



**UNDAF**

**United Nations Development  
Assistance Framework  
in  
Ethiopia**

**(2007 – 2011)**

**09 March 2006**  
**UN Country Team in Ethiopia**

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## **EXECUTIVE SUMMARY**

The UN Development Assistance Framework (UNDAF) is the common strategic framework for the operational activities of the UN system in Ethiopia. It provides a collective, coherent and integrated UN system response to national priorities and needs, which are included in Ethiopia's second national poverty reduction strategy paper, the Plan for Accelerated and Sustained Development to End Poverty (PASDEP) 2005/6-2009/10.

Ethiopia is one of seven priority countries selected by the Millennium Project, a special advisory body to the UN Secretary General on the Millennium Development Goals (MDGs), to prepare a scaled-up investment plan that would allow the country to meet the MDG targets. The Government of Ethiopia is preparing this plan, which incorporates the MDGs into most key policies and will provide for making significant investment, building capacity and creating new structures and systems. The PASDEP is aligned with the MDG time frame and the MDG investment plan. The convergence between Ethiopia, the UN system and other development partners around the MDGs and the PASDEP will provide the organizing principles for this UNDAF (2007-2011).

The foundations of this UNDAF are: the PASDEP, the Government's MDG Needs Assessment exercise; the experiences of the first poverty reduction strategy paper, titled Sustainable Development and Poverty Reduction Programme (SDPRP), and the first UNDAF cycle (2002-2006); and detailed consultations with Government and a range of stakeholders. Central to each country's UNDAF is agreement with that country's government on three to five priority strategic areas, selected from the challenges identified. The five areas selected by the UNCT in Ethiopia for development cooperation over the period of this UNDAF are designed to contribute to the Government of Ethiopia's primary objectives of achieving the PASDEP targets by 2010 and the MDGs by 2015. Although these five areas of UN comparative advantage do not cover all the inter-related MDGs, they aim to have strategic and catalytic impact on Ethiopia's development.

The five priority areas agreed between the Government of Ethiopia and the UNCT as the target areas for action in the UNDAF 2007-2011, together with their agreed outcomes, are:

### ***Humanitarian Response, Recovery and Food Security***

Outcome: By 2011, significantly strengthened capacities of the Government, communities and other relevant stakeholders to respond to situations that threaten the lives and well-being of a significant proportion of a population, which require rapid and appropriate action to ensure their survival, care, protection and recovery, while enhancing their resilience to shocks and leading to food security and sustainable livelihoods.

### ***Basic Social Services and Human Resources***

Outcome: By 2011, UN agencies will have significantly supported national efforts to achieve MDGs relating to improved and equitable access and utilization of decentralized social services, including those for health, nutrition, education, water, sanitation and hygiene, by developing capacities of both those responsible for service delivery, and those who demand and use such services, while giving special focus to the most vulnerable and marginalized groups.

### ***HIV/AIDS***

Outcome: By 2011, achieve substantial progress towards reducing the vulnerability to HIV infection, especially of women and girls, and alleviating the impact of the epidemic, with emphasis on underserved and affected population.

### ***Good Governance***

Outcome: By 2011, contribute to the achievement of Millennium Declaration principles through enhanced democratic empowerment and participation at the grassroots level through justice sector reform, civil service and civil society capacity building and promotion of decentralization at all levels, including upholding of human rights principles, transparency and accountability.

### ***Enhanced Economic Growth***

Outcome: By 2011, at national, regional, organizational and business levels, capacity strengthened and knowledge developed for increased incomes of the poor, through enhanced labour factor productivity and more intensive and widespread use of technology in at least one economic growth corridor, with potential interventions related to expansion and diversification in agriculture, industry and services.

Across these five themes are several cross-cutting issues: Gender, Good Governance, Population, HIV/AIDS, and Information and Communications Technology (ICT). Monitoring and evaluation is a key part of the task and will be closely related to the annual progress review of the PASDEP, sector reviews in, for instance, health and education, future MDG Needs Assessments and reports, and other monitoring mechanisms. In this way, UNDAF II aims to remain fully aligned with the priorities of the PASDEP and to work in partnership with Government throughout the cycle period and beyond.

## ACRONYMS AND DEFINITIONS

AAVP:	African AIDS Vaccine Programme
ABE:	Alternative Basic Education
ADB:	African Development Bank
ADLI:	Agricultural Development Led Industrialization
ANC:	Ante-Natal Care
ARRA:	Administration for Refugees and Returnees Affairs
ART:	Antiretroviral Therapy
ARV:	Antiretroviral
AU:	African Union
BCC:	Behavioural Change Communication
BoARD:	Bureau of Agricultural and Rural Development
BoE:	Bureau of Education
BoH:	Bureau of Health
BoLSA:	Bureau of Labour and Social Affairs
CBAS:	Capacity Building for Agricultural Services
CBO:	Community Based Organization
CBPS:	Capacity Building for Private Sector
CCA:	Common Country Assessment
CETU:	Confederation of Ethiopian Trade Unions
CHGA:	Commission on HIV/AIDS and Governance in Africa
CIDA:	Canadian International Development Agency
CP:	Country Programme
CQ:	Chloroquine
CSA:	Central Statistics Authority
CSO:	Civil Society Organization
CSRП:	Civil Service Reform Programme
DAG:	Development Assistance Group
DCI:	Develop Cooperation Ireland
DFID:	Department for International Development (UK)
DPPA:	Disaster Prevention and Preparedness Agency
EARD:	Ethiopian Agricultural and Rural Development
ECC:	Ethiopian Chamber of Commerce
EGC:	Economic Growth Corridor
ECSC:	Ethiopian Civil Service Office
EEF:	Ethiopian Employers Federation
EGRAP:	Ethiopian Groundwater Resources Assessment Programme
EHNRI:	Ethiopian Health and Nutrition Research Institute
EMAO:	Ethiopian Mine Action Office
EMOC:	Emergency Obstetric Care
ENGDA:	Ethiopian National Groundwater Database
EOS:	Enhanced Outreach Strategy
EPI:	Expanded Programme on Immunization
ESDP:	Education Sector Development Programme
ESTC:	Ethiopian Science and Technology Association
ESW:	Economic and Sector Work

ETA:	Ethiopian Teachers' Association
EU:	European Union
EW:	Early Warning
EWLA:	Ethiopian Women Lawyers Association
EWS:	Early Warning Systems
FEMSEDA:	Federal Medium and Small Enterprises Development Agency
FGM:	Female Genital Mutilation
FMoH:	Federal Ministry of Health
FSCB:	Food Security Coordination Bureau
FTCS:	Farmers Training Cooperative Services
GAVI:	Global Alliance for Vaccines and Immunization
GFATM:	Global Fund to Fight AIDS, Tuberculosis and Malaria
GDP:	Gross Domestic Product
GoE:	Government of Ethiopia
HAP:	Harmonization Action Plan
HAPCO:	HIV/AIDS Prevention and Control Office
HEW:	Health Extension Worker
HICE:	Household Income Consumption and Expenditure
HIV/AIDS:	Human Immunodeficiency Virus / Acquired Immune Deficiency Syndrome
HPN:	Health Population Nutrition
HRC:	Human Rights Commission
HRBAP:	Human Rights-Based Approach to Programming
HSDP:	Health Sector Development Programmes
HSEP :	Health Services Extension Programme
HTP:	Harmful Traditional Practices
IAEA	International Atomic Energy Agency
ICPD:	International Conference on Population and Development
ICT:	Information and Communication Technology
IDP:	Internally Displaced Person
ISDR:	International Strategy for Disaster Reduction
<i>Idir:</i>	An informal community or social support group
IEC:	Independent Electoral Commission
IGAD:	Inter-governmental Authority on Development
ILS:	International Labour Standards
IMCI:	Integrated Management of Childhood Illness
ISDR:	International Strategy for Disaster Reduction
ITN:	Insecticide-treated Nets
JICA:	Japan International Cooperation Agency
<i>Kebele:</i>	The smallest administrative unit in the formal Government system
<i>Mahiber:</i>	An interest Group eg. women's group, youth group
MCB:	The Ministry of Capacity Building
MD:	Millennium Declaration
MDG:	Millennium Development Goal
MDGNA:	Millennium Development Goal Needs Assessment
MDGR:	Millennium Development Goal Report
M&E:	Monitoring and Evaluation

MERET:	Managing Environmental Resources to Enable Transition to More Sustainable Livelihoods
MIDA:	Migration for Development of Africa
MoARD:	Ministry of Agricultural and Rural Development
MoCB:	Ministry of Capacity Building
MoFA:	Ministry of Foreign Affairs
MoFED:	Ministry of Finance and Economic Development
MoE:	Ministry of Education
MoH:	Ministry of Health
MoI:	Ministry of Infrastructure
MoJ:	Ministry of Justice
MoWR:	Ministry of Water Resources
MoLSA:	Ministry of Labour and Social Affairs
MoTI:	Ministry of Trade and Industry
MoYSC:	Ministry of Youth, Sport and Culture
MPS:	Making Pregnancy Safer
MP:	Member of Parliament
NBI:	Nile Basin Initiative
NCFS:	National Coalition for Food Security
NDT:	Non-Destructive Testing
NMSA:	National Meteorological Services Agency
NOP:	National Office of Population
NEBE:	National Electoral Board of Ethiopia
NEPAD:	New Partnership for Africa's Development
NGO:	Non-Governmental Organization
ODA:	Official Development Assistance
ORT:	Oral Rehydration Therapy
OVC:	Orphans and Vulnerable Children
PASDEP:	Plan for Accelerated and Sustained Development to End Poverty
PCDP:	Pastoralist Community Development Programme
PCI:	Pastoralist Communication Initiative
PHCC:	Primary Health Care Centre
PLWHA:	People Living with HIV/AIDS
PMTCT:	Prevention of Mother to Child Transmission
PRSC:	Poverty Reduction Support Credit
PSCAP:	Public Sector Capacity Building Programme
PSD:	Private Sector Development
PSD:	Project Support Document
PSNP:	Productive Safety Net Programme
PSRP:	Public Sector Reform Programme
REB:	Regional Education Bureau
Region:	An autonomous state; 9 Regions make up Ethiopia; sub-divided into <i>woreda</i>
REMSEDA:	Regional Medium and Small Enterprises Development Agency
RHB:	Regional Health Bureau
SDPRP:	Sustainable Development and Poverty Reduction Programme
SIDA:	Swedish International Development Cooperation Agency
SIT:	Sterile Insect Technique
SLM:	Sustainable Land Management

SME:	Small and Medium Enterprises
SP:	Sulfadoxine Pyrimethamine
STEP:	Southern Tsetse Eradication Project
TA:	Technical Assistance
TB:	Tuberculosis
TVET:	Training and Vocational Education Training
TWG:	Technical Working Group
UDCBO:	Urban Development Capacity Building Office
UN:	United Nations
UNCT:	United Nations Country Team
UNDAF:	United Nations Development Assistance Framework
UNGEI:	United Nations Girls' Education Initiative
UNTG:	United Nations Theme Group
UPE:	Universal Primary Education
USAID:	United States Agency for International Development
USD:	United States Dollar
UNTFHS:	United Nations Trust Fund for Human Security
VCT:	Voluntary Counselling and Testing
VCTS:	Voluntary Counselling and Testing Sites
VoT:	Victims of Trafficking
WASH:	Water and Sanitation Hygiene
WASHCO:	Water and Sanitation Hygiene Committees
WATSAN:	Water and Sanitation
WES:	Water and Environmental Sanitation
<i>Woreda:</i>	Second level administrative unit; approximate minimum of 100,000 person population; sub-divided into <i>kebele</i>
WTO:	World Trade Organization
WM:	Welfare Monitoring

## **MEMBERS OF THE UN COUNTRY TEAM IN ETHIOPIA**

### *Resident Agencies:*

ECA:	Economic Commission for Africa
FAO:	Food and Agriculture Organization
ILO:	International Labour Organization
ILRI:	International Livestock Research Institute
IMF:	International Monetary Fund
IOM:	International Organization for Migration
ITU:	International Telecommunication Union
OHCHR:	Office of the High Commissioner for Human Rights
UNAIDS:	Joint United Nation Programme on HIV/AIDS
UNDP:	United Nations Development Programme
UNEP:	United Nations Environment Programme
UNESCO:	United Nations Educational, Scientific and Cultural Organization
UNFPA:	United Nations Population Fund
UNFPA/CST:	United Nations Population Fund / Country Technical Services Team
UNHCR:	United Nations High Commissioner for Refugees
UNICEF:	United Nations Children's Fund
UNIDO:	United Nations Industrial Development Organization
UNLO:	United Nations Liaison Office
UNMEE:	United Nations Mission in Ethiopia and Eritrea
UNOCHA:	United Nations Office for the Coordination of Humanitarian Affairs
WB:	World Bank
WFP:	World Food Programme
WHO:	World Health Organization

### *Non-Resident Agencies:*

GEF:	Global Environment Facility
IAEA:	International Atomic Energy Agency
ICAO:	International Civil Aviation Organization
IFAD:	International Fund for Agricultural Development
IMO:	International Maritime Organization
UNCDF:	Capital Development Fund
UNCTAD:	United Nations Conference on Trade and Development
UNIFEM:	United Nations Development Fund for Women
UN-HABITAT:	United Nations Human Settlements Programme
UNITAR:	United Nations Institute for Training and Research
UNODC:	United Nations Office on Drugs and Crime
UNOPS:	United Nations Office for Project Services
UNSO:	United Nations Office to Combat Desertification and Drought
UNPA:	United Nations Postal Administration
UNU:	United Nations University
UPU:	Universal Postal Union
WIPO:	World Intellectual Property Organization
WMO:	World Meteorological Organization
WTO:	World Tourism Organization

## **UN RESIDENT AGENCIES SIGNATURE PAGE**

We, the United Nations Country Team (UNCT) in Ethiopia, while respecting each organization's mandate and competence, pledge our commitment to collaborative joint programmes and programming in order to foster cooperation and coordination among all of our Agencies, Funds and Programmes. This is towards enhancing the performance and impact of the UN system by embracing new synergies for a common United Nations' response to development challenges and priorities in Ethiopia.

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Signed on the 24th day of February 2006 in Addis Ababa, Ethiopia.

## UN NON-RESIDENT AGENCIES SIGNATURE PAGE

The following agencies have contributed to the preparation of this UNDAF and will also contribute to its implementation.

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*IFAD*

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*UN HABITAT*

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## INTRODUCTION

*"The urgency of achieving the Millennium Development Goals cannot be overstated. Despite progress in many areas, overall the world is falling short of what is needed, especially in the poorest countries. As the Millennium Project's report makes clear, our agenda is still achievable globally and in most or even all countries — but only if we break with business as usual and dramatically accelerate and scale up action until 2015, beginning over the next 12 months. Success will require sustained action across the entire decade between now and the deadline". (In Larger Freedom: Towards Development, Security and Human Rights for All by the UN Secretary General, May 2005, para. 31).*

The UN Development Assistance Framework (UNDAF) for Ethiopia for 2007-2011 comes at a critical time for Ethiopia and for the world. Nearly one third of the time to 2015, the agreed target date for achieving the Millennium Development Goals (MDGs), most assessments indicate a very mixed story - there has been progress, but many countries are at risk of not attaining many of the goals.

The Ethiopian Government's assessments indicate that, despite the good progress achieved, much remains to be done and work needs to be scaled-up dramatically in order to meet the goals. As the UN Secretary-General wrote (ibid. para. 34): "Countries need to adopt bold, goal-oriented policy frameworks for the next ten years, aimed at scaling-up investments to achieve at least the quantitative MDG targets. To that end, each developing country with extreme poverty should, by 2006, adopt and begin to implement a national development strategy bold enough to meet the MDG targets for 2015."

In 2004 Ethiopia joined a group of seven priority countries, selected by the Millennium Project, to draw up a scaled-up investment plan that would allow the country to meet the MDG targets. The process started with a comprehensive assessment of the country's progress towards each of the goals, gaps and constraints that have impeded their realization. Government is incorporating the MDGs into most key policies, moving away from "business as usual", making more significant investment across the board, building capacity and creating new structures and systems.

The Government has finalized *Ethiopia, the Millennium Development Goals Needs Assessment Synthesis Report*, which outlines the necessary investments to accelerate progress to meet the MDGs by 2015. The report summarizes the sectoral studies in education, health, water/sanitation, rural development, urban development, HIV/AIDS, gender, population and private sector/trade. It sets out the vision needed to reach the MDGs, alongside estimated resource requirements, processes and capacity-building and is embedded in a macro-economic framework

The second poverty reduction strategy paper, titled *Ethiopia, Building on Progress: Plan for Accelerated and Sustained Development to End Poverty 2005/6-2009/10* (PASDEP), is aligned with the MDG time-frame and builds on the MDGNA synthesis report. The UN and donor partners have been part of this process and the consensus achieved among all partners is a significant step forward.

The UNCT collaborated in depth with the Government, the Millennium Project and the Development Assistance Group (DAG) on the MDGNA and has decided that it would use it in replacement of a planned, UN-led Common Country Assessment (CCA), which was due to be

formulated in 2004. Ethiopia's MDGNA exercise was considered a unique opportunity for stakeholders, the UN, donors, international financial institutions and Government to work together as part of a broad, consultative process, which provides opportunities for dialogue and developing consensus and partnerships. It allowed the UNCT to be part of Government-led analytical work. Alignment with the national processes has enhanced all parties' ownership, the relevance of joint UN activities and the principles of harmonization and simplification, which are key to the UN reform agenda.

The convergence between Ethiopia, the UN system and the development partners around the MDGs and the PASDEP provides the organizing principle for this UNDAF (2007-2011). All partners agree that Ethiopia's human resource base, its people, is critical to all development. The five strategic areas selected by the UN for development cooperation over the period of this UNDAF are designed to contribute to the Government's primary objectives of achieving the targets of the PASDEP and the MDGs. The choice stemmed from consultation with the Government, a review of the outturns of UNDAF I and the first poverty reduction strategy paper, called *Sustainable Development and Poverty Reduction Programme (SDPRP)*, covering 2002-05, and the processes leading up to the MDGNA and the PASDEP. However, above all, it is based on an in-depth, joint review of the current situation in Ethiopia and the key development challenges to be tackled. Although these five areas of UN strategic focus do not cover all the inter-related MDGs, they aim to have strategic and catalytic impact on Ethiopia's development during the period up to 2015 by targeting the areas of greatest need and the areas where the UN system has comparative advantages.

### *1.i The UN Country Team in Ethiopia and UN Principles*

The UN Country Team is comprised of 23 agencies and members representing the specialized agencies, funds and programmes in Ethiopia, as well as 19 non-resident agencies. UNCT collaboration is guided by the Government's priorities, outlined in the SDPRP and the PASDEP, and is consolidated in the UNDAF under the overall umbrella of the Millennium Declaration and the MDGs.

UN operations in Ethiopia are wide, covering both humanitarian and development issues. They are reflected in agency functions and mandates, which cover social and economic development, governance, human rights and technical support to capacity-building, social services (such as education, health, HIV/AIDS, water and sanitation and population) and to management of natural or man-made disasters. The UNCT's involvement in these areas over the years has created a large core of expertise and comparative advantage in research, management, building capacity and support to service provision.

Recently, several reforms have been introduced to improve UN coordination, effectiveness and efficiency in supporting national goals and to reduce the transaction costs for Government. UN procedures are being simplified and harmonized, while building on the effectiveness and value-added that each agency brings as part of a diverse UN. Principle reforms have been the harmonization of Country Programme cycles and the introduction of the CCA and the UNDAF, including the UNDAF Results Matrix and the joint UNDAF review, reporting and evaluation as integral parts in preparing, implementing and evaluating country programmes of cooperation and country-level projects.

The UNCT in Ethiopia recognizes the importance of increased joint programmes and pooling resources to enhance its effectiveness and to ensure its combined resources are put to best use.

These measures are intended to maximize the UNCT's effectiveness, reduce transaction costs for Government, donors, and the UN, and strengthen cooperation between UN agencies and organizations and Government. They also seek to respond to the concerns of donors and programme countries to enhance the UN contribution in the current context of international development assistance, with a focus on self-reliance and capacity building. In line with these reforms, the UNCT will continue to enhance UN agencies' good governance. This will include providing improved services to Government, including continued strengthening of internal transparency and accountability, in order to enhance their effectiveness in implementing the UNDAF.

The UN Secretary General's reform programme calls on the UN system to mainstream human rights into all its activities and programmes through adopting the human rights-based approach to programming (HRBAP). Development cooperation and humanitarian operations should further the realization of human rights, mainly by strengthening the capacity of "duty bearers" to meet their obligations and of "rights holders" to claim their rights by promoting:

- *"Equality and non-discrimination* among all individuals in the enjoyment of their human rights, with a special focus on the disadvantaged and underserved members of society
- *Participation and inclusion* of every person and all sectors of civil society in the enjoyment of civil, cultural and social development in which human rights and fundamental freedoms can be realized
- *Accountability and the rule of law* by supporting the capacity of States and other duty bearers to develop laws, regulations, policies and budgets that comply with agreed standards and goals and clearly stipulate the reciprocal responsibilities of a State and its citizens, as well avenues for redress"

(Source: "Action 2: Strengthening UN Support for the Promotion and Protection of Human Rights Worldwide", published by the UN)

The UNCT adopted the HRBAP when it was making the initial analysis of potential UNDAF priority areas, in line with the reform programme. The team agreed that participatory planning and implementation, which are at the core of the HRBAP, would be the guiding principles throughout the UNDAF cycle.

From the start of preparations for the UNDAF, the UNCT members also agreed that they would emphasize capacity-building activities including training, technical assistance, diagnostic work and support to sectoral reviews and assessments as part of the Government's monitoring and evaluation initiatives. This would support the Government in delivering, managing and reporting on the increased Official Development Assistance.

### *1.ii The current situation in Ethiopia*

The Government's battle against poverty started well before the SDPRP, but poverty is deep-rooted. Remarkable efforts have been made and significant results achieved towards universal education, gender equality and empowerment of women, reducing child mortality and improving maternal health, fighting HIV/AIDS, malaria and other diseases. According to International Monetary Fund figures cited in the MDGNA, Ethiopia is second only to Mozambique in the proportion of spending which is directed as "pro-poor expenditure", with nearly 60 per cent of the total spending directed in this way.

Despite all the efforts, the introduction to the PASDEP notes<sup>1</sup>: “The challenges facing Ethiopia are daunting: the dynamics of population growth, very low productivity, structural bottlenecks, dependence on unreliable rainfall, and being land-locked combine to pose challenges almost unequalled anywhere in the world. Government efforts to accelerate progress as rapidly as possible – including a big push on education, expanding infrastructure, opening the economy, building institutions, and devolving administration.

“The different mechanisms hindering Ethiopia’s progress are not independent, but rather interact with each other and constitute what can be seen as “poverty traps” – self-reinforcing mechanisms that prevent the country from breaking out from a combination of low income levels and low productivity growth.

“Income poverty is widespread and deep. Some 31 million people live below a poverty line equivalent to 45 US cents per day<sup>2</sup>; and between 6 and 13 million people are at risk of starvation each year. There is also extreme vulnerability, with consumption rising and falling dramatically from year to year as the result of drought, ill health, or other family shocks. As a result, many families who are not currently poor are at constant risk of falling into extreme poverty, and can never accumulate enough assets to break out of poverty.”

Typical poverty traps identified in the MDGNA<sup>3</sup> include: i) the interaction of population pressures (average land holdings fell from 0.5 hectares per person in the 1960s to 0.11 hectares in 1999) on environmental fragility which make traditional farming practices unsustainable and make households depend on increasingly small and unproductive plots of land, subject to unpredictable rainfall and further degrading the environment through deforestation and moving into marginal areas; ii) low investment in human capital linked to poverty and the time needed for gathering wood or water makes the cost of sending children to school prohibitive; iii) malnutrition and other diseases also hinder households’ earning potential; and iv) low levels of infrastructure mean underdeveloped markets, high transaction costs and coordination failures, keeping much of the economy largely oriented to subsistence and, without infrastructure, offering too little return to attract private investment.

### *1.iii Government Priorities*

The Government has determined that the primary development goal is to reduce poverty and that economic growth is the principle, but not the only, means to achieve this. Its development strategy is to promote rapid, broad-based and equitable growth by focusing on rural development and physical and human capital, and by deepening the devolution process to empower the people and expand the choices and control they have over their lives.

The main thrust of the SDPRP was the Agricultural Development Led Industrialization (ADLI) strategy, as the multiplier effect of agriculture is found to be higher than in other sectors. Agriculture provides approximately 47 per cent of national output, employs around 85

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<sup>1</sup> Ministry of Finance and Economic Development, “Ethiopia, Building on Progress: Plan for Accelerated and Sustained Development to End Poverty”, Addis Ababa, 2006.

<sup>2</sup> The PASDEP figure is based on the 2000 poverty analysis, of 44% headcount ratio

<sup>3</sup> Ministry of Finance and Economic Development, “Ethiopia: The Millennium Development Goals Needs Assessment Synthesis Report”, Addis Ababa, 2005.

per cent of the working population, and contributes 90 per cent of total exports. The focus on agricultural growth is supported by other policy developments including the launch of the New Coalition for Food Security, focused on addressing the immediate needs of over 5 million people who are chronically food insecure, with the aim that they attain food security within five years. The Coalition aims to sustain overall food security for another 10 million people. Other pillars of the SDPRP were justice system and civil service reform, decentralization and empowerment, and building capacity in public and private sectors.

In 2005, the GoE initiated work on the PASDEP by building on its experiences from the first programme and other frameworks, including the MDGNA, sectoral studies and the MDGNA synthesis report including a summarized ten-year investment plan (2005-2015). Sectoral plans derived from the SDPRP include education and health plans, the National Strategic Framework for the Response to HIV/AIDS, and frameworks addressing major sectors. These programmes are being aligned with the timeframe of the PASDEP, including alignment between the annual cycle of sector reviews and the PASDEP annual progress report (APR).

The PASDEP carries forward important SDPRP strategic directions related to human development, rural development, food security, and capacity-building. It brings new directions including a major focus on growth including emphasis on greater commercialization of agriculture and the private sector, and linkages between them, and increased efforts to achieve the MDGs. However, its second main thrust includes tackling the non-income aspects of poverty and emerging challenges, some of which have already been outlined in the annual progress reports of the SDPRP: human resource development; the growth agenda (infrastructure development, rural-urban linkages, private sector development); tourism; National Plan of Action for Women; and employment through developing small and medium enterprises.

Governance, human rights, openness and consultation are at the heart of the PASDEP's capacity-building and decentralization agenda. They are part of an enabling political, economic and social environment to generate and sustain the level of growth required to tackle the widespread poverty. The capacity-building programme is to cut across many sectors, notably small-holder agriculture, the private and public sectors, and the justice sector. It encompasses a range of inter-related interventions, including developing human resources, building and strengthening institutions, and establishing effective working practices. Decentralization and empowerment is the third building block of the strategy for poverty reduction. These linkages underline the significance of conducting economic and political transformations simultaneously. Democratic decentralization depends on strengthening the capacity of communities and civil society groups to coordinate more effectively to take advantage of the opportunities that decentralization offers for speaking out.

In summary, the PASDEP concentrates<sup>4</sup> on eight areas: i) a massive push to increase growth, ii) a geographically-differentiated strategy, iii) addressing the population challenge, iv) unleashing the potential of Ethiopia's women, v) strengthening the infrastructure backbone, vi) managing risk and volatility, vii) scaling-up to reach the MDGs and viii) creating jobs.

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<sup>4</sup> Pp 11-16.

