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Summary of midterm reviews of country programmes

East Asia and the Pacific region

Summary

The present report was prepared in response to Executive Board decision 1995/8 (E/ICEF/1995/9/Rev.1), which requested the secretariat to submit to the Executive Board a summary of the outcome of mid-term reviews (MTRs), specifying, inter alia, the results achieved, lessons learned and the need for any adjustments in the country programme. The Executive Board is to comment on the reports and provide guidance to the secretariat, if necessary. The MTRs in this report were conducted in 2007.

Introduction

1. This report covers the midterm review (MTR) of the Philippines, conducted in 2007. No other midterm reviews were conducted in the region during this period.

Midterm review of the Philippines country programme

Introduction

2. The current country programme (2005-2009) is a multi-sectoral, integrated programme, which is implemented in 19 provinces and 5 cities and provides limited support to national-level implementation. The programme is implemented through

* E/ICEF/2008/16.

six sectoral programmes: education, health and nutrition, child protection, social policy, HIV/AIDS and communication. The midterm review was conducted in order to: (a) take stock of achievements towards the overall program goals of disparity reduction and sustaining gains made in the previous programme; (b) identify lessons learned, constraints, new challenges and opportunities; (c) assess the contribution of the programme towards the United Nations Development Assistance Framework (UNDAF) results; (d) review results statements in the country programme action plan and revise them as necessary; (e) determine necessary adjustments in strategy and programme implementation to achieve specified results; and (f) identify emerging areas for consideration in the next programme and establish benchmarks for an end-of-cycle review of the current programme.

3. Planning for the MTR began in August 2006, with the draft guidelines approved by the Government in September 2006; terms of reference for studies and assessments drafted and completed by late 2006; and major activities with partners conducted between November 2006 and May 2007. Outcomes of these activities in the form of findings and recommendations were discussed at technical meetings prior to approval by the National Steering Committee. There was widespread participation at all stages of the process by key stakeholders, including government and civil society organizations and other development partners at both national and subnational levels.

4. The MTR was organized into three clusters. The first cluster focused on the evaluation of the Child-Friendly Movement, the underlying strategic approach of the programme. The second cluster focused on the review of the six sectoral programmes. The third cluster focused on studies, surveys and evaluations, including: (a) a study of the current Area Focal Officer system (the arrangement by which sectoral staff are assigned to supervise programme implementation in an area, province or city); (b) an evaluation of the capacity-building strategy of the programme; (c) a human rights-based situation analysis update, using best available data; (d) a subregional multiple indicator cluster survey (MICS); and (e) a synopsis of 40 studies and evaluations that have been conducted since 2004. The outcomes of these clusters were synthesized into an overall MTR report.

Update of the situation of children and women

5. The Philippines has made significant progress, reflected in key indicators of children's well-being in the last few years, but many development challenges remain. Rates of infant and young child mortality have continued to fall, with the under-five mortality rate estimated at 32 per 1,000 live births in 2006. However, deaths among children in neonatal and post-neonatal periods are more than thrice the number among children one to four years old. Vaccine-preventable diseases remain a leading cause of under-five mortality. The maternal mortality ratio is on a slow reduction path, declining from 172 to 162 per 100,000 live births from 1997 to 2006.

6. Protein-energy malnutrition remains an issue, increasing the risk of mortality and morbidity among infants and young children. Despite a decrease in the prevalence of underweight and under-height children and adolescents between 1998 and 2005, the percentage of newborns with low birthweight remains stagnant at a roughly 20 per cent, and thinness prevalence among children under five remained constant. The latter results from poor feeding practices, including low rates of

exclusive breastfeeding. The prevalence of vitamin A deficiency among children aged six months to five years increased from 35 per cent in 1993 to 40 per cent in 2003. An improvement in iodine intake has been confirmed, but the prevalence rate of anaemia remains high, and the level of nutritional deficiency among pregnant and lactating women is significant.

7. Despite the current low prevalence of HIV and AIDS, risk factors such as poverty, migration, gender-based violence and low levels of awareness are present, and the vulnerability of young people remains high. An estimated 85 per cent of households have access to safe water, while 72 per cent have access to improved sanitation. Nevertheless, the absolute number of un-served people, especially in rural areas and urban slums, is still high, at over 20 million. Underlying causes include a strong urban bias in the provision of services and the availability of health care professionals. Increasing health care costs have disproportionately affected poor families and children, especially in rural areas.

