual and accompanying training. The manual was further developed in 2004, with the inclusion of specific lessons plans. The original 20 hour curriculum, which gained increasing support over time from teachers and community leaders has been revised, updated and expanded into a 30 hour curriculum. This enhanced curriculum is shortly to be reviewed by UNFPA.
Consideration of partners capacity in the development of program design

As noted above, UNFPA is deeply involved in collaborative efforts with the government of Kyrgyzstan, bi‐lateral and multilateral donors and other UN agencies in planning and implementing programs and projects in reproductive health. Consultations among all partners are frequent, facilitated by the physical location of partner UN agencies in UN House in Bishkek.

Strategies to promote national capacity development.

UNFPA works closely with the Kyrgyzstan medical colleges and the Kyrgyz Medical State Continuous Training Institute to strengthen medical education and continuing education for health care personnel from obstetricians and gynecologists to family practitioners, midwives and fieldshers. UNFPA has been working, as well, to integrate the most current best practices and approaches to reproductive health care into the medical college curriculum. UNFPA has supported the training of trainers to conduct these training sessions, seeking to develop the human capital to continue this work over the coming years and serve as national resources.

Through its work with the Republican Health Promotion Center, UNFPA has been working to strengthen the country’s focus on and capacity to develop attractive and engaging materials on reproductive health issues. Through its support of CHANNEL, a software system which enables precise tracking of the delivery of contraceptives to the end user, UNFPA has enhanced the secure delivery of this critical family planning component, and has focused the attention of senior government officials – including the head of the Republican Health Promotion Center and the MOH Drug Supply Department – to expanding the use of this system to tracking delivery and utilization of other pharmaceuticals.

The Y‐PEER network appears solidly based in Kyrgyzstan with volunteer commitment enhanced through opportunities to attend regional conferences outside the country for young people active in Y‐PEER. The many study and learning opportunities provided by Y‐PEER expands volunteers’ intellectual and social horizons and links them to an international network which will undoubtedly provide support and intellectual resources in the future.

The UNFPA CO continues its implementation in Kyrgyzstan of the WHO Beyond the Numbers methodology aimed at improving the quality of services delivered to pregnant women and newborns, as well as changing the attitude of politicians and other decision makers in the area of maternal mortality. In an effort to reduce the number of maternal deaths in the country, UNFPA has supported the development of two initiatives: The first is an inquiry into near miss cases of maternal deaths – the pilot effort is underway in Talas oblast and Suzak rayon. The second effort, known as the Confidential Enquiry into Maternal Deaths, is an initiative to identify the causes of material deaths in a manner strikingly different from that formerly practiced in the country. Rather than punish those responsible for the maternal deaths, this confidential enquiry has as its aim, the
Unearthing of the causes of maternal deaths so that physicians can learn from the situations encountered and improve their practice.

It appears, however, that the blame-free environment which the confidential enquiry process ought to foster, with a team of physicians conducting a confidential investigation into what had transpired, has not worked as originally planned. A knowledgeable observer noted the clash of competing interests operative in this area. Several members of the physicians committee tasked with investigating the maternal deaths are also employed by the Ministry of Health and are required to submit the findings they learn during the course of the confidential investigation to the MOH and to the Prosecutors Office. This compromises the independence and the integrity of the process (which was to be exempt from interaction with the prosecutor), according to a physician close to the confidential enquiry. He felt it was critical that there be no direct connection between the MOH and the confidential inquiry; without this guarantee, he believed the ability of the physicians committee to determine the cause of maternal deaths would be seriously impeded. Thus, obstacles to the effective functioning of the Confidential Enquiry need to be addressed in order for the initiative to successfully meet its objectives.

**Effectiveness**

* Achieving program results/progress toward achievement*

UNFPA tracks program progress through staff oversight, consultants reports, and collaboration with the SWAp process. UNFPA has undeniably contributed to the enhancement of the reproductive health status of the people of Kyrgyzstan during the 2005-2010 program period. To summarize its accomplishments (described in greater detail throughout this section):

1. Increasing access to reproductive health care services of improved quality and through its work across Kyrgyzstan, gathering and disseminating information on the needs of the country’s poor and vulnerable groups.
2. Improving the supply and distribution of contraceptives among poor and vulnerable groups
   - Ensuring reproductive health commodity security (RHCS) through the procurement of contraceptives and supplies, and the integration of the Logistics Management Information System (LMIS) at the national level
   - Building the capacity of service providers and program managers on basic family planning and logistics management
   - Improved access to information and services on reproductive health for young people enabling them to change their behavior and prevent HIV and STIs.
   - Advocate for government funding for purchase of contraceptives
3. Maintaining the youth peer (Y-PEER) education network and creating a governmentally recognized and self-supporting Y-PEER NGO
Establishing and supporting youth friendly services; strengthening the capacity of service providers to deliver client-centered, youth-friendly reproductive health education, counseling and services; and mounting an advocacy campaign on HIV issues focused on youth and high risk behavior groups.

Reproductive Health Publications

UNFPA fills a critical void in education and training in reproductive health through its publication of a vast array of materials targeted to diverse audiences ranging from practicing obstetricians and gynecologists, family practice physicians, midwives and feldchers to pregnant women and their families and young men and women of reproductive age. These publications, some of which are authored directly by UNFPA and published by the Fund, and others authored by experts consulting for other UN bodies and bi-lateral donors, are distributed by UNFPA to a wide array of locations. Hospitals, family medical practices, family planning agencies, non-governmental organizations, the Ministry of Health all receive copies of diverse publications. The special UNFPA publication program focusing on Islam and Family Planning – a unique contribution to dissemination of family planning information in the country’s religious community – is discussed further in this report’s section on cross cutting work with gender.

I am quite convinced that without UNFPA support for the publication of these important education and training materials, many of these important materials would have never seen the light of day. Indeed, due to limitation of funds, UNFPA can often make available only a limited number of these publications – meaning that distribution is not as widespread as would be desirable and the supply of guidelines and manuals for health care practitioners is quickly depleted. In addition to increasing the availability of such professionally-oriented materials , it would be beneficial if some of the materials meant for the general public were available at secondary academic and vocational schools, college/university and public libraries. A listing of the publications published, translated and/or distributed by UNFPA under the Reproductive Health program in the 2005-2010 period includes the following:

ENKIN, Practical skills on PEPC – WHO, Harvard School of Public Health
Integrated introduction on Pregnancy and Childbirth issue
Care during pregnancy, childbirth, postpartum and newborn child care;Guidelines for Clinical Practice (green), Johns Hopkins, WHO/UNFPA
These materials serve as the basis for both training of trainers and the training sessions themselves. While UNFPA can document the implementation of the training sessions, the issue of the effectiveness of the training and the use of the new technologies and approaches in daily practice is not well tracked or assessed. Consultant reports and Health Summit analyses have underscored continuing challenges in the quality of reproductive health care, particularly in emergency obstetrical situations.

While courses designed to build the capacity of practicing physicians to incorporate new approaches and technologies in obstetrical and gynecological care are meant to be carefully monitored and evaluated, it would appear that this is not always the case with
potentially deleterious effects on the capacity of physicians to utilize their new skills. It is recommended that trainers follow up with their students at three month intervals following the initial training to learn how the training has been incorporated into the trainee physicians’ practice, to see if the trainees have any challenges or problems with using the approach or technology and to provide the opportunity for trainees to pose questions and concerns to their more knowledgeable mentors. According to one knowledgeable individual, appropriate monitoring and follow up on training in the effective use of prenatal technologies missed the recommended three month monitoring period, and was only undertaken after a six month interval. At this point, it was evident that a number of the students had not adequately grasped the material presented and required further experience and support in integrating the technique into their medical practices. It is not clear how widespread these problems are. In designing the trainings it is also important to include physicians practicing in polyclinics; they were sometimes excluded with a preference given to physicians practicing in hospitals.

**Strengthening national capacity to provide high quality reproductive health information and services; evidence for use of skills and knowledge gained from the training conducted. Difference made by policy and system development support.**

Given the financial constraints faced by the government of Kyrgyzstan and lack of budget for printing of materials, it is clear that UNFPA has filled a void that might well not have been filled by any of the development partners in providing health information disseminated through family health centers, family planning centers, feldchers, midwives, the NGOs and the Y-PEER network.

As a result of the work of UNFPA, the SWAp collaborative process and other UN, multi-lateral and bi-lateral efforts, the MOH well recognizes the critical need for improvement of the healthcare workforce and the vital role high quality education and training must play in attaining an improved quality of reproductive health care. MOH officials are keenly aware that the government must find ways to support the supply of contraceptives to the most vulnerable. The constant dialogue – both by UNFPA individually through its contacts with the MOH, and as part of the collective efforts of SWAp – have over time resulted in the MOH prioritizing maternal and child health. The ministry’s creation of a special maternal and child health unit within MOH is evidence of this heightened focus.

As stated above, the UNFPA support of Y-PEER has led to the growth and expansion of the organization, involving a widening circle of young people trained to provide reproductive health information in culturally appropriate ways to their peers.

**Humanitarian Assistance**

In times of natural disaster or complex humanitarian crises, UNFPA is called upon to contribute its expertise to addressing the emergency situation on the ground. During the June 2010 events in Osh, UNFPA, through its central procurement process, was able to dispatch in a timely way packaged kits for use in obstetrical deliveries, as well as hygiene kits. UNFPA also dispatched kits to be used to treat rape victims. The Assistant
Representative of the Fund, Dr. Meder Omurzakov, traveled to Osh where he served as a member of the health team investigating health conditions in the city. UNFPA shared an office in Osh with WHO as it conducted investigations into the health consequences of the ethnic violence in the country’s second largest city. In 2007, a year in which several earthquakes hit Kyrgyzstan, the UNFPA CO provided reproductive health and hygiene kits to earthquake survivors.
EFFICIENCY

Efficient use of human, technical and financial resources to achieve given outputs

I have interviewed all UNFPA staff working with the country office in 2010. While several of the individuals are new or relatively new in their positions, others have been with the program for several years. All UNFPA staff members are very well prepared for their responsibilities within the country office, having worked in their areas of focus with other national or international organizations, having a detailed and nuanced sense of the country’s needs and available resources. Staff work in close proximity to each other and readily share information and insights. The financial control system in place is highly effective and professional.

There is a nice cross-generational mix of staff working on reproductive health issues, with two young people in important roles in youth programming and in reproductive health policy and implementation. The principal staff person specializing in RH has very rich experience both as a physician trained in gynecology and with further training and experience in medical records and hospital administration. It is clear from extensive interviews with reproductive health staff, that there is a deep commitment to their RH work – catalyzing them to making significant personal commitments to their activities. Given the changeable political climate in the country with its consequent interruptions of program delivery and policy dialogue, the staff, in my judgment, works at the highest possible level of efficiency and effectiveness.

Overlap and duplication of similar interventions

Through the rigorous collaboration integral to the operation of SWAp and within the MCH working group, which bring together the major stakeholders, overlap and duplication are, to all intents and purposes, eliminated. The shared knowledge by the development partners and financiers of each others activities enables partners to avoid redundancy and duplication.

SUSTAINABILITY

Creation and strengthening of local/regional networks and partnership to implement and sustain country program activities

As noted earlier in this section, the MOH is well aware of the need for improved education and training of health care providers and views this as a major priority. The country’s medical schools and the Kyrgyz Medical State Continuous Training Institute, together with the Kyrgyz Association of Obstetricians, Gynecologists and Neonatologists, as well as NGOs addressing health care issues are keenly focused are expanding education and training. The Y-PEER network is well established and is an independent NGO registered with the government and has its own director and small staff.
GENDER

RELEVANCE

Alignment with priorities and strategies of the government of Kyrgyzstan, other UN agencies and donors active in UNFPA mandated areas.

