



**THIS ACTION IS FUNDED BY THE EUROPEAN UNION**

**ANNEX V**

to the Commission Implementing Decision on the annual action plan in favour of Egypt for 2023

**Action Document for EU Support to Egypt's National Population Strategy (Phase II)**

**ANNUAL ACTION PLAN**

This document constitutes the annual work programme in the sense of Article 110(2) of the Financial Regulation, and an action plan in the sense of Article 23(2) of NDICI-Global Europe Regulation.

**1. SYNOPSIS**

**1.1. Action Summary Table**

<b>1. Title OPSYS Basic Act</b>	EU Support to Egypt's National Population Strategy (Phase II) <sup>1</sup> Annual Action Plan in favour of Egypt for 2023 OPSYS business reference: ACT-62267 ABAC Commitment level 1 number: JAD.1285972 Financed under the Neighbourhood, Development and International Cooperation Instrument (NDICI-Global Europe).
<b>2. Economic and Investment Plan (EIP)</b>	No
<b>EIP Flagship</b>	No
<b>3. Team Europe Initiative</b>	No
<b>4. Beneficiar(y)/(ies) of the action</b>	The action shall be carried out in the Arab Republic of Egypt
<b>5. Programming document</b>	Multiannual Indicative Programme for European Union support to Egypt for the period 2021-2027 <sup>2</sup>
<b>6. Link with relevant MIP(s) objectives/expected results</b>	SO3.3. To contribute to decent and healthy lives, through access to basic services and social inclusion

<sup>1</sup> An action under the title “Action Document for EU Support to Egypt's National Population Strategy” is already ongoing on the basis of Commission implementing decision C(2017)8256 and financed with the appropriations entered in the budget line BGUE-B2017-22.040102 (CRIS number ENI/2017/040-689– EUR 27 000 000.00).

<sup>2</sup> C(2022)4049 of 16/06/2022 Commission implementing Decision adopting a multiannual indicative programme for Egypt for the period 2021-2027

<b>PRIORITY AREAS AND SECTOR INFORMATION</b>				
<b>7. Priority Area(s), sectors</b>	Priority area 3: Social cohesion, Modern and Democratic State			
<b>8. Sustainable Development Goals (SDGs)</b>	Main SDG targeted: SDG 3: Good Health and Well Being Other significant SDG(s): SDG 5: Gender Equality, SDG 10: Reduced Inequalities			
<b>9. DAC code(s)</b>	13030 - Family planning – 100%			
<b>10. Main Delivery Channel</b>	41100 - United Nations agency, fund or commission (UN)			
<b>11. Targets</b>	<input type="checkbox"/> Migration <input type="checkbox"/> Climate <input checked="" type="checkbox"/> Social inclusion and Human Development <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Biodiversity <input type="checkbox"/> Human Rights, Democracy and Governance			
<b>12. Markers (from DAC form)</b>	<b>General policy objective</b>	<b>Not targeted</b>	<b>Significant objective</b>	<b>Principal objective</b>
	Participation development/good governance	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Aid to environment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Gender equality and women's and girl's empowerment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Reproductive, maternal, new-born and child health	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Disaster Risk Reduction	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Inclusion of persons with Disabilities	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Nutrition	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>RIO Convention markers</b>	<b>Not targeted</b>	<b>Significant objective</b>	<b>Principal objective</b>
	Biological diversity	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Combat desertification	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Climate change mitigation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Climate change adaptation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>13. Internal markers and Tags</b>	<b>Policy objectives</b>	<b>Not targeted</b>	<b>Significant objective</b>
EIP		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EIP Flagship		YES		NO

	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Tags	YES		NO
transport	<input type="checkbox"/>		<input checked="" type="checkbox"/>
energy	<input type="checkbox"/>		<input checked="" type="checkbox"/>
environment, climate resilience	<input type="checkbox"/>		<input checked="" type="checkbox"/>
digital	<input type="checkbox"/>		<input checked="" type="checkbox"/>
economic development (incl. private sector, trade and macroeconomic support)	<input type="checkbox"/>		<input checked="" type="checkbox"/>
human development (incl. human capital and youth)	<input checked="" type="checkbox"/>		<input type="checkbox"/>
health resilience	<input checked="" type="checkbox"/>		<input type="checkbox"/>
migration and mobility	<input type="checkbox"/>		<input checked="" type="checkbox"/>
agriculture, food security and rural development	<input type="checkbox"/>		<input checked="" type="checkbox"/>
rule of law, governance and public administration reform	<input type="checkbox"/>		<input checked="" type="checkbox"/>
other	<input type="checkbox"/>		<input checked="" type="checkbox"/>
Digitalisation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Tags	YES		NO
digital connectivity	<input type="checkbox"/>		<input checked="" type="checkbox"/>
digital governance	<input checked="" type="checkbox"/>		<input type="checkbox"/>
digital entrepreneurship	<input type="checkbox"/>		<input checked="" type="checkbox"/>
digital skills/literacy	<input type="checkbox"/>		<input checked="" type="checkbox"/>
digital services	<input type="checkbox"/>		<input checked="" type="checkbox"/>
Connectivity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tags	YES		NO
digital connectivity	<input type="checkbox"/>		<input checked="" type="checkbox"/>
energy	<input type="checkbox"/>		<input checked="" type="checkbox"/>
transport	<input type="checkbox"/>		<input checked="" type="checkbox"/>
health	<input type="checkbox"/>		<input checked="" type="checkbox"/>
education and research	<input type="checkbox"/>		<input checked="" type="checkbox"/>
Migration	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reduction of Inequalities	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
COVID-19	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

<b>BUDGET INFORMATION</b>	
<b>14. Amounts concerned</b>	Budget line(s) (article, item): 14.020110 Total estimated cost: EUR 12 000 000.00 Total amount of EU budget contribution EUR 12 000 000.00
<b>MANAGEMENT AND IMPLEMENTATION</b>	
<b>15. Implementation modalities (management mode and delivery methods)</b>	<b>Indirect management</b> with the entity(ies) to be selected in accordance with the criteria set out in section 4.3.1

## 1.2. Summary of the Action

Egypt is the most populated country in the Arab World and the third populated country in the African continent with a rapid population growth (1.9% annually), which results in exacerbated demand for water, food, other basic goods and public services.

