1. EXECUTIVE SUMMARY

Through concerted efforts, the UNICEF Bangladesh Country Programme achieved measurable results in the following areas in 2010: (i) The MICS 2009 report was launched and disseminated. The results revealed significant geographical disparities in performance at the district and sub-district levels including rural-urban and male-female differences, highlighting the importance of addressing inequalities in achieving progress towards the MDGs and poverty reduction. The survey was conducted at the sub-district level covering 300,000 households for the first time in Bangladesh; (ii) Three policy documents were produced based on the MICS 2009 data: A Case for Geographic Targeting of Basic Social Service, Investing in Vulnerable Children, and Understanding Urban Inequalities in Bangladesh: A Prerequisite for Achieving Vision 2021, examining how equity-focused strategies must be used in the Bangladesh context and translated into policies, programmes and budget allocations; (iii) The UNCT agreed to target the most vulnerable 20 out of the 64 districts of Bangladesh as the basis for the UNDAF 2012-2016; and (iv) The amended 1974 Children Act was approved in December, reinstating the need for alternative means to address children in conflict with the law, and confirming that individuals under 18 would be considered and treated as children. In terms of shortfalls, (i) UNICEF, in partnership with UNDP, UNFPA and WFP, is leading the UN Joint Community Development Initiative for Cox’s Bazar district, in two of the worst performing sub-districts in the country. There have been some delays in the implementation, which UNICEF is trying to address by working with the government. (ii) There is an increased focus on nutrition by the GoB and donors alike. UNICEF has traditionally been successful in supporting Vitamin A, de-worming and use of iodized salt but progress in other respects has been less than expected. Anaemia control, for instance, achieved moderate success with just 43 per cent of pregnant women receiving iron/folate supplementation in the 12 intervention districts. Moreover, there was only a 15 per cent reduction of anaemia in children aged 6-35 months and 23 per cent reduction in pregnant women in 17 sub-districts.

2. COUNTRY SITUATION AS AFFECTING CHILDREN AND WOMEN

Despite tremendous progress in economic growth and human development, socio-economic disparities and child poverty remain a grave concern in Bangladesh. Children account for about 45 per cent (or 68 million) of the total population and 46 per cent of them live below the upper poverty line with one-quarter in extreme poverty (Child Poverty and Disparities in Bangladesh: http://www.unicef.org/bangladesh/knowledgecentre_6109.htm). Despite the great need for support, they were directly allocated only about 9.8 per cent (USD 275 million) of the social safety net budget of USD 2.8 billion which represents about 1.4 per cent of the national budget in 2010-11. Urban working children, street children and orphans in the poorest wealth quintiles are the most vulnerable yet they were allocated only about 0.7 per cent (USD 19 million) of the social safety net budget (Mitigating Socioeconomic Inequalities to Accelerate Poverty Reduction: Investing in Vulnerable Children: http://www.unicef.org/bangladesh/knowledgecentre_6442.htm).

The government of Bangladesh (GoB) seeks to promote development of Bangladesh to a middle income country, entailing growth of the average per capita income from the current USD 750 to USD 2,000 by 2021 under the Vision 2021 strategy. The sixth Five-Year National Development Plan (NDP) 2011-2015 delineates the policies and strategies to spur the growth towards the realization of the vision. While prioritising food and energy self-sufficiency and infrastructure, the vision places emphasis on achieving the MDGs, reducing poverty levels and protecting the hard-core poor. Bangladesh aims to achieve a GDP growth of 6.7 per cent for the 2010-2011 fiscal year. Stability of the democratic system with higher domestic resource mobilisation and the Annual Development Plan implementation is essential in achieving economic growth,
which has been hampered by limited investment particularly in the power sector. Of the total budget, 6.2 per cent has been allocated to the health sector, 13.9 per cent to education and IT, and 8.2 per cent to Local GoB and Rural Development.

Bangladesh has already attained the MDG targets for gender parity in primary and secondary enrolment and is on track to achieve a number of other targets, including the reduction of poverty incidence, child mortality, halting the spread of malaria and tuberculosis and increasing access to sustainable safe drinking water and sanitation. However, as shown by the Bangladesh Multiple Indicator Cluster Survey (MICS) 2009 (Volume I: Technical Report: http://www.unicef.org/bangladesh/knowledgecentre_6292.htm), large disparities exist between the best and worst performing sub-districts for many of the social indicators, including under-five mortality and skilled birth attendance at delivery (a range of 150 and 66 percentage points respectively). It was also found that children in urban slums are much worse off than their peers in rural areas. For example, while net attendance in secondary education is 49 per cent (48 per cent in rural areas and 53 per cent in urban areas), it is only 18 per cent in urban slums (Understanding Urban Inequalities in Bangladesh: A prerequisite for achieving Vision 2021: http://www.unicef.org/bangladesh/knowledgecentre.html). These findings can dispel a widely held belief that slum dwellers migrate to urban centres because of better services. The MDG targets on reducing the incidence of hunger, attaining primary school completion and ensuring universal access to reproductive health remain problematic. Natural disasters, mainly floods and cyclones, are frequent and often keep vulnerable communities in a perpetual cycle of poverty. In April 2010, a severe storm struck parts of Bangladesh and eastern India. In Bangladesh, five deaths and two hundred injuries were reported, and women and children were the most affected. Several thousand dwellings were destroyed and thousands more were partially damaged. Throughout the affected areas in India and Bangladesh, nearly 500,000 people were left homeless or otherwise affected by the storm. Widespread damage to crops and livestock was also reported. In June 2010, landslides triggered by heavy rains killed at least 54 people in southeastern Bangladesh in Cox’s Bazar.

The general security situation has remained stable throughout 2010, but the threat of political volatility and civil unrest increased in the latter half of the year, as marked by nation-wide strikes. These occurrences, which are regular feature of Bangladesh’s democratic landscape, can significantly impact programme implementation if they become more frequent.

3. CP ANALYSIS & RESULT

3.1 CP Analysis

3.1.1 CP Overview:

Please refer to 3.1.2 Programme Strategy; 3.1.3 Normative Principles; and 3.2 Programme Component Analysis.

3.1.2 Programme Strategy

3.1.2.1 Capacity Development:

UNICEF Bangladesh strengthened its efforts to build the capacity of its partners in 2010, including government counterparts. The Bangladesh Bureau of Statistics (BBS) finalised the MICS 2009 report with UNICEF support and took the lead in wide dissemination of the survey results at the national and sub-district level. For the first time in Bangladesh, the survey was conducted at the sub-district level covering 300,000 households and the results revealed significant disparities in performance at the district and sub-district levels along with rural-urban and gender differences. Key ministers and policy makers from the GoB and civil society were actively involved in the dissemination discussions whereby the importance of addressing inequalities in achieving progress towards the
MDGs and poverty reduction was highlighted and the need for continued collaboration was recognised.

UNICEF provided technical support to the Ministry of Women and Children Affairs in the progress review of the National Plan of Action for Children and in the review of 1990 policy and preparation of the National Children Policy 2010, which is being finalized. UNICEF also provided support to the Ministry of Social Welfare in the Children Act 1974 review and preparation of the Children Act 2010 both of which processes were led by the GoB with active involvement of the civil society and elected leaders of the parliament. UNICEF mainly focused on providing evidence derived from primary and secondary data and information review, and promoting coherence among the public and private stakeholders.

Other key milestones achieved in 2010 include: introduction of pre-primary education for five-year-old children in line with the MDG 2 and EFA goal 1; mainstreaming of WASH in the school curricula in the national education system; direct transfer of funds to schools for School Level Improvement Plan; and piloting of better health and better education (BHBE) to address various problems related to school drop-out, for instance those of unhealthy children. UNICEF further provided technical support to the GoB by sharing lessons learned from UNICEF pilot programmes, and providing training to relevant officials.

3.1.2.2 Effective Advocacy:

UNICEF developed a focused advocacy strategy with three outcomes identified in the Annual Management Plan (AMP), to advocate for the GoB to adopt the social protection scheme on issues regarding children, in particular vulnerable children; the harmonisation of the national legislation with the Convention on the Rights of the Child (CRC), and to ensure they are addressed in the 6th Five-Year NDP with adequate budgetary allocations.

In order to make a compelling case of advocacy based on evidence, three policy documents were produced: *A Case for Geographic Targeting of Basic Social Services, Investing in Vulnerable Children and Understanding Urban Inequalities in Bangladesh: A Prerequisite for Achieving Vision 2021*, which examine how equity-focused strategies could be used in the Bangladesh context and translated into policies, programmes and budget allocations. The former two documents were launched during a seminar attended by the Minister of Finance and the State Minister of Women and Children Affairs, and have also been shared with the Prime Minister in preparation for her participation in the high-level panel on *Children and the MDGs: Reaching the Most Vulnerable* organised by UNICEF Headquarters. UNICEF also made a presentation to the technical committee working on the 6th Five-Year NDP. These documents were shared with the partners, including other UN agencies, NGOs and other development partners. The importance of targeting the least performing areas based on geographical disparity between districts and sub-districts in achieving the MDGs was agreed upon, and was adopted as the basis for UNDAF 2012-2016.

In regards to the third AMP advocacy outcome, the harmonisation of the national legislation with the Convention on the Rights of the Child (CRC), a comprehensive advocacy strategy was developed with efforts focused on the Parliament. The amended 1974 Children Act was approved in December 2010, reinstating the need for alternative means to address children in conflict with the law, and confirming that individuals under 18 would be considered and treated as children.

UNICEF played an important role as the Chair of Education and Health donor consortiums under the Education and Health SWAps. UNICEF participation in the SWAp process has been particularly effective in leveraging policies and resources for children.