Although gender has become a separate area of focus for UNPA Kyrgyzstan only since 2008, it has always played a prominent role in the agency’s work portfolio. Earlier, gender was addressed under the Population and Development component. This area, so significant in the ICPD Programme of Action, with so many of its chapters devoted to issues of specific gender concern, has been considered through a wide array of lenses. Gender issues cut across the UNFPA’s work in a number of areas – encompassing population and development, reproductive health as well as concerns focusing on the many issues around the concept of gender equity and opportunity and domestic violence

Under the UNFPA Strategic Pan for 2008-2011, in which the agency sets forth its proposed directions throughout the world, the agency’s worldwide goal for its gender work was set out in the following language: Gender equality advanced and women and adolescent girls empowered to exercise their human rights, particularly their reproductive rights, and live free of discrimination and violence. The outcomes to be achieved in furtherance of this goal were

- Gender equality and the human rights of women and adolescent girls, particularly their reproductive rights, integrated in national policies, development frameworks and laws.
- Gender equality, reproductive rights and the empowerment of women and adolescent girls promoted through an enabling socio-cultural environment that is conducive to male participation and the elimination of harmful practices
- Human rights protection systems (including national human rights councils, ombudspersons, and conflict-resolution mechanisms) and participatory mechanisms are strengthened to protect the reproductive rights of women and adolescent girls, including the right to be free from violence.
- Responses to gender-based violence, particularly domestic and sexual violence, expanded through improved policies, protection systems, legal enforcement and sexual and reproductive health and HIV-prevention services, including in emergency and post-emergency situations.

The UN system has taken an increasingly strong stand on strengthening efforts to mainstream gender in all programmatic spheres of activity and to strengthen the capabilities of the UN system as a whole in the area of gender. The Triennial Comprehensive Policy Review of Operational Activities for Development of the United Nations System (22 October 2007), highlighted the need for UN organizations to mainstream a gender perspective and to pursue gender equality and the empowerment of women in their country programs while emphasizing the need to take a coordinated approach in their work on gender related issues and to share good practices, tools and
methodologies. In 2008, The UN Development Group Task Team on Gender Equality developed the UN Country Team Performance Indicators for Gender Equality to provide a yearly assessment of gender mainstreaming at the UN Country Team level. (This “scorecard” has not yet been utilized in Kyrgyzstan).

Combating violence against women has been given priority in the UN System through the Campaign of the UN Secretary General “UNiTE to End Violence Against Women” – initiated in 2008 and officially launched in Kyrgyzstan in spring 2010 during the official visit by UN Secretary - General Ban Ki-Moon to Kyrgyzstan. UNFPA headquarters has mobilized funds provided by the Austrian Government to support seed activities in Kyrgyzstan under the country’s Joint Programme on Violence Against Women to be managed and implemented by the UNFPA Country Office. In November 2009, Rashida Manjoo, the UN Special Rapporteur on Violence Against Women, its Causes and Consequences, conducted a mission to Kyrgyzstan and issued her report in May 2010.

In its work in pursuance of the UNFPA’s overarching gender goal, the UNFPA Kyrgyzstan CO has placed particular focus on work with religious groups to address gender-based violence, as well as concentrating its efforts on supporting national capacity to implement policies and legal enforcement, with emphasis on reproductive rights and gender-based violence prevention.

UNFPA’s focus and expertise in gender based violence has been recognized by other members of the UN family of organizations in Kyrgyzstan – with UNFPA designated in 2010 as the coordinating agency and secretariat for the Joint Programme focused on Eliminating Violence against Women. The UNFPA CO is to play an active role in all four of the Joint Program’s components: issues related to policies and implementation of laws and conventions, improving the official data collection system on violence against women, changing traditional gender stereotypes and norms, and protecting and assisting survivors of GBV.

UNFPA is the lead agency in work to improve the quality of data collection and analysis on violence against women through providing technical support in elaborating the interagency data collection methodology on VAW – with information on such issues as early marriages/polygamy, bride kidnapping and domestic violence, as well as national indicators on domestic violence to be integrated into the routine sectoral reporting system. UNFPA, under the Joint Program on VAW, is also the lead agency in working to ensure that comprehensive services for victims of VAW are widely available and accessible.

As many commentators and consultants have pointed out (including the UN Special Rapporteur on Violence against women in her May 2010 report on her mission to Kyrgyzstan in November 2009), the government of Kyrgyzstan has a highly respectable track record at the policy level in expressing commitment to advancing gender equality and women’s rights. A delegation from Kyrgyzstan participated in the Fourth International Women’s Conference in Beijing, China in 1994, and signed the Beijing Platform for Action in 1995. The government of Kyrgyzstan ratified the Convention on
Elimination of All Forms of Discrimination Against Women (CEDAW) in 1996, signed the Optional Protocol of CEDAW in 2002, and has reported three times on its adherence to CEDAW. Kyrgyzstan is also a signatory to the Convention on the Rights of the Child (1994) and the Millennium Development Goals.

Kyrgyzstan’s 2003 Constitution provided that all persons should be equal before the law and that no one shall be subjected to discrimination on the basis of gender. The country’s 2003 Law On Social and Legal Protection against Domestic Violence set out legal protection for persons victimized by domestic violence. Also in 2003, the government adopted the Law on State Guarantees for Ensuring Gender Equity. The government also developed a National Plan of Action for Achieving Gender Equality (2002-2006 and 2007-2010) which is part of the country’s national development strategy.

But, as the expert observers and consultants have repeatedly underscored, there is a wide gap between the government of Kyrgyzstan’s policy-level adherence and commitment to gender equality and women’s rights and development, institutionalization and promulgation of the regulations and detailed guidance that would turn these proclamations into effective laws and government agency mandates. For example, the 2007-2010 Plan of Action for Achieving Gender Equality, while indicating important objectives in gender balance in decision-making, strengthening institutional mechanisms, reducing gender violence and improving information has “no institutional mechanism and insufficient budget allocation to implement the plan” and “its objectives and indicators are not reflected in program documents of the ministries and municipal administrations.”

The United Nations Development Program (UNDP) Country Office in Kyrgyzstan, at the request of the Government of the Kyrgyz Republic, undertook an exhaustive Functional Review of the National Gender Mechanism in the Kyrgyz Republic which was issued in 2009. This review underscores the challenges confronted by all organizations and individuals working with government entities tasked with a focus on gender issues. The study details an ever-shifting locus of engagement with gender issues. The State Commission on Family, Women and Youth tasked with primary oversight of gender issues was disbanded in 2000, with the successor established only in 2003. The National Council on the Issues of Women, Family and Gender Development under the President of the Kyrgyz Republic was given responsibility for gender issues; in May 2008, the Social Development Division of the Prime Minister’s Office of the Kyrgyz Republic took on the implementation of gender policies. A November 2009 reorganization of the government saw responsibility for gender issues moved to the Ministry of Labor, Employment and Migration.

Gender focal points (GFP) were designated in each government agency and local self-government body, tasked for responsibility for gender policies in their organizations. As the Kyrgyzstan Gender Mainstreaming report points out, however, the GFPs have been largely “ineffective” owing to a lack of standard terms of reference, no methodological

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9 See the 2011-2016 UNCT Kyrgyzstan Gender Mainstreaming Strategy (Bishkek 2010), developed by the UN Country Team in Kyrgyzstan for an incisive critique of the implementation by the government of the Kyrgyz Republic of its National Plan of Action.
guidance, weak capacity in gender analysis and planning and an absence of systematic monitoring and evaluation.

It is within this turbulent and unsettled context, that the UNFPA gender program work has been accomplished.

Guiding its programmatic gender work, the UNFPA CO developed a Strategy for the years 2007-2009 on Engagement with Faith-Based Organizations for Prevention of Gender Violence and Its Consequences. During this period, UNFPA worked with the existing governmental bodies, the State Committee on Religious Affairs, women’s NGOs, representatives of faith-based women’s NGOs and independent experts on gender issues. UNFPA gender work has including training, research, information campaigns, strategy development and, data collection improvement and dissemination. The program conducted an informational round table for a wide range of stakeholders including staff of muftiyats and the Committee on Religious Affairs.

An important vehicle in facilitating information sharing and catalyzing joint planning and collaborative program activities has been the Kyrgyzstan UN Gender Theme Group. Established in 2004, chaired by the UN Resident Coordinator with technical support provided by the UNIFEM Gender Adviser, GTG has served as an important rallying point for discussion and strategizing on gender issues and advocacy and policy initiatives to address areas of concern. Its membership has consisted of the Gender Focal Points of eight UN organizations – the ILO, UNFPA, UNDP, UNHCR, UNICEF, UNIFEM, OHCHR and WHO. It implements an annual work plan utilizing fiscal contributions from member organizations. The GTG has contributed to gender mainstreaming in strategic policy frameworks, released a UN Country Gender Assessment in 2008, submitted and presented a UNCT Confidential report on CEDAW and engaged in collective advocacy and joint programming to target areas of gender inequality. In 2010, the GTG was engaged in planning, developing and implementing a gender mainstreaming strategy going forward from 2011-2016. Through this process, the GTG prioritized six key issues for collective focus:

- Facilitating gender mainstreaming in key policy frameworks – UNDAF, JCSS –
- Facilitating gender mainstreaming in key government agencies including national women’s machinery
- Increasing women’s and girls’ access to social services (social security, pensions, housing)
- Reducing Gender-Based Violence, Violence Against Women (GBV/VAW), -- domestic violence, trafficking, bride kidnapping, early marriage
- Reducing Maternal Mortality
- Improve Male health and Life span

The GTG collective planning process also resulted in identification and agreement on Four Key Results areas: (1) Capacity of the UN Country team (UNCT) to promote gender equality and women’s empowerment through gender mainstreaming is enhanced; (2) UN staff and management are held accountable for gender equality and gender
mainstreaming; (3) gender mainstreaming processes throughout UNCT are strengthened in advocacy, policy and programs; (4) improved ability within UNCT to monitor allocation and expenditures on gender equality are tracked and reported to increase use of financial resources to achieve gender equity goals.

UNFPA has been actively involved in all these areas, so coordination and joint planning with the GTG will be essential in the most effective and efficient use of agency resources in accomplishing its gender work program.

Vulnerable populations

Following the dissolution of the Soviet Union, Kyrgyzstan has seen a resurgence of patriarchal traditions “where women view and depend on the family as the centre of their life and adopt a position of obedience and submissiveness.” This is particularly the case in rural areas, in which some two-thirds of the country’s population lives. Along with this growth in traditionalism, have come increases in such practices as bride kidnapping, early “forced” marriage and polygamy. According to surveys undertaken with the support of UNFPA and other organizations, family violence, especially violence caused by early and forced marriages and bride kidnapping is the most common form of violence in Kyrgyzstan.

The causes for this resurgence are multiple. With the collapse of the USSR and the economic shift from a centrally planned to a market economy, Kyrgyzstan underwent severe economic dislocation, with a poverty rate in 1999 reaching 55% of the population. While economic recovery ensued following this low point, Kyrgyzstan still remains a poor country, with, according to the World Bank, an estimated 35 percent of the population living below the poverty line in 2009. Divorced, single and low-income women, particularly in rural areas, face the most difficult financial circumstances. Lack of economic opportunities and an increasing traditional gender division of labor (women concentrated in education, health and social services with lower salaries than in the traditional male sectors such as communications and construction) have resulted in a declining share of economically active women in the labor force. Government spending on social assistance has declined steadily (from 15.3% in 2003 to 10.5% in 2007) – making women increasingly economically and socially vulnerable and increasing their risk of experience violence.

