
BACKGROUND OF THE COUNTRY

Paraguay has made major strides in the exercise of the right to family planning and a life free of violence. There are laws, policies, programmes, and protocols to ensure access to sexual and reproductive health for all people and the prevention of sexual abuse, even though their application has not been achieved at a national level.

Pregnancy and adolescent motherhood is, in most cases, a problem of injustice and social inequality. The inequalities are territorial, ethnic, cultural, economic, educational, and gender-based, among others.

These girls and adolescents with children have had their rights violated, which affects their health, personal safety, way of life and family, access to education and life project. Also, it erodes the human capital of society, deepening problems such as poverty, maternal and neonatal deaths, sexual violence, and discrimination.

The most recent strategies of approach to the problem of adolescent pregnancy and girls and adolescents with children focuses on rights, "particularly when it is not a product of planning and desire, it is a clear manifestation of the vulnerabilities of adolescent sexual and reproduction rights and hence their human rights," (UNFPA).

High rate of adolescent pregnancy

Adolescent pregnancy remains high despite efforts. Every day, two births are recorded from girls between 10 and 14 years of age, and fifty-four births from adolescents between 15 and 19 years old. According to the analysis of the records of live births in this age group the recurrence of motherhood occurs in 2 out of 100 girls. Also, between 2011 and 2015, of the 3,357 registered live births of girls between 10 to 14 years, 70 correspond to the second, third, and even the fourth birth.

Paraguay is in first place in the Southern Cone with the highest adolescent fertility rate; 72 births per 1,000 adolescent women between 15 to 19 years, with the trend of childhood pregnancy in girls between 10 to 14 years on the rise¹.

Disaggregating by variables identifies how adolescent pregnancy affects girls and adolescents of the most disadvantaged socio-economic quintiles. According to data from the Multiple Indicator Cluster Survey carried out in 2016, 5% of adolescents aged 15 to 19 years in poverty reported to having at least one son or daughter before the age of 15; almost 10% of the indigenous girls had at least a child. In the group of girls in the highest income quintile, the percentage of maternity before age 15 was zero.

So far in 2018, one out of every four registered maternal deaths correspond to a girl or adolescent between 10 and 19 years.

Other determining factors identified that expose girls and adolescents to unintended pregnancy include sexual abuse, sexual coercion, poverty, leaving the education system, limited access to information on rights and sexuality, and quality comprehensive health services, including orientation and contraception. According to the 2016 report, Fertility and adolescent motherhood in the Southern Cone: Notes for the construction of a common agenda², 35% of girls under the age of 15 were in a relationship at the time of childbirth.

Sexual abuse and coercion are common; parents themselves, family members, or guardians give the "authorisation" for "relationships and unions" of girls or adolescents of 10 to 17 years old with adult males, although these situations are classified as sexual abuse under the Code of Childhood and Adolescence, in other words, prohibited by law. It is not easy to establish the exact magnitude of the situation of sexual abuse, given that in cases in which the adolescent indicates having "consented" to having sex, she does so without necessarily having a clear understanding of what she is consenting to, nor the potential consequences that this entails.

¹ MSPyBS, DGEEC, STP, ERSANN, UNICEF, BID, 2016. [Multiple Indicator Cluster Survey. Paraguay.](#)

² UNFPA, 2016. [Fecundidad y maternidad adolescente en el Cono Sur: Apuntes para la construcción de una agenda común.](#)

The *criadazgo* is a form of exploitation and slavery that is still common in the country, although it is illegal. Girls and adolescents under the age of 18 with the consent of their parents or guardians live outside of their homes with people, either from their extended family or not, to perform domestic and/or caretaking tasks, in exchange for food, shelter, clothing, and education (not always) without pay or social security.

This reinforces the key role that the education sector could and should play in the prevention of violence and sexual abuse by furthering an educational approach that incorporates information about preventing sexual abuse and unintentional pregnancy in adolescents.

Early School Leaving or School Dropout

As to the link between education, early pregnancy and maternity, it is noted that in a significant proportion, the departure from the educational system precedes the pregnancy. This situation indicates that important initiatives need to be applied and strengthened to reintegrate adolescents at risk of early school leaving, as well as enabling adolescents that are pregnant or with children to continue school. Social protection interventions related to keeping girls and adolescents in the school play a key role, as well as the implementation of effective strategies to provide information on prevention of unintended adolescent pregnancy and sexual abuse outside of schools.

Insufficient access to comprehensive health services for adolescents

With the goal of improving access for adolescents to the health system, 26 friendly care services have been made available, which are still not enough to meet the demands of this age group. It is necessary to extend the adolescent model of care to all levels of the health care system, beginning from the first level of care.

Limited educational approach regarding laws and sexual and reproductive health provided in the curriculum and the legal framework of the country

There are still limitations and challenges for education on rights as established in the country's legal framework, in particular in the country's Code of Childhood and Adolescence. In this context, incorporating families and communities as key allies to move forward in the education sector is key.

Fragmented response from the National Protection System

The response from the National Protection System regarding sexual abuse cases needs to be strengthened by improving coordination of the System through an intersectoral roadmap designed to provide impact and support of the Municipal Departments for Children and Adolescent Rights whose function is to provide free, permanent protection, support and defence of the rights of children and adolescents.

Insufficient monitoring. The need to strengthen monitoring and to implement systematic evaluations of the programs and courses of action is highlighted.