The action directly responds to the EU-Egypt Partnership Priorities 2021–2027<sup>3</sup>, namely Priority 3 on Social cohesion, Modern and Democratic State by contributing to the specific objective 3.3. “To contribute to decent and healthy lives, through access to basic services and social inclusion”.

This proposed action will further support the commitment of the Government of Egypt to promote voluntary family planning through contributing to Egypt’s 2030 Vision for the Sustainable Development Goals (SDGs), ‘Egypt’s National Population Strategy 2015-2030’ and operationalising the “National Project for the Development of the Egyptian Family” launched under the leadership of the President of the country.. Egypt’s current population strategy is focused on the development of the Egyptian family wherein women and girls are at the centre. Ambitions within these strategies are aligned with the EU-Egypt Multiannual Indicative Programme (2021-2027) and the United Nations Population Fund (UNFPA)’s Country Programme for Egypt (2023-2027).

The ongoing project “EU support to Egypt’s National Population Strategy’ (2018-2023) is being implemented by UNFPA. The project has achieved significant results in strengthening the availability of quality family planning services and increasing demand for voluntary family planning through various project activities including capacity building of the Ministry of Health and Population (MOHP) service providers and outreach workers in clinics, and women health clubs, as well as reaching those furthest behind through the implementation of family planning (FP) service campaigns using mobile clinics. The project supported behaviour change interventions through training of the religious and community leaders and peer educators. Moreover, the EU funded project supported the procurement of different types of contraceptives which helped avoid unintended pregnancies, abortions, maternal and child deaths.

This action represents the second phase of the “EU Support to Egypt's National Population Strategy” and it will target interventions and use of innovative approaches to further improve the delivery and use of quality reproductive health and family planning services in rural and semi–urban underserved areas. The action will further reinforce addressing the deep rooted negative social and gender norms that hamper access to, and use of, family planning services. Additionally, the proposed action will further strengthen reproductive health (RH) and family planning (FP) interventions in Egypt, delivered by public and non-public stakeholders, with an emphasis on strategies and initiatives tailored for youth, particularly young women and men, and adolescent girls. The proposed action aims to support national priorities further around the Egyptian family through a holistic approach focused on Reproductive health and wellbeing, population growth and the investment in young people, as the key agents for change.

<sup>3</sup> [EU and Egypt adopt their partnership priorities - Consilium \(europa.eu\)](https://consilium.europa.eu/en/press/press-releases/2021/03/21/)

The action will strengthen capacities of government and non-government stakeholders with attention to investing in building the capacities of middle-level management, service providers and creating a cadre of trainers who will be able to sustain the activities beyond the end of the project. The proposed interventions will be aligned with the national priorities of Egypt's Vision 2030 and the National Population Strategy at national and governorate levels. It will contribute to achieving the objectives of the National Programme for the Development of the Egyptian Family (NPDEF), more specifically the improvement of human capital, the enhancement of population characteristics and the optimisation of the demographic dividend. The proposed action will contribute to improving Egypt's socio-economic conditions, gender equality and demographic resilience which will further contribute to sustainable development in the country.

Given the urgency of the action, the response measures foreseen capitalise on ongoing interventions that are being enhanced to address immediate and critical gaps identified.

### **1.3. Beneficiar(y)/(ies) of the action**

The Action shall be carried out in Egypt which is included in the list of ODA recipients.

## **2. RATIONALE**

### **2.1. Context**

The population of Egypt reached over 105 million on 1st January 2023 from 96.3 million in 2018 (CAPMAS<sup>4</sup>). As per the population projections of the United Nations Population Division, the population of Egypt might reach - based on the medium scenario - 151 million by 2050. Approximately 95% of the population live in the fertile Nile Valley and the Nile-Delta. Only 5% of the 1,001,450 sq km are populated. Egypt's main challenges continue to be the dramatic rise in population against shrinking resources (notably water), high level of youth unemployment (17.1% for persons aged 15-24, 2022, ILOSTAT) and increasing poverty. As many as 60 percent of Egyptians are estimated to be below or close to the poverty line, according to the country's official data. Egypt's demographic growth is an underlying factor that will further strain the already scarce resources. The demographic development further contributes to the likelihood of a social conflict. Socio-economic situation has been one of root causes of the increase in migratory flows in the past three years from Egypt towards the EU.

Currently Egypt is witnessing the deepest financial, economic and social crisis in decades (shortage of foreign currency, increasing debt, devaluation of the Egyptian Pound by 50% in the past year, and a spike in inflation - food commodity prices rose by more than 60% in a year). The crisis deepened due to the COVID-19 pandemic and exacerbated owing to the global economic spill over in light of the Russia's war of aggression against Ukraine. The latter challenged Egypt's high dependency from grain imports and put pressure on Egypt's food-security. A USD 3 billion IMF 46-month programme agreed in December 2022 aims to tackle the main issues – exchange rate policy, monetary policy and the inability of the private sector to operate, contribute to job creation and attract investments. The social impact of the reforms is a source of great concern given the economic difficulties already facing the population.