#### *1.iv Role and Contribution of Development Partners*

Ethiopia has created a common platform with its development partners for accelerating growth and fighting poverty by placing the Millennium Declaration (MD), and the ensuing MDGs, at the core of its development agenda. Linking the PASDEP to meeting the MDGs has reinvigorated the partnership and mutual accountability between the Government, national stakeholders and the international donor community. This ties in with the UN reform process, in which bilateral donors, the private sector and civil society organizations (CSOs) have crucial roles in working with the UN in support of national development priorities. CSOs, the private sector, independent research and policy institutes, professional associations, trade unions and women's groups formally participated in the SDPRP processes and this led to an improved and broad-based programme. The formulation of the PASDEP involved both federal and regional consultations.

The DAG was established in 2001 in response to Government's request for coordinated donor support to the SDPRP process. It was key in aligning development assistance around the SDPRP and the MDGs. It is co-chaired by UNDP and the World Bank and comprises multilateral and bilateral organizations. A joint Government-DAG High Level Forum has met every three months for policy dialogue around the SDPRP and harmonization, leading to enhanced aid effectiveness and increased volumes. The DAG has been key in promoting participatory approaches to development, decentralization and empowerment, as well as enhanced local ownership. There are already 14 DAG Technical Working Groups (TWGs) covering a range of issues including monitoring and evaluation, gender equality and a joint GoE-DAG Harmonization Task Force. A DAG pooled fund was established which focuses on specific areas of support including the participatory consultation process, analytical work, institutional strengthening and coordination.

Ethiopia has been an international pilot country for harmonization since 2002 and its *Harmonization Action Plan* (HAP) was officially launched in January 2005. Priority areas in the HAP include: harmonizing donor procurement procedures and aligning them around a reformed Government system; harmonizing monitoring and evaluation and aligning them with national SDPRP/PASDEP monitoring and evaluation systems.

#### *1.v UNDAF II Preparations*

A UNCT retreat was held in late 2004 to discuss the potential areas for future UN collaboration, taking into consideration the Government's priorities, the UN's comparative advantages and the dynamic environment in which the UNCT works. The process of selecting UNDAF priorities involved dialogue among UN agencies, consultations with the GoE, development partners, and other stakeholders, including civil society organizations in the country. Initially five broad areas were proposed for further consultation with Government as tentative areas for future collaboration, namely: HIV/AIDS; MDGs Monitoring and Evaluation; Humanitarian Response, Recovery and Food Security; Enhanced Economic Growth; and Promotion of Good Governance and Social Services in the context of decentralization. The latter was later divided into two themes as part of the further streamlining and prioritization of strategic areas of the UNDAF. Furthermore, cross-cutting issues identified were Gender, Good Governance, Population, HIV/AIDS and ICT.

The original areas were redefined during the preparation process and renamed into the five priority areas that form the core of this document.

Theme groups were established to elaborate on the selected themes under the guidance of the UNCT and the process was informed by the MDGNA sector reports (Health; Education; Water & Sanitation; HIV/AIDS; Gender; Population; Rural Development; Urban Development; Private Sector) and the preparations for the MDGNA Synthesis Report, the PASDEP and other strategic documents.

## **SECTION 2 STRATEGIC AREAS OF COOPERATION IN UNDAF II (2007-2011)**

### **2.i Strategic Areas of Cooperation**

As a result of the dynamic environment in which the UN system implemented the first UNDAF, the UNCT's comparative advantages have become more evident through successful coordination activities and development programmes in support of achieving the MDGs, particularly in the areas of: humanitarian coordination, social sectors, HIV/AIDS, and governance. The UNCT intends to build on the experiences gained during the first UNDAF, clearly prioritize areas in which the UN has a recognized comparative advantage, make explicit linkages to national processes and programmes, and explore opportunities for collaboration with other partners to ensure that the UNCT activities are not implemented in a vacuum, but that they support national priorities and the overall harmonization agenda.

The objective of the second UNDAF is to consolidate and build on strategic partnerships and activities within the UNCT in order to support the efforts of the Government to attain the MDGs and the goal of poverty reduction. Consistent with the goals of the UNDAF and UN reform in general, this UNDAF focuses on five strategic areas of cooperation in which the UN system has clear collective comparative advantage and where its assistance can achieve sufficient critical mass to attain desired results. In addition, some specialized agencies may carry out highly specific activities in areas other than the five priorities.

#### **2.i.1 Humanitarian Response, Recovery and Food Security**

**UNDAF outcome by the end of the programme cycle:**

By 2011, significantly strengthened capacities of the Government, communities and other relevant stakeholders to respond to situations that threaten the lives and well-being of a significant proportion of a population, which require rapid and appropriate action to ensure their survival, care, protection and recovery, while enhancing their resilience to shocks and leading to food security and sustainable livelihoods.

In Ethiopia and other countries, where the natural environment is a means of livelihood, food security should be achieved through devising mechanisms to strengthen the resilience of rural communities and their agricultural production systems, as well as their ability to withstand environmental shocks and associated vulnerabilities. More than 80 per cent of the population live in rural areas and rural development is at the heart of development strategies. Resolving the challenge of food insecurity in Ethiopia should be approached carefully, taking into account both the constraints and the opportunities that characterize the diverse agricultural production system.

The 2002/03 humanitarian crisis in drought-prone and chronically food-insecure areas of Ethiopia prompted the Government and its development partners to do business differently. It put humanitarian coordination at the top of the agenda in Ethiopia and the successful response resulted in both the Government and its partners recognizing the UN's comparative advantage in this area. Transition and long-term solutions were developed as an alternative to the traditional emergency response, where an emergency can be defined as addressing acute impacts on the livelihoods of people resulting from a natural or man-made disaster or calamity through a 12-month emergency appeal or flash appeal. Longer-term development relates to

activities that offer a sustained and positive change to the lives and livelihoods of poor and destitute people, with some five million people chronically food insecure even during a normal harvest, while 45 per cent of the country can be affected by drought, according to the MDGNA synthesis report.<sup>5</sup> Interventions to reverse or prevent environmental degradation are needed in 40 per cent of Ethiopia and meeting minimum needs for calories by 2015 requires more than doubling the 2004 food production. The PASDEP recognizes the need for enhancing vulnerable populations' resilience to adverse climatic and health-related shocks through a range of measures aimed at improving and diversifying rural livelihoods, including those in the pastoral areas where some 10 million people live.

Country Programme Outcomes include supporting the full development and implementation of policies, strategies and coordination mechanisms for food and nutritional security and sustainable livelihoods and protecting vulnerable populations. This includes joint programming on the status of natural resources and livelihoods base which would lead to the selection of appropriate programmes and stronger coordination structures between Government, UN agencies and other stakeholders. Communities will be more involved, through social mobilization and community-level participation, particularly among women, in better management of their natural resources such as water-sheds, irrigation, agro-biodiversity and sustainable management of fuel and fodder.

In response to the need for longer-term solutions to humanitarian crises, the UN has used its comparative advantage in coordination to provide significant support in formulating the New Coalition for Food Security strategy. The coalition aims to bring about food security and access to health care for 5 million chronically food-insecure people, while at the same time improving and sustaining the overall food security of an additional 10 million people. The UN has maintained strong support for implementing the different components of the strategy, such as the Productive Safety Nets Programme. Moreover, by facilitating lessons learned from successful joint UN programmes, such as Managing Environmental Resources to Enable Transition to More Sustainable Livelihoods (MERET), the UN has successfully contributed to improved food security through soil and water conservation, wood and community forest plantation schemes, small-scale rural infrastructure, water harvesting and credit. Initiatives such as MERET will be scaled-up in the second UNDAF to strengthen the food security and long-term coping mechanisms of communities in rural Ethiopia.

UNDAF 2007-2011 will see a significant increase in capacity to deliver and provide access to essential commodities and services in emergency situations and cases of food, nutrition and livelihood insecurity. At the same time it will strengthen direct linkages between humanitarian and longer-term development initiatives. This includes capacity support at regional and *woreda* levels. The UN will continue to support approaches that move away from addressing chronic and recurrent vulnerabilities using emergency approaches, towards more predictable and sustainable strategies and exit strategies from reliance on emergency assistance. The UN will support multi-annual funding strategies to address acute and recurrent needs for things other than food among food-insecure and vulnerable populations, linking these strategies to longer-term development programmes as a complement to Productive Safety Net Programme. In the future, emergency appeals will focus on addressing acute needs during emergency situations to save lives and protect livelihoods.

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<sup>5</sup> MDGNA Synthesis Report, p 39

Moreover, there will be better multi-sectoral response, including support to diversified and better-protected livelihoods for pastoralists and agro-pastoralists in emerging regions. Food aid is critical in a chronically food-insecure country, as it contributes to saving lives in emergency situations and building assets when it is used in a context of development. However, the effectiveness of food aid in general and its contribution to improved livelihoods in particular will be substantially improved if complementary non-food resources are given greater emphasis. The UN has been pivotal in advocating this complementary approach in emergencies. One of the most successful initiatives in ensuring improved child survival and minimizing malnutrition and its long-term effects has been the Joint Enhanced Outreach Strategy/Child Survival Initiative (EOS/CSI). The EOS/CSI is unique in its fusion of food, health and education interventions as it acknowledges the multiplicity of variants contributing to malnutrition. In addition to addressing acute health and nutrition problems, the EOS/CSI also collects valuable data, which will eventually provide the Government with time-series data on the nutritional status of children, and pregnant and lactating mothers. This should significantly improve nutritional surveillance, policy and practices. The successful implementation of the EOS/CSI programme will be expanded to reach 90 per cent of children, pregnant and lactating mothers in chronically food-insecure regions during the next UNDAF implementation phase.

Other successful initiatives, which will inform the 2007-2011 UNDAF, include the recent immunization campaigns, which have targeted 20 million children throughout Ethiopia, malaria roll-out programmes, and the comprehensive school health programme, all of which have improved the health status of school children and communities. Current outputs include protection and surveillance against epidemics, ensuring educational access for 70 per cent of children in emergencies, and enhanced livelihoods for resettled populations through supporting regional governments to deliver services. The UNDAF's two-track approach will combine tackling some root causes of vulnerability and developing a transition framework, and supporting a solid system of contingency planning and mechanisms to accelerate rapidly key emergency interventions around humanitarian assistance and protection when the need arises. The UNCT will seek to enhance such non-food interventions and frame them in a multi-annual strategy and link them to long-term programmes with relevant ministries. In working with the Government to implement strategies to mitigate impacts of recurrent drought and other shocks, the UNCT will pay close attention to cross-border dimensions of these shocks and will attempt to coordinate with partners in neighbouring countries to address cross-border issues. The UNCT will also continue to liaise closely with the UN Mission in Ethiopia and Eritrea on implementing the demarcation of the border.

Other priorities include better information, advocacy and communication systems such as enhancing the Government's knowledge management in this area and improved assessment of disaster risks.

### **2.i.2 Basic Social Services and Human Resources**

#### **UNDAF outcome by the end of the programme cycle:**

By 2011, UN agencies will have significantly supported national efforts to achieve MDGs relating to improved and equitable access and utilization of decentralized social services, including those for health, nutrition, education, water, sanitation and hygiene, by developing capacities of both those responsible for service delivery, and those who demand and use such services, while giving special focus to the most vulnerable and underserved groups.

Ethiopia must considerably accelerate development efforts in all sectors, supported by substantial additional investments, to reach the MDGs by 2015. The Government-led MDGNA exercise showed that the needs are particularly large across all the social service sectors with emphasis on health and nutrition, basic education and water and environmental sanitation (WES).

In all three sectors, considerable efforts have been made to establish appropriate development and investment plans that will achieve the 2015 MDG targets and enable Ethiopia to provide essential social services on a sustainable basis for all its citizens by 2020-2025. The start-up is successful and the experience is promising to date in implementing these social sector development and investment plans.

The challenge is how to scale these plans up rapidly and resource them in the context of decentralization, in particular developing and strengthening capacity at *woreda* and sub-*woreda* levels for effective deployment, support, and supervision of all the new health, nutrition, water, sanitation, and education staff required.

The UN Development Agencies in Ethiopia have been closely involved in supporting the Government, both in undertaking the 2004 MDGNA and in formulating the development and investment plans in health and nutrition, WES, and basic education. They have also been closely involved in supporting the implementation of a wide range of programmes, projects and activities, which form critical elements of these sector development plans. The UNCT has an extensive international framework to secure financial, material, and human resources, when required, to support the rapid scaling-up of social services in Ethiopia. They also have multi-sector capacity and can ensure fully critical, inter-sectoral linkages among the three priority social-service sectors and to other critical issues such as population, gender, governance, HIV/AIDS, and emergency response.

### *Health and Nutrition*

The UNCT has a good record of supporting the Government's efforts to improve health and nutrition, and the 2004 MDG Health Needs Assessment provides a comprehensive analysis of the joint efforts to date and the challenges ahead. It places special emphasis on reducing infant and child mortality and maternal mortality and morbidity, as well as covering the health service aspects of HIV/AIDS prevention and control. Explicit calculations have been made to define how each additional level of investment in the health sector can have maximum impact in terms of child and maternal mortality and morbidity reduction.

The core of investment will focus on strengthening and expanding national health delivery systems for improved access to and utilization of quality services. Under the lead of the Federal Ministry of Health (FMOH), UNCT members and other key partners will promote the Health Services Extension Programme (HSEP) and provide necessary support to the respective *woreda* health offices and strengthen the capacity of the health centres and the health extension workers. This entails training and deploying some 35,000 new health extension workers, ensuring they will be able to provide the services required, and procuring and distributing

essential medical equipment and supplies such as vaccines, essential drugs, contraceptives and antiretroviral drugs (ARVs). The Ministry of Health, with support from UN agencies, is developing a master plan and a plan for Human Resources for Health for the large number of new health professionals required.

The plan will target communicable diseases (such as malaria, TB and meningococcal meningitis) through improved access and use of preventative, promotion, rehabilitation and curative services and better preparedness for epidemics in emergencies. UN will support FMOH to create better access to and use of quality referral services at health centres and hospitals, better control of immunizable diseases, essential laboratory services and base-line surveys. The HRBAP supports more household and community awareness of rights with regard to availability and use of health services, as well as community-based initiatives and health education for proactive prevention by communities and support to community health prevention and care centres. In line with the emphasis given in the PASDEP to population issues, there will be links to accelerated reproductive health care programmes linked to HIV prevention and handled in a gender-sensitive and integrated manner, to youth-friendly health services and to emergency and humanitarian operations. Nutrition is a critical MDG target and the health sector must play its role in ensuring that nutritional health is coordinated with food care. To that end, the UNCT and other partners are assisting the Government in formulating a National Nutrition Strategy.

Under the leadership of FMOH, during the UNDAF cycle, the UNCT members will continue working with each other, the Government and bilateral and CSO partners through well-organized consultative forums, as well as through an annual review and planning process. These mechanisms are now extended to regional level as part of the harmonization process.

### *Education*

The basic education system is already expanding rapidly, but there is still a long way to go to provide over 20 million primary-school children with eight years of quality education and to ensure that girls benefit equally as boys from education. Many bilateral agencies are stepping in with significantly increased resources for building classrooms, training teachers and providing textbooks. Basic education will continue to be prioritized, particularly supporting national efforts to address girls' education and eliminate gender disparity for Universal Primary Education by 2015. Relevant UN agencies are defining their complementary roles in supporting the Ministry of Education, the regions and the *woredas* to maintain and improve quality in line with the Education Sector Development Plan III as education expands. This will be through strengthening the already initiated 'cluster school' approach through which clusters of 5-8 primary schools will assist one another in pedagogic reform, sharing resources and organizing parent-teacher cooperation. Teacher development, school feeding and basic and reproductive health and hygiene teaching will be supported. Child-focused UNCT members and CSOs will assist a rapid scaling-up of Alternative Basic Education (ABE) to ensure that over-age school children, and especially girls, will not miss the opportunity to gain an education, as the formal systems focus more on children starting their primary education at the appropriate age of 7 years. ABE is also an important strategy to reach school-age children under difficult circumstances and children in communities of pastoralists or other remote, inaccessible and sparsely populated areas where there are no formal schools. UNCT members will also concentrate on overall education management and planning, including transitions

from primary to secondary, and eventually to university levels, and the promotion of IT-based education innovations.

### *Water and Sanitation*

Major new investments are being made in support of access to and use of safe water, and strengthening environmental sanitation and hygiene services. The World Bank and the African Development Bank are providing significant new resources as the bulk of support to the Government's overall investment and to enhancing public-private partnership in water developments. Relevant UN agencies are scaling-up support, including training water engineers, shallow-well drilling, sanitation and hygiene education. They aim to contribute significantly to achieving PASDEP targets for coverage increases in clean water and sanitation. The team is defining how to coordinate the three major inputs and other support so they complement each other, including water quality control and sanitation and hygiene education, WES in primary schools and health centres, and support to underserved and drought-prone communities, including community participation. There will be support to a national groundwater database and helping Ethiopia be certified free of Guinea Worm.

### *Supporting Capacity-Building*

Meeting the targets through scaled-up health, nutrition, water and sanitation and basic education social services, with links to agriculture development, HIV/AIDS prevention and control, gender, child protection and population activities, will mean over 300,000 new extension workers, supervisors and teachers during the forthcoming five years. The UNCT believes that it can provide substantial and very critical support to the Government in this momentous effort. One of the elements that would make this feasible is to expand the already initiated scheme of National United Nations Volunteers, who could be grouped into inter-sectoral "capacity development and support teams". These teams would ensure that essential supplies and equipment, as well as continued on-the-job training, are provided to all new extension staff and they would help the staff to provide the essential services and duties effectively and as expected. They could also strengthen capacities of CBOs, including *idirs* and youth organizations. This will be closely linked and integrated into the PSCAP programme to ensure harmonized and coherent support for building capacity in the context of the Government's decentralization process.

The UNCT will continue to support Government as it develops, enforces and implements relevant policies to create an enabling environment for delivering social services. It will also support Government's efforts to strengthen social mobilization through 'participatory planning' and through social communication programmes, in order to support communities to engage fully in and claim their right to access essential social services. These efforts, on behalf of the UN Agencies and the World Bank, will be well integrated and linked to the appropriate components under the UNDAF Good Governance thematic area.

### **2.i.3 HIV/AIDS**

#### **UNDAF outcome by the end of the programme cycle:**

By 2011, achieve substantial progress towards reducing the vulnerability to HIV infection, especially of women and girls, and alleviating the impact of the epidemic, with emphasis on underserved and affected population.

The Government of Ethiopia has been addressing the issues of HIV/AIDS prevention and control for two decades. The response to HIV/AIDS featured as a priority area for action within the SDPRP under a Strategic Framework for the National Response to HIV/AIDS 2001-2005, which aimed to reduce the level of HIV transmission by 25 per cent in five years.

In January 2005, the Strategic Plan for Intensifying Multi-Sectoral HIV/AIDS Response 2004-2008 (SPM) was launched, along with the Free Anti-Retroviral Treatment Programme and other steps important for the plan's strategic implementation. The SPM constitutes a key element of the PASDEP and will be central in the UNDAF.

As a result of these targeted efforts, progress has been achieved in response to the HIV/AIDS pandemic in Ethiopia. There is strong political commitment from the Government, management of HIV/AIDS at workplaces is improving, media coverage on HIV/AIDS has increased, HIV/AIDS mainstreaming has been effective in some sectors, and the private sector and civil society are slightly more involved. Still, given the size of the population and the scale of the pandemic, it will take a number of years to see noticeable and sustainable decline in HIV prevalence and incidence.

The UN system has been supporting Ethiopia in its efforts to strengthen and expand its response to the HIV/AIDS epidemic through individual agencies' programmes and through joint initiatives coordinated by the UN Theme Group on HIV/AIDS. The UN's 2004 Implementation Support Plan (ISP) is based on the analysis of the HIV/AIDS situation and of the response to the epidemic in Ethiopia to date. It takes into consideration the comparative advantages of the UN system and the experience of current UN assistance in strengthening the country's response to HIV/AIDS. The ISP has been instrumental in harmonizing UN support. Three priority areas form the core of the ISP: (1) advocacy at national level; (2) capacity building in *woredas*; and (3) UN learning. The current UNDAF will address these priorities on an increased scale and in greater depth, based around support for the SPM.

UN advocacy aims to create and enhance a supportive environment for the HIV/AIDS response by ensuring that policy-makers and key opinion leaders at the national level stay informed on the epidemic, and make appropriate and timely decisions. Efforts will focus on strengthening leadership and political commitment at all levels to combat the epidemic and to address its underlying and root causes effectively, as well as its gender and age dimensions. The UN system will continue advocating the mainstreaming of HIV/AIDS into all core activities of government institutions, including sectoral plans and budgets. Special attention will be paid to creating an enabling environment, for instance through reviewing laws and policies relating to HIV/AIDS. A key output will be the empowerment of communities, schools and vulnerable populations to take a larger part in planning and implementing responses.

Throughout the UNDAF cycle, the UN system will carry out these advocacy activities and provide technical support at the federal level and in all 11 regions of the country, including supporting the mainstreaming of HIV/AIDS in core activities and implementing Three Ones. Comprehensive UN support to the *woreda*-level HIV/AIDS responses, including service delivery, will be provided. A pooled fund will be established constituting 5 per cent of the UN

resources available for the HIV/AIDS component of UNDAF and this will ensure that emerging problems and capacity gaps in the non-focus regions are also addressed in a timely and effective manner. The UN system will also assist the Government in achieving mobilization targets for resources, including finances, as determined through the MDGNA.

Support to capacity-building efforts at all levels across sectors in government institutions, civil society organizations, the private sector and communities will complement advocacy. There will also be support to communities and vulnerable populations to plan, implement and monitor their own responses to HIV/AIDS. Strengthening of capacity will facilitate expanded action, resulting in more HIV/AIDS protection and prevention including policies, capacity-building programmes and rapid interventions in emergencies. There will be more and better treatment (including Antiretroviral Therapy), care and support, especially at *woreda* and sub-*woreda* levels including regional (technical) support teams to help regions and *woredas* in planning and implementing comprehensive, multi-sectoral responses. In this way more people will enjoy more effective, higher quality HIV/AIDS protection, prevention, treatment, care and support, reducing vulnerabilities and alleviating the impact.

#### **2.i.4 Good Governance**

*“However well crafted on paper, investment strategies to achieve the MDGs will not work in practice unless supported by States with transparent, accountable systems of governance, grounded in the rule of law, encompassing civil and political as well as economic and social rights, and underpinned by accountable and efficient public administration. Many of the poorest countries will need major capacity-building investments to put in place and maintain the necessary infrastructure and to train and employ qualified personnel. But without good governance, strong institutions and a clear commitment to rooting out corruption and mismanagement wherever it is found, broader progress will prove elusive.”*  
(In *Larger Freedom: Towards Development, Security and Human Rights for All* by the UN Secretary General, May 2005, para. 36).

#### **UNDAF outcome by the end of the programme cycle:**

By 2011, contribute to the achievement of Millennium Declaration principles through enhanced democratic empowerment and participation at the grassroots level through justice sector reform, civil service and civil society capacity building and promotion of decentralization at all levels, including upholding of human rights principles, transparency and accountability.

Good governance creates the enabling environment to improve service delivery, promote justice and reduce poverty. The UNCT adopted these concepts in its approach to both humanitarian and development activities throughout the implementation of the first UNDAF and in preparations of UNDAF 2007-2011. The UN supports the Government’s priorities and good governance has increasingly become a central part of the development dialogue. The SDPRP placed good governance at the core of the country’s poverty reduction agenda and makes it clear that an enabling political, economic and social environment is necessary to generate and sustain the level of growth required to successfully tackle widespread poverty.

The PASDEP gives high priority to governance, human rights, openness and consultation and brings the principles of the MD and MDGs explicitly into Ethiopia's development planning.

UNCT support has targeted improving performance and strengthening of Government institutions, as well as building capacity within the UN system itself. The UN has supported a broad-based campaign by the Government to entrench good governance systems and practices as integral and essential components of the Government's strategy to tackle endemic poverty. Support has been provided to the Public Sector Reform Programme throughout the previous UNDAF cycle, in particular in provision of technical assistance and training for civil service reform, and support to decentralization and strengthened capacity in the four emerging regions. Several UN agencies have offered support to the creation and establishment of the National Human Rights Commissioner, as well as training Government and civil society on human rights.

New opportunities have presented themselves with the recent 2005 election, in which the people called for increased political pluralism. The UN has a comparative advantage as a neutral actor in the promotion of consensus-building among the parties, building capacity and strengthening institutions, as well as promoting exposure to various multiparty experiences from other African countries.

In this UNDAF cycle, the UNCT plans to emphasize capacity-building initiatives as part of its support to Government across the sectors and especially in the area of governance. The UNCT will seek to complement what the Government and other international and bilateral partners are doing, and to continue its support to Ethiopia's priority of good governance. Improved access to and delivery of justice, in particular for the poor, vulnerable and underserved, will result from strengthening the independence of the judiciary, reforming legal education, preventing corruption and boosting capacity of law enforcement agencies. There will be support and institutional strengthening for Parliament and electoral bodies to empower them to integrate the priorities of the people, especially vulnerable and underserved groups. UNDAF will include wide support to Government efforts to promote and protect human rights and empower civil society with special emphasis on community-based organizations and vulnerable groups, including women and children. National human rights organizations (such as the Human Rights Commissioner, Ombudsman and Ombudsman for Children) will be supported, human rights education stepped up, national legislation harmonized with international treaties, and civil society, especially women, supported to protect and promote their rights, including in elected bodies. Support for decentralization and devolution of power will lead to more effective response to community-driven needs and better and more equitable access to quality public services. The fifth area includes support for diverse pluralistic media through building capacity of national media institutions, improving coverage and helping media to foster communication for social change and advocate the MDGs. Finally, the UNCT will also seek to mainstream the Millennium Declaration and the Millennium Development Goals into all the its activities.

### **2.i.5 *Enhanced Economic Growth***

**UNDAF outcome by the end of the programme cycle:**

By 2011, at national, regional, organizational and business levels, capacity strengthened and knowledge developed for increased incomes of the poor, through enhanced labour factor productivity and more intensive and widespread use of technology in at least one economic growth corridor, with potential interventions related to expansion and diversification in agriculture, industry and services.

The UNDAF economic growth agenda is tailored to the PASDEP as this is Ethiopia's primary vehicle for reducing poverty in the coming five-year period. The PASDEP focuses on growth, with a particular emphasis on greater commercialization of agriculture and developing the private sector. It continues to emphasize the Agricultural Development Led Industrialization (ADLI) strategy, which sees developing small-holder agriculture as critical to transforming Ethiopia's agrarian economy into a modern one. The PASDEP also emphasizes the need to diversify growth, including through the private sector. Increased incomes of poor households will spark demand for industrial goods and therefore drive the development of the manufacturing and service sectors and exports, tourism and other sectors can also support growth. ADLI emphasizes the importance of distinguishing agro-ecological zones: high potential areas, low potential areas, and pastoral areas. This distinction guides the differentiated interventions needed to promote cross-sectoral and integrated growth.

The UNDAF will support higher and sustainable growth for poverty reduction through two complementary channels:

Firstly, it will provide indirect support to the growth agenda through institutional strengthening and initiatives aimed at promoting human development. In particular: (i) humanitarian response, recovery and food security will continue to mitigate the incisive negative effects of agricultural shocks on poor and vulnerable populations, with interventions designed in a long-term perspective; (ii) basic social services and human resources will support better access to and delivery of decentralized services, leading to a more educated and healthier pool of workers, thus higher productivity, growth and increasing income; (iii) HIV/AIDS programmes will help tackle a key threat to labour resources; and (iv) initiatives to promote good governance will strengthen the role of the institutions in lowering transaction costs and improving efficiency of the functioning of markets, and buttress the business environment, both of which are key to private sector development.

