



# RIGHTS & CHOICES FOR ALL

ASIA-PACIFIC  
2018 HIGHLIGHTS



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## 2018 HIGHLIGHTS

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## FOREWORD

# We have unfinished business.



Zero preventable maternal deaths. Zero unmet need for family planning. Zero gender-based violence and harmful practices against women and girls. UNFPA's Three Transformative Results are inspired by the revolutionary Programme of Action that emerged from the 1994 International Conference on Population and Development (ICPD) in Cairo, which for the first time put individual rights and choices at the heart of sustainable development, underpinning our vision of a world where every pregnancy is wanted, every childbirth is safe, and every young person's potential is fulfilled.

Since UNFPA was founded 50 years ago, the number of women dying from pregnancy or childbirth has nearly halved. Women are better able to plan whether, when and how many children they want, youth are more empowered with greater access to sexual and reproductive health information and services, and child marriage is declining.

In 2018, our regional and country programmes in Asia-Pacific UNFPA continued to accelerate the ICPD Programme of Action which in turn contributes to the 2030 Agenda and its Sustainable Development Goals. But there is still much work to be done - still yet unfinished business in achieving ICPD, without which, quite simply, we will not achieve the SDGs.

Progress towards the achievement of our Transformative Results will significantly rest on the degree to which

progress is made in humanitarian settings as well. During times of disasters, pregnancy and childbirth-related deaths increase, as does gender-based violence. Sexual and reproductive health services and psychosocial services are often unavailable. UNFPA ensures that life-saving services are accessible for populations affected by humanitarian crises, paying particular attention to the special needs of women and young people.

UNFPA anticipates and responds to tomorrow's challenges today. We help countries use population data, including those gleaned from censuses, often carried out with our support, to better understand and address the region's demographic changes, including population ageing, and bring about informed policies for sustainable development. And we help ensure that the sexual and reproductive health and reproductive rights of women and young people, and achieving gender equality, remain at the very centre of development – true to the vision of the ICPD Programme of Action and Agenda 2030 whose ultimate pledge is to leave no one behind.

A handwritten signature in black ink, appearing to read 'Björn Andersson'.

Björn Andersson  
Regional Director, Asia and the Pacific,  
UNFPA, the United Nations Population Fund

127  
maternal deaths  
per 100,000 live births

10%  
of women with an  
unmet need for family  
planning\*

21%  
of women & girls  
subjected to gender-based  
violence\*\*

VISION 2030



ZERO



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\*Women aged 15-49 who are married or in a union

\*\*Women, girls, age 15 or older subjected to physical, sexual or psychological violence by current or former partner in past 12 months

## UNFPA ASIA-PACIFIC PROGRESS IN 2018

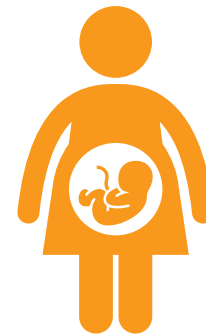


535,829

girls at risk of, or affected by, **child marriage** have received prevention and/or protection services and care related to child, early and forced marriage

119,752

women subjected to violence have accessed services



34,167

safe deliveries were assisted by UNFPA in 6 countries in emergency settings



164

women-friendly & youth spaces & reproductive health facilities were established in 7 countries

US\$8,172,000

disbursed by UNFPA for contraceptives supplies\*

597,127

unsafe abortions averted\*

\*in 5 countries receiving direct UNFPA support for contraceptives

# Towards ZERO preventable maternal deaths

4,840

midwives trained in 9  
countries

Safe  
motherhood  
is a human right

In Asia and the Pacific, there has been significant progress towards reducing the maternal mortality ratio in many countries. There are, on average, 127 maternal deaths per 100,000 live births in the region. While ending preventable maternal mortality remains a challenge, countries are showing commitment to addressing preventable maternal deaths and morbidities. Of the high-burden countries (Afghanistan, Bangladesh, Bhutan, Cambodia, India, Indonesia, Lao PDR, Myanmar, Nepal, Pakistan, Papua New Guinea, Philippines, Timor-Leste) only four of them (Bangladesh, Indonesia, Lao PDR, Timor-Leste) according to UN estimates and estimated annual rates of reduction are on track to reach the SDG target for maternal mortality reduction by 2030. UNFPA supports a targeted approach to ensure that quality skilled birth attendants (midwives) are present at every birth, that women have access to skilled emergency care if a life-threatening complication occurs, and that every death is measured and understood to prevent this from occurring again.

