

22 July 2009

United Nations Children's Fund
Executive Board

Recommendation for funding from other resources

Gulf Area subregional programme (2010-2012)

The draft country programme document (CPD) for the Gulf Area subregional (E/ICEF/2009/P/L.16) was presented to the Executive Board for discussion and comments at its annual session of 2009 (8-10 June). The Executive Board approved the aggregate indicative budget of \$9,000,000 from other resources, subject to the availability of specific-purpose contributions, for the period 2010 to 2012.

In accordance with Executive Board decision 2006/19, the present document was revised and posted on the UNICEF website no later than six weeks after discussion of the CPD at the annual session. The revised CPD will be approved by the Executive Board at its second regular session of 2009.

<i>Basic data[†]</i> <i>(2007, unless otherwise stated)</i>	<i>Bahrain</i>	<i>Kuwait</i>	<i>Qatar</i>	<i>Saudi Arabia</i>	<i>United Arab Emirates</i>
Child population (millions, under 18 years)	0.2	0.8	0.2	9.8	1
U5MR (per 1,000 live births)	10	11	15	25	8
Underweight (% , moderate and severe, 1996)	9 ^a	10	6 ^a	14	14 ^a
Maternal mortality ratio (per 100,000 live births)	32*	4*	12*	18*	37*
Primary school enrolment (% net, male/female, 2006)	98/98 ^a	84/83	93/96	— /—	88/88
Survival rate to last primary grade (% , 2005)	99 ^a	96	89	—	99
Use of improved drinking water sources (% , 2006)	—	—	100	—	100
Use of improved sanitation facilities (% , 2006)	—	—	100	—	97
Adult HIV prevalence rate (%)	—	—	—	—	—
Child labour (% , children 5-14 years old, 2000)	5	—	—	—	—
GNI per capita (US\$)	19 350	31 640	^b	15 440	^b
One-year-olds immunized with DPT3 (%)	97	99	94	96	92
One-year-olds immunized with measles vaccine (%)	99	99	92	96	92

[†] More comprehensive country data on children and women are available at <http://unicef.org>.

* These are 2005 estimates developed by WHO/UNICEF/UNFPA and the World Bank, adjusted for underreporting and misclassification of maternal deaths. For more information, see <http://www.childinfo.org/areas/maternalmortality/>.

^a Data available for the previous year.

^b High income (\$11,456 or more). [World Bank estimated range, 2007.]

Summary of the situation of children and women

1. The total population of the five Gulf countries covered by UNICEF Gulf Area Office (GAO), according to latest available government records, is about 33 million. Twelve millions of these are children under the age of 18, with about 80 per cent living in Saudi Arabia. Given their geopolitical and economic situation, these countries attract millions of migrant workers, so about one third of their population is of expatriate origin.

2. These countries have witnessed major positive socio-economic trends, and oil revenues were used for extensive physical and social infrastructure development for basic services provision. Besides some policy and legislative reforms, institutional structures were established to improve the status of children and women. The *Human Development Report* of the United Nations Development Programme (UNDP) places all five countries in the high human development group, comprising 70 of all 177 countries.

3. These countries have ratified most major human rights instruments, including the Convention on the Rights of the Child (CRC), with some legal, budgetary and institutional reforms directed towards conformity with the Convention. The national constitution of Qatar explicitly incorporates a child rights focus, while the constitution of Kuwait endorses general human rights principles. Bahrain, Kuwait and Qatar have also ratified the two Optional Protocols to the Convention. All

countries have endorsed the International Labour Organization (ILO) Convention 182 (on the prohibition and elimination of the worst forms of child labour). Kuwait, Qatar and the United Arab Emirates (UAE) have ratified ILO Convention 138 (on the minimum age for employment). **In addition, all GAO countries have legislated laws to prohibit the use of children in camel racing.**

4. The United Nations Economic and Social Commission for Western Asia (ESCWA) report, *The Millennium Development Goals in the Arab Region 2007*, and national reports on the Millennium Development Goals confirm that these countries have met some of the Goals and are on track to achieve others, albeit with some disparities among and within countries.