3.1.2.3 Strategic Partnerships:

UNICEF, in collaboration with the GoB, WHO and ICDDR, B facilitated a Short Programme Review (SPR) on Maternal, Newborn and Child Health. The lessons derived from the three initiatives (MNCS, MNHI, MNCH) and SPR influenced the design of the new Sector
A collaborative model for the District Investment Case was developed and an investment case team was formed comprising members of the GoB (MoHFW), BRAC University and UNICEF.

In partnership with 13 GoB and private sector organisations, the National Global Handwashing Day was organised reaching 14.5 million students in 81,000 institutes. Campaigns were organised in collaboration with the National Sanitation Taskforce for the National Sanitation Month, and the Bangla-SAN conference contributed to reaching an agreement on the National Action Plan and road map on WatSan for 2011-2013. A joint Community Action Plan (CAP) has been prepared in the Rangpur district under the Sanitation, Hygiene Education and Water Supply in Bangladesh (SHEWA-B) and the Urban Partnerships for Poverty Reduction Project (UPPR) partnership, which demonstrates the advantages of working as One UN in the convergence areas.

UNICEF participated in the Donor Consortium of the Second Primary Education Development Programme (PEDP-II), a sector-wide approach in education funded by the GoB and 11 Development Partners (DPs). Of the DPs, ADB, CIDA, DFID, EC, Norway, the Netherlands, SIDA and the World Bank provided pooled funds through the ADB, whilst AusAID, UNICEF and JICA provided funds through a parallel mechanism. UNICEF continued to support the Early Childhood Network of more than 200 NGOs and academic institutions. UNICEF also led the United Nations Girls' Education Initiative (UNGEI) network, and as the UN lead agency for education, facilitated the UNDAF annual review process and development of the next UNDAF (2012-2016).

UNICEF continued collaboration with various partners: with WFP in the early learning programme in the Chittagong Hill Tracts (CHT); with UNHCR in Rohingya Refugee children education; with ILO in education of working children and elimination of the worst forms of child labour; with Save the Children Alliance for emergency response; and with 23 NGOs in Early Learning and Non-formal Education through a partnership between UNICEF, GoB and NGOs.

### 3.1.2.4 Knowledge Management:

UNICEF invested considerably in identifying and filling knowledge gaps related to equity, as 2010 marked the penultimate year of the current Country Programme cycle and the start of the preparation of the next NDP. Several studies were undertaken and a series of policy advocacy documents were produced based on the findings of the sub-national 2009 MICS (on Geographic Targeting, Urban Inequalities and Investing in Vulnerable Children: http://www.unicef.org/bangladesh/knowledgecentre). The GoB officials and development partners have welcomed the papers as relevant and timely and there has been an early indication of the uptake of some of the policy and strategy recommendations presented. The UNDAF has also adopted geographic targeting and for the first time in Bangladesh has agreed to converge on the 20 most disadvantaged/vulnerable districts of the country.

Within the current Country Programme, accountability for the knowledge management function lies with the Planning, Monitoring & Evaluation (PME) section while some programmes are also independently pursuing a parallel system, with likely risk of duplication of effort and expenditure. The new Country Programme 2012-2016 envisions a more centralised knowledge management function, which will ensure a coordinated identification and filling of knowledge gaps.

With regard to tools and systems for knowledge management, the strengthening of the UNICEF Bangladesh Country Office (BCO) website as the face of UNICEF Bangladesh continued from 2009. It was regularly updated with the latest information, and internal and external audiences were directed to it for easy reference and retrieval of knowledge products. The total number of page views recorded was 481,688, a 37 per cent increase compared to 2009. Similarly, the work initiated on BDInfo in 2009 continued this year at the sub-national level in the convergence districts. More than 120 GoB officials were trained to use BDInfo for data storage, dissemination and presentation.

In 2011, UNICEF will collaborate with key policy think tanks and research institutions to generate knowledge on children, particularly on budgeting for children. Internally,
UNICEF will maximise its efforts to enhance the management, dissemination and use of knowledge products.

3.1.2.5 C4D Communication for Development:
Communication for Development (C4D) approaches have been integrated into all BCO programmes to reinforce the community capacity to identify and analyse their development needs and claim their right to access development services; support them to develop and implement local action plans; and create demand for quality services, in particular maternal, neo-natal and child care services and water and sanitation facilities. Interventions for behaviour and social change are implemented through various community-based communication channels and mass media. Successful communication for social change led to the involvement of 3,500 Imams, 168 Buddhist monks and 550 journalists from four divisional level press clubs and 138 folk drama script writers from across the country in promoting healthy behaviours among children and families.

Advocacy and technical assistance supported by UNICEF and other development partners led to the licensing of 14 Community Radio (CR) stations for the first time and the development of a national strategy for the CR broadcast policy implementation through a participatory process. The CRs will help advance the development agenda in remote and disadvantaged areas and empower communities. The revitalisation of the communication character Meena invited 32 young people to develop 6 new scripts promoting healthy and protective behaviours. Meena Day was observed at Upazila level for the first time under the theme **Going to school is the only work for children, No child will remain out of school anymore**, reaching 16.5 million primary school children and 364,494 teachers from 81,434 schools.

The United Nations System Influenza Coordination (UNSIC) and UNICEF documented the response to H1N1 and H5N1. The 2010 Knowledge, Attitudes and Practices (KAP) survey showed an increase in knowledge on H5N1 prevention and improvements in practices and behaviours. A national assessment of the interactive theatre activities found it to be effective in promoting understanding and internalisation of messages while instilling a sense of social responsibility, and promoting changes in attitudes and behaviours. BCO has initiated the development of C4D M&E frameworks from different sectors to better inform the programme, and monitor the increase in knowledge and change in practices and behaviours. BCO has also successfully advocated for a robust C4D component in the new UNDAF.

3.1.3 Normative Principles

3.1.3.1 Human Rights Based Approach to Cooperation:
Since 2009, as part of the Delivering as One initiative, BCO has supported the UN Country Team (UNCT) in strengthening the Human Rights-Based Approach (HRBA) in individual and joint programmes, and enabling the rights holders to claim them and pressure the duty bearers to respect these rights. BCO, in partnership with UNDP, UNFPA and WFP, is leading the UN Joint Community Development Initiative for Cox’s Bazar, and is working with the GoB to resolve some concerns that have delayed its implementation. UNICEF has created evidence of rights violations and deprivation through studies and assessment, and has advocated for appropriate measures to address the geographical disparities and gaps in promoting the rights of the disadvantaged groups. Based on MICS 2009, UNICEF provided evidence-based analysis of the geographical disparities in A Case for Geographic Targeting of Basic Social Services. Investing in Vulnerable Children. The above document throws light on the investments made under various safety net and protection interventions along with future projections to achieve the MDGs with equity, with particular “focus on” children and women. These analyses were disseminated widely among the GoB and non-government national policy makers and political leaders, with the participation of leading ministers in the launch and dissemination. They were also shared with the UNCT, and have influenced the preparation of the next UNDAF for 2012-2016. Currently under preparation, the new UNDAF is using the HRBA approach; 20 districts have been identified for converging UN interventions through analysis of gaps in
fulfilling rights of the most disadvantaged and vulnerable population. These publications are also intended to assist in the design of national plans and budgets to address the children’s rights gaps and build a more equitable society.

At the programme level, the convergence of UNICEF interventions in seven selected districts has been strengthened to cover the most disadvantaged areas, with particular emphasis on the convergence of all interventions in the worst performing areas. The assessment of the gains derived from this approach and the impact of inter-sectoral synergies will be a subject of future research.

3.1.3.2 Gender Equality and Mainstreaming:

Under the joint UN-GoB Maternal and Neonatal Health Initiative (MNHI), UNICEF supported the establishment of 22 Health Service User Forums (with 40 per cent female membership) in four districts, to provide support to women to gain access to quality health care services. About 37,000 adolescents from 244 schools participated in the MNH debates; four health facilities were accredited as women friendly hospitals; and orientation on gender and violence against women was organised for 1,300 service providers (male and female).

Around 15,000 teachers (20 per cent female) from 15 districts received training on the Integration of Life Skills Based Education (LSBE) into Secondary (formal) Education, and 285 (32 per cent women) were trained as LSBE Trainers. In all, 104,500 adolescents (60 per cent girls) have been empowered through LSBE, and their involvement in community services; 59,402 mothers, 33,291 fathers and 1,379 influential members of the community attended meetings resulting in 8,137 social interventions to respond to cases of early marriage and promote social norm changes towards children’s rights promotion.

A high-level workshop on Gender Equality in Education: Beyond Numbers was held with the participation of female parliamentarians from Bangladesh and Nepal, and the civil society. An Action Plan was developed to promote girls’ education, and 32,804 learners (60 per cent girls) completed non-formal basic education through the BEHTRUWC project. About 600 out of 1,000 learners have been selected for livelihood skills training in 2011.

The joint UNICEF and GoB project SHEWA-B promotes the empowerment of women through their involvement in planning and representation in at least one of the three managerial positions in the 1,575 Water User Groups, who are responsible for ensuring quality construction of water points. Through the project, separate latrines for girls and boys have been constructed in schools in the SHEWA-B target areas, and 101 community latrines have also been built in 19 urban municipalities with two latrines and one bathing facility for women in each block.

All BCO studies include gender disaggregated data, which provides baseline information for use in the development and implementation of programmes.

3.2 Programme Components:

Title: Health and nutrition

Purpose:
The UNICEF Bangladesh Health and Nutrition Programme supports the national Health, Nutrition and Population Sector Programme (HNPSP) goal of increasing availability and utilisation of user-centred, effective, efficient, equitable, affordable and accessible quality services for a defined Essential Services Package along with other selected services.