Documentation of the extent and rise of domestic violence and its impact on women of all social strata is abundant. In 2008, UNFPA published a report by Anara Moldosheva on “Violence Against Women in Kyrgyzstan; Baseline Assessment.” Human Rights Watch in 2006 noted the rise in violence in its report “Reconciled to Violence: State Failure to stop domestic abuse and abduction of women in Kyrgyzstan.” The Moldosheva

study found that one in four women interviewed had suffered physical violence in the home, with 40% denied the right to work outside the home or seek an education. A recent study sponsored by the Association of Crisis Centers in Kyrgyzstan and presented to the UN Gender Theme group documented the widespread nature of violence. Sexual violence against women, including sexual harassment in the workplace, is an unacknowledged problem in Kyrgyzstan, even though statistics indicate that the ratio of crimes of a sexual nature, as a proportion of the overall number of crimes against women is increasing. Psychological pressure, cultural traditions, and the behavior of authorities responsible for applying the relevant laws against various forms of violence discourage women from filing complaints.

The extent of bride kidnapping is not well documented, as it is not well reported—with some estimates that at the village level, prevalence may be as high as 80%. The Association of Crisis Centers reported an average of 250 bride kidnapping cases a year. Wife beating is a problem in Kyrgyzstan with – according to one survey conducted by the National Statistical Committee, –31% of women between 15 and 19 believing that a husband has the right to beat his wife in various situations. Trafficking of women for sexual exploitation and forced labor both inside and outside Kyrgyzstan is a serious problem.

There is a high level of stigma, resulting in discrimination and violence directed toward lesbian, gay, bisexual and transgender people. A 2008 report by the NGO LABRYS, focusing on lesbian and bisexual women reported, on their experience of forced sexual contacts and family pressure to change their sexual identity.

NOTE: While through interviews and selected documents, I have information on a number of initiatives undertaken by the gender component of UNFPA’s CO since its establishment as a separate component since 2008, I do not have a detailed breakdown on all of its specific activities. Through looking at the budget data for projects coming under the gender component rubric, I can observe that in 2008, in addition to a staff salary allocation, UNFPA CO funds were used for work on CEDAW, the 16 Days Campaign against violence, information and education materials on gender based violence and training on gender. UNFPA funds for Y-PEER education on sexual and reproductive health and skills and counseling on sexual and reproductive health also had relevance to promoting gender equality and diminution of violence against women. In 2009, expenditures included training on the law on reproductive rights, a round table on GBV, training on gender and gender based violence, UN Joint Program on VAW, information and education materials on GBV. In 2010, gender component activities expenditures also included support for the UNiTE campaign, monitoring activities, emergency response activities addressing GBV (in connection with the 2010 violence in Bishkek and Osh, and youth training.

Consideration of partners capacity in the development of program design

Kyrgyzstan is fortunate in that it is home to a number of non-governmental organizations with specific concerns regarding gender issues. The presence of an active, engaged NGO sector in this area is particularly important given the perpetual changes in the national
government machinery tasked with attention to gender issues. Structures have been set up, have operated in a limited fashion, have been abolished and have then been re-established under different names and in different locations within the national government. Currently, gender issues have been placed under the purview of the Ministry of Labor, Employment and Migration. While Kyrgyzstan is a party to many of the major pieces of international legislation focusing on gender rights – particularly the Convention on the Elimination of Discrimination Against Women (CEDAW), and has filed the requisite reports detailing its compliance with its national obligations under the treaty – the national government under the Bakiyev regime did little to seriously address significant gender disparities in such important indicators as economic well-being, school attendance and most important, gender based violence.

It is thanks to the work of dedicated advocates in the NGO community focused on gender issues – such as the Association of Crisis Centers -- members of the previous Parliament (particularly several women who served as members of the Parliamentary Committee on Population and Development), UNFPA, other UN bodies and bi-lateral and international donors, that after a number of years of inaction, the Ministry of the Interior has finally begun to issue protective orders for women subject to domestic violence. It has taken parliamentary hearings, roundtables throughout the country, ongoing advocacy efforts for the responsible political officials to order adherence to the national law On Social and Legal Protection from Family Violence (passed in 2003) which provides for the issuance of such protective orders. As recently as December 2010, UNFPA was supporting a roundtable in Bishkek – bringing together representatives of government, NGOs and the international community to address the development of a seamless process for assisting women subject to domestic violence to easily access the protective orders and other services (such as shelters) so vital to their continued safety and well-being.

UNFPA has devoted considerable thought to maximizing its contribution to the work of ensuring gender equality, protection against gender violence and building the capacity of girls and women to advocate for their rights in a wide array of sectors. After assessing the areas of focus on the organizations active in the field, UNFPA concluded that it could play a valuable role and serve a heretofore unmet need by focusing on gender-related issues within the country’s Muslim religious community. As so much of UNFPA’s work is truly cross-cutting, UNFPA’s decision to work closely with Mutakalim – a non-governmental organization composed of religious women activists– and other Muslim religious leaders and organizations impacts both on reproductive health and gender issues. UNFPA has worked closely with Mutakalim and its other partners in promoting the highly regarded series of publications on Family Planning in Islam – available in Russian and Kyrgyz and citing a number of passages from the Koran and hadith (traditional teaching) which demonstrate to observant Muslims the support within the core Islamic tradition for family planning (interpreted as “setting in order” in the written publications). UNFPA has supported publication of the attractive pamphlets, as well as other materials oriented to the religious community.

Building on its work and growing ties to Muslim organizations concerned with gender issues, women’s rights and physical and mental well-being, UNFPA supported unique research into the knowledge and views of Muslim religious leaders throughout the
country on the prevalence of domestic violence, bride-kidnapping, polygamy, trafficking, and early marriage in their communities and their views on such actions. Working with a professor of theology from Al-Azhar university, experienced in conducting research with religious officials, UNFPA convened a seminar including country gender experts, NGO leaders, researchers and government officials working in the gender area to define a culturally-sensitive framework for learning the views of influential Muslim figures on significant gender issues in their communities. The study findings, which were shared with a wide range of government, international and NGO organizations, indicated that the more highly educated imams and muftis were aware of the violence within their communities of the faithful, with a number of these men speaking out against wife-beating, polygamy, marriages decided by parents without their children’s agreement and early marriage. Less well-educated religious figures in rural communities were less aware and concerned about gender-based violence manifest in bride kidnapping, early marriage, and wife-beating. Interestingly, many religious figures did not object to polygamy and saw it as sanctioned by Islam. UNFPA will continue to build on its ties with the Muslim religious community and looks to expanding its work with religious leadership to include the Russian Orthodox community.

The UNFPA gender component has close ties with a wide network of NGOs and independent experts working in diverse gender-focused areas. A prominent example of UNFPA’s good use of expert national resources in designing programs to address the root causes of violence against women was its work with Rozetta Tiurakulovna Aitmatova, head of the public foundation Center for Women Support since 1996 and author of many publications focusing on gender issues. Ms Aitmatova was selected by UNFPA to serve as editor of its initial issue of WE, a publication whose first issue explored bride kidnapping from diverse perspectives. Additional national gender experts contributed their views in the publication designed to foster dialogue on this controversial Kyrgyz “tradition.”

UNFPA’s gender program has devoted much energy to involving religious leaders in its work, seeking to include this influential sector of the national community as “respectable and competent allies in raising awareness [of violence against women], especially among young people, on their rights and obligations as well as joint actions aimed at elimination of violence.”

Strategies to promote national capacity development

UNFPA is an active presence in the work of the UN Gender Theme Group – which brings together UN agencies and others (the latter in expanded sessions) in Kyrgyzstan sharing information on their gender-focused work and planning for joint activities.

GTG has its own annual work plan with resources donated by each member organization to its collective work. Important recent activities include the commemoration of the 30th Anniversary of CEDAW in 2009 and the annual Sixteen Days of Violence campaign,

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13 Nurgul Kinderbaeva [UNFPA National Program Analyst on Gender], WE --initial issue on Ala Kachuu /Bride Kidnapping (Bishkek: UNFPA, 2009) 24.
which over the past several years has increased its scope and reach. Within the framework of the Sixteen Days Campaign in 2010, UNFPA organized the following events:

- Press-conference on 25th of November
- A seminar, together with gender expert Anara Moldosheva, focusing on the use for policymaking and lobbying of monitoring and evaluation instruments on Gender-Based Violence
- Roundtable “Coordination issues between local self-governments and municipal bodies in prevention of domestic violence and helping the victims” (Jointly with OSCE, Bishkek city administration, City Administration of Internal Affairs, PF “Center for research of democratic processes”)
- Flash mob actions dedicated to the Sixteen Days Campaign targeted at young people (UNFPA, Y-PEER, UNDP)
- Exhibition of young people’s works titled “From Crisis to Renewal: Generations of Change”
- Sub-regional conference “From conflict and crisis to renewal: generations of change” in Osh

In 2011, the GTG will be expanding its membership to include organizations which have not, characteristically, been involved in its work up to this point. The GTG also intends to devote some of its resources to further developing the capacity of its members to understand the multiple and interrelated gender issues.

UNFPA continues to work with the country’s major NGOs concerned with gender issues and issues a variety of contracts for special services provided by these organizations. The Association of Crisis Centers, for example, was awarded a contract by UNFPA to work in Osh for three months following the June violence. UNFPA materials on gender issues are often displayed at the NGOs – including such publications as *WE* which is focused on issues related to violence against women and the violation of the rights of women and girls. *WE* is also seen as a valuable information and education tool in outreach to Kyrgyzstan’s religious community.

As noted earlier, an important contribution both to an understanding of the general socio-economic conditions in Kyrgyzstan and the specific environment in which women and girls are functioning in the country, has been UNFPA’s support to the publication of gender disaggregated statistics through *Women and Men of the Kyrgyz Republic*. This publication is now eagerly awaited throughout the county and plays an important role in enabling government analysts, NGO activists and international donors to learn in a simple and transparent manner women and girls status vis a vis a wide range of educational, economic and social indicators. This information is vital in enabling the public and private sectors to determine targets for change in these indicators where women are faring poorly.

In the 2005-2009 Country Programme Action Plan between the Government of Kyrgyzstan and UNFPA, the government sought support for the [then] National Commission on Family, Women and Gender in policy review, implementation,
monitoring and evaluation through an array of activities with the objective of strengthening national capacity to monitor, advocate, educate legislate and train on gender related issues. Specifically, under the rubric of “enhanced implementation of national gender policies,” the government sought UNFPA assistance for:

- support to respective Government structure with participation of NGOs with expertise of adopted national legislative documents,
- training of senior Government officials on gender equality and equity;
- development and dissemination of IEC on gender equity and equality
- supporting incorporation of gender topics into national educational system;
- support in establishment and implementation of monitoring and evaluation system on gender policy implementation;
- development and dissemination/broadcast of printed/audio/video materials on RH/gender issues
- develop and implement national legislation including ministerial regulation on sexual/reproductive/gender rights
- support the development and implementation of gender training curriculum for the judiciary and law enforcement agencies.

A second area of focus in which the government of Kyrgyzstan sought UNFPA assistance was to support a non-governmental legal facility and establishing legal counseling facilities in provinces to provide legal advice to women under the new legislation.

