The Congo (the Republic of)

Executive Summary

The Multiple Indicator Cluster Survey (MICS) 5 conducted in 2015 showed that under-five mortality in the Congo dropped from 68 deaths per 1,000 live births in 2012 to 52 deaths per 1,000 live births in 2015, representing a reduction of 24 per cent. Basic education indicators also improved, with gender parity in both primary and secondary education at the national level.

However, the number of poor children increased between 2008 and 2015 despite significant economic growth in the country during that period. The percentage of children affected by multi-dimensional poverty increased from 54 per cent to 61 per cent. UNICEF Congo has accordingly adapted its strategy by implementing the Monitoring Results for Equity System (MoRES) in one of the poorest departments in the Congo, Lékoumou, Plateaux. Since 2014, UNICEF Congo has implemented an equity-focused, integrated health, education and child protection programme that focuses on indigenous children.

Under the leadership of the Department Prefect, the commitment to “zero child without a birth certificate in the districts of Sibiti and Zanaga of the Lékoumou Department”, resulted in an increase in birth registration from 60 per cent in 2015 to 100 per cent in 2016.

Key results

1) Improved enabling environment for the realization of children’s rights

In nutrition, UNICEF Congo supported the development of the National Strategy on Infant and Young Child Feeding (IYCF); the National Strategy on Micronutrient Deficiencies’ Control, including an action plan of the National Commission for Food Fortification; the Brazzaville Declaration on repositioning nutrition as a development factor prepared by participants in the Central African meeting on nutrition (to be adopted during the Economic Commission of Central African States (ECCAS) heads of state meeting).

In education, UNICEF Congo supported the development of one national and 12 departmental action plans for the implementation of the current Education Plan 2016–2025. These plans were adopted and validated at the national level.

2) Improved access to quality services

In education, UNICEF Congo prioritized the schooling of indigenous children and those in emergency situations. In this context: 2,363 indigenous children in Observer, Réfléchir, Agir (ORA) schools were enrolled; and 1,518 displaced pupils in the insecure Pool Department and 7,787 refugee pupils in Likouala Department in primary and secondary schools received school kits.

In child protection, 1,253 children (83 per cent refugees) aged 2–5 years participated in early childhood development (ECD) activities, received cooked food daily and psychological support in child-friendly spaces; and 400 street children received support to facilitate their
reintegration into society, including food, accommodation, education, vocational training, support to develop income-generating activities and reintegration into families.

In child survival and development, 88 per cent of children aged 6–59 months in the departments of Brazzaville, Bouenza and Pool were immunized against measles, supplemented with vitamin A and dewormed; and as part of the assistance to refugees and host families in Likouala Department, 582 children with severe acute malnutrition were admitted, 570 were discharged and 555 recovered, which represents a recovery rate of 97 per cent.

3) Improved management

Overall, office management performance in 2016 was sound. As of 27 December 2016, the performance scorecard for the Congo showed that out of 1,150 (maximum score) the office scored 1,106 with an index of 0.96. UNICEF Congo was among the top 20 per cent of performers in three dimensions: programme performance, partnership management and quality assurance.

Partnerships

A key new partnership in 2016 was with the French Development Agency, which funded UNICEF Congo to support the implementation of a cash transfer project, Lisungi, which targets 8,000 poor households. The overall project is co-funded by the Government of the Congo, the World Bank and the French Development Agency.

**Humanitarian Assistance**

In 2016, UNICEF Congo humanitarian programming focused on strengthening preparedness and capacity building around three categories of the humanitarian crisis: refugee populations in Likouala Department, displaced populations in Pool Department and epidemic outbreaks and prevention.

The Congo is an important host country for refugees coming from conflict-affected neighbouring countries. In 2016, more than 50,000 refugees were living in Likouala Department (remote location in the north). Most of these refugees came from the Central African Republic, the Democratic Republic of Congo and Rwanda. They required substantial investment. Thanks to funds received from the Government of Japan, UNICEF Congo provided adequate assistance to this population.