UNFPA supports governments and ministries of health in the Asia-Pacific region to ensure that their clinical and technical guidelines reflect the latest international standards and evidence-based approaches to promoting maternal health and end preventable maternal deaths. In 2018, thanks to UNFPA's support, 14 countries in the region could ensure that the most updated policies and standards were adopted by respective ministries, promoting improved quality of care for mothers and their newborns.

The work that UNFPA supports includes strengthening Emergency Obstetric and Newborn Care (EmONC) systems across the region, from performing EmONC Needs Assessments to identify critical gaps, to developing costed action plans to ensure the EmONC systems can be effectively put in place and are fully functional. UNFPA also continues to promote access to quality sexual and reproductive health services by building the capacity of healthcare workers and ensuring accurate and reliable information related to maternal mortality.



**"I am so thankful to God that I managed to save her life."**

© UNFPA Afghanistan

## Midwives deployed to save lives

**Well-trained midwives could help avert roughly two thirds of all maternal and newborn deaths globally.**

### MY STORY

By midnight, Khurshid, 35, was in serious trouble. Five months pregnant and bleeding heavily, she had passed out at home. Her family carried her unconscious body to the nearest – and only – health station in Afghanistan’s remote, mountainous Chesht-e Sharif District.

“Her state shocked me, but I knew quickly that it was a miscarriage,” recalled Amena, 22, the midwife on duty at the clinic, known locally as a ‘family health house’.

Khurshid was at risk of bleeding to death – one of the most common causes of maternal death in the world.

The vast majority of maternal deaths are preventable, yet pregnancy and childbirth continue to take the lives of thousands of women every year. Most of these deaths take place in poor and rural areas with limited access to health care.

Amena knows these risks all too well. She worked rapidly to stop the haemorrhaging, and was relieved when Khurshid’s condition stabilized.

#### Helping midwives help women

Amena has worked at the family health house for around two years. The facility is one of 123 family health houses that UNFPA has helped to establish.

Midwives and health workers are on call at all hours. They provide skilled birth attendance, family planning services, basic health care and referrals. And UNFPA is working to increase the number of midwives available to provide such care through a community midwifery education programme.

The programme recruits midwives from remote villages, then trains them to meet the reproductive health needs of under-served areas. UNFPA also supports a 24-hour toll-free midwifery helpline. Through the helpline, highly skilled midwives and doctors provide technical answers and advice when health workers encounter complex or dangerous cases.

#### Time to heal

These efforts are slowly making a difference. Today, across Afghanistan, around 60 per cent of people live within an hour’s travel from a health facility, and 88 per cent live within two hours’ travelling time.

As for Khurshid, she is happy to have survived. She took some time to heal at the family health house. Now, she is looking forward to going home to resume her life and see her four young children.

“I feel healthy and am very much thankful to Amena, who has saved my life and helped me recover,” she said.

**"Khurshid was at risk of bleeding to death."**

# Towards ZERO unmet need for family planning

Over  
2M  
unintended  
pregnancies averted\*

© UNFPA Lao PDR

\*in 5 countries receiving direct UNFPA support for contraceptives

Nearly 700 million women and adolescent girls in developing countries now use modern contraceptives. UNFPA is fully committed to supporting governments and communities to ensure that sexual and reproductive health, will become a reality for all in Asia and the Pacific. But despite improvements, there are still 140 million women in the region with an unmet need for family planning.

In 2018, UNFPA provided over US\$8 million in contraceptives commodities in five countries (Lao PDR, Myanmar, Nepal, Papua New Guinea, and Timor-Leste) that receive direct support from the Fund, as UNFPA supplies priority countries in the region. In addition, UNFPA provided support to five countries (Cambodia, Mongolia, Myanmar, Philippines and Viet Nam) to procure contraceptive commodities on their behalf, though third-party procurement services. To achieve zero unmet need for family planning by 2030, UNFPA encourages countries to make family planning services and a full range of contraceptives choices readily available and to invest in services and supplies under the umbrella of universal health coverage. In 2018, 15 countries in the region have worked on strengthening the capacities of health providers for the human rights-based provision of family planning services, through UNFPA's training and support.

Family planning  
is central to  
gender equality

Family planning services reduce unintended pregnancies, unsafe abortions, maternal deaths, and pregnancy-related disabilities, and have the potential to save countries billions of dollars in healthcare and related costs. Cost-benefit analyses showing the impact and potential return on investment of family planning services were carried out in 2018 in Afghanistan, Papua New Guinea and Timor-Leste, as well as Indonesia for adolescents' access to contraception, in order to support UNFPA's advocacy and promote family planning for all.