Major changes in the governance structure of Kyrgyzstan ensued between the time of signing the initial Country Programme Action Plan (December 27, 2004) and the planned termination date of country plan in 2009. The government of Askar Akayev was overthrown, and the administrative machinery for gender issues was transformed. It, therefore, became difficult to implement a number of the ambitious goals set forth in the Country Action Plan with government counterparts as the structure was so much in flux throughout the period and few government resources were allocated to gender issues. Despite this, UNFPA has played a significant role in the overall task of enhancing implementation of gender policies through its work. In 2008, in the midst of the 2005-2009 Country Programme Action Plan, and following the UNFPA Strategic Plan, UNFPA’s gender-related work assumed a more prominent role within the Fund, becoming a major program component, rather than an element within the Population and Development program.

UNFPA has played a pivotal role in convening both NGOs and individuals with expertise in gender issues to consult with government officials (as available) and to strategize with each other. It has initiated and played an innovative role in reaching out to religious and traditional leadership such as the Muftiyat (Council of Islamic clerics), and the aksakals (respected male elders who serve on village or neighborhood courts) and to the NGO sector – with a particularly strong partner in the form of the faith-based organization, Mutakalim.
In 2009, the Government of Kyrgyzstan and UNFPA extended the 2005-2009 Country Programme Action Plan for the years 2010-2011. The text of the Country Programme Action Plan, to which both the Government of Kyrgyzstan and the UNFPA assented, called for “substantial technical and financial strengthening of work in promoting gender equality policies, and policies and services to prevent gender-based violence. It called for UNFPA’s gender program component to “continue supporting the government’s efforts in prevention of gender-based violence through a comprehensive inter-agency system of data collection on gender based violence, awareness raising and information campaigns aimed at various population groups and government entities and promotion of the law on reproductive rights. In collaboration with UN agencies, special emphasis will be placed on strengthening the coordination mechanisms for gender policies elaboration and implementation, including coordination of government response to the violence against women.”

In this period, once again, the fall of a president and his administration, as well as the outbreak of ethnic violence in the South, hindered dialogue and support to relevant government agencies and slowed program planning, and implementation. But even so, programmatic work went on through roundtables, trainings, development and dissemination of educational and informational materials, and advocacy efforts in collaboration with partner organizations.

**Effectiveness**

*Achieving program results/progress toward achievement*

Leaders of major country NGOs, individuals with widely-regarded gender expertise, as well as senior government officials (such as the head of public information for the Ministry of Justice) spoke to me of the important role played by UNFPA’s gender component in multiple areas addressing gender-based violence. In partnership and in various forms of association with the religious community, government officials and NGOs, the UNDP gender component has worked to raise awareness, advocate for enforcement of the laws “on the books” to both forestall violence and protect its victims. Through its publication of *We* – an attractive publication in Russian and Kyrgyz – UNFPA has sought to highlight for a broad readership the issues of bride kidnapping, early “forced” marriage, polygamy and wife-beating. UNFPA has supported the work of NGOs such as the Association of Crisis Centers in providing counseling and support to victims of domestic violence, and supported their advocacy work. Through its roundtables with religious leadership, UNFPA has sought to engage this influential group of leaders in public opposition to bride kidnapping, forced marriage and wife beating – indicating that such actions are contrary to the teachings of Islam. UNFPA has been spearheading efforts and working with the National Statistical Committee to collect statistics on violence across the country – a fundamental step in gaining a detailed and nuanced understanding of the scope of the problem, pinpointing areas confronting higher levels of violence and crafting appropriate plans to counter the violence.
As noted above, UNFPA has been a central partner in the work of the UN Gender Theme Group, and has been actively involved in shaping its work plans and its outreach and promotional activities. UNFPA is also serving as a lead agency for the UN Joint Programme on Eliminating Violence Against Women. The importance of UNFPA’s youth work and the contribution of Y-PEER in fostering gender equity and women’s rights, in addition to its work in reproductive health needs to be highlighted. The very activities of Y-PEER, themselves --even when not directly articulating issues of gender equality and women’s rights -- bring together young men and women in contexts of equality and mutual respect, these collaborative projects give young women and men equal roles in shaping organizational plans and projects and lay important foundation stones for future shared efforts by these same men and women on important public policy and human rights issues.

**EFFICIENCY**

*Efficient use of human, technical and financial resource to achieve given outputs*

The principal staff member responsible for the Gender component has extensive experience in this area and a wide network of contacts. She is well known and highly regarded by the organizations and individuals in Kyrgyzstan working in gender issues.

UNFPA has developed close relationships with NGOs working in diverse and complementary dimensions of gender equality and women’s rights. Interviews by this consultant have underscored the importance of UNFPA’s leadership in addressing gender-based violence. UNFPA has excellent convening power, and through the workshops and conferences it has organized, the Kyrgyzstan Country Office has brought together individuals and organizations working in the intersecting and interrelated issues concerning gender equity and mainstreaming in education, health, human services, law enforcement and criminal justice, and the business sector.

*Overlap and duplication of similar interventions*

As noted earlier, the Gender Theme Group has been playing an essential role in enabling its member UN organizations to share information on planned activities, collaborate where feasible and build both individual organizational capacity and collective strength in assessing gender issues and developing appropriate interventions. The UNFPA gender program is in close contact with the country’s major NGOs working on a wide array of gender based violence and gender equity issues.

**SUSTAINABILITY**

*Creation and strengthening of local/regional networks and partnership to implement and sustain country program activities*

The gender program’s path breaking work with the religious community in the Kyrgyz Republic has led to an ongoing and trusting relationship between NGOs influential in the
religious community such as Mutakalim, a number of progressive imams, as well as aksakals in diverse communities across Kyrgyzstan. The publications program supported by UNFPA tailoring materials on family planning and Islam to the religious community have been effectively disseminated and utilized by NGOs and religious authorities in addressing concerns by observant Muslim families as to the acceptability of family planning in Islam. As has been noted above, roundtables and forums have been held in diverse oblasts in Kyrgyzstan with Muslim religious leadership; this program of activities will be continuing and expanding.

UNFPA financial support has enabled widely respected organizations such as the Association of Crisis Centers to expand their services, reach out to remote communities, and involve hitherto neglected communities. NGOs such as the Kyrgyz Family Planning Association and the Reproductive Health Alliance in Kyrgyzstan, working in reproductive health, play an important role in furthering UNFPA’s work in gender equity and elimination of GBV and play important complementary roles to the gender component’s work.
LESSONS LEARNED

POPULATION AND DEVELOPMENT

(1) The availability of a concise and easily accessed overview of the country’s demographic profile as presented in the annual publication of *Women and Men of the Kyrgyz Republic* – financially supported since 1998 by UNFPA – has been readily welcomed and is eagerly anticipated each year. The availability of the Census 2010 population and housing data on the Internet, and through print and other means, is another important step in informing the public of the national demographic profile and issues of significance going forward.

(2) Cross-training of individuals working in compiling and reporting statistics on diverse demographic issues was greeted with real enthusiasm by demographic professionals and is seen as a significant contribution to enhancing the validity and accuracy of the country’s demographic work.

(3) UNFPA’s initiatives in working with members of the Parliament of Kyrgyzstan serving on the Committee on Population and Development has proved to be a valuable approach in sensitizing important national influentials to the importance of the highest quality of demographic information in national planning and addressing national needs, and in meeting the Kyrgyz Republic’s responsibilities under the ICPD Programme of Action. UNFPA staff assistance for the work of this committee has been essential for the transmittal of timely information and updates on vital demographic issues. Support for members of Parliament to attend regional meetings of parliamentarians concerned with population and development have also been useful in catalyzing and generating parliamentary support for government planning, policies and programs consistent with the ICPD Plan of Action.

REPRODUCTIVE HEALTH

(1) It is important to collaborate more directly with the Ministry of Health in the nomination/selection process of individuals to serve as trainers of trainers and as trainers for continuing education courses for health care professionals working in the reproductive health area. The trainers are critical to the success of the training program and need to be chosen with care, based on their theoretical and practical knowledge and their commitment to fulfilling their training responsibilities at the highest level.

(2) It is vital that follow-up to training of health professionals in new medical approaches to antenatal, neonatal and emergency obstetrical care be conducted in a timely fashion, with initial monitoring no more than three months following the training, ideally two months post-training. This is a critical step in the training process to ensure that the techniques taught are correctly applied and that concerns and questions are addressed.

(3) Document the steps taken in provision of assistance in emergency situations such as complex humanitarian emergencies and natural disasters. Developing a manual outlining
the processes followed and lessons learned will be a useful resource for staff new to the work and partners in the field. Contact hospitals, family health centers that received UNFPA support for their reflections on the support process and recommendations for any enhancements to the process in the future.

3) Work with educators in lyceums and academic secondary schools to collect best practices in teaching Healthy Lifestyle courses. Teachers in rural communities have sometimes encountered challenges in teaching the curriculum (particularly the sections dealing with reproductive health). Develop a repository where successful strategies in teaching this and other material are described and community outreach initiatives are shared. Student perspectives on the course and its impact on their lives could be included, as well.

(4) In the launching of new software and data base systems, plan for sufficient time for staff members to learn the new systems, pose questions and concerns and work with technical experts to address any technical problems identified.

(5) Devote more effort to explaining to the medical and legal professions in Kyrgyzstan the rationale behind the Near Miss Cases Review and the Confidential Enquiry into Maternal Deaths. A clearer understanding of the purpose and goals of these initiatives could lead to greater support by these professions to these efforts and enable the work to go forward more successfully. UNFPA should ensure that prosecutors and ombudsmen are informed about the Confidential Enquiry and, along with the relevant Ministry of Health officials, strongly encouraged to support this effort.

(6) Seek resources for a shared library of electronic journals and print materials focused on reproductive health, health education, and health policy. Collaborate with WHO, UNICEF and other UN agencies in securing resources and housing the library within UN House and make electronic subscriptions available to RH staff.

GENDER

(1) It is particularly important that UNFPA’s Gender component continue and strengthen its work with the religious community in Kyrgyzstan. As a result of recent unrest and violence in both Bishkek and Osh, there is an increasing tendency to blame Islamic militants for these actions. Such conditions make it essential to involve the religious community, through non-governmental organizations and more formal bodies, in activities with important shared goals and collaborative projects such as reducing violence against women in its many forms. The gender programmatic work should also be particularly attentive to engaging established and emerging leaders from the country’s diverse ethnic groups in its work.

(2) In the volatile political and social environment in Kyrgyzstan, it is critical that the gender program respond quickly and creatively to opportunities created by changing circumstances. The program has demonstrated this capacity most innovatively by developing a program with youth in Osh, following the spring 2010 ethnic violence, to
employ the arts as a vehicle for documenting gender violence. It is particularly important to bring together youth from the country’s diverse ethnic groups and faith communities in such programs.

(3) Engaging government, NGOs, academic and religious leaders together in dialogues on issues relating to gender based violence can be highly productive and catalyze increased interaction and collaboration.

(4) Easily accessible, readable and attractive materials such as *Women and Men of the Kyrgyz Republic* are invaluable tools for communicating important information on gender disparities and inequities. WE, with its engaging cover, well-designed layout and well-written articles on bride-kidnapping, is another example of the creative use of a communications tool to engage the public in exploration of important national concerns.
RECOMMENDATIONS

As the UNFPA Kyrgyzstan Country Office develops its third cycle program, I am confident it will well align its initiatives to national development challenges in developing its program of work and promote national ownership of the ICPD Programme of Action. UNFPA should also rely on the 2010-2016 United Nations Development Assistance Framework (UNDAF) in guiding its future country activities – keeping in the forefront the goals and targets of the ICPD Program of Action and the Millennium Development Goals.