The UNICEF Bangladesh Health and Nutrition programme consists of three major areas of intervention: i) Child Survival, ii) Maternal Health, and iii) Maternal and Child Nutrition. The programme results focus on the reduction of high neonatal and maternal mortalities, mainstreaming nutrition into health and family planning services, lessening
childhood injuries, and addressing inequality in access to and utilisation of services. The programme includes components that are national in coverage (immunisation, Vitamin A, de-worming, control of iodine deficiency disorders, emergency obstetric care) and also a package of interventions implemented in selected districts.

The 2010-2011 Annual Management Plan (AMP) Priority Key Results for the Health and Nutrition programme include:

a) Health System Strengthening through the completion of investment case and starting the pay-for-performance pilot;
b) Providing community-based Essential Newborn Care through the increased capacity of service providers for management of sick newborns in Maternal, Neonatal and Child Survival Interventions (MNCS) districts, improved knowledge and practices on newborn care in households in the MNCS districts, and the initiation of Sepsis management study;
c) Mainstreaming of Nutrition in Health, for instance, anaemia prevention is strengthened as part of Health programmes.

**Resources Used:**
Total approved for 2010 as per CPD: **USD 13,899,927.22**
Total available for 2010 from all sources: RR **USD 2,944,300**; OR **USD 10,850,100**; Total: **USD 13,794,400**


**Result Achieved:**
The District Investment Case has been finalised in collaboration with the MoHFW, BRAC University and ROSA, and the results have been disseminated which will contribute to the design of the next Health, Nutrition and Population sector programme (2011-2016) currently under preparation. As chair of the Consortium of Development Partners supporting the sector, UNICEF is in a good position to leverage resources.

Efforts to accelerate progress towards MDGs 4 and 5 have continued and the MNCH Initiatives have been scaled up from 11 districts in 2009 to 19 in 2010, now covering about 38 million people living in poor performing and remote districts. The needs met for Emergency Obstetric Care has increased from 33 percent in 2009 to 43 percent in 2010 in 8 intervention districts, and about 540 Community Clinic Management Committees have been reactivated to support predominantly poor women in accessing MNCH care. A pay-for-performance pilot has been initiated in 12 public facilities to promote motivation of health staff. UNICEF support to the national EPI programme has continued to reduce inequities in child survival. Full immunisation coverage has increased from 75 per cent in 2009 to 79 in 2010, and the measles follow-up campaign conducted in January has reached 99 per cent of the targeted 20 million children aged 9-59 months. Using the Reach Every District (RED) approach, an additional 206,000 un-reached children were vaccinated in 15 previously poor performing districts, averting an estimated 32,000 infant deaths.

Community-IMCI and the Newborn Health programme has been scaled up to an additional 12 Upazilas in 5 hard-to-reach districts, providing an evidence-based MNCH service package through 3,500 trained community health volunteers. The proportion of sick children under five who received care from trained providers increased from 17 per cent to 37 per cent; newborns who received thermal care from 3 to 93 per cent, while bathing was delayed in 95 per cent compared to 11 per cent at baseline. The proportion of newborns that were breastfed within the first hour of birth increased from 60 to 96
per cent. Operational Research on community-based management of neonatal sepsis has been initiated in four Upazilas in three districts.

UNICEF is the lead partner in the MoHFW/DP task group on nutrition. The problem of malnutrition received increased attention by high-level GoB officials and DPs. An Action Plan for mainstreaming nutrition in the next HNP sector programme was developed and approved by the Minister of Health, providing an opportunity to scale up to national level nutrition actions. Increased focus on nutrition in the various MNCH initiatives supported by UNICEF produced good results on early initiation of breastfeeding. Progress in anaemia control was, however, moderate as only 43 per cent of pregnant women received iron/folate supplementation in 12 intervention districts.

Critical factors
Delays in procurement of supplies during the first 9 months of the year, due to the new GoB VAT regulation, severely affected programme implementation. Despite efforts made by community promoters, compliance in the use of nutritional supplements was less than expected and supply problems reduced impact.

There was also some delay in funding disbursements by the main donor.

Monitoring, studies and evaluations
Formative research on MNCH knowledge and practices among indigenous people in the hilly and the haor (marsh) regions contributed to effective C4D implementation. The preliminary survey findings on anaemia control in Chittagong Hill Tracts, however, revealed a 15 per cent reduction of anaemia in children aged 6-35 months and 23 per cent reduction in pregnant women in 17 sub-districts. Despite efforts made by community promoters, compliance was less than expected and supply problems reduced impact.

Key strategic partnerships
UNICEF continued to work closely with other UN agencies especially WHO, UNFPA, and WFP. UNICEF partnership with BRAC was further strengthened in MNCH, and new partnership was established with Alive and Thrive in nutrition. Collaboration with ICCDR,B was continued. UNICEF also continued to work closely with all 16 DPs supporting the sector.

Future Workplan:
- Scale up MNCH initiatives to 9 new deprived districts, to improve maternal, newborn and child survival, and reduce inequalities.
- Strengthen essential and sick newborn care in selected facilities.
- Strengthen anaemia control to reduce anaemia in pregnancy and low birth weight.
- Pilot an improved communication package, measure and monitor impact.
- Expand the cold chain in preparation for the introduction of a new vaccine.
- Disseminate the National Injury Prevention Strategy, and integrate injury prevention further into existing MNCH Initiatives.
- Launch a REACH approach to disaster risk reduction and reduction in malnutrition.

Title: Education

Purpose:
The UNICEF Bangladesh Education Programme aims at improving and expanding basic education provision so that it is equitable, accessible, effective, and relevant, and is delivered in a participatory, child-friendly and gender sensitive environment. The expected impact of the programme includes the improvement of children’s developmental readiness for school, the equitable spread of good quality primary education, the reduction of gender and other disparities, and strong partnerships to promote and ensure quality basic education for all children.

In 2010, UNICEF continued to work in partnership with Bangladesh Shishu Academy and the Ministry of Women and Children Affairs (MoWCA) for Early Learning for Child Development; with the Department of Primary Education in the Ministry of Primary and
Mass Education (MOPME) for Quality Education for All Children; with the Bureau of Non-formal Education within the MOPME for Basic Education For Hard to Reach; and with the GoB and the civil society for enhanced Emergency Response.

The 2010-2011 Annual Management Plan (AMP) Priority Key Results for Education programme include:

<table>
<thead>
<tr>
<th>Programme priority areas</th>
<th>Key AMP results</th>
<th>Contribution or deliverables by staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Operationalising Pre-primary Education policy framework</td>
<td>424,230 children complete 1 year of pre-school in 11 Convergence Districts (CD) and 95 per cent of graduates enrolled in grade one</td>
<td>Support counterparts for planning, implementation and monitoring for the opening of 9,281 new pre-school and continuation of 7,336 pre-schools</td>
</tr>
<tr>
<td>2. Rolling out of Better Health Better Education (BHBE)</td>
<td>1,423,500 children in 6,500 schools in 7 CDs have increased knowledge and practice better health and sanitation behaviours</td>
<td>Support counterparts for planning, materials development, implementation and monitoring of the BHBE training package</td>
</tr>
<tr>
<td>3. Improving quality of BEHTRUWC</td>
<td>116,150 working children (60 per cent girls) enrolled in 4,640 LCs and 65 per cent of them achieved cycle-wise competencies</td>
<td>Support to counterparts for planning, implementation, monitoring and reporting for continuation of the existing LCs</td>
</tr>
</tbody>
</table>

**Resources Used:**

Total approved for 2010 as per CPD: **USD 20,451,963.91**

Total available for 2010 from all sources: RR **USD 3,575,800**; OR **USD 16,971,500**;

Total: **USD 20,547,300**

List of donors: AusAID, Netherlands, Sida, CIDA, German Committee for UNICEF, United Kingdom Committee for UNICEF, Dutch Committee for UNICEF, French Committee for UNICEF, Consolidated Funds from UNICEF National Committees

**Results achieved**

100 per cent of PEDP-II identified disaster prone areas now have at least one trained frontline responder and 3,800 emergency education kits (supporting 95,000 children) pre-positioned to support schools after a disaster.

*Early Learning for Child Development Project (ELCDP):* A major milestone was achieved in 2010, as Pre-Primary Education (PPE) was included under the PEDP-II. Appropriate PPE package and teachers training has created access for 271,000 pre-primary students in 9,037 Government Primary Schools (GPS). UNICEF supported the formulation of the comprehensive Early Childhood Care and Development (ECCD) policy for children 0-8 years and the Early Learning and Development Standards (ELDS) that links services for young children to agreed standards. Draft curriculum on PPE has been prepared by the National Committee on Primary Education (NCTB) for PPE expansion.

Approximately 195,768 young children 3-5 years in 9 selected urban poor communities and three CHT districts participated in 8,056 Early Learning Centres (ELC) with the transition of 97 per cent enrolment into grade 1; 2,400 children (3-5 years) in Rohingya Refugee camps participated in school readiness programmes and are better prepared for grade 1.

*Quality Education for All Children (QEAC):* The new National Education Policy is awaiting final approval from the parliament, which aims at bringing all children under the umbrella of primary education, formal and non-formal, with the expansion of compulsory primary education up to age 14 (grade 8). As the chair of the donor consortium for
PEDP-II, COB influenced policy in the final year of the programme and design phase Prog3 (2011-2016). Under PEDP-II, 8.8 million children across 39,254 schools have benefited from quality improvements to schools through School-Level Improvement Plans (SLIPs). Over 30,000 teachers trained on PEDP-II were able to provide strengthened quality teaching to 1.6 million students. Approximately 1.46 million children in 6,500 primary schools are benefiting from the pilot of BHBE in their schools. In 15 UNICEF CDs, all secondary school students received LSBE with the support of two trained teachers in each school. Over 900,000 students, parents and community members across 481 Upazilas participating in IPT presentation have increased knowledge on the importance of completing primary school. Thanks to UNICEF-UNHCR support, 90 per cent of children 4-12 years in two Rohingya Refugee camps currently attend ECD, formal or non-formal primary education.