**"I do not want to get pregnant now because we already have two children to support."**

© Mario Villamor / UNFPA Philippines

## Family planning choices for women

**In the Philippines, 49% of unmarried, sexually active women have an unmet need for family planning.**

Rows of women filled the open-air basketball court. Hannah Gumaro and Joan Calamayan gathered with around 50 other young women at a bright green community centre in the Philippine village of Kalabaza.

"Today we are going to talk about how to plan the timing and size of your families," announced Benjamin Lucas, a reproductive health facilitator.

### Expanding family planning choices

Mr. Lucas's event was part of a UNFPA-supported project to provide women with access to an expanded variety of contraceptive choices. Access to a wide range of contraceptive options is critical to fulfilling the human right to family planning. Yet too many women lack knowledge about, and access to, choices that work for them.

In 2015, the Philippine Supreme Court issued a temporary restraining order that prevented the health department from procuring, distributing or administering contraceptive implants – a long-acting family planning method. When the restraining order was lifted in 2017, the implant proved popular, particularly among women from poor communities.

UNFPA was working with the Philippine Society for Responsible Parenthood, with support from Family

Planning 2020, to provide 40,000 women with access to contraceptive implants in 14 areas, including far-flung communities with indigenous people.

Indigenous women often live in geographically isolated areas with poor health services. They also tend to have fewer education and economic opportunities, which can limit their access to family planning.

Village captain Estelita Guiuo, 63, smiled as the other Ibanag women received information about contraceptive implants. "While some women want to get pregnant, others might not. This is why it is very important that women have a choice," she said.

### A path away from poverty

"Life is hard," said 23-year-old Hannah Gumaro, who chose to receive the contraceptive implant. The mother of two and her husband, a construction worker, are not financially ready for another child, she said.

Ms. Calamayan also chose the contraceptive implant. "Life can be challenging, and children are the ones who suffer when there is no food to eat," she told UNFPA. "My husband and I, we already have three children who we need to educate. I hope more women have access to modern family planning," said Ms. Calamayan after receiving the implant.

**"It is very important women have a choice."**

# Towards **ZERO** gender-based violence and harmful practices



# 90,131

girls & women subject  
to violence have  
accessed an essential  
services package

© Allison Joyce / UNFPA Bangladesh

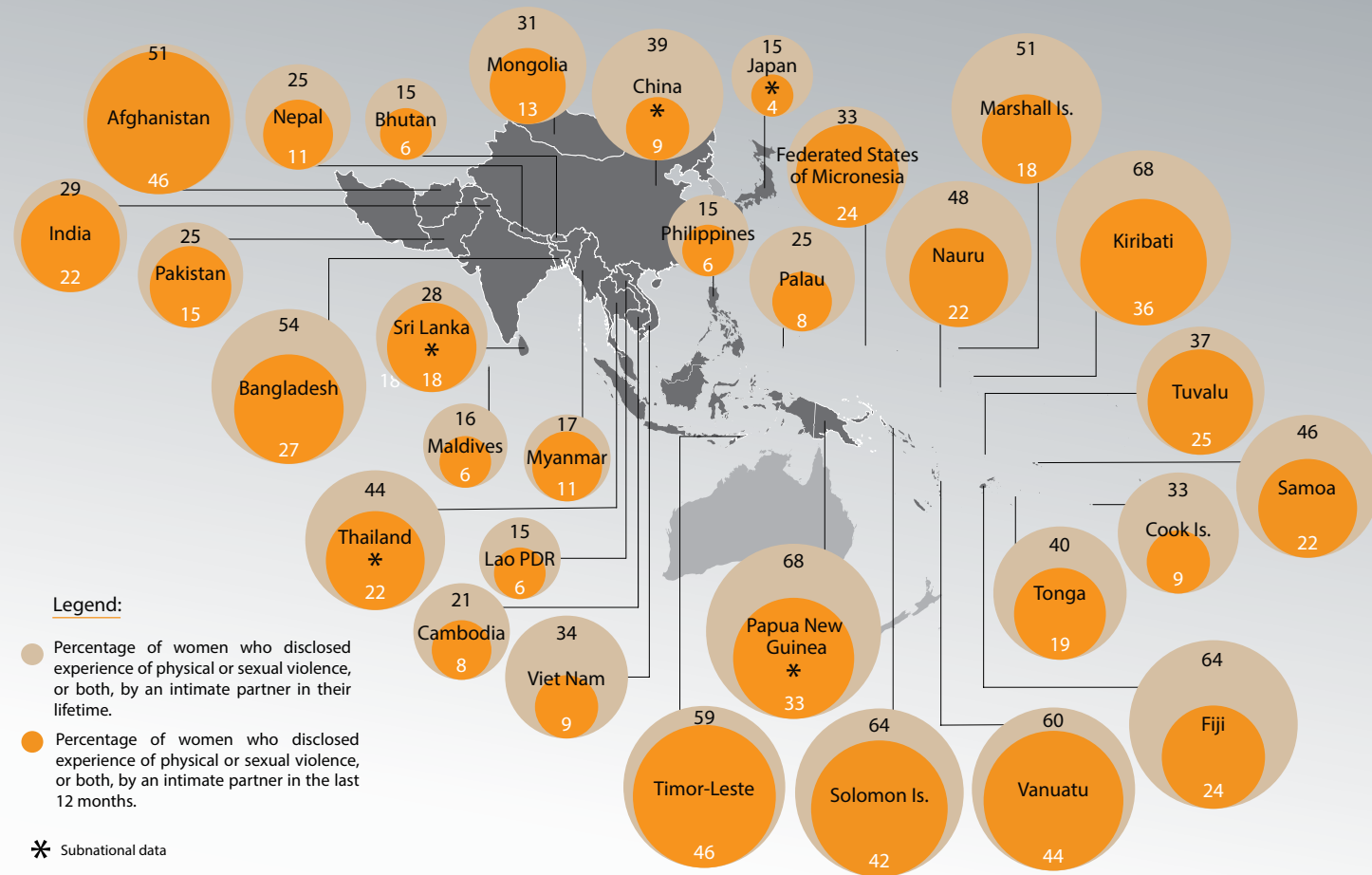
About one in three women worldwide will have experienced physical or sexual violence at some point in her lifetime. In Asia and the Pacific, women's lifetime experience of physical or sexual violence ranges from 15 per cent in Lao PDR to 68 per cent in Papua New Guinea. Harmful practices like child marriage also remain widespread, which represents significant challenges to young people's human rights, opportunities for women and overall sustainable development. To meet the 2030 Sustainable Development Goals target, progress must be accelerated, and UNFPA seeks to urgently address this issue.