The population growth in the past thirty years has increased the demand on water, food, and other basic goods as well as public services. These population growth levels will require further investment in education, health care, clean and affordable energy and working towards gender equality to ensure demographic resilience. Family planning remains one of the top priorities for Egypt as the country is experiencing rapid population growth (1.7% annually, World Bank, 2023). In 2015, the National Population Council presented Egypt's National Population Strategy (NPS) 2015-2030, which aims at reducing fertility rates, primarily by increasing the use of voluntary family planning (FP) methods. The total fertility rate (TFR) has been reduced to 2.85 children per woman in 2021 (Egypt Family Health Survey 2021) from 3.5 children per woman in 2016. The

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<sup>4</sup> The Central Agency for Public Mobilization and Statistics in Egypt is the official statistical agency of Egypt that collects, processes, analyses, and disseminates statistical data and conducts the census. It is the official provider of data, statistics, and reports.

use of family planning methods by currently married women aged 15-49 years has been increased from 58.5% in 2016 to 66.4% in 2021.

Urban population in Egypt is at 43.1% (2023), while rural at 57% (World Bank, 2021). Despite the above-mentioned decline in the TFR and the increase in the use of family planning methods, there are still significant variations in the TFR and the use of family planning methods based on the age and geographical distribution. In some areas of Egypt, TFR The current use of family planning by currently married women aged 15-49 in urban governorates is 70.5% whereas it is only 65.5% in frontier governorates and as low as 57.4% in rural areas of upper Egypt. The current use of family planning by currently married women aged 35-39 years is 75.2%, whereas for younger women aged 15 to 19 and 20-24, it is only 39.0% and 52.3% respectively.

Although the total demand for family planning has risen to around 80%, the total unmet need for family planning is high (13.8%) and it is significantly higher in Upper Egypt (17%) and especially in rural areas (18%).

The COVID-19 pandemic and economic crisis have also affected household income and further created significant barriers for people to access family planning services. The above variations are due to the deep-rooted socio-cultural norms obstructing girls and women's empowerment on many levels. There are issues related to the access of adolescents and young people and women residing in rural areas to family planning services. These norms and issues have a devastating impact on the lives of women and girls, limiting their opportunities and choices, particularly related to their reproductive health, and making them more vulnerable to violence.

## **2.2. Problem Analysis**

### Short problem analysis

The health care services especially in rural and semi-urban underserved areas in Egypt still have huge gaps in the availability of trained service providers to provide reproductive health (RH) and family planning (FP) and quality of these services. Doctors in health facilities are overburdened that affects the quality of services. Social norms and geographic locations also limit women's access to family planning services and contraceptives provided by public sector health facilities. The project will further address these gaps in reproductive health and family planning services ensuring the availability of skilled personnel by training physicians, nurses and midwives and improving quality of services in all parts of Egypt with focus on rural and semi-urban areas through a total market approach with strategies to provide free, subsidized and commercial delivery of FP products and services for ensuring access for all segments of population.

Along with sustaining the previously implemented activities with Ministry of Health and Population (MOHP), the proposed action will focus on targeted interventions for expanding service delivery and building the capacities of health workforce to provide quality family planning and reproductive health services for young people by the public and non-public sectors and addressing access barriers in rural areas while further strengthening partnership with the private provider sector and civil society organizations through social marketing to expand FP service delivery. And will enhance the demand of women and young people on family planning services, while addressing deep rooted negative social norms and misconceptions along with increasing awareness on population issues using innovative edutainment and community mobilization techniques.

This action will be implemented through adopting a total market approach that builds on the accelerator of leaving no-one behind and developing strategies and implementation frameworks that increase access to priority RH and FP services. The proposed action will also support building resilience and anticipating pitfalls and bottlenecks that could undermine progress, whether they come from natural hazards, financial crises or instability. The proposed action will consider mainstreaming climate awareness in its youth interventions including edutainment activities, coupled with advocacy for evidence generation to better understand the impact of climate change on reproductive health of women and girls.

The proposed action will aim to reduce the TFR from 2.85 children per woman to 2.1, reducing the unmet need for family planning from 13.8% to 8% and addressing the variations in the use of family planning and TFR based on the age and place of residence.

This proposed action will complement another EU programme “EU for Women Empowerment in Egypt (EU TAMKEEN)”,<sup>5</sup> by ensuring the availability of adequate quality services and changing the behaviour of different stakeholders to realize the benefits of demographic dividend.

Identification of main stakeholders and corresponding institutional and/or organisational issues (mandates, potential roles, and capacities) to be covered by the action.

*Government partners:* Ministry of Health and Population (MOHP), Ministry of Social Solidarity (MOSS), Ministry of Education (MOE), Ministry of Youth and Sports (MOYS), Ministry of Local development (MOLD), Medical and Nursing Syndicates, Al-Azhar and the *Coptic Orthodox Church, Bishopric of Public, Ecumenical and Social Services Orthodox Church*, Bishopric of Public, Ecumenical and Social Services (BLESS), the Institute of National Planning, specialized national councils and other partners as needed.

*Civil Society Organizations (CSOs) and Faith-Based Organizations (FBOs)* on the demand component of the project, mainly to reach private providers, adolescents, youth, students, religious and community leaders.

*Partnerships with the private sector* such as pharmaceutical companies, hospitals, pharmacies, and clinics.

### **2.3. Lessons Learned**

The implemented Results Oriented Monitoring (ROM) and the ongoing mid-term evaluation of the current EU Support to Egypt’s National Population Strategy (Phase I) revealed the following: 1) The EU support to Egypt’s Population Strategy is highly relevant and it significantly contribute to the national priorities on population through the various types of interventions; 2) there is a need to strengthen collaborations among different stakeholders and to further work on the demand side of family planning; 3) there is a need to develop a capacity building plan for different types of partners and to ensure the quality of trainings being delivered. ROM and the initial recommendations of the mid-term evaluation emphasised the importance of engaging men and boys, community members, and religious leaders. The mid-term evaluation indicated the importance to strengthen EU visibility at the governorate level through a tailored approach.