Basic Education for Hard to Reach Urban Working Children (BEHTRUWC): 80,600 of 116,500 children (10-14 years) have completed the 40-month course with functional literacy and enhanced life skills; 47,985 learners of the first batch achieved 65 per cent of learning competencies, confirming the rapid assessment findings on the relationship between the learners' achievements and teaching quality. Over 4,000 teachers and supervisors have improved child-friendly interactive teaching skills through training. In the framework of joint agreement with ILO, 1,000 learners were trained on skills development. Incentive schemes were initiated, which include increased salaries and final incentives to improve teacher retention and school feeding. With birth certification in hand, 65% of the learners are now better equipped to claim their rights; 6,530 Centre Management Committee (CMC) members better understand difficulties faced by working children and support awareness initiatives.

Monitoring, studies and evaluations
- ELC/DP Unit Cost Study and Overview Report;
- BEHTRUWC study on Benefits, Sustainability and Costs; Rapid Assessment of Stage 1 Graduates; Basic Determinants of Dropout study; Child Domestic Workers in Barisal: Need Analysis;
- PEDP-II School Census Data Validation; SLIP Assessment.

Key strategic partnerships
UNICEF acted as the chair of the PEDP-II Donor Consortium with 11 donors and ECD Network with more than 200 NGOs and academic institutions. The BEHTRUWC programme collaborates with 20 partner NGOs, with WFP for Tiffin and with ILO for skills training. UNICEF collaborates with UNHCR in Rohingya Refugee camps, and Save the Children Alliance and ActionAid in the Emergency Cluster.

Future Workplan:
- Priority to the transition to Prog3 ensuring equity, inclusion of PPE and NFE from a gender perspective
- Scaling-up of BHBE and LSBE to all primary and secondary schools for improved equity and equality
- Use of the Global Out-of-School Study findings will play an important part of Prog3 programming and planning for the next country programme
- Supporting smooth finish to BEHTRUWC and potential scale-up.

Title: Water and environmental sanitation

Purpose:
The UNICEF Bangladesh WES programme aims to improve the standard of hygiene, sanitation and safe water practices and behaviours on a sustainable basis in programme areas covering approximately 20 million people, contributing to national sanitation and safe water targets. UNICEF is working closely with the GoB to achieve these targets.
through the SHEWA-B, UNICEF’s flagship WASH programme in Bangladesh built upon a series of community-based interventions for hygiene behaviour change on a large scale. UNICEF aims that programme communities (including schools), particularly the poor, will have knowledge, skills, motivation and organisation to adopt hygiene, sanitation, and safe water practices; access to hygienic latrines for environmental sanitation; and year-round access to adequate quantities of safe water. Programme experiences are expected to positively influence relevant national strategies and policies.

The 2010-2011 Annual Management Plan (AMP) Priority Key Results for the Water and Environmental Sanitation Programme include: (i) Social Mobilisation for Hygiene, Sanitation and Water Supply; (ii) Water and Environmental Sanitation Technology Development; (iii) Sector Development and Policy Support; and (iv) Emergency Water and Sanitation.

The main implementing partner is the Department of Public Health Engineering (DPHE), under the Ministry of Local Government, Rural Development and Cooperatives. The Integrated Community Development Project (ICDP) of the CHT Development Board, under the Ministry of CHT Affairs, is also a key partner to implement the WES programme interventions in selected paras (household clusters) in the CHT districts.

The WES programme contributes to the survival and development rights of vulnerable groups within an environmentally sustainable framework. It is aligned with the PRSP, which contains sections dedicated to children’s rights and water and sanitation, and envisages that children, particularly those in poor urban and remote rural settings, will have improved hygiene knowledge and practices, and access to safe water and sanitation. The WES programme’s activities and results are also aligned with MDG 7 targets.

**Resources Used:**
Total approved for 2010 as per CPD: **USD 15,681,778.34**
Total available for 2010 from all sources: **RR USD 3,598,900**; **OR USD 11,633,000**;
Total: **USD 15,231,900**
List of donors: DFID, German Committee for UNICEF

**Results achieved**
The SHEWA-B project has intensified activities in current 19 project districts with a population of 20 million, including 1.1 million urban poor, while dropping the second phase intended to reach 10 million additional people in 12 districts, prompted by the 2009 mid-line assessment undertaken by ICDDR,B, which demonstrated initial slow uptake of hygiene behavioural change and the need for further efforts. The project strategies and approaches were accordingly revised and the project’s management was positioned higher at the Ministry level. The roles of the Department of Public Health Engineering district engineers and local Government institutions were strengthened with direct channeling of funds. The sanitation and hygiene promotion strategy has been revamped inviting a shift in focus to mothers of under-five children and primary school students, and the focus area has been reduced to address the most critical WASH behaviours. Phase 1 of the new strategy was rolled out in July and passed on to 10,000 Community Hygiene Promoters (CHPs). New materials have been crafted to provide new tools for the CHPs and to stage mass communication campaigns to reach 10 million additional people.

The communities constructed or repaired a total of 173,926 latrines (173,780 in rural areas) to benefit 1.6 million people and 146 community latrines in urban slums for 6,300 people, bringing the total cumulative number of improved latrines to 1.3 million, increasing coverage to 90 per cent (for rural areas, 72 per cent individual improved latrines and 18 per cent shared (Field Agency Reports, 2010); and for urban, 79 per cent (individual and shared)). It was also found that rural open defecation reduced to 5 per
cent and urban to 6.8 per cent. A total of 2,021 new water points have been constructed benefiting 226,600 people, of which 1,410 in rural areas for 152,500 people, 25 per cent for the hard core poor, and 621 in urban areas benefiting 74,100 poor and hardcore poor, bringing the total to 13,000 water points for 1.3 million people.

The school component has reached 8,800 rural schools in 68 Upazilas with intense hygiene education benefiting 2,337,500 students. WatSan facilities have been completed in 136 schools (126 new construction, 10 repair) benefiting 37,400 children. Construction has also started in 68 secondary schools.

The draft National Standards for WASH in Schools has been prepared and technical advice was provided on a design of WASH facilities in primary and secondary schools that is gender-sensitive, child-friendly and accessible to physically challenged children. These efforts have enabled the mainstreaming WASH in Schools into the national education system. The Global Handwashing Day campaign, UNICEF co-leading a partnership of 13 institutions, has reached 14.5 million students in 81,000 primary, secondary, and religious schools (madrasas). UNICEF support to the National Sanitation Month in October has focused on equity and disability, with all stakeholders directed to address the needs in geographically isolated areas as part of the country’s effort to achieve 100 per cent sanitation by 2013.

National capacity building has continued through building the skills of 3,700 central and local Government and NGO staff, community workers and other key stakeholders. HACT skills training availed by 138 district engineers and LGI staff has enhanced the project’s capacity to deliver and strengthen accountability and ensure sustainability of the improvements started by the project.

Key strategic partnerships
UNICEF and UNDP have reached a partnership agreement on urban slum development in two towns. UNICEF has led key thematic sub-groups on sanitation and hygiene promotion, WASH in schools and disaster management feeding into the revised Sector Development Plan. The SHEWA-B database and the submission and approval of the geocoding regulation of water points initiated by the project serve as key inputs to the sector MIS. Collaboration with WHO, FAO and WSP led to a key arsenic advocacy document launched on World Water Day, which has been instrumental in obtaining the GoB’s commitment to establish an arsenic mitigation fund of USD 200 million. The GoB has endorsed the Sanitation and Water for All principles.

UNICEF has co-led WASH Cluster coordination to address interventions in cyclone Aila-affected areas; the findings from its assessment on outstanding WASH needs have been fed into a joint UN assessment. Under a multi-sectoral joint UN response, USD 1 million from DFID has enabled UNICEF to support 70,000 people.

Future Workplan:
• Work towards an enforceable agreement and mechanism for improved coordination, collaboration and commitment from government counterpart in SHEWA-B project to achieve targets in a sustainable manner. Efforts to build capacity at local level for sanitation and hygiene and water quality will be strengthened to ensure the project’s efforts continue and a social norms change in the communities will be achieved
• Continued focus on sanitation and hygiene behaviour change, targeting about 20 million people with intensive, interpersonal behaviour change
• Expand the reach of the hygiene promotion component to include the entire country through continuation of the project-supported mass media campaign kicked off at the end of 2010. Improve the hygiene behavior of an additional 10 million people within the context of the SHEWA-B project
• Sustained monitoring and evaluation activities with the reinstatement of external monitoring activities for the rural component and continuing process monitoring of the urban component. Complete the project’s overall impact assessment in 2011

Title: Child protection
Purpose:
The UNICEF Bangladesh Child Protection Programme has implemented for the second year the revised programmatic approach decided through the MTR exercise, which introduced a shift from issue/group-focused service delivery to a comprehensive child protection system in line with the new Child Protection Strategy adopted in 2008. The overall goal of the programme was to ensure a protective environment for all children by establishing a national protection system and by promoting social change in support of children’s rights through the adoption of child rights based policies, strategies and legislation, as well as a change of harmful societal attitudes, strengthened capacity of the GoB and the civil society, and the establishment of protection mechanisms and provision of a minimum package of services.

