

**Summary Results Matrix: Government of Afghanistan – UNICEF Country Programme, 2010–2013\***

UNICEF MTSP Focus Area	Key Results Expected in this Focus Area/ Baseline* Estimates for these Results	Key Progress Indicators **	Means of Verification of Results	Major Partners, Partnership Frameworks & Cooperation Programs	Expected Key Results in this Focus Area will contribute to:
1. Young Child Survival and Development	<p>1.1. ANDS, national sector strategies, plan and budget (in Health - Nutrition - ECD – WASH) are evidence-based and support high-impact, measurable and synergistic interventions to achieve the MDGs</p> <p>1.2. 75% of pregnant women, newborn and under five children in 4 provinces utilize access to integrated community minimum package including nutrition and water, sanitation and hygiene.</p> <p>1.3. 50% of pregnant women in four provinces have access to the services of skilled birth attendants and to antenatal care</p> <p>1.4. Increased national immunization coverage to reduce the burden of vaccine preventable diseases among under-five children by 80%.</p> <p>1.5. 15% increase in access / use of sustainable safe drinking water and</p>	<p>1.1.1. Proportion/% of sector strategies assessed to be evidence-based and support high impact and measurable interventions. <i>Baseline:</i></p> <p>1.1.2. Government expenditure on Health / Nutrition / ECD / WASH as a percentage of total government expenditure <i>Baseline:</i></p> <p>In 4 selected provinces:</p> <p>1.2.1. % of pregnant women who use antenatal care services <i>Baseline: 32% (2006 AHS)</i></p> <p>1.2.2. % of children receiving integrated community minimum package <i>Baseline: n/a</i></p> <p>1.2.3. % of children under age 3 years underweight <i>Baseline: 39% (2004)</i></p> <p>1.2.4. % of children 0-6 months exclusively breastfed <i>Baseline:</i></p> <p>1.2.5 % of HH using iodized salt <i>Baseline: 28% (2004)</i></p> <p>1.2.6. Coverage of Vit A supplementation <i>Baseline: 95% (May 2009)</i></p> <p>1.3.1. % of births attended by skilled health personnel <i>Baseline: 19% (2006 AHS)</i></p> <p>1.4.1. 0 polio status <i>Baseline: 10 WPV cases (July 2009)</i></p> <p>1.4.2. Coverage of measles vaccination <i>Baseline: 75% (Q1 2009)</i></p> <p>1.4.3 Tetanus Coverage <i>Baseline: 64% 2008</i></p> <p>1.5.1: % of HH with access / use to safe drinking water / having sanitary excreta disposal facility / practicing</p>	<p>Content Analysis / Social Policy Studies</p> <p>- Multiple Indicators Cluster Survey (MICS)</p> <p>- Health Management Information System (HMIS)</p> <p>MICS</p> <p>EPI coverage surveys</p> <p>National Risk and Vulnerably assessment (NRVA)</p> <p>Routine Facility WES reports</p>	<p>+ Government, World Bank (WB), CSO, implementing NGOs, MoPH, USAID, EU supported Basic Package of Health Services</p> <p>WHO, UNFPA, UNIFEM MRRD.MOPH, MOE</p> <p>ANDMA, UNAMA, UNDP, WFP, Provincial Disaster Management Committees and SC/UK</p>	<p>MDG 1: Eradicate extreme poverty and hunger MDG 3: Promote gender equality and empower women MDG 4: Reduce child mortality MDG 5: Improve maternal health MDG 6: Combat HIV/AIDS, malaria and other diseases MDG 7: Ensure environmental sustainability</p> <p>WFFC</p> <p>UNDAF Outcomes 3.1 : Afghans, particularly those who are under-served, have greater and more equitable access to quality basic services</p> <p>UNDAF Outcomes 3.1 : More Afghans pursue education opportunities and healthy lifestyles</p> <p>ANDS Pillar III - Social and economic development: Health and Nutrition</p>

\* Note: **Results** of MICS 2009 (expected early 2010) and NRVA 2007-08 (expected end-July 2009) will be used as baseline for all key results, unless otherwise stated

\*\* More detailed progress indicators will be part of the CPAP for annual monitoring of progress.

