

UNICEF Cambodia

Annual Report 2010

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Annex A: Specific Monitoring Questions for the MTSP (not included)

Annex B: Report on UN Reform and Inter-Agency Collaboration (not included)

1. Executive Summary

The fact that the Country Office (CO) was able to deliver on key priorities is in our view a performance given the profound reorientation of our programme, the workload generated by the development of the new country programme (CP), and by the office reorganization, which included updating 85 job descriptions, recruiting 64 positions, coordinating office space reallocation in Phnom Penh and organizing the creation of five new zone offices, while rolling-out a number of organizational changes.

Resource mobilization for the new CP effectively used the strategy developed in February, and the programme is funded at 67% for 2011 with additional confirmed pledges for the first two years.

Key success is noted in the effective positioning of UNICEF as a key partner in a number of sectors, which allows for increased priority given to children rights in various national plans and policies, and is further manifested by additional resources leveraged.

Further to systematic advocacy efforts undertaken jointly with the UNCT, 2010 saw the emergence of attention devoted to equity issues by development partners and government.

Significant shortfalls: Some management indicators were not met (CMT representation at provincial coordination meetings was only assured in 10% of all meetings) or met with delay (completion of PERs), largely due to the workload generated by the transition, which was given maximum priority.

After devoting substantial time to design of the new CP, the office realized late October that the proposed results structure would lead to increased fragmentation, verticalization and transaction costs, and had to quickly revisit the proposed results matrix to streamline the number of PCR and IR.

Some shortfalls are further reported in various chapters below, but are on the whole not significant when compared to the key CMT agreements in terms of programme and office transition priorities, which were largely met.

Significant partnerships: Please also see above under key achievements, and below on strategic partnerships. Through its role in the Development Partners Group on decentralization, UNICEF encouraged enhanced coherence among UN agencies. This strategic positioning of the UN system in a fragmented donor environment strengthened UNICEF's position to effectively raise equity.

2. Country Situation as Affecting Children and Women

From 1997 to 2008, Cambodia's economic growth rate was second in Asia only to that of China, but this period also saw growing income inequality. While the latest figures show poverty rates dropping to 30% in 2007, the World Bank estimates that poverty rose by 1 to 4% in 2008-2009, as a result of the impact of the global economic crisis.

A recent analysis of the Cambodia Millennium Development Goals (CMDGs) highlights good progress towards Goals 4 and 6, while Goals 2, 3 and 9 are realizable with additional effort. Goals 1, 5 and 7 are rated off track and unachievable. The target for basic education was revised in the NSDP update to cover primary education only.

While the exclusive breastfeeding rate (66%) is one of the highest in Asia, and iodized salt usage is over 70%, progress in other key nutrition indicators since 2005 has halted or advanced minimally. A 2008 national anthropometric survey showed significant increases in the rate of acute malnutrition among poor urban children, from 9.6% in 2005 to 15.9% in 2008.

[Recent census data \(2008\)](#) show that the infant mortality rate dropped to 60 per 1,000 live births in 2008, down from 66 per 1,000 live births in 2005, indicating that Cambodia is on track to meet the target of 50 per 1,000 live births in 2015. Despite this progress, child mortality in Cambodia remains among the highest in Asia, and future progress depends on the country's ability to tackle neonatal mortality. The census indicated no change over the past decade in the maternal mortality ratio, which remains at over 400 deaths per 100,000 live births.

The National Centre for HIV/AIDS, Dermatology and Sexually Transmitted Diseases (NCHADS) estimates current adult HIV prevalence at 0.7%, down from over 2% in 1997 and already surpassing the CMDG target of 1.8%. HIV is concentrated among higher-risk, largely young populations, and an increasing proportion of women are becoming infected as a result of spousal transmission.

The 2008 Census showed the ratio of literate females to males in the 15 to 24 age group at 95.7%, indicating great progress. The education management information system (EMIS) in 2009 indicated that the gender parity index for primary and lower secondary levels has reached 1.0. Though EMIS shows primary net enrolment for 2009 near 95%, high rates of overage enrolment and repetition have led to a lower secondary net enrolment ratio of just 31.9%.

The 2008 Census showed rural access to an improved source of drinking water at 41% and rural access to improved sanitation at 23%. Goal 7 targets of 50% and 30%, respectively, are thus potentially within reach.

Government data reports an increase in the number of children living in institutional care, while the majority of the 11,000 children living in some 220 institutions have at least one living parent or other close relative. Social attitudes and cultural beliefs lead to children experiencing violence and abuse at home, at school and in institutions. Gender-based violence remains a significant concern, with 65% of offences reported to the specialized police department related to sexual abuse.

Children in contact with the law as victims, witnesses and offenders have limited access to justice. Human rights observers have noted that despite the many pledges of commitment to judicial and legal reform, there has not been any meaningful progress regarding independence of the courts from political and financial influence. A general public perception persists that the judiciary is corrupt and unreliable and many Cambodians have therefore little or no faith in the courts as institutions of justice.

We also note with concern the contraction of democratic space, as evidenced in the use being made of the new penal code.

3. Country Programme Analysis & Results

3.1 CP Analysis

3.1.1 CP Overview

This year, named the year of transition and of “unleashing staff potential”, was largely dedicated to finalizing the new CP 2011-2015, using the strategic recommendations from the 2008 midterm review (MTR), the UNDAF finalization and the lessons derived from the programme and office transition plans. The office used key sector planning and review processes to further refine the proposed results and organized consultations with key partners to validate those choices. In parallel, staff were involved in a massive office restructuring. These processes led to a stronger focus on key priorities for the transition as the programme team “resized ambitions” at the mid-year review. This allowed for progress towards reaching the key end results of this CP and the advancement of operationalizing the new CP.

The internal annual review conducted early December documented progress against agreed priorities, and noted that decentralization has become a core business area for the CO, as manifested by the coordinated support to functional mapping and analysis towards devolution of powers to local authorities. A key measure of success of the transition was the integration of HIV/AIDS results into Child Protection, Child Survival, and Education, together with the establishment of stronger collaboration between key staff in preparation for the new CP.

An end-of-cycle event, associating key government, non-government and donors allowed the CO to take stock of the cooperation, validate results and lessons, and identify key orientations for the next five years. Most programme chapters report a reasonable performance this year against planned annual targets, despite major staff change that affected all sections in various ways.

Equity was agreed as the 2010 advocacy priority. The CO conducted further analysis and drafted an office equity strategy that informed inputs presented in the equity tracker. Progress was discussed through the mid- and end-year reviews, particularly in terms of research and analysis, use of census data or specific studies, contribution to regional and global studies, and in terms of strategic advocacy. Following key conclusions from the annual review, the CO recognized that some proposed actions may be too ambitious to achieve within the proposed time frame.

3.1.2 Programme Strategy

3.1.2.1 Capacity Development

Among key conclusions from the MTR and end-of-cycle reviews, it was noted that the previous CP overemphasized direct UNICEF accountabilities for achievement of targets and goals at the expense of facilitating national capacity and ownership for the advancement of children's rights. Therefore, the new CP addresses national capacity development and ownership in the achievement of the CMDGs, with equity. The programme will place greater focus on accelerating CMDG localization by identifying key bottlenecks and developing the capacity of community groups, especially children, youth, and women's groups, to interact with village leaders, service providers and commune councils. It further seeks to generate community action in analyzing their situation, finding local solutions, demanding basic services and monitoring the delivery of appropriate essential commodities and quality basic services. Emphasis is also placed on strengthening systems for service delivery, such as the education sector's district training and monitoring teams (DTMTs).

In 2010, as part of the transition to the new CP, efforts were made to operationalize the above, including:

A government-led, joint EU/Sida/UNICEF formulation mission has resulted in the design of a sector support programme for implementation of the Education Sector Plan (ESP) 2009-2013 consisting of sector budget support to be provided by the EU and Sida, and a Capacity Development Partnership Fund (CDPF) that will be managed by UNICEF. The CDPF will allow a more coordinated approach to capacity development by strengthening capacities for more effective and efficient education service delivery based on priorities identified in a medium-term capacity development plan.

UNICEF worked closely with UNDP to build the capacity of the Commune Councils for Women and Children (CCWCs). A training module on commune and sangkat action for social development related to maternal health, hygiene and sanitation, community preschool, gender equity and child protection was prepared, pre-tested and approved by the National Social Service Working Group of National Committee for Democratic Development (NCDD) with inputs from line ministries, UNDP, UNFPA and UNICEF.

Further capacity development-related results are recorded in the programme component chapters below.

3.1.2.2 Effective Advocacy

The office remained actively engaged with the UN Communications Group, helping to streamline the approach on advocacy. The UNCT is the high-level UN forum for promoting equity-focused advocacy around the CMDGs. For 2010, priorities included maternal mortality, maternal and child nutrition, and youth, with special attention given to challenges, disparities and strategies to reducing the gaps. Advocacy was also done through continued participation in discussions on the effects of the economic crisis and in the Informal Development Partners' Working Group on Climate Change.

UNICEF advocacy resulted in a Prime Minister's sub-decree in May 2010, designating 13 November as National Sanitation Day. A message on the importance of sanitation and hygiene was released by the Prime Minister's office and broadcast nationwide. The WASH programme also supported the Minister of Rural Development's participation as chairperson in the coordination meeting on arsenic, which helped to mobilize relevant departments within the Ministry of Rural Development (MRD) and development partners to intensify arsenic-mitigation efforts. Future funding support was pledged by the Water and Sanitation Programme (WSP) for arsenic mitigation for 2011.

Significant support was provided to enhance youth participation. Based on a KAP study on youth civic participation, done in cooperation with UNDP, draft UN Common Advocacy Points on Youth were prepared. Youth-led celebrations took place on International Youth Day and International Children's Day, the latter being instituted as a national public holiday. The Cambodia National Children Council (CNCC) represented the ASEAN Children's Forum in Cambodia, which led to a joint declaration, joint website and regional task force for child rights. The Joint Declaration on South-South Cooperation for Child Rights in Asia-Pacific was endorsed by the Cambodian Government.

The office also developed a UNICEF-Cambodia [website](#) and prepared a new Country Kit. Key visual material (MARYP Survey, Child-Friendly Schools (CFS) documentary series "Rising Voices" on Viewchange.org, UNFPA film on uninformed practices related to maternal health, "Stand Up for MDGs" video for UN Communications Group) were produced through technical support and/or direct production.

3.1.2.3 Strategic Partnerships

The new CP preparation process was effectively used to further strengthen and develop strategic partnerships in key sectors. New partnerships were formulated with institutions such as the Ministry of Economy and Finance, the Supreme National Economic Council and universities and in new geographical areas.

The office continued to actively engage with the Cambodia aid-effectiveness architecture in key sectors, which led to UNICEF being elected co-chair of key joint government-development partner technical working groups (TWGs) in education; rural water supply, hygiene and sanitation; and the Government's ongoing decentralization and deconcentration (D&D) reform. UNICEF is also currently chairing the joint partners group for the second Health Sector Support Programme (HSSP2) and is a key member of the Interim Working Group on Social Protection. Late October, at the joint government-development partner coordination committee, the Government confirmed its preference for programme-based approaches and shared updated guidance for the functioning of TWGs. Those decisions further confirmed the importance of effective engagement in those mechanisms for UNICEF and the UN Country Team in order to further advance progress towards the CMDGs.

The CO held a series of consultations on approaches to partnerships with traditional and non-traditional actors and has mapped out new modalities of engagement that support models and pilots

for reaching the poor, vulnerable and marginalized. Operationalizing this approach is expected to be central to partnerships in the next CP.

The CO continued to build strategic partnerships with NGOs and other international organizations to strengthen the provision of social and child protection services, including through Cambodia's D&D process, as further presented in the Child Protection chapter below.

UNICEF-Cambodia was instrumental in promoting partnerships among NGOs supporting the MRD WASH components, including sanitation marketing, studies on appropriate technologies for hand-washing, development of advocacy materials and piloting different approaches to rural sanitation improvement. New key players, including PATH, Water AID, and UN-Habitat have sought and received orientation on the RWSSH sector.

Partnership and cooperation between UNCT members and the Ministry of Education, Youth and Sport (MoEYS), UN Youth Advisory Panel and youth NGO networks facilitated a number of achievements, further reported in the ASM chapter below.