**General Recommendations -- to be implemented in all three sectors -- Population and Development, Reproductive Health and Gender**

- The Kyrgyz language is increasingly spoken throughout the Kyrgyz Republic with the result that UNFPA-sponsored training sessions, which have been held only in the Russian language, are difficult for UNFPA partners to understand. The Country Office should work with its partners to determine where Kyrgyz language trainings should be held and should increase the number and variety of publications either originally written in Kyrgyz or translated from Russian.

- UNFPA works with a wide array of partners in its three major program components. The CO should explore ways to both deepen its level of collaboration with its existing partners and search out additional partnerships with new organizations. The CO should arrange an intensive half or full day session with the senior leadership of its established partner organizations to discuss areas for expanded collaboration and cooperation and then implement opportunities to pilot-test these new levels of mutual engagement. CO staff, each in their respective areas, should have as part of their annual work plan exploration of potential new partnerships to strengthen UNFPA linkages with diverse sectors of Kyrgyzstani society. Staff should be particularly attentive to establishing new ties with partners working in remote areas, focusing on the needs of vulnerable populations and having ties to religious communities.

- Country office staff members have a comprehensive and finely nuanced understanding of population and development, reproductive health and gender issues. They are in an excellent position to identify existing information and knowledge gaps in their domains of focus and because of their wide-ranging contacts within Kyrgyzstan and abroad, are very well-placed to identify experts who could address these areas of knowledge deficit. UNFPA staff should document issues and subjects needing research and then work through country and international higher education and research institutions to develop and implement research programs.

- UNFPA country office staff should be particularly sensitive to the need for reaching out and including religious organizations in all aspects of their programmatic work. Staff should work with religious authorities and its current
partners to identify religious organizations and institutions with which they have had no previous contact and encourage their involvement in the CO program of activities in all three component areas.

- As the Kyrgyz Republic is situated in a seismically active and mountainous region, it is highly susceptible to natural disasters such as earthquakes, floods, mudslides, and avalanches. In addition, the country has been subject to complex humanitarian emergencies, characterized by violence and armed conflict. The CO should strengthen its capacity in responding to emergency situations with increased advance planning, staff training, and publication of informational and educational materials for health professionals, government officials, and the public-at-large.

- The Country Office should consider expanding its well-regarded work with youth, which focuses primarily on health issues, to address such areas of national concern as youth employment. UNFPA should explore governmental and civil society initiatives in both studying youth employment needs and implementing employment readiness and skills development training programs and determine what niche the CO could fill in this critical arena. UNFPA could then allocate staff resources to undertaking a substantive needs assessment and developing a pilot program to complement existing efforts and test innovative ideas.

**Population and Development Recommendations**

- Continue to build upon past success in working with members of Parliament through the Population and Development Committee. Allocate staff resources to providing information and updates to the committee on population and development issues.

- Undertake the outreach and advocacy necessary, both independently and with other UN agencies and NGO partners, to ensure that a high level body within the office of the President of the Kyrgyz Republic is tasked with integrating population and development considerations into national planning and program design.

- In consultation with the National Statistical Committee, provide group and individual training in advanced demographic analysis through workshops, seminars, and conferences including national and international experts. Ensure that such training encompasses applied research and research projects with fieldwork components.

- Consider “refresher” cross-training sessions of individuals responsible for diverse types of demographic and statistical data within Kyrgyzstan. The cross-training sessions already held have proven highly successful. With personnel turnover due to retirement, job changing, and migration, scheduling an annual cross-training session would provide valuable learning opportunities for new employees and veteran staff assuming new responsibilities. Training sessions could be scheduled in Bishkek and Osh, with videotapes made of the training for further dissemination and study.
• Consult with the National Statistical Committee on areas where UNFPA can contribute to the NSC research agenda through analysis of 2010 Census data and demographic forecasting.

• In collaboration with the NSC, work with diverse government ministries and agencies in designing and implementing research studies utilizing demographic data relevant to their portfolios. Such studies could assess the impact of demographic changes on the kinds of programs and services provided by the ministries.

• Enhance the knowledge of the country’s population about the composition of the country, itself, by encouraging journalists to write articles using the *Women and Men of the Kyrgyz Republic*; encourage discussion on TV programs/radio – UNFPA staff so inclined could create a model script for a 15-20 minute radio or TV discussion.

• Consider expanding the time frame for study tours focusing on professional training in complex areas (such as demographic forecasting). Determine the appropriate length of such professional development opportunities by close scrutiny of the curriculum, and surveys of study tour participants and instructors to determine their assessment of the adequacy of a two-week study tour to accomplishing desired professional aims.

• Purchase several copies of *Stata* for the use of students and faculty in partner programs working to prepare professional demographers. If necessary, subsidize costs for instruction in the use of this important and widely used demographic software package. Videos of the training can be made, to reduce future costs. Should additional computers be required for training and instructional research purposes, such an expenditure is well justified in developing the professional expertise of the next generation of Kyrgyzstan demographers.

• UNFPA should explore developing additional opportunities for university students to gain both familiarity with demography as a field and expertise in the subject. It would be worthwhile to initiate conversations with such institutions as the American University of Central Asia in Bishkek to explore possibilities for the mounting of courses, for shared enrollment with KRSU students, for the development of applied research projects working with the National Statistical Committee. Conversations could also be initiated with the Aga Khan Mountain University to explore interest in mounting an introductory course for the rural students attending this institution – who would not previously have been exposed to work in demography.

**Reproductive Health Recommendations**

• UNFPA should continue to support the implementation of Kyrgyzstan’s national reproductive health strategy, the state perinatal program, programs addressing the reproductive and sexual health of young people and community mobilization around the issues of reproductive health/family planning and STI/HIV prevention. UNFPA should continue its support of the Ministry of Health in implementing national policy and strategy on reduction of maternal mortality.
• Continue and strengthen efforts toward ensuring access to quality reproductive health and family planning services, emergency obstetric care and skilled birth attendance, adolescent sexual and reproductive health and prevention of HIV/AIDS -- prioritizing universal access to quality reproductive health in national policies, development plans and budgets.

• Ensure that health systems integrate reproductive health and attention to gender-based violence within primary health care and the continuum of care and design health reforms to expand delivery of quality reproductive health services to poor and vulnerable populations.

• Strengthen research and data collection on maternal health, family planning and reproductive behavior and needs of vulnerable populations to ensure that decision-making and policy formulation are evidence-based and that barriers to delivery of services and commodities are eliminated. Develop mechanisms, in concert with other stakeholders, to implement the relevant laws.

• Strengthen knowledge and skills of primary health care providers on family planning and strengthen training of family doctors in antenatal care, effective perinatal care, and care for expectant mothers, with an emphasis on quality counseling and community information dissemination highlighting danger signs during pregnancy.

• Conduct trainings for midwives in providing emergency care including provision of such emergency care during the transport of pregnant women with severe complications to a higher level of care.

• Work with health care providers to help prevent HIV by identifying the linkages between HIV prevention and reproductive health service delivery.

• Support gender mainstreaming within sexual and reproductive health programs. Ensure that gender equality is systematically integrated into reproductive health policies, development frameworks and legislation. Support the inclusion of sexual and reproductive health and gender-based violence issues in disaster preparedness action plans.

• Partner with civil society and religious leaders and strengthen their capacity for involvement in reproductive health issues and advocacy for improvement of family planning services. Ensure multi-sectoral linkages with other sectors and strengthen partnerships with parliamentarians, donors, NGOs and the private sector to leverage human and financial resources to achieve the MDGs.

• Work toward improving women’s sexual and reproductive health by preventing unintended pregnancies and unsafe abortions.

• Strengthen the UNFPA supervision, monitoring and evaluation framework, including identification of indicators on maternal and child health, reproductive health and family planning. Place increased focus on technical support for quality assurance.

• Advocate for government funding for purchase of contraceptives;

• Continue implementing the CHANNEL program and encourage the MOH to grant permission to make use of the CHANNEL database software for tracking importation of medicines from donors other than UNFPA.

• Focus on public policy regarding young people and sexual and reproductive health, and incorporating their issues in national development plans and strategies. Allocate adequate resources for youth education and gender sensitive life-skills development and put in place mechanisms to ensure effective youth participation in the socio-
political process to influence, implement, monitor and evaluate policies that affect their interests.

- Address the policy gap for Youth Friendly Health Services (YFHS). Continue to implement Youth Friendly Health Services through strengthening the capacity of health providers and managers to provide these services; improve partnership and support of advocacy for government legislation on YFHS. Support institutionalization and scale-up of successful youth-focused RH models, including YFHS, and implement youth friendly services into the primary health care system.

- Continue strengthening implementation of Y-PEER and other peer education initiatives through capacity building programs for young people with implementation of new approaches and tools, improving training programs and involvement of young people in planning, implementation and evaluation.

- Make special efforts to recruit talented young people from rural areas into Y-PEER. Undertake special mentoring, training sessions to enable these young people to gain the requisite background in peer-education. Try, as well, to include young people from migrant communities as candidates for training of trainer opportunities. Only by reaching out to young people from these marginalized communities will Y-PEER be able to expand its impact and reach into particularly needy and vulnerable communities of young people who often have erroneous information on HIV/AIDS, reproductive health and healthy lifestyle choices.

- Revise the Healthy Lifestyles course for older audiences and present it to employees in government ministries, commercial enterprises, and non-governmental organizations. The content of the curriculum could also serve as the focus of radio programs and newspaper articles. Healthy Lifestyle material could also be made available at public libraries where they exist in Kyrgyzstan and serve as the subject for discussion with local audiences.

- Ensure that follow up of initial medical training/re-training occurs at three month interviews during the year following the training. Create a part-time staff position (a former trainer) to follow-up on the implementation of this process. Make available an individual to respond by telephone and e-mail to answer trainees’ questions and serve as a liaison between the trainees and trainers; provide guidance throughout the first year period as health care providers learn to adjust to the new approaches they are asked to integrate into their patient care.

- Develop communities of practice among those who have been trained. Dedicate the time (possibly 1/4 time of a staff person) to monitoring relevant medical publications, translating and disseminating articles of interest, moderating a listserv. UNFPA should work to catalyze the creation of a culture of learning within the reproductive health care community. UNFPA’s reproductive health component should work with the Kyrgyz State Medical Academy, instill a learning culture, working with the most promising young physicians or distinguished retired professors. UNFPA should help support professional conferences bringing together across the relevant disciplines academic researchers and practitioners to present research and hold panel discussions on challenging reproductive health issues.

- Ensure the independence of the physicians’ committee conducting the Confidential Enquiry into Maternal Deaths by a strong wall of separation of the committee from the Ministry of Health and from the Prosecutor’s Office. Ensure the availability of
reliable data on maternal deaths through improving the data collection system on maternal morbidity and mortality.

- Work with the Kyrgyz State Medical Institution for Continuous Training, the Kyrgyz Medical Academy and professional associations to encourage further attention to adolescents and sexuality in their curricular and educational efforts and advocate for youth friendly services.
- Seek funding for larger print runs of manuals and guidelines developed for the training and retraining of reproductive health professionals to ensure that sufficient copies are available to all who need access to the material. Ensure there is a good supply of the publications available in the Kyrgyz language.
- Kyrgyzstan, along with many of the former Soviet republics, does not have a sustained tradition of focusing on the needs and services required by disabled people. Facilities are generally not available to meet their special needs. The UNFPA Reproductive Health efforts, along with the work of Y-PEER, should pay particular attention to including disabled women and men in its work – whether in outreach, education and where, possible, as trainers.