JUSTIFICATION

In addition to contributing to a better quality of life for them and their families and communities, the prevention of pregnancy in girls and adolescents is a priority issue on the country's agenda, which translates into plans and programmes for the participating institutions of the project. It is a commitment undertaken by the country through its legal framework, international commitments such as the Sustainable Development Goals (SDGs), and regional agreements such as the Montevideo Consensus and the Sub Regional Strategic Framework for the Reduction and Prevention of Unintentional Pregnancy in the Adolescent population from the Southern Cone presented in Asunción in 2017.

Paraguay is urged to strengthen its intersectoral actions in the prevention and reduction of unintended adolescent pregnancy; therefore, the Ministry of Public Health and Social Welfare, Ministry of Education and Sciences, Ministry of Childhood and Adolescence, and the Ministry of Labour, Employment and Social Security have decided to develop this proposal addressing this grave problem with more vigorous actions.

The proposed model intends to improve the connection between the participating institutions and strengthen their capacity to respond by incorporating the strategies that have demonstrated to be the most efficient such as; empowering girls and adolescents by informing them of their rights with their affective environment, health for the denaturing of sexual abuse, and comprehensive quality health services with the active participation of families and communities in all the activities.

LEGAL CONTEXT

UNFPA operates in Paraguay applying mutatis mutandis the Standard Basic Assistance Agreement (“SBAA”) of UNDP concluded on October 7, 1977, and ratified by the Congress of the Paraguayan Nation through Law N° 686 of June 7, 1978, so that the terms and conditions between UNDP and the Government apply for UNFPA.

With regards to UNFPA’s responsibilities, immunities and privileges, the norms of Article 105 of the Charter of the United Nations, and those of the Privileges and Immunities of the United Nations Convention, approved on February 13, 1946, are applicable.

This project will be implemented by UNFPA in accordance with its financial regulations, rules, policies and procedures and administrative instructions.

IMPLEMENTATION PERIOD

The project implementation will begin on the date of the receipt of the funds. Duration 36 months.

Start date: September/ 20/2019

End date: September/ 20 /2022

IMPLEMENTATION STRATEGY

General Objective: “By 2022, contribute to the reduction of pregnancy in girls and adolescents under the age of 19, with an emphasis on the prevention and approach to violence and sexual abuse.”

Specific objectives:

- Strengthen the supply and demand of comprehensive adolescent health services, in line with the current model and standards, to quality standards, with a focus on rights, gender and interculturality; including the offering of counselling and contraceptive methods.
- Improve access to information and education for children, adolescents, families and communities on adolescent pregnancy prevention and sexual abuse/violence.
- Optimise inter-institutional response and follow-up in cases of sexual abuse and violence towards girls and adolescents and girls and adolescents with sons/daughters.
- Improve the response, management and coordination capacities of state institutions, guaranteeing the rights of children and adolescents.

It will work in two areas:

1. Preventing pregnancy and sexual abuse/violence in girls and adolescents.
2. Care and protection of girls and adolescents who are victims of sexual abuse and/or pregnant.

Expected results:

1. Girls, adolescents, their families, and communities informed about their sexual and reproductive rights and the prevention of sexual abuse and unintended adolescent pregnancy.
2. Families, communities, and State united for the prevention of pregnancy and sexual violence/abuse of girls and adolescents.
3. Comprehensive, friendly, quality care model for adolescents from 10 to 19 years of age, implemented at all levels of the public health system of the District of Caaguazú.
4. The country has an intersectoral road map of comprehensive care for girls and adolescent who are victims of abuse and/or sexual violence along with a model of integrated care for girls and adolescents that are pregnant or with children.

CONTRIBUTION TO SUSTAINABLE DEVELOPMENT GOALS

Unintentional adolescent pregnancy and sexual abuse impact negatively on all sustainable development goals, but specifically, SDGs 1, 3, 4, 5, 10.

For its approach, it is necessary to generate and maintain alliances for a comprehensive, coordinated and timely response, which contributes to advancing the achievement of SDG 17.

AREA	STRATEGIC LINES	Activities	Expected results:	SDGs to which they contribute
Preventing pregnancy in girls and adolescents and sexual abuse/violence.	Access to information and education for the development of life skills, including sexual and reproductive health and rights.	Development and implementation of a communication campaign, using social networks and community radios, on the prevention of adolescent pregnancy and sexual abuse.	Girls, adolescents, their families, and communities informed about their sexual and reproductive rights and the prevention of sexual abuse and unintended pregnancy.	SDGs 3, 4, 5, 10, 16, and 17.
		Education for families and the community for the prevention of adolescent pregnancy and sexual abuse/violence.	Families, communities, and state, united for the prevention of pregnancy and sexual violence/abuse of girls and adolescents.	SDGs 1, 3, 4, 5, 10, 16, and 17.
	Access to comprehensive quality friendly health services to adolescents, including the provision of sexual and reproductive health care.	Strengthening of the supply of comprehensive and quality, friendly health services for adolescents 10 to 19 years of age in selected public services according to the current model of care, including orientation and offering contraceptives.	Comprehensive, friendly, quality care model for adolescents from 10 to 19 years of age, implemented at all levels of care of the public health system of the district of Caaguazú.	SDGs 1,3,5, and 10.
Care and protection of pregnant girls and adolescents and/ or victims of violence and sexual abuse.	Comprehensive detection and assistance for girls and adolescent victims of sexual abuse and pregnant girls and or adolescents with or without children.	Comprehensive detection and assistance for girls and adolescent victims of sexual abuse and pregnant girls and or adolescents with or without children. (Includes offering tests for HIV/Syphilis and prophylactics for HIV and other STDs, Emergency Contraceptive Pill, comprehensive care, psychological support and social worker assistance, activation of the protection system).	The country maintains an intersectoral road map of comprehensive care for girls, and adolescent victims of abuse and/or sexual violence along with a model of integrated care for girls and adolescent that are pregnant or no, with or without children.	SDGs 1, 3, 4, 5, 10, 16, and 17.