UNFPA works to promote gender equality and empowerment of women in close collaboration and partnership with sister UN agencies and regional civil society organisations. In 2018, 11 countries supported development or review of national policies and legislation to promote gender equality and eliminate GBV and harmful practices, and a further five countries supported the implementation of existing laws and policies.

**Gender-based violence reaches every corner of the world**

Most country offices in the region worked in partnership with government and civil society to promote gender equality and build capacity of national partners to address gender based violence. Two countries in the region, the Philippines and Sri Lanka, worked closely with National Human Rights Institutions to support reporting and monitoring on sexual and reproductive health and rights.

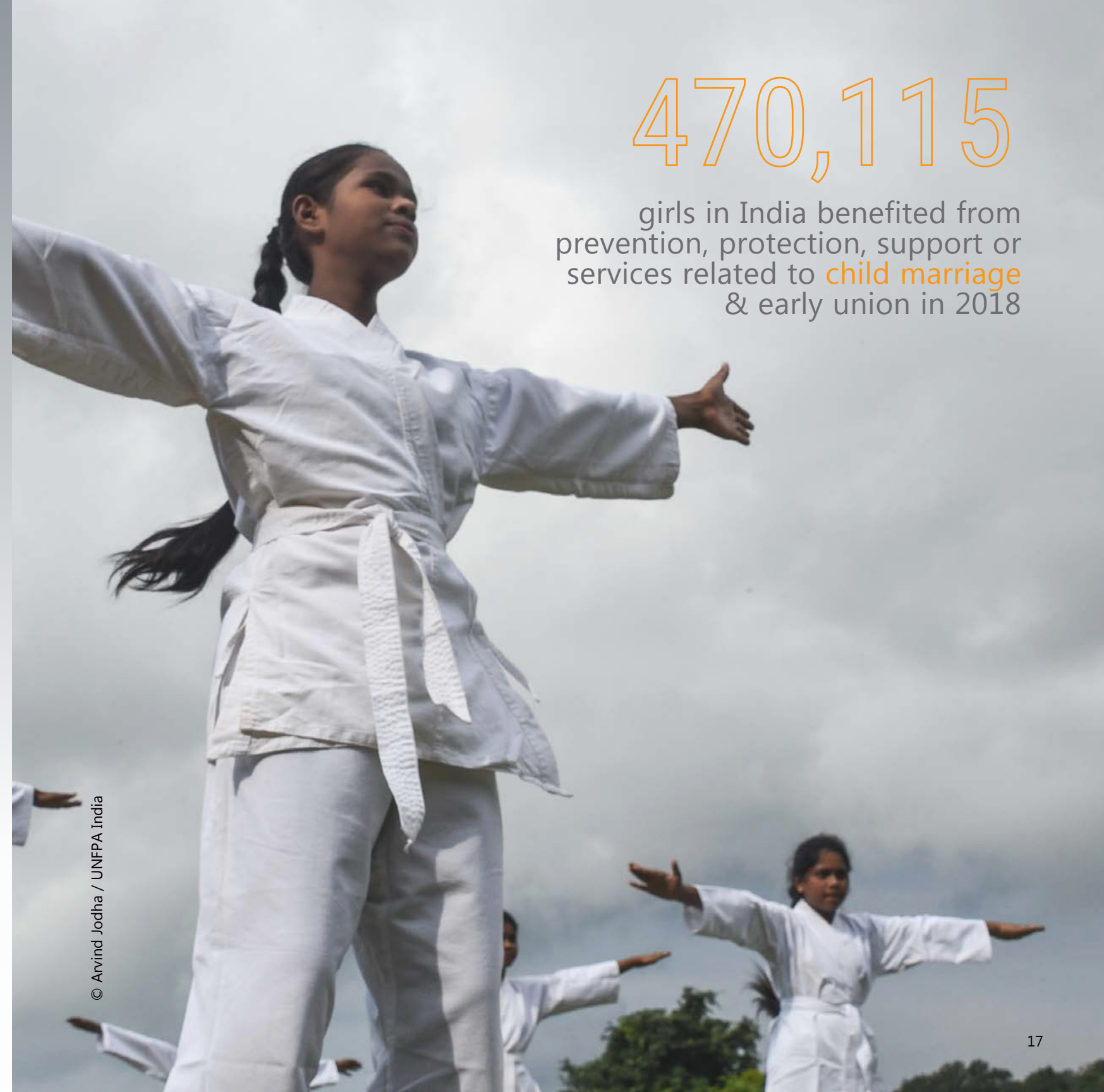
At a regional level, UNFPA continued to collaborate with sister UN agencies as co-chair of the UNiTE working group with UN Women, partnered with UN Women to build the capacity of UN Gender Theme Groups, and co-chaired the South Asia Coordinating Group on Violence Against Children with Plan International.