Furthermore, some of the key lessons learned from the implementation of the ongoing EU support to Egypt’s Population Strategy and from other projects are as follows:

It is essential to adopt a comprehensive approach for strengthening the supply of quality family planning services and increasing the demand for family planning (FP). It is important to continue support for Egypt’s strategic directions and goals to enhance population characteristics by adopting a total market approach and giving special focus on people residing in rural and semi-urban areas and the youth population.

Raising awareness among target populations on the availability and use of family planning services and the value of small family size is crucial. It is very important to ensure the availability of skilled providers to provide quality family planning services. Along with physicians and nurses, it is important to engage skilled midwives for providing FP counselling and services to increase the availability of skilled FP service providers. To meet the family planning needs of all segments of the population, engagement of private sector and civil society organisations with a total market approach is crucial to complement the provision of FP services provided by the public sector health facilities. Addressing the negative social norms, engaging religious and community leaders and using innovative edutainment techniques are effective ways for increasing the acceptance and utilization of family planning services. The supply of quality FP services should increase with the increased demand. And adequate supply of free or subsidised provision of FP methods and services must

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<sup>5</sup> EU for Women Empowerment in Egypt (EU TAMKEEN), EUR 10 million (AAP 2022), implemented UNFPA and other partners. Action is focused on the following components: 1) Women and girls progress toward leadership positions and increased participation; 2) Women and girls have increased access to social and economic rights; and 3) Women and girls’ exposure to risks of gender-based violence, including harmful practices, is reduced.

be ensured especially for the women and young people from poor households. Huge variations in the availability and use of FP services by different population groups residing in different geographic areas must be appropriately addressed with targeted interventions.

While phase I of the EU funded project had contributed to strengthened population governance (institutional and coordination capacities), the proposed action will focus upon strengthening use of evidenced-based data and information and the rolling out of newly developed national digitalised logistics management information systems, digitising trainings, and monitoring and evaluation system.

### 3. DESCRIPTION OF THE ACTION

#### 3.1. Objectives and Expected Outputs

The Overall Objective(s)/Impact(s) of this action is to further improve the delivery and use of voluntary, inclusive, rights based and quality reproductive health and family planning services to reduce population growth rates in Egypt.

The Specific Objective(s) (Outcomes) of this action are:

1. Women and men at reproductive age have increased access to quality reproductive health and Family Planning services.
2. Population at reproductive age and youth have increased awareness about reproductive health and family planning and they are better able to make informed choices.
3. Generation and use of evidence-based data and information for the planning of population, family planning and reproductive health programmes are strengthened.

The above objectives/outcomes will be achieved by:

**Strengthening the supply of quality reproductive (RH) and family planning (FP) services:** Further strengthening health systems, including improving service delivery as well as further building the capacity of the health workforce to provide quality RH and FP services and counselling as essential elements in reducing the unmet need for FP. This will include supporting the government in establishing a cadre of trained midwives to provide family planning counselling and services. Strengthening the partnership with the private sector with a total market approach, mainly private providers, pharmaceutical companies and CSOs and introducing social marketing will be another innovative strategic approach to ensure the provision of standard messages and quality FP services in targeted rural and semi-urban underserved areas with focus on women, adolescent girls and young people.

**Increasing demand for Family Planning services:** Increasing the demand for FP services by addressing structural barriers and negative social norms around contraception using innovative edutainment, digital tools and community mobilisation techniques will be another important component of this project for reducing the unmet need for FP with a rights-based approach. The project will also address the different causes associated with the low use of family planning services by women, adolescent girls and young people and populations residing in different geographic areas with gender transformative approaches and leaving no one behind.

The action will support the development of data and information through perception surveys. It will support the conduct of other types of studies for planning sound and tailored interventions that aim to expand on the economic return on the investment in FP and human capital, particularly investment in the agency of girls and women at reproductive age. The action will capitalise on the use of innovative strategies and digital tools for planning, monitoring, evaluation and reporting.

#### **Outputs:**

The following outputs will be delivered by this action and will contribute to the corresponding specific objectives (Outcomes):



1.1. Contributing to Specific Objective 1: Institutional and technical capacities of service providers linked to reproductive health and family planning are enhanced (support to mobile services and health facilities, and technical capacities of doctors, nurses, midwives, etc.).

1.2. Contributing to Specific Objective 1: Social/outreach/community workers, private sector and civil society organisations are further engaged, and capacity developed in the delivery of reproductive health and family planning services.

2.1. Contributing to Specific Objective 2: Capacities of religious leaders, community leaders, young women and men and adolescent girls and boys, and community members are raised on population and family planning issues.

3.1. Contributing to Specific Objective 3: Increased capacities to generate and use evidence-based data and information for the planning of population, family planning and reproductive health programmes.

### **3.2. Indicative Activities**

#### **Activities related to Output 1.1:**

- Provide capacity building to service providers linked to reproductive health and family planning, including doctors, nurses, midwives and counsellors on comprehensive reproductive health and family planning services and counselling.
- Strengthen institutional capacities for delivering inclusive and quality reproductive health, family planning and youth friendly health services and counselling, including support to healthcare facilities, mobile clinics and other outreach activities.
- Provide the government with family planning commodities, contraceptives and essential supplies for reproductive health and family planning.

#### **Activities related to Output 1.2.**

- Support the government in capacity building of social/outreach/community workers on increasing the demand for services and enhancing awareness of reproductive health and family planning issues.
- Support the government in implementing social marketing and public private partnerships for delivering family planning methods and services through private sector and civil society organisations.