MANAGEMENT AND GOVERNANCE ARRANGEMENTS

The project will be implemented under the modality of direct implementation by UNFPA, in accordance with its administrative, financial and programmatic rules and procedures.

In order to ensure coordination and efficiency in the project implementation, a Project Board will be established, which will be consisted by one of the ministers of the following state portfolios that have participated in the preparation of the project: Ministry of Public Health and Welfare Social or Ministry of Children and Adolescents, or Ministry of Labor, Employment and Social Security or Ministry of Education and Science and by the National Representative of UNFPA in Paraguay. Ministers of State portfolios will define which minister will be the member of the Project Board, as the Honorary Consulate in Paraguay or Representative of Indian Embassy in Argentina that is concurrently accredited to Paraguay.

The members of the Project Board will sign the corresponding documentation representing all the State portfolios, for the purpose of this project. The Project Board will meet at least once a year to evaluate the project's progress and ensure its strategic direction.

The technical accompaniment to the implementation of the programme activities envisaged in the project will be carried out through an **Inter-institutional Technical Team (ETI, *Equipo Técnico Interinstitucional*)** formed by officially designated representatives of the government institutions that have developed the project. The ETI will meet regularly bimonthly, with the possibility of establishing extraordinary meetings by consensus decision of its members.

The ETI may, as needed, be able to convene extended meetings, which may be convened by other institutions that are members of the National Social Protection System or other stakeholders linked to the subject matter of the project.

As an implementing agency, **UNFPA** is responsible for administering funds and ordering expenditures in accordance with annual work plans and procurement plans, as well as directing the implementation of activities, conducting general oversight, monitor progress and prepare monitoring reports

The UNFPA Sexual and reproductive health program officer will be the **guarantor of the results** of the project, for which it will be necessary to follow up on the activities and provide advice to ensure the proper implementation and achievement of the results provided. It will also coordinate UNFPA support for the implementation of the project and prepare monitoring reports for consideration by the TSI and/or the project board as appropriate.

At the local level, the Project Coordination, in collaboration with the responsible persons assigned by each institution to accompany the implementation of the actions in the field, will oversee the implementation of the envisaged actions and contribute to the elaboration of follow-up reports.

PROGRAMME AND FINANCIAL MONITORING

Narrative reporting

The Recipient Agency will provide the Contributing Agency with a narrative report on the progress of the Activities on a regular basis, as set out below:

1. Monthly updates including two (2) or three (3) relevant points on progress submitted via email;
2. Two bi-annual progress report;
3. One final progress report within six (6) months following the date of operational completion of the Programme or, in the event of termination of this Agreement, following such termination;

Financial Reporting

The Recipient Agency will provide the Contributing Agency with the following financial reports, prepared in accordance with the Recipient Agency's financial regulations, rules, policies, procedures, and administrative instructions:

- Quarterly expenditure reports (non-certified) using the FACE form to be submitted by the implementing office, manually (via email) within 20 days after the end of each calendar quarter. By the time of submission of the fourth quarter FACE form (Q4 FACE October – December), the implementing office should demonstrate 80% implementation rate for the year in question.
- Annual financial statement certified by an authorized official of UNFPA (Finance Branch, Division for Management Services) as of 31 December of the year in question, to be submitted no later than 30 June of the following year;
- Final financial statement certified by an authorized official of UNFPA (Finance Branch, Division for Management Services) to be submitted no later than 30 June following the year in which the Programme was operationally completed.

RESULTS, ACTIVITIES, INDICATORS, GOALS AND MEANS OF VERIFICATION.

Results/Activities	Indicators	Goal of the project at three years	Means of verification
Expected result 1. Project implemented and monitored in a systematic and timely manner.			
Activity 1. GERENCI_EA Project management led by an inter-institutional team with the government institutions and UNFPA.	Number of meetings held by the inter-institutional team	36	Meeting Reports
Activity 2. MONITOR_EA Project monitoring.	Number of visits to the field	12	Monitoring reports
Expected result 2. Girls, adolescents, their families, and communities informed about sexual and reproductive rights and the prevention of sexual abuse and unintended pregnancy.			
Activity 3 CAMPAÑA_EA Development and implementation of communication campaign, using social networks and community radios, on the prevention of adolescent pregnancy and sexual abuse.	Number of Facebook, Twitter, and Instagram fans/followers	5,000	Reports from social networks
	Number of people reached	1,000,000	Reports from social networks
Expected result 3. Families, communities, and state, united for the prevention of pregnancy and sexual violence/abuse of girls and adolescents.			
Activity 4. ESI_FAMILY Education for families and the community for the prevention of adolescent pregnancy and sexual abuse/violence.	Number of adolescents and youth as well as family members reached	1,300	List of participants in educational activities disaggregated by age, sex and role in the family (300 in the first year and then 500 in each of the following two years).
	Number of instructors trained in the method	200	List of participants for the training workshops
Expected result 4. Comprehensive, friendly, quality care model for adolescents from 10 to 19 years of age, implemented at all levels of care of the public health system of the district of Caaguazú.			
Activity 5. SALUD_ADOL Strengthening of the supply of quality and friendly comprehensive health services for adolescents 10 to 19 years of age in selected public services according to the current model of care, including orientation and offering contraceptives.	Percent of public health services (USF and district hospitals of Caaguazú) who provide friendly care to adolescents according to the technical standard	90%	HR monitoring and training reports
Expected result 5. The country has an intersectoral road map of comprehensive care for girls and adolescent who are victims of abuse and/or sexual violence along with a model of integrated care for girls and adolescents that are pregnant or with children.			
Activity 6. RUTA_INTER Detection and comprehensive support to girls and adolescents, victims of sexual abuse and girls and adolescents pregnant or with children (Includes offering tests for HIV/ Syphilis and prophylactics for HIV and other STDs, Emergency Contraceptive Pill, comprehensive care, psychological support and social worker assistance, activation of the protection system).	Per cent of victims of sexual abuse detected receiving care within the first 72 hours according to existing protocols	100%	Institution reports
Result 6. Evidence on results and lessons learned from the project available to scale actions at a national level			
Activity 7. EVI_EMB_AD Generation of evidence-Systematization	Systematisation available	Yes	Systematisation document