5. High expenditures on health and education are also reported, with primary health and school participation indicators among the best in the world. Besides almost universal primary school enrolment with male/female parity, more than 90 per cent of those enrolled reach the last primary grade. The ratios of girls at secondary and tertiary levels are on a par with those of boys or above, mainly because boys enter the workforce earlier or go abroad for further studies. Adult literacy rates hover around 90 per cent. For those aged 15-24 years, the overall rate is 96.5 per cent with negligible male/female differences.

6. The child mortality reduction goal has been achieved. Antenatal care is high at 90 per cent and above, with most deliveries supervised by a skilled birth attendant. Key current child health challenges, related to behaviour rather than to service delivery, include injuries and accidents, replacing infectious diseases as the main causes of morbidity and mortality for children aged 1-18 years, besides increasing childhood obesity and type 1 diabetes.

7. Attention to women is increasing in legislation and the media, leading to the opening of public discourses on gender discrimination, domestic abuse against women, social problems due to sharply increased divorce rates, and their limited employment options. Women increasingly occupy restricted decision-making posts, once reserved only for men, including in chambers of commerce and municipal councils, with some women serving as ministers in Bahrain, Kuwait, Qatar and the UAE. **All** five countries are signatories to the Convention on the Elimination of All Forms of Discrimination against Women, and Bahrain has a National Strategy for the Advancement of Women. The 2007 *Human Development Report* places these countries among the top 70 for the gender-adjusted human development index, but despite women's high educational attainment in these countries, their low political and economic participation still constrains the achievement of Millennium Development Goal 3 on promoting gender equality and empowering women.*

8. There are few reported HIV cases, but all five countries have initiated preventive information, monitoring and control activities, given the low public awareness about how the virus is spread and the high rates of travel abroad of nationals.

9. To varying degrees, the children's rights focus in these countries is moving from survival and development, to sustainability of gains, improvement of services, and protection issues, including those of non-national children. The number and diversity of non-governmental organizations (NGOs) is growing, with some

* In the Gulf Cooperation Council countries, including Oman, women's share of waged employment in the non-agricultural sector was just 15.5 per cent in 2004 (ESCWA, 2007).

becoming more rights-oriented. Independent media outlets have emerged, but advocacy, planning, and services are affected by empirical data inadequacies on protection, gender and adolescent concerns.

10. With the recent breaking of silence on sensitive issues such as HIV/AIDS and child abuse, efforts are under way to further improve awareness of children's rights, particularly child abuse, violence and neglect, and juvenile justice concerns. The child protection mechanisms and services, along with approaches to inculcate positive attitudes and care practices among parents and caregivers, are also under review.

11. Programming for adolescent girls and boys aged 10-17 years is a relatively neglected area. **There is** emerging government attention on youth, triggered by landmark reports such as *The Arab Human Development Report 2002*, by UNDP and *The Millennium Development Goals in the Arab Region 2007* by ESCWA; **however**, in-country knowledge about the concerns of youth remains insufficient. Young people lack proper access to specialized services for their healthy growth and acquisition of essential life skills. Despite the high levels of literacy and media access, they have few opportunities to freely express their opinions, assess their problems or propose and implement solutions. The resulting frustration leads them to adopt unhealthy and irresponsible lifestyles, with visible trends towards tobacco and drug use. Their vast potential for personal development and the implications for national progress remain unrecognized and untapped.