Key humanitarian assistance results in Likouala Department in 2016 are the following: Some 80 per cent of refugees received comprehensive primary health care services, both preventive and curative, and 25 per cent of refugees and host communities received information on health and hygiene through community health workers trained and deployed by UNICEF.

Nearly 2,900 children aged 6–59 months were screened for malnutrition, and 350 with severe acute malnutrition were admitted for treatment. Of these, 226 were discharged, including 220 (97 per cent) who recovered.

The Association pour la Lutte Contre la Malnutrition (Association for the Fight Against Malnutrition) in Bétou received technical support and supplies that enabled them to provide IYCF counselling to 1,048 parents and caregivers of children (aged 0–23 months), paving the way for improved sustainability of IYCF interventions.
A sharpened focus was placed on adolescent development and participation, child protection and health. Thus, several trainings and sensitizations took place with the participation of local authorities and professionals from local government services, non-governmental organizations (NGOs), religious and traditional leaders, refugees and host community representatives. More than 650 at-risk adolescents participated in life-skills sessions organized by youth clubs.

UNICEF Congo, through 80 community volunteers, provided support for violence prevention and response in areas hosting refugees. This included identification and referral of children with specific needs and victims of violence and an awareness campaign for 26 per cent of the refugees and 19 per cent of host communities. Thirteen children identified by the volunteers as victims of violence were referred to specialized care services where they received timely, adequate and quality assistance.

UNICEF Congo’s support for psychosocial services/programmes in humanitarian situations allowed 1,150 children and 83 parents to access trauma counselling activities and mental health support.

Child-friendly spaces continued to provide cooked food daily and psychological support to 1,253 children (composed of 83 per cent of refugees) aged 2–5 years old.

Some 6,500 refugees and host community children enrolled in Bé tou area schools received learning materials (school bags and 11,707 reading and mathematics books). More than 6,800 students attended sport and recreational activities in five primary schools and one secondary school. Twenty-five per cent of students with low performance received extra support through refresher activities initiated with UNICEF support.

Regarding the displaced population and the political context in the aftermath of the presidential elections, UNICEF Congo was instrumental in training 40 partners on the Multi-sector Initial Rapid Assessment tool and ensured rapid data collection and organization of the response. The rapid assessment allowed for a quick and timely response to assist the first cohorts of the internally displaced population of Pool Department through the distribution of non-food items and handwashing equipment and the construction of emergency latrines and temporary showers in two districts. Education materials were later provided to 1,726 displaced schoolchildren.

However, persistent localized turmoil and insecurity increased the number of displaced persons. Some 15,000 people in the Pool Department have fled their homes. These people have lost their shelter and crops and lack access to basic social services (i.e. health and education). With the recent mobilization of Central Emergency Response Fund (CERF) rapid response funds, UNICEF Congo is expanding its support to the 15,000 displaced persons in collaboration with other United Nations agencies.

Responding to epidemics is embedded in the joint United Nations annual workplan of the United Nations Development Assistance Framework (UNDAF) Health Results Group. In 2016, the Congo dealt with epidemics (yellow fever, measles and cholera). UNICEF Congo provided vaccines and supported social mobilization activities around a measles campaign carried out in three high-risk departments (Bouenza, Brazzaville and Pool). A total of 88 per cent of children under 5 (approximately 165,000 children) were vaccinated.

UNICEF Congo also helped the Government to develop communication plans for the response to yellow fever and cholera outbreaks. In collaboration with the World Health Organization (WHO), UNICEF Congo supported two polio campaigns to ensure that the country remains polio-free.
Emerging Areas of Importance

On refugee and migrant children. Emergency preparedness and response was a key output explicitly included in all sectors of UNICEF work in the Congo. Emergency preparedness is also positioned within overall programme coordination as a cross-sectoral area. As in previous years, UNICEF Congo demonstrated its capacity to influence preparedness at the country level and humanitarian response within the UNDAF framework, namely through United Nations contingency planning, joint United Nations/Government humanitarian situation assessments in the Pool Department and CERF funding mobilization. National capacity to better protect children from violence, abuse and exploitation in humanitarian situations was strengthened throughout the year.