COMMUNICATION AND VISIBILITY

The communication and visibility activities included in this proposal will include among others: i) the publicity of the India Government and India –UN Development Partnership Fund support of the intervention ii) the inclusion of the India Government and “India-UN Development Partnership Fund” logo in all the communication with the press, communication with beneficiaries, official correspondence related to the proposal; iii) the inclusion of the India Government and the “India-UN Development Partnership Fund” logo in all the documents, tools, reports, and publications, developed products from this financing and all messages, communication materials, and audio-visual productions financed with these funds.

MONITORING AND EVALUATION

UNFPA as the implementing agency will monitor project activities in line with its policies and procedures. Additional monitoring will be conducted by partnering government and UNOSSC as fund manager and secretariat of the Board of Directors. Additional monitoring will be conducted by partnering governments, Indian representatives accredited in/for the partner country/ies and, where applicable, UNOSSC as fund manager and secretariat of the Board of Directors. Additional monitoring will also be done by nominated Indian representatives from the Honorary Consulate in Paraguay or Indian Embassy in Argentina that is concurrently accredited to Paraguay.

The UNFPA country office in Paraguay consists of a non-resident country director, based in Bolivia, a national representative, a finance and administrative associate, a finance and programme assistant, three national programme officers (NPO), one of Sexual and Reproductive Health, one of Advocacy and Communication, one of Gender and Youth, one Programme Specialist, one driver. National experts and consultants will be recruited based on the assessment of expertise required to strengthen programme implementation. The office also relies on the technical support of UNFPA regional office for LACRO, based in Panamá, and other units within the organization, in particular the Procurement Support Branch based in Copenhagen, and the Inter-Country Cooperation Office based in New York.

As the executing agency for this proposal, UNFPA will provide the required technical assistance during the planning, implementation and monitoring of activities with the aim of enhancing the capacity of partners and the quality of the activities. The management and monitoring activities will be aligned with the monitoring plan and coordination mechanisms of the country programme put in place between the Ministry of Public Health and Welfare Social, the Ministry of Children and Adolescents, or Ministry of Labour, Employment and Social Security or Ministry of Education and Science; including the preparation of periodic reports, periodic reviews of progress, field visits. The collection of information and data for the monitoring of indicators will be based on existing systems.

The technical accompaniment to the implementation of the programme activities envisaged in the project will be carried out through an Inter-Institutional Technical Team (ETI, Equipo Técnico Interinstitucional) as mentioned.

PARTNERSHIPS

The aim is to strengthen and expand the scope of the policies that are taking place in the country by developing a model that strengthens the coordination of programs, initiatives, and existing policies and those that need to be developed to meet the results and proposed target goals. To measure the relevance of the policies to be included, this pilot program is developed for girls with a comprehensive approach that considers the need to prevent and respond to sexual abuse that causes most of the pregnancies in this age group.

- The Ministries of Public Health and Social Welfare and Childhood and Adolescence have been fostering the strengthening of actions from their corresponding areas and the development of a National Adolescent Pregnancy Prevention Plan within the framework of the Regional Strategy for Prevention and Reduction of Unintended Adolescent Pregnancy, drafted by the five countries of the Southern Cone with the Support of the UN Population Fund, UNFPA.
- The Ministry of Labour, Employment, and Social Security contributes knowledge and experience in the development of life skills through vocational technical training courses aimed at adolescents and youth.

SOUTH-SOUTH COOPERATION

Two activities will be developed with South-South cooperation, and technical support of the UNFPA Regional Office for Latin America and the Caribbean within the project's framework.

- 1- The mapping of adolescent pregnancy in the country, with the aim to strengthen the available evidence on adolescent pregnancy at the sub-regional level.
- 2- The implementation of the monitoring of friendly services according to regional quality standards, with the aim of improving the quality of comprehensive health services.