Secondly, it will provide direct support to promoting regionally differentiated growth, as in the growth promoting agenda in the PASDEP. Direct support by UNCT members will constitute the software (i.e. initiatives to build knowledge and enhance productivity) that will leverage concrete large-scale interventions by other donors such as multilateral donors. The need for regional differentiation arises from lessons from the implementation of the SDPRP, which acknowledged the great diversity of the country in terms of potential and endowments, geographical characteristics, and distribution of population and poverty. UNDAF support will be fully consistent with the characterization of the three agro-ecological zones mentioned above and with the emphases on the promotion of exports and tourism, also central to the growth agenda in the PASDEP. This constitutes an innovation in the efforts to promote higher and sustainable growth.

The UNDAF support to regionally-differentiated growth is conceptualized as innovations related to economic growth corridors (EGCs). For operational purposes, the UNDAF defines an EGC as a geographical "corridor" beyond administrative borders, with an identified potential to optimize economic growth by following the connectivity and value chains of economic activities in otherwise separate geographical locations. Value chains connect value added from primary products to intermediate products to final products (e.g. cattle => hides =>

leather => shoes). Locations that define the corridors are those where output is initially produced (production centres), subsequently transported and commercialized, and those where it is sold (domestic or international markets). Investment programmes and policies in EGCs are guided by the priority to exploit the predominant source of growth potential in the corridor, while facilitating positive and robust externalities from inter-sectoral linkages.

Supporting EGCs will require a careful choice of corridors, consistent with the agro-ecological zones included in ADLI and the PASDEP. The selection will result from a fully joint decision between the Government authorities and UN agencies involved. It is expected that there will be two guiding principles for the selection process:

- Establish a pool of corridor options. Possible corridor candidates include: a particular agro-ecological zone – dry, semi-arid, moist; one or more regional administrations; a transportation corridor; an established tourism route; or a river basin, such as Lake Tana (as part of the Nile River Basin);
- Apply selective criteria for the choice of corridor, based on: (i) population, poverty and vulnerability characteristics; and (ii) economic growth potential.

Implementation of support to EGCs is expected to be progressive and based on learning-by-doing. Support will probably start with one chosen corridor where the UNCT will support Government ministries and administrations, and private sector bodies to generate data and gain experience. The partners will then integrate the knowledge acquired to undertake subsequent and perhaps more ambitious efforts. UNDAF will support the following types of initiatives in the EGC chosen:

Knowledge Building: Once the EGC is identified, the UNDAF will support Government and relevant CSOs to generate and disseminate data and mobilize human, financial and technical resources to produce strategic economic growth reports for the EGC, in a one-by-one sequence. These reports will contain: (i) a diagnostic of the corridor's development performance, and its multi-sectoral potential; (ii) the growth and development strategy emerging in the corridor, based on on-going plans; (iii) issues on choices and tensions between the elements of the corridor's emerging strategy, including gaps identified; (iv) recommendations providing the innovative foundations for higher growth in the corridor; and (v) concrete interventions proposed, to be supported by the UN agencies involved. Particular attention will be devoted to location-specific issues on labour market productivity (including HIV/AIDS and other health and education research), technology and technological progress, and institutional strengthening needs, out of which UN agencies will identify concrete potential interventions. Building knowledge is fundamental to support the long-term vision of promoting regionally differentiated growth. It will build on the wealth of studies and diagnostics undertaken by the authorities and donor agencies.

Increased Labour Productivity: This support will be based on on-going programmes to improve labour productivity, with a distinct focus on location-specific needs and improved access to training and education, information-sharing, and support for micro, small and medium enterprises. The guiding priorities will be: effective implementation through supporting existing federal and regional programmes to improve labour productivity; complementarity by building on physical and human capital development programmes at the specific locations and designing or improving interventions to make more efficient local use of those capital resources; and innovation in reengineering economic processes across sectors at local level to increase the efficiency of the way assets are used.

Intensive and Widespread Use of Technology: There are still vast needs to increase the use of modern technologies and to introduce national and local technological progress, in order to support increased productivity with an emphasis on pro-poor trade, public-private partnerships and private sector development. EGCs pose the challenge to conduct such efforts at specific locations, tailored to reality. Technology and progress include inputs, tools, and processes applied to mechanical, management, and marketing of economic activities. Linkages, networks and national and regional institutions will be supported as well as support to post-harvest loss reduction and environmentally friendly processing and preservation.

Institutional Strengthening: Efforts to promote EGCs span many sectors, government institutions, locations, stakeholders, partners, and years. They involve building strong partnerships at the outset and strengthening Government to build capacity in national and regional authorities, frameworks and mechanisms, including coordination and monitoring and evaluation. Capacity improvement efforts should be located throughout the institutions related to the specific growth corridor, consistent with the Government's institutional structure.

UN agencies can offer many assets and resources, including: Seed-money - relatively small funds available for innovative operations (building knowledge, strengthening institutions) and financial support for concrete projects and smaller programmes at community level; long experience of implementing development programmes in each agency's field of specialization.

UN support complements large-scale interventions by other donors (for example World Bank and the European Union), which can support large investments and mobilize more resources than the UN group. For instance, these large donors have programmes to support building and upgrading the national transport infrastructure network, water resources management, telecommunications, power, education, health, and regional economic integration.

The UNCT will need to support the creation of institutional mechanisms to plan, coordinate and implement the EGC. Strong stakeholder involvement, local ownership and long-term vision are keys to success.

## SECTION 3 ESTIMATED RESOURCE REQUIREMENTS

### 3.i Estimated Resource Requirements

Agencies have estimated the resources that will be required to achieve the desired Country Programme Outcomes, as indicated in the matrices. More accurate costing will be possible only after the detailed programme intervention and project development stage with respective counterparts. The table below gives the estimated UNDAF resource requirements of UN Agencies over the five-year period:

Agency	Humanitarian Response & Recovery	Basic Social Services	Good Governance	Enhanced Economic Growth	HIV/AIDS
ECA	N/A	N/A	N/A	\$800,000	N/A
FAO	\$65,000,000	\$6,000,000	N/A	\$11,600,000	\$3,100,000
IAEA	\$3,500,000	\$1,100,000	N/A	\$250,000	\$200,000
IFAD	\$20,000,000	N/A	N/A	\$80,000,000	N/A
ILO	N/A	N/A	\$700,000	\$650,000	\$500,000
IOM	\$2,500,000	N/A	\$3,500,000	N/A	\$400,000
UNOHCHR	N/A	N/A	\$550,000	N/A	N/A
UNAIDS	\$50,000	\$50,000	N/A	\$225,000	\$3,700,000
UNCDF	N/A	N/A	\$1,200,000	N/A	N/A
UNDP	\$40,000,000	N/A	\$51,000,000	\$12,000,000	\$22,500,000
UNESCO	\$350,000	\$900,000	\$350,000	N/A	\$800,000
UNFPA	\$3,500,000	\$43,500,000	\$9,700,000	\$33,000,000	\$10,000,000
UNHABITAT	N/A	N/A	\$50,000	N/A	N/A
UNHCR	\$4,750,000	N/A	N/A	N/A	N/A
UNICEF	\$90,000,000	\$286,051,500	\$14,800,000	\$650,000	\$10,300,000
UNIDO	N/A	N/A	N/A	\$3,300,000	N/A
UNOCHA	\$2,100,000	N/A	N/A	N/A	N/A
WB	N/A	N/A	N/A	\$1,500,000	N/A
WFP	\$738,000,000	\$91,050,000	N/A	N/A	\$48,700,000
WHO	N/A	N/A	N/A	N/A	\$1,400,000

*\*All budget amounts are indicative and not resourced, but targets as per the budget plans for the new country programmes for each agency.*

*\*\* All amounts are in USD*

### *3.ii Resource Mobilization Strategy*

The UNCT will continue to raise resources jointly and will further enhance, improve and apply existing resource mobilization strategies. It will explore opportunities for funding through donor conferences, non-traditional donors, pooled funding mechanisms and Government support in raising funds for the UN system.

Performance, visibility and accountability will be emphasized. Lead agencies in the five UNDAF areas will ensure timely implementation, reporting and documentation of results and lessons learned, as well as enhanced visibility through field visits for donors and media. The UNCT Communication Strategy will include initiatives on enhanced communication and information on joint programmes and activities.

The UNCT will continue to support national monitoring and evaluation processes, including sectoral and annual reviews. It will use these, as much as possible, in its ongoing resource mobilization efforts and as part of the monitoring and evaluation of the UN system's support to Government priorities and programmes.

## SECTION 4 IMPLEMENTATION

*“Using a country’s own institutions and systems, where these provide assurance that aid will be used for agreed purposes, increases aid effectiveness by strengthening the partner country’s sustainable capacity to develop, implement and account for its policies to its citizens and parliament”. (Paris Declaration on Aid Effectiveness, 28 February - 2 March 2005, Para. 17).*

In preparing for this UNDAF, the UNCT put considerable emphasis on ensuring that the process is in line with the reform agenda of the Secretary General and that it implements the harmonized programming approach. There has already been considerable progress in harmonization in Ethiopia including the preparation of the Government's *Harmonization Action Plan* (HAP) in January 2005 and draft “Joint Declaration on Harmonization, Alignment and Aid Effectiveness” prepared by the Government and DAG. The UNCT is committed to taking the harmonization process beyond project and programme formulation to a new level, by adopting a common implementation framework, to the extent possible, in order to reduce transaction costs and simplify the multiple procedures that currently exist among UN Agencies.

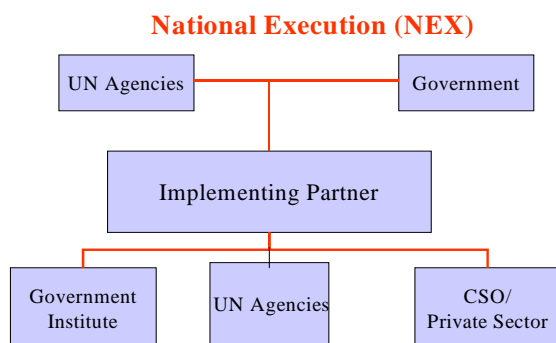
The UNCT has reviewed agency implementation modalities, including the National Execution (NEX) approach. NEX is defined as a “cooperative operational arrangement entailing, among other things, overall responsibility and assumption of accountability for the formulation and management by the programme country of UN-supported programmes and projects” (Governing Council decision 92/22 of 26 May 1992). The NEX guiding principles are:

- Capacity-building, self-reliance and sustainability;
- Ownership and internalization of external inputs; and
- Relevance and impact, particularly when used in conjunction with the programme approach.

The key features of NEX include the use of government rules and procedures, where they are consistent with internationally recognized practices, to ensure UN programmes and projects are integrated with and relevant to national programmes and structures. A key element is the government’s accountability for the effective and efficient use of UN resources and achievement of programme and project objectives.

National Execution involves the following actors in implementing and managing programmes and projects:

- **The National Coordinating Authority** - assumes ultimate responsibility, on behalf of government, for the overall management of the programme;
- **The Implementing Partner (IP)** – primarily responsible for planning and managing programme and project implementation, including supervising the Contractors; and
- **Contractors** – accountable to the **IP**, and provide services and carry out activities, including providing project inputs and converting them to project outputs.



A NEX modality combines the benefits of Government execution with the benefits of using other partner entities, including civil society and the private sector, under public institutions' leadership and coordination. NEX seeks to enhance national capacity to accelerate programme delivery, building on past experience. Already, experience suggests that using Government rules and regulations for operations, auditing and monitoring has contributed to reduced workload and transaction costs. However, it is also evident that capacity limitations at implementation levels - especially at *woreda* level - are causing considerable delays in planning, effective management, accounting and operating. Under NEX, the UN-supported programmes and projects will continue to be implemented in such a manner that they provide technical assistance to build capacity under overall coordination of national institutions. The UN-supported programmes and projects will, to the extent possible, operate within the aligned procedures with Government systems and implementation procedures in areas such as disbursement arrangements, monitoring and evaluation systems, financial rules and regulations, auditing and procurement arrangements.

NEX remains the norm for implementing UN-assisted programmes and projects in the coming programme cycle. However, it is also recognized that, in some cases, other implementation modalities will need to be adopted to ensure timely delivery when required in support of the Government efforts to accelerate and scale up their development efforts in order to achieve the MDGs. In case of emergency humanitarian responses, NEX will remain the norm for implementation. However, based on the urgency of circumstances, DEX implementation could be applied in close consultation and agreement with the Government.

The UNCT's effort to harmonize implementation modalities will be accelerated through joint programming and joint programmes under the proposed UNDAF outcomes. **Joint programming** is the collective effort through which the UN organizations and national partners work together to prepare, implement, monitor and evaluate the activities aimed at effectively and efficiently achieving the MDGs and other international commitments arising from UN conferences, summits, conventions and human rights instruments. Through joint programming, common results and the modalities for supporting programme implementation are identified. Joint programming contributes to making the UN support to reaching the national goals more coherent, effective, and efficient. It is meant to avoid duplication, reduce transaction costs and maximize synergies among the national partners and the differing contributions of UN system organizations – be it in terms of the normative framework and

technical expertise, or of expertise in programme areas and strategies. Based on the joint programming process, three **joint programmes** will be developed in the UNDAF focus areas - HIV/AIDS, Enhanced Economic Growth, and Humanitarian Response, Recovery and Food Security. A joint programme contains a set of activities within a common work plan and related budget, involving two or more UN organizations and partners. The work plan and budget form part of a joint programme document, which also details roles and responsibilities of partners in coordinating and managing the joint activities and is signed by all participating organizations and partners. The UNDAF joint programmes will be managed by a lead agency and reviewed jointly at an annual review meeting. The programmes will be streamlined with other initiatives within the same area, and strongly linked to the overall partnership structure. Identified capacity gaps related to implementation will be addressed through the capacity-building components included in the UNDAF document.

In line with this, for the resource disbursement, the UN Executive Committee agencies (UNICEF, UNFPA, UNDP and WFP) are scheduled to start applying the harmonized cash transfer modality in 2007, including the common operational framework for transferring cash to government and non-governmental implementing partners, in line with UN General Assembly Resolution 56/201. This will include a joint capacity assessment of potential implementing partners. Its implementation will significantly reduce transaction costs and lessen the burden created for partners by the multiplicity of UN procedures and rules. Partners will use common forms and procedures for requesting cash and reporting on its utilization while agencies will adopt a joint risk management approach and will select specific procedures for transferring cash on the basis of the joint assessment.

In cases where joint programmes are still being finalized during the four-year period, agencies will work closely together to implement activities that contribute to the UNDAF outcomes. The UNCT will carry out joint assessments, missions and reviews throughout the UNDAF cycle, as part of its commitment to harmonization.

## SECTION 5      MONITORING AND EVALUATION

### 5.i      *National Monitoring and Evaluation Frameworks*

The UNDAF Monitoring and Evaluation (M&E) plan focuses on monitoring and evaluating UNDAF outcomes and related Country Programme (CP) outcomes and outputs. It also makes special reference to achieving national development goals, including working with the MDG-linked monitoring and evaluation frameworks of the PASDEP. The UNDAF includes activities to support the capacity-building of national partners to monitor progress towards development goals, by harmonizing data collection systems and supporting databases, analysis tools and improved dissemination of findings.

The Government has a substantial information management system and undertakes surveys in many areas including: Welfare Monitoring Surveys, a Household Income, Consumption and Expenditure Survey, demographic and health surveys, and a Participatory Poverty Assessment, to name a few. EthioInfo, a customized adaptation of DevInfo, was developed and launched recently by the Central Statistics Authority. The software will help organize and present socio-economic data obtained through the various surveys, linking to strategic monitoring indicators of MDGs and PASDEP progress. The Government's HIV/AIDS Prevention and Control Office (HAPCO), with technical support from the UNAIDS office, compiles the report for the UN General Assembly Special Session on HIV/AIDS (UNGASS). The UNDAF will be greatly assisted by these and other existing information sources. The UNDAF M&E framework uses indicators where data is available which capture the trends. The M&E matrix includes indicators that have already been accepted and used either for the monitoring of UNGASS, MDGs and PASDEP, or for other existing M&E systems.

It does not attribute attainment of national targets to UN interventions. Special resources will be required to measure impact of the UN on major interventions. The UNDAF monitoring will consist both of a combination of agency monitoring instruments and joint monitoring tools, such as those employed by the Government and the DAG, where appropriate. The M&E mechanisms will include the existing theme groups, joint field assessment and activities with partners. Some specific outcome evaluations will be undertaken during the programme cycle to focus on selected strategies. Responsibility for M&E lies with the UNCT and the inter-agency M&E Technical Working Group, assisted by national partners and existing theme groups, as outlined in the Implementation Table/ M&E Calendar.

For these reasons, this M&E plan is linked to (a) the annual reviews of PASDEP, (b) the annual reviews of the agencies' CPs and (c) any joint monitoring plans for collaborative programmes. Annual and mid-term reviews will be conducted jointly with common counterpart ministries, under the coordination of MoFED. In cases of single agency activities with unique counterparts, the individual agency's monitoring system will be used.

The UNDAF evaluation will be in 2011, the ultimate year of the programme cycle. The evaluation will consider: the programme's impact on achieving the UNDAF outcomes in relation to national development, relevance of the outcomes during the programme cycle and for the future, progress made towards meeting CP outcomes and outputs, the capacity of national partners to sustain progress, and the benefits and synergies accrued from a

harmonized UN plan. The UNDAF evaluation will be used to inform the preparation of the next UNDAF cycle.

*5.ii UNDAF Monitoring and Evaluation Calendar*

		<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>
<b>UNCT M&amp;E activities</b>	<b>Survey/studies</b>	Baseline survey to determine baseline for the UNDAF indicators  Natural resources study (HR,R&FS)  Action research to develop the growth corridor approach	Baseline assessment for scale-up of joint programme on HIV/AIDS	Survey to fill-in the gaps for UNDAF indicator data for mid-term review  Baseline assessment for scale-up of joint programme on HIV/AIDS	Baseline assessment for scale-up of joint programme on HIV/AIDS	Target survey to fill-in the gaps for UNDAF indicator data
	<b>Monitoring system</b>	Regular monitoring of MDG / PASDEP / UNDAF indicators through EthioInfo	Regular monitoring of MDG / PASDEP / UNDAF indicators through EthioInfo	Regular monitoring of MDG / PASDEP / UNDAF indicators through EthioInfo	Regular monitoring of MDG / PASDEP / UNDAF indicators through EthioInfo	Regular monitoring of MDG / PASDEP / UNDAF indicators through EthioInfo
	<b>Evaluations</b>			UNDAF Mid-Term Evaluation	Evaluation of joint programmes	UNDAF Final Evaluation
	<b>Reviews</b>	UNDAF Annual Review	UNDAF Annual Review	UNDAF Mid-Term Review	UNDAF Annual Review  Review of joint programmes	UNDAF Final Review

		2007	2008	2009	2010	2011
<b>Planning references</b>	<b>UNDAF Evaluation Milestone</b>	UNDAF Annual Review	Preparation of MDG Report UNDAF Annual Review	UNDAF Mid-Term Review	UNDAF Annual Review Review of joint programmes	Preparation of MDG Report UNDAF Final Review
	<b>M&amp;E capacity building</b>	Capacity building activities based on needs identified through UNDAF Annual Review	Capacity building based on needs identified through UNDAF Annual Review	Capacity building based on needs identified through UNDAF Annual Review and Evaluation	Capacity building based on needs identified through UNDAF Annual Review and Evaluation	Capacity building based on needs identified through UNDAF Annual Review and Evaluation
	<b>Use of information</b>	Findings of the UNDAF Annual Review will inform the development / adjustment of annual workplan	Findings of the UNDAF Annual Review will inform the development / adjustment of annual workplan	Findings of the UNDAF Mid-Term Evaluation and Review will inform the development / adjustment of the workplan	Findings of the UNDAF Annual Review will inform the development / adjustment of annual workplan Evaluation of the joint programmes will inform the development / adjustment of joint workplans, and development of joint programmes for the next UNDAF cycle	Findings of the UNDAF Final Evaluation and Review will inform the development / adjustment of the next UNDAF
	<b>Partner Activities</b>	Annual Review of PASDEP Annual Review of sector development programmes Participation of the Government and other development partners in the UNDAF Annual Review	Annual Review of PASDEP Annual / Mid-Term Review of sector development programmes Participation of the Government and other development partners in the UNDAF Annual Review	Annual Review of PASDEP Annual / Mid-Term Review of sector development programmes Participation of the Government and other development partners in the UNDAF Mid-Term Review	Annual Review of PASDEP Annual Review of sector development programmes DHS+ Participation of the Government and other development partners in the UNDAF Annual Review Participation of the Government and other development partners in the review of joint programmes	Annual Review of PASDEP Annual Review of sector development programmes Participation of the Government and other development partners in the UNDAF Final Review



## UNDAF Results Matrix on Basic Social Services and Human Resources

### National priority or goals:

#### PASDEP and the Constitution:

- *Every Ethiopian has a right to access publicly funded social services (article 41 of the Constitution);*
- *Sector plans in health, education, etc.*
- Education Sector Development Programme III (ESDP III) highlights increased access, completion and equity in education, improve quality and efficiency of education system to increase access to educational opportunities at primary level, to achieve universal primary education by the year 2015. It also aims to address inequity by narrowing the gap between male and female, among regions and rural and urban areas, to provide increased access to Adult and Non-Formal Education to combat adult illiteracy and to increase access to quality secondary education. It includes a Technical Vocational Education and Training component.
- Increased financial and management capacity
- Health Sector Development Programmes (HSDP III), with a clear focus on poverty-related health conditions – communicable diseases such as malaria and diarrhoea, and health problems affecting mothers and children. Efforts will be concentrated on rural areas and on extending services outwards from static facilities to reach villages and households. In addition, and most importantly, gender will be mainstreamed at all levels of the health system. National Child Survival Strategy has set the overall objective of reducing under-five mortality to 67/1000 by 2015 to achieve the MDG. National Reproductive Health Policy, National Population Policy, etc.
- *National Water Resources Management Policy, Water Sector Strategy and Water Sector Development Programme. PASDEP target is to raise water supply coverage from 34.5% of the population to 77.5% in rural areas, and from 42.2% to 84.5% for the population as a whole and increase latrine coverage from 17.5% to 79.8% (rural), and urban sanitation coverage from 50% to 89.4% of the population.*

#### Related MDGs:

- *Ensure that all boys and girls complete a full course of primary schooling (MDG 2);*
- *Eliminate gender disparity in primary and secondary education preferably by 2005 and to all levels of education (MDG 3);*
- *Reduce by two thirds the mortality rate among children under five (MDG 4);*
- *Reduce by three quarters the maternal mortality ratio (MDG 5);*
- *Have halted by 2015, and begun to reverse, the incidence of malaria and other major diseases (MDG 6);*
- *Reduce by half the proportion of people without sustainable access to safe drinking water (MDG 7).*

**UNDAF outcome by the end of the programme cycle:** By 2011, UN agencies will have significantly supported national efforts to achieve MDGs relating to improved

and equitable access and utilization of decentralized social services, including those for health, nutrition, education, water, sanitation and hygiene, by developing capacities of both those responsible for service delivery, and those who demand and use such services, while giving special focus to the most vulnerable and marginalized groups.

Country Programme Outcomes	Country Programme Outputs	Role of partners	Resource* Mobilization Targets
<p><b>Health</b></p> <p><b>Improved access to and utilization of quality preventative, promotive, rehabilitative and curative health services at facility, community and household levels.</b></p> <p><b>Lead agencies:</b> WHO, UNICEF</p> <p><b>Lead Government Institutions:</b> MoH, BoH</p>	<p>1.1 FMoH capacity for policy development, quality assurance, monitoring and donor coordination strengthened in the context of a decentralized implementation of HSDP. (WHO, UNICEF, UNFPA). UN will contribute 50% (financial and TA) for the development and review of national policies, guidelines and Health Management Information system focusing on Maternal, Youth, Neonatal and Child Health</p> <p>1.2 Capacity for developing, costing, implementing and monitoring Maternal, Neonatal and Child-focused Health plans strengthened in 11 Regions and 350 <i>woredas</i> (WHO, UNICEF, UNFPA)</p> <p>1.3 Health Services Extension Programme (HSEP) rolled out and capacity of HEWs developed. (WHO, UNICEF, UNFPA). UN will cover 50% of the FMoH target of training and equipping 32,500 HEWs for delivery of promotional, preventative and essential curative services incl. HIV prevention and mitigation</p> <p>1.4 National health delivery systems strengthened and expanded</p> <p>1.5 Increased capacities of suppliers and users for greater utilization of quality referral services for severe disease incl. HIV/AIDS and severe malnutrition in children (WHO, UNICEF) and obstetrical complication in women (WHO, UNICEF and UNFPA)</p> <p>1.6 Accelerated expansion of primary health care supported</p> <p>1.7 Expanded and improved radiotherapy service treating cancer patients.</p> <p>1.8 Comprehensive strategy and implemented framework for Human Resources in Health developed (WHO, UNFPA)</p> <p>1.9 Master Plan for Essential Health Supplies finalized and implementation started (UNICEF, UNFPA, WHO)</p>	<p>MoH assumes coordination and leadership role for HSDP including the design and application of national policies and implementation frameworks. MoH also designs appropriate curricula for HSEP.</p> <p>RHBs, assume coordination role for HSDP in their respective regions</p> <p>Higher learning institutions in regions offer training to HEWs HPN provides technical assistance and resource mobilization</p> <p>IAEA supports training of key personnel including radiation oncologists, medical physicists and therapy radiographers, as well as provision of equipment.</p> <p>Department of Internal Medicine at the Black Lion Hospital houses the radiotherapy service.</p> <p>MoH, RHB Health ensures technical guidance and distribution of supplies for routine immunization services and</p>	<p><b>UNICEF:</b> \$ 86,051,500</p> <p><b>IAEA:</b> \$600,000</p> <p><b>UNESCO</b> <i>(technical support):</i> \$100,000</p>

Country Programme Outcomes	Country Programme Outputs	Role of partners	Resource* Mobilization Targets
	<p>1.10 Control of immunizable diseases strengthened at all levels (WHO, UNICEF)</p> <p>1.11 Malaria control activities strengthened and expanded (WHO, UNICEF)</p> <p>1.12 National and regional TB control efforts supported (WHO)</p> <p>1.13 Capacity strengthened at all levels for meningococcal meningitis preparedness, surveillance and response (WHO, UNICEF)</p> <p>1.14 Essential laboratory services in EHNRI and Public Health laboratory strengthened (WHO)</p> <p>1.15 National efforts to combat HIV/AIDS scaled-up (All UN agencies – see separate HIV/AIDS UNDAF outcome)</p> <p>1.16 Base line survey on breast and cervical cancer conducted</p> <p>1.17 Institutional capacity to monitor the frequency of drug-resistant forms of malaria; scientific evidence-based information on the levels of SP and CQ resistance for appropriate drug policy-making.</p> <p>1.18 Strengthened availability and utilization of quality community-based health services for all, with focus on women, youth and children’s health, including HIV prevention and support to HIV+ mothers and their children through the Health Services Extension Programme (HSEP) (WHO, UNICEF, UNFPA). UN will contribute to training; follow up supervision, provision of basic equipment and drugs to 16,000 HEWs.</p> <p>1.19 As per the National Nutrition Strategy, community-based nutrition activities scaled-up, families and communities strengthened to take action (UNICEF, WHO, World Bank, WFP, UNESCO).</p> <p>1.20 A significant percentage of community members in areas covered by the HSEP practicing disease prevention and curative measures for themselves and their children (including reduction of selected HTPs in target areas) as a result of effective Information, Education, Communication (WHO,</p>	<p>immunization campaigns. <i>Woreda</i> Health offices ensure micro planning and implementation.</p> <p>HPN provides technical assistance GAVI, GFATM, and other donors provide funding support</p> <p>MoH provides technical assistance to regions for the implementation of the HSEP</p> <p>RHBs coordinate the implementation of HSEP and <i>woreda</i> health offices deploy HEWs and undertake direct implementation of activities.</p> <p>HPN mobilizes funds and provide technical assistance for research, monitoring and evaluation</p> <p>IAEA supports capacity building in isotope-aided molecular techniques to detect drug-resistant malaria</p> <p>EHNRI, through the National Malaria Control Programme, monitors samples from sentinel sites</p> <p>CSOs and HEWs and the community undertake community mobilization, ensure participation and inclusion of all members of the community including vulnerable groups</p>	