The 2010-2011 Annual Management Plan (AMP) Priority Key Results for the Child Protection programme include:
1. Children are protected through more effective child rights based policies, and legislative and enforcement systems
2. Capacity of the Department of Social Service (DSS), Ministry of Social Welfare, is strengthened in the areas of child-related information gathering, analysis and dissemination; monitoring of social services; rules, regulation and policy development related to alternative care for children, counter-trafficking and social protection of children
3. Adolescents, their families and communities adopt practices to reduce child marriage, dowry and other forms of abuse, exploitation and violence against girls in selected districts.

Resources Used:
Total approved for 2010 as per CPD: **USD 7,853,946.17**
Total available for 2010 from all sources: **RR USD 3,786,300**; **OR USD 4,113,000**; **Total: USD 7,899,300**


Results achieved
The new Children Act 2010, harmonised with the UN CRC has been approved by the Ministry of Social Welfare and adopted by the cabinet in December 2010. The draft Children Policy has also been finalised by the GoB through a consultative process. In support of the new legislative changes, 1,500 professionals, including judges and magistrates have been authorised to practice under the Ministry of Law, Justice and Parliamentary Affairs and 42 children in conflict with law benefited from diversionary measures.

The MICS 2009 demonstrated that only 53 per cent of children (0-5 years) have a birth certificate. UNICEF supported the GoB to establish an online birth registration information system (Online BRIS), which has been rolled out in 725 registrar offices including three City Corporations.

UNICEF continued to strengthen capacity of partners to implement child friendly standards and measures. In total, 475 GoB and NGO social workers and police officers have been trained on proactive social work and child friendly interview. A total of 22,915 orphans and vulnerable children have been provided with a comprehensive package of social protection services in 6 City Corporations and 8 Upazilas in disaster prone rural areas.

UNICEF has played a crucial role in reactivating the sub-cluster on child protection in emergencies (CPIE) at central and 5 local levels. Eighty staff were capacitated through a CPIE training module developed by the training support group of the sub-cluster. A total
of 5,500 children have received psychosocial support through 12 mobile and 4 fixed child
friendly spaces (CFS), and 4 permanent resource centres in disaster prone areas.
A total of 104,500 adolescents (60 per cent girls) have been empowered through LSBE,
involvement in community services and sport for development practice. 59,402 mothers
and 33,291 fathers have participated in 1,379 community meetings resulting in 8,137
social interventions responding to cases of early marriage and reflecting social norm
changes towards children’s rights promotion. While chairing the cluster to harmonise
approaches, ensure C4D strategy implementation as well as the child policy component
related to adolescents, using the evidence gained from the project, has also been
influencing policy (as seen in the MoWCA decision to allocate resources from its revenue
budget to support youth clubs in 7 districts of the country).

Critical factors
A minimum package of services was modelled in order to use bottom-up evidence in
advocating for a reform in the child protection policy to move from a reactive and
institution based child protection system to proactive social work based on a continuum
of services. The buy-in of central level decision makers so far has been partial and
efforts are being strengthened to mobilize greater support at the central level of GoB as
well as promote appreciation of achievements realized at the sub-national level.

Monitoring, studies and evaluations
In terms of monitoring, the District Resource Pool has been established and the
members comprising 355 GoB officials and secondary school teachers have been trained.

Key strategic partnerships
UNICEF has continued to support key stakeholders such as Department of Social
Services (DSS), Ministry of Social Welfare and Police HQ, Ministry of Home Affairs to
strengthen their capacity to implement child friendly standards and measures. In
partnership with DSS, a total of 375 government and NGO social workers completed the
two tier child-centred professional social work training module (Basic Social Service
Training and Professional Social Service Training) and practicum, strengthening their
knowledge, skills and behaviour while providing social protection services. Furthermore,
207 child peer educators trained 8,978 children on life skills.
A Joint child Labour Working Group, consisting of ILO, UNICEF and NGOs working on
child labour was formed to advocate for and support implementation of National Child
Labour Eradication Policy. UNICEF Bangladesh together with the GoB and ILO launched a
national communication campaign on the World Day against Child Labour to promote the
message that child labour is unacceptable among children aged under 14, and to ensure
that parents and employers guarantee the rights of working children aged 14 and above.

Future Workplan:
UNICEF will continue to support the GoB in revising the child related legislation to meet
the 2009 CRC Committee recommendations. The main focus will be the
operationalisation of the alternative measures, diversion schemes and law enforcement
for children in conflict with law, including an awareness raising campaign for
professionals and the general public, and replication of models of child protection
networks in the convergence districts.
• The Social Centre, including a 24-hour helpline and a mobile team, will be piloted in
  Dhaka. The Orphans and Vulnerable Children (OVC) social protection initiative will be
  extended to urban slums, using cash transfer as a preventative mechanism to
  mitigate the socio-economic vulnerability of families in partnership with the MoWCA.
• The establishment of a Child Protection Information Management System is also
  expected and the monitoring of alternative care will be launched.
• The national campaign against child labour launched jointly with the GoB and ILO will
  be accelerated.
• CPIE sub-cluster will be officially recognised and capacity strengthening of sub-cluster
  members will be completed.
• The empowerment of adolescents’ model will be scaled up nationwide and the modules related to child development will be introduced to communities to stimulate debate, reduce acceptance of child labour, corporal punishment and early marriage while children aged 0-18 are recognised as rights holders as per the CRC.
• Partnership with the Ministry of Youth and Sports will be assessed to explore further effective strategy for adolescent and youth participation through civil service to community and sports for development.

**Title:** Policy, advocacy and partnerships for children’s rights

**Purpose:**
The UNICEF Bangladesh Policy, Advocacy and Partnership for Children’s Rights Programme is designated to advocate for the rights of all children, aiming to ensure that children are at the centre of national instruments and plans. The programme generates the knowledge of children and women, so that effective advocacy can take place for policy dialogue, and build the capacities of relevant institutions to help monitor the implementation of the CRC. Through communication interventions, the programme will inform and sensitise all levels of society on children’s rights. The programme contributes to monitoring the progress towards MDGs, and CPD/CPAP results, and overall visibility, supporting fundraising and fostering better relationship with donors.


**Resources Used:**

Total approved for 2010 as per CPD: **USD 7,287,396.73**
Total available for 2010 from all sources: RR **USD 7,010,200; OR USD 338,500;**
Total: **USD 7,348,700**
List of donors: European Commission/EU, DFID, AusAID, German Committee for UNICEF, United Arab Emirates, US Fund for UNICEF

**Results achieved**
Under the Planning for Children and Women programme, a progress review of the National Plan of Action for Children was made by the MoWCA with UNICEF support. The key recommendation of the review was to align the children’s rights agenda with the National Perspective Plan 2010-2021 and the Five-Year Plan 2011-2015. The GoB’s capacity to methodically coordinate, monitor and report on the child rights status and to address the observations and recommendations of the CRC committee has been enhanced through a comprehensive CRC monitoring framework prepared with UNICEF technical assistance. The child rights focal points mechanism has been further strengthened through the adoption of a common reporting format for GoB and civil society organisations under the leadership of the MoWCA.

National policy makers and programme planners from the GoB, development partners and civil society were provided with findings of MICS 2009 to feed into the Sixth National Five Year Plan under the Monitoring Situation of Children and Women (MSCW) initiative. Separate divisional MICS reports were prepared analysing the geographical disparities and launched at sub-national levels. In order to address equity issues for the achievement of MDGs, specific policy papers on investing in children for poverty reduction, geographical targeting to address disparities, and urban inequality were developed based on the MICS results and findings of the child poverty study, and
disseminated widely. Field surveys on the Child Risk Measure have been completed and the reports are being prepared to provide the status of children and women in the low performing areas. Special studies have been conducted on the situation of children and women in the tea gardens and Urdu speaking camps. A fundraising strategy for the country office has been developed and an institutional assessment of BCO’s leveraging approach conducted. In all, 130 programme managers from GoB and UN agencies were enabled to use BDInfo for data analysis, presentation and dissemination.

The Communication and Information Project has strengthened efforts by the media to advocate for children and women’s rights and is encouraging greater participation by children.

UNICEF Bangladesh supported 957 children (30 per cent from vulnerable groups) to participate in the media. Children interviewed key policy makers during a monthly programme aired on the national television, BTV. An analysis of the first episodes showed that out of a total of 63 commitments made by the policy makers, 44 had been followed-up.

Based on the findings of a study on how children are being reported in the news, a training module and a handbook on ethical reporting on children have been developed and disseminated among journalists. A total of 14 media houses and 312 media professionals are now aware of ethical principles for reporting on children. In addition, 281 media professionals have enhanced their knowledge on various children’s issues through a series of orientations.

The number of news on children in print media increased by 57 percent compared to the same period in 2009 as a total of 13,691 stories related to children were published in national dailies from January to October 2010.

In the broadcast media, UNICEF supported the national TV and radio to produce quality programmes on children and ensured that their broadcasting occurred at or close to prime time.

With UNICEF support, 22 news reports or documentaries were produced internationally; 20 Press Releases were issued, generating a total of 401 stories.

A total of 2.3 million people were reached at community level with messages on safe practices for children, in cooperation with the Department of Mass Communication, a GoB agency.

Donors and the general public have been kept informed about UNICEF programmes in Bangladesh through the publication of three newsletters and regular updates of the UNICEF Bangladesh website. The number of visitors to the website has increased by 37 per cent in 2010 compared to 2009. Three visits of UNICEF National Committees were also organized.

Critical factors or constraints affecting performance
The concept of child participation has been gaining new ground but further efforts are needed to enhance knowledge and understanding among UNICEF partners.

Key strategic partnerships
The Ministry of Information remains UNICEF’s central partner for communication and information while UNICEF continued to play an active role in the UN Communication and Advocacy Group.