3.1.2.4 Knowledge Management

Further to the strategic orientations from the MTR 2008 and CP 2011-2015 preparation processes, the CO recognized the need to put in place systems that will sustain and promote our role as knowledge leader on children in the country. Throughout 2010, the Monitoring and Evaluation, Advocacy and Social Mobilization units, and the Social Policy Specialist worked to design the new Policy, Advocacy and Communication (PAC) programme component. PAC will focus on strengthened knowledge management systems within the office, and for the country as a whole, with key counterparts such as CNCC, which is mandated to generate, analyze and disseminate knowledge on child rights in Cambodia. A dedicated Knowledge Management Assistant position has been established to reinforce the office capacity.

The situation analysis of women and children finalized in 2009 was further edited and disseminated in 2010, accompanied by illustrative short briefs on key issues. A confidential submission was sent to the Committee on the Rights of the Child in preparation for consideration of Cambodia's second and third CRC reports at its 57th session in May 2011. The office also contributed to various sector analyses, such as the review of census data on education and major studies and evaluations as further reported in other chapters.

Of particular note this year was the quick assessment of the consequences of suspension of salary supplements on the delivery of key social programmes, where the office demonstrated capacity to optimally use its field presence to quickly generate data and analysis to inform discussions and decisions with partners.

Work on budget for children was initiated, a theme of increasing relevance, which is expected to further evolve in coming years. The analysis produced by various programmes was effectively used to elaborate the draft office equity strategy and agenda and also facilitated more efficient advocacy and engagement with partners around key equity-related issues.

Finally, the office tested its capacity to distill conclusions of various studies and analysis and produce policy briefs that support communication and advocacy, as was done for climate change and for both the women and children and youth situation analyses.

3.1.2.5 C4D Communication for Development

The main strategic shift for C4D was the sharper focus on behavioural results rather than raising awareness or increasing knowledge. UNICEF also contributed to the development of effective

national communication strategies on priority issues, providing a space for partners to collaborate and contribute their resources towards common results.

Building on the success of the 2009 ANC campaign, which used a comprehensive and integrated approach to communication – Communication for Behavioural Impact (COMBI) – UNICEF helped the National Centre for Health Promotion (NCHP) and the National Nutrition Programme (NNP) develop a three-year communication strategy to promote complementary feeding. In collaboration with headquarters, work started on a communication initiative for pneumonia and diarrhoea, the two leading causes of child mortality in Cambodia. Lessons learned will be used to improve the draft global communication framework.

As secretariat for the National Coordinating Committee on IEC for Avian and Human Influenza chaired by the ministries of Health and Agriculture, UNICEF brought together all relevant partners. The committee's tasks have evolved, now covering the emerging influenza A (H1N1) and the outbreak of acute watery diarrhoea/cholera. UNICEF also monitored and followed-up on agreed actions and helped produce IEC material. Financial support was obtained from set-aside funds.

Capacity and motivation of community volunteers remain a challenge: in this year's ANC campaign, fewer women visited health centres for early ANC. The voluntary workers lacked motivation due to limited interpersonal skills, poor technical knowledge, pressure to earn income and engagement in too many development activities. One potential solution to be piloted in 2011 is for commune councils to contract voluntary workers.

UNICEF Cambodia produced two videos on juvenile justice that were distributed to law enforcement officials and NGOs through the Ministry of Justice (MoJ). An accompanying leaflet explains how to use the videos for children in contact with the law.

In 2011, C4D support to the programmes will focus on a few priority areas for behavioural results in collaboration with concerned UN agencies and NGO partners. C4D will also help to generate evidence from the field to inform policy dialogue.

3.1.3 Normative Principles

3.1.3.1 Human Rights-based approach to Cooperation

The human rights-based approach to programming has been mainstreamed into the UNDAF and the CP 2006-2010. UNICEF strengthened its human rights-based approach by identifying the relationship of rights holders and duty bearers in realizing child rights, particularly under the Seth Koma and Child Protection programmes, which also contribute to strengthening the capacity of commune council members and judicial and law enforcement professionals to understand their roles and responsibilities. Significant progress is noted in terms of youth participation as further reported in the ASM chapter below.

Following the MTR recommendation towards a greater focus on equity and reaching the un-reached in programming and advocacy, the office has made efforts to include relevant indicators in the monitoring of outputs and outcomes, as further detailed in the Equity Tracker. In 2010, these were systematized through an internal reflection towards an office equity strategy to further focus key choices made in the new CP. Enhancing the team's skills and expertise will continue to receive priority attention in 2011, with support of the newly established PAC section.

3.1.3.2 Gender Equality and Mainstreaming

In the current cycle ending in December 2010, UNICEF contributed to UNDAF Priority 3: Capacity Building and Human Resource Development for Social Sectors, and particularly CP Output 4:

Enhanced gender responsiveness of social service institutions and providers, through all CP components. School enrolment campaigns specifically focused on improving girls' enrolment and improving access to water and sanitation facilities (especially for girls) in primary schools. Through the Seth Koma Programme, female councillors and Commune Focal Points for Women and Children were trained to strengthen their effectiveness as representatives of women and children in their communities. The pivotal role of Commune Focal Points for Women and Children in generating actions on social services is increasingly recognized. Recent trends reported by the Ministry of Women's Affairs (MoWA) highlight that appointed focal points are increasingly filling commune positions when they become vacant.

The UNCT conducted a gender assessment of the current UNDAF and agreed to a number of concrete actions. Gender has been agreed as one of the key results areas for the new 2011-2015 UNDAF and specific outcomes include coordinated agency support of a programme-based approach that assists the National Gender Strategy 2009-2013, published in September 2009.

The proposed programme component and intermediate results were reviewed by the programme team in June, using the proposed gender equality marker, and wherever possible and appropriate, indicators have been agreed to help the office track progress from a gender perspective. Key members of the programme team, including section chiefs and gender focal points, joined the web-ex session to further refine understanding of the tool. Attention was given to ensure a gender perspective in a number of key studies, such as the Most-at-Risk Young People (MARYP) Survey, and through enhanced children and youth participation, as was done this year in the context of the preparation of the CRC report. Other relevant achievements are further highlighted in the various chapters below.

3.1.3.3 Environmental Sustainability

The 2009 Health Service Access among Poor Communities in Phnom Penh Study revealed that access to basic preventive and curative services for women and children is relatively good. However, despite the accessibility and high coverage of health services, respondents in the study reported poor health outcomes attributed primarily to the unhealthy social and environmental conditions in which they live and the high cost relative to households' income. Key recommendations from the study – the review and expansion of social protection mechanisms and improvement of living conditions and adequate resourcing of health centres serving people living in urban resettlement areas – were taken forward in 2010 in close consultation with the municipal health authorities.

The office joined the current working group on climate change, and conducted an internal review on how cooperation currently relates to preparation and mitigation approaches. A learning session was co-facilitated by the regional office and the UNDP specialist. The office collaborated with the Institute for Development Studies and plan to produce a [policy brief on climate change and children in Cambodia](#) published on the Children in a Changing Climate website.

As part of the preparations for the new CP, the CO contracted a rapid Environmental Impact Assessment (EIA), completed in November 2010. The assessment showed that, given the available information, it appears that no unacceptable widespread negative environmental and socio-economic impacts are likely to occur as a result of UNICEF's activities. However, as the new CP will include pilot-style activities, recording and monitoring potential negative impacts needs to be increasingly rigorous to ensure that should negative impacts occur, they can be rectified and not replicated as implementation progresses. The office will consider the need for an environmental management plan in follow up to the EIA recommendations.

3.1 Programme Components

COUNTRY PROGRAMME COMPONENT: Community Action for Child Rights (Seth Koma)

* Main MTSP Focus Area Addressed: FA1

* Main MTSP Key Results Areas Addressed: FA1 KRA3, FA2 KRA2, FA5 KRA3

a) Purpose of the Programme Component:

The Seth Koma Programme adopts a practical approach to human rights. It promotes collaboration between service providers, sector line departments and communities to identify and respond to the rights of children in six priority provinces. This contributes to integrating child rights into the mandate of local authorities, which in turn is being demonstrated through real investment in services for children. The programme directly supports achievement of the UNDAF outcome on good governance, a priority of the National Development Strategic Plan. The programme is organized into two main components: Local Governance for Child Rights (LGCR) and Water and Environmental Sanitation (WASH).

b) Resources Used:

Against a total planned US\$4.319 million, US\$3.758 million was allocated, of which US\$3.481 million has been requisitioned as of 20 December. RR actual allotment increased by 8% compared to the actual new approved ceiling for 2010 for additional need for local governance and water sanitation and hygiene activities.

Planned budget (a)	1,319	3,000	4,319
Actual AWP allocation (b)	1,419	2,339	3,758
% vis-à-vis planned budget (c=b/a)	108%	89%	89%
Requisitioned amount (d)	1,419	2,062	3,481
% Requisitioned against allotment (e=d/b)	100%	88%	93%

Amount in thousands of US\$

The table below shows donors to Other Resources allocated to 2010

Donor Name	Main Area of Assistance	Amount
Australia AusAID	Water, Sanitation and Hygiene	820,659
UK (DFID)	Water, Sanitation and Hygiene	532,398
Global Thematic- FA5	Local Governance	253,669
Australian Committee for UNICEF	WASH and Local Governance	243,053
Global Thematic- FA2	WASH and Local Governance	236,658
Netherlands	Early Childhood Development	148,565
UNICEF (7% RR Set Aside Fund)	WASH and Local Governance	70,000
Luxembourg Committee for UNICEF	Water, Sanitation and Hygiene	20,000
USA USAID	Local Governance	10,800
Global Thematic- Girls Education	Water, Sanitation and Hygiene	1,782
Global Thematic- FA1	Water, Sanitation and Hygiene	1,057
Total		2,338,641

c) Results Achieved:

The capacity of commune councils and CCWCs to monitor indicators for children and organize service delivery related to health, education, protection, and water and sanitation was significantly strengthened. CCWC guidelines for social development were developed and disseminated nationwide. LGCR supported 946 community preschools in 217 communes, benefiting 19,950 children, including 10,172 girls. Additionally, 233 commune councils were enabled to contract transportation providers to safely deliver 2,576 pregnant women to antenatal clinics. A social service mapping tool was used in 20 communes to identify, support and monitor 782 vulnerable families, women and children.

Regarding WASH, the six focus provinces surpassed the target 55% coverage of improved sources of drinking water. New interventions related to household water treatment and safe storage reached 250,000 households. Four of six focus provinces reached the 100% target coverage of school water supply and sanitation, while the remaining two (Prey Veng and Kampong Thom) reached approximately 90%. Half of the families in at-risk areas were informed of the presence and risks of arsenic and 30% of households used arsenic-free water supplies. Only two of six provinces (Stung Treng and Kampong Thom) reached the 25% target related to community sanitation. CLTS contributed to improved sanitation, with 400 of the 1,140 exposed villages declaring ODF status. Awareness-raising activities related to hand-washing with soap reached approximately 173,000 people. Over 500,000 primary school students and community members in 16 provinces participated in the Global Hand-Washing Day celebrations.

For LGCR, the establishment of new administrative structures at provincial and district levels delayed activation of the newly created Women and Children Consultative Committees. Central-level staff of the NCDD-Secretariat was unable to organize the first meeting of the National Social Services Working Group because they were busy with the finalization of the 10-year National Programme on Sub-National Democratic Development and the preparation of its initial three-year implementation plan (IP3), 2011-2013. For WASH, the five-year strategic action plan for arsenic mitigation developed in 2006 has still not been endorsed, which caused further delays in issuing a law to restrict well drilling in arsenic-affected areas. The national strategic plan for arsenic mitigation has now been updated with UNICEF support and was presented to the 2010 MRD congress late December 2010. It is expected that with further advocacy the well-drilling regulation in arsenic-affected provinces will be put in place.

An internal assessment of the social service mapping tool is being finalized to provide insight on its usefulness in complementing other existing methodologies to identify underserved children. A WASH evaluation has been carried out to assess impact of interventions over the last five years and has been complemented by an assessment of UNICEF's experience with regard to delegated procurement. Both reports will be completed early 2011 and findings will be used to guide the new WASH programme.