**Gender Recommendations**

- Continue to build and deepen collaboration with a wide range of organizations and leaders active in the religious community, convene more roundtables – particularly in rural and more remote areas– providing training and publications addressing GBV and the unique role the religious community can play in countering such action. Involve religious leadership in recruiting young people to participate in Y-PEER.
- Expand outreach and information efforts on gender-based violence and gender equity issues throughout the year with articles in popular newspapers, radio and television programs, roundtables held at local organizations which do not have a particular focus on gender issues. Involve diverse ethnic and cultural communities in this work.
- Continue to advocate and provide leadership for implementing the final recommendations of the UN CEDAW Committee on actions that should be taken by the government of Kyrgyzstan, NGOs, the media and a wide range of stakeholders to be in compliance with the country’s obligations as a signatory to CEDAW.
- Work with partners in the Ministry of the Interior to provide training of law enforcement officers on recognizing and responding to victims of gender-based violence. Ensure that the curriculum for new officers, as well as continuing education and refresher courses, addresses the causes of GBV and the remedies and resources available to victims.
- Strengthen ties with Y-PEER to more strongly integrate information on women and girls’ human rights – as guaranteed in international covenants and conventions, as well as within the laws of Kyrgyzstan – as well as providing data on GBV. Develop material highlighting the diverse roles and occupational choices available to women. Work with Y-PEER youth leadership through cross-
generational dialogues, roundtables to expand discussion on gender equality and GBV, so that the Y-PEER leadership, in turn, can initiate such programs with their peers.

- Identify organizations which specifically focus on questions/concerns of special importance to boys and men. Find an organizational leader (formal or informal) who could serve as an entry to the organization and seek to initiate a dialogue with the members of the organization on gender equity issues. Male sports clubs, associations focused on agriculture, construction, forestry – with largely male membership – would be the types of organizations that should be contacted.

- Conduct a survey on reader response to the initial publication of WE. Focus groups could be convened as well as surveys distributed to learn what materials worked well, what captured audience interest and attention, what issues readers of different ages and backgrounds would like to see. Develop an advisory committee of women and men from different age, ethnic, occupational backgrounds to suggest issues of interest, write articles, themselves, and promote the publication and other UNFPA activities among their personal and professional circles.

- Explore the demand for Women and Men of the Kyrgyz Republic to determine interest by academic and vocational schools, as well as libraries in receiving this publication and see if additional copies are needed by government ministries and NGOs. Expand the number of copies available in the Kyrgyz language.

- Develop a plan of action to work with adolescents during an emergency to forestall violence. To the extent possible, provide training in first aid for young people to assist the wounded. Provide training in peer-counseling, mediation, conflict resolution to young people, enabling them to intervene with peers on the verge of violent behavior. Adults should be trained to serve as mentors to the young in developing these skills; local college faculty/secondary school principles and senior teachers could serve as resources.

- To enable women to play more significant roles in peacebuilding and peacemaking activities (pursuant to UN resolution 1325 of October 31, 2000), to the extent possible, develop special education and training programs for women providing background and skills in mediation, negotiation, conflict transformation, peacebuilding. Develop a library of materials on diverse peacemaking approaches taken by different societies; republish relevant articles and commission local academics, NGO leaders and government officials to write of their successful experiences in defusing conflict and facilitating agreement.

- Work with the Ministry of the Interior to develop a welcoming environment for women police officers; work with schools and colleges to encourage women to enter careers in law enforcement and provide training for them in both identifying and responding to GBV. Explore with the Ministry of Defense in Kyrgyzstan opportunities for women to serve in the military in decision-making roles. Work with the legal and NGO communities to encourage women to pursue careers in law – with particular attention to encouraging work addressing human rights, gender equity, and anti-discrimination.

- Continue to build on cross-cutting work with UNFPA’s Reproductive Health component. Work with receptive health care providers, making a point to include and involve feldchers and midwives, and, as appropriate village level committees,
in creating receptive environments for discussion of gender-based violence and the resources available for those subject to GBV. Make available material on GBV, women’s rights under the laws of the Kyrgyz Republic and other appropriate gender-focused material at Youth Friendly Clinics. Support roundtables, educational sessions at the Youth Friendly clinics on gender equity and opportunities to work with Y-PEER.
Annex 1

Terms of Reference
Final UNFPA Kyrgyzstan Country Program 2005 – 2011 evaluation

I. Background


At its 2009 annual session, the UNDP/UNFPA Executive Board approved the extension of the UNFPA Country Programme in the Kyrgyz Republic for 2010-2011. In December 2009, a mid-term evaluation of the country program was carried out by independent experts. The results of the midterm evaluation were shared and discussed with partners. Based on the mid-term evaluation results and consultation with partners, extension of the country program 2005 – 2009 was prepared. In 2010 the extension of the Country Program 2005 – 2009 for 2010 – 2011 was signed by the Kyrgyz Government and UNFPA.

The UN Development Assistance Framework (UNDAF) for 2005 – 2010 in the Kyrgyz Republic was developed and signed in March 2004. The UNFPA country program outputs are consistent with UNDAF 2005 – 2010 outcomes. To improve coherence and coordination of UN and other donors’ assistance to the Kyrgyz Republic, the Joint Country Support Strategy (ADB, WB, DFID, UN Agencies) document was developed for the period 2007-2010. In 2008, implementation of JCSS was carried out in light of extension of the Country Development Strategy for 2010-2011 (initial timeframe of the document was 2007-2009). The JCSS and UNDAF were extended till 2011 to harmonize donor’s assistance with the national strategic priorities for country development.

The Kyrgyz Republic endorsed principles and recommendations of ICPD Program of Actions and Millennium Declaration (MDGs), as well as ratified basic UN conventions including the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) and the International Covenant on Economic, Social and Cultural Rights (ICESCR).

Kyrgyzstan underwent significant political changes from 2005 to 2010. In 2005 and 2010 two first presidents of the Kyrgyz Republic were forced to resign due to a high corruption in the country and abuse of power by the presidents and their family members. The
second president was deposed during the mass protests and demonstrations on April 7-8, 2010. The deposition was accompanied by bloodshed, killings of people, destruction of private and public property. An interim government was formed headed by coalition of opposition political leaders. Constant changes in high level government officials related to revolutions caused difficulties in implementation of the country program and created unfavorable environment for long-term partnerships, continued capacity building and sustainability of the country program interventions.

The Kyrgyz constitution underwent changes two times since 2005 (in 2008 and 2010). The last change resulted in a significant shift of governance and political structure. Initially Presidential Republic, at the last national referendum (on June 27, 2010) the country adopted Parliament form of governance for the country. The referendum vested the power of the presidency on the current interim president until the next presidential election in Fall 2011. Seventy two percent of constituents participated in the referendum with 91% of vote supporting parliament form of governance and the interim president. International observers characterized the referendum as relatively fair.

The parliament form of governance is new for the country and will require active participation of political parties, new way of working and constructive dialog among all political forces. The first years of parliament governance in the country are promised to be challenging.

On October 10, Parliament elections took place in the country. The elections were peaceful. Five political parties passed 5% threshold and made their way to the Parliament. In the upcoming month the parties will have to form a new Government of the country.

On June 10, 2010 interethnic (between Uzbeks and Kyrgyz) clashes erupted in southern provinces of the country (Osh and Jalalabat). Many people’s lives were lost and violence occurred during the clashes. During the crisis, an estimated 75,000 refugees fled to neighboring Uzbekistan and almost 300,000 were internally displaced. Within ten days the refugees came back to Kyrgyzstan and most of the internally displaced people also returned to their homes in July. There is a great need for housing and livelihood support for people whose homes were burned down. Social reconciliation and peace-building will have to be addressed urgently in the interests of the stability of the country. Situation in the south of the country remain volatile with a high risk of renewal of ethnic conflicts.

The violent conflict in the south created deep social tension that left many people scared and shocked. There is a need to promote social and political stability and security as a foundation for economic and social recovery. To avoid a perception of unequal attention being given to particular ethnic group, equity in distribution of assistance to people is essential. Inequity could worsen inter-ethnic tension and fuel future violence. Strengthening the legitimacy of the state and re-establishing impartial security forces of protecting all citizens are critical.
UNFPA as part of UN system provided humanitarian assistance to the country. Two humanitarian shipments that contained medicines, clothes for children and adults, hygiene supplies were delivered to Osh and Jalalabat cities at the onset of the crisis. UNFPA sub-office was established in Osh city to strengthen UNFPA presence on the ground and improve coordination of UNFPA activities with other partners. UNFPA activities are aimed at ensuring access to reproductive health services and prevention of gender based violence in the areas affected by crisis. UNFPA received $33,170 from CERF secretariat, $196,000 from UNFPA Emergency Respond Fund and $195,000 for two Flash Appeal projects from US Government to respond to the recent crisis in the south. At high level donors conference on July 27 in Bishkek, donors pledged 1 billion 300 million dollars of assistance to the country in the next 18 months.

Despite the difficult political situation in the country during 2005 – 2010, economic growth has been observed with real GDP growth (2005 – (-0.2%); 2006 - 3.1%; 2007 – 8.2%; 2008 – 8.4%; 2009 – 2.3%). The Kyrgyz Republic’s economic growth, while substantially lower than in previous years, remained positive in 2009. Negative effects of the global financial crisis have had relatively mild effect on the Kyrgyz Republic.

The political changes in April 2010 in the country and the outbreak of inter-ethnic conflict in southern Kyrgyzstan in June 2010 will likely to have a negative effect on the economy. According to Joint Economic Assessment the growth of the economy is expected to be slowed down and the economy will face challenges in the period ahead than it was envisaged prior to the crisis. Foreign investment is likely to slow down substantially. Reconstruction and development needs are expected to extend into next year. External financing will be required to meet reconstruction, recovery, rehabilitation and development needs.

In 2010 the second MDG country report was developed by the country. The report’s main conclusion is that a progress towards achieving MDGs is very slow. The Kyrgyz Republic, most likely, will not achieve most MDGs by 2015. The President of the Kyrgyz Republic presented the second MDG report to UN Assembly in September 2010.

II. The Country Program

The country program for 2005 – 2011 has three main program components: population and development, gender and reproductive health.

Population and Development

UNFPA has been a leading agency in providing technical support, resource mobilization and continued capacity building of the National Statistics Committee (NSC) and its branches for data collection and analysis. This component aims to increase public awareness of and commitment to population development and gender issues in national policies and programs.
The focus of the second country program was to support preparation and conduct of 2009 Population and Housing Census and to build national capacity on demographic and gender-disaggregated statistics. In 2009 the second Population and Housing Census was carried out in the Kyrgyz Republic with assistance of UNFPA.

According to the results of the latest Census, as of March 24, 2009, the total resident population of the Kyrgyz Republic made up 5362,8 thousand people, including urban population - 1828,2 thousand people and rural population - 3534,6 thousand people.

In 2009, as compared with the results of the First national population census of 1999, the number of people who are currently residing in the country has exceeded the number of people who are physically present in the country due to considerable number of temporary migration (250,6 thousand people are temporarily outside of the country). In 2009, the number of women exceeded the number of men, who made up 71,0 thousand people (in 1999, women made up 62,1 thousand people). However men/women ratio has remained the same. In 1999, the ratio was 975 men per 1000 women and 974 men per 1000 women in 2009. Median age of population has gone up. In 1999 median age for the country was 26,2 years, in 2009 median age was 27,6.

Overall understanding and commitment of government officials has allowed implementation of most of planned program interventions. During the years of country program implementation, the existing partnerships and collaboration with main PD program counterparts allowed building capacity of statistical data collection bodies, policy makers and government officials on various issues related to ICPD agenda (population policy, data collection and analysis, gender).

There is a great need for a coordination body to do population analysis and forecasting in the Kyrgyz Republic for incorporating population factors in overall country’s social and economic development programs and policies. Such analytical works should be evidence-based, and require reliable quality data and inter-agency coordination in data collection and analysis.