UNFPA in Asia and the Pacific also supports countries in gathering, analysing and using prevalence data on violence against women through its Australia funded 'kNOwVAWdata' initiative.

# 470,115

girls in India benefited from prevention, protection, support or services related to **child marriage** & early union in 2018



© Arvind Jodha / UNFPA India

"I am now working to prevent child marriage because it is not good."

© Allison Joyce / UNFPA Bangladesh

## Safe spaces give Rohingya women a chance to heal

**In Bangladesh, over 1 million Rohingya refugees need support. More than half are women and girls.**

"We have suffered so much – our families, our children, killed and young girls raped – but we escaped. We were thirsty for seven days – not a drop of water. We tied our bellies tight, so we wouldn't feel any hunger. My kids tried to eat soil. They suffered diarrhoea, lots of illness.

It was so tough when we arrived in Bangladesh, we slept on the streets of Cox's Bazar. We were in the community when we heard of the UNFPA Women Friendly Space; that's when we reached this 'House of Peace'. We didn't know any of the service points in the camps when I arrived; now I do, and I introduce them to other women and girls.

My relatives are rape survivors, they were ashamed, we didn't know what to do for them. That's when the 'Women Friendly Space' came to our help.

We also bring our children here; our kids witnessed the slaughter and the atrocities, they have nightmares and cannot sleep. Here they can play together in a nicer environment.

It is not that we are always comfortable or well, of course. I continuously cry inside and when I cannot tolerate it any more that's when I come to the 'House of Peace'.

Earlier, we couldn't share our stories with anyone, even small domestic issues between husband and wife. Now we have people who listen.

Our daughters were married off early in Myanmar. The military would abduct and rape them. If they were married there was a lower chance of that happening. But I am now working to prevent child marriage; I know that getting married below the

age of 18 is not good for health or relationships. If I hear of such cases I do advocacy, and bring the adolescents and their mothers to the 'Women Friendly Space' as well.

I tell the men, if you are suffering from any illness you go outside of the home to a health point – so why not let your women access them as well? If I fail, then I ask my husband to convince them.

Case workers and volunteers earlier worked on my husband to change his conservative attitudes, and he is now working for the community to convince them to let women and girls have choices and access. My husband is a member of the mosque hence he's an influential member of the community and uses this to help influence other men positively."

**- Nasreen, 36 years old, Cox's Bazar**

**"We have suffered so much. I continuously cry inside."**

# Responding to HUMANITARIAN crises

Over  
**450,000**

girls & women were reached with dignity kits & emergency reproductive health kits during crises

**UNFPA**  
leads gender-based violence coordination during humanitarian crises

Asia and the Pacific is the most disaster-prone region in the world, with nearly 45 per cent of the world's natural hazards occurring in this region and on average affecting 25 million people annually. The region is also home to a number of protracted crises and conflicts resulting in large refugee and displaced populations.