As co-chair of the Development Partners Group on D&D, UNICEF has encouraged important steps toward adopting a programme-based approach and fostered greater coherence among UN partners. LGCR worked closely with UNDP to expand support to CCWC in the remaining 1,199 communes in 17 provinces and the capital. As a nexus between programmes that support line ministries in undertaking functional mapping in social sector ministries, LGCR strengthened its collaboration with GTZ/EU-Space project and ADB to ensure a coherent approach to function assignment. WASH worked with ADB, WSP, WHO and NGOs to support the development of the National RWSSH strategy and the update of the five-year arsenic strategic action plan. UNICEF played a significant role in facilitating submission of the 2010 Global Annual Assessment of Sanitation and Drinking Water (GLAAS) Report, which, together with the completion of the national strategy, enabled Cambodia to access the Global Sanitation Fund. Continuing advocacy efforts with partners have resulted in the Prime Minister's approval of a sub-decree, issued in May 2010, instituting 13

November as National Sanitation Day. In September 2010, UNICEF was nominated the lead development partner facilitator for the RWSSH TWG.

d) Future Work Plan:

In 2011, the LGCR Programme will work towards forging partnership principles that lead to the adoption of a programme-based approach in democratic development to support the IP3; ensuring strong inter-sectoral collaboration to pilot programme interventions modelling new decentralized functions at sub-national level; and strengthening capacity of the new district and provincial councils and their Women and Children Consultative Committees.

The WASH Programme will work towards promoting safe drinking water through water safety plans that include community-based water quality monitoring and response, arsenic mitigation and household water treatment and safe storage; enhancing systems and capacities to promote the adoption of hygienic practices by families, communities and health centres; ensuring the development of a comprehensive and coordinated communication plan that includes hygiene, sanitation and arsenic communication; and enhancing the CLTS approach through special attention to gender and equity, children and youth participation, community monitoring and the roles of commune authorities. The programme will seek to develop stronger links to sanitation marketing with the private sector to promote access to environmentally appropriate technology.

COUNTRY PROGRAMME COMPONENT: Child Survival

*** Main MTSP Focus Area Addressed: FA1**

*** Main MTSP Key Results Areas Addressed: FA1-KRA1, FA1-KRA2, FA5-KRA3**

a) Purpose of the Programme Component:

The Child Survival and Development Programme works at the national and provincial level to help partners achieve increased equitable access to and utilization of quality social services as part of the UNDAF outcome related to capacity building and human resource development for social sectors, and as a contribution to MDGs 1, 4 and 5. While striving for universal coverage of low-cost life-saving interventions that enhance MNCH, the programme supports actions targeting the most vulnerable children and women. A mix of preventative and curative measures that combine community- and facility-based activities is being promoted.

Programme-specific objectives, reviewed during the 2008 MTR, are to achieve 90% coverage of the following interventions in the six UNICEF-supported provinces: early and exclusive breastfeeding, appropriate complementary feeding, immunization of children against seven vaccine-preventable diseases, vitamin A supplementation and deworming for children under age five, adequate diarrhoea treatment and appropriate care-seeking for acute respiratory infections, immunization of women of childbearing age against tetanus, iron-folate supplementation for pregnant women, vitamin A supplementation for postpartum women and iodized salt consumption.

The main national implementing partners in 2010 were the Ministry of Health (MoH) and its structures at the national level (departments of planning and health information and of communicable disease control; national programmes for immunization, nutrition, reproductive health, maternal and child health; the National Centre for Health Promotion) and the six provincial health departments; the Ministry of Planning (National Institute of Statistics and National Sub-Committee for Control of IDD); and the Council for Agricultural and Rural Development (CARD).

The child survival programme was actively engaged in three major partnerships to support the Government in accelerating progress towards health- and nutrition-related MDGs:

- The HSSP2 established in support of the Health Strategic Plan and involving AFD, AusAID, BTC, DfID, UNFPA, UNICEF and WB, all working through common management arrangements defined in the Joint Partnership Agreement.

- The UN Joint Programme on Children, Food Security and Nutrition supported by the Spanish MDG Fund and involving UNICEF, WHO, WFP, ILO, FAO and UNESCO.
- With USAID-funded partners, to increase the scale and improve the quality of maternal and newborn health services.

Other UN and multilateral international partners are the EU, GTZ and JICA. Local and international partner-NGOs include Magna, World Vision and MEDiCAM (a consortium of national health NGOs).

b) Resources Used :

A total of US\$5.154 million was planned for the Child Survival Programme in 2010. US\$5.251 million was allocated, of which US\$5.157 million has been requisitioned as of 20 December.

Planned budget (a)	1,510	3,644	5,154
Actual AWP allocation (b)	1,494	3,757	5,251
% vis-à-vis planned budget (c=b/a)	99%	103%	102%
Requisitioned amount (d)	1,477	3,680	5,157
% Requisitioned against allotment (e=d/b)	99%	98%	98%

Amount in thousands of US\$

The table below shows donors to Other Resources allocated to 2010

Donor Name	Main Area of Assistance	Amount
European Commission/EC	Health Behavioural Change Communication	1,019,734
UNICEF (7% RR Set Aside Fund)	Maternal, Newborn and Child Health and IDD/USI and other Nutrition Activities	608,055
HSSP2 Joint Programme	Maternal, Newborn and Child Health and IDD/USI and other Nutrition Activities	566,792
Tetsuko Kuroyanagi	Maternal, Newborn and Child Health	431,338
USA USAID	IDD/USI and other Nutrition Activities	203,922
The GAVI Fund	Maternal, Newborn and Child Health	200,000
United Nations Foundation Inc.	Maternal, Newborn and Child Health	180,000
Netherlands	Early Childhood Development	175,510
Australia AusAID	Programme Support	112,152
German Committee for UNICEF	Maternal, Newborn and Child Health	77,768
Consolidated Funds from NatComs	Maternal, Newborn and Child Health	66,458
Japan Committee for UNICEF	Maternal, Newborn and Child Health	61,823
Global Thematic- FA1	Maternal, Newborn and Child Health	46,406
United States Fund for UNICEF	Maternal, Newborn and Child Health	7,284
Total		3,757,243

c) Results Achieved:

UNICEF supported analysis of health and nutrition data from the [2009 CSES](#), which showed good progress in coverage of key MNCH interventions.

MNCH Intervention	2005 CDHS, %	2009 CSES, %
Antenatal care	69	82
Iron-folate in pregnancy	63	85
Skilled birth attendants	44	71

Iron-folate postpartum	11	55
Vitamin A postpartum	27	60
Protection at birth from tetanus	69	81
Vitamin A children under-5	35	60 (2008 CAS)
Deworming children under-5	27	40

The greatest progress was achieved in coverage of skilled birth attendants and postpartum care. Over 90% immunization coverage was reported in 2009 (HIS) with similar levels registered in 2010.

In 2010, UNICEF engagement with HSSP2 maintained the partnership focus on MNCH and resulted in allocation of 45% of the pooled funds to this area.

The programme contributed to the development of a fast track initiative for **maternal and newborn** mortality reduction, safe motherhood protocols, in-service and pre-service training of midwives, and provincial emergency obstetrics and newborn care plans of action.

UNICEF and USAID partners supported the review of current sub-national level practices related to key life-saving interventions for mothers and newborns and in developing recommendations to foster rapid improvements.

Initial implementation of the community care of mothers and newborns (CCMN) package revealed significantly higher levels of knowledge and appropriate practices in intervention villages. In targeted areas, 91% of women saved money and 63% arranged for transportation to deliver at health centres, compared to 69% and 24%, respectively, in non-intervention areas. Beyond the direct impact for an estimated 7,000 mothers and newborns, this experience will inform MoH scale-up plans and strengthen community-based programmes.

In **child health**, UNICEF, WHO and other development partners supported equity-focused reviews of the Cambodia Child Survival Strategy and the National Immunization Programme, the findings of which were used to develop specific recommendations on strengthening equitable coverage and quality of services.

MNTE efforts resulted in less than one case of neonatal tetanus per 1,000 live births in all health operational districts in 2010, which suggests good progress towards tetanus elimination.

Community-based education on home-care of sick children and appropriate care-seeking was expanded to 28% of health centres, reaching the annual target and covering some 95,000 children under-5.

In **nutrition**, completed guidelines and training materials for the management of acute malnutrition allowed implementation to begin in one of Cambodia's poorest provinces. Over 7,000 children have been screened and more than 500 received treatment for acute malnutrition. Experience from initial implementation will be used to guide future expansion.

Establishment of the Food Security and Nutrition (FSN) Information Management System under CARD led to the first FSN Early Warning Report and the first monitoring report on the FSN strategic framework.

National media campaigns promoting breastfeeding and iron-folate supplementation were implemented and the complementary feeding communication plan was finalized in 2010. ANC BCC campaign monitoring showed increases in early ANC visit from 5.6% to 38%, which exceeded the planned target of 25%.

Expansion of life-saving interventions for women and children continue to be **constrained** by inadequate strategic and operational planning capacity of sub-national health managers, shortages and poor motivation of health staff, inadequate quality and sustainability of community-based programmes that over-rely on volunteer work, and lack of coordination between multiple, narrowly focused sectoral programmes. Strategic planning in health is hindered by uncertainties and lack of

clarity on the potential impact of simultaneous reform processes in decentralization, public finance and administration.

The **2010 Health Facility Survey** assessed the quality of care delivered to sick children at first-level health facilities in Cambodia. It revealed better quality of care in IMCI facilities compared to non-IMCI health centres and serious deficiencies in the quality of sick young infant management, counselling provided to caregivers, and hand-washing by health providers across all health centres.

The **2010 Cambodia Survey on Iodine Nutrition** continued annual monitoring of universal salt iodization. **Analysis of the 2009 CSES** provided the first provincial estimates of iodized salt coverage since 2005. In 2009, coverage in provinces bordering Viet Nam was at the 2005 level. However, over the last four years there was a nearly 30 percentage points improvement in the coverage in salt-producing areas: at 65%, it is near the national average (71%), but remains below the target of 90%.

d) Future Work Plan:

In order to support MoH in sharpening equity-focused programming, in the first year of the new CP the programme will support analysis of key determinants of inequalities in health and nutrition. This analysis will be complemented by mapping of underserved remote communities and review of equity-focused approaches for MNCH-N. Recommendations will feed into the 2010 MTR of the Health Strategic Plan 2008-2015.

D&D reform in Cambodia poses a number of challenges but also provides important opportunities to involve local authorities in planning, delivering and monitoring health services and to leverage sub-national resources to reach the most vulnerable and disadvantaged. The programme will support mapping of functions and resources in the health sector towards functional assignment to sub-national local authorities; analysis of potential implications of D&D on health sector reform and the equity agenda; and piloting approaches to strengthen delivery of essential services for the poor, such as health equity fund operation in a decentralized context.

In response to the National Social Protection Strategy, the programme will support the design and initiate implementation of cash transfers to the poor to promote maternal health and nutrition. As part of this pilot, UNICEF will work with MoH and the Ministry of Interior (MoI) on contracting health volunteers to improve quality and sustainability of community-based action. D&D and social protection activities will be developed and implemented with LGCR and PAC.

MNCH will support strengthening coverage and quality of antenatal, delivery and postpartum care at facility level and roll-out of community care of mothers and newborns. Major child survival activities in 2011 will include support to the nationwide measles immunization campaign, MNTE, strengthening of pneumonia case management and expansion of diarrhoeal treatment with ORS and zinc. Major nutrition activities will include support to establishing the national system for identification and treatment of child malnutrition, the strengthening of community-based nutrition programmes, expansion of multiple micronutrient in-home fortification and improvement of evidence-base for food fortification programmes. Communication for development approaches will support programme results related to nutrition and care-seeking during pregnancy, childbirth and early childhood.

COUNTRY PROGRAMME COMPONENT: Expanded Basic Education Programme (EBEP)

*** Main MTSP Focus Area Addressed: FA2**

*** Main MTSP Key Results Areas Addressed: FA1-KRA2, FA2-KRA1, FA2-KRA3**

a) Purpose of the Programme Component:

EBEP aims to enable MoEYS to manage sector-wide reform, strengthen education quality through the CFS initiative, pilot innovative approaches that address the specific needs of disadvantaged

populations and contribute to the expansion of early learning opportunities for young children. The programme directly supports the UNDAF outcome of increasing access to and quality of nine years basic education and the national ESP 2009-2013. In 2010, EBEP had three annual work plans: Capacity Building for Sector-Wide Reform and Decentralization, Improving Equitable Access and Quality of Basic Education, and Expanding Learning Opportunities for Disadvantaged Children and Youth.

b) Resources Used:

Against a planned total of US\$6.787 million, US\$6.358 million were allocated, of which US\$6.283 million has been requisitioned as of 20 December.