More specifically to UNICEF work in regards to humanitarian preparedness and response, thanks to funds received from the supplementary budget of the Government of Japan, UNICEF Congo strengthened and qualitatively improved its response to the influx of refugees from the Central African Republic and the Democratic Republic of the Congo in the north (Likouala Department):

In the Likouala Department (northern Congo), UNICEF Congo promoted a holistic response and substantively improved the living conditions of the refugees from the Central African Republic and the Democratic Republic of the Congo. This project is funded by the Government of Japan and implemented through partnerships with civil society organizations (i.e. Terre Sans Frontière and Agence d’Assistance aux Rapatriés et Réfugiés au Congo (Assistance Agency for Returnees and Refugees in the Congo or AARREG).

Key results include improved quality of services in: 1) the treatment of 1,500 children, of which 57 per cent are girls traumatized by violence; 2) the management of child-friendly spaces offering safe space, food and stimulation activities for 1,253 children aged 2–5 years, 83 per cent of whom are refugee children; and 3) the referral of 144 children with special needs to specialized facilities. This model is being reproduced in the Pool Department, which is prone to insecurity that occurred in the aftermath of the presidential elections.

The Congo also faced population displacement within and outside of the Pool Department in the aftermath of the presidential elections held in March 2016. UNICEF Congo was a key player in the preparation and response to this crisis, including the update of the United Nations contingency plan and the training of more than 40 key partners for rapid assessment using the Multi-sector Initial Rapid Assessment approach. When the crisis occurred, empowered partners used this tool to quickly collect key information that allowed rapid and effective response with the support of UNICEF Congo.

Regarding a greater focus on the second decade of life. In 2016, UNICEF Congo made a significant shift in its country programme by focusing on the second decade of life. As part of the pilot project on the empowerment of out-of-school youth in four departments (Brazzaville, Pointe-Noire, Sangha and Likouala), funded by the Government of Japan with the support of UNICEF Congo, 124 pedagogical actors were trained in the pedagogical management and animation of the re-schooling centres. Some 632 children (292 girls and 340 boys) are currently being trained in re-schooling centres with the objective of their integration into the formal education system, and 600 adolescents (332 boys and 268 girls) are being trained in the vocational training centres in hotel catering, sewing, hairdressing, masonry, welding, carpentry, silk screening, electricity, market gardening and plumbing.

Early childhood development (ECD). UNICEF Congo has used humanitarian response as an opportunity to develop ECD interventions in Likouala. Key results include the management of child-friendly spaces, where 1,253 children aged 2–5 years, including 1,042 refugees (83 per cent) are safe and receive stimulation and food to improve their cognitive,
physical and emotional development. CFS staff were trained in ECD activities, and all children participated in ECD activities aligned with the official programme of early childhood education (physical education, sensory education, language, pre-mathematics, pre-reading, pre-writing activities, plastic arts and education for peace).