WORK PLAN AND QUARTERLY SCHEDULE

Results/ Activities/ Sub-activities	Implementation period												
	2019		2020				2021				2022		
	T 3	T 4	T 1	T 2	T 3	T 4	T 1	T 2	T 3	T 4	T 1	T 2	T 3
Expected result 1. Project implemented and monitored in a systematic and timely manner.													
Activity 1. GERENCI_EA Management of the project will be led by an inter-institutional technical team integrated by various government agencies and the UNFPA	X	X	X	X	X	X	X	X	X	X	X	X	X
1.1. Creation and establishment of an Inter-Institutional Executive Technical Commission officially assigned to direct and follow-up on the project (six preparatory meetings).	X												
1.2. Selection and hiring of technical, logistic and administrative team that will execute the project. One coordinating person in the field is planned at USD 1,900 and one person for logistic, technical support with knowledge in communication (contribution from the project, USD 1,000; total salary USD 1,415), plus 2% administrative costs for 35 months.	X												
Activity 2. MONITOR_EA Monitoring of project actions	X	X	X	X	X	X	X	X	X	X	X	X	X
2.1. Project monitoring actions. 2.1.1. Monthly meetings of the Inter-Institutional Executive Technical Commission for the direction and follow-up of the project and of cases captured within the framework of the same (16 participants' x 1 meeting x 36 months. Refreshments, desktop supplies, administrative costs, and photocopies are expected) 2.1.2. Field visit by 2 Technicians – 1 driver (3 people) twice a month the first 2 months (4 trips) with 2 overnight stays, then one time each quarter until the end of the project with the same number of people and overnight stay per mission (11 trips) + fuel and vehicle maintenance and 5% administrative costs USD 2,000 the first year, then USD 1,500 each year X 2 years) + USD 2,000 for contingencies. 2.1.3. Transportation of project coordinator USD 2,400 USD 2,880 of communication expenses and 5% administrative costs for project coordination. 2.1.4. Monitoring of cases and monitoring of the project at the local level through monthly meetings of a local intersectoral team formed for the purpose of promoting the coordination of actions, programmes and initiatives for the integral monitoring of girls and adolescents who are victims of sexual abuse or of girls and adolescents who are pregnant or have children (CODENI, Programa Abrazo, protocol of comprehensive care for pregnant adolescents, MINNA complaint database; TEKOPORA-SAS, education, health, labour (USD 80 per session, includes: refreshments, desktop supplies, administrative costs and photocopies X 36 meetings.) 2.1.5. Preparation of reports, USD 800 per year (photocopies, desktop supplies, and computer supplies).	X	X	X	X	X	X	X	X	X	X	X	X	X
Expected result 2. Girls, adolescents, their families and communities informed about their sexual and reproductive rights and about the prevention of sexual abuse and pregnancy.													

Activity 3. CAMPAÑA_EA Development and implementation of a communication campaign utilising the social network and community radio, about the prevention of adolescent pregnancy and sexual abuse.	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
3.1. Establish the terms of reference and select a creative company.	X														
3.2. Development of technical content base for the communication campaign. Key topics to be addressed through the campaign: A. Risks of sexual abuse and pregnancy in girls. B. Denaturation of early marriages and sexual abuse. C. Where and when to go in a situation of pregnancy or sexual abuse or before the risk. D. Information to children, adolescents and their affective environment, to prevent sexual abuse and to report it. Review of the same in years 2 and 3.	X	X			X					X					
3.3. Creation of a communication campaign that considers: A. Graphic identity and creative design. B. Development of a framework of discourse. C. Development of at least 40 communicational products for social networks and radios, in Jopará and Spanish, with a focus on rights, multiculturalism, gender and inclusion. D. Design of marketing products. E. Design a followers' page on social networks (Facebook, Twitter and Instagram.)	X	X													
3.4. Review of the campaign, adjustments and design of new marketing products.						X	X								
3.5. Development of media plan and postings in social networks and social network administration through consulting; implementation of the campaign (34 months.)	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
3.6. Development and implementation of advocacy actions based on narratives on adolescent pregnancy prevention and actions to be implemented within the framework of the initiative. (Elaboration of the discursive framework based on legal and data frameworks), socialisation through 5 4-hour meetings: 2 with inter-institutional teams (20 people from central level) and 3 with local teams (30 people each) (includes the cost of refreshments, photocopies, desktop supplies, and administrative costs). Does not include transportation costs since they are covered in Activity 2. The place of the meetings will be covered by the government and UNFPA.	X	X													
3.7. Meeting with leaders and key local stakeholders to discuss the creation of partnerships (3 meetings with 50 people each) (Includes refreshments, photocopies, desktop supplies, and administrative costs). Does not include transportation costs since they are covered in Activity 2. The place of the meetings will be balanced between the government and UNFPA. (Estimated cost per person USD 10) (One per year)	X				X					X					
Expected result 3. Families, communities, and State engaged and managing activities for the prevention of adolescent pregnancy, violence and sexual abuse.															
Line of Action: Access to information and education for the development of life skills, including sexual and reproductive health and rights.															
Activity 4. ESI_FAMILY Education for families and community education about the prevention of adolescent pregnancy and violence/sexual abuse.	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X

<p>4.1. Development/adaptation, dissemination, and implementation of the methodology for training families and communities about the prevention of adolescent pregnancy and sexual violence/abuse. Includes: 4.1.1. The survey, selection, and development of content for support materials for families, girls, boys, and adolescents with the support of a consultant. USD 8,000. 4.1.2. Two days of training of 10 courses for 30 participants to train 200 instructors together with families, adolescents and the community. USD 20 per person per day + facilitation of USD 10,000 (USD 1000 per two-day workshop includes transportation costs of facilitator and DSA for two overnight stays and administrative costs.) Production of materials for educational activities with families and the educational community to produce 1,000 facilitators kits (USD 20 per kit x 1,000) + USD 30,000 for the production of materials for families. 4.1.3. Establishment of clubs for families and performing educational activities according to the schedules and method (provision of office equipment: notebook, LED TV, easel, desktop supplies for the activities for the four institutions chosen in Caaguazú USD 4000 in equipment x 4) (USD 10,000 for office and computer supplies for the three years of the project, and USD 10,000 for refreshments. (Includes administrative costs)</p>	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
<p>4.2 Review, expansion and implementation of the strategy of life skills outreach school directed to adolescents and youth in the district of Caaguazú. Includes: 4.2.1. Revision meetings (10 with 15 participants) (USD 10 per person) with the support of outside consulting, USD 6000. 4.2.2. Editing, design, and production of materials (USD 15,000). 4.2.3. Training of 30 instructors in the method (1 two-day workshop, USD 20 per person per day for refreshments, photocopies, and desktop supplies and instruction of the workshop USD 1000, includes DSA and transportation of the facilitator. Includes administrative costs.</p>	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
<p>4.3. Definition of the plan and schedule of activities with selected institutions through meetings with local teams (three meetings a year at USD 80 each for refreshments, desktop supplies, and photocopies per meeting; this does not include the transportation of the central level team that are included in activity 2.)</p>		X	X													
<p>Expected result 4. Comprehensive, friendly, quality care model for adolescents from 10 to 19 years of age, implemented at all levels of care of the public health system of the district of Caaguazú.</p>																
<p>Activity 5. SALUD_ADOL Strengthening the supply of quality and friendly comprehensive health services for adolescents 10 to 19 years of age in selected public services according to the current model of care, including orientation and offering contraceptives (USF and friendly services).</p>	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
<p>5.1. Strengthening/adaptation/reaadjustment of friendly care for adolescents in the selected public services according to the current model of care (furniture, refreshments, computer equipment for education activities and loading of data, paint, medical supplies. (Estimated cost USD 15,000 for friendly service x 2 friendly services of the selected services + USD 25,000 for the USF.)</p>	X	X	X	X												