Future Workplan:
• UNICEF will strengthen its current work for the promotion of child participation in broadcast media, looking at the possibility of introducing news produced by children in TV news programme. Building on the work already achieved on ethical reporting on children, BCO will partner with universities that have journalism courses to seek introducing a module on reporting on children’s issues in their curriculum.
• A number of activities are being planned under the global partnership between UNICEF and ICC around HIV and AIDS prevention during the Cricket World Cup.
4. OPERATIONS & MANAGEMENT

4.1 Governance & Systems

4.1.1 Governance Structure:
In all, 9 CMT, 8 PMT, 4 JCC and 4 All Staff meetings were organised in 2010. All the major initiatives for improving operations and programmes were taken in these forums and shared with the staff.
The office continued the weekly management meetings with the Representative, Deputy Representative, Chief of Operations, HR, Planning and Communication. The office also continued with the system of weekly standing meetings attended by all section chiefs of programmes and operations and the Chair of the Staff Association for sharing key information and reinforcing coordination among sections.
The Table of Authorities (TOA) and the Document Authorization Table (DAT) which were revised in May 2009 remained unchanged in 2010 with continuous reconciliation with ProMS to ensure effective management of authority levels. The TOA and DAT will be revised in January 2011 taking into account the recent staff changes and the requirements of PROMS 9 and the introduction of SAP HR module.
The new travel procedure allowing payment of 100 per cent DSA and terminal expenses prior to commencement of travel and requiring travellers to only submit claim if there is an itinerary deviation was introduced in BCO in January 2010. This simplification and time saving policy proved to be effective for field trips and international travels.
The new Contract Review Committee (CRC) procedure was also simplified in January. The limit of CRC was raised from USD 20,000 to USD 50,000, reducing considerably the number of CRC meetings hence expediting the process of contracting and procurement.

4.1.2 Strategic Risk Management:
The internal control specialist recruited in December 2009 supported the strengthening of the monitoring system of audit recommendations and facilitated the investigation process of allegations of fraud or mismanagement of resources. The new Enterprise Risk Management (ERM) system was introduced in the office, and the specialist supported the designing of a system to improve the reporting mechanism in case of a conflict of interest between NGOs and the GoB in signing project agreements. The guidelines for managing gifts and souvenirs were enhanced to improve risk management process.
In December 2009, EMOPS visited UNICEF Bangladesh to assist the office in harmonising existing emergency risk management tools into the Early Warning Early Action (EWEA) system, a consolidated planning tool, which is being updated by all concerned sections on a regular basis. As part of the EWEA system, several initiatives have been taken, for instance, ensuring all programme and operation and management sections have developed preparedness plans on emergency response under the AWP. The preparedness priorities were identified in consultation with the GoB, other counterparts and internal coordination process. Gender in emergency has been a key consideration, while C4D in emergency has been an important area for coordination among the sectors. UNICEF Bangladesh is continuing to work on climate change adaptation and disaster risk reduction interventions.
In August 2010, the Chief of Operations/ERM focal point for the office and internal control specialist attended an ERM training organised by the Office of Internal Audit (OIA) in Kathmandu. In November, an ERM-RCSA workshop was organised, designed to assess the importance and effectiveness of the ERM process and to identify all categories of risks related to the office’s objectives and planned results in a systematic, participatory and integrated manner; and to determine the level of all risks from likelihood and impact perspective and decide on the response measures to better manage the residual risks. The Action Plan for improving ERM process in the office, a Risk and Control Library and a Risk Profile were completed.
In January, travel processes for international and domestic travel were reviewed in line with changed corporate policies and revised for improved efficiency.
4.1.3 Evaluation:
Efforts to streamline the annual Integrated Monitoring and Evaluation Plan (IMEP) continued in 2010, resulting in a much smaller and manageable IMEP at the start of the year. Some activities were added on during the second half of the year. Among the planned evaluations was the landmark *Assessment of BCO’s Leveraging Approach* which generated several practical recommendations for improving the leveraging capacity and approaches. They have been endorsed by the CMT and the management response has been prepared. The preparations are also underway to conduct two thematic evaluations in education and child protection to feed into the development of the new Country Programme.

The office capacity to conduct quality evaluations has been strengthened in 2010. In order to ensure greater objectivity and impartiality of evaluations, the management of key evaluations has been de-linked from programmes and led by the PME section. A system to follow up on the implementation of findings and recommendations of evaluations has been developed and will be implemented in 2011 as part of the knowledge management system.

In terms of in-country evaluation capacity development, UNICEF is collaborating with BRAC University to integrate evaluation training in academic institutions. In 2010, about 20 programme managers from the public and private sectors received knowledge and skills to conduct and manage evaluation.

4.1.4 Information Technology and Communication:
The ICT activities focused on three main areas: improve services provided to the country programme; enhance and upgrade the infrastructure; and provide support to ICT4D related activities (ICT innovations for children).

The Service Level Agreement (SLA) for the provision of ICT services has been implemented since January 2010 to improve customer focused ICT services. New procedures have been introduced for the helpdesk function, and the number of helpdesk calls in 2010 has already exceeded the calls registered in previous years but with increased performance and better response time.

For the purpose of documenting and information sharing, a searchable ICT knowledge base has been established for easier access to information. The increased need to identify an improved content management system in addition to identifying additional mechanisms for adding more ICT related contents, training materials and articles targeting the end user was observed.

In order to overcome network outages and ensure uninterrupted ICT services, a new LAN infrastructure integrated with the new PABX was installed, simplifying the management of network resources through the Unified Communication platform allowing future integration of voice, video and data. A new project has also been implemented allowing UNICEF staff members in the field to be connected using enhanced and reliable data connectivity.

The ICT section has also provided support to programme activities in terms of designing and reviewing the specification of ICT related Request For Proposals (RFPs) and consultancy contracts. The Section has been fully involved in the design and implementation of ICT Training for Convergence Districts (CDs) in collaboration with Field Operations and PM&E Sections, with a view to improving ICT skills of GoB officials in anticipation of introducing future MIS tools in the CDs.

During the mid-year review, the need to look into the possibilities to broaden the scope of ICT involvement in related components within programme activities was discussed. Compared to the traditional role of ICT in UNICEF, this is an innovative use of ICT staff capacity to maximise the use of existing resources for technological innovation for children. A round table discussion was also held with the participation of all programme sections.

4.2 Fin Res & Stewardship
4.2.1 Fund-raising & Donor Relations:
UNICEF Bangladesh submitted 45 donor reports in 2010 of which 44 (or 98 per cent) were finalised and sent on time.

A new Fundraising Strategy was developed to steer new fundraising efforts for the next Country Programme (2012-2016), and this proactive approach is expected to enhance the BCO fundraising efforts during 2011 by putting a robust fundraising mechanism in place.

There is a standing agenda to monitor utilisation in the CMT meetings. BCO was successful in mobilising funds in terms of its OR ceiling. There was no appeal for emergency response, yet as a Joint UN initiative, BCO secured support from the DFID to provide assistance to the people affected by the Hurricane Aila in the WASH and Nutrition sectors.

In terms of partnerships, Republic of Korea became a new donor in 2010 through its local International Cooperation Agency (KOICA).

4.2.2 Management of Financial and Other Assets:
UNICEF Bangladesh has made direct cash transfers (DCT) of USD 32 million to the GoB and NGO partners under the HACT mechanism. The table below highlights how the HACT/FACE procedure has promoted higher delivery of the BCO Country Programme.

<table>
<thead>
<tr>
<th>Year</th>
<th>DCT Disbursement in USD</th>
<th>Increase Year on Baseline</th>
<th>Year Increase Baseline</th>
<th>Mechanism</th>
</tr>
</thead>
<tbody>
<tr>
<td>2007</td>
<td>17 million</td>
<td>Baseline (100%) Baseline (100%)</td>
<td>FACE</td>
<td></td>
</tr>
<tr>
<td>2008</td>
<td>33 million</td>
<td>194% 94%</td>
<td>FACE</td>
<td></td>
</tr>
<tr>
<td>2009</td>
<td>43 million</td>
<td>253% 59%</td>
<td>FACE</td>
<td></td>
</tr>
<tr>
<td>2010</td>
<td>40 million</td>
<td>235% -18%</td>
<td>FACE</td>
<td></td>
</tr>
</tbody>
</table>

BCO disbursed USD 8 million in DCTs during December, or 20% of the annual volume of DCTs for 2010. In Q4, BCO advanced 15 million, or 37% of the total DCTs advanced during the year, which exceeds the global threshold of 33%. On a more positive note, BCO reduced overall DCT outstanding to USD 19 million at December-end from the January opening balance of USD 22 million. A noteworthy achievement is the management of over-due DCT balance, as the office for the first time has been successful in attaining 0% ‘over 6 months’ DCT balance at December-end. The management was keen to monitor these DCTs emphasising continuous liquidation from programmes.

BCO has achieved major milestones this year in terms of HACT micro-assessment and assurance activities. An audit firm is currently assessing 72 NGO partners. As the micro-assessment for GoB IPs will be piloted for the first time in Bangladesh, ERD and the ExCom Agencies will initially assess 3 common Ministries (Ministry of Health and Family Planning, Ministry of Women and Children Affairs and Ministry of Local Government and Rural Development Cooperative). To achieve the first step towards assurance activities, BCO has engaged 2 audit firms for spot check of GoB and NGO partners and a standard reporting format was prepared for this exercise.

The OBO management of USD 5.3 million is a year-round exercise and as of mid-December 2010 BCO had used USD 4.5 million, with USD 0.8 million (15 per cent) balance remaining to be liquidated. During 2010, BCO purchased local currency
equivalent to USD 56 million through DFAM Treasury, with the related value addition in terms of UNICEF savings almost USD 200,000.