	RR	OR	Total
Planned budget (a)	602	6,185	6,787
Actual AWP allocation (b)	597	5,761	6,358
% vis-à-vis planned budget (c=b/a)	99%	93%	94%
Requisitioned amount (d)	597	5,686	6,283
% Requisitioned against allotment (e=d/b)	100%	99%	99%

Amount in thousands of US\$

The table below shows donors to Other Resources allocated to 2010

Donor Name	Main Area of Assistance	Amount
SIDA – Sweden	Basic Education	5,288,836
Global Thematic- FA2	Basic Education	180,977
Global Thematic- Girls Education	Basic Education	159,673
Japan Committee for UNICEF	Early Childhood Development	93,460
Netherlands	Early Childhood Development	38,133
Total		5,761,079

c) Results Achieved:

The CPAP target of reaching 50% NER of five-year-olds in ECE was not achieved, but the jump from 32% in 2008 to 40% in 2009 is substantial. Primary NAR increased from the baseline of 81% in 2004/5 to 92.4% (GPI 1.01) in 2009/10, while primary NER increased from 91.9% to 94.8% (GPI 1.00) in 2009/10, slightly below the target of 96%.

The Out-Of-School Children Study, analysis of the census (2008), DHS (2005) and EMIS data confirm that gender parity in terms of access to education has been achieved, even though gender disparities still exist sub-nationally. However, disparities by socio-economic status, particularly by wealth quintile or geography, are more pronounced.

UNICEF was re-elected co-chair of the Education Sector Working Group and played an instrumental role in the following sector results:

- Completion of the new ESP 2009-2013, including six Core Breakthrough Indicators that focus on equity and prioritize improving primary completion rates and reducing repetition rates (two areas where more progress is needed).
- Adoption of partnership principles that will guide compliance with aid effectiveness.
- Design of a sector budget support programme funded by the EU and Sida, and the establishment of a pooled fund for coordinated capacity development, the CDPF, which will be managed by UNICEF as the result of a successful EU/Sida/UNICEF formulation mission.

Sub-national capacities for education planning, management and sector performance measurement were strengthened through support to the provincial education congresses. In close collaboration with other sectors and development partners, technical support was provided to MoEYS to address capacity gaps for functional mapping in the context of D&D reform. Experiences in ECE among commune councils were documented to inform this process.

The CFS programme is firmly owned and led by government, and a new CFS Master Plan 2011-2015, CFS policy, and curriculum master plan and policy were drafted despite initial delays. Stronger linkages between CFS and curriculum master plans were established, while the Master Plan on Education of Children with Disabilities was integrated into the CFS Master Plan. Existing support systems for monitoring, training and quality improvement were strengthened through training of DTMTs in 13 provinces.

Evaluation of the accelerated learning and multi-grade teaching programmes was incorporated into the new CFS Master Plan. UNICEF worked in close collaboration with FTI in the areas of ECE and inclusive education, which resulted in in-service and pre-service courses on children with disabilities.

The National ECCD Policy, approved by the Council of Ministers in February, has informed the development of the ECCD National Action Plan (NAP), led by MoEYS with 10 other ministries. The NAP was drafted with active participation of early childhood experts from 11 ministries and representatives from provinces, communes, NGOs and international development partners.

Other results related to ECD include:

- Improvement of ECE programmes through training on ECD resource materials
- Development of a special in-service training module on inclusive preschool education for integration of children with disabilities into preschool, in partnership with key NGO and government partners
- Revision of in- and pre-service preschool training based on ECD resource materials
- Finalization of the preschool curriculum for three- to four-year-olds based on ELDS

Achievements in bilingual education include the dissemination of the Guidelines on the Implementation of Education for Indigenous Children in Highland Provinces, and the organization of the first consultative workshop on introducing bilingual education at preschools, together with CARE.

The process of completing the ESP took considerably longer than planned, which also impacted negatively on the preparation of the Annual Operational Plan and revision of the CFS Master Plan. This is related to absorptive capacity of and coordination among line departments in combination with high workload of the Department of Planning, as well as dependence on senior leadership for decision-making. Despite making progress in relation to aid effectiveness, transaction costs for government as well as development partners have not declined.

d) *Future Work Plan:*

The new ESP with its Core Breakthrough Indicators, in combination with ongoing D&D reforms, and a strong focus on equity, form the basis of the 2011 annual work plan.

UNICEF will continue to provide support to strengthening government capacities at the national and sub-national levels to manage and implement the ESP. For the first time, efforts will be made to develop provincial annual operational plans. In combination with continued support to provincial education performance reviews, this will allow a stronger equity focus in the education sector and application of strategies that are most appropriate for each province's specific challenges. The establishment and operationalization of the CDPF will be another priority in 2011. A medium-term capacity development plan will form the basis for prioritizing and strengthening coordinated capacity development support.

CFS will remain at the core of UNICEF's support to inclusive quality education, with a strong focus on strengthening systems and capacities for nationwide implementation of the CFS Master Plan. Strengthening the DTMTs will be prioritized for those provinces that so far have not received training. Implementation of the revised CFS Master Plan will take place with greater consistency with the revised curriculum policy, revised Teacher Training Master Plan and integration of the Master Plan for Children with Disabilities. Piloting of CFS at lower secondary level will be supported, in partnership with NGOs. The collaboration with FTI will inform development of short-term special education courses on schooling for children with intellectual disabilities, vision and hearing impairments.

The operationalization of the ECCD National Action Plan will be another major priority in 2011. UNICEF will provide substantial technical support through its own staff and will continue to work in close collaboration with FTI. ECE quality improvement will be supported through improvement of the ECE curriculum, development of integrated training modules, revision of monitoring checklists and documentation of innovative approaches. A number of innovations with an equity focus will be supported, including the development of a bilingual preschool model and inclusive education in preschools and replication of good experiences with bilingual education.

COUNTRY PROGRAMME COMPONENT: Child Protection

***Main MTSP Focus Area addressed: FA4**

***Main MTSP Key Results Areas Addressed: FA4-KRA 1, FA4-KRA 2, FA5 - KRA3**

a) Purpose of the Programme Component

The Child Protection Programme aims to support the Government of Cambodia in providing better coordinated services for child victims of violence, abuse and exploitation; implementing the national policy on alternative care, including the reduction of the institutionalization of children; promoting family- and community-based care and improvement of mechanisms to regulate inter-country adoption; ensuring national laws and regulatory frameworks on juvenile justice are in place, with the aim of reducing the use of detention; reducing the number of childhood accidents and injuries, including those caused by landmines/unexploded ordnance (UXO); and improving services for children with disabilities. In-line with the MTR recommendations, programme strategy moved toward facilitating the development of child protection systems to prevent and mitigate the factors that lead to violence, exploitation, abuse and neglect of children, with more focus on improving the social welfare and justice system and addressing social norms to enhance the protective capacity of families and communities. The programme directly relates to UNDAF Priority 1, 2 and 3, as well as to Millennium Declaration Section VI and CMDG 9 on demining, UXO and victim assistance.

Main government partners are the Ministry of Social Affairs, Veteran and Youth Rehabilitation (MoSVY); MoJ; MoI; MoWA; CNCC; and commune councils and CCWCs at the sub-national level. Child Protection Programme coordination is ensured through the Multi-Sectoral Task Force on Orphans and Vulnerable Children (OVC), the Government-NGO Working Group on Child Justice (GO-NGO WGJC), the Technical Working Groups on Mine Action and Legal and Judicial Reform, and the National Committee to Lead Suppression of Human Trafficking, Smuggling, Labour and Sexual Exploitation of Women and Children. UNICEF continued to build strategic partnerships with international and national NGOs and academic institutions and universities to enhance the knowledge base, provision of social and child protection services, and mapping of MoSVY's functions as part of the D&D process. UNICEF also maintained strong collaboration with UN agencies, including OHCHR, UNODC, UNAIDS, WHO and IOM, on the joint advocacy/position on drug detention centres and on provision of technical inputs to the drafting of the Corrections Law, the Drug Control Law and the Explanatory Notes on the Anti-Trafficking Law.

b) Resources Used:

Against a total planned of US\$3.456 million, US\$3.173 million were allocated, of which US\$3.097 million has been requisitioned as of 20 December. RR actual allotment increased by 7% compared to actual ceiling for 2010 to cover unfunded activities.

	RR	OR	Total
Planned budget (a)	466	2,990	3,456
Actual AWP allocation (b)	501	2,672	3,173
% vis-à-vis planned budget (c=b/a)	107%	89%	92%
Requisitioned amount (d)	501	2,596	3,097
% Requisitioned against allotment (e=d/b)	100%	97%	98%

Amount in thousands of US\$

The table below shows donors to Other Resources allocated to 2010

Donor Name	Main Area of Assistance	Amount
German Committee for UNICEF	Social Protection, Legal Protection and Accidents, Injuries and Disabilities	970,102
Netherlands	Social Protection, Legal Protection	623,740
Global Thematic- FA4	Social Protection, Legal Protection and Accidents, Injuries and Disabilities	288,402
Global Thematic- FA 2	Social Protection, Legal Protection and Accidents, Injuries and Disabilities	285,641
USA USAID	Social Protection, Legal Protection	240,568
Japan Committee for UNICEF	Accidents, Injuries and Disabilities	145,861
Global Thematic- FA5	Social Protection	70,000
United Kingdom Committee for UNICEF	Legal Protection	24,991
Australian Committee for UNICEF	Legal Protection	23,197
Total		2,672,502

c) Results Achieved:

From 2006-2010, with UNICEF support, Cambodia reached a remarkable level of legislative, policy and institutional reform related to child protection, including in the areas of sexual exploitation, child labour, child trafficking, domestic violence, child justice, alternative care and inter-country adoption. However, significant intensification of implementation and enforcement of laws and policies is needed. Greater efforts were exerted to enhance government, civil society and donor commitment to adopt a child protection systems-building approach. Research and analysis of child protection data generated strategic information to guide advocacy and programming. Capacities of over 9,176 government social workers, law enforcement and justice staff were enhanced on child protection, with more emphasis on exchange visits and South-South cooperation with Thailand, the Philippines, Viet Nam, China, Bangladesh and Ethiopia. Improved coordinated protection and reintegration services were provided to approximately 11,246 child victims of abuse, violence and exploitation. A nationwide data collection and monitoring mechanism on accidents and injuries was established, along with development of mine action strategy. Mine-risk education reached over 2,444,425 men, women and children and led to reduction of landmine/UXO accidents by 50% compared to 2005 levels. Poverty and the economic crisis negatively impacted communities and limited options for alternative care, thereby undermining de-institutionalization efforts, a situation further aggravated by the proliferation of more than 281 orphanages compare to 179 institutions in 2006.

Most of the planned results in 2010 were achieved. CNCC, with UNICEF technical support, drafted country reports on the progress of implementation of the two Optional Protocols of the CRC and of Resolution No. 2009/26, which supports national and international efforts on child justice reform. Wider engagement of government, CSOs and children enhanced the quality of these reports. Mapping of social welfare, justice systems and NGOs was conducted with wider participation of relevant national and sub-national government institutions and civil society, which will greatly contribute to identifying gaps, enhancing service provision and strengthening child protection systems.

UNICEF mobilized partnerships with UNODC, OHCHR and GO-NGO WGCI to ensure that the draft Juvenile Justice Law remains consistent with international standards before its approval by the Council of Ministers in early 2011. This was accompanied by several advocacy meetings and workshops with high-level decision-makers of the Council of Ministers and National Assembly. In partnership with the Hague Permanent Bureau, the Government was assisted in its assessment of the existing system to implement the new Inter-Country Adoption Law. Important milestones accomplished toward the implementation of the National Policy on Alternative Care included development of guidelines and Prakas on inter-country adoption, testing of the Prakas on Procedures for Implementation of the Policy on Alternative Care, and capacity building on monitoring and inspection, which led to improved inspection practices of residential care facilities.

MoSVY is increasingly recognized as a leader in the disability sector after the adoption of the National Law on Promotion and Protection on the Rights of Persons with Disabilities and increased budget allocation for the disability sector.

In partnership with GTZ, UNICEF supported MoSVY in strategic mapping of its functions as part of the Government's D&D reform.

In partnership with government and NGOs, capacities of over 3,076 government social workers, law enforcement and justice staff were enhanced on child protection and gender-sensitive and child-friendly procedures. Improved coordinated protection, legal aid, diversion and reintegration services were provided to approximately 4,146 child victims, exceeding the annual target of 1500 victims. The development of a services directory for OVC facilitated referrals to essential services that support child victims. Child protection with HIV programme assisted MoSVY to initiate a monitoring and evaluation system pilot on OVC to ensure that the most disadvantaged children are identified, reached and linked with existing social protection programmes.