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	<p>20% increase access and use of HH toilet with a special focus on under-served and vulnerable population</p> <p>1.6. - Effective Emergency Preparedness Plan developed, updated quarterly and implemented in coordination with all the clusters (WASH, Nutrition) - In declared emergency areas more than 90% of children are covered with life saving interventions (CCC)</p>	<p>key safe hygiene behaviour <i>Baseline: (NRVA2005) 31% of the households have access to safe drinking water. Kuchi households have lowest access to safe drinking water (16%), rural households 26% and urban households 64%. NRVA 2005)</i></p> <p>1.5.2: % Health facilities having safe drinking water and sanitation facilities <i>Baseline: N/A</i></p> <p>1.6.1. EPP update on quarterly basis <i>Baseline: National and Provincial EPPs exist</i></p> <p>1.6.2. % of affected population : - (a) provided with safe water, toilet facilities and hygiene - (b) between six months and 15 years vaccinated against measles &amp; Vit A supplementation - (c) of severely malnourished children provided with therapeutic feeding <i>Baseline:</i></p>	<p>- Rapid assessment of the situation of children affected by emergency - Monitoring systems for CCC commitment during emergencies -MRRD reports</p>		
2. Basic education and gender equality	<p>2.1. Appropriate policy, legislation and budget allocations aimed at universal school readiness and primary school.</p> <p>2.2. 50% increase in literacy rate among 15-24 year old females</p> <p>2.3. 20% increase in primary school enrolment for girls</p> <p>2.4. 60% of girls who enrolled in grade one reach grade 5 in 5th year of education cycle</p> <p>2.5. 30% primary schools are child friendly</p> <p>2.6. 80% of schools have sustainable and child friendly water and sanitation facilities, well maintained and used effectively, learn, adopt and sustain key hygiene</p>	<p>2.1.1. Government expenditure on basic education as a % of total government expenditure <i>Baseline:</i></p> <p>2.1.2. # of policies and legislations in place <i>Baseline:</i></p> <p>2.2.1. 15-24 literacy rate <i>Baseline: 15-24 National 18% (2003, Best Estimates) For 15+: National 14 %, U 28%, R 8% (2003 Best Estimates)</i></p> <p>2.3.1. Net/Gross enrolment ratio in primary school for girls by urban/rural and disadvantaged groups <i>Baseline: Net 46.43%, Gross 99.35% (2007 EMIS)</i></p> <p>2.4.1 % of girls starting grade 1 who reach grade 5 <i>Baseline: 39.65% in Gr 1, 34.10 in Gr 5 (2007 EMIS)</i></p> <p>2.5.1. # of schools practiced nationally defined child friendly school standards <i>Baseline:40 (2009)</i></p> <p>2.6.1. % of primary schools with safe drinking water and adequate sanitation facilities <i>Baseline: 35.87 % with access to safe drinking water(EMIS 2007) 20 % with access to safe sanitation (EMIS 2004)</i></p>	<p>Social Policy Studies</p> <p>MICS, NRVA, Education Management Information System (EMIS)</p> <p>EMIS and Monitoring data</p> <p>External study on hand washing practices of school children</p> <p>Monitoring Report</p>	<p>UNESCO, WFP, WHO, UNIFEM</p> <p>World Bank, USAID, JICA, Danida and various national and international NGOs</p> <p>UNESCO, World Bank, USAID, JICA, Danida and various national and international NGOs</p> <p>World Bank, USAID, JICA, Danida and various national and international NGOs</p> <p>Government: MOE, MRRD, RRDs, DoE,</p> <p>ANDMA, UNAMA, UNDP, WFP, Provincial Disaster Management Committees and SC/UK</p>	<p>- MDG 1: Eradicate extreme poverty and hunger / MDG 2: Achieve universal primary education / MDG 3: Promote gender equality and empower women / MDG 7: Ensure environmental sustainability</p> <p>- WFFC goal to: Provide quality education;</p> <p>- UNDAF Outcomes 3.1 : Afghans, particularly those who are under-served, have greater and more equitable access to quality basic services</p> <p>UNDAF Outcomes 3.1 : More Afghans pursue education opportunities and healthy lifestyles</p> <p>- ANDS Pillar III - Social &amp; economic</p>