4.2.3 Supply:
The Annual Supply and Contract Plans were shared with the Regional Office in March, and regularly reviewed at CMTs and PMTs. The total inputs are USD 16 million for procurement of supplies/institutional contracts, USD 16 million for PCAs, and USD 92 million for procurement services including carry-over. High quality of supply input was maintained throughout the year, as confirmed by field supply monitoring visits to 23 districts during which staff were also oriented on end-user monitoring. Warehouse staff from EPI and DPHE were trained on inventory management.

Local orders above USD 3,000 were generally inspected. To mitigate some delays, a market survey of suppliers and service providers is being conducted in addition to the establishment of 113 LTAs for Supplies and 25 for Services. Pharmaceuticals have been procured in-country for other COs. The Supply Division provided timely support, and offshore and direct orders were delivered on time. There has been no stock-out of vaccines and all Vaccine Arrival Reports (VARs) are in place.

The importation of pharmaceuticals into the country is prohibited, and the VAT exemption of locally procured pharmaceuticals continued to be a challenge, which resulted in the execution of 2009 and placement of 2010 orders only in the last quarter. Extensive efforts are needed to obtain the VAT refund of USD 1,083,519 for orders executed over the last few years.

There is also good collaboration with WFP whereby UNICEF is pre-positioning emergency supplies at two WFP warehouses on a cost-sharing basis. BCO sent Emergency Education and Recreation Kits to Pakistan for the floods victims from its own pre-positioned supplies.

Integration between the supply-programme-supplier was further enhanced during the year leading to improved efficiency and effective of Supply Operations. This included, but was not limited to, joint review of first draft of Standard Operating Procedures for Supply and Contracting; participation of the S&P in monthly programme section and programme management team meetings; issuance of BCO standards on Supply and Procurement Assistance as an outcome of Programme-Supply retreat; appointment and training of focal points on monitoring reports; enhanced information sharing through posting on websites; and organisation of UNICEF-Supplier-Service Provider Forum.

4.3 Human Resource Capacity:

### Staffing:

<table>
<thead>
<tr>
<th></th>
<th>IP</th>
<th>NO</th>
<th>GS (including 9 drivers)</th>
<th>TA (NO and GS)</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number</td>
<td>30</td>
<td>82</td>
<td>61</td>
<td>25</td>
<td>198 (FT 183 and TA 25)</td>
</tr>
<tr>
<td>Female (%)</td>
<td>66</td>
<td>43</td>
<td>48</td>
<td>48</td>
<td>47</td>
</tr>
</tbody>
</table>

### Recruitment:

<table>
<thead>
<tr>
<th></th>
<th>IP</th>
<th>NO</th>
<th>GS</th>
<th>TA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number</td>
<td>6</td>
<td>10</td>
<td>8</td>
<td>IP 1, NO 4. GS 7</td>
</tr>
<tr>
<td>--------</td>
<td>-----</td>
<td>-----</td>
<td>----</td>
<td>-----------------</td>
</tr>
<tr>
<td>Average Time (weeks)</td>
<td>26</td>
<td>26</td>
<td>16</td>
<td>9</td>
</tr>
</tbody>
</table>

**Staff Development:** 14 corporate learning/training programmes were implemented in 2010. A total of 302 (148 male and 154 female) staff members participated. Other important learning events and the number of staff members that took part in 2010 include: Supervisory Skills Development Programme (24); Supervisory Skills Development Programme (face-to-face) (5); Workshop on local salary survey (2); Competency-based interviewing training (1); Enterprise Risk Management (ERM)/Risk Control Self-Assessment (RCSA) (2); Regional ICT workshop (3); Leadership Development Initiative (LDI) for 2010-11 (4); SAP-HR (6); Regional Workshop on PCR/IRs and ProMS 9.1 (4); Managing People at UNICEF (26); and E-learning on IPSAS (45). Staff briefing by two UNHQ Ombudspersons was also organised.

**Staff Mission:** Four professional staff members undertook temporary mission assignments to Haiti and Pakistan to provide emergency support.

**Staff Exchange:** One staff member in Child Protection went on an exchange visit to ROSA.

**Performance Management (PERs):** Staff PERs for 2009 and Part 2.1 for 2010 were completed on time. Staff orientation on e-PAS, regular monitoring and follow-up at the CMT level ensured timely completion.

**4.4 Other Issues**

**4.4.1 Management Areas Requiring Improvement:**

**Office changes:** One of the office floors in Dhaka was renovated, and the office in Cox’s Bazar moved for enhanced security measures. UNICEF provided new equipment to the field office in Jessore following the move of WFP office to Khulna, with whom UNICEF had had common premises. The Gulshan emergency office is fully operational and is effectively used. It also ensures the continuation of minimum office operations in case of emergency.

**Field support:** 16 old vehicles were donated to the Directorate of Government Transport Department to support the field monitoring activities of 14 convergence districts.

**Support to Regional Office:** BCO provided assistance to ROSA by hosting four regional workshops in Dhaka.

**4.4.2 Changes in AMP:**

The Operations priorities for the 2010-2011 Management Plan are:

i) Implement change management in 12 operations areas;
ii) Continue capacity building of counterparts in supply chain management;
iii) Ensure secured office premises;
iv) Implement service oriented approach with enhanced ICT infrastructure.

Significant progress has been made in all four areas in 2010, and with a view to further improvement in 2011, UNICEF Bangladesh will continue to work on these areas and also new priorities that may be introduced during the preparations of the new CPD and CPMP.

**5. STUDIES, SURVEYS, EVALUATIONS & PUBLICATIONS**
5.1 List of Studies, Surveys & Evaluations:

1. Avian and Pandemic Influenza KAP Survey 2010
2. Micronutrient Survey: Looking at IDD/USI, Urinary Iodine Excretion, Serum Retinol and Anaemia to Establish Baseline and/or Assess Effectiveness of the Micronutrient Supplements
4. Review of the National Plan of Action for Children 2005-2010 to Assess Progress of Implementation
5. End of Project Evaluation of the Community-Based Child Protection
6. Evaluation of the Pilot Pro-active Social Work ToT and Training in Selected Areas of Dhaka and Barisal in the Children at Risk Project
7. Child Risk Measure (CRM) Survey to Establish Baselines in Convergence Districts
8. End-line study of Empowerment of Adolescent Project to Assess Impact of the Interventions
9. Assessment of UNICEF Bangladesh Approach to Leveraging

5.2 List of Other Publications

1. Understanding Urban Inequalities in Bangladesh: A Prerequisite for Achieving Vision 2021
2. Towards an Arsenic Safe Environment
3. National Plan of Action on Infant and Young Child Feeding (IYCF)
4. A Case for Geographical Targeting of Basic Social Services to Mitigate Inequalities in Bangladesh
5. Investing in Vulnerable Children: Mitigating Socio-Economic Inequalities to Accelerate Poverty Reduction
6. National Communication Framework and Plan on IYCF

6. INNOVATION & LESSONS LEARNED:

**Title:** Building equity for OVCs: Social protection initiative “Amader Shishu” (Our Children)

**Contact Person:** Rose-Anne Papavero, Chief, Child Protection Programme, UNICEF Bangladesh (rapapavero@unicef.org)

**Abstract:**

UNICEF has been supporting the Ministry of Social Welfare to provide cash transfers to the targeted 2,058 orphans and vulnerable children (OVCs) in the seven Upazilas affected by the 2007 Cyclone Sidr.

Every child has received a monthly support of 1,500 BDT (or USD 20) for 18 months on the proviso that he/she regularly attends school, and is not subjected to early marriage or child labour. A sample survey conducted among orphan children and their caregivers revealed that most families had utilised the cash transfers mainly for the following areas: expenses for children; income generating activities; or savings for future financial security of the children.

The lessons learnt from the initiative are that well-trained social workers can effectively advance child-sensitive social protection; and cash transfer programmes are a valuable contribution to the alleviation of poverty, empowerment of vulnerable families, and can encourage family/community-based care that promotes positive outcomes for children.
Innovation or Lessons Learned:
The new social protection initiative Amader Shishu (Our Children) was developed jointly with the GoB to pilot a new child-sensitive social protection scheme. To ensure its sustainability, the key strategies for the implementation of the project included: institutional strengthening of GoB social workers; promoting engagement of GoB officials and their administrative structures and community members including their leaders in the selection and follow-up of the beneficiaries; and using cash transfer as a tool to empower and strengthen the social protection of OVCs.

In Bangladesh, institutional care is the prevailing approach for OVCs, and there is less knowledge of and reliance on child-centred proactive methods. To help fill this gap, UNICEF provided support to train the GoB social workers, who became the key actors in promoting child-sensitive social protection. The engagement of local GoB officials and community members including their leaders, and using a bottom-up approach in the various stages of implementation, in particular in the selection of OVCs, was empowering. The approach promoted decentralisation. As a result, strong local GoB and community ownership was generated. Importantly, a transparent and accountable selection process implemented by the communities ensured effective targeting of the most vulnerable as the beneficiaries. The provision of cash support (totalling 27,000 BDT, or USD 390 over a period of 18 months was innovative and its responsible disbursement and utilisation proved the initial critics wrong along with their predictions of a possible misappropriation of funds by the caregivers.

Sustained advocacy targeted to higher governmental levels would have ensured their more active support for and engagement in project monitoring and reporting.

Potential Application:
This new approach will be scaled up in other rural disaster prone areas, mainly around the coastal belt of Bangladesh, including areas still affected by Cyclone Aila of 2009, with plans to replicate it further to ensure equity through reaching the OVCs in the urban slums starting from Dhaka in partnership with the Ministry of Women and Children Affairs who have expressed strong interest in the project.