#### **Activities related to Output 2.1.**

- Develop and support implementation of awareness and capacity building activities for religious/community leaders and potential beneficiaries on population and family planning issues.
- Raise awareness and provide capacity building to teachers, female and male students and youth in schools and universities and community settings on population, family planning and reproductive health messages through curriculum and extracurricular activities.
- Design and deliver innovative and gender-sensitive approaches and edutainment activities to increase the demand for reproductive health and family planning services, with focus on capacities of youth on using innovative edutainment including theatre performances, art and culture as well as digital tools.
- Support the development of short videos, TV episodes, radio spots, Information, Communication and Education materials and other communication products, engagement of social influencers, as well as communication campaigns on informed choices and voluntary family planning.

#### **Activities related to Output 3.1.**

- Support the government in designing and conducting needs assessment, gender-sensitive perception surveys and other relevant studies.
- Develop and implement capacity building of government officials on the generation and use of evidence for evidence-based programming for reproductive health and family planning programmes using innovative techniques.

- Support the government in rolling out of newly developed national digitalised logistics management information systems, digitising trainings, and strengthening monitoring and evaluation system (M&E).

### **3.3. Mainstreaming**

#### **Environmental Protection, Climate Change and Biodiversity**

##### **Outcomes of the Strategic Environmental Assessment (SEA) screening:**

The SEA screening concluded that no further action was required.

**Outcomes of the Environmental Impact Assessment (EIA) screening:** The EIA screening classified the action as Category C (no need for further assessment).

**Outcome of the Climate Risk Assessment (CRA) screening:** The CRA screening concluded that this action is at risk no or low risk (no need for further assessment).

#### **Gender equality and empowerment of women and girls**

As per OECD Gender DAC codes identified in section 1.1, this action is labelled as G1. This implies that gender equality being a significant objective of the action. The action will significantly contribute to the EU Gender Action Plan III and Egypt's National Strategy for the Empowerment of Women (2030). It will contribute to further strengthening Egypt's commitments on the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) and the Beijing platform for action. Key targets of the action are Egyptian women of reproductive age (15 to 49 years) and adolescent girls and young people aged 10 to 24 years. By addressing the supply of quality reproductive health and family planning services as well as the demand for family planning services, women and adolescent girls will have increased access to family planning services and information that relate to sexual and reproductive health and rights, and they will be better able to make informed decisions. Targeted women and girls will become more aware about their rights, particularly freedom from gender-based violence and harmful practices such as Female Genital Mutilation and early marriage which directly impact the discourse off family planning and women and girls' empowerment. By raising awareness of men and boys and by further engaging with young women and men, the action will contribute to addressing negative social norms and stereotypes about gender equality and women's rights. The above-mentioned types of interventions should result in positive impacts on accelerating progress towards gender equality and the empowerment of women and girls, strengthened sexual and reproductive health and rights. They are likely to positively impact the reduction of the Total Fertility Rate and increase the demand for family planning services.

#### **Human Rights**

The EU addresses human rights under its bilateral programme with the Government of Egypt as well as under the relevant European Thematic Programmes. The action will make use of the EU guidelines and international best practices that aim at integrating human rights principles across its different interventions. In line with the EU Action Plan on Human Rights and Democracy (2020-24)<sup>6</sup> and with Egypt's National Human Rights Strategy<sup>7</sup>, the action will contribute to the promotion, protection and fulfilment of human rights of targeted beneficiaries. The action will focus on inclusive, rights-based and gender-sensitive services. More specifically, it will advocate for and contribute to strengthened sexual and reproductive health and rights, and empower women and men to claim their rights through strengthened services and awareness-raising. Strengthening capacities of the duty bearers and key stakeholders of Egypt's National Population Strategy will help them fulfil their human rights obligations. The abovementioned types of interventions will contribute to further supporting Egypt in strengthening

<sup>6</sup> [eur-lex.europa.eu/legal-content/EN/TXT/HTML/?uri=CELEX:52020JC0005](https://eur-lex.europa.eu/legal-content/EN/TXT/HTML/?uri=CELEX:52020JC0005)

<sup>7</sup> [English Strategy 2-9.indd \(sschr.gov.eg\)](#)

commitments towards the Programme of Action of the International Conference on Population and Development, the Beijing platform for action and other relevant international commitments. The action will contribute to supporting Egypt in accelerating progress towards the Sustainable Development Goals (SDGs) and its 2030 Vision, in particular those which significantly link to different issues of human rights, the right to development, and gender equality.

### Disability

As per OECD Disability DAC codes identified in section 1.1, this action is labelled as D1. This implies that disability is a significant objective. Inclusion and non-discrimination are cross cutting priorities of the action. An inclusive and a tailored approach will be ensured to meet the specific characteristics and needs of persons with disabilities. Attention will be made to addressing the needs of persons with disabilities, more specifically to have increased access to services and information on family planning and sexual and reproductive health and rights.

### Democracy

Egypt’s Vision 2030 addresses the three dimensions of sustainable development (social, economic, environmental) while emphasising governance and participation as key principles. Addressing the current challenges of population growth through a holistic approach will contribute to the achievement of the 2030 Vision which emphasises a participatory approach for sustainable development. ‘Governance and Transparency’ is a key pillar for the 2030 Vision. The action will foster collaborations of government and non-government stakeholders and governance-based and digitised capacities to deliver services and raise awareness. The action will provide institutional support and capacity building at central and local and it will promote the engagement of a wide range actors through a coordinated approach.