Disasters disproportionately affect women and girls. In times of upheaval, pregnancy-related death increase and sexual and reproductive health services are often unavailable. With the disruption of national and community services delivery and breakdown of support mechanism, women and girls are at heightened risk of violence, exploitation and abuse; many women lose access to family planning services, exposing them to unintended pregnancies in perilous conditions.

UNFPA anticipates and implements efficient, quality and inclusive emergency responses. UNFPA works closely with national governments, civil society organizations and other partners to build capacity, advocate for sexual and reproductive health and protection needs in national disaster management policies and plans, and to meet the needs of women and girls before, during and after a crisis.

UNFPA leads the global "Gender-Based Violence Area of Responsibility" forum ensuring that coordination measures to prevent, mitigate and response to gender based violence are in place in emergency settings. UNFPA is also the global manager of the Inter-Agency Emergency Reproductive Health Kits that are pre-packaged and ready for immediate dispatch. In the acute response phase of emergencies, UNFPA also provides dignity kits for women and girls of reproductive age, which contain culturally appropriate hygiene, clothing and protection items, enabling them mobility to seek life-saving humanitarian services such as basic health and shelter support.



© Carly Learson / UNFPA Indonesia

"I am happy to be alive. I'm looking forward to going home to my children."



## Protecting women in the aftermath of an earthquake

In Papua New Guinea, an earthquake impacted over half a million people - yet it was one of the most under-reported crises.

When a 7.3 magnitude earthquake struck the remote Southern Highlands Province of Papua New Guinea in February 2018, 18-year-old Julian Ako was heavily pregnant with her third child.

She and her family emerged unscathed, but their home, like many others near the earthquake's epicentre, was severely damaged.

A landslide contaminated their sole nearby source of safe drinking water. The earthquake's aftermath brought strong aftershocks, whilst newly impassable roads and disruption of vital services made it hard for Julian to provide for her two young children.

Inadequate infrastructure makes many parts of this impoverished country hard to access and since the earthquake many critical health stations are out of commission.

### Life and death

For Julian, the effects of the earthquake and its aftermath compounded the challenges of a difficult birth. "When my contractions started," she recalls, "the local nurse told me she couldn't help, and sent me off to the hospital to give birth." This larger facility had already received safe birthing kits from UNFPA.

Early the next morning, after Julian had been in labour for hours, midwives discovered that her baby had hydrocephalus. The baby died, and Julian's life was in serious jeopardy.

### Health, safety and dignity

Thanks to a swift referral made by a midwife from Papua New Guinea's Family Health Association and a reproductive health officer from UNFPA, Julian was quickly airlifted to the larger, better-equipped Mendi provincial hospital, where her life was saved.

Julian was one of approximately 3,200 pregnant women caught up in the disaster who, along with an estimated 35,000 earthquake-affected women of reproductive age, were targeted by UNFPA as part of the government-led emergency response.

With support from Australia, the government distributed 6,200 of UNFPA's dignity kits – containing vital health, hygiene and safety products to meet the needs of women and girls – in the worst-hit areas. In some of the worst-affected areas, UNFPA distributed reproductive health kits containing supplies related to clean delivery, sexually transmitted infections and post-rape care.

Julian, meanwhile, is now safe, recovering and looking to the future.

**"The baby died & Julian's life was in danger."**

# Population AGEING: challenge & opportunity

By 2050,  
1 in 4  
people  
will be 60 years  
or older

The Asia-Pacific region is at the forefront of the global phenomenon of population ageing. By 2050, one in four people in Asia and the Pacific will be over 60 years old. The population of older persons in the region will triple between 2010 and 2050, reaching close to 1.3 billion people. The majority of older persons, including the 'oldest old,' are women.

Ageing is a triumph of development. People live longer because of better nutrition, sanitation, health care, education, and economic well-being. More women have choices on whether to have children and how many, which is often linked to lower fertility in many contexts. Ageing, often in parallel with lower fertility among the population of reproductive age, does pose challenges and many governments are apprehensive about this demographic shift. But the right set of policies can equip individuals and societies to address these challenges and to reap a 'longevity dividend.'