8. Only one in three children has access to early childhood care and development facilities; the majority of young children are relatively unprepared for school. Violence against children remains largely under-reported, making it difficult to assess the scale of the issue and to develop appropriate interventions. Commercial sexual exploitation is estimated to affect between 60,000 to 100,000 children every year, most of them girls. About 4 million children aged 5-17 are employed in child labour, out of which 2.4 million are engaged in the worst forms. Laws to protect children in conflict with the law and children affected by armed conflict exist but are proving difficult to implement and monitor. There are a number of emerging issues, such as on-line child pornography, which present a challenge to policymakers.

9. There is strong recognition of the need and potential for involving children and young people in governance, as evidenced in the National Framework on Child Participation and children's involvement in a number of forums, including the National Anti-Poverty Commission. In addition, there are between 500 to 1,000 active municipal communities (*barangays*), children's associations, initiatives to promote children and young people's participation in media, and a variety of child protection initiatives, including life-skills education, peer counselling, therapy through performing arts, and telephone help lines. However, challenges remain. For example, recent studies have shown several shortcomings regarding the role, contribution and effectiveness of youth councils.

10. Analysis of the development situation shows that despite robust economic growth there are high rates of poverty (estimates range from 23 to 44 per cent) and income inequality (reflected in a Gini coefficient of 0.47, among the highest in Asia). Since children constitute over 43 per cent of the population, they form a significant proportion of the poor. The country faces growing population pressure, with roughly 1.7 million live births occurring annually, despite modest declines in the growth rate and a reduction in the total fertility rate. Migration to overseas employment, as well as from rural to urban areas, continues, with remittances from overseas Filipino workers remaining an important contribution to the economy (11 per cent of the gross domestic product). Although unemployment is modest by regional standards, the fact that more than half of the unemployed are high school and college graduates adds to the pressure to migrate. Another phenomenon being observed is the growing number of families living or working on the streets who are

migrating to rural areas in search of improved livelihoods. Natural disasters, which affect the Philippines on a seasonal basis, are a perennial feature, resulting in poverty traps due to loss of lives and livelihoods, and damage to developmental infrastructures, including schools.

11. Both rights holders and duty bearers are constrained by widespread poverty, discrimination and marginalization as well as by poor access to basic social services. The State's capacity to fulfil its responsibilities is constrained by limited availability and inequitable distribution of resources. This challenge is amplified by weak capacities and competencies; weak implementation and monitoring of legislation, policies and programs; and weak accountability mechanisms at different levels. Other contributing factors are discrimination against children due to sex, ethnicity, religion and disabilities; the loss of skilled professionals from basic health, education and social welfare services; the pressure of the growing population on resources, infrastructure and services; significant information gaps that affect implementation of the fairly advanced legal framework for child protection; and insufficient knowledge about the effects of migration, tourism and information and communications technology on children.

Progress and key results to date

12. **Local policy and institutional development programme.** Results achieved include a deepened understanding and strengthened capacity of key local partners in mainstreaming child rights in local development processes; including the "four gifts for children" strategy (local development plan for children, local investment plan for children, local code on children, and local *State of the Children* report) implemented by all 24 focus-area local government units (LGUs) in 5 cities and 19 provinces and in priority *barangays* identified for disparity reduction by the technical working groups of the 24 LGUs.

13. **Health and nutrition programme.** Results achieved include: (a) policies, plans, tools, and guidelines on critical health issues have been formulated and adopted; (b) basic health workers, health teams, core trainers, LGU staff and Center for Health Development coordinators and service providers have increased capacity; (c) increased availability and utilization of health services through strengthened advocacy, social mobilization and provision of supplies; and (d) increased institutional capacity to strengthen the process of certification and accreditation of health facilities in the area of maternal health.

14. **HIV/AIDS programme.** Results achieved include: (a) the development of guidelines and modules on voluntary confidential counselling and testing and integrated management of paediatric HIV infection and AIDS; (b) extension of UNICEF antiretroviral procurement services to the Department of Health and procurements of the Global Fund to Fight AIDS, Tuberculosis and Malaria; (c) the strengthened capacity of health workers to manage voluntary counselling and testing and sexually transmitted infections; (d) an increased awareness of HIV/AIDS issues through linkage with the local policy and institutional development programme at the subnational level, as well as through education activities and a global campaign.