5.2. Days of updating and supportive supervision of HR Department regulations of comprehensive, friendly adolescent care, Guide to the rights of the children and adolescents in the health services, IMAN procedures, clinical manual, protocol for the care of sexual violence victims, family planning regulations, prenatal care, childbirth and post-partum and care for obstetric and neonatal emergencies (3 sessions of 2 days each for each year, targeting 30 people; USD 20 per person per day, includes refreshments, desktop supplies, photocopies, and administrative costs. Participant transportation is covered by the government counterpart.)	X	X	X	X	X	X	X	X	X	X	X	X	X	X
5.3. Development and implementation of the information methodology, education and communication of health services for adolescents between the ages of 10 and 19 and their families in the district of Caaguazú. Includes: 5.3.1. Methodology development (USD 8,000) 5.3.2. The instruction of methodologies to 320 selected services health officials (by way of 8 2-day training workshops for 40 Human Resources) USD 20 per day per participant (includes refreshments, desktop supplies, photocopies, and administrative costs) + USD 1,000 for the facilitation of the workshop that includes DSA and transportation of the instructor and administration costs. 5.3.3. Production of rules and materials for adolescents (USD 34,200.)	X				X				X					
Expected result 5. The country maintains an intersectoral road map of comprehensive care for girls, and adolescent victims of abuse and/or sexual violence along with a model of comprehensive care for girls and adolescents that are pregnant or with children.														
Activity 6. RUTA_INTER Comprehensive detection and assistance for girls and adolescent victims of sexual abuse and pregnant girls and or adolescents with or without children.	X	X	X	X	X	X	X	X	X	X	X	X	X	X
6.1. Socialization and training of Human Resources in the distinct regulations about rights of girls and adolescents, prevention and comprehensive approach to sexual abuse y adolescent pregnancy, through 3 sessions of 2 days each directed to 50 participants in the first year (USD 12 per person per day) + 1 day each year in the following 2 years, transportation of participants is covered by the government.	X	X												
6.2. The socialisation of the intersectoral care roadmap for victims of sexual abuse and human resource training in protocols of action for each institution (2 sessions of 2 days for 40 participants each session, includes refreshments, desktop supplies). Participant transportation is covered by the government (USD 20 per person per day.)	X													
6.3. Implementation and adjustments to the intersectoral care roadmap with support from consultants (10 months) USD 10,000 in consulting fees includes the cost of transportation to Caaguazú and costs of lodging and administration for ten months.	X	X	X	X										
6.4. Production of the informational material regarding the critical path for acting institutions and the public.	X			X										
6.5. Registration, care, and comprehensive follow-up of girls and adolescents abused or pregnant or with children. Acquisition of computer equipment (USD 2,500), cost of service transportation for cases of girls or adolescents that are abused or pregnant, cost of communication for care and case follow-up, other costs related to the care of girls and adolescents. (Costs of transportation, fuel + calls to cellular phones USD 800 per month x 36 months + administrative costs) + USD 1,000 for unexpected expenses.	X	X	X	X	X	X	X	X	X	X	X	X	X	X