Urbanisation and its consequences on children, such as the increased prevalence of child labour, are alarming. Urban slums are reported to have the highest school drop-out rates in both primary and secondary schools and the highest prevalence of child labour (MICS 2009). This project will be adapted for implementation in urban slums, to target OVCs and in particular working children so that cash transfers will be used as a preventative mechanism in improving socio-economic resilience, reducing vulnerabilities and empowering families to better take care of their children and as a result prevent children from being at risk of exploitation such as child labour, violence and abuse. This initiative has been undertaken with a view to pilot a new social protection scheme for Bangladesh. The on-going monitoring and documentation of results and lessons learned provided by action research will contribute to evidence based advocacy to the GoB for adoption as the new child sensitive social protection scheme.

Further UNICEF efforts include Mitigating Socio-economic Inequalities to Accelerate Poverty Reduction: Investing in Vulnerable Children (http://www.unicef.org/bangladesh/knowledgecentre_6442.htm), a paper developed by UNICEF which outlines a plan for investing in vulnerable children, which states that it would require only 0.35 per cent of the national budget to substantially mitigate the inter-generational poverty cycle by targeting 4 million hard-core poor children over a period of 10 years. An assessment was made of the financial feasibility of scaling up three ongoing UNICEF supported projects. The paper proposes that the GoB scale up and invest in such projects to mitigate the widening of socio-economic inequities and promote poverty reduction.
**Issue/Background:**
Bangladesh is a disaster-prone country with natural disasters occurring almost every year. The most disadvantaged, such as Orphans and Vulnerable Children are often the most affected. In providing care and protection to the OVCs, both governmental and civil society organisations rely on the provision of institutional care, rather than alternative family-based care programmes to prevent children from being separated from their families, or providing direct family support services.

Children constitute 45 per cent of the total population, and 46 per cent of them live below the upper poverty line while one-quarter live in extreme poverty.

**Strategy and Implementation:**
Effective targeting of vulnerable groups was ensured through a transparent selection process based on pre-determined selection criteria, some of which included the age of the child, care givers’ status, economic status, whether the household was female headed, and if the child had disabilities. The selection process was conducted using a bottom-up and participatory approach where the initial list of beneficiaries was shared with the community for feedback. The final approval was then granted by the Upazila Committee comprised of selected community leaders and the GoB officials. UNICEF provided support to capacity building of GoB social workers with a view to promoting proactive and child centred approach.

Cash support as an empowerment tool for families to improve household level resilience proved to be an important strategy. The MSW determined an amount of 1,500 BDT (or USD 20), equal to the amount needed per child per month in a GoB-run institution or orphanage, as a fair and justifiable subsidy towards the care of OVCs. This cost-equation also helped in advocating the programme’s justifiability to the GoB on the grounds of affordability. The caregivers were provided briefing on the expectations and their responsibilities at the start of the cash transfers and regular follow-up monitoring of their compliance was organised.

**Progress and Results:**
To date, caregivers of 2,058 OVCs (973 girls and 1,085 boys) have received 18 months of cash support. All 1,675 children of school-going age are enrolled in schools from grade 1 to 11. An Action Research conducted among randomly selected 290 orphans and 129 households indicated that the families have been using the cash support mainly for: income generating activities (51.5 per cent); to fulfil the basic needs of children (22.7 per cent); and for savings (22.7 per cent). Additionally, many families have started to use the financial benefits reaped from income generating activities to provide for the basic needs of children in the family, including orphans.

Capacity building of the GoB social workers although time-consuming was critical, as after being trained, they have become key actors in advancing child-sensitive social protection. Community mobilisation from the selection process of OVCs resulted in wide and diverse participation and ownership from the communities, including high level officials such as the Members of the Parliament.

Some limitations in the capacity of the implementation cell at the central level affected monitoring. Strengthening the cell’s capacity will enable the project’s outcomes to be analysed and findings used for its scale-up to the national level.

**Next Steps:**
Following the completion of 18 months of cash support extended to all selected 2,058 OVCs, case closure or extension of support for further 6 months will be determined based on the progress of individual OVCs monitored through the case management
Some of the criteria for determining ineligibility include: i) families with increased monthly income of more than 3,000 BDT (or USD 43); ii) child who has turned 18; iii) families who did not own land and lived close to embankments, now owning land and living outside the embankment with increased income; iv) where instances of reduced vulnerability are observed and documented through case management, and v) where the community members agree that there has been an improvement in the situation of families. Other non-monetary forms of support will be continued including follow-up visits by social workers and referral mechanisms. This will be a continuous process with needs-based adaptations. Following the 18 months of cash provisions, it is expected that for at least 50 per cent of the OVCs, the discontinuation of cash support will not affect continued access to basic services and protection against abuse and exploitation. The case closure of some OVCs will allow the extension of this project to newly selected OVC beneficiaries in the targeted communities.

The project is also planned to be tested in other disaster prone areas and urban slums, for which the current implementation guideline is under review. The guideline will also encompass revision in the strategies and modalities, reflecting on the challenges and constraints faced during this project phase. Major revision is proposed on the GoB cash transfer modality given that the issuance of cheques by the GoB was found to be slower than anticipated. UNICEF is exploring collaboration opportunities with major mobile phone companies to use their technology to facilitate the cash transfer to the beneficiaries’ bank account.

Title: Arsenic Mitigation through Pay-for-Use Testing, Marking and Switching of Wells - Enhancing the Regulatory Role of Local Government to Ensure Safe Water Access

Contact Person: Yan Zheng, yzheng@unicef.org

Abstract:
Arsenic in well water can exhibit large spatial variability such that two neighbouring wells within ten meters may be safe or unsafe for drinking, which is why well switching is recognized and needs to be promoted as a useful approach.

In Meherpur Sadar, where a previous survey had indicated a mixture of safe and unsafe wells in most villages, UNICEF initiated a pay-for-use well screening programme. Local NGO workers were trained to test arsenic using field test kits, and conducted testing at the request of the villagers who paid about USD 0.30 per test (half of the fee was given to the tester, the other half was put in a revolving fund established at the upazila level). Households with heavily contaminated sources switched to other wells. In Uzalpur and Fotapur villages where 77 and 37 sources respectively were contaminated with >200ug/L arsenic, 100 per cent and 50 per cent of the households respectively switched to safe sources.

Innovation or Lessons Learned:
The local Government institutions can be empowered to play a critical role in ensuring arsenic safe water access, with support from local NGOs at a fraction of a cost by motivating owners of private tube wells to pay for the testing service.

Potential Application:
The potential application would be in the areas in Bangladesh where arsenic contamination of existing water sources is less than 40 per cent. [Source: National Arsenic Mitigation Information Center (NAMIC). Archive database for arsenic tube well screening of 4.94 million wells between 2000 and 2003]

Issue/Background:
Despite the significant progress made thus far, the MICS 2009 results showed that 20 million people are still exposed to unsafe level of arsenic in Bangladesh. The installation
of private wells is not regulated, and it is believed that millions of tube wells are being installed without adequate water testing.

There is an urgent need for testing services to be made available at affordable price in rural Bangladesh.

**Strategy and Implementation:**
The pay-for-use testing was made possible due to several key factors:
1. UNICEF has an on-going WASH programme that engages the GoB and local NGO participation, making it possible to carry out relevant activities as an add-on.
2. The request for testing and marking came from the local Government. UNICEF provided technical support, such as suggesting the pay-for-use method, and also monitored the effectiveness of switching.
3. Other donors are on board. At the field level, JICA provided volunteers for technical support and provided quality check for field testing through the distribution of arsenic standards. The Water and Sanitation Programme (WSP) of the World Bank supported experience-sharing from other areas of Bangladesh where JICA has been promoting pay-for-use testing.

The revolving fund for water and sanitation which has been set up at the local Government level is expected to contribute to such activities becoming a part of a long term programme.

**Progress and Results:**
The local Government leaders placed great emphasis on the number of tests completed. To date, roughly one third of all 33,357 water points have been screened and marked. In selected villages where a follow-up testing of drinking water was conducted, 50 per cent to 100 per cent of users were found to have switched to a safe water point. However, local Government leaders are yet to fully see the value of the testing results in terms of water resource planning.

**Next Steps:**
Promoting pay-for-use testing in UNICEF WASH programme areas where a mixture of arsenic safe and unsafe wells co-exists.

### 7. SOUTH-SOUTH COOPERATION:
Senior officials from the Government of Cambodia and Bangladesh exchanged visits to share experience on child protection systems and initiatives. Based on the Cambodia experience on alternative care, the Bangladesh Ministry of Social Welfare started a pilot on proactive social work training replicating the Basic Social Service Training (BSST) and Professional Social Service Training (PSST) modules of Cambodia. A special initiative *Amader Shishu* (Our Children) was launched to promote an alternative to institutional care to benefit selected OVCs and their families affected by Cyclone Sidr through cash transfers. A Cambodian delegation visited the project sites to acquire knowledge and feedback for adaptation in Cambodia.

At the World Urban Forum held in March, UNICEF supported the participation of GoB senior level officials to exchange different experiences in the urban sector. This south-to-south exchange provided the opportunity to bring higher on the GoB agenda the need to put in place a comprehensive urban development policy and remove barriers for more efficient and equitable delivery of basic water and sanitation services to the urban poor. A concrete upshot of this peer-to-peer exchange, the Local Consultative Group for Urban, composed of development partners and GoB is sponsoring the organisation of the Bangladesh Urban Forum in 2011. UNICEF has also followed up on this initial exchange with concrete action, working with a selected group of city mayors to support the development of local level planning incorporating slum dwellers.
Other visits by the GoB officials include a visit to Malaysia to learn about school improvement; and to China to learn about the census.

UNICEF Bangladesh also supported Pakistan by sending 1,200 pre-positioned emergency education kits within the first two weeks of the floods and natural disasters.