12. The Committee on the Rights of the Child has commended progress in these countries, highlighting some cross-cutting areas to be addressed, including availability of comprehensive situation analyses on children and women; more domestic laws, rules and regulations aligned with the Convention; legal definitions of children consistent with the Convention; higher ages of criminal responsibility (currently most vary from 7 to 10 years) and for employment and marriage; better rights orientation for children without primary caregivers, for children in conflict with the law, survivors of abuse and exploitation and for adolescents; improved educational quality; reduced gender disparities in public and private life; and more meaningful Government-NGO partnerships. **The minimum age of marriage in GAO countries is considered part of family law and there is a growing interest to address this issue.**

Key results and lessons learned from previous cooperation, 2007-2009

Key results achieved

13. UNICEF technical support and human rights-based advocacy, undertaken with other United Nations agencies, have led to enhanced priority and resource generation for children in the Gulf region and of less developed countries. It improved UNICEF visibility and credibility, extended partnerships with States and NGOs, and facilitated UNICEF involvement in the CRC reporting processes of Bahrain, Kuwait and Qatar. While previous programmes focused mainly on scattered activities, holistic government-funded country programme action plans (CPAPs) and new memoranda of understanding with NGOs have now been negotiated for all five countries. UNICEF contributed to national children's rights plans formulation, including the national strategy plans for childhood in Qatar and

in UAE; a national plan in Saudi Arabia to protect children from psychological abuse in schools; and the Bahrain *Shoura* [Consultative] Council planning to reform the juvenile justice system. A study was also supported to assess the mandate and operational modalities of the Saudi National Childhood Committee, with a proposal for reinforcement measures.

14. In order to raise awareness of UNICEF work, as identified by a market survey in Kuwait, Saudi Arabia and UAE, a well-structured fundraising and partnerships function was established in Dubai and Saudi Arabia and a communication unit was set up in Dubai, with a redesigned website to support these functions. The development of a more comprehensive fundraising strategy helped to extend corporate alliances and leverage \$33.5 million, besides the \$8 million committed by UAE for the second phase of the joint project for protection of child camel jockeys (2007-2009). The inclusion of UNICEF among the main implementers of the substantive fundraising campaign 'Dubai Cares', launched by the ruler of Dubai, generated \$18 million for UNICEF by the end of 2008, with another \$5 million in the pipeline. A new greeting cards operations marketing plan, introduced with communication support, produced increased sales in the UAE, and partnerships were established with key retail outlets, making cards available to the public for the first time.

15. Awareness campaigns and training on children's rights, conducted in collaboration with UNDP and the World Health Organization (WHO), yielded breakthroughs in public discourse on sensitive issues, such as child abuse, trafficking, and HIV/AIDS. With UNICEF leading the United Nations country team (UNCT) Theme Group on HIV/AIDS in UAE, prison officers were given an orientation on HIV/AIDS prevention. A partnership continued with the Dubai Police for the Unite for Children, Unite against AIDS campaign. In Qatar, training on the CRC was conducted for religious leaders, and army officers were trained as trainers in incorporating CRC principles into military school curricula. Journalists and reporters in Dubai and Kuwait were introduced to the CRC and to the principles and guidelines for ethical reporting on children. Awareness campaigns on obesity and diabetes were conducted in UAE, besides child safety campaigns in Saudi Arabia and UAE. To facilitate documenting and monitoring the status of children through a comprehensive child database system, DevInfo was established in Saudi Arabia and UAE.

16. Joint activities with UNDP focused on building youth skills to avoid risky behaviours, such as drug abuse, and to increase their potential for employment. A comprehensive analytical study was conducted on the status of drug addiction amongst Saudi youth. In Bahrain, male and female youth received training in communication, planning and management skills, and in HIV/AIDS prevention, with subsequent HIV/AIDS information campaigns. The empowerment of female youth was furthered through leadership trainings in Saudi Arabia, jointly organized with UNDP and the Prince Sultan University.

17. The Child Protection Unit in Abu Dhabi provided technical support to all five countries. Besides advocacy and information dissemination, the UAE Child Camel Jockeys protection project, which had gained positive recognition as a model, received a concrete monitoring system, and was extended until 2009, with additional UAE funding. Good progress was also made in controlling child trafficking from

Yemen into Saudi Arabia, and a Family and Community Awareness on Child Abuse project was set up in Saudi Arabia.