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	<p>practices</p> <p>2.7. - In declared emergency, educational response is provided meeting the standards reflected in UNICEF's CCC</p>	<p>2.6.2. % of children adopt proper hand washing at schools and at homes. <i>Baseline A 2003 MICS showed that only 32% of mothers of U-5 children in urban areas and 18% in rural areas use water or soap/ash to wash their hands after their own or their children's defecation. Hand washing in school according to EMIS 2004 is very low.</i></p> <p>2.7.1. % of children affected by the emergency, who have access to safe learning/play spaces (WASH dimension) <i>Baseline: National and Provincial EPPs exist.</i></p>			development: Education
3. HIV/ AIDS and Children	<p>3.1. 60% of the general population of young people have access to the information, skills and services to protect themselves from HIV/AIDS/ STI and drug use;</p> <p>3.2 100% of MARA have access to the information, skills and services to protect themselves from HIV/AIDS/ STI and drug use.</p> <p>3.3. 100% of known HIV+ pregnant women requiring ART receive treatment and 100% of pregnant women who test positive for HIV have access to comprehensive PMTCT</p> <p>3.4. 100% of babies born to identified HIV+ women (exposed) on cotrimoxazole prophylaxis and</p>	<p>3.1.1 % of adolescents in six selected provinces with adequate knowledge and practice of healthy life styles <i>Baseline: N/A, expected in MARA baseline study</i></p> <p>3.2.1. % of MARA (disaggregated by context, age, gender, location) who correctly identify ways of preventing HIV and reject major misconceptions <i>Baseline: N/A, expected in MARA baseline study</i></p> <p>3.2.2. % of MARA (disaggregated by context, age, gender, location) reporting the use of sterile injecting drug equipment the last time they injected drugs <i>Baseline: N/A, expected in MARA baseline study</i></p> <p>3.2.3. % of MARA (disaggregated by context, age, gender, location) who have had sexual intercourse before the age of 15 (including anal sex i.e. male-to-male) in context where this is prevalent. <i>Baseline: N/A, expected in MARA baseline study</i></p> <p>3.3.1. # of identified pregnant women receiving ART in accordance with national approved treatment protocol <i>Baseline: n/a (expected end 2009 from NACP)</i></p> <p>3.4.1. # of identified children with advanced HIV infection receiving ART in accordance with the nationally approved treatment protocol <i>Baseline:</i></p>	<p>NGO / Government annual reports</p> <p>MARA/MARP Baseline study.</p> <p>- Health Management Information System (HMIS)</p> <p>NACP (National AIDS Control Programme) report on administrative data from ART (end-2009), TB/HIV collaborative centers, and ante-natal clinics</p>	UNAIDS	<p>UNDAF Outcomes 3.1: Afghans, particularly those who are under-served, have greater and more equitable access to quality basic services</p> <p>MDG 6: Combat HIV/AIDS, malaria and other diseases</p>

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	<p>100% of identified HIV+ infants receive appropriate care and treatment, including ART</p> <p>3.5. In emergency situation, HIV risk and vulnerability to be included in rapid assessments and programme responses.</p>	<p>3.5.1. Number emergency situation with HIV risk and vulnerability included in rapid assessments <i>Baseline: n/a</i></p>			
4. Child Protection	<p>4.1. Children are protected through more effective child rights-based policies, legislation and child protection systems.</p> <p>4.2. Families and communities are better informed and equipped to protect children &amp; youth (esp. girls) from abuse, violence and exploitation especially gender-based violence and harmful practices.</p> <p>4.3. Effective child protection monitoring, reporting and data collection/analysis mechanisms will be developed to ensure evidence-based advocacy &amp; programming in Child Protection</p>	<p>4.1.1. Child Act enacted <i>Baseline: No piece of legislation currently in place that addresses the protection of children's rights in a comprehensive manner.</i></p> <p>4.1.2. # of laws, policies, regulations and procedures harmonized with international standards <i>Baseline UNICEF engaged with government in the development of the Juvenile Code and Human Trafficking Law; there are protection issues that still need addressing through stronger legislation.</i></p> <p>4.2.1 % of child protection cases reported to CPAN assisted and resolved. <i>Baseline: 1,500 cases reported in 2008. % of cases resolved by CPAN interventions is not available.</i></p> <p>4.2.2. # of functional CPANs (province / district) % of districts who have established links with Provincial CPAN <i>Baseline: 26 CPANs and 32 District CPAN as of June 2009.</i></p> <p>4.2.3. # of youth (male/female, in-school/out-of-school) accessing information/services through YICC in each province with YICC; # of YICC functional <i>Baseline: 6,448 males (14 - 30 years) and 4,546 females (14 - 30 years) reached in 2008. 14 YICC functional as of June 2009.</i></p> <p>4.3.1. # of periodical reports on the situation of children in armed conflict prepared by the Country / Regional Taskforces MRM and submitted to the Security Council Working Group <i>Baseline: One annual report, one SG's annual report and one horizontal note have been submitted in 2008.</i></p>	<p>Government publication of policies and legislation</p> <p>NGO / Government annual reports, project studies and assessments, CPAN/DoLSA regular reports</p> <p>Country Task Force MRM periodical reports to UNSC. Child Protection thematic studies. NGO reports. CPAN/DoLSA regular reports.</p>	<p>Relevant line Ministries (Ministry of Labour, Social Affairs, Martyrs &amp; Disabled; Justice, Interior, Youth Affairs, Refugees and Repatriation, Attorney Generals Office), Parliamentarians</p> <p>Afghanistan Independent Human Rights Commission, ILO, UNAMA, UNHCR, Save the Children Alliance, CPAN, and local NGOs, Youth groups and networks.</p> <p>ANDS Social Protection Strategy; the UNDAF</p>	<p>MDGs to: Protect the Vulnerable (MD, Section VI);</p> <p>WFFC goal to: Protect against abuse, exploitation and violence.</p> <p>UNDAF 1.1. Stabilisation process is strengthened through effective integrated UN support to the Government and communities.</p> <p>UNDAF 1.3. The institutions of democratic governance are integrated components of the nation-state.</p>