Country Programme Outcomes	Country Programme Outputs	Role of partners	Resource* Mobilization Targets
	<p>UNICEF, UNFPA).</p> <p>1.21 Strengthened women and girls’ rights claiming capacity for sexual and reproductive Health and Health workers capacity as duty bearers for service provision (UNFPA)</p> <p>1.22 Behavioural change communication (BCC) implemented at all levels</p>	<p>MoARD is coordinating the community-based nutrition interventions. The newly established nutrition coordination body will oversee inter-sectoral actions, advocate for resource mobilization and technical guidance</p> <p>Ministry of Women’s Affairs is coordinating action for reducing FGM and early marriage.</p> <p>MoH will be a coordinating body for delivery of Sexual and Reproductive Health programmes.</p>	
<p><b>Health, Population</b></p> <p>2. Improved access to and demand for quality, gender sensitive and integrated Reproductive Health Care including HIV/AIDS prevention services at all levels</p> <p><b>Lead agency:</b> UNFPA</p> <p><b>Lead Government Institutions:</b> MoH/BoH</p>	<p>2.1 Increased utilization of quality referral services for severe disease incl. HIV- AIDS and severe malnutrition in children (WHO, UNICEF), Emergency Obstetrical Care services and PMTCT+ (UNFPA, WHO, UNICEF)</p>	<p>MoH assumes leadership role in the formulation of relevant strategies and implementation frameworks and ensures allocation of resources RHBs coordinate activities, and provide technical assistance to <i>woredas</i> and monitor programs.</p> <p><i>Woreda</i> health office manages resources, facilitate trainings and service provision in health facilities, and lead community mobilization efforts.</p> <p>HPN mobilizes fund and provide technical assistance for researches, monitoring and evaluation</p> <p>Relevant partners will facilitate service provision and training of professionals and mobilize the community.</p>	<p><b>UNICEF:</b> \$25,000,000</p>

Country Programme Outcomes	Country Programme Outputs	Role of partners	Resource* Mobilization Targets
<p><b>Education</b></p> <p><b>3. National efforts to strategically address girls' education, and improve access, quality and eliminate gender disparity in order to achieve UPE by 2015 are strengthened.</b></p>	<p>3.1 Strengthened capacity of MoE, the regions and <i>woredas</i> to monitor and evaluate the implementation of ESDP III (UNESCO, UNICEF, and WB)</p> <p>3.2 Strengthened capacity of all regions and <i>woredas</i> to manage and improve the quality of education (through micro-planning, development/adaptation of curriculum guidelines, textbooks revision, facilitators and teacher training (UNICEF, UNESCO, WFP)</p>	<p>MoE, Regional Bureaus; bilateral donors (incl. Netherlands, USAID, DCI, DFID SIDA, ADB). <u>MoE</u> will provide leadership and ensure coordination and implementation of activities at national level. <u>REBs</u> will lead and coordinate activities at regional level as well as provide guidance and finance to <i>woredas</i>.</p>	<p><b>UNICEF:</b> \$75,000,000</p> <p><b>WFP:</b> \$91,050,000</p> <p><b>UNESCO:</b> \$800,000</p> <p><b>UNFPA:</b> \$3,500,000</p>
<p><b>3. Continued...</b></p> <p><b>Lead agencies:</b> UNICEF, UNESCO</p> <p><b>Lead Government Institutions:</b> MoE/BoE</p>	<p>3.3 Improved quality of education in all regions and <i>woredas</i> through strengthening and promotion of school clusters, teacher development, school feeding and provision of gender sensitive educational materials, and promotion of basic health/ hygiene and reproductive health education. (UNESCO, UNICEF, WFP and, UNFPA).</p> <p>3.4 Strengthened capacity of the national, regional and <i>woreda</i> systems to get all schools to be child friendly and provide WATSAN facilities to 30% of the 14,000 primary schools. (WFP, UNESCO and UNICEF).</p> <p>3.5 Strengthened school system including the ABE (system) in all regions and <i>woredas</i> to increase access and provide quality education and Life-skills for out-of-school and over-aged children, children with special needs, especially girls and promoting the use of media (in particular radio, TV) education in the learning centres. (UNICEF, UNESCO, WFP)</p> <p><b>3.6</b> Improved, knowledge and practice by teachers and students; learners and facilitators of Life-skills/HIV/AIDS, preventive education, population and family life in primary and secondary education and ABE and Youth</p>	<p><u>Woredas</u> will provide technical and financial support to schools and implement activities. UNESCO, UNICEF and WB will provide both technical and financial support.</p> <p>The implementation will be in close collaboration with the Education sector Donor Group. FMOH will provide quality control and M&amp;E for WATSON facility usage. The Ministry of Water will provide resources in relation to the physical infrastructure.</p>	<p><b>UNAIDS:</b> \$50,000</p>

Country Programme Outcomes	Country Programme Outputs	Role of partners	Resource* Mobilization Targets
	centers (UNFPA, UNESCO, WB, UNICEF, UNAIDS).		
<p><b>Water &amp; Sanitation</b></p> <p><b>4. Access to and utilization of safe water, environmental sanitation and hygiene services strengthened</b></p> <p><b>Lead agency: UNICEF</b></p> <p><b>Lead Government Agencies: MoWR, BoWR</b></p>	<p>4.1 Contribution in the context of WASH integration to 15% of the PASDEP coverage increase to achieve the MDG target for access to water supply, ensuring fluoride, nitrate and other pollutants to be within Ethiopian provisionary drinking water norms (UNICEF)</p> <p>4.2 Contribution in the context of WASH integration to 13% of the PASDEP coverage increase to achieve the MDG target for access to household sanitation (UNICEF)</p> <p>4.3 Contribution to increase access to water supply and sanitation services in 650 health facilities. (UNICEF)</p> <p>4.4 Contribution to capacity building for water &amp; sanitation through human resources development by training and equipping mid-level technicians and artisans and institutional capacity development in planning, implementation, M&amp;E in 10 regions and 120 <i>woredas</i> (20% of the country's <i>woredas</i>) (UNICEF)</p> <p>4.5 Contribution to capacity development of WASHCOs, with up to 50% female members and at least one youth, and equal representation of men and women in leadership positions, established, members trained and supply chains for spare parts set-up for effective operation &amp; maintenance in 100% of all community WASH schemes supported through the programme (UNICEF)</p> <p>4.6 Contribution to national WASH programme set-up, M&amp;E, improved knowledge management</p> <p>4.7 Six million people using latrines and practicing correct hand-washing</p>	<p>Main owners are the <i>woredas</i> and communities participating in the National WASH Programme</p> <p>MoWR and the Bureau of Water will coordinate and lead the implementation of the programmes.</p> <p>MoE will lead in quality control and M&amp;E in the area of sanitation.</p> <p>UNICEF will contribute:</p> <ul style="list-style-type: none"> <li>- With TA in policy and strategy guidelines development to WASH, and capacity development at federal, regional, zonal and <i>woreda</i> level supporting integrated delivery of WASH as well as in effective management, M&amp;E and reporting</li> <li>- UNICEF will also support implementation of WASH system and Guinea Worm eradication</li> <li>- In improved knowledge management for improved capacity building and services delivery replicating best practices</li> </ul> <p>FMoH, World Bank, African Development Bank, EU, JICA,</p>	<p><b>UNICEF:</b> \$ 100,000,000</p> <p><b>IAEA:</b> \$500,000</p> <p><b>FAO:</b> \$6,000,000</p>

Country Programme Outcomes	Country Programme Outputs	Role of partners	Resource* Mobilization Targets
	with soap (or ash) at appropriate times (UNICEF)	<p>Finnida etc., CSOs and local-level entrepreneurs: main partners in the National WASH Programme set-up and implementation</p> <p>IAEA helps the Government in building capacity and strengthening the analytical framework using isotope hydrology techniques and supports projects aimed at assessing groundwater resources and water balance studies to sector managers to enable judicious decision-making on the exploitation of new water resources.</p>	
<b>4. Continued...</b>	<p>4.8 Contribute towards Ethiopia certification to be Guinea Worm free in 2011, through ensuring safe water supply in ever-affected villages (UNICEF, WHO, FAO)</p> <p>4.9 Ethiopian National Groundwater Database (ENGDA) fully functional: Assessment of groundwater resources including the use of isotope hydrology according to the Ethiopian Groundwater Resources Assessment Programme (EGRAP); water balance of the common Blue Nile basin water</p>	<p>Ministry of Water Resources acts as central repository for ENGDA and collaborates with Sudan and Egypt on Blue Nile study.</p> <p>Geological Survey of Ethiopia performs fieldwork and sampling in selected areas according to EGRAP.</p> <p>Department of Geology and Geophysics at the University of Addis Ababa performs fieldwork and sampling in selected areas according to EGRAP as well as laboratory analytical support services.</p>	

*\*\* These budget amounts are indicative and not resourced, but targets as per the budget plans for the new country programmes for each agency.*

## **Joint Programming Areas**

**Area 1: Education:** Family Health Education: The UN, national partners and other development partners within the context of UNGEI have, for sometime, been planning, implementing and monitoring together to achieve desired results. Emphasis will be given to girl children.  
*Agencies:* WFP, UNESCO, UNICEF, UNFPA, UNDP, WB

### ***Major areas of Collaboration***

1. Strength of the national education policy framework and plans through UN system advocacy
2. Provision of incentives to encourage enrollment and retention of girls in primary school
3. Capacity strengthened to provide formal schools that are child friendly, disability child friendly and gender sensitive
4. Strengthen in school and out of school HIV/AIDS prevention and control
5. School water sanitation and hygiene facilities will be provided at schools
6. School feeding
7. Strengthen family life education

## **Area 2: Health Nutrition**

**Area 2.a:** Strengthened household and community promotional, preventative and basic curative health care capacity – as the first joint programme with WHO, UNFPA, UNICEF, FAO

Activities could cover all HSEP areas requiring support:

- Strengthening of the TVET schools
- Equipment for Health posts
- Integrated refresher course for Health Extension workers
- Drugs and consumables
- *Woreda* health office capacity development for follow-up and supervision
- Community and in-service IMCI expansion in support to HSEP
- Monitoring and Evaluation
- Technical assistance for implementation of Maternal, Neonatal and Child Survival Activities through the HSEP (this will include EPI, nutrition, malaria sexual and reproductive Health etc.)
- Selected non-communicable diseases (Maternal health, breast and cervical cancer, eye diseases)

**Area 2.b:** Improved access to and demand for quality, gender sensitive and integrated Reproductive Health Services including HIV/AIDS prevention services at all levels (MDG 5) with specific consideration for adolescents – as second joint programme with WHO/UNFPA/UNICEF

- MPS/ EMOC should cover all levels: community level: “pregnancy preparedness”; Health Services Extension Programme: focused ANC with ITN distribution in malaria prone areas; Referral level capacity strengthening for dealing with obstetrical complications
- Prevention of Mother to Child Transmission
- Youth Friendly Health services with focus on Young girls and HIV/AIDS prevention.

**Area 3: Water, Sanitation and Hygiene:** Improved access to clean drinking water, sanitation facilities and hygiene

Area of focus:

- Guinea worm eradication and certification process: WHO, UNICEF, FAO

### **Proposed Areas of Enhanced Collaboration**

**Area 1:** EPI/Polio Eradication Programme

**Area 2:** Malaria Control Programme

**Area 3:** Health Services Extension Programme

**Area 4:** Reproductive Health

**Area 5:** Water and Sanitation

### **Coordination Mechanisms and Programme Modalities**

Joint UN action within the Health component such as EPI/ polio eradication will be coordinated through the existing mechanism of Inter-Agency coordinating committee. Malaria control programmes can also be coordinated through the existing mechanism, namely a malaria control support team composed of UN Agencies, FMoH, Multi lateral and Bilateral donors. Health service extension programmes can be coordinated through the existing mechanism of HPN donor group, composed of the UN system, multi-lateral and bilateral donors.

5.iii UNDAF Results Matrix on Enhanced Economic Growth

<p><b>National priority or goals:</b>  <b>Among the eight major elements of the PASDEP strategy in the coming five-year period are:</b></p> <ul style="list-style-type: none"> <li>▪ A massive push to <b>accelerate growth</b> – with a particular emphasis on greater commercialization of agriculture and rural development and private sector development. The focus will be on more marketable goods for local and export markets by small and large farmers. This includes both better infrastructure such as farm-to-market roads and specific packages to promote high-value export crops. Private Sector Development will include strengthening the enabling institutional framework, (including better infrastructure, progressive withdrawal of the State from business and financial sector reforms), public/private partnerships, exploitation of niche markets and a major push to increase exports to 20% of GDP by 2010. Based on the MDGs Needs Assessment, the target to reach the MDGs and finance development is growth of 6% to 8% a year during the PASDEP period.</li> <li>▪ <b>A geographically differentiated strategy</b>, which will re-emphasise the urban agenda and rural-urban linkages, together with growth zones. The latter will focus on rural growth poles and special attention to pastoralist areas. This area of focus will be closely linked to the agriculture and private sector agenda</li> <li>▪ <b>Creating jobs</b>, which will involve managing the dynamics of population growth and expansion of labour-intensive productive activities. Again, this strategic area is closely linked to rural growth and industry and exports, particularly with respect to the promotion of micro and small enterprises.</li> </ul> <p><b>Related MDG(s):</b></p> <ul style="list-style-type: none"> <li>• <i>Eradicate extreme poverty and hunger by 2015 (MDG 1);</i></li> <li>• <i>Promote gender equality and empower women (MDG 3);</i></li> <li>• <i>Develop a global partnership for development (MDG 8);</i></li> </ul> <p><b>UNDAF Outcome by the end of the program cycle:</b> By 2011, at national, regional, organizational and business levels, capacity strengthened and knowledge developed for increased incomes of the poor, through enhanced labour factor productivity and more intensive and widespread use of technology in at least one economic growth corridor (EGC), with potential interventions related to expansion and diversification in agriculture, industry and services.</p>
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Country Programme Outcomes	Country Programme Outputs	Role of Partners <sup>6</sup>	Resource Mobilization* Targets
<b>1. High-quality knowledge developed about economic growth corridors that promote accelerated and pro-poor</b>	1.1 Capacity built in MoTI, MoARD, MoFED, MoLSA, PHCC, CSA, ESTC, regional administrations and relevant private sector bodies in the generation and dissemination of data and information about the prospective EGC, paying particular attention to urban/rural and cross-sectoral linkages and	Leadership and direction of relevant federal institutions, such as MoFED, MoTI, MoARD and MoLSA in collaboration with Regional	<b>UNICEF:</b> \$50,000 <b>WB:</b> \$1,500,000 <b>ILO:</b> \$50,000

<sup>6</sup> The precise list of partners will be determined when an agreement is reached on the specific EGC. This, therefore, represents an indicative list.

Country Programme Outcomes	Country Programme Outputs	Role of Partners <sup>6</sup>	Resource Mobilization* Targets
<p><b>growth</b></p> <p><b>Lead agency: UNDP</b></p>	<p>capacity gaps for the realization of pro-poor growth (WB, UNIDO, ILO, UNDP, ECA, UNFPA, UNAIDS, UNICEF, FAO, IFAD)</p> <p>1.2 Capacity strengthened for the formulation and implementation of geographically differentiated growth strategies, (specifically EGCs), aimed at enhancing ADLI, by capturing private initiatives and diversification and commercialisation of agriculture (WB, UNIDO, ILO, UNDP, ECA, IFAD)</p> <p>1.3 Capacity built for HIV/AIDS and other health and education related research in relation to economic growth corridors, paying particular attention to their impact on the productivity of different economic agents (workers, farmers (including pastoralists), hoteliers and other business enterprises). (UNAIDS, WHO, UNICEF, ILO, UNFPA, UNDP)</p> <p>1.4 Knowledge and capacity strengthened in key science, research and technology institutions, at both federal and regional levels, to conduct research on productivity improving processes and the application of technology to value-chain clusters and products. (ILO, UNIDO, WB, ECA, IFAD)</p>	<p>Administrations, EHNRI, CSA, EARD and the private sector in defining precise strategic development options, and with Government, to ensure consistent policy decisions that create an enabling environment for implementation of the above options.</p>	<p><b>UNFPA:</b> \$3,000,000 (plus \$2m to be mobilized)</p> <p><b>UNDP:</b> \$ 1,000,000</p> <p><b>ECA:</b> \$300,000</p> <p><b>FAO:</b> \$1,500,000</p> <p><b>UNIDO:</b> \$50,000</p> <p><b>UNAIDS:</b> \$75,000</p> <p><b>IFAD pipeline</b></p>
<p><b>2. Improved labour productivity in specific locations within the corridor in order to enhance the respective priority economic activities, while building on accompanying capital infrastructure developments engaged upon by Government and donors, to support overall</b></p>	<p>2.1 Improved access to appropriate training and education for government, private institutions, farmers (including pastoralists), the formal labour force and the informal sector, with special attention to vulnerable groups (ILO, UNIDO, FAO, WHO, UNICEF, UNAIDS, WB, UNDP, IFAD)</p> <p>2.2 Information sharing facilitated in productivity enhancing practices, labour market, health, sanitation, education and other social related issues. (ILO, UNIDO, FAO, WHO, UNICEF, UNAIDS, WB, ECA, UNDP, IFAD)</p> <p>2.3 Water and environmental sanitation systems (both government</p>	<p>MoTI, MoARD, MoLSA, MoWR, MoE, MoH, TVET, FTCS, other relevant line ministries and appropriate Regional Administrations in policy formulation; firms, Cooperatives private sector bodies (ECC, micro credit institutions), universities, other training and research</p>	<p><b>UNICEF:</b> \$500,000</p> <p><b>WB pipeline:</b> Private Sector Capacity Building, PSCAP, Roads Network, Value chains, ESW, Decentralized Capacity Building, CBAS/NBI</p> <p><b>FAO:</b> \$6,000,000</p>

Country Programme Outcomes	Country Programme Outputs	Role of Partners <sup>6</sup>	Resource Mobilization* Targets
<p><b>national growth.</b></p> <p><b>Lead agency: ILO</b></p>	<p>and private) improved. (FAO, UNICEF, UNAIDS, WB, UNDP)</p> <p>2.4 Improved livelihoods and poverty reduction by facilitating access of micro, small and medium enterprises (SMEs) and small farmers (including pastoralists) in rural and urban area (particularly those employing women and youths) to hands-on and ICT-based technical and managerial advisory services on a sustainable basis. (UNIDO, WB, ILO, UNDP, FAO, ECA, IFAD)</p>	<p>centres involved in research and data collection; the media in data and information dissemination; CSOs and community-based organizations in implementation and management.</p>	<p><b>ILO:</b> \$500,000</p> <p><b>UNDP:</b> \$2,600,000</p> <p><b>ECA:</b> \$200,000</p> <p><b>UNIDO:</b> \$200,000</p> <p><b>UNAIDS:</b> \$100,000</p> <p><b>IFAD pipeline</b></p>
<p><b>3. Increased and sustained use of technology (mechanical, inputs, marketing and management) adapted to location-specific needs to support the economic growth corridor</b></p> <p><b>Lead agency: UNIDO</b></p>	<p>3.1 Pro-poor trade, public private partnerships and private sector development fostered. (WB, UNIDO, UNDP, FAO, ECA, IFAD)</p> <p>3.2 Brokering of the transfer and scaling-up of appropriate (particularly labour intensive) technology and know-how from foreign and local businesses to Ethiopian SMEs. (WB, UNIDO, UNDP, FAO, ILO)</p> <p>3.3 Backward and forward linkages strengthened between targeted SMEs and national and international supply chains, (WB, UNIDO, UNDP, FAO, ECA)</p> <p>3.4 Enhanced inter and intra-sectoral linkages, networks and partnerships to better integrate agriculture, industry (agro-processing) and services (from small to medium to large scale enterprises). [WB, UNIDO, UNDP, FAO, IFAD]</p> <p>3.5 National and regional institutions that provide PSD and trade support services supported in technology enhancement</p>	<p>MoI, MoFED, MoARD, MoLSA, Ministry of Culture and Tourism, ESTC, CSA, Regional Administrations, ECC and City Chambers, relevant CSOs, including co-operatives, academic institutions, donors, relevant private enterprises, FEMSEDAs, REMSEDAs, sectoral associations, and Quality and Standards Authority of Ethiopia.</p> <p>IAEA will arrange</p>	<p><b>WB pipeline:</b> CBAS, CBPS, Value-chains, PRSCs</p> <p><b>UNDP:</b> \$4,400,000</p> <p><b>ILO:</b> \$50,000</p> <p><b>ECA:</b> \$300,000</p> <p><b>FAO:</b> \$300,000</p> <p><b>UNIDO:</b> \$3,000,000</p> <p><b>IAEA:</b> \$250,000</p> <p><b>IFAD pipeline</b></p>

Country Programme Outcomes	Country Programme Outputs	Role of Partners <sup>6</sup>	Resource Mobilization* Targets
	<p>standards, certification, management, marketing and financing. (WB, UNIDO, UNDP, FAO, IFAD)</p> <p><b>3.6</b> Ethiopia's WTO accession process supported. (WB, UNIDO, UNDP, FAO, ECA)</p> <p>3.7 Strengthened institutions in post-harvest loss reduction and environmentally friendly processing and preservation methods (WB, UNIDO, UNDP, FAO, IFAD)</p> <p>3.8 Operational Non-Destructive Testing (NDT) facility supplying inspection services in support of quality control in industry</p>	<p>training and certification of NDT practitioners and supply inspection equipment.</p> <p>The Metal Products Development centre will establish a national NDT facility.</p>	
<p><b>4. Improved institutional capacities at federal and regional levels (MoFED, Regional Bureaux and other stakeholders) in monitoring, evaluation and implementation of the economic growth corridor</b></p> <p><b>Lead agency:</b> UNDP, UNFPA</p>	<p><b>4.1</b> Capacity strengthened and technical support provided to the national and regional authorities responsible for collection, analysis and dissemination of basic information on population, demographic, agricultural, business and labour force issues (census, sample surveys, etc.) and advocacy for their regular and wide usage in national/regional policy monitoring, evaluation and adjustments and in business decision making, especially as they relate to EGCs. (UNFPA, FAO, UNDP, WB, ILO, ECA, IFAD)</p> <p><b>4.2</b> Capacity build in enhancing the framework and mechanisms for coordination, monitoring and evaluation at federal and regional levels, especially as they relate to productivity enhancement and the realisation of increased access to decent work within the EGC (ILO, UNIDO, WB, UNDP, IFAD)</p> <p><b>4.3</b> Monitoring and evaluation of measures taken to reduce the</p>	<p>MoFED, MoTI, CSA, MoH, MoARD, Health and Nutrition Institute, Ministry of Labour and Social Affairs, Regional Administrations and the private sector.</p>	<p><b>UNICEF:</b> \$100,000</p> <p><b>WB<sup>7</sup> pipeline:</b> PSCAP Decentralized Capacity Building</p> <p><b>UNFPA:</b> \$33,000,000</p> <p><b>UNDP:</b> \$4,000, 000</p> <p><b>ILO:</b> \$50,000</p> <p><b>UNIDO:</b> \$50,000</p> <p><b>UNAIDS:</b> \$50,000</p> <p><b>FAO:</b> \$3,800,000</p>

<sup>7</sup> UNDAF will closely coordinate with WB to connect Country Programme Outputs to the pipelines for investment and analytic work.

Country Programme Outcomes	Country Programme Outputs	Role of Partners <sup>6</sup>	Resource Mobilization* Targets
	impact of HIV/AIDS, malaria and other disease of poverty on overall productivity and poverty reduction within the EGC. (WHO, UNICEF, UNDP, UNAIDS, UNFPA, ILO, UNIDO, WB)		<i>IFAD</i> pipeline

*\*All budget amounts are indicative and not resourced, but targets as per the budget plans for the new country programmes for each agency.*

**.5.iii.1.1.1 Joint Programmes**

There will be one joint programme in this area

**Coordination Mechanisms and Programme Modalities**

To be developed after consultations and agreement with GoE.

## **UNDAF Results Matrix on Good Governance**

### **National priority or goals (PASDEP):**

- Ethiopia is committed to open, transparent and democratic governance that respects the rights of all of its citizens, as enshrined in the Constitution
- Under PASDEP the capacity of MPs, Parliament and political institutions will be enhanced through training in policy formulation, legislative drafting, parliamentary working procedures, oversight functions and the role of MPs and political parties
- New laws will be drafted and enacted in a number of key domains, including revisions to civil and commercial law, human rights, sexual/gender harassment, and children's rights, and HIV/AIDS-affected persons' rights
- Continue to strengthen the judicial and court systems, to reduce delays and increase capacity
- Continue to decentralize responsibility to the *woreda* level and strengthening the *woreda* governments so that they have the capacity to manage and deliver services
- Continue to increase consultation with different groups in society, finding ways of effective communication between people and government, especially in the rural areas, give women greater participation in consultation and decision-making
- Continue to strengthen the civil service, concentrating on staffing: getting enough good, qualified staff
- Implement the environmental program and support community-based environmental management, with a major focus on combating desertification and reducing the effects of drought
- Operationalize the gender strategy
- Good institutions and good governance reduce growth volatility and shocks

**UNDAF outcome by the end of the programme cycle:** By 2011, contribute to the achievement of Millennium Declaration principles through enhanced democratic empowerment and participation at the grassroots level through justice sector reform, civil service and civil society capacity building and promotion of decentralization at all levels, including upholding of human rights principles, transparency and accountability.

