

23 October 2007

## **United Nations Children's Fund**

### **Revised country programme document**

#### **Nicaragua (2008-2012)**

The draft country programme document (CPD) for Nicaragua (E/ICEF/2007/P/L47), was presented to the Executive Board for discussion and comments at its second regular session of 2007 (5-7 September). The Executive Board approved the aggregate indicative budget of \$4,160,000 from regular resources, subject to the availability of funds, and \$26,345,000 in other resources, subject to the availability of specific-purpose contributions, for the period 2008 to 2012. In accordance with Executive Board decision 2006/19, the present document was revised, as appropriate, and posted on the UNICEF website no later than six weeks after discussion of the CPD at the second regular session. The CPD will be approved by the Executive Board at its first regular session of 2008, unless at least five members have informed the secretariat in writing of their wish to bring the document before the Executive Board.

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*Basic data*<sup>†</sup>  
(2005 unless otherwise stated)

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Child population (millions, under 18 years)	2.5
U5MR (per 1,000 live births)	37
Underweight (% , moderate and severe) (2001)	10
Maternal mortality ratio (per 100,000 live births) (2003)	83
Primary school attendance (% net, male/female) (2004)	89/87
Primary schoolchildren reaching grade 5 (% , 2003)	59
Use of improved drinking water sources (% , 2004)	79
Adult HIV prevalence rate (%)	0.2
Child labour (% , children 5-14 years old) (2001)	15
GNI per capita (US\$)	910
One-year-olds immunized against DPT3 (%)	86
One-year-olds immunized against measles (%)	96

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

## The situation of children and women

1. With 46.2 per cent of its population of over 5 million living in poverty and 15 per cent in extreme poverty, Nicaragua remains one of the poorest countries in Latin America. At the current rate of progress, and given wide in-country disparities, the country is unlikely to achieve most of the Millennium Development Goals. The Eastern Autonomous Regions (EAR), home to a large portion of Nicaragua's indigenous peoples and ethnic communities, have the worst social and economic indicators.

2. There has been a small improvement in child chronic malnutrition, which is at 16 per cent (2005), down from 20 per cent in 2001. However, 5 of the country's 17 departments show chronic malnutrition rates above 30 per cent, and above 50 per cent in parts of the EAR. There have been localized increases in acute forms of malnutrition associated with poverty and vulnerability to emergencies.

3. A steady reduction in infant and under-five mortality rates is associated with increased immunization coverage, sanitation programmes, promotion of breastfeeding and disease control. However the under-five mortality rate remains above 60 per 1,000 live births in 10 departments and in the EAR. Some 40 per cent of the population has no access to health services (as much as 75 per cent of the indigenous and Afro-descendant population), while the majority is covered by low-quality public services.

4. Approximately 35 per cent of children are not registered at birth, and the coverage of prenatal care is 81 per cent in urban areas and 51 per cent in rural areas. Maternal mortality is 89.6 per 100,000 live births (2004). **During 2004 41% of maternal deaths occurred after childbirth, 32% during delivery and 27% during pregnancy; 38% of maternal deaths occurred in the health services facilities.** With

approximately 50 per cent of birth deliveries occurring at home, underreporting is high. In the EAR, maternal mortality is 2.1 times higher than the national average.

5. A third of the population has no access to sustainable source of drinking water (81.66 per cent in the EAR). While it is reported that 75.8 per cent of the rural population has access to sanitation facilities, latrine use is low. Growing environmental degradation and poor hygiene practices exacerbate poverty, disease and vulnerability to natural disasters.

6. Through formal and non-formal services, pre-school coverage in 2006 reached 52.1 per cent while net primary school enrolment is estimated at 87.6 (2006), up from 83.5 per cent in 2003. Approximately 36 per cent of children are not in the school system. These include children living mainly in rural areas, from indigenous and Afro-descendent families, and with disabilities. Only 5 per cent of children with disabilities receive appropriate support. The quality of primary school education is deficient, resulting in low completion rates of 59 per cent. More than 70 per cent of children in third and sixth grade do not achieve minimum learning standards. Coverage and quality of intercultural-bilingual education are limited. Child labour affects 13.4 per cent of children and adolescents aged 5-17 (2005), down from 14.3 per cent in 2000.