Transitioning from an issue-based programme towards a systems-building programme poses challenges as structural arrangements within government and development partners hamper an integrated approach. Challenges faced include progress in child protection being dependent on a limited number of committed government officials combined with a generally weak capacity of local government and other stakeholders, resulting in low absorption of funds and additional time needed for implementation. Reintegration and social support services are also constrained by limited government resources, including insufficient qualified social workers in communities and in remote areas.

d) *Future Work Plan:*

In 2011-2012, UNICEF will continue to build national child protection systems with more focus on prevention, targeting the most-at-risk and excluded boys and girls, including those affected by HIV and disability. UNICEF will strategize partnerships that leverage resources and reach the most marginalized children, create coherence at the national and the sub-national levels and maximize impact for child protection. UNICEF will continue to maintain a seat at the table in the national policy dialogue to mainstream child protection issues into related core areas such as social protection, justice, education, health and emergency preparedness.

Inter-sectoral collaboration will be further strengthened ensuring that joint initiatives will be followed through. Support to policy and legal reform with more focus on enforcement at the national and sub-

national level will continue, including the review of legislation related to child protection, approval of the Explanatory Notes of the Anti-Trafficking Law and the Juvenile Justice Law, and will facilitate the implementation of the inter-country agreements on child protection.

Promotion of family- and community-based care, de-institutionalization and improvement of mechanisms to regulate inter-country adoption will be continued. Findings of UNICEF-funded research on attitudes toward residential care in Cambodia, currently being used by NGO partners for awareness-raising campaigns on “orphanage tourism”, will also be used to develop a multi-year advocacy campaign on residential care and other child protection issues.

In order to contribute to the analysis and addressing of equity in child protection and HIV, priority will be placed on conducting a national prevalence survey on violence against children, integrating key child protection indicators into national M&E, reviewing state expenditure on child protection and assessing the MoSVY social and rehabilitation centres. Models and innovations will be initiated and/or expanded in relation to religious leaders’ involvement in HIV prevention and protection of children and young people, recovery and reintegration services, alternative care, diversion and legal aids, with a focus on equitable access.

COUNTRY PROGRAMME COMPONENT: HIV/AIDS Prevention and Care

*** Main MTSP Focus Area Addressed: FA3**

*** Main MTSP Key Results Areas Addressed: FA3-KRA 1, FA3-KRA 2, FA3-KRA 3**

a) Purpose of the Programme Component:

In-line with the National Strategic Plan for a Multi-Sectoral Response to HIV/AIDS (2006-2010), the HIV/AIDS Prevention and Care Programme aims to assist the Government with reducing HIV transmission among women, children and young people at risk, and to mitigate the impact of the epidemic on children and families through timely treatment, care and support interventions. The programme directly contributes to MDG 6: Halt and begin to reverse, by 2015, the spread of HIV/AIDS. It also relates to UNDAF Priority 3: Capacity Building and Human Resource Development for the Social Sector to achieve a strengthened multi-sectoral response to HIV/AIDS by 2010.

Under the oversight of the National AIDS Authority, main government partners included MoH , specifically the National Maternal Child Health Centre (NMCHC) and NCHADS, and health departments in 18 provinces and the Phnom Penh municipality. Others were MoSVY, MoEYS and the Ministry of Cult and Religion. UNICEF actively engaged in the Global Fund Principal Recipient Technical Review Team, Joint UN Team on HIV and various technical working groups on prevention, treatment and care, which provided important platforms for harmonized technical support and advocacy to improve the scale and quality of HIV services, especially in the health sector.

b) Resources Used:

Against a total planned of US\$2.302 million, US\$2.438 million was allocated, of which US\$2.393 million (98%) has been requisitioned as of 20 December.

Planned budget (a)	602	1,700	2,302
Actual AWP allocation (b)	741	1,697	2,438
% vis-à-vis planned budget (c=b/a)	123%	100%	106%
Requisitioned amount (d)	740	1,653	2,393
% Requisitioned against allotment (e=d/b)	100%	97%	98%

Amount in thousands of US\$

The table below shows donors to Other Resources allocated to 2010

Donor Name	Main Area of Assistance	Amount
French Committee for UNICEF	HIV and Life Skills, VCCT, PMTCT, and Children Affected by HIV/AIDS	759,104
Swedish Committee for UNICEF	HIV and Life Skills, VCCT, PMTCT	346,635
German Committee for UNICEF	VCCT, PMTCT and Children Affected by HIV/AIDS	272,980
Korean Committee for UNICEF	HIV and Life Skills, VCCT, PMTCT, and Children Affected by HIV/AIDS	253,072
USA USAID	Children Affected by HIV/AIDS	52,320
US Fund for UNICEF	Children Affected by HIV/AIDS	13,238
Total		1,697,349

c) Results Achieved:

Overall, 12 of 16 annual targets were attained. In response to the increasingly concentrated epidemic, the HIV programme intensified prevention efforts with MARYP while generating important new survey data. Peripheral reach of prevention of mother-to-child transmission (PMTCT) interventions substantially expanded, uptake of early infant diagnosis (EID) doubled, while access to paediatric HIV care grew by 10% as planned. Evidence-informed capacity development of provincial coordination systems and an M&E system pilot strengthened government oversight of responses for OVC. Substantial technical support informed national frameworks, including the National Multi-Sectoral Plan for HIV (2011-2015) and new National Standards of Care for OVC. Cambodia received an [MDG award](#) for AIDS response excellence at the September MDG summit.

In the **HIV and Life Skills** component, through 1,309 contacts with young injecting drug users (IDUs) and 4,599 contacts with female drug users during HIV prevention/harm-reduction drop-in/outreach services in Phnom Penh, 4,031 drug users were referred to HIV/STI services, surpassing the expected number of 2,800. In the provincial urban centre of Takeo, a new harm-reduction initiative was launched, quickly reaching 130 young drug users while building supportive relationships with local authorities. Regular, standardized HIV life-skills education, now integrated into the CFS Programme, reached 47,530 primary school children. Fortified by refresher training, 360 peers educated 5,114 young female workers in 12 factories; 4,682 were referred to HIV/STI services for diagnosis and treatment. An end-line survey showed 81.74% of workers had comprehensive HIV knowledge, up from 50% in 2008 and exceeding the expected target of 80%. To improve vulnerable groups' access to quality HIV information, risk assessment and counselling, UNICEF continued supporting the HIV hotline: 9,034 women made up a third of the 30,112 valid calls, with over 10% from high-risk women working in the entertainment industry.

For **Continuum of Care**, provider-initiated/voluntary counselling and testing (VCT) remains a vital, timely entry point to HIV prevention, treatment, initiation and care. By September 2010, UNICEF supported 35 (15%) of 239 VCT sites nationally, resulting in 32,924 adults (57% female) and children tested for HIV (likely to exceed the planned target of 33,000). Over 2% tested positive before being referred for treatment. Meanwhile, PMTCT coverage trebled from 284 to 835 health facilities through an approach linking ANC with nearby VCT and HIV services. To this end, UNICEF supported 127 health centres and 21 hospitals in 12 provinces and Phnom Penh, while introducing labour testing in five sites in higher-prevalence Phnom Penh. About 40% of HIV-infected pregnant women and infants received antiretroviral prophylaxis or treatment (up from 32% in 2009 but likely to be below the expected target of 50% by end 2010). Uptake of EID doubled and monitoring improved, although the average age of testing (five months) remains too late. Other routine data concerning the follow-up of mother-infant pairs remains poor. Overall, data management was a challenge this year, partly due to

rapid increase in PMTCT service coverage. By September, paediatric HIV care was available at 33 public sites countrywide (from 29 in 2009), cumulatively reaching 5,766 children aged under 15 (4,003 ARV cases and 1,763 OI cases), a 7.2% increase from 2009. National PMTCT and paediatric OI/ART guidelines were updated based on the 2010 WHO recommendations and national and international evidence.

In the **Children Affected by HIV** component, the National OVC Task Force developed national standards guiding the care, support and protection of OVC and piloted a routine data monitoring system. With government partnering with religious communities, 4,977 adults and 3,358 children affected by AIDS were supported in 329 communes. As a result, 2,105 PLHIV and 140 children accessed medical care, while 1,184 families received home visits that combated stigma and discrimination. The role of Buddhist monks promoting safe alternative care to families at risk of separation was successfully demonstrated.

Overall, the national HIV prevention response remains fragmented with limited capacity to coordinate actions. Uptake by MARYP of HIV prevention and care services is limited and age-disaggregated data and mother-infant follow-up remain inadequate. Socially marginalized groups, such as drug users, are often discriminated against and persecuted by law enforcement agencies. Substantial lessons were learned from developing the national OVC M&E system and the MARYP Survey.

d) Future Work Plan:

In the new CP 2011-2015, UNICEF Cambodia's HIV contribution will be integrated in the Maternal, Newborn and Child Health and Nutrition and Child Protection programmes to help ensure sustainable sector- and system-strengthening outcomes. In view of the changing nature of the epidemic, primary prevention efforts will focus on expanding tailored comprehensive interventions with adolescents and young people engaging in high-risk behaviours. This will include facilitating partnerships with government and civil society to provide high-quality risk-reduction programming and enabling local protective environments for young people at risk of drugs, violence and unprotected sex. Strategic information from the MARYP Survey and disaggregated data from the Demographic Health Survey and HIV and Behavioural Sentinel Surveys will be used to help inform strategy. In the area of PMTCT, UNICEF will continue partnering with MoH to expand services using the linked-response approach, with a focus on improving quality, effectiveness and efficiency and building multi-disciplinary collaboration in higher-prevalence areas with unmet needs, starting with Phnom Penh. UNICEF will provide technical and financial support to address the bottlenecks identified, especially in the area of data management and post follow-up care of HIV-exposed babies to access OI/ART treatment as early as possible. Substantial technical support will also be provided to help government's effective use of forthcoming Global Fund Round 9 funding (2011-2015). In support of children affected by AIDS, the main focus will be on assisting the Government to incrementally expand the piloted M&E system; building capacities to routinely collect, analyze and use OVC programme data; and strengthening sub-national coordination to ensure that the most disadvantaged children are identified, reached and linked with existing/emerging social protection programmes. Funding is largely secured for 2011, but mobilizing resources for the remainder of the new CP remains a priority.

COUNTRY PROGRAMME COMPONENT: Advocacy and Social Mobilization

* **Main MTSP Focus Area Addressed: FA5**

* **Main MTSP Key Results Area Addressed: FA5-KRA3, FA5-KRA4**

a) Purpose of the Programme Component:

The overall objective of the ASM Programme is to increase awareness of and respect for the rights of children and women and to build capacity of families and communities to take action for improved child survival, development, protection and participation. There are two AWP: 1) Advocacy and

Mobilization for Rights and Goals, which promotes positive action for securing child rights through targeted advocacy and social mobilization and 2) Behaviour Change Communication, which facilitates the adoption of positive behaviours through the use of mass media, social marketing and interpersonal communication.

Main national implementing partners are MoH and its National Centre for Health Promotion and the Communicable Disease Control Department, National Centre for Disaster Management and CNCC. Key UN and multilateral international partners are WHO, UNDP, OHCHR and FAO, while local NGOs include Support Children and Young People (SCY), Child Assistance for Mobilization and Participation (CAMP) and Equal Access (EA) (youth participation/community radio).

b) Resources Used:

A total of US\$0.614 million was planned for the Advocacy and Social Mobilization in 2010. The programme received and allocated US\$0.413 million, of which US\$0.411 million has been requisitioned as of 20 December.

	RR	OR	Total
<u>Planned budget (a)</u>	484	130	614
<u>Actual AWP allocation (b)</u>	399	14	413
<u>% vis-à-vis planned budget (c=b/a)</u>	83%	11%	67%
<u>Requisitioned amount (d)</u>	399	12	411
<u>% Requisitioned against allotment (e=d/b)</u>	100%	86%	99%

Amount in thousands of US\$

c) Results Achieved:

Progress towards annual targets and CPAP key results of the **Advocacy and Mobilization for Rights and Goals** component was overall very good, with significant achievements primarily in the area of increased opportunities for children and young people’s participation. Support was provided to develop the capacity of partners at both individual and institutional levels, including to CNCC on planning, coordination and resource mobilization for reporting on CRC optional protocols.

NGO partners (EA, SCY, CAMP, Cooperation for Development of Cambodia (CODEC), youth NGO network) were supported to implement youth-led programmes, which resulted in increased confidence and capacities among hundreds of young people. More young boys and girls are enjoying improved avenues to voice their issues and access information. This is seen in EA’s increasing number of youth clubs and members, the increasing number of young reporters being trained by SCY on media production, and enhanced collaboration between CODEC’s commune youth groups and CAMP’s child clubs with commune councils. These young people produce radio and TV programmes and organize debates on issues that matter to them. They interact and advocate for changes in policy, decision-making and resource mobilization. Child representatives from various provinces were consulted on draft reports of two CRC optional protocols.