**Summary notes and acronyms**

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<tr>
<th>Acronym</th>
<th>Definition</th>
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<tr>
<td>AARREC</td>
<td>Assistance Agency for Returnees and Refugees in the Congo</td>
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<td>C4D</td>
<td>Communication for Development</td>
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<td>CERF</td>
<td>Central Emergency Response Fund</td>
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<td>DCT</td>
<td>direct cash transfer</td>
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<td>ECCAS</td>
<td>Economic Commission of Central African States</td>
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<td>ECD</td>
<td>early childhood development</td>
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<td>EPI</td>
<td>Expanded Programme on Immunization</td>
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<td>FAO</td>
<td>Food and Agriculture Organization</td>
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<td>HACT</td>
<td>Harmonized Approach to Cash Transfer</td>
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<td>IYCF</td>
<td>infant and young child feeding</td>
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<td>LTA</td>
<td>long-term agreement</td>
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<td>MICS</td>
<td>Multiple Indicator Cluster Survey</td>
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<td>MoHP</td>
<td>Ministry of Health and Population</td>
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<td>MoRES</td>
<td>Monitoring Results for Equity System</td>
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<tr>
<td>NGO</td>
<td>non-governmental organization</td>
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<td>OMT</td>
<td>Operations Management Team</td>
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<td>ORA</td>
<td>Observer, Réfléchir, Agir</td>
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<td>PBF</td>
<td>performance-based financing</td>
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<td>SDG</td>
<td>Sustainable Development Goals</td>
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<td>SMS</td>
<td>short message service</td>
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<td>SUN</td>
<td>Scaling Up Nutrition</td>
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<td>T4D</td>
<td>technology for development</td>
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<tr>
<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
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<tr>
<td>UNDAF</td>
<td>United Nations Development Assistance Framework</td>
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<tr>
<td>UNDDSS</td>
<td>United Nations Department of Safety and Security</td>
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<tr>
<td>UNESCO</td>
<td>United Nations Educational, Scientific and Cultural Organization</td>
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<tr>
<td>UNFPA</td>
<td>United Nations Population Fund</td>
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<tr>
<td>UNHCR</td>
<td>United Nations High Commissioner for Refugees</td>
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<td>WASH</td>
<td>water, sanitation and hygiene</td>
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<td>WFP</td>
<td>World Food Programme</td>
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<td>WHO</td>
<td>World Health Organization</td>
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**Capacity Development**

UNICEF Congo supported government and civil society capacity development, particularly in the following three areas:

**Micro-planning for immunization:** The implementation of the GAVI Alliance Health Systems Strengthening (HSS) project was an opportunity to engage stakeholders from government and NGOs in the development of communication micro-plans for health districts that reflect district-specific realities. They were developed based on a guidebook and an assessment tool aimed at improving the complete vaccination rates among children aged 0–11 months. Both the participatory nature of the process and the systematic use of a guidebook facilitated increasing demand, supply and the use of health and immunization services.

**MoRES applied to indigenous populations and decentralized programmes:** In order to improve access to basic social services (i.e. health and education) for vulnerable children at the decentralized level, UNICEF Congo developed a MoRES guide based on evidence.
generated from pilot interventions implemented since 2014. This tool was used to support capacity building for bottleneck analysis, decentralized planning and monitoring. Skills to practice were acquired by 173 local governmental authorities and officials of five departments through a series of workshops.

**Preparedness and response to emergencies:** UNICEF Congo demonstrated its leadership in preparedness, response and resource mobilization. Within the United Nations system and UNICEF Congo facilitated the training of 40 partners (government and NGOs) on the Multi-sector Initial Rapid Assessment. A few days after the onset of the turmoil, the tool was successfully applied by partners especially CARITAS (local Catholic Church NGO), to collect, analyse and report displaced populations in the Pool Department. The findings of their assessment allowed rapid response for affected populations.

UNICEF Congo also developed a communication for development (C4D) strategy to inform a systematic approach for nationwide capacity building of the Government and NGOs on C4D principles and techniques.

**Evidence Generation, Policy Dialogue and Advocacy**

The Multiple Indicator Cluster Survey (MICS) 5 survey allowed the Congo to generate evidence on the progress made towards national objectives and international commitments. These data have been used to update the situation analysis for the UNDAF and design sectoral programmes. MICS data will also serve as a baseline for the National Development Plan 2017–2021 (under development), which will integrate the Sustainable Development Goals (SDGs).

MICS 5 findings have been also used to measure the multidimensional poverty of children. The multidimensional child poverty report provides strong evidence on the importance of income and access to fundamental rights and basic services such as safe drinking water, health care, education and shelter.

Advocacy using evidence data from the MICS 5 and evaluation of interventions aimed at improving the quality of life of indigenous people were effectively used in 2016 to launch an innovation that has great potential to boost routine immunization and support the realization of the indigenous rights. UNICEF Congo used MICS 5 data on complete vaccination coverage (18 per cent, while Bacillus Calmette–Guérin vaccine coverage is 91 per cent) to argue for the adoption of the Technology for Development project using short message service (SMS) to remind parents of their child’s vaccination schedule. The advocacy conducted was supported by key partners such as the Ministry of Health and Population (MoHP) and officials from mobile phone companies.