Country Programme Outcomes	Country Programme Outputs	SECTION 6 Role of Partners	Resource Mobilization Targets*
<p><b>1. Improved access to and delivery of Justice for the population (in particular the poor, the vulnerable and the marginalized)</b></p> <p><b>Proposed Lead Agencies:</b> UNDP, OHCHR</p> <p><b>Proposed Lead Government institutions:</b> MoCB, MoLSA, Justice Sector Reform Programme (MoCB)</p>	<p>1.1 Independence of the Judiciary strengthened (OHCHR, UNESCO, UNDP, ILO)</p> <p>1.2 Legal Education System reformed (UNICEF, UNDP, ILO, UNESCO)</p> <p>1.3 Professional capacity of law enforcement agencies and social services improved (IOM, UNICEF, UNDP, OHCHR, UNFPA)</p> <p>1.4 Prevention, investigation and prosecution of corruption supported and increased awareness of ethics and anti corruption within Ethiopia</p>	<p>The Ministry of Capacity Building is the leading and coordinating institution of this programme.</p> <p><b>UNICEF:</b> The Judicial Training Institute, First Instance Court, Police Commission, Office of Prosecution and the MoJ will be the authorities coordinating and guiding the process to improve the trainings and curricula for the reform of the Legal Education System, MoLSA/BoLSA and the Ministry of Women’s Affairs will coordinate with the previous actors for the establishment of an integrate case management, CSOs will play a role of support to the previous institutions in the implementation of the activities.</p> <p><b>UNDP:</b> Donor coordination; Justice Sector Reform Programme (MoCB): participate in capacity building of judges, legal support staff, public prosecutors and lawyers at Federal and Regional levels; Prison Commissioner: participate in providing training on human rights to police and civil prison staff; Addis Ababa University School of Law: participate in Legal education upgrading in the country; Ombudsman: participate in strengthening investigate capacity of complaints through efficient case management processes</p> <p><b>IOM:</b> MoLSA: Referring potential migrants, trainees, delivering IEC materials to target groups, Prosecutors: Once trained, effective prosecution of alleged traffickers, Police officers: Once trained, increased and effective investigation of trafficking cases, Judges: Conviction of traffickers and perpetrators of similar crimes etc. Local CSOs: Helping in awareness creation, participating in victims’ assistance, legal aid (EWLA) etc.</p>	<p><b>UNICEF:</b> \$1,550,000</p> <p><b>UNDP:</b> \$3,000,000</p> <p><b>UNFPA:</b> \$1,500,000</p> <p><b>ILO:</b> \$ 100 000</p> <p><b>OHCHR:</b> \$200, 000</p> <p><b>IOM:</b> \$150,000</p> <p><b>UNESCO:</b> \$150,000</p>
Country Programme Outcomes	Country Programme Outputs	SECTION 7 Role of Partners	Resource Mobilization Targets*

<p><b>1. Continued...</b></p>		<p><b>ILO:</b> Training Centre for Judges, the Judiciary: participate in developing a training curriculum on International Labour Standards (ILS) and become progressively autonomous in delivering training on ILS. MoLSA, EEF, CETU: University Law Faculties (Addis and regions): develop progressively a university curriculum on ILS within existing Human Rights Master for law students. CSOs in legal aid: involved in formulating access to justice.</p>	
<p><b>2. Parliament and Electoral bodies (federal and regional) empowered to fully integrate the priorities of the population, in particular the vulnerable and marginalized groups</b></p> <p><b>Proposed Lead Agency:</b> UNDP, IOM</p> <p><b>Proposed Lead Government institutions:</b> Federal and Regional Parliaments, NEBE, MoJ</p>	<p>2.1 Parliament’s capacity for law making and revision strengthened at federal and regional levels (UNDP, ILO, IOM, OHCHR)</p> <p>2.2 Parliament’s consultation/representative function strengthened and technical function in designing poverty reduction legislation enhanced at federal and regional levels [UNDP – ILO - UNFPA]</p> <p>2.3 Parliament’s oversight functions strengthened.</p> <p>2.4 Institutional strengthening of electoral bodies including the National Electoral Board of Ethiopia [IOM – UNDP]</p>	<p><b>UNDP:</b> Participate in upgrading the skills of Federal and Regional Parliamentarians and staff of the secretariats’ offices towards attaining stronger roles in their law-making, oversight and representational functions; participating in institutional capacity strengthening of electoral bodies at federal and regional levels; donor coordination with DAG, Civil Society Organizations</p> <p><b>IOM:</b> Ministry of Justice: Chairing the task force on trafficking, providing information to IOM, Ministry of Foreign Affairs: Referring cases, accepting referred cases Ministry of Information: participating in mass media campaigns Ministry of Education: providing support to all school related activities, Federal and Addis Ababa Police Commissions: Referring VoTs for assistance, investigating cases, Main Department for Immigration and Nationality Affairs: Disseminating IEC materials, providing useful information to IOM</p> <p><b>ILO:</b> MoLSA, EEF and CETU; Ministry of Justice, House of Representatives: actively participate in elaborating /amending labour legislation and interact between themselves.</p>	<p><b>UNDP</b> \$17,000,000</p> <p><b>UNFPA:</b> \$2,000,000</p> <p><b>ILO:</b> \$100,000</p> <p><b>IOM:</b> \$50,000</p> <p><b>OHCHR:</b> \$100,000</p> <p><b>UN-Habitat:</b> \$50,000</p>
<p><b>Country Programme Outcomes</b></p>	<p><b>Country Programme Outputs</b></p>	<p><b>SECTION 8      Role of Partners</b></p>	<p><b>Resource Mobilization Targets*</b></p>
	<p>2.5 Capacity of elected counselors of</p>	<p><b>UN-Habitat:</b> Ministry of Works and Urban Development,</p>	

<b>2. Continued...</b>	local governments/City councils strengthened (UN-Habitat)	Regional Capacity Building Offices, Regional Management Institute, Ethiopian Civil Service Collage, UDCBO	
<p><b>3. Increased enjoyment of human rights at grassroots level through Government efforts in promotion and protection of human rights and civil society empowerment (with special emphasis on community based organizations) including the empowerment of vulnerable groups (in particular women and children) and their capacity to influence the development process.</b></p> <p><b>Proposed Lead Agencies:</b> OHCHR, UNICEF, UNFPA</p>	<p>3.1 Improved operational mechanisms of national human rights institutions (including Human Rights Commissioner and the Ombudsman office, Ombudsman for Children) (UNDP, OHCHR, UNICEF, IOM, ILO)</p> <p>3.2 Human rights education: Increased understanding and awareness of governmental, non-governmental bodies, the judiciary, communities, law enforcement agents, Parliament, grassroots organizations. (UNDP, UNESCO, OHCHR, UNICEF, IOM, ILO)</p> <p>3.3 Capacity of communities and civil society to promote a protective environment for vulnerable people fostered. (UNICEF, UNESCO, UNDP, IOM)</p>	<p><b>UNICEF:</b> Ombudsman for Children; Ministry of Women’s Affairs, MoLSA/BoLSA, MoJ Judicial Training Institute, First Instance Court, Police Commission, Office of Prosecution. MoYSC will be the prime beneficiaries and partners for capacity building CSOs, Women associations and youth associations will support the previous institutions in the implementation of the proposed activities.</p> <p><b>IOM:</b> Human Rights Commission, Ombudsmen, Ethics and Anti-Corruption Commission, MoLSA, Ethiopian Lawyers Women’s Association (EWLA): Ethiopian Teachers’ Association (ETA): assisting in awareness-raising activities within schools; Addis Ababa Youth Association</p> <p><b>ILO:</b> CSOs, (involved in child labour, women’s rights, informal economy), MoLSA, BoLSAs, Police and Immigration Authorities, Ministry for Women and Youth, Judiciary, Ministry of Justice, Training Centre for Judges and Prosecutors: strengthened.</p>	<p><b>UNICEF:</b> \$9,900,000</p> <p><b>UNDP:</b> \$4,000,000</p> <p><b>UNFPA:</b> \$5,000,000</p> <p><b>ILO:</b> \$500,000</p> <p><b>OHCHR:</b> \$250,000</p> <p><b>IOM:</b> \$300,000</p> <p><b>UNESCO:</b> \$100,000</p>
<b>Country Programme Outcomes</b>	<b>Country Programme Outputs</b>	<b>SECTION 9 Role of Partners</b>	<b>Resource Mobilization Targets*</b>
<b>Proposed Lead Government institutions:</b> MoLSA; Human Rights	3.4 Domestication: National legislation harmonized with international treaties and instruments to which Ethiopia is a party	... capacity in their fight against trafficking of domestic workers overseas; Regional BoLSAs and social partners: actively involved in job creation for rural	

<p>Commission, Ombudsman Office</p>	<p>3.5 Improved treaty reporting (ALL AGENCIES)</p> <p>3.6 Channel and mechanisms fostered for civil society and communities to engage with governing institutions. (UNICEF, UNESCO, UNDP, IOM)</p> <p>3.7 Increased knowledge of the people, especially women and young girls, about reproductive rights (UNFPA)</p>	<p>youth, particularly domestic workers at risk of being trafficked; Media providing for awareness campaigns on trafficking in Addis Ababa and the regions.</p> <p><b>UNDP:</b> Donor Coordination; HRC: creating awareness on human rights issues in government institutions, CSOs and the community at large; Ombudsman: investigate complaints through efficient case management processes</p> <p><b>UNFPA:</b> UNFPA will work with the Office of the Ombudsman and the Human Rights Commission to ensure that the public awareness of reproductive rights is promoted and that reproductive rights are enforced at national and regional level. UNFPA will work on capacity building with the Ministry of Women's Affairs and female parliamentarians to promote reproductive rights. UNFPA will work with the Ministry of Women's Affairs and the Ministry of Youth and Sports at the national, regional and <i>woreda</i> level to disseminate information about reproductive rights to the public, especially women and young girls.</p>	
<p><b>4. Decentralization promoted, resulting in more effective response to community driven needs and better and more equitable access to quality public services and utilities in, particular by the vulnerable, poor and marginalized.</b></p>	<p>4.1 Community demand-driven planning and management training programme for <i>woreda</i> administrative cadre encouraged and/or supported (UNDP, UNESCO, UNICEF, UNCDF)</p> <p>4.2 Relevant in-country and external human resources including Migration and Development strategies to mobilize the youth, health professionals, Ethiopian diaspora and remittances, to contribute to the effective, efficient and timely service delivery at all levels (IOM, UNDP, UNICEF, WB, UNFPA)</p>	<p><b>UNICEF:</b> BoLSA, the Ministry of Women's Affairs and /HAPCO will be responsible for the coordination, monitoring and evaluation of the proposed interventions. Youth Associations and CSOs will have a role in the implementation of the activities especially at the community level.</p> <p><b>UNCDF:</b> Coordinating partner: MoFED; Executing partner: Regional Government/BoFED ; Implementing partners: Zone/ BoFED, <i>woredas</i> and <i>kebeles</i> administrative councils</p>	<p><b>UNCDF:</b> \$1,200,000</p> <p><b>UNICEF:</b> \$1,250,000</p> <p><b>UNDP:</b> \$20,000,000</p>
<p><b>Country Programme</b></p>	<p><b>Country Programme Outputs</b></p>	<p><b>SECTION 10 Role of Partners</b></p>	<p><b>Resource Mobilization</b></p>

Outcomes			Targets*
<p><b>Proposed Lead Agencies:</b> UNDP, WB, IOM</p> <p><b>Proposed Lead Government institutions:</b> MoFED</p>	<p>4.3 Training and deployment of professional staff to <i>woredas</i> supported (IOM, UNDP, UNCDF)</p> <p>4.4 Improved communication, collaboration and linkages between Regional and <i>woreda</i> administrative structures (UNDP)</p> <p>4.5 Strengthened decentralized basic public utilities and service delivery, as well as community-based organizations (UNICEF, UNDP, UNCDF)</p> <p>4.6 Governmental institutional framework improved through the implementation of the Civil Service Reform (UNDP, IOM)</p> <p>4.7 Improved pro-poor social and economic policy formulation, monitoring and evaluation. (UNESCO, UNICEF, UNDP, UNFPA, UNCDF)</p> <p>4.8 Federal and regional governance institutions strengthened in order to manage public resources better. (WB, UNDP, WHO, UNCDF)</p>	<p><b>UNDP:</b> Participate in deepening the decentralization process (political, fiscal and administration) in collaboration with relevant government bodies including MoFED, BoFEDs, Management Institutions, ECSC, Ministry of Federal Affairs, Civil Service Reform Programme, Civil Service College and MoFED through all-round capacity strengthening.</p> <p><b>IOM:</b> Together with MoCB, MoFA, MoFED, Addis Ababa City Administration Investment Authority, Addis Ababa University, Ethiopian Civil Service Collage, will promote and facilitate the participation of the Ethiopian diaspora to contribute to development of the country. Ethiopian diaspora associations worldwide by harnessing the remittances, skills, knowledge and technology etc. from the Ethiopian diaspora through the MIDA (Migration for Development of Africa) programme (short-term consultancies, permanent and virtual returns and investment) for the social and economic development of the country.</p>	<p><b>UNFPA:</b> \$1,000,000</p> <p><b>UNESCO:</b> \$100,000</p> <p><b>IOM:</b> \$3,000,000</p>

Country Programme Outcomes	Country Programme Outputs	SECTION 11 Role of Partners	Resource Mobilization Targets*
<b>5. Diverse pluralistic media fostered and its role in supporting values</b>	5.1 Capacity of national media institutions strengthened, and press councils, professional institutions supported to develop ethical practices, professional standard, codes of conduct for media	<b>PARLIAMENT</b> is the designated lead agency.	<b>UNICEF:</b> \$2,100,000

<p><b>and principles of good governance and respect for human rights strengthened</b></p> <p><b>Proposed Lead Agencies:</b> UNESCO, UNICEF</p> <p><b>Proposed Lead Government institutions:</b> Federal and Regional Parliament</p>	<p>professionals (UNESCO, UNICEF, UNDP)</p> <p>5.2 National coverage of radio (including community radio), TV, newspapers improved (UNESCO)</p> <p>5.3 Build capacity of the media to foster communication for social change (UNESCO, UNDP, UNICEF, UNFPA)</p> <p>5.4 Foster an enabling environment for media reform through technical assistance and sharing of international best practice</p>	<p><b>UNICEF:</b> the Ministry of Information will coordinate the activities. Private sector will be considered to strengthen their internal capacities.</p> <p><b>UNDP:</b> Media round tables including editor’s associations and journalist associations, NEBE, Parliament, Ministry of Information</p>	<p><b>UNDP:</b> \$7,000,000</p> <p><b>UNFPA:</b> \$200,000</p>
<p><b>6. Millennium Development Declaration mainstreamed in all development programmes in Ethiopia.</b></p> <p><b>Proposed Lead Agency:</b> UNRCO</p> <p><b>Lead Government Institution:</b> MoFED</p>	<p>6.1 Regular preparation of national and regional MDGRs (translated into local languages) to track progress in the goals (All UN Agencies)</p> <p>6.2 Expanded awareness and understanding of the MD/MDGs among the broader populace and within Government, civil society and private sector organizations – at federal and regional levels (All UN Agencies, Millennium Campaign)</p> <p>6.3 Deepened integration of the MD/MDGs into national and regional development policies and strategies, though advocacy and capacity building, using and refining innovative tools like the MDGs NA (UN Agencies, Millennium Project)</p> <p>6.4 Strengthened linkages between national M&amp;E systems and DevInfo and annual progress reviews of PASDEP</p>	<p>MoFED will lead and coordinate and implement this component</p>	<p><b>UNRCO:</b> \$1,400,000</p>
<p><b>Joint Programming Areas</b></p> <p><b>Area 1:</b> Professional capacity of law enforcement agencies and social services improved (IOM, UNICEF, UNDP, OHCHR, UNFPA) <i>Lead Agency:</i> UNDP</p> <p><b>Area 2:</b> Human rights education: Increased understanding and awareness of governmental, non-governmental bodies, the judiciary, communities, law enforcement agents, Parliament, grassroots organizations. (UNDP, UNESCO, OHCHR, UNICEF, IOM, ILO) <i>Lead agency:</i> UNDP</p> <p><b>Area 3:</b> Civil Society involvement enhanced in good governance activities (UNDP, UNICEF, WFP, UNFPA, ILO) <i>Lead agency:</i> UNICEF</p>			

### **Coordination Mechanisms and Programme Modalities**

Within the donor community, there is Governance Thematic Working Group, a Human Rights Group, and Elections Donor Group, and PSCAP working group that works on decentralization and public sector reform. These existing donor coordination mechanisms were created under the DAG to harmonize the work of bilaterals and some multilaterals. At the moment, UNDP, UN OHCHR, ILO and WB participate regularly in one or more of these groups.

However, in order to improve coordination within the UN System, it may be necessary to set up working groups on Human Rights and Justice. The work of the UN System should then be harmonized with the DAG technical working groups.

## **SECTION 12 Proposed Areas of Enhanced Collaboration**

**CP Outcome 1: Justice** – Where the government partner is the same, agencies could have one lead agency be the main interlocutor. Additionally, agencies with significant technical expertise in Ethiopia could increase their technical support for the UNCT programme.

**CP Outcome 3: Human Rights** – In the outputs that are not selected for Joint Programmes, there will be increased coordination and the possibility of forming a Human Rights Working Group for the UN Agencies to improve coordination of activities, including technical support to the major institutions (Human Rights Commission/Ombudsman), as well for important event within the UN System, such as International Human Rights Day.

**CP Outcome 5: Decentralization** – UNCDF and UNDP will for a joint programme, and will work closely with UNICEF who is also working strongly in this area in service delivery.

\*All budget amounts are indicative and not resourced, but targets as per the budget plans for the new country programmes for each agency.

### **.12.i.1.1.1 UNDAF Results Matrix on HIV/AIDS**

#### **National priority or goals:**

- Reduce the spread of HIV infection
- Reduce the social and economic impact of HIV/AIDS

#### **PASDEP:** Programs planned for the PASDEP period include the following:

- A major mass media and community mobilization campaign, including focuses on in-school and out-of-school youth, and workplace interventions
- Much increased social marketing of condoms, with an objective of access for all sexually-active persons, and 60% use coverage
- Expansion and upgrading of voluntary testing and counseling, with VCTS integrated into all health centres, and training of more counselors and nurses
- Expansion of programs to prevent mother-to child transmission, with a target of 100% of HIV-positive mothers and their infants to be covered by testing and support by the end of the period
- Improved blood safety, with expansion of blood banks, equipment, and reagents, and supply of basic protection materials and training to all health care providers and traditional birth attendants
- Increased palliative care and provision of Anti-retroviral therapy with a target of giving proper palliative care to those who reach severe stage and are bedridden; and expanded ART provision (with a target of 39% of PLWHA by 2009/10) and training of health care staffing provision of ART
- Improved home-based care, with a target of reaching 50% of PLWHA and other support for persons living with AIDS, including help with income-generating activities
- These will all be complemented by on-going efforts to strengthen management, capacity, and monitoring and evaluation; and improve coordination and networks between coordinating offices, implementing partners and donors at all levels. There will also be a push to community empowerment and strengthening CSOs such as *Idirs* and *Mahibers* for sustained care and support services to reduce dependency on external resources
- New laws will be drafted and enacted related to protection of HIV/AIDS-affected person's rights

#### **Millennium Development Goals:**

MDG 6. Combat HIV/AIDS, malaria and other diseases. Target 7. Have halted by 2015 and begun to reverse the spread of HIV/AIDS.

**UNDAF outcome by the end of the programme cycle:** By 2011, achieve substantial progress towards reducing the vulnerability to HIV infection, especially of women and girls, and alleviating the impact of the epidemic, with emphasis on underserved and affected population.

Country Programme Outcomes	Country Programme Outputs	Role of Partners	Resource* Mobilization Targets
<p><b>1. HIV/AIDS effectively mainstreamed in the core activities of leaders and government institutions at all levels as well as civil society, private sector and communities</b></p> <p><b>Lead agencies:</b> UNDP, UNFPA</p> <p><b>Lead Government Agency:</b> Federal HAPCO</p>	<p>1.1 Three Ones fully implemented at federal and regional levels (FAO, ILO, UNAIDS, UNDP, UNESCO, UNFPA, UNHCR, UNICEF, WFP, WHO)</p> <p>1.2 HIV/AIDS targets activities integrated into the national development framework and into sectoral plans and budgets at all levels (FAO, ILO, UNAIDS, UNDP, UNESCO, UNFPA, UNICEF, WFP, WHO)</p> <p>1.3 Laws and policies relating to HIV/AIDS reviewed, revised, endorsed and implemented (FAO, ILO, UNAIDS, UNDP, UNESCO, UNFPA, UNHCR, UNICEF, WFP, WHO)</p> <p>1.4 Leadership, institutional and technical capacity within public sector, civil society and the private sector to manage and implement comprehensive, multi-sectoral responses strengthened (FAO, ILO, UNAIDS, UNDP, UNESCO, UNFPA, UNICEF, WFP, WHO)</p> <p>1.5 Leaders and managers within public sector, civil society and the private sector actively engaged in comprehensive, multi-sectoral response (FAO, ILO, UNAIDS, UNDP, UNESCO, UNFPA, UNICEF, WFP, WHO)</p> <p>1.6 Resource allocation for the responses to HIV/AIDS across sectors, especially the focus ones, increased (FAO, ILO, UNAIDS, UNDP, UNESCO, UNFPA, UNICEF, WFP, WHO)</p>	<p>Federal HAPCO / Ministry of Health will provide leadership and ensure coordination of and resource mobilization for all activities at the national level.</p> <p>Regional HAPCO / Bureau of Health will lead and coordinate activities at the regional level and will offer guidance, financial and technical support to actors at <i>woreda</i> level</p> <p>Federal ministries of Health, Education, Agriculture and Rural Development, Labour and Social Affairs, Road Transport, Information, Defense, and Police Commission will initiate and lead the development of policies as pertains to respective sectors; will provide leadership in integration of HIV/AIDS into sectoral plans and budgets; will ensure policy guidance, technical and financial support to respective sub-national institutions.</p> <p>Regional / <i>woreda</i> bureaus of Health, Education, Agriculture and Rural Development, Road Transport, Information, uniformed services will coordinate the implementation of activities at the respective levels</p>	<p><b>UNICEF:</b> \$800,000</p> <p><b>UNDP:</b> \$3,700,000</p> <p><b>UNFPA:</b> \$900,000</p> <p><b>UNAIDS:</b> \$1,000,000</p> <p><b>WFP:</b> \$150,000</p> <p><b>WHO:</b> \$100,000</p> <p><b>ILO:</b> \$100,000</p> <p><b>FAO:</b> \$3,000,000</p> <p><b>UNESCO:</b> \$350,000</p>

Country Programme Outcomes	Country Programme Outputs	Role of Partners	Resource Mobilization Targets
<p><b>1. continued...</b></p>	<p>1.7 Full package of instruments, tools and materials for building capacity of governmental institutions, civil society and communities to plan, mobilize resources, implement, monitor and evaluate comprehensive, multi-sectoral response at <i>woreda</i>-level available and in use (FAO, ILO, UNAIDS, UNDP, UNESCO, UNFPA, UNICEF, WFP, WHO)</p> <p>1.8 Regional Technical Support Teams established, trained and provide support at regional and <i>woreda</i> levels (FAO, ILO, UNAIDS, UNDP, UNESCO, UNFPA, UNICEF, WFP, WHO)</p>	<p>National Partnership Forum will facilitate multi-sectoral collaboration and coordination and will assist Regional Partnership Fora in facilitating action at sub-national levels.</p> <p>Regional Partnership Fora will facilitate multi-sectoral collaboration and coordination and the regional and sub-regional levels.</p> <p>Civil society organizations will participate in the planning, implementation and review of HIV/AIDS programmes and interventions at respective levels.</p>	
<p><b>2. Communities and vulnerable populations<sup>8</sup> mobilized and empowered to plan, implement and monitor their own responses to HIV/AIDS in a minimum of 50% of <i>woredas</i> in the focus regions.</b></p>	<p>2.1 Policy to enable and support community-based responses to HIV/AIDS updated where necessary and operationalized at the national and regional level (FAO, ILO, UNAIDS, UNDP, UNICEF, WHO)</p> <p>2.2 Increased capacity of schools, communities and vulnerable populations to participate effectively in developing and implementing plans and programmes related to HIV/AIDS, in a minimum of 50% of <i>woredas</i> in the focus regions (FAO, ILO, IOM, UNAIDS, UNDP, UNESCO, UNFPA, UNHCR, UNICEF, WFP, WHO)</p> <p>2.3 <i>Woreda</i>-level HIV/AIDS stakeholders (mainly BOARD, BOE, BOH, CSOs) capacitated to provide technical assistance to communities/vulnerable population and schools in planning and implementing community-based responses in a minimum of 50%</p>	<p>Federal HAPCO, Ministry of Education, Ministry of Health, Ministry of Labour and Social Affairs, Women’s Affairs Office, Ministry of Youth, religious groups will guide, inform and formulate the necessary policies / strategies for enhanced community responses to HIV/AIDS and protection/inclusion of vulnerable groups; will ensure, coordinate, provide technical support to, mobilize resources for and monitor their implementation.</p> <p>Regional HAPCO and regional Ministry Bureaus listed above will ensure</p>	<p><b>UNICEF:</b>\$2,500,000</p> <p><b>UNDP:</b> \$15,600,000</p> <p><b>UNFPA:</b>\$1,500,000</p> <p><b>UNAIDS:</b> \$600,000</p> <p><b>WFP:</b> \$400,000</p> <p><b>WHO:</b> \$200,000</p> <p><b>ILO:</b> \$150,000</p> <p><b>UNESCO:</b> \$250,000</p> <p><b>IOM:</b> \$300,000</p>

<sup>8</sup> Youth, children, including OVC, girls and women, food insecure people, female-headed and labour-poor households, workers, mobile populations, refugees, PLWHA

	woredas in the focus regions (FAO, ILO, UNAIDS, UNDP, UNESCO, UNFPA, UNHCR, UNICEF, WFP, WHO)	coordination of the implementation of the policies / strategies and resources at the regional level and provide technical support	
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Country Programme Outcomes	Country Programme Outputs	Role of Partners	Resource Mobilization Targets
<p><b>2. continued...</b></p> <p><b>Lead agencies:</b> UNDP, UNICEF</p> <p><b>Lead Government Agency:</b> Federal HAPCO</p>		<p>to implementers at regional and <i>woreda</i> level; will ensure participation and inclusion of communities and vulnerable groups in planning, implementation and monitoring.</p> <p><i>Woreda / Zonal</i> HAPCO representatives and key health, education and agricultural representatives will coordinate, plan and monitor the <i>woreda</i> level responses to HIV/AIDS and ensure the inclusion of communities and vulnerable groups in the process; may function as implementing &amp; coordinating partners for UN support to selected <i>woredas</i>.</p> <p>CBOs (youth groups, <i>idirs</i>, religious organizations, farmers' associations, women's associations), schools and CSOs will implement and monitor community based responses or responses by specific vulnerable groups. Some CSOs may provide overall technical assistance.</p>	
<p><b>3. Effective prevention and protection mechanisms in place and operationalized to reduce the spread of HIV/AIDS</b></p>	<p>3.1 Policies, legal and normative provisions technical guidelines and protocols on nutrition, education, OVC, refugees, and PMTCT updated where necessary and implemented at federal and regional levels (ILO, UNDP, UNAIDS, UNHCR, UNFPA, UNICEF, WFP, WHO)</p> <p>3.2 Capacity building programmes for prevention and protection in place and implemented at federal and regional levels (FAO, UNESCO, UNFPA, UNICEF, WHO, UNDP)</p> <p>3.3 Package of rapid interventions to protect vulnerable populations and prevent the spread of HIV in humanitarian emergencies developed and implemented (IOM, UNFPA, UNICEF, WFP, WHO, OCHA)</p>	<p>HAPCO, Ministry of Finance and Economic Development, Ministry of Health, Ministry of Education, Ministry of Youth, Ministry of Labour and Social Affairs, NOP, Women's Affairs Office, Administration for Refugees (ARRA), civil society and religious organizations at all levels will carry out policy and advocacy work, capacity building, planning and implementation of prevention programmes and monitoring and evaluation.</p> <p>Ethiopian Health and Nutrition Research Institute</p>	<p><b>UNICEF:</b>\$3,000,000</p> <p><b>UNFPA:</b> \$6,100,000</p> <p><b>UNAIDS:</b>\$1,050,000</p> <p><b>WFP:</b> \$150,000</p> <p><b>WHO:</b> \$100,000</p> <p><b>ILO:</b> \$100,000</p> <p><b>UNDP:</b> \$1,600,000</p>