7. Gender parity has been achieved at the pre-school and primary school levels, with higher enrolment at the secondary level for girls (2003). However, unequal power relations between men and women are associated with high rates of adolescent pregnancy, domestic violence, increased rates of HIV/AIDS among women and the low involvement of men in the upbringing of their children.

8. The annual incidence of HIV/AIDS increased from 2.52 to 7.6 per 100,000 during 2000-2006. Children 0-14 represented 5.6 per cent of all new infections in 2006, while adolescents 15-19 were 6.8 per cent. The male-female ratio is 2.4 to 1 of registered cases. Almost half of adolescents do not know how to prevent HIV/AIDS, over 90 per cent of pregnant women lack access to services to prevent vertical transmission, and less than 10 per cent of orphans receive support. Access to antiretroviral therapy (ART) has increased; however, only 50 per cent of recorded HIV/AIDS cases receive ART.

9. According to the World Bank, Nicaragua has the second-highest rate of domestic violence in Latin America. One in every three women reports physical abuse, often in front of her children or during pregnancy. The Ministry of the Family has reported more cases than previously of child victims of sexual abuse, sexual commercial exploitation, pornography and trafficking. Factors that contribute to family disintegration such as migration and social marginalization are also associated with children's increased vulnerability to violence. An estimated 10 per cent of the population has migrated, but the impact on the well-being of children left behind has received scant attention.

## **Key results and lessons learned from previous cooperation 2002-2006 and 2007**

### **Key results achieved**

10. UNICEF aligned the country programme to national plans and participated in health, education, social protection, and water and sanitation sector-wide approach

(SWAp) round-tables to ensure the inclusion of children's issues. UNICEF adhered to the health and water and sanitation SWAp codes of conduct. Strong financial support was received from Sweden, Netherlands, Denmark, Japan, Italy, Spain, Luxembourg and Austria.

11. Advocacy with the tourist sector to fight child abuse, exploitation and trafficking led to a binding Code of Ethics for all tour operators. A child registry campaign conducted with Save the Children and Plan International, local authorities and communities reduced under-registration in the North Atlantic Autonomous Region by 75 per cent, providing birth certificates to 96,000 children.

12. UNICEF took a leading role in the organization of the education SWAp round-table. The child-friendly and healthy schools model is being considered in the formulation of national policies. Support to the National Commission for the Eradication of Child Labor led to the identification of more than 7,000 working children and adolescents and their reinsertion in the education system. The programme supported the development of a national strategy for early and pre-school education.

13. UNICEF, in coordination with the Pan American Health Organization (PAHO) and the World Health Organization (WHO), provided technical inputs on child issues for the formulation of the national health plan and decentralization of health care. The Integrated Management of Childhood Illness was adopted in 2003 as national policy for the care of young children. UNICEF supported the upgrading of the national cold chain, helping to maintain vaccination rates above 80 per cent. Maternal homes supported by the programme to provide lodging and care to pregnant women from isolated communities account for 36 per cent of the deliveries attended by qualified staff; however, gaps are still serious in rural areas and the EAR.

14. In the EAR, UNICEF succeeded in introducing the issue of child rights in the local political agenda. This led to important progress in the autonomous health model and education system, contributing to a 10-per-cent increase in primary enrolment in the region, while immunization coverage increased to 71 per cent in 2006 (from 37 per cent in 2005).

15. UNICEF supported the creation of the National Water and Sanitation Committee and water and sanitation SWAp round-table, ensuring that it addressed **investment in rural areas**, decentralization, community participation, gender, hygiene education, environmental sanitation and risk management. In 41 municipalities with the lowest coverage, the programme supported the construction of water systems for a population of 45,000, and water and sanitation facilities in schools benefiting 10,800 children. UNICEF also increased the capacity of the Ministry of Health and National Water Authority for water quality surveillance, especially in regions at risk of arsenic contamination.