The structure and content of PD program allowed targeting the following areas:
1. Data collection (quality, coverage, inter-agency coherence of demographic data)
2. Population policy (advocacy and capacity building of government officials and parliamentarians)
3. Work on emerging population issues (youth, maternal mortality)

In the area of data collection, the work started before on strengthening capacity of statisticians was complimented with broader approach of strengthening interagency and inter-ministerial cooperation for improving data quality and coherence. The results are to be evaluated.

In the area of population policy and partnership building has started initially with participation of MPs in conferences. However, during the years of CP implementation, a separate Parliamentary Committee on Population and Development was created and a
number of interventions were carried out through this committee. Such collaboration allowed advocating the ICPD agenda at both, the highest level in the country and as well at local level of decision making in the local administrations. The outcomes are to be evaluated.

**Gender**

Kyrgyzstan has ratified all the relevant international human rights documents, including the Convention on the Elimination of Discrimination Against Women (CEDAW) and the Optional Protocol to the Convention on Abolition of All Forms Discrimination in Respect of Women, which provides a mechanism for women in the country to bring individual complaints through the international human rights systems. In 2008 the country prepared 3rd periodic CEDAW report. Two types of CEDAW reports were prepared: official (prepared by the Kyrgyz Government) and alternative report (prepared by local NGOs).

Women were representing 24 of the 90 members of previous Parliament (25.6%). Very few top positions at the government are held by women so far. Although women are represented in chief or senior positions at many state agencies, they hold far fewer leadership positions in institutions whose policy has significant impacts on women, such as the Ministry of Agriculture, Water Resources and Processing Industry, the State Customs Committee, and the State Agency on Religion Issues (no women represented).

The national institutional mechanism on gender policy in Kyrgyzstan has been created and changed over many years. The essential gap in the national institutional mechanism is the insufficient normative assignment of the authorized bodies that are responsible for determining the priorities or the development of the national gender policy. Since the administrative reform in 2009, the institutional mechanism responsible for implementation of the gender policy – the National Gender Council lead by the State Secretary – was restructured. As a result of the reforms, the position of a State Secretary was abolished, and the working structure was removed as well. The functions to implement the gender policy (combined with youth, family and childhood issues) were assigned to a newly-created Ministry of Labor, Occupation, and Migration. Nowadays, this Ministry has yet to see any support from the side of gender experts’ for developing the concept and strategic plan of gender policy. But at the same time there is no mention of gender policy even in the name of the ministry and the renewed Ministry of Labor, Occupation, and Migration has too many areas of focus. On the strategic level, there is no structure in the President’s Cabinet that is responsible for gender policy. Who will formulate and develop the strategies of the gender policy is unclear. In late 2009, the Gender Council under the Institute of Ombudsman of the Kyrgyz Republic, a public structure, started its work. As a result, the potential for implementation of a gender policy have been tenuous and brought plenty of constrains.

During the period of 2005-08 gender program activities have been implemented under the population and development program. Since 2008, Gender program component has been identified as a separate programmatic component. In Kyrgyzstan, a number of UN and
non-UN agencies and organizations are working in the field of gender equality. However, there is a niche remaining not covered, which is GBV. For Kyrgyzstan as a predominantly Muslim country, the problems of polygamy, relative marriages, bride kidnapping and harmful practices arise rapidly. Such behaviors lead to reproductive health, psychological health and many other essential problems. Therefore, and in accordance with the UNFPA strategic plan period for 2008-2011, UNFPA Kyrgyzstan puts priority for GBV activities in religious groups as well as concentrates its efforts on supporting national capacity to implement policies and legal enforcement, with emphasis on reproductive rights and gender-based violence prevention.

UNFPA is a lead agency in coordinating the joint program on VAW that was launched in 2010. Under this joint program UNFPA supports the improvement of interagency data collecting mechanism on VAW/domestic violence and make efforts to put in place an effective coordination system of relevant services for survivors of victims. As this is a multi-stakeholder initiative the Fund works with partners at different levels such as: policy, institutional, civil society and other UN agencies. Additional resources have been mobilized for kick start of this joint initiative by Interagency Task Force Division at UNFPA HQ.

Reproductive Health

The Kyrgyz Republic has one of the highest maternal mortality rates among former Soviet Union Republics. The maternal mortality rate appears to be increasing (2005 – 61.0; 2006 – 53.0; 2007 – 62.5; 2008 – 58.9; 2009 – 62.9). There are concerns over the accuracy of reporting and the possibility of underreporting due to deaths being concealed. In 2008 the Kyrgyz MoH adopted a moratorium to stop punishing health providers for registration of maternal death to improve maternal death registration. Despite of considerable progress in the field of maternal health: improvement of access and increasing coverage with contraception 47.8%, reducing of fertility rate from 3.4 to 2.8 that is basically due to 15 -19 ages group, increasing of interval between deliveries, deliveries with presence of qualified specialists (96.1%), implementation of efficient technologies of Making Pregnancy Safer\Promoting Effective Perinatal Care (MPS\PEPC) maternal mortality rate remains high. Root cause of high maternal mortality in the country is poor economic and social status of population in the country. There is an inadequate attention to the fact that a problem of maternal and infant mortality has a complex nature, and, therefore, poor consideration of social, economic and cultural factors impacting growth of these indicators leads to the fact that policies are also of unmatched nature and are concentrated mostly in the health sector.

The challenges faced by the Kyrgyz government in promoting reproductive health of its people, and providing the necessary reproductive health services, remain inadequate. Adoption of Reproductive Rights law in 2008 represents a milestone for a country where and understanding of reproductive health is low.
The Kyrgyz Republic is implementing the National Healthcare Reform program “Manas Taalimi” (2006-2010). The program has been extended until the end of 2011. The priorities included into the program are based on MDGs, specifically, MCH protection, prevention of and fighting against HIV/AIDS. Thus, consolidated and consistent implementation of strategies on MDGs 4&5 achievement is going on in the field of MCH, within the framework of the Manas Taalimi Program as well as other programs aimed at better health of mothers and children. To maintain the policy dialogue and ensure joint planning with partners, the Government set a system of regular meetings in a form of annual reviews discussions and coordination. Twice a year, joint review meetings are represented key elements in this system, allowing to review progress made and to discuss next steps. UNFPA promotes a continuum of maternal health care as part of reproductive health and the right to health and works closely with United Nations partners, such as UNICEF, WHO and the World Bank, and other organizations, ensuring a coordinated response, including leveraging support to strengthen health systems for maternal health services. The Government of the Kyrgyz Republic has prioritized maternal and newborn health and survival at the very highest level, which reflected in establishment of a National Maternal and Child Health Unit under MoH.

Since 2008 UNFPA country office is providing assistance to the MoH in implementation of Promoting Effective Perinatal Care (PEPC) in the following maternities: Talas, Kara Bura, Bakai Ata, Jail, Moskow, Panfilov, Jalal Abad and Suzak. Eighty four health providers of the above mentioned facilities were trained on PEPC. A team of national trainers on PEPC have been prepared. Seven follow up mentoring visits to pilot maternities with involvement of the WHO international experts and national PEPC trainers were carried out. Sixteen clinical protocols have been developed with technical assistance of UNFPA.

Large efforts are put to improve antenatal care to pregnant women in the country. Training programs for primary healthcare providers were revised and almost 100 PHC providers were trained on the revised training program. In addition to this 6 birth preparedness schools were established into PHC facilities and they were equipped with necessary furniture, supplies and equipment.

Since 2006 UNFPA country office in cooperation with MoH and WHO has been supporting implementation of Confidential Enquiry into Maternal Death (CEMD) and Near Miss Cases Review (NMCR) approaches of the WHO “Beyond the Numbers” initiative in the country. NMCR is being implemented in pilot facilities: Balykchy territorial hospital maternity department, Maternity Home #2 in Bishkek, National Mother and Child Health Center, Maternity Department of Talas Oblast Joint Hospital. Preliminary results showed some improvements in everyday practice of the facilities and adherence to clinical protocols. However, many challenges are still exist. CEMD is being implemented on national level. National CEMD Committee was established in 2009. Health providers were trained on how to collect and make information anonymous. Several meetings of the CEMD committee took place in 2010.
Strengthening system of contraceptives management is an important aspect of reproductive health program in the country. Logistical Management Information System (LMIS) for contraceptives has been implemented in the country since 2000 and supported by UNFPA. Six trainings on LMIS operation and implementation of newly developed contraceptives manual for PHC level and Medical Eligibility criteria has been conducted during the program cycle. Three trainings on implementation of CHANNEL for healthcare providers were conducted. The CHANNEL and LMIS have been piloted in Talas regions. The feedback from pilot facilities is very positive. In 2010 a round table was conducted to discuss further integration of CHANNEL into medicine management system of Mandatory Health Insurance Fund (MHIF). The decision will has to be taken by the MoH and MHIF.

UNFPA country office is continuing provision of contraceptives to the country to meet needs of vulnerable and poor group of population. A lot of efforts have been put to update a list of medicines for additional drug package of MHIF and include modern contraceptives into the list.

Four trainings for health providers on family planning issues to improve quality of family planning services (post partum, post abortion care, post-abortion contraceptive counseling, new contraceptives methods) have been conducted during the program cycle. Training package “Integration of RH services into PHC” has been integrated into the program for family medicine specialists of the Kyrgyz State Medical Institute of Postgraduate Education.

To improve aid effectiveness and timely support to the Kyrgyz Government, the UN system in Kyrgyzstan designed a One UN Programme 2010 – 2011. The One Fund intends to facilitate the realization of One Programme outcomes. Under Delivering as One project UNFPA jointly with the WHO and UNICEF is working on improving social services (health services) to ensure accessible RH and maternal services for most vulnerable groups.

To address the needs of reproductive age women UNFPA quickly responded to the recent crisis in the south to prevent outbreaks in maternity and newborn units by providing supplies for clean and safe deliveries to manage obstetric emergencies and other complications of pregnancy.

There is also growing HIV/AIDS epidemic in the country. According to official data, 2350 HIV cases were registered in 2009. Considerable external and internal migration of the population, especially from the rural areas, adds to the potential spread of HIV. In 2005 the country adopted National Program on HIV/AIDS “Improvement of the KR people’s health” (2004-2010). The State Program on prevention of HIV/AIDS for 2006-2010 is also implemented to reduce vulnerability of youth to HIV/AIDS through comprehensive support of youth program on HIV/AIDS, STI prevention; enhancement of legal base; strengthening safe behavior skills through increasing youth awareness on HIV/AIDS within the frame of implementation of activities of educational state system.
RH program was able to mobilize additional resources from Japanese Government to improve access to sexual reproductive health in northern region. Asia Universal Bank provided financial assistance to improve quality of health services in maternities of Chui and Jalalabad oblasts. The country office participated in the UN “Delivering as One” project and mobilized resources for improving antenatal care in selected raions in the south of the country. Trust Fund Commodity Security Branch supported the country office with contraceptives.

III. Evaluation Purpose

The purpose of this evaluation is to derive recommendations, best practices and lesson learned from measuring the achievements, outputs outcome and impact produced by the program, and to be used for development of the next country program cycle.

The main stakeholders of this end of program evaluation are: Government of the Kyrgyz Republic, Ministry of Health, Ministry of Labour, Employment and Migration, the National Statistics Committee (NSC), UNFPA country and regional offices, UN country team, and donors.