Lessons learned

18. The similarities of priorities for children's rights among the five countries and in the observations of the Committee on the Rights of the Child on State Party reports from these countries indicate the need for common strategic approaches for the Gulf Area. Collaboration can be best maximized if joint action plans address priority concerns for children. This was confirmed by the somewhat improved strategy in the current programme, which adopted a more country-specific approach within a framework for the Gulf Area, though this kind of response varied from country to country. Despite approved CPAPs, Bahrain, Kuwait and Qatar funded periodic on-demand activities rather than holistic plan implementation. The main reason was the record of ad-hoc approaches to cooperation with UNICEF. To create better opportunities for advancing children's rights, alternate cooperation modalities should be designed for situations where committed funds are only periodically available. It may be advisable to consider a two-tier operational approach, with more responsive countries like Saudi Arabia and UAE included in the first tier, with the others joining later under more flexible agreements. The availability of thematic funds should also be explored as seed money for critical initiatives.

19. Data issues, such as data gaps, insufficient quality and inconsistencies between sources have challenged the availability of credible socio-economic profiles, constraining evidence-based planning, policy advocacy, and progress monitoring and reporting. This was also highlighted by the 2008 regional workshop "Measuring Human Development" organized by Qatar with UNDP, ESCWA and the United Nations Educational, Scientific and Cultural Organization. Effective UNICEF monitoring of CRC implementation depends upon availability of reliable situation analyses; therefore, generation of credible data, including as input to DevInfo institutionalization, must be a primary programme element.

20. As indicated by the observations of the Committee on the Rights of the Child on State Party reports, the achievement of quick progress by these countries in traditional social sectors does not necessarily imply capacity to address participation and protection issues. These require, besides systemic and structural reforms, multidisciplinary behaviour change approaches at multiple levels. The growing concerns for child protection requires consistent follow-up to help ensure that identified and less visible groups gain full access to their rights. Given the nature of the task and in view of the countries' past records in effecting social change and their capacity building needs to address new challenges, there is a continued demand within these countries for international advocacy, technical support and monitoring, particularly by UNICEF.

21. The depth of technical support provided by the GAO has been increased by expanding the areas of protection, communication, and fundraising. It has enhanced participation of senior staff in high-profile issue-oriented workshops and UNCT events, contributing to dissemination of children's rights and results-based management approaches to nationals and UNCT members. Given the critical need for regular interaction with numerous partners in the five countries, the GAO structure needs a longer-term reinforcement in order to perform effectively and retain its credible partner image. To strengthen national capacities, subject to

programmatic needs and Government interest and funding, establishing small national programme units within each country's designated agency for children would be advisable.

The country programme, 2010-2012

Summary budget table

<i>(In thousands of United States dollars)</i>						
<i>Other resources</i>						
<i>Programmes</i>	<i>Bahrain</i>	<i>Kuwait</i>	<i>Qatar</i>	<i>Saudi Arabia</i>	<i>United Arab Emirates</i>	<i>Total</i>
Evidence-based advocacy and mobilization	300	300	300	500	500	1 900
Child protection	450	450	450	550	550	2 450
Adolescent empowerment	450	450	450	700	700	2 750
Cross-sectoral costs	300	300	300	500	500	1 900
Total	1 500	1 500	1 500	2 250	2 250	9 000

Preparation process

22. The programme design was based on lessons learned from previous programme cycles, drawn from in-house desk reviews of implementation reports, field visits and regular interaction with key partners in all five countries. Child-related priorities in the national development plans and strategies of the governments and the observations of the Committee on the Rights of the Child related to State Party reports were reviewed. Also consulted were the UNICEF Regional Office for the Middle East and North Africa (MENARO), on programmatic and operational aspects, and the Private Fundraising and Partnerships (PFP) Division, on fundraising aspects. Regional priorities and strategies outlined in the MENARO management plan were taken into account, including for adolescent empowerment.