<p><b>Lead agency:</b> WHO, UNFPA</p> <p><b>Lead Government Agency:</b> Federal HAPCO</p>	<p>3.4 Institutional and technical capacity of service providers to implement protection and prevention interventions for and with vulnerable populations increased in a minimum of 50% of <i>woredas</i> in the focus regions (FAO, ILO, IOM, UNESCO, UNFPA, UNHCR, UNICEF, WFP, WHO)</p>	<p>will be conducting research on developing an HIV/AIDS vaccine as part of the African AIDS Vaccine Programme (AAVP).</p>	
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Country Programme Outcomes	Country Programme Outputs	Role of Partners	Resource Mobilization Targets
<p><b>3. continued...</b></p>	<p>3.5 Capacity of government institutions, civil society and communities to carry out scientific and operational research, monitoring and evaluation as a tool for improvement of service delivery increased at the national level, in a minimum of 50% of <i>woredas</i> in the focus regions (FAO, UNAIDS, UNFPA, UNICEF, WHO, IAEA)</p> <p>3.6 Communities and vulnerable populations are aware of their rights to protection and prevention and exercise these rights in a minimum of 50% of <i>woredas</i> in the focus regions (FAO, ILO, IOM, UNESCO, UNFPA, UNHCR, UNICEF, WFP, UNDP)</p> <p>3.7 Service delivery systems for protection and prevention enhanced and expanded to respond to the demand at regional level (FAO, ILO, IOM, UNESCO, UNFPA, UNHCR, UNICEF, WFP, WHO)</p>		<p><b>IOM:</b> \$50,000 <b>UNESCO:</b> \$100,000 <b>FAO:</b> \$100,000 <b>IAEA:</b> \$100,000</p>
<p>4. Increased provision and utilization of treatment, care and support services for people living with or affected by HIV/AIDS</p> <p><b>Lead agencies:</b> WHO, UNICEF</p>	<p>4.1 Policies, legal and normative provisions technical guidelines and protocols on ART and care and support for PLWHA and OVC updated where necessary and implemented at federal and regional levels (ILO, UNFPA, UNESCO, UNICEF, WFP, WHO)</p> <p>4.2 Capacity building programmes for care and support in place and implemented at federal and regional levels (FAO, ILO, UNESCO, UNDP, UNHCR, UNICEF, WFP, WHO)</p> <p>4.3 Package of rapid interventions to ensure that vulnerable populations receive care</p>	<p>HAPCO and Ministry of Health will guide and co-ordinate the formulation, dissemination and effective use of guidelines and protocols on ART and care and support; implement and provide technical support / guidance for capacity building activities on care and treatment; ensure</p>	<p><b>UNICEF:</b> \$4,000,000 <b>UNFPA:</b> \$1,500,000 <b>UNAIDS:</b> \$1,050,000 <b>UNDP:</b> \$1,600,000</p>

	<p>and support in humanitarian emergencies, developed and implemented (IOM, UNFPA, UNICEF, WFP, WHO, OCHA)</p> <p>4.4 Institutional and technical capacity of service providers to implement comprehensive care (including ART) and support interventions for and with vulnerable populations increased in a minimum of 50% of <i>woredas</i> in the focus regions (FAO, ILO, IOM, UNESCO, UNHCR, UNICEF, WFP, WHO)</p> <p>4.5 Capacity of government institutions, civil society and communities to carry out scientific and operational research, monitoring and evaluation as a tool for improvement of service delivery increased at the national level, in a minimum of 50% of <i>woredas</i> in the focus regions (UNAIDS, UNFPA, WHO, IAEA)</p>	<p>integration of services and co-ordination of actors at all levels; mobilize resources</p> <p>DPPA, ARRA will participate in the design and enforcing/ implementation of minimum / basic measures / interventions in emergency operations.</p>	<p><b>IOM:</b> \$50,000</p> <p><b>UNESCO:</b> \$100,000</p> <p><b>IAEA:</b> \$100,000</p>
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<b>Country Programme Outcomes</b>	<b>Country Programme Outputs</b>	<b>Role of Partners</b>	<b>Resource Mobilization Targets</b>
<b>4. continued...</b>	<p>4.6 Communities and vulnerable populations are aware of their rights to treatment (including ART), care and support and exercise these rights in a minimum of 50% of <i>woredas</i> in the focus regions (FAO, ILO, IOM, UNESCO, UNFPA, UNHCR, UNICEF, WFP, WHO, UNDP)</p> <p>4.7 Service delivery systems for treatment, care and support enhanced and expanded to respond to the demand in the regions (FAO, ILO, IOM, UNESCO, UNHCR, UNICEF, WFP, WHO)</p>	<p>Ministry of Labour and Social Affairs, Ministry of Education, Ministry of Youth will take the lead in formulating policies and implementing plan of actions for enhanced access to socio-economic and educational support services by children and adolescents.</p> <p>CETU (Confederation of Ethiopian Trade Unions), EEF (Ethiopian Employers Federation), Ministry of Transport and Communication, Ministry of Defense, Federal Police Commission will facilitate the enhanced access of work force to care, treatment and support information and services and create an enabling environment based on the normative provisions and guidelines.</p> <p>Hospitals, health / VCT centers, civil society, business firms will implement / participate in capacity building activities for a scaled-up and integrated service provision; ensure effective care, treatment and support service delivery.</p> <p>Ethiopian Health and Nutrition Research Institute will assess nutrition intervention campaigns for people living with HIV/AIDS.</p>	<p><b>WFP:</b> \$48,000,000</p> <p><b>WHO:</b> \$1,000,000</p> <p><b>ILO:</b> \$150,000</p>

*\*All budget amounts are indicative and not resourced, but targets as per the budget plans for the new country programmes for each agency.*

### **Joint Programmes**

The entirety of the UNDAF focus area on HIV/AIDS is addressed through one joint programme focussing on the following areas:

**Area 1:** National Advocacy and Technical Capacity Building

Lead agency: UNFPA, UNDP

**Area 2:** *Woreda* Support (including in service delivery; utilizing regional systems and mechanisms)

Lead agency: WHO

**Area 3:** Emergency Response (related to disaster and emerging problems / gap in non-focus regions)

**.12.i.1.1.2 Lead Agency: WFP**

Specific focus sub-areas within the joint programme areas will be addressed as follows:

- Advocacy and Policy Dialogue (lead – UNFPA)
- Mainstreaming of HIV/AIDS (lead – UNDP)
- Social and Community Mobilization (lead – UNICEF)
- *Woreda* Support (lead – WHO)
- Scaling-up and integration of HIV/AIDS prevention, treatment, care and support services, with particular focus on VCT, PMTCT+ and ART (lead – UNFPA: prevention: UNICEF: care and support; WHO: treatment)  
Emergency Response (lead – WFP)

**Proposed Areas of Enhanced Collaboration:**

In the event that new areas requiring attention emerge, they will be discussed and considered as areas of enhanced collaboration.

**Coordination Mechanisms and Programme Modalities:**

Joint UN action within the HIV/AIDS component will be coordinated through the existing mechanism of UN Theme Group on HIV/AIDS; Technical Working Groups on Advocacy and on *woreda* support functioning under the UNTG will continue to serve as a mechanism for joint planning and operational coordination of UN activities. Coordination with the government and other development partners will be ensured through the mechanism of the National Partnership Forum, as well as existing sectoral fora and technical working groups.



## *UNDAF Results Matrix on Humanitarian Response, Recovery and Food Security*

### **National priority or goals:**

**The PASDEP Strategy:** The strategy embraces eight key elements: (a) accelerating growth through commercialization of agriculture and promotion of private sector development; (b) pursuing a geographically differentiated strategy that takes into account resource endowments, the potentials of rural-urban linkages and elevating the livelihoods of pastoralists; (c) containing the population growth rate; (d) unleashing the economic potential of women; (e) expanding technical infrastructure; (f) managing risk and volatility through livelihood diversification and measures aimed at macroeconomic and political stability; (g) scaling-up to reach the MDGs via expanding education, strengthening health and potable water development initiatives, capacity building and improved service delivery and soliciting higher amount and better quality foreign aid; and (h) creating jobs.

- **The DPPA definition of disaster and assistance:** Disaster means the development of a situation wherein a segment of the community or population of a locality cannot any longer meet the need for food and other basic necessities, due to natural or man-made calamities, with its daily life thus falling into crisis which renders it unable to survive without assistance from others. Assistance includes all measures taken to meet the need of the victims of disaster for food and other basic necessities of life.
- **The National Developmental Welfare Policy has 3 major objectives (p 65):** 1) expand participatory developmental social welfare programmes and services 2) study the causes of social problems and develop preventive measures based on knowledge generated by such studies 3) rehabilitate members of society who are already suffering from various social problems and require special treatment and conditions. Additionally, two general content of the policy relevant to the theme group are: social security programmes shall be expanded to keep abreast with the rate at which the economy is growing so as to progressively cover hitherto un-reached segments of the society (p 66 / 4.6). Efforts shall be made to plan and implement appropriate rehabilitative programmes and services to meet the needs of those members of society who are in especially difficult circumstances (p 66 / 4.7)
- **The New Coalition for Food Security and Livelihoods** is a strategy to enhance the shift from humanitarian assistance to longer-term development through harmonizing and coordinating the efforts of development partners and the scaling-up of best practice in this area. The coalition aims to focus on the most vulnerable populations, improving their production and access to food and land (PSNP and voluntary resettlement) as well as their health and nutritional status.

**MDGs:** All of the MDG goals are relevant. Emergencies strategically addressed with longer-term development in mind can contribute toward achieving all the goals.

**UNDAF outcome by the end of the programme cycle:** By 2011, significantly strengthened capacities of the Government, communities and other relevant stakeholders to respond to situations that threaten the lives and well-being of a significant proportion of a population, which require rapid and appropriate action to ensure their survival, care, protection and recovery while enhancing their resilience to shocks and leading to food security and sustainable livelihoods.

Country Programme Outcomes	Country Programme Outputs	Role of Partners	Resource* Mobilization Targets
<p><b>1. By 2011, the implementation of policies, strategies and coordination mechanisms are fully developed leading to:</b></p> <p><b>a) Food and nutrition security and sustainable livelihood</b></p> <p><b>b) Protection of vulnerable populations and enhancement of their physical, human and social assets ensuring a smooth transition between humanitarian responses and longer-term development.</b></p> <p><b>Lead agencies:</b> FAO, UNDP, WFP</p>	<p>1.1 In-depth diagnostic study on the status of the natural resources and livelihoods base conducted and implementable programme components identified within the areas of food and nutrition security and livelihood. (UNICEF, UNDP, WFP, FAO, OCHA, IFAD)</p> <p>1.2 Enhanced coordination within the context of a multi-sectoral response, and livelihood programmes operationally expanded to include health, nutrition, water and environmental sanitation (WES) and agriculture. (UNICEF, UNDP, WFP, FAO, OCHA, IFAD)</p> <p>1.3 Improved coordination mechanisms among Government, the UN and other stakeholders at federal, regional and local levels to improve management of emergency, recovery and long-term development (OCHA, UNDP, WFP, FAO, WHO, UNICEF, UNFPA)</p> <p>1.4 Better community management of natural resources including participatory community-based water-shed management, irrigation (including in refugee-impacted and resettlement areas) to enhance rural income, agro-biodiversity and the supply of fuel wood, fodder and construction materials through conservation and sustainable utilization at grassroots level (FAO, WFP, UNDP, UNHCR, IFAD)</p>	<p><b>1.1</b> MoARD will coordinate the exercise and liaise with other relevant ministries.</p> <p><b>1.2</b> MoARD: will strengthen the Food Security Steering Committee, and promote the revitalization of the Coalition approach and continued commitment of the Government and development partners to this process. Also, Ministries of Agriculture and Rural Development, Health, Water, Education and Social Affairs: will develop and support further access to social services in the Woredas, targeted by the NCFS.</p> <p><b>1.3</b> MoARD, FSCB, DPPA (overall coordination), MoH and MoWR will be on a task force to be set-up and contribute to the development of a coordination mechanism to improve management of emergency and recovery programmes.</p> <p><b>1.4</b> MoARD, through its natural resources division/sector, will facilitate implementation of the UN agencies' support, and lead the development of a sustainable land management (SLM) strategy.</p>	<p><b>UNICEF:</b> \$ 11,000,000 <i>(recovery / transition)</i></p> <p><b>FAO:</b> \$ 30,000,000</p> <p><b>WFP:</b> \$ 365,000,000 <i>(Recovery and Development)</i></p> <p><b>UNDP:</b> \$ 30,000,000</p> <p><b>OCHA:</b> \$1,000,000</p> <p><b>UNHCR:</b> \$4,500,000</p> <p><b>UNFPA:</b> \$500,000</p>

Country Programme Outcomes	Country Programme Outputs	Role of Partners	Resource* Mobilization Targets
<p><b>1. continued....</b></p> <p><b>Implementation modalities:</b> Support to existing Government coordination mechanisms will be an essential feature of the UN system's involvement in ensuring the development and implementation of complementary relief and recovery related strategies. Furthermore, the UN will support scaling-up of projects that will enhance the resilience of the vulnerable population to shocks.</p>	<p>1.5 Social mobilization and community-level participation in decision-making, particularly among women, in the planning, distribution and management of emergency, recovery and longer-term development strengthened (WFP, UNICEF, UNFPA, UNDP, FAO)</p> <p>1.6 Linkages between HIV/AIDS and food security and reproductive health issues integrated into policies and mechanisms for protection of vulnerable populations in emergency and recovery operations (UNAIDS, OCHA, WFP, UNICEF, UNHCR, IOM, UNDP, UNFPA, FAO, IFAD)</p> <p>1.7 Strengthened policies and strategies to reduce gender-based violence, especially against women and girls in humanitarian crises and post-conflict situations and to improve child protection (UNFPA, UNICEF, IOM, UNDP)</p> <p>1.8 Advocacy for policies that link emergency, recovery and longer-term development promoted, including an exit strategy from reliance on emergency assistance for chronic vulnerability advocated and promoted (OCHA, UNDP, WFP, UNICEF, UNHCR, WHO, FAO, UNFPA, UNAIDS, IFAD)</p> <p>1.9 Appropriate strategies for livelihood and food security interventions in pastoralist areas and other emerging regions enhanced (FAO, UNDP, OCHA-PCI, UNICEF, WFP, IFAD)</p> <p>1.10 Better implementation and monitoring of the Productive Safety Net Programme promoted (WFP, OCHA, FAO, UNDP, IFAD)</p> <p>1.11 Support provided to the development of a national IDP policy which includes all aspects of internal displacement (OCHA, IOM, UNDP, UNICEF, UNHCR)</p>	<p><b>1.5</b> MoARD, Ministry of Women Affairs, DPPA and CSOs will take part to ensure that the guidelines governing gender representation are adhered to.</p> <p><b>1.6</b> HAPCO (overall coordination), DPPA, MoH, and CSOs will be on the technical task force to be established to look into promoting this, and support in the capacity building of regions to facilitate the integration of HIV/AIDS and reproductive health issues.</p> <p><b>1.7</b> MoLSA (overall coordination), MoFA and the Ministry of Women Affairs will closely work with the UN agencies and affected regions with humanitarian crisis and conflict and ensure implementation of strategies/policies to reduce gender-based violence.</p> <p><b>1.8</b> MoARD/ FSCB (overall coordination), DPPA will be major partners in the development of a strategy that streamlines donor s' assistance along predictable and multi-annual lines.</p> <p><b>1.9</b> MoFA, PCDP, MoARD/ FSCB, regional authorities, CSOs when applicable etc will take active part in the preparation of the strategy.</p> <p><b>1.10</b> FSCB to ensure involvement of pertinent UN agencies in the various field assessment missions and technical taskforces established to oversee the implementation of PSNP.</p> <p><b>1.11</b> MoFA (overall coordination), MoARD, DPPA, and CSOs will be on a task force to be formed to facilitate this. Regions will provide all the necessary background documentation. MoFA and MoARD will lead the drafting of the policy with UN agencies support, as required.</p>	<p><b>IOM:</b> \$1,000,000</p> <p><b>UNAIDS:</b> \$ 50,000</p>

<b>Country Programme Outcomes</b>	<i>Country Programme Outputs</i>	<b>Role of Partners</b>	<b>Resource* Mobilization Targets</b>
	1.12 Capacity building in support of establishing a zone free of the tsetse and typanosomosis problem in the Sourthern Rift Valley, and assisting rural communities in agricultural and livestock development	<p><b>1.12</b> IAEA supports the Southern Tsetse Eradiation Project (STEP) through capacity building for the implementation of the sterile insect technique (SIT). The implementation of the programme is supervised and coordinated by the Ethiopian Science and Technology Agency under the guidance of a national steering committee headed by the Minister of Agriculture.</p> <p>FAO works closely with IAEA in this undertaking and</p>	<p><b>IAEA:</b> \$1,800,000</p> <p><b>IAEA and FAO</b> <i>(through UNTFHS):</i> \$1,700,000</p>

Country Programme Outcomes	Country Programme Outputs	Role of Partners	Resource* Mobilization Targets
<p><b>2. By 2011, significantly increase capacity to deliver and provide access to essential commodities and services in emergency situations, cases of food, nutrition and livelihood insecurity with direct linkages between humanitarian and longer-term development initiatives</b></p> <p><b>Leading agencies:</b> WFP and UNICEF</p> <p><b>Implementation Modalities:</b> Enhanced UN capacity support at regional and <i>woreda</i> levels in order to mainstream humanitarian and recovery mechanisms in the various governmental structures in line with the PSCAP.</p>	<p>2.1 Enhanced multi-sectoral response to displaced, refugee and other vulnerable populations in emergencies and more reliable funding mechanisms (Joint Humanitarian Appeals and other mechanisms) (WFP, UNICEF, UNHCR, FAO, WHO, OCHA, UNFPA)</p> <p>2.2 Improved, diversified and better protected livelihoods for vulnerable agro-pastoralists and pastoralists in emerging regions through a range of asset protection and improved coping mechanisms against disasters (WFP, UNDP, UNICEF, FAO, OCHA-PCI)</p> <p>2.3 Improved health and nutrition status of 90% of children, pregnant, and lactating women in chronically food-insecure areas through outreach activities (EOS) and targeted supplementary feeding (WFP, UNICEF, WHO, UNFPA)</p> <p>2.4 Adults and children living in areas prone to epidemics (including malaria, measles, meningitis and polio) protected through adequate surveillance, preparedness and response measures (UNICEF, WHO)</p> <p>2.5 Ensured educational access for 70 % of vulnerable children in emergencies (UNICEF, UNESCO, WFP)</p> <p>2.6 Develop capacities to address the emergency requirements of water supply and sanitation of 1.2 million people at any time (UNICEF, WHO)</p>	<p>supports conventional tsetse control and suppression, agricultural and livestock development.</p> <p>2.1 DPPA: Overall coordination. Coordinate assessments and appeal process, and seek funds. MoARD, ARRA, Ministries of Health, Water, Education and Social Affairs: coordination of sectoral disaster preparedness, of humanitarian responses and resource mobilization.</p> <p>2.2 Federal Affairs (overall coordination), FSCB, DPPA, Ministries of Health, Water, Education and Social Affairs: participate in the development of cross-sectoral strategies for enhanced access to social services.</p> <p>2.3 DPPA: provide coordination and capacities for the food component of EOS. MoH: provide coordination and capacities for the health component. CSOs: support therapeutic feeding when and where required</p> <p>2.4 DPPA: coordinate and support the development of a more multi-sectoral EW and MoRAD, NMSA and surveillance system and response mechanisms. MoH and MoWR establish sector-specific management unit and early warning system to contribute to data collection and analysis in health and water within the DPPA EWS at federal, regional and <i>woreda</i> level.</p> <p>2.5 MoE: provide overall coordination and the policy and implementation framework for a more coherent approach for education in crisis environments. MoE and affected regions will facilitate implementation of the support coming from the UN agencies and other development partners in a coordinated manner.</p> <p>2.6 DPPA - coordination, MoWR: establish an emergency preparedness and response unit and develop preparedness</p>	<p><b>UNICEF:</b> \$ 75,000,000 <i>(recovery/transition:</i> \$ 50 mill – relief: \$ 25 mill)</p> <p><b>FAO:</b> \$ 30,000,000</p> <p><b>UNFPA:</b> \$ 2,000,000</p> <p><b>WFP:</b>\$370,000,000 <i>(Recovery and Development:</i> \$220,000,000, <i>Relief:</i> \$150,000,000)</p> <p><b>UNDP:</b> \$6,000,000</p> <p><b>UNESCO:</b>\$350,000</p> <p><b>OCHA:</b> \$1,000,000</p>

Country Programme Outcomes	Country Programme Outputs	Role of Partners	Resource* Mobilization Targets
	2.7 Enhanced livelihoods of resettled populations through supporting the regional governments to deliver social services (UNICEF, FAO, WFP, UNDP)	and response mechanisms. <b>2.7</b> FSCB will facilitate access to current information on the government resettlement initiative, and coordinate the support going to the regions / communities for effective implementation	
<p><b>3. By the end of 2011, information, advocacy and communication systems are in place to ensure i) more effective community, regional, national and international humanitarian response and recovery and, ii) scaling-up of good practices leading to sustainable development</b></p> <p><b>Lead agency:</b> FAO and OCHA</p> <p><b>Implementation modalities:</b> Mapping and harmonizing existing information systems and supporting the development of coherent M&amp;E systems will form the basis of this implementation modality.</p>	<p>3.1 Enhanced information and knowledge management within government related to emergencies, recovery, food and livelihood security (OCHA, UNDP, WFP, UNICEF, FAO, WHO)</p> <p>3.2 Effective use of information systems at all levels (including local communities) to identify vulnerability profiles, to gather, analyze and map key multi-sectoral information and trigger pertinent humanitarian responses and recovery programs. (OCHA, UNDP, WFP, UNICEF, FAO, UNFPA, WHO)</p> <p>3.3 Improved assessment of disaster risks and enhanced early warning (WFP, UNICEF, FAO, WHO, OCHA)</p> <p>3.4 Increased linkages with regional and international structures to enhance knowledge and capacity on disaster management (e.g. ISDR, AU, NEPAD, IGAD and various networks on crisis prevention and recovery) including cross-border issues (OCHA, UNDP, WFP, UNICEF, FAO, WHO)</p> <p>3.5 Expanded awareness of the significance of conflict, conflict management and cross border issues (UNDP, OCHA, UNHCR, IOM)</p>	<p>3.1 This will be well coordinated between DPPA and other departments of MoARD (overall coordination), e.g. FSCB, CSA, to facilitate effective information flow on issues of emergency, food and livelihood security. USAID, CIDA, etc are expected to support with funding of this.</p> <p>3.2 MoARD, DPPA, MoFA (overall coordination FSCB) will be key players in capacity building for developing such programmes by involving the various regional bureaus to implement this. EMAO will also be involved in the area of Mine Action and Mine Risk Education</p> <p>3.3 DPPA: Coordinate assessments and appeal process, and seek fund. Ministries of Health, Water, Agriculture and Rural Development, Education and Social Affairs: development and / or strengthening of sectoral information and warning systems to be linked to DPPA EWS. CSOs: support in specific <i>woredas</i>.</p> <p>3.4 Under the coordination of the Government (DPPA) member institutions will play a key role</p> <p>3.5 MoFA will be the interlocutor for this endeavor. With reference to awareness raising activities, such as organization of training seminars, the AU, Donors, CSOs will take part as appropriate. IGAD will also be involved.</p>	<p><b>UNICEF:</b> \$4,000,000 (recovery/transition)</p> <p><b>FAO:</b> \$5,000,000</p> <p><b>UNDP:</b> \$4,000,000</p> <p><b>UNFPA:</b>\$1,000,000</p> <p><b>WFP:</b> \$3,000,000</p> <p><b>OCHA:</b> \$100,000</p> <p><b>IOM:</b> \$1,500,000</p> <p><b>UNHCR:</b> \$250,000</p> <p><b>IFAD:</b> \$200,000</p>

Country Programme Outcomes	Country Programme Outputs	Role of Partners	Resource* Mobilization Targets
	3.6 Strengthened and harmonized M&E and reporting systems (WFP, FAO, UNICEF, UNDP, IFAD)	3.6 MoARD/FSCB will ensure that such systems are in place and well implemented. Donors such as the WB, USAID, CIDA, DCI (Ireland), will as well participate together with UN agencies in the strengthening and harmonization of the M&E system. Regional bureaus will take part in capacity building.	

*\*All budget amounts are indicative and not resourced, but targets as per the budget plans for the new country programmes for each agency.*

### *Joint Programme Areas*

**Area 1:** In-depth diagnostic work on the status of the natural resources and livelihoods base conducted and implementable programme components identified (UNICEF, UNDP, WFP, FAO, OCHA, IFAD)

**Leading agency:** FAO

**Area 2:** Appropriate strategies for livelihood and food security interventions in pastoralist/agro-pastoralist areas and other emerging regions enhanced and improved, diversified and better protected livelihoods for vulnerable agro-pastoralists and pastoralists in emerging regions through a range of asset protection and improved coping mechanisms against disasters (WFP, UNDP, UNICEF, FAO, IFAD, OCHA-PCI)

**Leading agency:** FAO

**Area 3:** Improved health and nutrition status of 90% of children, pregnant, and lactating women in chronically food-insecure areas through outreach activities (EOS) and targeted supplementary feeding (WFP, UNICEF, WHO, UNFPA)

**Leading agencies:** UNICEF and WFP

*Proposed Areas of Enhanced Collaboration (Areas of enhanced collaboration have been selected as they already are or will be areas around which the agencies commit to coordinate more particularly and actively. These areas may lead to joint programmes at a later stage. The facilitating agency will ensure that the proper momentum is maintained within the UN system and dialogue with the stakeholders established):*

**Area 1:** Enhanced coordination within the context of a multi-sectoral response and livelihood programmes operationally expanded to include health, nutrition, water and environmental sanitation (WES) and agriculture. (UNICEF, UNDP, WFP, FAO, OCHA, IFAD)

*Leading agency:* OCHA, WFP, UNICEF

**Area 2:** Better community management of natural resources including participatory community-based water-shed management, irrigation (including in refugee impacted and resettlement areas) to enhance rural income, agro-biodiversity and the supply of fuel wood, fodder and construction materials through conservation and sustainable utilization at grassroots level (FAO, WFP, UNDP, UNHCR, IFAD)

*Leading agency:* WFP

**Area 3:** Advocacy for policies that link emergency, recovery and longer-term development promoted, including an exit strategy from reliance on emergency assistance for chronic vulnerability advocated and promoted (OCHA, UNDP, WFP, UNICEF, UNHCR, WHO, FAO, UNFPA, UNAIDS, IFAD)

*Leading agency:* OCHA

**Area 4:** Social mobilization and community level participation in decision-making, particularly among women, in the planning, distribution and management of emergency, recovery and longer-term development strengthened (WFP, UNICEF, UNFPA, UNDP, FAO)

*Leading agency:* UNDP

**Area 5:** Support provided to the development of a national IDP policy which includes all aspects of internal displacement (OCHA, IOM, UNDP, UNICEF, UNHCR)

*Leading agencies:* UNDP and OCHA

**Area 6:** Enhanced livelihoods of resettled populations through supporting the regional governments to deliver social services (UNICEF, FAO, WFP, UNDP)

*Leading agency:* UNDP

**Area 7:** Enhanced information and knowledge management within government related to emergencies, recovery, food and livelihood security. Effective use of information systems at all levels (including local communities) to identify vulnerability profiles, to gather, analyze and map key multi-sectoral information and trigger pertinent humanitarian responses and recovery programmes. (OCHA, UNDP, WFP, UNICEF, FAO, UNFPA, WHO)

*Leading agencies:* UNDP and OCHA

**Coordination Mechanisms and Programme Modalities:** The UNCT will coordinate around the key food security related areas for coordination through the Ministry of Agriculture and Rural Development. Support to existing government coordination mechanisms will be an essential feature of the UN system's involvement in ensuring the development and implementation of complementary food and livelihood security, relief and recovery related strategies. Besides, the UN will support scaling-up of projects that will enhance the resilience of the vulnerable population to shocks. A key feature of the approach will be to enhance the UN capacity to support regions and *woredas* in order to mainstream the development of sustainable food security, mitigation and recovery mechanisms in the various governmental structures in line with the PSCAP. Mapping and harmonizing existing information systems and supporting the development of coherent M&E systems will also form an important component of this implementation modality.