15. **Education programme.** Results achieved include: (a) the development and refinement of early childhood care and development (ECCD) standards, accreditation and monitoring tools; (b) the accelerated establishment and accreditation of day care centres, contributing to the outcome that at least 80 per cent of

communities in focus areas provide some form of ECCD; (c) alternative modes of extending ECCD services are employed; (d) increased awareness and adoption of the child-friendly schools strategy among 52 per cent of primary school teachers and 62 per cent of school heads in at least 5,000, or 58 per cent, of primary schools; (e) ill health and malnutrition is addressed through the provision of teaching and learning packages, through water, sanitation and hygiene for schools, and through other health interventions; and (f) a total of 63 primary schools have adopted Alternative Delivery Modes, which are non-traditional methods of education within the formal system that make schooling more inclusive and flexible, and the Child-Friendly School System is expanded to 61 pilot high schools.

16. Children in need of special protection programme. Results achieved include: (a) children who live or work on the streets, are out of school, victims of abuse, exploitation, trafficking and formerly detained or in conflict with the law have received essential protective, preventive and after-care community- and centre-based services through local government and non-governmental organization (NGO) partners; (b) displaced families in the conflict-ridden region have been provided with emergency relief and psychosocial support services; (c) communities and families have strengthened capacity to protect their own children; (d) modules on peace education have been developed and are integrated into elementary and high school curricula; (e) children benefit from strengthened legal and regulatory frameworks for child protection through the Juvenile Justice and Welfare Act (RA 9344), through anti-trafficking laws and through establishment of women's and children's desks at all police stations; (f) the availability of data and information is increased to guide programming as a result of major studies undertaken, including a rapid assessment of the situation of child pornography (2005) and needs assessment study (2006), in focus areas; (h) global child protection indicators are field-tested, adopted and integrated into government data monitoring systems; and (i) child rights violations are documented and an operational NGO database on grave child rights violations in conflict situations has been established.

17. Communication programme. Results achieved are: (a) a deepened understanding by youth of child rights, civic involvement, citizenship, and a bridging of cultural gaps has taken place through youth participation in mass media and governance; (b) increased profiles have been achieved for HIV/AIDS, the national code on the marketing of breast milk substitutes, juvenile justice and avian influenza through partnerships and the development of national and local information, education and communication materials; (c) there is an increased number and quality of stories about children in the media as well as a heightened sensitivity to child rights through the provision of media awards and training; (d) capacity is increased for advocacy and the development of local communication strategic plans in targeted *barangays*; (e) national-level Millennium Development Goal reports and local *State of the Children* reports are prepared with the support of DevInfo 5.0 software and knowledge centres; and (f) data are gathered and indicators set through the conducting of multiple indicator cluster surveys.

Resources used

18. The available budget for the first three years (\$43.94 million) exceeded the planned amount of \$23.94 million by roughly 65 per cent. Private sector fundraising had contributed \$1.87 million, or 6 per cent of the total, as of June 2007. Seventy per cent of the annual budget was allocated to the LGU focus areas, while

30 per cent was allocated for national-level activities. Fund utilization was well on track, as 70 per cent of the allotted funds were spent. A total of 45 per cent of programme funds were utilized on supplies in 2005, compared to 43 per cent in 2006. Delayed liquidation of cash assistance to government continues to be a problem, caused in part by the complex programming structure of the country programme in a decentralized environment, which leads to the involvement of a large number of partners at the subnational level.