16. The global campaign on children and HIV/AIDS was successful at including children in the national policies and plans on HIV/AIDS. Thanks to cooperation with Brazil, Nicaragua increased access to ART for children and pregnant women, complementing support from the Global Fund for AIDS, Tuberculosis and Malaria. Innovative strategies implemented with the participation of community leaders and traditional birth attendants and the provision of rapid-test kits increased HIV/AIDS

testing among pregnant women in the South Atlantic Autonomous Region, from 6 per cent in 2005 to 26 per cent in 2006.

17. UNICEF promoted the empowerment and participation of adolescents via the education system and participatory communication strategies. Networks of adolescent have been very effective in fostering their participation in the political dialogue with authorities.

### **Lessons learned**

18. In a context of increased harmonization and alignment of international cooperation, and growing emphasis on budgetary support mechanisms, UNICEF is most valued as a participant in political dialogues on child issues, providing technical guidance, transferring knowledge and monitoring progress on the fulfilment of rights and on achievement of goals for children. UNICEF technical expertise in policy advice is especially valued for the organization's field presence. Hence, it is important for the programme to maintain operational presence and outreach in capacity development.

19. Weakness in the national statistical system represents a serious obstacle to accurately analysing the situation of children, measuring progress and guiding decision-making. Although the previous programme included the strengthening of the statistical system, this needs to be tackled in a more systematic and long-term joint inter-agency strategy.

20. Direct cooperation with some municipalities, associations of municipalities and the regional government of the North Atlantic Autonomous Region increased UNICEF expertise in and understanding of local political and social contexts. This proved important in the provision of technical assistance to national institutions, as well as in the contribution of UNICEF to the dialogue of the SWAp round-tables, and will serve as a foundation for programme activities in 2008-2012.

21. The midterm review (MTR) identified the need for an increased and more integrated UNICEF support in the EAR. This support intensified during the last part of the previous programme but needs continued strengthening so that strategies are adapted to the regional context, relations are deepened with regional institutions, and coordination is tightened with other United Nations agencies.

## **The country programme 2008-2012**

### **Summary budget table**

<i>Programme</i>	<i>(In thousands of United States dollars)</i>		
	<i>Regular resources</i>	<i>Other resources</i>	<i>Total</i>
Knowledge, research and advocacy	715	5 475	6 190
Health and healthy environment	727	7 318	8 045
Quality education for all	505	5 840	6 345
HIV/AIDS and children	580	3 420	4 000
End violence against children	533	3 487	4 040

<i>(In thousands of United States dollars)</i>			
<i>Programme</i>	<i>Regular resources</i>	<i>Other resources</i>	<i>Total</i>
Cross-sectoral costs	1 100	805	1 905
<b>Total</b>	<b>4 160</b>	<b>26 345</b>	<b>30 505</b>

### **Preparation process**

22. In 2005, the United Nations country team agreed to extend the duration of the 2002-2006 country programme through the end of 2007 (bridging year), in order to allow preparation of the United Nations Development Assistance Framework (UNDAF) with the new political authorities who took office in January 2007.

23. The 2008-2012 programme preparation process began with UNICEF participation in the development of the Common Country Assessment and the UNDAF. The programme is designed to contribute to the UNDAF outcomes and outputs in all areas related to children. The UNDAF, along with the 2005 MTR results and UNICEF medium-term strategic plan (MTSP) for 2006-2009, provided the starting points for CPD discussion and design, conducted in close partnership with the Technical Secretariat of the Presidency and the Ministry of Foreign Affairs and in consultation with relevant line Ministries to ensure alignment with national plans. The process also took into account discussions held with key bilateral donors and civil society partners, who provided critical inputs.

### **Goals, key results and strategies**

24. The overall goal of the programme is to promote and contribute to national, municipal and community-based efforts for the fulfilment of children's rights to survival, development, protection and participation, emphasizing the strengthening of national capacities of duty bearers and informed demand by right holders in order to reduce inequalities that exclude large numbers of children from the full enjoyment of their rights.