## **UNDAF Monitoring and Evaluation Matrix: HIV/AIDS**

<b>UNDAF and Country Programme Outcomes</b>	<b>Indicators and Baseline</b>	<b>Source of Verification</b>	<b>Risks and Assumptions for each UNDAF and CP Outcome</b>
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UNDAF and Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome
<p><b>By 2011, achieve substantial progress towards reducing the vulnerability to HIV infection, especially of women and girls, and alleviating the impact of the epidemic, with emphasis on marginalized and affected population.</b></p>	<ul style="list-style-type: none"> <li>- HIV prevalence among 15-24 year old pregnant women (disaggregated by region and urban / rural settings) (MDG6; UNGASS; PASDEP) Baseline: 8.6 % (2005) Target: 8.4% (by 2010, PASDEP)</li> <li>- Adult incidence of HIV (PASDEP) Baseline: 0.56% (2005) Target: 0.52% (by 2010, PASDEP)</li> <li>- Percentage of adults and children with HIV still alive 12 months after initiation of antiretroviral therapy (UNGASS) Baseline: (2005) Target: to be defined by the Government</li> <li>- Percentage of infants born to HIV infected mothers who are infected (UNGASS) Baseline: (2005) Target: to be defined by the Government</li> </ul>	<p>Sentinel surveillance report / MOH Baseline – PASDEP</p> <p>Sentinel surveillance report / MOH Baseline – PASDEP</p> <p>MOH Baseline – UNGASS 2006 Report</p> <p>MOH Baseline – UNGASS 2006 Report</p>	<p>HIV/AIDS will remain high on the political agenda.</p> <p>Funds will be available, including PEPFAR and the Global Fund</p> <p>Human resource capacity will not fall below a critical level.</p> <p>Accurate and up-to-date data, including financial data will be available.</p> <p>Both protracted and incidental emergency situations will not further compromise the response to HIV/AIDS.</p>

UNDAF and Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome
<p><b>Outcome 1 HIV/AIDS effectively mainstreamed in the core activities of leaders and government institutions at all levels as well as civil society, private sector and communities.</b></p>	<p>1.1 Amount of national funds / percentage of annual Government budget spent on HIV/AIDS (UNGASS, PASDEP). Baseline: &gt;1.5% (2005) Target: 2.5% (by 2010, PASDEP)</p> <p>1.2 Percentage of sectors (state &amp; none state ) having workplace policies &amp; strategies (disaggregated by region / GOs, CSOs, POs and CBOs ) (UNGASS, PASDEP) Baseline: &gt;15% (2005) Target: 80% (by 2010, PASDEP)</p> <p>1.3 National Composite Policy Index by component (UNGASS) Baseline: (2005); Target: to be defined by the Government</p> <p>1.4 One comprehensive national HIV/ AIDS framework with workplan and budget endorsed by key stakeholders under implementation Baseline: no (2005); Target: yes (2011)</p> <p>1.5 Number of regions with regional comprehensive HIV/AIDS programmes with workplan and budget aligned with the national HIV/AIDS framework Baseline: baseline assessment (2006); Target: 11 (2011)</p> <p>1.6 One national coordinating authority, recognised in law and with broad-based multi-sectoral support and full technical capacity for coordination, monitoring and evaluation, resource mobilisation, financial tracking and strategic information management exists Baseline: no (2005); Target: yes (2011)</p> <p>1.7 One national monitoring and evaluation system, integrated into the national HIV/AIDS framework, with a set of standardised indicators operationalised at the federal level and in all 11 regions Baseline: no (2005); Target: yes (2011)</p> <p>1.8 Full package of the instruments and tools for building capacity at <i>Woreda</i> level available Baseline: no (2005); Target: yes (2008)</p> <p>1.9 Number of Regional Technical Support Teams established, trained and providing support at the regional and <i>Woreda</i> levels Baseline: 0 (2005); Target: 11 (2011)</p>	<p>MOFED / HAPCO Baseline – PASDEP</p> <p>MOLSA / EEF / CETU Baseline - PASDEP</p> <p>National Composite Policy Index Questionnaires Baseline – UNGASS 2006 Report</p> <p>Survey Baseline – Three Ones assessment 2005</p> <p>Survey Baseline – assessment to be carried out</p> <p>Survey Baseline – Three Ones assessment 2005</p> <p>Survey Baseline – Three Ones assessment 2005</p> <p>UN Country Team in Ethiopia Programme monitoring report Baseline – UN ISP</p>	

UNDAF and Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome
<p><b>Outcome 2</b> Communities and vulnerable populations<sup>9</sup> mobilized and empowered to plan, implement and monitor their own responses to HIV/AIDS in a minimum of 50% of <i>Woredas</i> in the focus regions.</p>	<p>2.1 Number / percentage of <i>Woredas</i> that have institutionalised mechanisms for community / vulnerable populations' participation in the planning, implementation and monitoring of the <i>Woreda</i>-level responses to HIV/AIDS Baseline: assessment (2006 – 2010) Target: minimum 50% of <i>Woredas</i> in the supported regions (2011)</p> <p>2.2 Number / percentage of <i>Woredas</i> with at least one kebele having at least one HIV programme / project developed and implemented by communities / vulnerable populations Baseline: assessment (2006 – 2010) Target: minimum 50% of <i>Woredas</i> in the supported regions (2011)</p> <p>2.3 Number / percentage of <i>Woredas</i> with at least one kebele having at least one HIV programme / project developed and implemented with the participation of communities / vulnerable populations Baseline: assessment (2006 – 2010) Target: minimum 50% of <i>Woredas</i> in the supported regions (2011)</p>	<p>Programme / project reports Field monitoring forms Baseline – baseline assessment</p> <p>Programme / project reports Field monitoring forms Baseline – baseline assessment</p> <p>Programme / project reports Field monitoring forms Baseline – baseline assessment</p>	
<p><b>Outcome 3</b> Effective prevention and protection mechanisms in place and</p>	<p>3.1 Percentage / number of pregnant women who tested HIV positive having received a complete course of ARV prophylaxis to reduce the risk of mother-to-child transmission in the last 12 months (disaggregated by age, region and urban / rural settings) (UNGASS, PASDEP) Baseline: 42% (2005) Target: 50% (2010, PASDEP)</p>	<p>HMIS / MOH Baseline - PASDEP</p>	

<sup>9</sup> Youth, children, including OVC, girls and women, food insecure people, female-headed and labour-poor households, workers, mobile populations, refugees, PLWHA

<sup>10</sup> VCT, PMTCT, male and female condom promotion and distribution, HIV/AIDS prevention education, life skills education, IEC / BCC, Anti-AIDS Clubs, Youth Centres, youth-friendly health services, counseling and nutrition support, etc.

UNDAF and Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome
operationalized to reduce the spread of HIV/AIDS	<p>3.2 Percentage of people aged 15-24 years reporting the use of a condom during last sexual intercourse with a non-regular sexual partner (disaggregated by gender, region and urban / rural settings) (UNGASS, PASDEP) Baseline: &gt;55% (2005) Target: 70% (by 2010, PASDEP)</p> <p>3.3 Number / percentage of schools with teachers who have been trained in life-skills-based HIV education and who taught it during the last academic year (disaggregated by region and urban / rural settings) (UNGASS) Baseline: 50 % in Addis Ababa (2005) Target: to be defined by the Government</p> <p>3.4 Number of regions implementing up-to-date policies, legal and normative provisions, technical guideline and protocols on nutrition, education, OVC, refugees and PMTCT (disaggregated by area of intervention) Baseline: assessment (2006 – 2010) Target: minimum 5 for each area (2011)</p> <p>3.5 Number / percentage of <i>Woredas</i> receiving comprehensive UN support in scaling up HIV prevention and protection services<sup>10</sup> (disaggregated by region) Baseline: 5 <i>Woredas</i> in SNNPR; 5 <i>Woredas</i> in Amhara Region (2006) Target: minimum 50% of <i>Woredas</i> in the supported regions (2011)</p> <p>3.6 Number of facilities offering prevention and protection services established and / or strengthened with the UN support in the last 12 months (disaggregated by region / <i>Woreda</i> and type of service) Baseline: survey (2006) Target: target survey (2006 – 2010)</p>	<p>MOH / DHS / BSS Baseline - PASDEP</p> <p>School-based survey / MOE Baseline – UNGASS 2006 Report</p> <p>Survey Field monitoring forms Baseline – baseline assessment</p> <p>Field monitoring forms Baseline – UN ISP monitoring data</p> <p>Field monitoring forms Baseline – baseline assessment</p>	

UNDAF and Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome
	<p>3.7 Number / percentage of service providers who have been trained in HIV/AIDS prevention and protection service provision and who have performed respective duties in the last 12 months (disaggregated by region / <i>Woreda</i> and type of service) Baseline: survey (2006) Target: minimum 50% increase</p> <p>3.8 Increase in coverage / utilisation of HIV prevention and protection services (disaggregated by region / <i>Woreda</i>, type of services, target group, gender, age) Baseline: (2005) Target: minimum 50%</p> <p>3.9 Number / percentage of <i>Woredas</i> with at least one facility providing key prevention and protection services (disaggregated by region and type of services) Baseline: baseline assessment (2006) Target: minimum 50% <i>Woredas</i> in the supported regions (2011)</p> <p>3.10 Package of rapid interventions for HIV prevention and protection in humanitarian emergencies available and in use Baseline: no (2006) Target: yes (2011)</p>	<p>Field monitoring forms Baseline – baseline assessment</p> <p>Field monitoring forms Baseline – baseline assessment</p> <p>Field monitoring forms Baseline – baseline assessment</p> <p>Field monitoring forms</p>	
<b>Outcome 4 Increased</b>	4.1 Number / percentage of people with confirmed diagnosis of advanced HIV infection receiving ARV combination therapy (disaggregated by gender, age,	MOH Baseline - PASDEP	

<sup>11</sup> ART, PMTCT+, OI treatment, nutritional care and support, home-based care, social safety nets for vulnerable children, etc.

UNDAF and Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome
<b>provision and utilization of treatment, care and support services for people living with or affected by HIV/AIDS</b>	<p>region and urban / rural settings) (UNGASS)            Baseline: 21,000 / 10% (2005)            Target: 263,395 /70% (by 2010, PASDEP)</p> <p>4.2 Ratio of current school attendance among orphans to that among non-orphans aged 10-14 (disaggregated by gender, region and urban / rural settings) (MDG6, UNGASS)            Baseline: &gt;55% (2005)            Target: 80% (by 2010)</p> <p>4.3 Number of orphans and vulnerable children whose households received free basic external support in caring for the child in the last 12 months (disaggregated by gender, age, region and urban / rural settings) (UNGASS / National M&amp;E Framework)            Baseline: 3.4% male, 3.6% female            Target: to be defined by the Government</p> <p>4.4 Number of regions implementing up-to-date policies, legal and normative provisions, technical guideline and protocols on ART and care and support for PLWHA and OVC (disaggregated by area of intervention)            Baseline: assessment (2006)            Target: minimum 5 for each area (2011)</p> <p>4.5 Number / percentage of <i>Woredas</i> receiving comprehensive UN support in scaling up treatment, care and support services<sup>11</sup> (disaggregated by region)            Baseline: 5 <i>Woredas</i> in SNNPR; 5 <i>Woredas</i> in Amhara Region (2006)            Target: 50% of <i>Woredas</i> in minimum 5 regions (2011)</p> <p>4.6 Number of facilities offering treatment, care and support services established</p>	<p>MOE / MOLSA / DHS / MICS            Baseline - PASDEP</p> <p>Programme / project reports            Field monitoring forms            Baseline – UNGASS 2006 Report</p> <p>Survey            Field monitoring forms            Baseline – baseline assessment</p> <p>Field monitoring forms            Baseline – UN ISP monitoring data</p> <p>Field monitoring forms            Baseline – baseline assessment</p>	

UNDAF and Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome
	<p>and / or strengthened with the UN support in the last 12 months (disaggregated by region / <i>Woreda</i> and type of service)            Baseline: assessment (2006 - 2010)            Target: target survey (2006 – 2010)</p> <p>4.7 Number / percentage of service providers who have been trained in HIV/AIDS treatment, care and support service provision and who have performed respective duties in the last 12 months (disaggregated by <i>Woreda</i> and type of service)            Baseline: assessment (2006 - 2010)            Target: minimum 50% increase (2011)</p> <p>4.8 Increase in coverage / utilisation of treatment, care and support services (disaggregated by region / <i>Woreda</i>, type of services, target group, gender, age)            Baseline: assessment (2006 – 2010))            Target: minimum 50% (2011)</p> <p>4.9 Number / percentage of <i>Woredas</i> with at least one facility providing key treatment, care and support services (disaggregated by region and type of services)            Baseline: baseline assessment (2006 - 2010)            Target: minimum 50% <i>Woredas</i> in each of the supported regions</p> <p>4.10 Package of rapid interventions for HIV/AIDS treatment, care and support services in humanitarian emergencies available and in use            Baseline: no (2006)            Target: yes (2011)</p>	<p>Field monitoring forms            Baseline – baseline assessment</p> <p>Field monitoring forms            Baseline – baseline assessment</p> <p>Field monitoring forms            Baseline – baseline assessment</p> <p>Field monitoring forms</p>	

## UNDAF Monitoring and Evaluation Matrix: Basic Social Services

UNDAF and Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome
<p>By 2011, UN agencies will have significantly supported national efforts to achieve MDGs relating to improved and equitable access and utilization of decentralized social services, including those for health, nutrition, education, water, sanitation and hygiene, by developing capacities of both those responsible for service delivery, and those who demand and use such services, while giving special focus to the most vulnerable and marginalized groups.</p> <p><b>Outcome 1 Health: Improved access to and utilization of quality preventive, promotive,</b></p>	<ul style="list-style-type: none"> <li>- Prevalence of underweight children (under-5 years of age) [MDG 1] Baseline: 38.4; Target: decrease by 50% (HSDPIII)</li> <li>- Proportion of population below minimum level of dietary energy consumption [MDG 1] Baseline: 53.4 (2005); Target: TBD</li> <li>- Net enrolment ratio in grades 1-4 and 5-8 [MDG 2] Baseline: 68.5% [1-8] (2005) Target: 89%</li> <li>- Proportion of pupils starting grade 1 who reach grade 5 [MDG 2] Baseline: assessment (2006); Target: TBD</li> <li>- Literacy rate of 15 – 24-year-old [MDG 2] Baseline: 0.79 (2005); Target: TBD</li> <li>- Ratio of girls to boys in primary, secondary and tertiary education [MDG 3] Baseline: 0.79, 0.55, 0.29 (2005); Target: TBD</li> <li>- Under-5 mortality rate [MDG 4] Baseline 140.1/1,000 (2005, HSDPIII); Target: 91/1,000 (2010, HSDPIII)</li> <li>- Infant mortality rate [MDG 4] Baseline: 97/1,000 (2005, HSDPIII); Target: 45/1,000 (2010, HSDPIII)</li> <li>- Proportion of 1-year-old children immunised against measles [MDG 4]. Baseline: TBD (WHO/UNICEF2006);</li> </ul>	<p>DHS+ 2010 (or WMS2010)</p> <p>DHS+ 2010 (or WMS2010)</p> <p>DHS+ 2010 (or EMIS report 2011)</p> <p>MoE EMIS report 2011</p> <p>MoE EMIS report 2011</p> <p>MoE EMIS report 2011</p> <p>DHS+ 2010</p>	

UNDAF and Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome
<b>rehabilitative and curative health services at facility, community and household levels</b>	<p>Target: TBD</p> <ul style="list-style-type: none"> <li>- Maternal mortality ratio [MDG 5]. Baseline: TBD (DHS 2005); 871/100,000 (2005, HSDPIII) Target: 590/100,000 (2010, HSDPIII) Baseline: 39/100,000 (2001); Target: TBD</li> <li>1.1 Proportion of births attended by skilled health personnel [MDG 5] Baseline: 6.4 (2004); Target: add PASDEP target</li> <li>1.2 HIV prevalence among pregnant women aged 15-24 years [MDG 6] Baseline: 15 (1999-2002); Target: add PASDEP target</li> <li>1.3 Contraceptive prevalence rate [MDG 6] Baseline: 14 (2005); Target: add PASDEP target</li> <li>1.4 Prevalence and death rates associated with malaria [MDG 6] Baseline: 198/100,000 (2000); Target: add PASDEP target</li> <li>1.5 Proportion of population in malaria-risk areas using effective malaria prevention and treatment measures [MDG 6] Baseline: x; Target: add PASDEP target</li> <li>1.6 Prevalence and death rates associated with tuberculosis [MDG 6] Baseline: 39/100,000 (2001); Target: add PASDEP target</li> <li>1.7 Number of woredas developing multi year plans with progressive targets for scaling up high impact child survival interventions Baseline: assessment (2006); Target: 300</li> <li>1.8 Number of woredas developing budgeted annual contingency plans for emergency preparedness and response focusing on reducing threats</li> </ul>	<p>DHS+ 2010</p> <p>Joint WHO/UNICEF report 2011</p> <p>DHS+ 2010 WMS 2010 or HMIS</p> <p>DHS 2010</p> <p>Implementation progress reports and monitoring field visits</p>	

UNDAF and Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome
<p><b>Outcome 1 Health: Improved access to and utilization of quality preventive, promotive, rehabilitative and curative health services at facility, community and household levels</b></p>	<p>to children's survival            Baseline: assessment (2006);            Target: 300</p> <p>1.9 Number of woredas actively monitoring coverage of high impact Child Survival interventions, morbidity and mortality in children            Baseline: assessment (2006);            Target: 300</p> <p>1.10 Number of people benefiting from full HSEP service package through the UN support            Baseline: 0;            Target: 6.5 mil children and 1.4 mil pregnant women</p> <p>1.11 Finalise and operationalisation of Master Plan for Essential Health Supplies</p> <p>1.12 Percent of children under age 1 fully immunised            Baseline: (will be available in Dec. 2006)            Target: 80% in 90% of woredas (Ethiopian EPI multi-year plan)</p> <p>1.13 Proportion of laboratory confirmed measles cases.            Baseline: (will be available in Dec. 2006)            Target: &lt;10% of investigated cases confirmed to be measles by serological investigation</p> <p>1.14 Number of Polio cases            Baseline: 22 (2005)            Target: 0</p> <p>1.15 Pentavalent vaccine/ Measles vaccine coverage in children 0-11 months.            Baseline: (will be available in Dec. 2006)            Target: 80% in 90% of woredas (Ethiopian EPI multi-year plan)</p> <p>1.16 TT2 coverage            Baseline:31.9% pregnant, 17% non-pregnant women (HSDPIII)            Target: 80% pregnant, 67% non-pregnant women (2010, HSDPIII)</p> <p>1.17 Proportion of tuberculosis cases detected and cured under DOTS            Baseline: ?;</p>	<p>Master Plan for Essential Health Supplies</p>	

UNDAF and Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome
<p><b>Outcome 1 Health: Improved access to and utilization of quality preventive, promotive, rehabilitative and curative health services at facility, community and household levels</b></p>	Target: TBD		
	1.18 Number and per cent of U5 children sleeping under ITN Baseline: 1.3% (DHS 2005); 2% (HSDPIII)	IDHR	
	Target: 63% (2010, HSDP III)		
	1.19 Number and per cent of pregnant women sleeping under ITN.		
	Baseline: 1.2% (DHS 2005); 2% (HSDPIII)	IDHR	
	Target: 49% (2010, HSDP III)		
	1.1 % of children with fever (malaria) receiving adequate treatment within 24 hours of symptom onset.	IDHR	
	Baseline: 0.7% (DHS 2005)		
	Target: 100%? (2010, based on the assumption that health service coverage will reach 100% by 2010)		
	1.2 Morbidity attributed to malaria.	IDHR	
Baseline: 22% (HSDPIII)			
Target: 10% (2010, HSDPIII)			
1.3 Malaria case fatality rate in U5 children.			
Baseline: 5.2% (HSDPIII, 2005)	IDHR		
Target: 2% (2010, HSDPIII)			
1.4 Case fatality rate of malaria in age groups of 5 years and above.			
Baseline: 4.5% (HSDPIII, 2005)			
Target: 2% (2010, HSDPIII)			
1.5 Increase in coverage / utilisation of communicable disease prevention and control services (disaggregated by region, urban / rural, disease, type of services, gender, age)	FMOH		
Baseline: assessment (2006)			
Target: TBD			
1.6 Percent increase in tuberculosis case detection.	FMOH		
Baseline:			
Target: + 8%			
1.7 Percent increase in treatment success rate.	Survey		
Baseline: 76% (PASDEP);			

UNDAF and Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome
	<p>Target: 85% (2010, HSDPIII)</p> <p>1.8 Effective surveillance system in place</p> <p>1.9 % of children exclusively breastfed up to 6 months Baseline: 38% (HSDPIII) Target: 63% (HSDPIII)</p> <p>1.10 % of children with diarrhea receiving ORT and continued feeding Baseline: 13% (HSDPIII) Target: 68% (HSDPIII)</p> <p>1.11 % of deliveries attended by skilled personnel Baseline: 9 Target: 32</p>	<p>Survey</p> <p>FMOH, DHS 2010</p> <p>FMOH</p> <p>FMOH</p> <p>FMOH</p> <p>FMOH Implementation progress reports and monitoring field visits</p> <p>FMOH</p> <p>FMOH</p>	

UNDAF and Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome
		<p>FMOH DHS 2010</p> <p>DHS 2010</p>	
<p><b>Outcome 2 Health, Population: Improved access to and demand for quality, gender sensitive and integrated Reproductive Health Care including HIV/AIDS prevention services at all levels</b></p>	<p>2.1 Caesarean sections as percentage of all births Baseline ____ Target ____</p> <p>2.2 Case fatality rate among women with obstetric complication in EOC facilities Baseline: Target _____</p> <p>2.3 Proportion of health facilities (hospitals and health centres) providing Comprehensive Emergency Obstetrical Care Baseline Target</p> <p>2.4 Proportion of health facilities (hospitals and health centres) providing PMTCT+ services Baseline: assessment Target: TBD</p>	<p>FMOH</p> <p>FMOH</p> <p>FMOH Implementation progress reports and monitoring field visits</p> <p>FMOH Implementation progress reports and monitoring field visits</p>	
<p><b>Outcome 3 Education: National efforts to strategically address girls' education, and</b></p>	<p>3.1 NER 1-4 M/F/T in UNICEF and WFP target woredas Baseline: [TBD when 2007 census data is available]; Target: 98%</p> <p>3.2 NER 5-8 M/F/T Baseline: see EMIS</p>	<p>EMIS (if the improved EMIS allows to obtain statistically valid data at woreda level )</p>	

UNDAF and Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome
<p><b>improve access, quality and eliminate gender disparity in order to achieve UPE by 2015 are strengthened</b></p>	<p>Target: 94%            3.3 NER 5-8 UN target woredas M/F/T            Baseline [TBD when 2007 census data is available];            Target 94%            3.4 Drop out rate, grade 1 M/F/T            Baseline: 22.4%            Target: 3% (ESDP)            3.5 Drop out rate, grade 1 in UN target woredas M/F/T            Baseline: assessment (2006)            Target: 3% (ESDP)            3.6 Average repetition rate 4-8 M/F/T            Baseline: 4%            Target : 2% (ESDP)            3.7 Average repetition rate 4-8 in UN target woredas M/F/T            Baseline: assessment (2006)            Target: 2% (ESDP)            3.8 Number of child-friendly schools            Baseline: 0            Target: 1,000            3.9 Net Intake Rate            Baseline: 59.9% (2004/05)            Target: 96%            3.10 Pupil learning achievement for grades 4 and 8.            Baseline: 2003/04 Grade 4=48.5% and grade 8=39.7 %            Target: 50% and above for both grades            3.11 ECD Policy developed and operationalized            Baseline: No ECD policy            Target: ECD policy developed and operationalized</p>	<p>EMIS report</p> <p>EMIS or sample survey</p> <p>EMIS</p> <p>EMIS or sample survey</p> <p>EMIS</p> <p>EMIS or sample survey</p> <p>EMIS</p> <p>National examination institute</p> <p>MoE</p>	

UNDAF and Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome
<p><b>Outcome 4 Water and Sanitation: Access to and utilization of safe water, environmental sanitation and hygiene services strengthened</b></p>	<p>4.1 Number of people provided with access to improved water sources - UN intervention only Baseline 0; Target: 6 million</p> <p>4.2 Number of people provided with access to improved sanitation facilities - UN intervention only Baseline 0; Target: 6 mil people</p> <p>4.3 Number of schools provided with access to water - UN intervention only Baseline 0; Target 800</p> <p>4.4 Number of schools provided with separate latrine for girls and boys – UN intervention only Baseline 0; Target 800</p> <p>4.5 Number of health facilities provided with access to water – UN intervention only Baseline 0; Target 650</p> <p>4.6 Number of woredas and regions in which institutional capacity to manage WASH intervention was significantly increased – UN intervention only Baseline 0/0 ; Target 120/10</p> <p>4.7 Certification of Guinea worm free obtained</p>	<p>Implementation progress reports and monitoring field visits</p> <p>Sample survey in intervention area</p>	

**UNDAF Monitoring and Evaluation Matrix: Humanitarian Response, Recovery and Food Security**

UNDAF and Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome
<p><b>By 2011, significantly strengthened capacities of the Government, communities and other relevant stakeholders to respond to situations that threaten the lives and well being of a significant proportion of a population, which require rapid and appropriate action to ensure their survival, care, protection and recovery while enhancing their resilience to shocks and leading to food security and sustainable livelihoods.</b></p>	<p>- Number of people requiring emergency assistance. Baseline: 3 million. Target: 1 million</p> <p>- Reduction in the number of people who are supported by the Productive Safety Net Programme and other food security programmes (through developing their coping capacities). Baseline: 3 million. Target: 1 million</p>	<p>Emergency assessment reports</p> <p>PNSP lists</p>	<p>Assumption: acceptance of new resources mobilization framework.</p> <p>Risk: unavailability / inadequacy of complementary food security inputs for PNSP beneficiaries.</p>

UNDAF and Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome
	<p>1.1 Natural resources study undertaken and recommendations agreed (1.1) Baseline: Outdated study Target Study in the most food insecure areas of the country</p> <p>1.2 Joint natural resources programs designed and resources allocated (1.1). Baseline: None exists. Target: Program developed at country level</p> <p>1.3 Multi-sectoral coordination meetings take place in Addis and all 7 regions on a monthly basis (1.2 / 1.3). Baseline: Non-existent multi sectoral coordination Target: Monthly meetings</p> <p>1.4 Legal framework / operational strategy for the management and development of natural resources by the communities established (1.4) Baseline: Legal framework / strategy not in place Target: Legal framework / strategy in place</p>	<p>Study report and recommendations</p> <p>Program document. Letter of Understanding between implementing agencies. Reports of monthly meetings and action points. Evaluation of effectiveness of coordination.</p> <p>Legal proclamation. Strategy document</p>	<p>Risk: slowness and unclarity in the establishment of emergency units in ministries and possible lack of commitment from Bureaus in the regions. Risk: unclear roles and responsibilities between institutions.</p> <p>Assumption: sufficient space for communities provided so that they prioritize and express their views.</p>