Partnership and cooperation between UNCT members and MoEYS, UN Advisory Panel and youth NGO networks significantly improved facilitating a number of achievements: draft youth policy and action plan, youth SitAn, draft UN joint youth strategy, KAP study on youth civic participation, and fully youth-led celebration of International Youth Day.

The programme contributed to finalization of the Women and Children SitAn, MARYP Survey, KAP study on youth civic participation and UNICEF’s State of the World Children’s Report 2010. Findings from these reports, some available in both Khmer and English, inform policy formulation and programming. The programme also contributed to:

- Finalization of the draft national youth policy and action plan.

- Finalization of the KAP study on youth civic participation, done in cooperation with UNDP; findings will inform the production of multimedia products.
- An early draft of UN Joint Youth Strategy and UNICEF Adolescent Strategy
- Draft UN Common Advocacy Points on Youth prepared for 2011.
- Youth-led celebrations took place on International Youth Day and International Children's Day, the latter now an official national public holiday. CNCC represented the ASEAN Children's Forum in Cambodia, which led to a joint declaration, joint website and regional task force for child rights. The Joint Declaration of South-South Cooperation for Child Rights in Asia-Pacific was endorsed by the Cambodian Government.

Achievements in **Behaviour Change Communication** are reported under other programme components and the main C4D contributions are highlighted in chapter 3.1.2.5. Support was provided across all programmes in the areas of communication and community mobilization, in particular to Child Survival. This included the production and distribution of communication materials as part of wider communication strategies.

Among the **challenges** this year was the transition to a new CP, which will particularly affect the area of communication, both strategically and geographically. A recurrent theme with the media and NGOs in 2010 was the care and protection of children in institutions, in the context of a Human Rights Watch report stating that detainees, including children, in drug detention centres in Cambodia had reported incidences of torture and ill treatment, amid discussions about the draft drug law. Although solid networks exist among CSOs and NGOs, the main remaining challenges are the capacity and motivation of voluntary workers at the community level. One proposed solution and pilot is for commune councils to contract and remunerate local volunteers.

d) Future plans:

The new Policy, Advocacy and Communication (PAC) programme will address the current lack of reliable information on budget performance and costing in the social sectors and child-relevant programmes in Cambodia. The programme will strengthen national child-relevant data management systems, improving analysis and reporting, and using and sharing findings through various strategic communication channels and modalities. C4D will be part of PAC and benefit from added capacity but will still focus on priority areas and will also contribute to the gathering of evidence from the field to inform policy dialogue.

COUNTRY PROGRAMME COMPONENT: Cross-sectoral costs

* Main MTSP Focus Area Addressed: Cross-sectoral

* Main MTSP Key Results Area Addressed: FA5-KRA1, FA5-KRA2, FA5-KRA3, FA5-KRA4

a) Purpose of the Programme Component:

Cross sectoral costs provide operational support to overall coordination and management of the country programme.

b) Resources Used:

Against a total of US\$1.574 million was planned for the Cross-Sectoral, Planning and Monitoring programme in 2010, a total of US\$1.956 million was allocated, of which US\$1.912 million has been requisitioned as of 20 December. The Regional Director approved an increase of the RR actual allotment for additional needs linked to the development of the new CP and office structure.

Planned budget (a)	1,524	50	1,574
Actual AWP allocation (b)	1,869	87	1,956
% vis-à-vis planned budget (c=b/a)	122%	174%	124%
Requisitioned Amount (d)	1,826	86	1,912
% Requisitioned against allotment (e=d/b)	97%	99%	98%

Amount is in thousands of US\$

The programme also benefitted from special allocations of GS 2009/0006 US\$ 55,892 and of GS 2009/0046 US\$ 31,000, to support activities related to emergency preparedness and response.

c) Results Achieved

Results achieved under the Cross Sectoral envelope, which also funds the monitoring and evaluation activities, are highlighted under various chapters of this report, in particular: Knowledge Management, Evaluation, Chapter 5 list of studies and publications, and Chapter 4.

d) Future plans:

The major priorities for the office during 2011-2015, as outlined in the office Mission Statement and the CPMP will be the following:

- Key evidence and good practices are identified and effectively communicated to influence national policy and practice for the advancement of child rights.
- Productive and inclusive partnerships are built and strengthened for more effective, broad-based contribution to advancement of child rights.
- Staff capacities and competencies are developed and participation enhanced for effective contribution to the mission of UNICEF in Cambodia.
- UNICEF financial, human and institutional resources are effectively and efficiently managed.

Please see also Chapter 4.

4. Operations and Programme Management

4.1 Governance & Systems

4.1.1 Governance Structure

In 2010, in addition to the three-day annual retreat held earlier in the year, and to the Country Management Team's (CMT) participation in the mid- and end-year internal reviews, the CMT met 11 times. Throughout the year, the CMT examined and addressed key management issues, reviewed progress against the AMP and analyzed progress and constraints encountered against key management indicators and Regional Office benchmarks.

The January 2010 CMT Annual Management Retreat resulted in an agreement to focus on transition management and equity promotion as key management and advocacy priorities in the 2010 AMP. In addition, the office continued to implement the five key strategic shifts agreed upon at the October 2008 MTR and started the transition to the new CP 2011-2015.

The year-end review focused on progress made on the 2010 transition plan to inform 2011 planning. This allowed for strategic discussions and agreements on key priorities for 2011 Work Plans based on the new approaches agreed to in the new CP 2011-2015. Potential office-wide management and

advocacy priorities were also identified for consideration by the Annual Management Retreat in preparation for the 2011 Office Management Plan, which will further identify programme management mechanisms for the new office structure.

As part of the change management process, a Change Task Team (CTT) was established in March 2009. The first phase of CTT's work provided the office with a road map, a shared need for change and a shared vision for the future. The second phase, which commenced in late 2009, focused on developing a transition strategy to prepare for the new CP 2011-2015. The third phase, in 2010, focused on monitoring the implementation of the transition plan and informing staff of the change process and addressing their concerns through a Quality Assurance and Communication Team, or QuACT.

4.1.2 Strategic Risk Management

Among the major risks identified in 2010 was the continued impact of the global economic crisis and of the reform of civil service salary compensation. The office contributed, with other partners, to a rapid analysis of the consequences on key service delivery mechanisms. While Cambodia is relatively free from major natural disasters, annual flooding continues to be monitored closely. In addition, the country was affected by outbreaks of acute watery diarrhoea, which required support from the office. Measles outbreaks were documented, including a number of fatal cases, and partners have agreed to support a national measles immunization campaign in early 2011. The Cambodia office was one of the first to update its EPRP using the new online tools available.

A Risk Control Self Assessment (RCSA) session, conducted in June 2010, covered an assessment of the ERM process of the office, the development of a Risk Profile and Risk and Control Library, and a review of selected work processes to make them risk-informed. The work processes reviewed were contracting, HACT, local recruitment of staff, PCAs, programme planning, and travel. Forty staff representing all sections and some provincial sub-offices participated in the RCSA session. Session outputs were consolidated, reviewed and subsequently finalized through a consultative process involving a cross-section of staff. Thereafter, the draft documents were presented to the CMT for review and adoption.

The office has a BCP in place, which needs to be updated to reflect the new office structure as contained in the CPMP 2011-2015 (five stand-alone zone offices as opposed to staff embedded with government partners in seven provincial sub-office locations). Plans to test the BCP in 2010 were not activated due to other priority activities. This, along with an update of the office's risk library and risk profile, will be undertaken in early 2011.

4.1.3 Evaluation

Evaluation remains a key component of the CP. An M&E unit with three staff members provided cross-sectoral support to all programme sections throughout the year. The office has a rigorous IMEP schedule, tracked by the M&E unit on a quarterly basis, and included 41 items in 2010, of which 13 were classified as evaluations.

Evaluation capacity in Cambodia is weak, with only a limited number of individual or institutional consultants capable of conducting high-quality evaluations. While their quality of work can be good, this is nonetheless a restriction on the amount of evaluative work that can be completed. Consultants or institutions recruited from outside the country tend to be much more expensive and, therefore, cannot always be contracted.

Government capacity for evaluation is very limited with no formalized mechanisms in place for the evaluation component of national M&E systems. There is, however, great interest and therefore one of the key result areas for the next CP will focus on national capacity building for evaluation, though funding has not yet been found for the Evaluation Specialist post.

The use of the online management response system to methodically track follow-up to evaluation recommendations was instituted. Among five evaluations completed in 2010, two are global-level and the office is still awaiting the final report from headquarters. Two were only recently completed, with only one likely to require a management response as the other only requires programme response. A fifth evaluation was completed early in the year and uploaded, but recommendations are intended for national counterparts and there are therefore no concrete actions for CO staff. In view of the above pattern, the office will examine how to flexibly use the management response system beyond the simple tracking of the percentage of completed evaluations with a management response.

4.1.4 Information Technology and Communication

Lotus Notes: Lotus Notes 8.5 has been installed for clients and server. All staff members based in Phnom Penh and posted in the seven provincial sub-offices and the new zone offices are or will be actively using Lotus Notes.

Global connectivity (SITA/Telenor/IPsec): The office uses IPsec with 3Mbps speed (up/down) provided by a local ISP. It is used for Lotus Notes, ProMS replication and Internet browsers, and allows users to download their mail from anywhere in the world. EMC VSAT with 128/128K speed is on standby/backup.

ProMS: The office is currently operating on ProMS 9.1, DMA and SysAdm 8.5.2, and Briefing Book 570. ProMS Database, DMA and SysAdm are running on Windows Server 2003 and ProMS clients and PnP are running on Windows XP Professional.

Emergency preparedness and business continuity planning: In terms of emergency telecommunications capacity the office maintains two Mini-M satellite phones, five BGANs, 12 ACeS/GSM 900 mobile satellite phones, seven of which are in provincial offices. The office also maintains a number of HF/VHF that are distributed to all professional staff, some general service (whose functions warrant one) and to all staff functioning as security wardens; some are reserved distribution to all staff in the case of an emergency. In addition, all vehicles are equipped with HF/VHF. Six of the seven provincial offices in which UNICEF works also have HF (Codan) Base stations. The Transport Assistant monitors the movement of vehicles in the field through the HF Codan Base Station installed at the office at Phnom Penh.

4.2 Financial Resources & Stewardship

4.2.1 Fund-raising & Donor Relations

In June 2008 and 2009, the Executive Board approved increases of \$4,940,000 and \$7,450,000, respectively, in the OR ceiling. A further increase of \$5,000,000 was approved in June 2010, giving an OR ceiling of \$86,360,000. The CO mobilized 93% of OR resources sought for the cycle.

The CMT regularly monitors utilization of PBAs expiring in six months and in 2010 consciously decided to request extension of some contributions to ensure initial funding for the first year of the new CP. This was well received by donors who have additionally pledged further contributions to the new CP.

Private sector partnerships have been limited to some branding, preferential media space and visibility for UNICEF, with some interesting and concrete partnerships in WASH. UNICEF is a pooling partner of the HSSP2, and a core partner of the Joint UN Project on Children Food Security and Nutrition. As noted earlier, the office is actively engaged in discussions towards programme-based approaches and has successfully negotiated engagement in the EU-Sida-funded Capacity Development Fund in education.

Early 2010, the office developed a resource mobilization strategy to support new CP priorities and reflect changing funding environment and modalities. This highlights evidence of growing aid fatigue among some of the international donors, citing large numbers of donors, fragmentation, better value for investment elsewhere and some dissatisfaction with government partners. The office will focus on identifying bilateral donors, both current and emerging, that can provide flexible funding to priority MTSP focus areas, while still maintaining good direct relations with national committees, forging new technical and private sector partnerships and leveraging additional resources for children through innovative pooled- and other joint-funding mechanisms.

In addition to the organization of visits for national committees, both the representative and deputy engaged with current and potential donors, through presentations on the new CP, participation in the national committees' meeting in Korea, and visits to national committees, organized as part of the implementation of the resource mobilization strategy. As a result, the new CP has good funding prospects for the first two years.

4.2.2 Management of Financial and Other Assets

In 2010, the office often met or exceeded the Regular Resources (RR), Other Resources (OR) and local Support Budget (SB) requisition and expenditure benchmarks established by the Regional Office. The office has improved the monitoring of DCT through increased joint financial spot checks and field monitoring activities. Through the timely submission and ongoing monitoring of DCT liquidation documentation, there were again no reported outstanding DCT for more than nine months.