25. The programme will emphasize sectoral interventions in the 52 poorest municipalities prioritized in the UNDAF, targeting the most excluded children, including the disabled and children of migrant families. In 15 of these municipalities, the programme will draw together all components and promote comprehensive local development policies and initiatives to strengthen local governance for children. The local development experiences will feed into countrywide policies for the fulfilment of child rights. The participation of civil society, especially children and adolescents, will be key in capacity-building and in monitoring the impact of national policies and investment at the local level.

26. UNICEF will strategically combine policy-based initiatives for the universalization of quality social services at the national level with local initiatives in priority regions to deliver the following key results: (i) increased national and local capacities for the generation, analysis, dissemination and use of knowledge, research and information on child issues for formulating, implementing and evaluating public policies for children; (ii) accelerated progress toward the Millennium Development Goals, emphasizing increased access to quality health, basic education and water, sanitation and hygiene (WASH) for children, and

universal access to HIV/AIDS prevention, treatment, care and support to children, pregnant women and adolescents; and (iii) ending violence against children. All programme components will strive to reduce vulnerability and improve emergency preparedness and reflect an explicit gender perspective, emphasizing and strengthening responsible fatherhood.

27. Cross-cutting strategies include advocacy for policy development, local capacity-building, social communication and mobilizing partners for child rights and promoting knowledge on the situation of children, especially the most excluded. Increased subregional initiatives and cross-border projects for child rights will be promoted, especially for addressing the situation of migrant families and their children left behind. **All programme components will strive to reduce vulnerability, improve emergency preparedness and contribute to three cross cutting-strategies: on gender equality, emphasizing and strengthening responsible fatherhood; on adolescent development ensuring empowerment, participation and appropriate adolescent-friendly services; and on indigenous rights, mainly in the Eastern Autonomous Region.**

#### **Relationship to national priorities and the UNDAF**

28. The 2008-2012 country programme contributes to five of the national short-, medium- and long-term priorities to Combat Poverty and Promote Social and Economic Development announced by the Government in early 2007. These relate to the fight against hunger and poverty; health; education; water; and the strengthening of citizenship and participation. The programme also contributes to national targets and priorities spelled out in the sectoral plans and strategies as detailed in each programme component. UNICEF will continue to have a technical advisory role to support social Ministries and advance the harmonization and alignment process.

29. The United Nations country team has achieved a high level of coherence and cohesion among agencies. UNICEF will contribute to all five UNDAF outcomes: (i) governance and rule of law, focusing on violence against children, justice, human rights conventions, birth registration and capacity building in the EAR; (ii) poverty, hunger and malnutrition, focusing on education and child nutrition; (iii) the Millennium Development Goals 2 to 6 and the Millennium Declaration, focusing on strategic planning, investment in and capacity-building for quality social services and respect for cultural identities; (iv) protection of the environment and risk-reduction, focusing on water, sanitation, hygiene and emergency preparedness and response for children; and (v) information systems for child rights as part of the United Nations capacity-building support.

#### **Relationship to international priorities**

30. The programme considers and targets country commitments under the Convention on the Rights of the Child; the Convention on the Elimination of All Forms of Discrimination against Women, the Convention on the Rights of Persons with Disabilities; UNICEF Core Commitments for Children in Emergencies, the United Nations Secretary-General's Study on Violence against Children; the United Nations General Assembly Special Session on HIV/AIDS goals, Education for All, the Millennium Development Goals and the Millennium Declaration.

31. The programme will strive to address several of the observations of the Committee on the Rights of the Child (2005): increase efforts to comply with legislative instruments to fulfil child rights; promote attitudes and practices that respect children as right holders; promote greater investment in children; reduce disparities, discrimination and poverty; and eradicate violence. The programme also reflects the observations of the Committee on the Elimination of Discrimination against Women concerning domestic violence, gender stereotypes, lack of disaggregated data, teenage pregnancies, maternal mortality and disparities. The results matrix outlines programme linkages with the Millennium Development Goals, *A World Fit for Children* and the MTSP.