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	4.4 Effective emergency preparedness and response plan developed and implemented in collaboration with Child Protection sub-cluster	<p>4.3.2. # of analytical reports on the situation of children in armed conflict prepared by the CTF MRM and submitted to UNCT, UNHCT, and Protection Cluster for advocacy purposes <i>Baseline: One annual report submitted in 2008.</i></p> <p>4.3.3. # of cases of children affected by armed conflict referred to CPAN for assistance/support services; <i>Baseline: n/a</i></p> <p>4.3.4. # of thematic studies on child protection. <i>Baseline: Seven thematic studies produced in 2008.</i></p> <p>4.4.1. EPRP developed and updated regularly in collaboration with child protection sub-cluster <i>Baseline: National and Provincial EPPs exist</i></p> <p>4.4.2. # of child protection situation assessments conducted for acute and protracted emergency situations in the country <i>Baseline: National and Provincial EPPs exist.</i></p>			
5. Policy Advocacy and Partnerships for Children's Rights	<p>5.1 Increase awareness of child vulnerability to economic, social and environmental conditions, through updating of situation analysis including disaggregated data, information and knowledge on children and women to reflect existing disparities and to focus on marginalized populations</p> <p>5.2. Articulate and secure UNICEF's inputs into key national processes with a view to positioning children and women at the centre of Afghanistan's development agenda</p> <p>5.3 Policies, conventions and legislation that enable fulfillment of children's rights drafted, adopted and operationalised <b>Increased leverage of</b> national and international resources allocation to invest in children.</p>	<p>5.1.1 MICS 2009 and 2013 published and disseminated / Child poverty and disparities studies published, disseminated and the recommendations implemented <i>Baseline: MICS 2009 preparation ongoing (fieldwork planned in October); Child Poverty Study first draft report available</i></p> <p>5.1.2 AfghanInfo / DevInfo updated regularly and used by UNICEF, partners and government agencies <i>Baseline: AfghanInfo launched in CSO; data exchange mechanism being developed with key ministries</i></p> <p>5.1.3. An M&amp;E mechanism established and functional at national/government level for monitoring &amp; reporting progress on MDG/ANDS <i>Baseline: M&amp;E consultative group (informal) established with ANDS and key partners</i></p> <p>5.2.1. # of key challenges for children, women and gender equality addressed during ANDS and other sector strategies reviews <i>Baseline: n/a</i></p> <p>5.3.1. # of legislations that include provisions/ perspectives for the fulfillment of children's rights <i>Baseline: n/a</i></p>	<p>Government publication of policies and legislation</p> <p>Project evaluation Results</p> <p>Project evaluation Results</p> <p>Monthly Project Implementation Reports</p> <p>Project evaluations</p> <p>Child Poverty Study (2009)</p>	<p>Ministries of Justice</p> <p>Ministry of Economy (Planning and Local Government)</p> <p>National Children's Rights Commission</p> <p>National Women's League</p>	<p>MDG 8: Develop a global partnership for development</p> <p>WFFC goal to: Combat HIV/AIDS</p> <p>UNDAF Expected Outcomes: Cross cutting issues</p>

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	<p>5.4. Articulate issues of social exclusion and marginalization to promote social protection programme</p> <p>5.5. Improve the CP planning and implementation through regular reviews / evaluations taking into account the evolving context in the country.</p>	<p>5.3.2. % of financial resources invest in children against the total ANDS expenditure <i>Baseline: n/a</i></p> <p>5.4.1. Proportion of vulnerable children receiving free external support <i>Baseline: n/a</i></p> <p>5.5.1 # of reviews conducted with a follow up action implemented <i>Baseline: monthly (programme), quarterly (KPIs), semi-annually (MYR), annually (EYR)</i></p> <p>5.5.2. IMEP implementation rate <i>Baseline:</i></p>	<p>UNICEF MYR &amp; EYR</p>		