WORK PLAN AND QUARTERLY SCHEDULE

<i>Results/ Activities/ Sub-activities</i>	<i>Financial Matrix</i>				
	<i>2019</i>	<i>2020</i>	<i>2021</i>	<i>2022</i>	<i>TOTAL INDIA FUNDS</i>
	<i>September to December</i>	<i>12 month</i>	<i>12 month</i>	<i>January to August</i>	
Activity 1. GERENCI_EA Management of the project will be led by an inter-institutional technical team integrated by various government agencies and the UNFPA	11,832.00	35,496.00	35,496.00	20,706.00	103,530.00
1.1. Creation and establishment of an Inter-Institutional Executive Technical Commission officially assigned to direct and follow-up on the project (six preparatory meetings).	NA	NA	NA	NA	NA
1.2. Selection and hiring of technical, logistic and administrative team that will execute the project. One coordinating person in the field is planned at USD 1,900 and one person for logistic, technical support with knowledge in communication (contribution from the project, USD 1,000; total salary USD 1,415), plus 2% administrative costs for 35 months.	11,832.00	35,496.00	35,496.00	20,706.00	103,530.00
Activity 2. MONITOR_EA Monitoring of project actions	10,144.00	9,369.00	9,279.00	5,041.00	33,833.00
2.1. Project monitoring actions. 2.1.1. Monthly meetings of the Inter-Institutional Executive Technical Commission for the direction and follow-up of the project and of cases captured within the framework of the same (16 participants' x 1 meeting x 36 months. Refreshments, desktop supplies, administrative costs, and photocopies are expected) 2.1.2. Field visit by 2 Technicians + 1 driver (3 people) twice a month the first 2 months (4 trips) with 2 overnight stays, then one time each quarter until the end of the project with the same number of people and overnight stay per mission (11 trips) + fuel and vehicle maintenance and 5% administrative costs USD 2,000 the first year, then USD 1,500 each year X 2 years) + USD 2,000 for contingencies. 2.1.3. Transportation of project coordinator USD 2,400 USD 2,880 of communication expenses and 5% administrative costs for project coordination. 2.1.4. Monitoring of cases and monitoring of the project at the local level through monthly meetings of a local intersectoral team formed for the purpose of promoting the coordination of actions, programmes and initiatives for the integral monitoring of girls and adolescents who are victims of sexual abuse or of girls and adolescents who are pregnant or have children (CODENI, Programa Abrazo, protocol of comprehensive care for pregnant adolescents, MINNA complaint database; TEKOPORA-SAS, education, health, labour (USD 80 per session, includes: refreshments, desktop supplies, administrative costs and photocopies X 36 meetings.) 2.1.5. Preparation of reports, USD 800 per year (photocopies, desktop supplies, and computer supplies).	10,144.00	9,369.00	9,279.00	5,041.00	33,833.00
Activity 3. CAMPAÑA_EA Development and implementation of a communication campaign utilizing the social network and community radio, about the prevention of adolescent pregnancy and sexual abuse.	15,774.00	31,667.00	26,633.00	7,206.00	81,280.00
3.1. Establish the terms of reference and select a creative company.	NA	NA	NA	NA	NA
3.2. Development of technical content base for the communication campaign. Key topics to be addressed through the campaign: A. Risks of sexual abuse and pregnancy in girls. B. Denaturation of early marriages and sexual abuse. C. Where and when to go in a situation of pregnancy or sexual abuse or before the risk. D. Information to children, adolescents and their affective environment, to prevent sexual abuse and to report it. Review of the same in years 2 and 3.	NA	NA	NA	NA	NA

3.3. Creation of a communication campaign that considers: A. Graphic identity and creative design. B. Development of a framework of discourse. C. Development of at least 40 communicational products for social networks and radios, in Jopará and Spanish, with a focus on rights, multiculturalism, gender and inclusion. D. Design of marketing products. E. Design a followers' page on social networks (Facebook, Twitter and Instagram.)	11,980.00	17,720.00	0.00	0.00	29,700.00
3.4. Review of the campaign, adjustments and design of new marketing products.	0.00	0.00	13,780.00	0.00	13,780.00
3.5. Development of media plan and postings in social networks and social network administration through consulting; implementation of the campaign (34 months.)	3,088.00	12,353.00	12,353.00	7,206.00	35,000.00
3.6. Development and implementation of advocacy actions based on narratives on adolescent pregnancy prevention and actions to be implemented within the framework of the initiative. (Elaboration of the discursive framework based on legal and data frameworks), socialisation through 5 4-hour meetings: 2 with inter-institutional teams (20 people from central level) and 3 with local teams (30 people each) (includes the cost of refreshments, photocopies, desktop supplies, and administrative costs). Does not include transportation costs since they are covered in Activity 2. The place of the meetings will be covered by the government and UNFPA.	706.00	594.00	0.00	0.00	1,300.00
3.7. Meeting with leaders and key local stakeholders to discuss the creation of partnerships (3 meetings with 50 people each) (Includes refreshments, photocopies, desktop supplies, and administrative costs). Does not include transportation costs since they are covered in Activity 2. The place of the meetings will be balanced between the government and UNFPA. (Estimated cost per person USD 10) (One per year)	0.00	1,000.00	500.00	0.00	1,500.00
Activity 4. ESI_FAMILY Education for families and community education about the prevention of adolescent pregnancy and violence/sexual abuse.	6,520.00	118,079.00	10,320.00	4,180.00	139,099.00
4.1. Development/adaptation, dissemination, and implementation of the methodology for training families and communities about the prevention of adolescent pregnancy and sexual violence/abuse. Includes: 4.1.1. The survey, selection, and development of content for support materials for families, girls, boys, and adolescents with the support of a consultant. USD 8,000. 4.1.2. Two days of training of 10 courses for 30 participants to train 200 instructors together with families, adolescents and the community. USD 20 per person per day + facilitation of USD 10,000 (USD 1000 per two-day workshop, includes transportation costs of facilitator and DSA for two overnight stays and administrative costs.) Production of materials for educational activities with families and the educational community to produce 1,000 facilitators kits (USD 20 per kit x 1,000) + USD 30,000 for the production of materials for families. 4.1.3. Establishment of clubs for families and performing educational activities according to the schedules and method (provision of office equipment: notebook, LED TV, easel, desktop supplies for the activities for the four institutions chosen in Caaguazú, USD 4000 in equipment x 4) (USD 10,000 for office and computer supplies for the three years of the project, and USD 10,000 for refreshments. (Includes administrative costs)	4,000.00	95,499.00	10,080.00	4,100.00	113,679.00
4.2. Review, expansion and implementation of the strategy of life skills outreach school directed to adolescents and youth in the district of Caaguazú. Includes: 4.2.1. Revision meetings (10 with 15 participants) (USD 10 per person) with the support of outside consulting, USD 6000. 4.2.2. Editing, design, and production of materials (USD 15,000). 4.2.3. Training of 30 instructors in the method (1 two-day workshop, USD 20 per person per day for refreshments, photocopies, and desktop supplies and instruction of the workshop USD 1000, includes DSA and transportation of the facilitator. Includes administrative costs.	2,360.00	22,340.00	0.00	0.00	24,700.00
4.3. Definition of the plan and schedule of activities with selected institutions through meetings with local teams (three meetings a year at USD 80 each for refreshments, desktop supplies, and photocopies per meeting; this does not include the transportation of the central level team that are included in activity 2.)	160.00	240.00	240.00	80.00	720.00