### **Programme components**

32. **Knowledge, research and advocacy for children.** To address the country's weaknesses in the generation, analysis and use of disaggregated data (which are sensitive to gender ethnicity) for policy formulation, the programme will contribute to UNDAF outcome 5, supporting the national strategy for statistic development, **mainly in monitoring the effects of poverty, migration and violence against children. It will also support** the national policy of decentralization for local development and the strengthening of child rights observatories **to increase local accountability, awareness and advocacy on child rights.** It will also participate in the promotion of a SWAp for information and statistics together with other United Nations agencies.

33. The component will strengthen the capacities of national and local governments to design, monitor and evaluate policies and programmes **for children's rights**, and will strengthen the capacities of children, families and civil society to be informed in claiming their rights, by creating and disseminating knowledge, strengthening skills and upgrading information systems **related to them.** Efforts will ensure close national follow-up on the implementation of **CRC and CEDAW conventions and protocols.** Legal and administrative reforms to increase the quality and coverage of birth registration and vital statistics and direct actions in the EAR will aim at reducing the registration gap in this region.

34. The programme will support the implementation of local development plans that include child and adolescents rights, with clearly stated roles, responsibilities and budgets in 15 prioritized municipalities. Special attention will be given to the reduction of ethnic and gender gaps, the rights of children with disabilities, and respect for cultural identity.

35. Community **and civil society** participation will be promoted in policy design, both at the national and local levels, to ensure the fulfilment of child rights through communication, social mobilization and advocacy. **Adolescent** networks will be strengthened and included in local development plans of prioritized municipalities.

36. The component will contribute to emergency preparedness and risk-reduction with the use of information systems to identify the most vulnerable groups, the promotion of child rights in the development of emergency plans, and the use of communication networks and strategies to contain the impact of emergencies. The National System of Prevention, Mitigation and Response to Disaster will be supported to reduce the vulnerability of communities to natural disasters.

37. **Health and healthy environments.** To address disparities in health and nutrition and in support of the National Health Policy updated by the Government in 2007 and the Drinking Water and Sanitation Strategy 2005-2015, the component contributes to UNDAF outcomes 2, 3 and 4. The component will be coordinated with other donors and allies participating in the health SWAp round-tables. In the water and sanitation SWAp round-tables, the component will contribute specifically in rural areas. Actions will be concentrated in 52 priority municipalities promoting community participation, social monitoring and response capacity of public services, including in emergency situations.

38. To fight malnutrition, the programme will support community-based strategies to promote changes in families' health practices and parental adoption of appropriate feeding and hygiene practices in early childhood, with the aim of reducing under-three malnutrition and micronutrient deficiencies by 50 per cent. To improve the capacity of social services to prevent infant and maternal mortality, the programme will focus on upgrading the skills, knowledge, practices, attitudes and cultural sensitivity of health staff, within the framework of child- and mother-friendly health services and maternal homes. Community and regional alliances will promote a regional health model in the EAR, including strategies to improve the quality and outreach capacity of health services and the expansion of preventive services such as immunization and growth-monitoring.

39. To guarantee access to quality WASH services, the programme will build on past experience and support prioritized municipalities in increasing their managerial capacity in water and sanitation and improving sustainable access to hygiene education, safe water and sanitation for 87,000 people. National authorities will be assisted in reviewing and implementing the National Water and Sanitation Strategy to achieve Millennium Development Goal 7. Special attention will be given to culturally sensitive technical and social solutions for indigenous and Afro-descendent populations.

40. The component will provide support to municipal and national institutions to increase their capacities of risk management and humanitarian response in health, nutrition and water and sanitation, specifically reflecting the needs of children affected by emergencies.

41. **Quality education for all.** In support to the implementation of the General Law on Education and the National Education Plan 2001-2015, the component will contribute to UNDAF outcome 3 and assist public institutions, civil society and families in developing their capacities to ensure the right to quality basic education for all children, with special emphasis placed on excluded populations. The component will be implemented in close coordination with all donors and allies involved in the education SWAp process and the EFA Fast Track Initiative.