As part of DFAM's ongoing review of business processes, the CO continues to be assessed as "low risk" with respect to the preparation of local bank reconciliations. The office makes effective use of its bank optimization and cash forecasting tools and has performed well in meeting its closing bank balance targets and in restoring the percentage of closing balances for subsequent months.

The office has also fully embraced the interim financial closure process carried out from July to October 2010. These activities were used by the CMT to assess readiness for the year-end financial closure, particularly in the areas of Non-Expendable Property (NEP) management, the correction or validation of various accounting transactions and the timely closure of 2009 OBOs, in an IPSAS informed environment. By 31 December 2010, 66 staff members had participated in the IPSAS online training and over 200 certificates of successful completion were issued.

Recognizing that the criteria to assess NGO partner suitability differs from the criteria to assess regular goods and/or services providers, a PCA review committee, chaired by the deputy representative, was established and met seven times and reviewed 15 cases valued at US\$700,734.

As part of an office risk assessment, the Contract Review Committee (CRC) limit was increased from US\$20,000 to US\$40,000. The CRC met 25 times in 2010, either face-to-face or through an expanded number of mail poll reviews for more straightforward or time-sensitive cases.

As part of an HQ initiative to mitigate the risk of the "VISION – One ERP" big-bang approach, the CO was successful in transitioning to the SAP HR module in December 2010.

4.2.3 Supply

In preparation of the new CP, a Country Assessment of Essential Commodities was undertaken to determine the availability, accessibility and affordability of essential supplies for children and their families. The study revealed certain gaps in the supply of several pharmaceuticals and micronutrients, basic water and sanitation supplies, and primary school textbooks, especially for the poorest and most marginalized households. Findings of the assessment will be taken into account during the annual planning process. While some recommendations are best addressed through technical and policy

discussions with government counterparts and other development partners, the office is also considering its engagement with the private sector as well as providing direct supply inputs to ensure that critical needs are met.

While the overall supply strategy aims at counterpart capacity development, direct procurement and delivery is done at the request of the Government in specific areas, notably in support of health-, nutrition- and education-related MDGs. In 2010, the supply input totaled \$2.9 million, representing a 25% increase over 2009, largely due to the introduction of Ready-to-Use Therapeutic Food and Multiple Micronutrient Powder.

At \$3.5 million, the value of procurement services (PS) exceeds UNICEF's direct supply assistance and remains an important mechanism to leverage resources for children. The main commodities supplied through PS are vaccines, HIV test kits and anti-malarial drugs. As the VII arrangement ended, MoH successfully transitioned to the regular PS mechanism for its provision of traditional vaccines using national budget allocations. Challenges facing PS included processing times of statements of account and incompatibility of the standard World Bank-UNICEF contract template with pooled-funding arrangements.

UNICEF continues to lead inter-agency procurement through joint long-term arrangements and UN Intranet-based information sharing, which supported the office and other UN agencies in reducing transaction times for commonly procured supplies and services. Local procurement remains challenging as the market is poorly developed.

An assessment of UNICEF's delegated procurement process to provincial counterparts was undertaken to guide future interventions in the WASH sector and further inform capacity development needs.

4.3 Human Resource Capacity

In 2010, as the office transitioned into the new CP, there was a strong emphasis on staff responsibility to drive their own destiny, to enable individuals working in the office to feel empowered and fully engaged in controlling of their own future. The 2010 Office Learning Plan outlined a learning package around staff self-empowerment, which included P2D training, OPERACY, career guidance and counseling, and coaching for supervisors.

The office committed a substantial amount of time and funding to staff learning and development opportunities under the banner of "unleashing staff potential". This was a central piece to the change management process and the transition into the next CP 2011-2015. Progress was monitored by the CMT during monthly meetings, with input from the HR unit and the QuACT.

Building on the success of last year, monthly learning sessions were continued, with topics ranging from D&D to the role of the new PAC section. With the gains made in staff learning, priority will continue to be placed on sustaining an office learning culture as well as equipping staff members with requisite skills and competencies for new roles and responsibilities in support of the new CP.

Following the approval of the PBR, 64 new posts were established and 45 posts were abolished – a net increase of 19 posts. Notification was provided to all staff on abolished posts by 30 June and advertisements for new positions commenced in July. Of the 64 new posts, 35 have been filled, 26 are under recruitment, and 3 are on hold due to a lack of funds. A total of 16 staff members were redeployed from seven province-based positions to the five new zone offices.

To date, 40 staff members (19 IP, 14 NO, and 7 GS) were certified in Competency-Based Interviewing techniques.

The QuACT and UNICEF-Cambodia Staff Association consulted with staff members on the findings of 2009 global staff survey. Issues that were raised were addressed during JCC meetings that were held quarterly and minutes shared with all staff.

4.4 Other Issues

4.4.1 Efficiency Gains and Cost Savings

UNICEF, UNDP and WFP play leading roles in expanding the number of LTAs for the procurement of local goods and services for use by all UN agencies. In 2010, UNICEF took the lead in establishing LTAs with local vendors to lock in favorable rates for prolonged periods for the procurement of photocopy paper, fuel, printing and binding services, radio, television and newspaper advertising services and translation/interpreter services.

The office expanded the use of ProMS IOP payments, beyond cash replenishments, to make payments to offshore vendors and international consultants, significantly reducing local bank charges.

4.4.2 Changes in AMP & CPMP

The CPMP 2011-2015 was approved in June 2010. In addition to supporting the roll-out of the new CP and office structure, the office will need to prepare for and adapt to three major changes in 2011: implementation of the SRS already adopted in the new CP, using ProMS 9; employ IPSAS-compliant practices by end-2011; roll-out and implementation of VISION in January 2012.

The CMT retreat late January will examine necessary changes in office work processes and management committees to reflect the new programme and office structures, and will articulate the operationalisation of the management principles agreed in the CPMP.

5. Studies, Surveys, Evaluations and Publications Completed in 2010

5.1 Studies, Surveys & Evaluations

Title	Year	Sequence Number	Type of Report	Themes	Management response
Cross-sectoral					
Environmental Impact Assessment (EIA) (IMEP 2010/40)	2010	2010/001	Study	Environment	
Child Survival					
Sentinel surveillance of iodine nutrition through primary schools in six provinces with Urine Iodine Excretion below 100 mcg/L and higher than 300 mcg/L (IMEP 2010/06)	2010	2010/002	Study	2010 Cambodia Survey on Iodine Nutrition	

Title	Year	Sequence Number	Type of Report	Themes	Management response
Health Facilities Surveys (IMEP 2010/08)	2010	2010/003	Survey	Integrated Management of Childhood Illnesses	No. The Health Facility Survey was the evaluation of the MoH programme, which is supported by a number of partners (not only UNICEF) and which requires a 'programmatic response' on the part of the MoH and of the partners
EPI Review 2010 jointly by NIP, WHO, CDC Atlanta and UNICEF	2010	2010/004	Study	Immunization	
Neonatal tetanus risk assessment by NIP, WHO and UNICEF	2010	2010/005	Study	Immunization	
Child Health Review 2010	2010	2010/006	Study	Child Health	
Child Protection					
Assessment of LEASEC Project (IMEP 2010/15)	2010	2010/007	Evaluation	Law Enforcement	Yes
Education					
Longitudinal study on children with ECD experience (IMEP 2010/16)	2010	2010/008	Study	Impact of ECE experience on primary education enrolment and learning achievement	
ECD Conceptual Framework (IMEP 2010/18)	2010	2010/009	Study	ECD Conceptual Framework for UNICEF	
Evaluation of the Accelerated Learning and Multi-Grade Teaching Programmes (IMEP 2010/22)	2010	2010/010	Evaluation	Accelerated Learning and Multi-Grade Teaching	Yes
WASH					
Mini KAP-survey on arsenic (IMEP 2010/24)	2010	2010/011	Study	Arsenic issues in the areas where the groundwater is affected by arsenic contamination	
KAP of commune council on arsenic issue (IMEP 2010/35)	2010	2010/012	Study	Knowledge, Attitude and Practice of commune councils and village leaders in highly affected communes	

Title	Year	Sequence Number	Type of Report	Themes	Management response
Capacity assessment to local private sector in supplying safe water in arsenic affected area (IMEP 2010/36)	2010	2010/013	Study	Potential participation of private water suppliers in supplying arsenic safe water in high arsenic affected communes	
National Hygiene and Sanitation Knowledge, Attitudes and Practices (KAP) Survey (IMEP 2010/26)	2010	2010/014	Study	Hygiene behaviour particularly three key behaviours, ie. using toilet, hand washing with soap and drinking safe water among rural communities	No. It is a KAP Survey on Hygiene and Sanitation to assess the three key behaviours, which is supported by a number of partners (not only UNICEF).
HIV/AIDS					
Most At Risk Young People Survey (IMEP 2010/28)	2010	2010/015	Survey	Behavioural survey related to drug, alcohol uses and sexual practices	
Supply					
Country Assessment of Essential Commodities: Cambodia	2010	2010/016	Study	Assessment on the availabilities and gaps in the supply of essential commodities w.r.t. child survival and development	

5.2 Other Publications

Title of Publication	Intended audiences	Objectives	Authors	Quantities (or electronic only)	Estimated cost to UNICEF (US\$)
Cross-sectoral					
Women and Children SitAn report (English)	UNs, NGOs Government	Identify the country's human, financial and organizational barriers to the fulfillment of young people's rights	UN	Hard copy: 500 CD: 1,500	6,155.11
Women and Children SitAn executive summary (Khmer)	UNs, NGOs Government	Identify the country's human, financial and organizational barriers to the fulfillment of young people's rights	UN	Hard copy: 500	275.00

Title of Publication	Intended audiences	Objectives	Authors	Quantities (or electronic only)	Estimated cost to UNICEF (US\$)
Women and Children SitAn factsheet (Khmer and English)	UNs, NGOs Government	Identify the country's human, financial and organizational barriers to the fulfillment of young people's rights	UN	Hard copy: 1,000	750.00
CCC Policy Brief (English)	UNs, NGOs, Government	Exposure and sensitivity to the effects of extreme climatic events	UN	Hard copy: 800	340.75
Child Protection					
Publication of the National Workshop on Forensic Medical and Legal Aspects of Child Sexual Abuse Investigations (English)	UNs, NGOs, Government	Strengthening cooperation in law enforcement for victim protection	Siobhan Miles, Consultant	Book: 500	3,206.61
Publication of the National Workshop on Forensic Medical and Legal Aspects of Child Sexual Abuse Investigations (Khmer)	UNs, NGOs, Government	Strengthening cooperation in law enforcement for victim protection	Siobhan Miles, Consultant	Hard copy: 200	2,400.00
Child justice law, regulation and guidelines (Khmer & English)	UNs, NGOs, Government, Judges, Prosecutors, Lawyers	To raise awareness on national and international standards on child justice among criminal justice professionals.	UNICEF and MoJ	Hard copy: 1,300	5,374.27
Law Enforcement Advancing Protection of Children and Vulnerable Persons (LEAP), (English and Khmer)	UNs, NGOs, Government	Strengthening cooperation in law enforcement for victim protection	Jane S. Kim, Consultant	Hard copy: 400	1,320.00
Instructional video for children about child justice (Khmer)	UNs, NGOs, Government, Children	At least 500 institutions/professionals working with children in the justice system are equipped with instructional videos for orienting child victims and children in conflict with the law about child justice.	UNICEF and MoJ	CD: 400	660.00

Title of Publication	Intended audiences	Objectives	Authors	Quantities (or electronic only)	Estimated cost to UNICEF (US\$)
MRE to raise awareness on the mine/UXO problem and support behavior change among mine/UXO affected communities in 56 communes (Khmer)	Affected Communities, children and school student	To reduce mine/UXO casualties caused by landmine and UXO in the contaminated areas	Cambodian Mine Action Authority	Poster: 10,000 Books: 10,000	5,950.81
CBR Guidelines (Khmer)	NGOs, Government	Promote the understanding of relevant ministries staff and civil society organizations of the community based rehabilitation	MoSVY	Hard copy: 115,044	46,867.31
Water safety for children 1-4 ages (Khmer)	School Student and Community	To reduce number of children died or injured by drowning	MoEYS	Hard copy: 5,000	5,729.16
Child Survival					
Health Service Access among Poor Communities in Phnom Penh (Khmer and English)	Government, Health Partners, NGOs	To analyze the situation in selected at-risk communities within Phnom Penh in terms of health service access. The purpose was to generate sufficient insight for recommendations on improving the communication and health access strategy for at-risk populations.	John Grundy, Consultant	Hard copy: Khmer: 250 English: 250	1,812.50
Fast Track Initiative Road Map for Reducing Maternal and Newborn Mortality 2010-2015 (Khmer and English)	Government, Health Partners, NGOs	To contribute to the achievement of Cambodia's Millennium Development Goal 5 target of less than 250 maternal deaths per 100 000 live births by 2015	MoH Taskforce 1 for RMNCH	Hard copy: Khmer: 500 English: 500	2,805.79
VHSGs counseling cards on community care of mothers and newborns (C-IMCI module 3)-13 sheets (Khmer)	VHSGs	The counseling cards are used by VHSGs during their home visits to pregnant and postpartum mothers. These cards are part of the C-IMCI package, module on community care of mothers and newborns	MoH, UNICEF and other health partners.	Hard copy: 870	4,932.61
Community Integrated Childhood Illness Implementation Guideline (Khmer)	Government, NGO's	Operational Guidelines for health staff and partners to plan and implement Community-IMCI training modules.	National Center for Health Promotion, UNICEF	1777 books	1,478.02