Ageing is a  
triumph of  
development

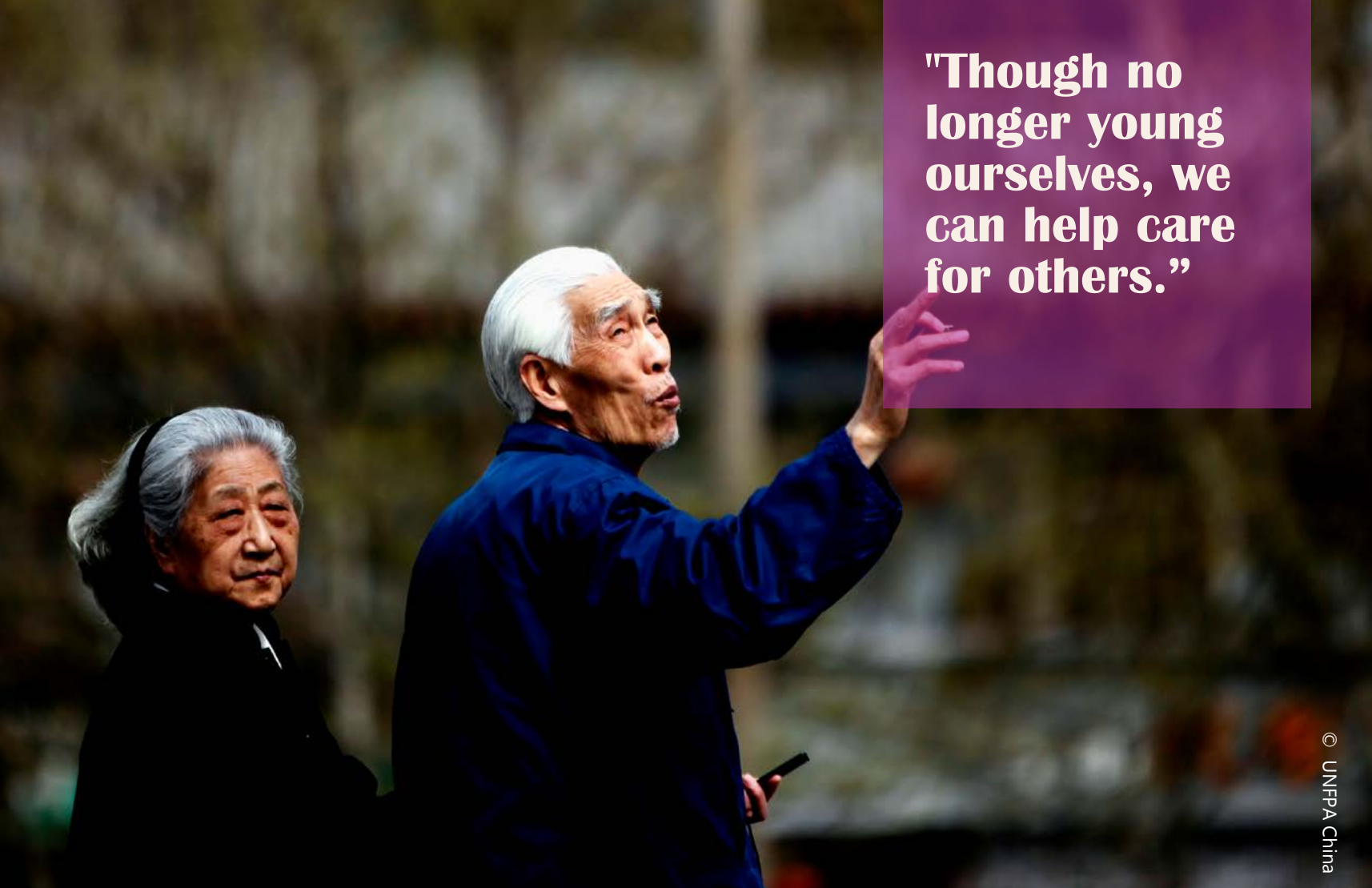
At the 2018 HelpAge regional conference in Tehran, Iran, governments called upon UNFPA to strengthen its ability to provide policy advice on population ageing, and to help bring government and civil society stakeholders together to address the issue.

UNFPA advocates for a life-cycle approach to create optimal solutions – investing in health and well-being from pregnancy through childbirth, childhood and adolescence, and on to adulthood and eventually old age, cultivating community involvement in the process, and emphasizing the rights of individuals of all ages.

This is the foundation of sustainable and equitable development for all, and UNFPA is firmly committed to supporting countries every step of the way.



**"Though no longer young ourselves, we can help care for others."**



© UNFPA China

## Ageing is not to be feared, but understood

**Age discrimination is the biggest barrier to active ageing. Let's take a stand against ageism and convert challenge into opportunity.**

In the western Chinese province of Sichuan, centenarian Tang Chomao lives alone, relying on volunteers to give him care, assistance and a lifeline to the outside world.