42. At the national level, the component will support the development of a national policy for basic education, addressing quality and coverage, including the implementation of a child-friendly public school model by the Ministry of Education. In prioritized municipalities, efforts will support culturally appropriate and comprehensive family- and/or community-based strategies for early childhood development for at least 60 per cent of children in the most vulnerable communities. The aim is for least 50 per cent of children 4-5 years of age to have access to and be enrolled in culturally appropriate, inclusive and quality pre-schools. The component will also aim to close the gap in primary school retention and completion, especially

for indigenous populations, eliminating exclusion tied to gender, disability and child labour. The programme will support the development and application in primary schools in priority municipalities of a basic set of indicators on life skills.

43. The component will strengthen the participation of civil society, parents, teachers, students and communities in decision-making in schools and in the development of education policies and the monitoring of achievements at municipal, regional and national levels. Emphasis will be placed on improving quality, promoting inclusion, eliminating violence within the school environment and promoting curriculum components for emotional development and the prevention of adolescent pregnancies.

44. As part of child-friendly schools initiatives, the programme will promote WASH in schools to increase healthy hygiene habits in 80 per cent of children and guarantee the installation and adequate use of water and sanitation services in 50 per cent of schools in prioritized municipalities. Support will be provided to national and local institutions for increasing their capacity to guarantee the right to education in emergencies and to include risk prevention and environmental care in the school curriculum.

45. **HIV/AIDS and children.** In support of the National Strategic Plan on HIV/AIDS for 2006-2010, the programme component aims at strengthening the capacity of the State and civil society to guarantee universal access to HIV/AIDS prevention, treatment, care and support to children, pregnant women and adolescents. The component contributes to UNDAF outcome 3 and will closely coordinate with participants in the health SWAp and the National HIV/AIDS Commission.

46. The programme will contribute to ensuring that HIV is treated as a national priority, as reflected in budgetary allocations and the provision of ART for at least 80 per cent of children and women who are HIV positive. To improve the care of children and women living with HIV/AIDS, the programme will strengthen the capacity of the Ministry of Health for decentralized management of the epidemic and prevention of mother-to-child transmission, ensuring 80 per cent coverage of HIV testing in pregnant women and appropriate counselling and care for those who test positive. Comprehensive procedures for children, adolescents and pregnant women living with HIV/AIDS will be promoted in priority municipalities.

47. The programme will promote formal and non-formal education strategies and community-based networks for the prevention of HIV among adolescents, with special attention given to girls. Communication strategies for the prevention of HIV and elimination of stigma will include strengthening the network of adolescent reporters and their capacity to develop programmes that are culturally and age appropriate and gender sensitive; and the transmission of appropriate information for preventing HIV/AIDS through the education system, with the expected result that that 90 per cent of adolescents in priority municipalities know how to prevent HIV/AIDS and have the capacity to avoid risky behaviour.

48. The component will also include strategies for the protection of children made vulnerable by HIV/AIDS, including orphans, and for the strengthening of the coping capacity of families, through measures that include psychological and community support and the adoption of local development plans to mitigate the impact of the epidemic on families. It will ensure that protection, care and vulnerability reduction

of children and adolescents living with HIV/AIDS are fully implemented in municipalities with the highest prevalence.

### **End violence against children**

49. In support of the National Policy for the Comprehensive Care of Children and Adolescents, the component will strengthen the national special protection system to increase its capacity to eliminate domestic, institutional and community violence against children and provide care to child victims of violence. The component contributes to UNDAF outcomes 1 and 3. The component will be implemented in coordination with participants in the social protection SWAp process.

50. UNICEF will promote coordination among governmental and non-governmental organizations and institutions that deal with protection services and child participation in the development of relevant strategies at the national level and in prioritized municipalities. Action will focus on the capacity of the national protection system to include preventive measures for all stages of the life cycle, provide specialized care, strengthen the competencies of families and communities to provide safe family environments for children, taking into account the effects of migration; institutional capacity-building of organizations in charge of protection, education and health; and the elements of the judicial system that deal with juvenile justice to ensure adequate legal processes. Measures to prevent and combat trafficking of children will be designed and coordinated with other Central American countries.