IV. Evaluation Objective

The objective of the evaluation is to provide an independent assessment of UNFPA’s contribution to development results at the country level. The evaluation will draw lessons learned and recommend improvements. At the same time, the evaluation will address the issue of what is the net value added of UNFPA’s work. The evaluation will assess:

- To assess if national capacity to deliver quality health information and services improved
- To what extent supply and distribution of reproductive health commodities among poor and vulnerable people improved
- To determine if national support for ICPD principles incorporated into national policies.
- To what extent government capacity to analyze population data and use them for national policy decision increased.

V. Evaluation Scope

- Time period: The evaluation will cover whole program cycle from 2005 – 2010.
- Geographical areas: Evaluation will include national level.
- Program components: Population and Development, Gender, Reproductive Health

Key Evaluation questions to be answered by the evaluation

Relevance
To what extent the program is aligned with priorities and strategies of the government of Kyrgyzstan, other UN agencies and donors active in the UNFPA mandated areas?

Does the country program specifically target vulnerable population?

To what extend UNFPA CO considered its and its partners capacity in the development of the program design?

Does the program include strategies to promote national capacity development?

**Effectiveness:**

- Does the program achieve its results (outputs and outcomes)? If not, is there some progress make towards their achievement?
- To what extent the program strengthened national capacity to provide high-quality reproductive health information and services? Is there any evidence that personnel trained are using skills and knowledge gained from the training conducted under this program? Does policy and system development support make any difference in the country?
- How does the country program contributed to enhance quality, coverage, inter-agency coherence of demographic data? Is there any evidence that census and research results provided help better understanding of population dynamics? Do results produced by census and research studies are used in policy and program development?

**Efficiency**

- Are the program resources (human, technical and financial) used efficiently to achieve the given outputs?
- Did program activities overlap and duplicate other similar interventions (funded nationally and/or by other donors)?

**Sustainability**

- Did the program create/strengthen any local/regional networks and partnerships to implement and sustain the country program activities?

**Lesson Learned and Best Practices**

Through in-depth assessment, present and highlight features to be considered as good practices and lessons learned at country level

**VI. Methodology**

Due to current unstable political environment in the country with foreseen major changes such as formation of a new Parliament, new government, change of governance structure with redistribution of roles after Parliamentary elections on October 10, a full scale end of country program cycle evaluation with extensive field data collection is seen to be not
feasible. Therefore the following methodology is suggested for the country program evaluation:

Review of policy and program documents

- UNFPA strategic plan, government policy and program documents, mid-term evaluation report, annual work plan, M&E plan, annual reports, studies carried out by UNFPA country office etc.

Individual interview/focus group discussion

- Interview of UNFPA country staff, other UN agency staff, key government officials/implementing partners
- Interview/focus group discussion of program participants (beneficiaries) on a selective basis

VII. Deliverables

1. Inception report
2. A draft of country evaluation report
3. A final evaluation report

These documents should be submitted to UNFPA Assistant Representative in both printed and electronic version in English.

UNFPA will organize a debriefing session inviting stakeholders to disseminate evaluation finding and recommendation.

A final report of a UNFPA evaluation should be prepared through at least three iterations of reports. In the first iteration, the evaluator prepare and submit a draft to the Assistant Representative. The draft will undergo a peer review by the program stakeholders and UNFPA Regional office to receive comments and feedback. The Assistant Representative will consolidate all feedbacks to the Evaluator. After the two rounds of reviewing the drafts, the report may be finalized, depending on the satisfaction of the UNFPA team.

VIII. Evaluators competencies and expertise

Competencies

- Demonstrated experiences in policy and program evaluation
- Excellent knowledge of the UNFPA programming principles and procedures, the UN system and the UN common country programming processes;
- Specialized experience and/or methodological/technical knowledge in the following areas is desirable population and development, reproductive health and gender;
- Understanding of human rights-based approaches to programming, gender considerations;
- Understanding of results-based management principles, logic modeling/logical framework analysis;
- Awareness and sensitivity to enable working with people of various cultural backgrounds;
- Strong knowledge of the social and political situation in CIS countries. Knowledge of the context of the Kyrgyz Republic is an advantage;
- Understanding and ability to abide by the values of the United Nations;
- Excellent reports writing skills as well as communication and interviewing skills;
- Excellent written and spoken English;
- Knowledge of Russian is a strong asset.

**Background and experience**

- Advanced university degree (Masters degree or equivalent) in economics, health, demography, social and development studies or related fields;
- 8-10 years of relevant professional experience, including strong experience in assessment and evaluations

**IX. Work plan**

It is planned that the end program cycle country program evaluation will take place in December 2010. The evaluation process will take 18 full working days. One day has been scheduled for an inception report preparation and submission. Desk review and field data collection will take 11 days. Five days are for report writing. Two day will be allocated for report finalization.

16 November – preparation and submission of the inception report

19 – 21 November – travel days from Washington to Bishkek via Istanbul

22 November – 1 December inclusive, Country visit and meetings with UNFPA partners

2 December – travel day from Bishkek – Washington

5 – 9 December – report writing in USA

13-14 December – report finalization in USA

Total working days of consultancy are 18 days.
Annex 2

List of Persons Interviewed

1. Mr. Meder Omurzakov, UNFPA Assistant Representative
2. Ms. Tolgonai Berdikeyeva, UNFPA PD/Gender Associate
3. Mr. Nurbek Tulegabylov, Deputy Chairperson of the National Statistics Committee.
4. Mr. Oscon Moldokulov, Head of the WHO office in the country
5. Meeting Ms. Svetlana Podkuiko, translator
6. Meeting with KRSU Population Center staff
7. Ms. Kumskova Nailya, Head of the Economic Theory department at KRSU, Director of the Population Center
8. Mr. Kumskov Gennadiy, Professor at the Economic Theory department at KRSU
9. Ms. Elena Ploskih, Associate professor at the Economic Theory department at KRSU
10. Mr. Anna Alekseeva, KRSU graduate
11. Mr. Oscon Moldokulov, Head of WHO CO
12. Ms. Botogozy Bagyshbaeva, Executive Director of Y-Peer Network
13. Ms. Galina Chirkina, Alliance on Reproductive Health
14. Meeting with the heads of NSC sectoral departments
15. Ms. Ludmila Torgasheva, head of demographic statistics department
16. Ms. Gulzinep Mursabekova, head of census and housing department
17. Ms. Galina Samohleb, Head of department for selective studies
18. Ms. Kuliypa Koichumanova, Head of social and ecological statistics department
19. Ms. Gulnara Derbisheva, former MP, Deputy Chairperson of the Committee on Population and Development
20. Ms. Cholpon Abdullaeva, former MP, Member of the Committee on Population and Development
21. Ms. Saltanat Sadykova, OHCHR
22. Ms. Venera Urbaeva, UNICEF
23. Ms. Nurgul Asylbekova, UNDP
24. Ms. Lesia Nedoluzhko, member of the research group on demographic trends in Kyrgyzstan
25. Ms. Aigul Abdrahmanova Boobekova, obstetrician-gynecologist Ministry of Health, gender focal point of Ministry of Health
26. MS. Jamal Frontbek kyzy, head of religious progressive fund “Mutakalim”
27. MS. Sagynbu Abduvalieva, near miss care review specialist and confidential inquires into maternal death, trainer of effective parental care
28. Mr. Arsen Askerov, associate professor of obstetrician-gynecology Kyrgyz-Slavonic university medical faculty
29. Ms. Botogozy Bagyshbaeva, executive director of NGO Y-PEER, focal point, trainer of Y-PEER
30. Ms. Gulnara Salohidinova, programme coordinator of NGO Y-PEER, focal point, trainer of Y-PEER
31. Mr. Artur Sarkisov, member of Coordination board, focal point, trainer of YPEER
32. Mr. Timur Mamytov, member of Coordination board, focal point, trainer of YPEER
33. Mr. Aresiny Maslov, focal point, trainer of Y-PEER network
34. Ms. Gulnara Derbisheva, former MP, Deputy Chairperson of the Committee on Population and Development
35. Ms. Cholpon Abdullaeva, former MP, Member of the Committee on Population and Development
36. Ms. Baktygul Bozgorpoeva, head of Kyrgyz family planning association
37. Mr. Osconbai Djumabaevich, Drug supply division under Ministry of Health
38. Ms. Larisa Murzakarimova, Republican medical informational center
39. Meeting with the heads of NSC sectoral departments
40. Ms. Ludmila Torgasheva, head of demographic statistics department
41. Ms. Gulzeinep Mursabekova, head of census and housing department
42. Ms. Galina Samohleb, Head of department for selective studies
43. Ms. Kulitypa Koichumanova, Head of social and ecological statistics department
44. Ms. Damira Barpieva, Head of State agency of continuous training
45. Ms. Lesia Nedoluzhko, member of the research group on demographic trends in Kyrgyzstan
46. Move from Park Hotel to Silk Road Lodge
47. Ms. Damira Barpieva, Head of State agency of continuous training
48. Ms. Aleksandra Eliferenko, Head of the Association of Crisis Centers
49. Ms. Begaim Akmatova, Head of family medicine and reproductive center under the Kyrgyz medical state continuous training institute with participants from Chui region (Panfilov and Moscow rayons)
50. Ms. Asel Turgunova, UNFPA Youth specialist
51. Mr. Azamat Baialinov, UNFPA RH Associate
52. Ms. Cholpon Imanalieva, UNICEF
53. Ms. Gulsara Alieva, Ministry of Internal Affairs Gender Focal
54. Ms. Aigul Sydykova, DFID
55. Ms. Nurgul Kinderbaeva UNFPA Gender NPA
56. Ms. Ute, WHO consultant UNAIDS
57. Ms. Larisa Ilibezova, sociologist/Gender expert
58. Ms. Taalaigul Isakunova, Gender expert
59. Ms. Galina Chirkina, Executive director of public union “Reproductive health alliance in Kyrgyzstan”
60. Ms. Saltanat Sadykova, OHCHR
61. Ms. Venera Urbaeva, UNICEF
62. Ms. Nurgul Asylbekova, UNDP
63. Ms. Nurgul Smankulova, UNFPA NPA on RH
64. Ms. Taalaigul Isakunova, Gender expert
65. Ms. Damira Biibosunova, UNAIDS
66. Ms. Ainura Shergalieva, head of reporting and monitoring department of Republican center for health promotion Ministry of Health
67. Mr. Adil Ermanbetov, practical obstetrician-gynecologist, member of near miss
care review

68. Ms. Tatyana Jiteneva, UNIFEM Programme Specialist/RC Gender Advisor
Annex 3

List of documents reviewed


Briefing Note for UN Resident Coordinator. *Achieving MDG 1b, 4 & 5 in Kyrgyzstan*. April 2009.


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*Desk review and analysis of maternal health in Kyrgyzstan* (appears to be from 2009).


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*Next steps and recommendations of Review Team on component “Mother and child health care.”* 2010.

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*Proposal for planned training and intervention to achieve MDG4 and 5 in Chui Oblast, Kyrgyz republic and for assessment of impact.* No date.

*Situational analysis of unintended pregnancies in the Kyrgyz Republic.* 2010.

The Kyrgyz Healthcare Reforms Program “Manas Taalimi”, 2006-2010


_________________________ *Program of Health Summit IX*, November 26, 2010.


UNFPA Country Program 2005-2009


UNFPA Country Program 2005-2009 evaluation report


UNFPA. Eastern Europe and Central Asia Regional Office. Annual Progress Report Covering the Period July 2008-July 2009. Improving the Sexual and Reproductive Health of Adolescents and Young People in the Commonwealth of Independent States including the Central

______________________________.Improving the Sexual and Reproductive Health of Adolescents and Young People in the Commonwealth of Independent States including the Central Asian Republics. Project Report for activities planned within the framework of Finnish Government supported project (July 2009-December 2009)


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