The findings of the joint Government-United Nations evaluation of interventions for indigenous people were effectively used by UNICEF Congo to encourage officials from the Ministry of Higher Education, including the Minister, to adopt concrete positive discriminatory measures that will retain the few indigenous students, both boys and girls, at the university. Those measures include the allocation of an accommodation at the university campus even though the indigenous students don’t meet the age criterion (they are older). Another measure was to grant scholarships.

**Partnerships**

Partnerships with the Government have been expanded with mixed results in terms of resource mobilization.

Since the systematic process set by UNICEF Congo in 2014 to mobilize domestic resources,
agreements were signed with three ministries (finance and planning; energy and hydraulics; and education).

In 2016, agreements were signed with two other ministries. A three-year agreement of US$972,000 was signed with the Ministry of Communication for the promotion of essential family practices. However, the project was postponed to 2017 because of lack of domestic funding due to the drastic fall of oil prices. Advocacy will be pursued with the Government for the release of the funds.

For the first time, UNICEF Congo signed an agreement with the Ministry of Social Affairs, Humanitarian Action and Solidarity and received US$406,300 from this ministry to support a cash transfer project (the Lisungi project). The project targets 8,000 poor households and is aimed at boosting demand for social services. The project is co-funded by the Government, the World Bank and the French Development Agency. UNICEF Congo interventions focused on the capacity development of community actors to deliver the C4D component of the cash transfer conditions. The transfer of funds to UNICEF Congo was made possible thanks to the French Development Agency.

Within the Scaling-Up Nutrition (SUN) framework, partnerships were strengthened among United Nations agencies, the Government and ECCAS, a regional inter-governmental body. This process led by UNICEF Congo with the support of the UNICEF West and Central Africa Regional Office, involved the Government, the Food and Agriculture Organization (FAO), the World Food Programme (WFP) and WHO. As a result, a regional workshop was held in Brazzaville. Its outcome was the Brazzaville Declaration, a multi-year roadmap on nutrition promotion for the seven participating countries on repositioning nutrition as a development factor. The UNICEF Regional Office played a key role in providing technical expertise and financial support.

**External Communication and Public Advocacy**

The UNICEF Congo Representative participated in a series of targeted press conferences and radio and television broadcasts to reinforce public advocacy on the situation of children in the Congo. Targeted advocacy efforts with ministries placed emphasis on the need to provide more academic, learning or technical training opportunities for out-of-school children and indigenous students through university grants and free access to the university library. Celebrating the International Day of the World’s Indigenous Peoples allowed UNICEF Congo to shed light on its assistance towards better access to schooling and the protection of indigenous children.

UNICEF Congo expanded its digital media presence and engaged with new partners for wider social engagement with the public and with the Congolese diaspora. It also launched a revamped website with up-to-date information and a new visual approach to facilitate transition towards the new unicef.org platform roll out in 2017.

The UNICEF Congo official Facebook page is now among the top five in the West and Central Africa region, with 11,780 registered users (23 per cent women). The most reached publications in 2016 were: 1) human interest stories; 2) the global campaign launch; and 3) vacancy announcements and data visualization infographics.

The social media publishing platform, ‘issuu’, also recorded valuable statistics such as 60 uploaded publications from programmes and from UNICEF Headquarters. ‘issuu’ is now accessible via the UNICEF Congo website and on mobile phones thanks to the application’s new mobile-friendly updates.

Several other instrumental publications were produced in 2016 and are currently being copy
Identification and Promotion of Innovation

In 2016, UNICEF Congo made progress in terms of introducing innovations. The following two types of innovations were designed and are beginning to be implemented.

The first innovation is related to the use of new technology to boost routine immunization. The initiative started in 2013 but implementation was not possible then due to a lack of funding. The funded GAVI Alliance/HSS project provided the opportunity to re-launch the initiative.