23. Dialogue with other United Nations agencies, was maintained bilaterally in each country and through UNCT meetings in Bahrain, Saudi Arabia and UAE, to ensure, mutual synergies on selected priority themes. Initiatives undertaken with other United Nations partners further facilitated the preparation process.

Goals, key results and strategies

24. The overall goal of the 2010-2012 programme of cooperation is to accelerate progress, within the CRC framework in the five Gulf Area countries, towards the full realization of the rights of children and adolescents, including the most vulnerable and excluded.

25. The proposed programme revolves around themes common to all five countries, but with issues and opportunities based on country-specific variations. Research, situation analyses and consultations, including with young people, will facilitate better understanding of key problems facing children and women.

Identification of opportunities which could redress the situation will inform advocacy, legal reform and planning. Within the overall priority for the participation and protection rights of all children, particular emphasis will be on issues affecting 10-17-year-olds. Gender responsiveness and advocacy for the most vulnerable groups will be mainstreamed. Some ongoing pilot initiatives will be nurtured with a view to enhancing quality and scale.

26. The programme will focus on three areas: (a) evidence-based advocacy and mobilization; (b) child protection, with particular emphasis on juvenile justice and various forms of violence, abuse and neglect, especially trafficking; and (c) adolescent empowerment, emphasizing policy and media attention, healthy life skills (addressing HIV/AIDS, substance abuse and injury prevention) and civic engagement.

27. Key results to be achieved by the end of 2012 include the following: (a) knowledge of policy makers, planners, the public and the media is improved on issues of concern to diverse groups of children and young people, and about their positive potential; (b) children and young people influence and benefit from CRC-based law and policy reform; (c) children, especially the most vulnerable and excluded, are protected from violence, exploitation and abuse; (d) children and adolescents have access to better-quality care and learning opportunities, to enable them to develop to their fullest potential and to live healthier and more socially responsible lives; and (e) partnership and funding networks are extended for children of the region and from other countries.

28. Given the existing achievement levels, UNICEF partnership with these countries has long since shifted from service delivery to policy advocacy, capacity development and monitoring of children's rights, and recently to a more vigorous resource mobilization for in-country programmes and for children from other countries. These strategies will continue to be employed. The key results obtained in each country, similar in many respects but not identical, will depend on national needs and available funds. Situation analyses will receive priority in all cases as the foundation for subsequent action.

Relationship to national priorities and the UNDAF

29. The proposed programme design was informed by children's rights-related provisions in national constitutions, strategies and development plans. Recommendations of key national and sub-regional consultations, such as the "Measuring Human Development" workshop in Qatar and workshops on juvenile justice in Bahrain and on youth empowerment in Saudi Arabia, were taken into account.

30. Due to limited United Nations presence, these Gulf countries are exempted from conducting UNDAF exercises. While no Common Country Assessments or UNDAFs exist, priorities related to each agency's mandate and the Millennium Development Goals were identified jointly with other United Nations agencies. As such, DevInfo, empowerment of adolescents, gender mainstreaming and HIV/AIDS prevention form key components of the proposed programme.

Relationship to international priorities

31. The programme is guided by the CRC and the UNICEF advocacy and associated monitoring mandate. While developing the programme framework, priority was accorded to the recommendations of the Committee on the Rights of the Child related to situation analyses, legal, policy and institutional reforms, besides those focused on protection, adolescent and gender issues.

32. The programme aims to assist the Gulf Area countries to meet their international obligations related to the ratified human rights treaties and the Millennium Development Goals. It will also help them to honour their declared commitment to achieve the *World Fit for Children* targets, set at the 2002 United Nations General Assembly Special Session on Children, many of them endorsed by inter-country bodies, such as the League of Arab States, the Gulf Cooperation Council and the Organization of Islamic Conference. Programmes 1 and 3 will contribute to the UNICEF medium-term strategic plan focus area 5, policy advocacy and partnerships for children's rights, while programme 2, responds also to the *United Nations Study on Violence Against Children*, relates to focus area 4, child protection from violence, exploitation and abuse.