Opportunities and constraints affecting progress

19. Improving economic growth can be expected to create opportunities for additional resources for programmes and projects in the social sectors. Coupled with the sector-wide programme approach in health and education, improvements in programme outcomes can be better assured through the consolidation of local, national, donor, and private sector resources to achieve commonly agreed goals. Partnerships provide opportunities for further consolidating resources, enhancing synergies and creating a critical mass of rights-based interventions, even if the potential of partnerships has yet to be fully tapped, to more effectively target the most vulnerable and at-risk children in identified disparity areas. Other improvements in programme outcomes can be achieved through galvanizing all interested organizations to pool resources and plan together with key stakeholders at the local and community levels, and through tapping the resources of the corporate sector (especially mass media and telecommunications) to address issues that put children at risk. The recent effort to promote joint United Nations programming provides yet another opportunity for creating impact and achieving greater economies of scale. The more effective use of information and communication technology (ICT) will improve organizational communications, monitoring and evaluation, and information dissemination, and can be used, for example, for distance education and tele-diagnostics (medical diagnosis over a long distance through electronic means). Likewise, more effective modes of communication, especially for child participation, may be developed through the use of ICT (Internet chat, web blogging, online video, interactive play, and SMS messages). Promoting best practices to accelerate scaling-up of programmes and approaches that work can also be facilitated by the effective use of technology and technical exchange programmes.

Constraints

20. Threats to security and instability continue to disrupt lives, livelihoods and national development. The continuing political insurgency, militarization and threats to personal security hamper the delivery of services in conflict-ridden communities. Natural disasters also affect large numbers of people.

21. Other constraints include perennially low budget provisions for social services at the provincial level; a mismatch between lofty policy goals and minuscule budget support; the low priority given to children by some local leaders; the high dependence on local political leadership; the short-term of office of elected local officials; the rapid turnover of trained and experienced personnel in the health, education, and social services sector due to out-migration and transfers, and weak and limited capacity to enforce laws and policies and to implement programmes on child protection. Significant gaps in programmes and services remain, especially for children living in remote rural areas and belonging to indigenous populations,

children in armed conflict, and children suffering from abuse, violence, trafficking, and exploitation. At the same time, the participation of children, parents, and communities remains weak in general.

22. The five commonly used monitoring and evaluation systems that serve as data sources date back to before the beginning of decentralization in 1991 and are managed by technically ill-prepared local governments units. As a result, there is no integrated database and evaluation system linking national and subnational levels. Overall, challenges, therefore, include limited access to programmes and services, a weak information base, inadequate implementation of laws, weak prevention and rehabilitation strategies, and inadequate capacities and competencies. A human rights-based analysis of disparities identified a set of culturally based factors (ethnicity, religion, etc.) that make full achievement of equality, justice and access difficult to address.

Adjustments made

23. There were several overall adjustments recommended:

(a) Strengthen the use of the human rights-based approach to programming and results-based management to facilitate a more explicitly rights-based approach in a way that can be better measured;

(b) Re-craft and re-brand the Child-Friendly Movement as a Child Rights Movement that includes a better definition of the concept, scope, partnerships and related indicators. This will help UNICEF to reposition its programme engagement to support improvement in national policies as well as give to rights holders more opportunities for involvement through capacity-building and other interventions. These measures will facilitate the greater role of rights holders in implementation of the Convention on the Rights of the Child;

(c) Focus on populations in the lowest-income quintile to facilitate disparity reduction;

(d) Redefine the programme scope in the five cities to focus on the HIV/AIDS and the children in need of special protection programmes so as to maximize available resources. Support to the Technical Working Groups (multi-sectoral teams that plan provincial services) and for monitoring and evaluation should still be provided, along with advice to city government on issues affecting children and child rights policy. Locally available funds in cities should be leveraged for basic services; at the same time, redefine the programme scope in the provinces, where UNICEF funds should be allocated based on a situation analysis, targeting the lowest-quintile populations, prioritizing financial resources and focusing interventions through a bottom-up planning model and more selective programme mix;

(e) Discontinue the Area Focal Officer system and the island teams to allow for greater inter-sectoral coordination and stronger leadership of sector programmes and various partners in the planning, implementation, monitoring and evaluation of their respective programmes;

(f) Develop stronger engagement with sectoral policies and upstream work and strengthen linkages with efforts to achieve the targets of the Millennium Development Goals and UNDAF. To facilitate this, programmes should develop a

stronger research, evaluation and learning agenda, search for complementarities with national initiatives and donor programmes, and develop a stronger engagement with key local institutions and rights holders.

Conclusion

24. The midterm review of the Philippines provided an opportunity to review UNICEF efforts at subnational programming and disparity reduction. The region is systematically reviewing and analysing the UNICEF experience with decentralization and taking pilots to scale. This MTR has provided valuable information for these purposes.