Activity 5. SALUD_ADOL Strengthening the supply of quality and friendly comprehensive health services for adolescents 10 to 19 years of age in selected public services according to the current model of care, including orientation and offering contraceptives (USF and friendly services).	23,040.00	85,360.00	14,000.00	600.00	123,000.00
5.1. Strengthening/adaptation/ readjustment of friendly care for adolescents in the selected public services according to the current model of care (furniture, refreshments, computer equipment for education activities and loading of data, paint, medical supplies. (Estimated cost USD 15,000 for friendly service x 2 friendly services of the selected services + USD 25,000 for the USF.)	11,780.00	43,220.00	0.00	0.00	55,000.00
5.2. Days of updating and supportive supervision of HR Department regulations of comprehensive, friendly adolescent care, Guide to the rights of the children and adolescents in the health services, IMAN procedures, clinical manual, protocol for the care of sexual violence victims, family planning regulations, prenatal care, childbirth and post-partum and care for obstetric and neonatal emergencies (3 sessions of 2 days each for each year, targeting 30 people; USD 20 per person per day, includes refreshments, desktop supplies, photocopies, and administrative costs. Participant transportation is covered by the government counterpart.)	1,200.00	3,600.00	3,600.00	600.00	9,000.00
5.3. Development and implementation of the information methodology, education and communication of health services for adolescents between the ages of 10 and 19 and their families in the district of Caaguazú. Includes: 5.3.1. Methodology development (USD 8,000) 5.3.2. The instruction of methodologies to 320 selected services health officials (by way of 8 2-day training workshops for 40 Human Resources) USD 20 per day per participant (includes refreshments, desktop supplies, photocopies, and administrative costs) + USD 1,000 for the facilitation of the workshop that includes DSA and transportation of the instructor and administration costs. 5.3.3. Production of rules and materials for adolescents (USD 34,200.)	10,060.00	38,540.00	10,400.00	0.00	59,000.00
Activity 6. RUTA_INTER Comprehensive detection and assistance for girls and adolescent victims of sexual abuse and pregnant girls and or adolescents with or without children	12,330.00	28,883.00	9,640.00	5,190.00	56,043.00
6.1. Socialization and training of Human Resources in the distinct regulations about rights of girls and adolescents, prevention and comprehensive approach to sexual abuse y adolescent pregnancy, through 3 sessions of 2 days each directed to 50 participants in the first year (USD 12 per person per day) + 1 day each year in the following 2 years, transportation of participants is covered by the government.	1,200.00	1,400.00	1,200.00	1,200.00	5,000.00
6.2. The socialisation of the intersectoral care roadmap for victims of sexual abuse and human resource training in protocols of action for each institution (2 sessions of 2 days for 40 participants each session, includes refreshments, desktop supplies). Participant transportation is covered by the government (USD 20 per person per day.)	0.00	1,700.00	0.00	0.00	1,700.00
6.3. Implementation and adjustments to the intersectoral care roadmap with support from consultants (10 months) USD 10,000 in consulting fees includes the cost of transportation to Caaguazú and costs of lodging and administration for ten months.	1,500.00	6,500.00	0.00	0.00	8,000.00
6.4. Production of the informational material regarding the critical path for acting institutions and the public.	0.00	7,043.00	0.00	0.00	7,043.00
6.5. Registration, care, and comprehensive follow-up of girls and adolescents abused or pregnant or with children. Acquisition of computer equipment (USD 2,500), cost of service transportation for cases of girls or adolescents that are abused or pregnant, cost of communication for care and case follow-up, other costs related to the care of girls and adolescents. (Costs of transportation, fuel + calls to cellular phones USD 800 per month x 36 months + administrative costs) + USD 1,000 for unexpected expenses.	9,630.00	12,240.00	3,440.00	3,990.00	34,300.00

7. EVI_EMB_AD Generation of evidence- Systematization	7,000.00	3,000.00	2,000.00	6,000.00	18,000.00
7.1. Cost of adolescent pregnancy study and mapping of adolescent pregnancy in Paraguay. Baseline 2019 (through South-South Cooperation for adolescent pregnancy mapping and with technical support from the UNFPA Regional Office for Latin America and the Caribbean.) (includes publication and socialisation of the results.)	3,000.00	0.00	0.00	0.00	3,000.00
7.2. Evaluation of the quality of friendly services selected for the district of Caaguazú in the 2nd and 3rd year of the project based on measurements defined by the South-South Cooperation and technical support from the UNFPA Regional Office for Latin America and the Caribbean. Year 1 methodology instruction.	4,000.00	1,000.00	0.00	0.00	5,000.00
7.3. Systematization lessons learned based on defined indicators for the project in the two areas of work, and three strategic lines (includes publication design, printing, and the socialisation of the document.	0.00	2,000.00	2,000.00	6,000.00	10,000.00
SUBTOTAL	86,640	311,854	107,368	48,923	554,785
Indirect Cost (5%) UNFPA	4,332	15,593	5,368	2,446	27,739
Indirect Cost (3%) UNOSSC/UNDP	2,729	9,823	3,382	1,541	17,476
Total	93,701	337,270	116,119	52,910	600,000

IN ANNEX 2 THE FINANCIAL MATRIX BY YEAR.