51. The programme will support the development of a health system model for the comprehensive care of victims of physical and sexual violence, as well as monitoring among all relevant institutions. With the implementation of a violence prevention and detection model in the education system and the promotion of a culture of peace and conflict resolution, the component will, in priority municipalities, support the training of teachers, school directors, children and community leaders and the development of other safe learning spaces. In emergency preparedness, the component will promote special protection measures for children and women.

52. By 2012, the programme aims at ensuring the functioning of local protection systems in at least 25 municipalities, increasing to at least 80 per cent the reporting of physical, psychological and sexual violence against children detected by families and institutions.

53. **Cross-sectoral costs.** These will include all activities that support the general implementation of the programme, such as administrative actions to purchase supplies, monitoring and evaluation activities and technical assistance for local development.

54. Cross-sectoral costs will also include all cross-cutting communication strategies for the achievement of key results, focusing on child and adolescent participation, behavioural change, informed demand by rights holders and advocacy with duty bearers. It will include interpersonal peer-to-peer communication; communication within communities through networks and social mobilization; and exerting influence and engaging in advocacy in the media, both national and local. The network of child reporters will gradually expand to reach all 52 priority

municipalities. The programme will devote special attention to training media workers and improving the quality of child-related information in the media.

### **Major partnerships**

55. The programme will be implemented in close collaboration with national, regional and municipal governmental and non-governmental institutions, civil society and private sector partners, child networks, media, other United Nations Agencies, bilateral and multilateral donors, universities and churches, as detailed in the summary results matrix.

56. UNICEF will **continue** participating in all relevant SWAp processes, aligning its programming to national plans **and** or contributing to their development **of areas related to the fulfilment of child rights and to their implementation**. Partnerships will be continued with Ministries and donors participating in sectoral round-tables, with the Ombudsperson for Child Rights and the National Council for Children and Adolescents, Save the Children, the network of non-governmental organizations working for children, the World Bank, especially in health and education, and the Inter-American Development Bank, especially in birth registration and the fight against violence. Relations will be expanded with civil society organizations, community organizations and the private sector.

57. UNICEF will continue to work closely with the World Food Programme and the International Labour Organization in education, nutrition and protection of working adolescents; with WHO/PAHO, the United Nations Population Fund and the United States Agency for International Development in child and maternal health, HIV/AIDS, education and knowledge-generation; and with the United Nations Development Programme in local development, social protection, emergency preparedness and Millennium Development Goals monitoring. Joint programme initiatives will be developed with other United Nations Agencies to strengthen the national information systems and to achieve the Millennium Development Goals in 52 priority municipalities.

### **Monitoring, evaluation and programme management**

58. All monitoring and evaluation activities will be coordinated with and reported to the United Nations inter-agency groups set up for UNDAF implementation.

59. The impact of the programme will be monitored through key indicators such as maternal and infant mortality, chronic malnutrition, birth registry, HIV/AIDS prevalence, reported cases of violence against children, water and sanitation coverage, education, including enrolment, repetition, dropout and completion rates, percentage of public budgets spent on health, protection, and water and sanitation, both at the national level and in priority municipalities.

60. Progress will be assessed in biannual meetings with sectoral counterparts, in coordination with the Ministry of Foreign Affairs and Technical Secretariat of the Presidency, and included in the UNDAF monitoring mechanisms. The midterm review will take place in 2010.

61. The Integrated Monitoring and Evaluation Plan will be the main tool for monitoring and evaluation activities. It will include regular field visits, internal control systems and the adoption of monitoring tools of other SWAp partners, especially those of Government counterparts, aiming at facilitating harmonization

and coordination and promoting a results-based approach to programming. Specific monitoring tools will be developed to assess the impact of communication strategies for behavioural change. The systematization and sharing of local experiences will promote ownership and sustainability.

62. In coordination with the National Statistics Institute and other United Nations Agencies — and combining the research work undertaken by other cooperation agencies — UNICEF will complete a baseline of indicators included in the UNDAF and results matrix and update it at the end of the cooperation period, promoting the generation of disaggregated information to highlight gender, ethnic, geographic and social disparities. The Millennium Development Goals follow-up will benefit from the strengthening of DevInfo at the national, municipal and regional levels.

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