Through technical support from the UNICEF Regional Office and the Global Innovation Centre and additional financial support from UNICEF Headquarters, UNICEF Congo, in close collaboration with the MoHP, started the implementation of the project. Key results include the availability of short code from the National Agency for the Regulation of Communication, a contract with the platform management using the open source RapidPro and U-Report, and the MoHP commitment to leading the discussion with phone companies in regards to using SMS to remind families about vaccination schedules to reduce drop-out rates.

The second innovation is the introduction of the performance-based financing (PBF) scheme in two different projects (Lisungi cash transfer project and GAVI Alliance/HSS project). This innovation is meant to improve the accountability of key actors and motivate them to achieve results. Using the PBF scheme is a qualitative first step with strong potential for capacity development for both UNICEF and partners. Implementation tools were produced and validated in collaboration with all partners involved in the project. The tools include the design of the PBF approach, protocols and contract templates for entities at various levels. Actors involved in the implementation will get incentives based on their performance. A similar scheme will also be used to provide incentives to institutions to improve their performance.

Support to Integration and Cross-Sectoral Linkages

Since 2014, UNICEF Congo has been pursuing a process of modelling equity-focused integrated programmes using the MoRES approach and focusing on indigenous children and poor families in two departments: Lékoumou and Plateaux.

Reduction of bottlenecks for access to health, education and birth registration is guiding the integrated approach and involves all sections of UNICEF Congo. The implementation is driven by government authorities at the decentralized level and involves civil society organizations. For example, in the Lékoumou Department and under the leadership of the Prefect, a workshop on birth registration built ownership of the action plan (2015–2020) and empowered more than 50 actors (sub-prefects, mayors, secretary generals, civil servants of different allied sectors, heads of districts and villages) through common understanding of the barriers that poor and indigenous children face to accessing social services. They committed to the objective of “zero child (indigenous and Bantu) without a birth certificate in the districts of Sibiti and Zanaga of the Lékoumou Department”. Each district and urban community (eight entities) had an operational micro-plan on this commitment and have initiated implementation.
The systematic progress monitoring and reduction of bottlenecks indicate significant improvement in regards to birth registration, with an increase from 60 per cent in 2015 to more than 100 per cent in 2016 in the two districts of Sibiti and Zanaga.

Bottleneck monitoring was also conducted during multi-sector MoRES exercises, though improvements in education and health were less important. In terms of lessons learned, because of its highly participatory nature, the process built strong government ownership. Where decentralized government authorities were effectively involved, especially mayors, the results were significant.

The models are being documented to inform a systematic approach to integrated programming.

**Service Delivery**

Within the framework of polio eradication, in 2016, UNICEF Congo supported the organization of two polio campaigns with 93.8 per cent coverage. UNICEF Congo supported measles campaigns (vaccines and social mobilization) in three high-risk departments (Bouenza, Brazzaville and Pool). A total of 88 per cent of all children under 5 (165,000) were vaccinated, dewormed and supplemented with vitamin A. UNICEF Congo also played a key role in the successful introduction of new polio vaccines, now effective in all fixed immunization centres. Within the framework of the GAVI Alliance/HSS project, UNICEF Congo supported a participatory C4D strategy with the objective of increasing the coverage of complete vaccination of children aged 0–11 months to 85 per cent.

Service delivery was effective and prompt for refugees and displaced populations. Thousands of children aged 6–59 months were screened for malnutrition. Of these, 582 children with severe acute malnutrition were admitted into the programme, 570 were discharged and 555 (97.4 per cent) recovered. Child-friendly spaces, as well as protection, stimulation and recreational activities were provided to about 2,000 children aged 3–5 years old.

UNICEF Congo supported the organization of mobile clinics in two modelling zones (Lékoumou and Plateaux), targeting indigenous children and women who did not have easy access to services. A total of 156 pregnant women and 189 indigenous children benefited from maternal child and neonatal health services. Thanks to a MoRES implementation targeting the indigenous population in the department of Lékoumou, birth registration increased from 60 per cent in 2015 to more than 100 per cent in 2016.