**Outcome 1: By 2011, the implementation of policies, strategies and coordination mechanisms are fully developed leading to**

UNDAF and Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome
	<p>1.5 Number of women in local development committees (1.5). Baseline: assumed to be well below 50%. Target: 50%</p> <p>1.6 Guidelines linking HIV-AIDS issues and food security in emergency produced (1.6). Baseline: none Target: 2 (recovery and emergency)</p> <p>1.7 National Disaster Management policies revised to address gender-based violence in emergencies (1.7). Baseline: No inclusion of gender-based violence in situation of crises Target: Policies include gender-based violence in situation of crises</p> <p>1.8 An advocacy strategy is in place and implemented leading to a policy which addresses the sudden acute emergencies and recurrent chronic and acute vulnerabilities through adapted and effective mechanisms. Baseline: All needs (acute and chronic) addressed through the annual Humanitarian Appeal (1.8). Target: Planning and funding framework for dealing with various types of risks and vulnerabilities through various adapted means established.</p> <p>1.9 Policy and appropriate strategies supporting the development of sustainable livelihood and food security for approximately 7 million people living through pastoralism in Somali, Afar and Oromyia developed and enforced (1.9). Baseline: Weak policy framework Target: Appropriate policies developed</p> <p>1.10 Number of people who attain food security in 262 woredas of Oromyia, Amhara, SNNPR and Tigray through the Productive Safety Net and other Food Security Programs (1.10) Baseline: 7 million Target: 15 million</p> <p>1.11 Policy related to the rights of internally displaced persons is developed and enforced in all regions of the country (1.11). Baseline: No policy Target: Policy in place and enforced</p>	<p>Committee members lists. Annual reports.</p> <p>Guidelines document.</p> <p>Policy statement</p> <p>Sectoral contingency plans, flash appeals, terms of reference of a multi-annual fund</p> <p>Review of policy framework in 2011 also in comparison to the policy framework in 2007</p> <p>Woreda reports. Government / stakeholders missions reports.</p> <p>Review of policy framework in 2011 also in comparison to the policy framework in 2007</p>	<p>Assumption: the cultural bias against women will still prevail.</p> <p>Risk: segregation of mandate between HAPCO, BOLSA and MOARD may hamper the development of guidelines.</p> <p>Risk: Ministry of Women Affairs has limited capacity to coordinate this task.</p> <p>Risk: donors may not find appropriate funding windows for this ambitious transition framework.</p>

UNDAF and Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome
<p><b>Outcome 2: By 2011, significantly increase capacity to deliver and provide access to essential commodities and services in emergency situations, cases of food, nutrition and livelihood insecurity with direct linkages between humanitarian and longer-term development initiatives</b></p>	<p>2.1 An appropriate and effective safety net programme in place in pastoral areas (2.2). Baseline: no predictable transfer mechanisms in place Target: predictable transfer mechanisms in place</p> <p>2.3 Number of under five children receiving child survival interventions (measles, vitamin A, deworming and malaria prevention) twice a year in 300 drought-prone woredas, screened for malnutrition and referred to nutrition (2.3) programmes Baseline: 4 million Target: 7 million</p> <p>2.4 Multi-annual planning and funding framework to address recurrent health epidemics is developed (2.4) Baseline: All needs included in the annual humanitarian appeal. Target: Response to predictable and acute health needs funded through a multi-annual transition framework.</p> <p>2.5 Percentage of school-going children displaced in emergency situations able to continue their education. (2.5). Baseline: less than 30%. Target: 60%</p> <p>2.6 Emergency Preparedness and Response Units established in the Ministries of Health and Water resources at federal level with the capacity and authority to mobilize resources and coordinate responses at regional level (2.1 / 2.6). Baseline: No unit exists Target: 2 units fully operational</p>	<p>Pastoralist safety net document</p> <p>Under-5 mortality rates. Nutrition surveys.</p> <p>Terms of reference of a multi-annual fund</p> <p>Pre and post emergency assessment</p> <p>TOR of units. Job descriptions and contracts of staff. Number of rooms and equipment.</p>	<p>Risk: recurrent large scale crises may hamper this development</p> <p>Assumption: current positive funding levels and collaboration between MoH and DPPA will continue.</p> <p>Risk: donors may not find appropriate funding windows for this ambitious transition framework.</p> <p>Risk: nature of the emergencies / protection issues may hamper attendance.</p>

UNDAF and Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome
	<p>2.7 Number of people who resettle through the Voluntary Resettlement Programme in 4 regions who have access to basic social services in health, water and education. Baseline: 500,000 people with low access (2.7) Target: 2.2 million with full access</p>	<p>Woreda reports. Government / stakeholders missions reports.</p>	<p>Assumption: A more conducive environment for coordinated action is created around the resettlement programme and bilateral donors agree to support.</p>
<p><b>Outcome 3: By the end of 2011, information, advocacy and communication systems are in place to ensure i) more effective community, regional, national and international humanitarian response and recovery and, ii) scaling-up of good practices leading to sustainable development</b></p>	<p>3.1 Early warning system of the DPPA is fully based on livelihood analysis and nutrition surveillance and through the Information Management System of DPPA links with those of the Health, Agriculture and Water sectors (3.1 / 3.3) Baseline: Food / crop-based EWS Target: Livelihood based EWS linked to non-food sectors through more effective and linked information systems.</p> <p>3.2 Early warning system of the DPPA is decentralized in the 7 regions and regional authorities have the mandate, capacities and resources to undertake emergency responses based on the data generated regionally (3.2). Baseline: Centrally managed EWS and emergency response Target: EWS is decentralized in 7 regions with analytical and response capacities at regional level.</p> <p>3.3 Regular seminars, meetings and working groups established to raise awareness on conflict management, disaster management and cross-border issues (3.4 / 3.5) Baseline: Low level of awareness Target: Issues discussed and possible actions agreed.</p>	<p>EW reports at federal level</p> <p>EW reports at federal and regional level</p> <p>Seminar / meetings reports and action points.</p>	<p>Assumption: increased coordination between DPPA and line ministries</p> <p>Risk: limited regional capacities</p>

## UNDAF Monitoring and Evaluation Framework: Good Governance

UNDAF and Country Programme Outcomes and Outputs	Indicators and Baseline	Means of Verification	Risks and Assumption for each UNDAF and CP Outcome
<p><b>Outcome 1 Improved access to and delivery of Justice for the population (in particular the poor, the vulnerable and the marginalized)</b></p>	<p><b>1.1</b> Indicator: Percentage of new federal and state judges given an introductory training prior to assuming office Baseline: 0; national Judicial Training Center was established in 2003 to give initial and continuous training for judges and prosecutors. Target: 100%</p> <p><b>1.2</b> Indicator: Percentage of the legal universities in Ethiopia that have successfully adapted legal education upgrading modeled by AAU Baseline: 0; There are six state universities in the country. AAU is the oldest of them all. The others have just started their law faculties and have reproduced the AAU Law School Curriculum Target: at least 50%.</p> <p><b>1.3</b> Indicator: Percentage of new staff in law enforcement agencies trained in human rights and provided with introductory training. Baseline: 0; Human rights do not seem to be an integral and important part of the current curriculum in the police training. The training of civil prison staff is focused on safety problems and often lacks the concept of human rights. Target: 100%</p> <p><b>1.4</b> Indicator: Increase in the number of cases that are investigated due to increased efficiency and capacity to investigate in Anti-corruption division. Baseline: Anti-Corruption Commission has been established to monitor and prosecute cases of mal-administration and corruption within the government and the larger society. Target: 50%</p>	<p>National Judicial Training Center fully operational</p> <p>Legal education upgrade adopted by at least two state universities in Ethiopia</p> <p>Human rights included in the police and civil prison staff training curriculum</p> <p>Anti-Corruption Commission records</p>	<p>Government commit to justice system reform in the PASDEP is critical to implementation of these activities.</p> <p>A comprehensive justice system reform program baseline study report has been completed in 2005. It is assumed that the government has accepted the report and will implement the recommendations.</p>

UNDAF and Country Programme Outcomes and Outputs	Indicators and Baseline	Means of Verification	Risks and Assumption for each UNDAF and CP Outcome
<p><b>Outcome 2 Parliament and Electoral bodies (federal and regional) empowered to fully integrate the priorities of the population, in particular the vulnerable and marginalized groups</b></p>	<p>2.1 Indicators:            (a) Increase in the level of women parliamentarians at the HPR;            Baseline: about 20%            Target: 40% (2011)              (b) Increase in the level of women parliamentarian in the regional councils            Baseline: less than 10% (estimated)            Target: 30% by 2011</p> <p>2.2 Indicators: Percentage of new members of the HPR (80% in the House) and key personalities in the HoF made familiar with rules of conduct and roles of MPs in law making.            Baseline: 10% (estimated)            Target: 100% (by 2007)</p> <p>2.3 Indicators:            Number of consultations held per year between an MP and his / her constituency            Baseline: 0 - 2            Target: a minimum of two consultations per year between each MP and his/her constituency (by 2008).</p> <p>2.4 Indicators:            (a) Percentage / number of committee members and party whips (about 150 MPs) made aware of the MPs oversight roles            Baseline: 50% (estimated)            Target: 100% (by 2007)              (b) No of oversight actions initiated by the HRP (motions within the parliament</p>	<p>Number of elected women parliamentarians as depicted in official documents at the parliament and election bodies</p> <p>Perception survey to be conducted between 2009 and 2011 on the role of parliaments as a representatives of constituencies</p>	<p>It is assumed that a multi-donor parliamentary support program will be established to support a five year capacity building program in Parliament (HoPR, HoF and regional councils)</p> <p>It is assumed that government commitment to strengthening the Ombudsman office and other oversight functions (including providing relevant staffing for such bodies) will be provided.</p>

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	<p>as opposed to from the Executive)            Baseline: None            Target: Two motions or actions per year on the average between 2008 and 2011.</p> <p>2.5 Indicators: Increase in the level of acceptability of the impartiality of the electoral bodies by major political parties            Baseline: Impartiality of Electoral Bodies is accepted only by the ruling party (2005), considering major political parties            Target: Electoral bodies at all levels accepted by all major political parties for its impartiality (by 2007).</p>	<p>Expressed willingness of major political parties to accept the NEBE as impartial</p>	<p>The overall assumption is that there is genuine interest in all political parties to have a credible and impartial election board</p>
<p><b>Outcome 3 Increased enjoyment of human rights at grassroots level through Government efforts in promotion and protection of human rights and civil society empowerment (with special emphasis on community based organizations) including the empowerment of vulnerable groups (in particular women and</b></p>	<p>3.1 Indicator: Efficient case management processes in place to investigate complaints in the Human Rights Commission            Baseline: no case management processes; Human Rights Commission and Office of the Ombudsman was first established late 2004.            Target: case management processes established</p> <p>3.2 Indicator: Percentage of staff in key government institutions who have been trained in human rights issues            Baseline: 0            Target: 50%</p>	<p>Human Rights Commission records</p> <p>Reports on trainings and workshops organized to create human rights</p>	<p>It is assumed that the government is committed to open, transparent and democratic governance that respects the rights of all of its citizens as per the constitution and as per international agreements.</p>

UNDAF and Country Programme Outcomes and Outputs	Indicators and Baseline	Means of Verification	Risks and Assumption for each UNDAF and CP Outcome
children) and their capacity to influence the development process.		awareness in government institutions	
<b>Outcome 4 Devolution of power promoted, resulting in more effective response to community driven needs and better and more equitable access to quality public services and utilities in particular by the vulnerable, poor and marginalized.</b>	<p>4.1 Indicators: Number of Woredas and kebeles having strategic plans reviewed and prepared in a participatory manner;</p> <p>Baseline: PRA tested in Amhara Region Target: 100% in pilot woredas in selected Regions Indicator: Number of kebeles that have infrastructure management meeting established Baseline: 0 Target: 100% in pilot kebeles in selected Regions</p> <p>4.2 Indicators: Increased efficiency resulted in a few selected Civil Service Reform offices. The Service Delivery Survey study adopted, and tested in TOT. Baseline: Conduct consultations on the baseline service delivery report of the regions (Afar and Benshangul) Establish Civil Service Coordinating Offices in the emerging regions. Deploy UNVs and other professionals. Target: 50%</p> <p>4.3&amp;4.4 Indicators: Number of UNVs and TAs deployed in support to partner LGs;</p>	<p>Work Plans</p> <p>Up scaling of the Civil Service Reform Program in sector bureaus continued. Professionals assigned in the emerging regions.</p> <p>No. of professional staff/UNVs deployed at the woredas level</p> <p>WP/Investment Plans</p>	<p>Limited capacity in planning at woreda level due to lack of limited financial and human resources and equipment to cover all the kebeles</p>

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<p><b>Outcome 4 Devolution of power promoted, resulting in more effective response to community driven needs and better and more equitable access to quality public services and utilities in particular by the vulnerable, poor and marginalized.</b></p>	<p>Baseline: UNVs deployed in support to selected Regional Governments Target: 100% in selected Regions</p> <p>4.5 Indicator: a. Number of pilot woredas that have multi-year infrastructure investment plans adopted and implemented incorporating kebele plans and priorities based on indicative planning figures from both the Region and Woredas Baseline: Multi-year investment plans adopted in target woredas in Amhara Region; participatory budgeting linked to planning piloted in the Emerging Regions and tested in Amhara Region Target: 100% in pilot woredas in selected Regions Indicator: b. Number of pilot kebeles implementing alternative public service delivery Baseline: Barefoot College approach implemented by pilot communities in Emerging Regions Target: 100% in pilot kebeles in selected Regions</p> <p>4.6 Indicators: Deployed professionals from Diaspora alleviated the shortage of skilled manpower in the Civil Service. Baseline: Number of professionals returned. Target: 70%</p> <p>4.7 Indicators: Number of pilot woredas that have adopted MC-Minimum conditions and PM-performance measures to access DIF BG Baseline: Target:</p> <p>4.8 Indicators: Professional skills upgraded in the areas of Financial Management at the Federal and Regional sector bureaus. Baseline: No of professionals completed their studies working in the assigned offices to ameliorate the existing problems of Financial</p>	<p>No. of professional s deployed at Federal possibly at the regional levels.</p> <p>MoU on MC and PM signed and adopted by LGs</p> <p>No of professional trained in the Financial institutions increased working in Public Finance.</p>	<p>The prevailing reorganization and restructuring at the Federal and regional level might disrupt to implementation of the existing programs</p> <p>The retention of professionals at the regions and Woredas for all possible reasons.</p> <p>Limited implementing capacity of Woredas; shortage of banking facilities, may delay funds release/transfer 4.6 Possible reluctant response to MC and PM by Region</p>

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	management. Target: 70%		Availability of funds to provide minimum requests.  Low level of salary in government offices might be attracted to private sectors.
<b>5. Diverse pluralistic media fostered and its role in supporting values and principles of good governance and respect for human rights strengthened</b>	<p>5.1 Indicator: Ethical practices, professional standard, codes of conduct for media professionals developed and endorsed Baseline: no standards or codes of conduct for media Target: Standards and codes in place</p> <p>5.2 Indicator: Increase in national coverage of radio, TV, newspapers Baseline: Target: 50%?</p> <p>5.3 Indicator: Number / percentage of media professionals trained in communication for social change and applying acquired knowledge in practice Baseline: Target:</p>		
<b>6. Millennium Development Declaration/Millennium Development Goals</b>	Indicator: Goals and targets of all development programmes in Ethiopia aligned with the MD/MDGs. Baseline: MDGs Integrated in the PASDEP Target: MDGs integrated into all development programmes in Ethiopia	PASDEP Annual Progress Report  EthioInfo database	Government and donor commitment to meet the MDGs is critical

UNDAF and Country Programme Outcomes and Outputs	Indicators and Baseline	Means of Verification	Risks and Assumption for each UNDAF and CP Outcome
<p><b>mainstreamed in all development programmes in Ethiopia.</b></p>	<p>6.1 Indicator: National MDGRs produced, translated into local languages, disseminated to key stakeholders and made available to broad public            Baseline:            Target: Two to three MDGRs</p> <p>6.2 Indicator: Percentage of surveys conducted, reviews and annual progress reports by key actors at the federal and regional levels reflect integration of MDGs in development plans of Government, private sector and civil society organizations            Baseline: PASDEP, HSDP, ESDP ARM / APR            Target: 80% of surveys, ARM / APRs, reviews and progress reports reflect integration of MDGs</p> <p>6.3 Indicator: Number / percentage of s / woredas with goals and targets of the regional and local development plans aligned with MDGs)</p> <p>Indicator: UNDAF M&amp;E aligned with PASDEP indicators            Baseline: limited alignment            Target: full alignment</p> <p>Indicator: Ethioinfo applied for national M&amp;E            Baseline:            Target:</p>	<p>Increased media discussion on MDGs</p> <p>MDGs streamlined Federal and Regional development plans</p>	

**.12.i.1.1.1.1 UNDAF Monitoring and Evaluation Matrix: Enhanced Economic Growth**

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UNDAF and Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome
<p><b>By 2011, at national, regional, organizational and business levels, capacity strengthened and knowledge developed for increased incomes of the poor, through enhanced labor factor productivity and more intensive and widespread use of technology in at least one economic growth corridor, with potential interventions related to expansion and diversification in agriculture, industry and services.</b></p>	<p>- Head count ratio (% of people living with less than 45 USD cents a day) at national and sub-national (EGC) level disaggregated<sup>12</sup> by gender and rural urban dimensions. Baseline national level 2000<sup>13</sup>: 44% Target national level 2011<sup>14</sup>: 28% Baseline EGC 2006: survey. Target<sup>15</sup> EGC 2011: it will be defined after EGC identification and baseline setting.</p> <p>- Food expenditure in the EGC (% of people living with less than 2100 cal. a day). Baseline 2006: survey. Target 2011: it will be defined after EGC identification and baseline survey.</p> <p>- Average annual growth of real GDP. Baseline 2002/2005: 5% Target 2007/2011<sup>16</sup>: 8%</p> <p>- Labour productivity at national level. Baseline 2005<sup>17</sup>: 2.3% to be checked!!* Target 2011: ?*</p>	<p>Central Statistical Authority, Welfare Monitoring Unit of MoFED.</p> <p>Baseline survey by UNCT or Woreda-level Welfare Monitoring Survey planned for 2006/7.</p> <p>Target survey by UNCT.</p> <p>Annual Programme Review.</p> <p>Welfare Monitoring Survey (WMS), Household Income Consumption and Expenditure (HICE) surveys, Participatory Poverty Assessment (PPA), other relevant surveys.</p>	<p>Risks:</p> <ul style="list-style-type: none"> <li>- Given the experimental nature of the EGC programme, risks are around whether or not we are aiming at the right target.</li> <li>- External shocks, and inappropriate policies and institutions could both undermine the EGC performance, and blur its impact at the national level.</li> </ul> <p>Assumptions:</p> <ul style="list-style-type: none"> <li>- Strong partnership with federal and regional governments.</li> <li>- Ability to mobilize jointly UN resources (including WB).</li> <li>- Good timing of different actions and implementation.</li> </ul>

<sup>12</sup> By CSA

<sup>13</sup> MDGR 2004

<sup>14</sup> MDGs

<sup>15</sup> Results could be available only at the end of the UNDAF cycle because some surveys are carried out only every 3 or 4 years.

UNDAF and Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome
<b>Outcome 1 High-quality knowledge developed about economic growth corridors that promote accelerated and pro-poor growth</b>	1.1 # of new productive initiatives that promote pro-poor growth implemented within the EGC <sup>18</sup> . <u>Baseline 2006:</u> survey <u>Target 2011:</u> ?*  1.2 # of strategic economic growth reports produced. <u>Baseline 2006:</u> 0 <u>Target 2011:</u> 5 reports <sup>19</sup> .	Baseline survey by UNCT. Target survey by UNCT <sup>20</sup> . Joint programme evaluation.	
	1.1.1 # of people trained on the generation and dissemination of data and information about the prospective EGC. <u>Baseline 2006:</u> 0 <u>Target 2011:</u> ?*  1.1.2 # of workshops with stakeholders held to discuss the strategy and knowledge -by CSO -by GoE institutions. <u>Baseline 2006:</u> 0 <u>Target 2011:</u> ?*	GoE. Joint programme evaluation.	

<sup>16</sup> PASDEP

<sup>17</sup> ILO

<sup>18</sup> This indicator will be defined more precisely after the identification of the EGC.

<sup>19</sup> (i) a diagnostic of the corridor's development performance, and its multi-sectoral potential; (ii) the growth and development strategy emerging in the corridor, based on on-going plans; (iii) issues on choices and tensions between the elements of the corridor's emerging strategy, including gaps identified; (iv) recommendations providing the innovative foundations for higher growth in the corridor; and (v) concrete interventions proposed

<sup>20</sup> It will be carried out one comprehensive survey for each Country Programme Outcome and related outputs

UNDAF and Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome
	<p>1.3.1 # of awareness raising activities, related to HIV/AIDS and growth in the EGC.  <u>Baseline 2006:</u> 0  <u>Target 2011:</u> ?*</p> <p>1.3.2 # of people reached through awareness raising activities, related to HIV/AIDS and growth in the EGC, disaggregated by category of economic agents.  <u>Baseline 2006:</u> 0  <u>Target 2011:</u> ?*</p>	Joint programme evaluation.	
<p><b>Outcome 1 High-quality knowledge developed about economic growth corridors that promote accelerated and pro-poor growth</b></p>	<p>1.4.1 # of workshop on productivity improving processes and the application of technology to value chain clusters and products.  <u>Baseline 2006:</u> 0  <u>Target 2011:</u> 5</p> <p>1.4.2 # of people reached through the workshops  <u>Baseline 2006:</u> 0  <u>Target 2011:</u> ?*</p>	Joint programme evaluation.	
<p><b>Outcome 2 Improved labour productivity in specific locations within the corridor in order to enhance the respective priority economic activities, while building on accompanying capital infrastructure developments engaged upon by Government and donors, to support overall national growth.</b></p>	<p>1.2.1 Δ % labour productivity in specific locations within the EGC.  <u>Baseline 2006:</u> survey.  <u>Target 2011:</u> it will be defined after EGC identification and baseline survey.</p>	Baseline survey by UNCT. Target survey by UNCT.	
	<p>2.1.1 # of people, coming from government, private institutions, farmers (including pastoralists), the formal labour force and the informal sector, with special attention to vulnerable groups, trained through TVET adapted to location-specific productive activities.  <u>Baseline 2006:</u> 0  <u>Target 2011:</u> ?*</p>	Joint programme evaluation.	

UNDAF and Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome
	2.3.1 % of people with access to safe water and sanitation in the EGC. <u>Baseline 2006:</u> it will be defined after EGC identification. <u>Target 2011:</u> it will be defined after EGC identification.	Ministry of Water and Health. WMS, PPA, HICE.	
	2.4.1 # of micro, small and medium enterprises with access to hands-on and ICT-based technical and managerial advisory services. <u>Baseline 2006:</u> survey. <u>Target 2011:</u> it will be defined after EGC identification and baseline survey.	Baseline survey by UNCT. Target survey by UNCT.	

UNDAF and Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome
<p><b>Outcome 3 Increased and sustained use of technology (mechanical, inputs, marketing and management) adapted to location-specific needs to support the economic growth corridor</b></p>	<p>3.1 # of telephone lines and cellular subscribers per 100 population in the EGC.  <u>Baseline 2007:</u> it will be defined after EGC identification.  <u>Target 2011:</u> it will be defined after EGC identification.</p> <p>3.2 # of people with access to electricity within the EGC.  <u>Baseline 2007:</u> it will be defined after EGC identification.  <u>Target 2011:</u> it will be defined after EGC identification.</p> <p>3.4 Road density (Km/1,000 sq. km).  <u>Baseline 2004/05:</u> it will be defined after EGC identification.  <u>Target 2011:</u> it will be defined after EGC identification.</p> <p>3.1.1 # of sectors related to agricultural exports regulated by Ethiopian laws (plant health, food safety, etc.) compliant with international standards.  <u>Baseline 2007:</u> 0  <u>Target 2011:</u> 5</p>	<p>Ethiopian Telecommunications Corporation.  Ethiopian Electric Power Corporation.</p> <p>National Agency of Standards.  Joint programme evaluation.</p>	

UNDAF and Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome
	<p>3.1.2 # of public private partnership projects implemented within the EGC.  <u>Baseline 2007:</u> survey.  <u>Target 2011:</u> ?*</p> <p>3.2.1 # of people trained on labour intensive technology transferred from foreign and local businesses to Ethiopian SMEs.  <u>Baseline 2006:</u> 0  <u>Target 2011:</u> ?*</p>	Joint programme evaluation.	
<b>Outcome 3 Increased and sustained use of technology (mechanical, inputs, marketing and management) adapted to location-specific needs to support the economic growth corridor</b>	<p>3.3.1 # of value chains studies undertaken.  <u>Baseline 2006:</u> 0  <u>Target 2011:</u> 10</p> <p>3.3.2 % of total inputs purchased from or sold to international firms.  <u>Baseline 2006:</u> survey.  <u>Target 2011:</u> ?*</p>	Joint programme evaluation. Baseline survey by UNCT. Target survey by UNCT.	
	<p>3.5.1 # of workshops/trainings on certification systems, quality control, trade-support institutions and market access.  <u>Baseline 2006:</u> 0  <u>Target 2011:</u> ?*</p> <p>3.5.2 # of people reached through the workshops  <u>Baseline 2006:</u> 0  <u>Target 2011:</u> ?*</p> <p>3.5.3 # of new products and services certified and internationally traded.  <u>Baseline 2006:</u> ?*  <u>Target 2011:</u> ?</p>	Joint programme evaluation. National Agency of Standards.	

UNDAF and Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome
	3.7.1 Δ% post-harvest loss within the EGC. <u>Baseline 2006:</u> survey. <u>Target 2011:</u> ?*	Ministry of Agriculture and Rural Development. Pre-and post-harvest loss survey undertaken by CSA.	
<b>Outcome 4 Improved institutional capacities at federal and regional levels (MoFED, Regional Bureaux and other stakeholders) in monitoring, evaluation and implementation of the economic growth corridor</b>	4.1 M&E system strengthened at federal and regional levels in order to track the EGC development and performance. <u>Baseline 2006:</u> 0 <u>Target 2011:</u> Y  4.2 # of M&E reports prepared with the involvement of the stakeholders. <u>Baseline 2006:</u> 0 <u>Target 2011:</u> 3	MoFED, Regional Bureaux, Joint programme evaluation.	
	4.1.1 # of surveys/census accessible. <u>Baseline 2006:</u> 0 <u>Target 2011:</u> 1 census, 1 EDHS report, 1 migration survey, 2 welfare monitoring surveys.	MoFED, Regional Bureaux, Joint programme evaluation.	
	4.2.1 # of EGC coordination and M&E committees established to work on productivity enhancement and access to decent work, and the impact of HIV/AIDS, malaria and other disease of poverty on overall productivity and poverty reduction. <u>Baseline 2006:</u> 0 <u>Target 2011:</u> ?*	MoFED, Regional Bureaux, Joint programme evaluation.	

\* Blank targets and baselines to be defined at the beginning of the UNDAF cycle