### 3.4. Risks and Assumptions

Category	Risks	Likelihood (High/ Medium/ Low)	Impact (High/ Medium / Low)	Mitigating measures
Risk related to External environment	Government commitment to address population issues discontinues.	Low	High	<ul style="list-style-type: none"> <li>- The Government has adopted a number of initiatives that show commitment towards addressing population growth, including the National Project for Family Development and continued support from its own resources to implement the National Population Strategy. The action will complement government effort by supporting the momentum for population and development at all levels of the government, religious leaders, private sector and academia.</li> <li>- The action will raise capacities of stakeholders at national and governorates levels, involving all layers of government and other key</li> </ul>

				<p>actors to maintain and strengthen commitments.</p> <ul style="list-style-type: none"> <li>- The action will conduct advocacy and raise awareness with attention to maintain reproductive rights high on the political agenda, it will regularly engage senior government officials and development partners in programme implementation.</li> </ul>
Risk related to Planning, processes, and system	Limited governorate level capacities in implementing population programmes	Medium	Medium	<ul style="list-style-type: none"> <li>- Building on Phase I of the action, the proposed action will provide capacity building activities to further enhance national and governorate level capacities.</li> <li>- The Action will provide handholding support to the national government by engaging technical experts on ongoing basis as per the need.</li> </ul>
Risk related to planning, processes and systems	Risk of limited coordination/limited capacities of implementing partners and stakeholders	Low	Low	<ul style="list-style-type: none"> <li>- The action will engage with coordinated networks of partners and stakeholders who have capacities to implement the project interventions.</li> <li>- The action will expand new partnerships within the government and non-governmental partners, including educational institutions, civil society, the private sector and others.</li> <li>- The action will assess capacities of implementing partners and address the capacity gaps as needed.</li> </ul>
Risk related to planning, processes and systems	Operational/institutional constrains leading to risk of non-delivery of programme results	Medium	Medium	<ul style="list-style-type: none"> <li>- The action will expand the capacities of potential partners especially services providers.</li> <li>- The action will strengthen the internal capacity for environmental scanning of potential implementing partners to be able to pre-empt any bottlenecks related to clearances and operational constraints.</li> <li>- The action will further strengthen coordination mechanisms among line ministries responsible for clearing implementing partners.</li> </ul>

Risk related to people and the organisation	Risk of high-turn over in key positions responsible for delivery of programme activities	Medium	Medium	<ul style="list-style-type: none"> <li>The action will ensure the appropriate human resources policies and mechanisms for retaining personnel.</li> <li>The action will develop a system of recognition for the assigned staff.</li> <li>The action will ensure appropriate distribution of tasks and responsibilities.</li> <li>The Action will enhance opportunities for in-house and outside learning as motivation tool for staff and develop training plan to this end.</li> </ul>
Risk related to Legality and regularity aspect	The regulations of the Government of Egypt for local Non-Governmental Organizations (NGOs) to work and receiving donor funds contribute to the delay in implementation of project activities.	High	Medium	<ul style="list-style-type: none"> <li>The action will have close collaboration with Ministry of Social Solidarity, the Ministries of International Cooperation and of Foreign Affairs through established coordination mechanisms to obtain timely clearances.</li> <li>Through the Implementing Partner, the action will obtain necessary clearances from the Government of Egypt linked to the planned interventions. This approach should secure approvals for the work with selected organisations.</li> </ul>

### External Assumptions

- The current momentum and national commitment towards addressing population issues in Egypt remain strong.
- The situation in Sudan/other regional challenges and the linked economic and security conditions in Egypt do not affect Government capacity to sustain support to population aspects from its own resources, which are essential to the sustainability of the action.
- Relevant government and non-government stakeholders continue collaborating with each-other to achieve the expected results.
- Involvement of civil society organisations is ensured through close follow-up with the Government of Egypt and it builds upon successful collaborations during phase I of the action.

### 3.5. Intervention Logic

The underlying intervention logic and guiding assumptions behind the theory of change are as follows:

Addressing population challenges and sustaining an appropriate level of population growth would have positive and direct impacts on sustainable development, human rights, and the quality of life of the population in Egypt. The reduction in the total fertility rate and population growth requires longstanding national commitment and a conducive environment. This commitment requires strong capacities to deliver reproductive health services and an increase in the demand for family planning among men, women and young people at reproductive age.

The national government is a duty bearer that holds an ultimate responsibility for creating a conducive policy environment. Addressing population growth is high on the agenda of the Government of Egypt which has made significant efforts for promoting the use of family planning services. Supporting government capacities to implement reproductive and family planning programmes should contribute to wide scale impact. There is a need to further strengthen and scale-up capacities of service providers and institutional capacities of key stakeholders, especially in rural and underserved areas.

There is a significant need to address the negative social norms, gender biases and misconceptions that create barriers for women and young people to use family planning services. Addressing negative social norms, gender biases and misconceptions requires multi-stakeholder efforts targeting different groups of society including religious leaders, community leaders, men and boys. It is essential to strengthen the capacities of these stakeholders through a holistic and coordinated approach.

The civil society and the private sector have important roles in complementing the reproductive health and family planning services delivered by the public sector and increasing demand among different population groups especially living in underserved areas.

Women, girls and young people are rights holders, and their rights are interdependent and indivisible. Therefore, to achieve a transformative positive impact on the rights and lives of women, girls and young people, there is a need to further strengthen the demand-side and supply side interventions on reproductive health and family planning so that they can make informed choices about their reproductive health and family planning.

If women, girls and young people are more aware about reproductive health, population and family planning issues, and if they are enabled to access reproductive health and family planning services they will be able to make informed choices and use voluntary family planning. Such support will help them in realising their reproductive rights, achieving their full potentials and access to other rights, and it will further contribute to sustainable socio-economic development.

If key stakeholders and different members of society are further capacitated, negative social norms are addressed and uninterrupted delivery of quality reproductive health and family planning services are ensured, then people can make informed choices and population growth rate is lowered.

The EU Support to Egypt's Population Strategy project (Phase I) has created a momentum for further addressing population challenges at a higher pace and scale. This proposed action (Phase II) will continue this momentum and further address the gaps based on age, geographic areas and vulnerable situations. Therefore, well targeted interventions and a differentiated approach among targeted beneficiaries are required for achieving a wider and sustainable impact.