Title of Publication	Intended audiences	Objectives	Authors	Quantities (or electronic only)	Estimated cost to UNICEF (US\$)
Ante-Natal Care communication materials (Khmer)	Pregnant women and their families, women of reproductive age and their families	The ANC IEC materials are distributed to 12 provinces and used by Health Center staff, village volunteer and pregnant women to improve early ANC visits.	National Center for Health Promotion, MCH, UNICEF	15 items	82,131.75
Education					
EMIS Educational Statistics & Indicator 2009-10 (Khmer)	Government, DPs, NGOs and education stakeholders	To measure the progress of Cambodian education system performance	EMIS - MoEYS	Hard copy: 8,380	7,205.75
Pamphlets and wall sheet on EMIS - Education Indicators 2006-2010 (Khmer)	Government, DPs, NGOs and education stakeholders	To measure the progress of Cambodian education system performance	EMIS - MoEYS	Hard copy: 22,500	3,302.48
Job Descriptions & Job Specifications (JD&JS) of 25 MoEYS central departments (Khmer)	Government	To describe roles, functions and qualification of each position within 25 MoEYS central departments	MoEYS	Hard copy: 387	654.82
Generic Job Description and Job Specification for Education Manager of POE & DOE, and schools at all levels (in large, medium and small provinces) and for Regional and Provincial Teacher Training Centers (Khmer)	Government	To describe generic roles, responsibilities and qualification of education manager positions of provincial offices of education (POE), district office of education (DOE), primary, secondary, cluster schools in three types of provinces (large, medium, and small) and of Regional and Provincial Teacher Training Centers	MoEYS	Hard copy: 21,896	19,161.30
Posters for Right Aged Enrolment Campaign (2010-2011) (Khmer)	Children, parents, custodian and education stakeholders	To increase access of children to primary education especially from poor, vulnerable, disabled and ethnic minority groups	MoEYS	Hard copy: 60,000	7,198.70
Principles to strengthen quality and effectiveness of performance within education sector (Khmer)	Government	To enhance knowledge and skills of education managers	MoEYS	Hard copy: 6,000	4,013.39

Title of Publication	Intended audiences	Objectives	Authors	Quantities (or electronic only)	Estimated cost to UNICEF (US\$)
Education Strategic Plan 2009-2013 (Khmer and English)	Government, DPs, NGOs and education stakeholders	To build a 5 year strategic plan to ensure that all Cambodian children and youth have equal opportunity to access quality education regardless of social status, geography, ethnicity, religion, language, gender and physical form	MoEYS and DPs, NGOs in education sector	Hard copy: Khmer 1,000 English 600	12,200.00
NCT training manuals (Khmer)	Education officers of MoEYS, National Core Trainers/DTMT	To train and provide technical knowledge, and methodology to improve DTMT professional	MoEYS, CFS NCTs and Core DTMTs	Hard copy: 5,000	14,222.97
DTMT training manuals (Khmer)	National Core Trainers (NCT), Provincial and District Training and Monitoring Team, Trainers, School Directors and TGL	Education officers /NCT and Core DTMT are able to train new methodologies	MoEYS, CFS NCTs and Core DTMTs	Hard copy: 15,000	26,997.24
DTMT's CD (Khmer)	National Core Trainers (NCT), Provincial Trainers	To train and provide technical knowledge, and methodology to improve their professional	MoEYS, CFS NCTs and Core DTMTs	DTMT's CD: 5,000	3,995.00
NCT's CD (Khmer)	Education officers of MoEYS, National Core Trainers/Provincial DTMT	Education officers /NCT and Core DTMT are able to train new methodologies	MoEYS, CFS NCTs and Core DTMTs	NCT's CD: 5,000	
ECCD Policy (Khmer and English)	ECD policy makers and implementers of 11 ministries and their provincial and district line ministry staff and authorities at all levels	To have an official high level policy guiding the development of ECCD NAP and ECCD implementation in country	MoEYS and 10 ministries	Hard copy: 50,000	11,790.65
ECD Resource Book (Khmer)	National ECD core trainers, Provincial and district ECD officers	To have a holistic ECD materials as resource for ECD national trainers use as reference materials	MoEYS, ECED	Hard copy: 1,000	4,012.67

Title of Publication	Intended audiences	Objectives	Authors	Quantities (or electronic only)	Estimated cost to UNICEF (US\$)
ECE/Preschool materials/books (Play activity, Songs, Pre-writing, and environment) (Khmer)	Preschool teachers, and ECE facilitators	To have teaching materials/ guides (Play and pre-writing) available for preschool teachers for interacting with preschool children	MoEYS and Enfant et Developme nt	Hard copy: 18,000	10,196.70
ECE Calendar (Khmer and Math) (Khmer)	Provincial, district, and community ECE facilitators, and parents	To have a day-by-day activity guides for parents to interact with and stimulate their children' learning at home to preparing them for school	MoEYS, ECED	Hard copy: 4,000	10,186.10
Children worksheet (Math and Language) (Khmer)	Teacher and averaged children in AL classes	To help accelerate Math and Language learning of averaged children in accelerated learning classes of the three year programme	MoEYS, PED	Hard copy: 5,925	45,592.08
HIV/AIDS					
Teacher Text Book for Primary School on HIV life skills education (Khmer)	Teachers from grade 5 & 6	Increase knowledge/skills in HIV Prevention and life skills	MOEYS	Hard copy: 1,000	1,084.27
Student Text Book for Primary School on HIV life skills education (Khmer)	Students from grade 5&6	Increase knowledge/skills in HIV prevention and life skills	MOEYS	Hard copy: 1,000	1,341.17
Drug Prevention Booklets (Khmer)	Students in Primary School	Increase knowledge/skills in drug use and HIV prevention	Khmer HIV/AIDS NGO Alliance (Khana)	Hard copy: 10,000	1,729.84
Most At Risk Young People (MARYP) Documentary DVD (Khmer and English)	Policy Makers and Programmers	To document how MARYP survey was conducted	UNICEF	CD-ROM Khmer 700 English 300	4,000.00
MARYP Survey Report (Khmer and English)	Policy Makers and Programmers	To assess multiple risk behaviours related to HIV infection	MOEYS/ KHANA	CD-ROM: 1,000	9,000.00
ASM					
UNICEF Book Planner 2011 (Khmer)	UNs, NGOs Government	To promote child rights and to raise awareness about UNICEF in Cambodia	UNICEF	Hard copy: 30,780	13,481.00

6. Innovations and Lessons Learned

Category: Innovation
MTSP Focus Area or Cross-Cutting Strategy: FA 3: HIV and AIDS
Country: Cambodia
Title: Creating a strategic partnership for the Most-at-Risk Young People in Cambodia Survey
Related links: UNICEF Cambodia Intranet Site and on YouTube: http://www.youtube.com/watch?v=CYd9AUXfu8g
Contact person: Ulrike Gilbert-Nandra, HIV Specialist; email: ugilbert@unicef.org
<p>Abstract: A survey on MARYP and an innovative 15-minute film documenting its accomplishment were launched in November 2010. Conducted in hot spots in eight provinces and involving 2,489 young people, the survey generated new age- and sex-disaggregated data to inform national policies, strategies and programmes. Young people's behaviours related to sex, drugs and alcohol use and their preferences/experiences with health services were assessed. The survey found high rates of sexual activity, with 83% of sexually active males reporting paying for sex with women in the past year. HIV risk behaviours often overlapped with illicit drug and alcohol use. For instance, 29.2% and 13.8% of sexually active young men and women, respectively, reported the use of illicit drugs, compared to 5.3% of young men and 0.4% of young women who never had sex. Meanwhile, only 63% of sexually active young women reported receiving HIV information compared to 80.3% of young men.</p>
<p>Innovation: The survey was conducted under the leadership of MoEYS, with technical support from a multi-sectoral steering committee composed of young people, government, UNICEF, WHO, UNAIDS, UNFPA, UNESCO and NGOs. Having broad ownership and consensus at the onset and throughout the process proved vital in light of the sensitive nature of some of the findings. Visually capturing how the partnership arrangement functioned and how the survey was accomplished in a short film was another important way to effectively share results and recommendations, because such documentaries are an easy and appealing way to communicate complex data and information and translate information from the head to the heart. The multi-sectoral partnership approach in conducting the survey and the video documentation over the nine-month period, actively involving representatives from the survey population and ensuring a good gender mix, are considered an innovation in Cambodia.</p>
<p>Potential application: The partnership approach to generating evidence on potentially sensitive issues from the onset is suggested to be replicated for other similar types of surveys or studies. This approach includes establishing clear understanding of accountabilities and responsibilities of all involved, mutual respect and pursuing an inclusive approach. This further includes handling disagreements in the partnership arrangement amicably, which in the Cambodia case resulted in shared ownership of the survey findings by government, academia, NGOs and UN agencies.</p>
<p>Issue: Quality sex- and age-disaggregated data on young people's behaviour related to sexual practices, alcohol and drug use is rare in Cambodia. Furthermore, the active involvement of survey populations in research is often limited or tokenistic. A Youth Risk Behaviour Survey was conducted in 2004, but government and UN partners agreed in late 2009 to conduct a survey with a more robust study design. The sometimes strained relationship between government and NGO actors was of concern and had to be facilitated with tact and diplomacy; therefore, ensuring a high degree of ownership and involvement from key stakeholders was critical to success.</p>
<p>Strategy and Implementation: UNICEF played a catalytic role in promoting a lead role for the ministry, ensuring that the NGO selected to conduct the research had the buy-in and benefitted from technical guidance from the steering committee, and, notably, establishing a mechanism that facilitated the safe participation of young people from key populations in the research process from the onset. Actions such as arranging separate meetings between researchers and the Youth</p>

Advisory Group facilitated the participation of young people from populations at risk (young people who use drugs, young people in sex work and young gay men).

UNICEF jointly developed the terms of reference for the survey with government and UN partners, jointly selected the research organization, ensured that the research protocol was cleared by the national ethics committee and followed-up to ensure that regular meetings of the steering committee took place. Disagreements were swiftly dealt with. UNICEF mobilized funding from different sources, pooled the funds, and managed the financial and donor reporting requirements, resulting in a reduced administrative burden on both government and NGO partners. The film documenting the research process and key outcomes was creatively conceptualized and produced in-house by UNICEF.

Progress and Results: National and numerous sub-national dissemination workshops with wide participation of government and NGOs ensured that the survey results, recommendations and documentary were shared with a large audience. Importantly, the survey findings were not contested and were used to inform the new national multi-sectoral strategic plan on AIDS in Cambodia (2011-2015) and the HIV prevention component, specifically. Along with providing important age- and sex-disaggregated information on the behaviours of young people most at risk, the survey identified that the main barriers to young people using health services were concerns for confidentiality, non-same-sex health providers, long waiting times and user fees. Therefore, in higher prevalent/hot spot areas, focused yet comprehensive programme approaches should be employed with MARYP, which address HIV risks (and their interrelationship with alcohol and drug use) as well as where to access condoms, reproductive health and harm-reduction services. On the supply side, these should be complemented with deliberate efforts to build the capacities of private and public health service providers to better cater to the needs of MARYP. The need to better engage local authorities and the police in promoting a rights-based approach towards young people most at risk was also highlighted.

Next steps: Survey results and the video will be widely used to heighten awareness and inform the implementation of policies and strategies in HIV prevention, sexual and reproductive health, and drug services, as well as to shape new and more focused approaches to young people's development in Cambodia.

7. Special Report: South- South Cooperation

Not applicable.