Overall, C4D was critical in terms of generating demand for services. UNICEF Congo developed a C4D strategy that will guide support to the Government in a more systematic way. It includes capacity building for stakeholders, individual behavioural and social change, community engagement and advocacy.

**Human Rights-Based Approach to Cooperation**

Aware that human rights are at the heart of everyday concerns, in 2016, UNICEF Congo contributed to a range of advocacy, capacity-building and essential service delivery efforts aimed at reinforcing peacebuilding, social disparities reduction, and the restoration of human dignity.

Within the United Nations system, UNICEF Congo continued to play its role as lead agency for the promotion of indigenous minority rights. This made it possible to consolidate strategic partnerships and multi-stakeholder coordination. A major opportunity was the integration of “indigenous people right promotion” among the Government’s new priorities, especially
Article 16 in the new Constitution. Moreover, the new structure of line ministries reflects the protection of indigenous people’s rights. Indeed the Congo created the Ministry of Justice, Human Rights and Promotion of Indigenous Peoples.

In the context of humanitarian assistance to refugees in Bétou in the Likouala Department (northern Congo) and populations coping in the midst of the Pool crisis aftermath, UNICEF Congo was heavily involved in ensuring prompt and effective accountability in preparation, joint humanitarian assessments, resource mobilization from CERF and the Government of Japan’s supplementary budget and quality response.

Finally, in order to improve the monitoring of international conventions, UNICEF Congo supported public dissemination of the recommendations and concluding observations resulted from the cumulative periodic reports (second, third and fourth) on the Convention on the Rights of the Child in January 2016 and the initial report to the African Committee of Experts on the Rights and Welfare of the Child in November 2016.

**Gender Equality**

The 2015 MICS 5 findings show that the Congo has reached gender parity at the national level in both primary and secondary education. However, disaggregated data show some disparities in rural areas.

The UNICEF Congo gender action plan priorities for 2016 are: advancing girls’ secondary education, fighting gender-based violence in emergencies and reducing maternal mortality.

The implementation of the gender action plan relative to girls’ secondary education is included in the formulation of a broad national strategic document on girls' education and its action plan. The development of the document was supported by UNICEF Congo in collaboration with the ministries of education as well as the Forum of African Women for Education - Congo.

The implementation of the strategy on girls’ education is planned for 2017 and is meant to improve access and retention of girls particularly in secondary school, to improve their participation at all the levels of the education system, and to strengthen institutional capacity for girls' education. A gender review was conducted in December 2016 and its findings should be used for effective planning of specific actions targeting the reduction of bottlenecks linked to girl’s secondary education.

Cases of sexual and gender-based violence reported in the Likouala Department rose from 40 in 2014 to 70 in 2015, with a significant rise noted among refugees of the district of Bétou. UNICEF Congo therefore conducted a needs assessment in 2016 and supported the implementation of a response that was more tailored to the needs and the context. An effort was also made to mainstream gender into the development and recruitment of community workers.

Significant results of UNICEF Congo’s interventions include: 1) the treatment of 1,500 children traumatized by violence, 57 per cent of them girls; and 2) capacity building for 80 community workers (including 30 female workers) who were able to use gender-sensitive materials to carry out home visits for sensitization on sexual and gender-based violence. A total of 2,379 women and 3,045 girls (including 51 per cent of refugee girls) benefited from home visits and sensitization activities.
Environmental Sustainability

As part of the commitment by UNICEF Congo to reduce the carbon footprint of the UNICEF Congo Brazzaville office, a major investment was made in the installation of a solar electricity system, particularly for the electricity supply of all information and communication technology equipment in that office. This system was reinforced in 2016 with the purchase of more efficient equipment, which makes the office quite autonomous in terms of electrical energy but also contributes to the reduction of its carbon footprint.

In the same vein, all printing equipment was configured for minimum paper consumption, and the setup of the SharePoint team site facilitated online working and printing the minimum required.

Moreover, with the support of the UNICEF Regional Office, UNICEF Congo secured financial resources to improve water management and ensure that leaks are repaired throughout the compound.