### 3.6. Indicative Logical Framework Matrix

Results	Results chain: Main expected results	Indicators	Baselines (values and years)	Targets (values and years)	Sources of data	Assumptions
<b>Impact 1</b> <b>Impact 2</b>	To further improve the delivery and use of voluntary, inclusive, rights based and quality reproductive health and family planning services to reduce population growth rates in Egypt.	- Total fertility rate	2.85 (2021)		Egypt's National Population Strategy (NPS) 2015-2030	<i>Not applicable</i>
<b>Outcome 1</b>	1. Women and men at reproductive age had increased access to quality reproductive health and Family Planning services.	- Contraceptive Prevalence Rate (CPR) - Contraceptive discontinuation rate - % of unmet need for FP			UNFPA reports, reports from Ministry of Health and Population	-To-be parents are receptive, interested in FP. -Youth is interested/accepts to receive youth-friendly FP services.
<b>Outcome 2</b>	2. Population at reproductive age and youth had increased awareness about reproductive health and family planning and they were better able to make informed choices.	- number of awareness and capacity building activities for religious/ community leaders and potential beneficiaries. - number of edutainment activities to increase the demand for reproductive health and family planning services.			UNFPA reports, media coverage, reports from Ministry of Youth and Sports, Al Azhar and BLESS reports	-To-be parents are receptive, interested in FP. -Youth is interested/accepts to receive youth-friendly FP services.



<b>Outcome 3</b>	3. Generation and use of evidence-based data and information for the planning of population, family planning and reproductive health programmes were strengthened.	<ul style="list-style-type: none"> <li>- number of needs assessment, surveys and other relevant studies.</li> <li>- newly developed national digitalised logistics management information systems rolled out.</li> </ul>			UNFPA reports, reports from Ministry of Health and Population	<ul style="list-style-type: none"> <li>- Systems rolled out.</li> <li>- Studies carried out.</li> </ul>
<b>Output 1 related to Outcome 1</b>	1.1 Institutional and technical capacities of service providers linked to reproductive health and family planning were enhanced (support to mobile services and health facilities, and technical capacities of doctors, nurses, midwives, etc.).	<ul style="list-style-type: none"> <li>- number of capacity building trainings provided to service providers.</li> <li>- number of family planning commodities, contraceptives and essential supplies provided for reproductive health and family planning.</li> </ul>			UNFPA reports, reports from Ministry of Health and Population	<ul style="list-style-type: none"> <li>- Supplies provided.</li> </ul>
<b>Output 2 related to Outcomes 1</b>	1.2 Social/outreach/community workers, private sector and civil society organisations were further engaged and capacity developed in the delivery of reproductive health and family planning services.	<ul style="list-style-type: none"> <li>- number of social/outreach/community workers, private sector and civil society organisations informed/engaged.</li> </ul>			UNFPA reports	<ul style="list-style-type: none"> <li>- Outreach is well received by stakeholders.</li> </ul>
<b>Output 1 related to Outcome 2</b>	2.1 Capacities of religious leaders, community leaders, young women and men and adolescent girls and boys, and community members were	<ul style="list-style-type: none"> <li>- number of awareness and capacity building activities for religious/ community leaders and potential beneficiaries.</li> <li>- number of edutainment activities to increase the demand</li> </ul>			UNFPA reports, media coverage, reports from Ministry of Youth and	<ul style="list-style-type: none"> <li>- Outreach is well received by stakeholders.</li> <li>- Specific campaigns reached target</li> </ul>

	raised on population and family planning issues.	for reproductive health and family planning services. - number of short videos, TV episodes, radio spots, Information, Communication and Education materials and other communication products, engagement of social influencers, as well as communication campaigns on informed choices and voluntary family planning.			Sports, Azhar BLESS reports Al and	groups and were well attended.
<b>Output 1 related to Outcome 3</b>	3.1. Increased capacities to generate and use evidence-based data and information for the planning of population, family planning and reproductive health programmes.	- number of needs assessment, surveys and other relevant studies. - newly developed national digitalised logistics management information systems rolled out.			UNFPA reports, reports from Ministry of Health and Population	- Systems rolled out. - Studies carried out.

## 4. IMPLEMENTATION ARRANGEMENTS

### 4.1 Financing Agreement

In order to implement this action, it is envisaged to conclude a financing agreement with the partner country.

### 4.2 Indicative Implementation Period

The indicative operational implementation period of this action, during which the activities described in section 3 will be carried out and the corresponding contracts and agreements implemented, is 72 months from entry into force of the financing agreement.

Extensions of the implementation period may be agreed by the Commission's responsible authorising officer by amending this financing Decision and the relevant contracts and agreements.

### 4.3 Implementation Modalities

The Commission will ensure that the EU appropriate rules and procedures for providing financing to third parties are respected, including review procedures, where appropriate, and compliance of the action with EU restrictive measures.

#### 4.3.1 Indirect Management with a pillar-assessed entity

This action may be implemented in indirect management with a pillar-assessed entity, which will be selected by the Commission's services using the following criteria:

- Significant specialised expertise in implementing interventions with focus on population and reproductive health, youth empowerment as well as gender equality.
- Experience in supporting and implementing development assistance projects in Egypt including through working with the Government of Egypt and the civil society.
- Operational capacity to implement development assistance projects, including EU funded projects.
- Proven experience in coordination with international and local actors at both the EU and country level.

The implementation by this entity entails Specific Objectives/Outcomes 1, 2, and 3 of the action.

### 4.4 Scope of geographical eligibility for procurement and grants

The geographical eligibility in terms of place of establishment for participating in procurement and grant award procedures and in terms of origin of supplies purchased as established in the basic act and set out in the relevant contractual documents shall apply, subject to the following provisions.