Programme components

33. Based on the broad outlines given below, the programme will reflect the specific situation of each country. The CPAPs will contain a manageable mix of key results to be finalized with Saudi Arabia and UAE, and will include modalities negotiated with designated coordinating bodies of the other three countries: Bahrain, Qatar and Kuwait.

34. **Evidence-based advocacy and mobilization** will focus on monitoring, policy advocacy and partnerships. Expected key results include the following: (a) research, monitoring and reporting systems on CRC implementation reinforced, with a refined core set of country-specific children's rights indicators and updated situation analyses, including assessments of the possible impact of financial crises on children and women; (b) DevInfo established and used as a tool for monitoring, analysis and reporting; (c) a database on child abuse established in Saudi Arabia; (d) the GAO experience documented to inform further development of UNICEF strategic approach to middle- and high-income countries; (e) capacities strengthened of national commissions or councils responsible for matters pertaining to children's rights; (f) national childhood strategies (including for changing public behaviour) developed; (g) laws, policies and institutional guidelines made more CRC-consistent; (h) increased percentage of parents, teachers, caregivers and students with basic knowledge of children's rights; (i) enhanced media projection of children's rights; (j) public commitment to children's rights strengthened; and (k) a steady volume of resources leveraged for children.

35. Besides advocacy, GAO will provide necessary technical guidance to the States Parties for follow-up on the recommendations of the Committee on the Rights of the Child and in the preparation of periodic reports to the Committee, in part by offering regional report-writing capacity building workshops for government partners.

36. **Child protection** will focus on juvenile justice and child abuse prevention. The programme will address violations of protection rights of the most vulnerable and excluded groups of children, including those in conflict with the law, and child victims of trafficking in certain contexts.

37. Expected key results are as follows: (a) national capacities of key national institutions strengthened to identify, analyse and address specific rights violations; (b) laws, policies and mechanisms refined to prevent, detect and report child abuse; (c) referral systems for counselling and rehabilitation developed, especially for victims of violence and trafficking; (d) juvenile justice laws and enforcement systems better aligned to internationally accepted norms; (e) mechanisms in place to protect children as victims, witnesses and offenders; (f) skill and sensitivity levels enhanced of front-line workers and care providers working directly with children in conflict with the law and with child victims of abuse, violence and exploitation; and (g) awareness increased among parents and society at large about definitions and situations of child abuse.

38. **Adolescent empowerment** will focus on adolescent development and participation and will address specific issues: (a) knowledge gaps about their situation; (b) inadequate access to healthy and socially responsible life skills and knowledge; (c) low legal, policy, planning and media attention to their concerns and potential; and (d) limited opportunities for self-expression and lack of effective participation in planning and implementation of initiatives which affect their lives.

39. Expected key results are the following: (a) gender and age disaggregated country-focused situation analyses, developed with youth participation, according to the MENARO analysis framework (including reviews of relevant policies, laws, legislative commitments, institutional support systems and societal attitudes); (b) comprehensive national focused strategies for adolescent empowerment developed and based upon findings from situation analyses; (c) knowledge management, evidence-based advocacy plans formulated; (d) healthy lifestyle, education and civic engagement models designed and tested; (e) increased numbers of adolescents with precise knowledge of key lifestyle messages (HIV/AIDS, substance abuse, injury prevention and obesity), adopting positive behaviours and engaged in social message dissemination.

40. For all three programmes, UNICEF support will include policy advocacy, provision of international technical expertise for research, training and knowledge networking, particularly on child abuse, juvenile justice and behaviour change and civic engagement models for youth. Inter-country experience-exchange visits will include young people.

41. **Cross-sectoral costs** for the Gulf Area programme will be used to support staff and non-staff cross-cutting costs, including one international professional social policy specialist post, national staff, office equipment, operations, communications, staff training and travel.