Like many of the hundreds of seniors living in China his pension is meagre, his health coverage is poor and the younger generations, that in bygone days would have cared for their grandparents, have long since moved to cities in search of better jobs.

Yet facing an uncertain future, Gaoban's senior citizens have come together to care for one another, including the most vulnerable like Tang. And in the process, have found a new lease on life themselves.

The town's Older Persons Association, once little more than a struggling social club for seniors, now runs a care centre for all 540 of Gaoban's elderly residents.

"For people with limited mobility or no families, we can get free services, including health care, laundry and have our haircut at home by the folks from the centre," says Tang, as his blood pressure is checked in his living room.

Run by 'younger seniors', with an average age of 60, the Happy Elderly Service Centre is now a registered, government funded non-profit organization that provides door-to-door check-ups, assistance and medical referrals for those in need.

"Though no longer young ourselves, we can help care for others," says Liu Guilin, Secretary General of Gaoban's Older Persons Association. "We no longer feel that we are the burden on society. In fact, we are helping out."

Based on the Gaoban experience, the Sichuan provincial government now supports similar initiatives across the province. In neighbouring Xichong, more than 59,000 of the most vulnerable seniors - the so-called 'empty nest elderly,' like Tang - are now covered by the Centre.

In many areas, the State is struggling to provide the care, protection and services needed by a rapidly ageing, and in many cases still impoverished, population.

Less than 5 per cent of elderly people in rural areas can rely on pensions to get by. Migration and globalization

add more pressure, as increasing numbers of young people move away to cities and the traditional Confucian system of filial piety - where the young care for the old - erodes. The Gaoban model has huge potential to plug the gaps. By keeping the elderly active, productive and connected, it's a win for vulnerable individuals, communities and the country as a whole.

Increased longevity shows just how well China has done in terms of social and economic development in recent years, but seniors too must benefit from and participate in the country's rapid development.

**"We no longer feel a burden on society."**





# Accelerating ICPD

**In 2018, UNFPA in Asia-Pacific actively supported Member States in intergovernmental processes to promote the accelerated implementation of the ICPD Programme of Action.**

## **Asian Ministerial Conference on Disaster Risk Reduction**

UNFPA provided technical support to Member States during the 2018 Asian Ministerial Conference on Disaster Risk Reduction. UNFPA worked with countries to bring increased attention to the needs of women and girls in the context of disaster risk reduction, including during preparedness, response and recovery.

## **Inter-Ministerial Conference on South-South and Triangular Cooperation**

UNFPA also organised, with the Government of Indonesia and Partners in Population and Development, an Inter-Ministerial Conference on South-South and Triangular Cooperation: Emerging Population and Development Issues Influencing the 2030 Agenda. The meeting provided governments with an opportunity to discuss crucial issues in population and development, such as big data that would benefit from a South-South partnership approach. The meeting produced an official statement that contributed to the Second High-level UN Conference on South-South Cooperation.

## **Mid-term Review of the Asia and the Pacific Ministerial Declaration on Population and Development**

Together with the UN Economic and Social Commission for Asia and the Pacific (ESCAP), UNFPA co-organized the Mid-term Review of the Asia and the Pacific Ministerial Declaration on Population and Development (APPC MTR). The meeting reviewed progress in implementing the 2013 Asia and the Pacific Ministerial Declaration on Population and Development, and served as the regional review meeting of the implementation of the ICPD Programme of Action, in preparation for the ICPD 2019 global review in the context of the 25-year anniversary. During the APPC MTR, members and associate members of ESCAP acknowledged the mutually reinforcing relationship between the Asian and Pacific Ministerial Declaration in the context of ICPD and the 2030 Agenda for Sustainable Development, in achieving inclusive, rights-based and people-centred sustainable development.

➔ Access the ICPD Programme of Action: [unfpa.org/ICPD](https://unfpa.org/ICPD)

The Asia-Pacific region is facing new and evolving challenges such as climate change, widening economic inequality, increasing conservatism, and an increase in both natural and man-made disasters. But together with our donors and partners, we are persevering.

UNFPA in the Asia and the Pacific, engaged a broad range of partners including donor governments, UN agencies, private sector, foundations, civil society organizations, parliamentarians, philanthropic organizations and academia to work jointly towards the achievement of the transformative results. Our donors and partners have made it possible for us to help ensure rights and choices for all. We at UNFPA will do our utmost to fulfil the promise of ICPD for everyone, everywhere.

UNFPA in Asia and the Pacific mobilised US\$121.7 million in non-core funding in 2018. We would like to express our gratitude to all our donors that continue to support our work through core and non-core contributions.



UNFPA

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