The Commission's authorising officer responsible may extend the geographical eligibility on the basis of urgency or of unavailability of services in the markets of the countries or territories concerned, or in other duly substantiated cases where application of the eligibility rules would make the realisation of this action impossible or exceedingly difficult (Article 28(10) NDICI-Global Europe Regulation).

### 4.5 Indicative Budget

<b>Indicative Budget components</b>	<b>EU contribution (amount in EUR)</b>
<b>Implementation modalities</b> – cf. section 4.3	
Indirect management with pillar assessed entities – cf. section 4.3.1	11 850 000.00
<b>Evaluation</b> – cf. section 5.2	150 000.00
<b>Audit</b> – cf. section 5.3	

Strategic communication and Public diplomacy – cf. section 6	N.A.
<b>Totals</b>	12 000 000.00

#### 4.6 Organisational Set-up and Responsibilities

A Steering Committee (SC) will be set up in the first six months of operation of the action to oversee and guide the overall direction and policy of the action. It shall meet twice a year. It could also be convened whenever the project implementation requires strategic decisions. The SC shall be chaired by the Ministry of International Cooperation (MoIC) on behalf of the Government of Egypt and will be composed of the Ministry of Foreign Affairs (MoFA), the Ministry of Health and Population (MoHP), and representatives of the relevant Government’s line Ministries and other government entities.. The EU Delegation to Egypt shall attend as an observer. The implementing partner will be invited. Other entities and stakeholders shall be also invited whenever deemed appropriate. MoIC will act as SC secretariat. The SC will receive, discuss and review the periodical work plans, budgets, technical and financial reports of the programme. The SC can be also convened at any time whenever the action requires strategic decisions or changes.

Whenever needed, **A Technical Committee** will be set up and shall meet at least twice a year.

As part of its prerogative of budget implementation and to safeguard the financial interests of the Union, the Commission may participate in the above governance structures set up for governing the implementation of the action.

### 5. PERFORMANCE MEASUREMENT

#### 5.1 Monitoring and Reporting

The day-to-day technical and financial monitoring of the implementation of this action will be a continuous process, and part of the implementing partner’s responsibilities. To this aim, the implementing partner shall establish a permanent internal, technical and financial monitoring system for the action and elaborate regular progress reports (not less than annual) and final reports. Every report shall provide an accurate account of implementation of the action, difficulties encountered, changes introduced, as well as the degree of achievement of its Outputs and contribution to the achievement of its Outcomes, and if possible at the time of reporting, contribution to the achievement of its Impacts, as measured by corresponding indicators, using as reference the logframe matrix.

The Commission may undertake additional project monitoring visits both through its own staff and through independent consultants recruited directly by the Commission for independent monitoring reviews (or recruited by the responsible agent contracted by the Commission for implementing such reviews).

#### 5.2 Evaluation

Having regard to the importance of the action, a mid-term and final evaluation will be carried out for this action via independent consultants contracted by the Commission via an implementing partner.

The mid-term evaluation will be carried out for problem solving and learning purposes.

The final evaluation will be carried out for accountability and learning purposes at various levels (including for policy revision), taking into account in particular the fact that the outcomes of the evaluation will feed into the identification of forthcoming possible actions.

The Commission shall form a Reference Group (RG) composed by representatives from the main stakeholders at both EU and national (representatives from the government, from civil society organisations (private sector, NGOs, etc.), etc.) levels. If deemed necessary, other donors will be invited to join. The Commission shall inform the implementing partner at least 3 months in advance of the dates envisaged for the evaluation missions. The implementing partner shall collaborate efficiently and effectively with the evaluation experts, and inter alia provide them with all necessary information and documentation, as well as access to the project premises and activities.

The evaluation reports shall be shared with the partner country and other key stakeholders following the best practice of evaluation dissemination. The implementing partner and the Commission shall analyse the conclusions and recommendations of the evaluations and, where appropriate, in agreement with the partner country, jointly decide on the follow-up actions to be taken and any adjustments necessary, including, if indicated, the reorientation of the project.

The financing of the evaluation shall be covered by another measure constituting a Financing Decision.

### **5.3 Audit and Verifications**

Without prejudice to the obligations applicable to contracts concluded for the implementation of this action, the Commission may, on the basis of a risk assessment, contract independent audit or verification assignments for one or several contracts or agreements.

## **6. STRATEGIC COMMUNICATION AND PUBLIC DIPLOMACY**

All entities implementing EU-funded external actions have the contractual obligation to inform the relevant audiences of the Union's support for their work by displaying the EU emblem and a short funding statement as appropriate on all communication materials related to the actions concerned. To that end they must comply with the instructions given in the 2022 guidance document [\*Communicating and raising EU visibility: Guidance for external actions\*](#) (or any successor document).

This obligation will apply equally, regardless of whether the actions concerned are implemented by the Commission, the partner country, service providers, grant beneficiaries or entrusted or delegated entities such as UN agencies, international financial institutions and agencies of EU Member States. In each case, a reference to the relevant contractual obligations must be included in the respective financing agreement, procurement and grant contracts, and contribution agreements.

For the purpose of enhancing the visibility of the EU and its contribution to this action, the Commission may sign or enter into joint declarations or statements, as part of its prerogative of budget implementation and to safeguard the financial interests of the Union. Visibility and communication measures should also promote transparency and accountability on the use of funds. Effectiveness of communication activities on awareness about the action and its objectives as well as on EU funding of the action should be measured.

Implementing partners shall keep the Commission and the EU Delegation/Office fully informed of the planning and implementation of specific visibility and communication activities before the implementation. Implementing partners will ensure adequate visibility of EU financing and will report on visibility and communication actions as well as the results of the overall action to the relevant monitoring committees