Major partnerships

42. Strong partnerships have been forged between UNICEF and these countries. While UNICEF has since 1961 assisted in the development of health and education services for children of the Gulf region, their Governments, especially Saudi Arabia, have contributed significantly to global regular resources of UNICEF. They are increasingly contributing to other resources earmarked for specific UNICEF programmes and emergency interventions. Partnerships are also well established between UNICEF and the Sheikh Zayed bin Sultan Charitable and Humanitarian Foundation in UAE and the Kuwait Charity Fund. Besides traditional partnerships, new funding alliances are developing, as evidenced by donations of the Saudi Committee for the Relief of the Palestinian People and the emerging partnerships

with red crescent societies in all Gulf Area countries as well as business corporations. GAO will explore new options while continuing to reinforce resource generation alliances with existing government and private-sector funding agencies.

43. Credibility gained through the programmatic engagement of UNICEF in the Gulf Area now serves as capital to leverage issue-oriented support on key children's rights-related areas of concern. Efforts will build to extend partnerships for enhanced social responsibility among civil society leaders, the media and, most importantly, future leaders, such as young people and children. Alternate partnership modalities, tailored to local situations, will be explored, to overcome possible constraints to comprehensive action planning and implementation.

44. The UNCTs are giving considered attention to ensuring programme coherence among member agencies. GAO will continue to work closely with the United Nations resident coordinators in Bahrain, Kuwait, Saudi Arabia and UAE, and with the Regional Office for South West Asia and the Arab Region of the Office of the High Commissioner for Human Rights (OHCHR) in Qatar, for sustained advocacy for the ratification of additional core human rights treaties. Based on identified common priorities, joint or complementary activities will be pursued, to maximize advocacy outputs and programme resources. Gender- and youth-related activities and policy advocacy will be undertaken jointly with UNDP in Saudi Arabia and UAE, while national strategic plans on HIV/AIDS will be developed with the regional office of the Joint United Nations Programme on HIV/AIDS. Other partnerships with the new United Nations Human Rights Documentation and Training Centre of OHCHR in Qatar, on rights-based information dissemination, active learning and advisory services on curricula design, will reinforce human rights promotion.

Monitoring, evaluation and programme management

45. National coordinating bodies for programme implementation will be the national commissions for childhood in Bahrain and Saudi Arabia, the Supreme Committee for Family Affairs in Kuwait, the Supreme Council for Family Affairs in Qatar and the General Union of Women in UAE. In Saudi Arabia and UAE — the countries that have provided the committed funds — three-year country-specific CPAPs and annual work plans will be developed with coordinating bodies, in close cooperation with relevant line ministries and NGOs. Flexible partnership modalities will be devised for countries where keeping implementation within CPAPs has been constrained. The work plans may be revised after annual reviews, evaluations and changes in priority needs or the funding situation. The second annual review, in late 2011, will serve as a midterm review in preparation for the 2013-2015 programme.

46. DevInfo will strengthen national children's rights monitoring systems. A 2010-2012 integrated monitoring and evaluation plan, based on the programme summary results matrix, will facilitate results-based programme management. Identified research, studies, surveys, evaluations, incorporating key gender- and age-disaggregated indicators, will be detailed in annual monitoring and evaluation plans. Vulnerability and risk analyses will be conducted and emergency preparedness and response plans updated.

47. GAO, located in the United Nations House in Riyadh, benefits from common services. The Representative of the UNICEF Gulf Area Office, the social policy specialist and operations staff will ensure programme management, coordination and operational capacities in all five countries. The Abu Dhabi Office is provided by the UAE Women's Union. The Private Fundraising and Partnerships Division will

continue to provide support, including staff, for the Fundraising Office hosted by the Dubai Government. The fundraising officer-in-charge reports to the GAO Representative. Integration of fundraising and programme activities will assist in mutual reinforcement of various programme components. Administration of the Supply Division warehouse in Dubai will continue to be facilitated.