In support of climate change mitigation, UNICEF provided health facilities in seven departments with solar cold chain materials. These devices were made available thanks to GAVI Alliance/HSS project funds.

Effective Leadership

UNICEF Congo pursued its leadership role on the issue of indigenous people by technically supporting the United Nations Resident Coordinator to co-lead with the Ministry of Justice, Indigenous People and Human Rights the evaluation of critical interventions aimed at improving the quality of life for this highly disadvantaged group. The report of this evaluation has been adopted at the political level by key stakeholders from government entities, United Nations agencies, bilateral agencies and civil society.

UNICEF’s leadership role continued. With the Ministry of Basic Education, UNICEF Congo co-chaired the United Nations Results Group on Education, the United Nations Results Sub-Group on Water, Sanitation and Hygiene (WASH) and the Development Partners Working Group on the Social Sector.

Office consultation mechanisms such as the country management team, programme coordination meetings as well as management meetings were used on a regular basis to monitor management indicators drawn from Insight. Particular attention was given to scorecard indicators related to quality assurance, financial management, partnership management, people management and programme performance. Corrective actions were discussed and their implementation allowed UNICEF Congo to meet UNICEF global standards most management indicators.

The implementation of an harmonized approach to cash transfers (HACT) continued to be one of UNICEF Congo’s top priorities. Apart from the assurance activities that were carried out, the focus was on strengthening the capacity of not only the implementing partners but also of UNICEF staff. UNICEF staff benefited from training on how to conduct spot checks and had the opportunity to perform them in the field. This capacity development of UNICEF staff will allow the office to conduct its own spot checks starting in 2017 without using external assistance.

UNICEF Congo met the requirements of the business continuity plan, enterprise risk management and the Early Warning Early Action platform.
Financial Resources Management

The annual management plan, prepared during the staff retreat in early February 2016, was adopted by the country management team. The plan set up key results to be achieved in 2016 in terms of efficiency and efficacy and aligned to the global key performance indicators standard indicators to be monitored to assess office performance.

In 2016, UNICEF Congo pursued efforts related to budget control and financial procedures. To gain efficiency and implementation time, 22 long-term agreements (LTAs) were signed with suppliers for recurring services and goods. This initiative was done in collaboration with the United Nations Operations Management Team (OMT) under the supervision of the United Nations Country Team.

Management established effective mechanisms to follow up on outstanding financial management items such as bank reconciliation, open payables, personal and recovery (PAR) accounts and liquidations of cash assistance.

Throughout the year, the direct cash transfers (DCTs) were kept as planned under 0 per cent for those of more than nine months. For outstanding items in the bank, an effort was made to drastically reduce their amount, from US$244,542 to US$50,000, a reduction of 79 per cent. The number of outstanding open items also decreased from 30 to 20.

UNICEF Congo established mechanisms that allowed expired grants to be kept at 0 per cent.

At the end of December 2016, the UNICEF Congo’s budget execution rate was at 94 per cent overall: 100 per cent for regular resources, 89 per cent for other resources and 94 per cent for other resources emergency.

Fundraising and Donor Relations

In 2016, fundraising results were mixed.

Further to analysis conducted three years ago, the fundraising strategy foresaw domestic resources as a main funding source for the Congo country programme. In 2014, UNICEF Congo had raised 62 per cent of its other resources regular from domestic resources (more than US$2 million) as granted by the Government to cost share the funding for the UNICEF cooperation programme.

Unfortunately, the reduction in oil prices and political context influenced the Government’s priorities and drastically reduced fund allocations to development partners. The only domestic funds received in 2016 were US$406,300 from the Ministry of Social Affairs, Humanitarian Action and Solidarity.

With a private sector structured around the oil industry, now facing reduction in oil prices, the economic situation significantly narrowed this window of opportunity in the UNICEF Congo resource mobilization strategy.

UNICEF Congo more successfully raised emergency funds, with more than US$2 million from the Government of Japan’s supplementary budget and CERF rapid response for humanitarian assistance to refugees and displaced populations. These funds will expire between February and May 2017. New proposals have been submitted for emergency fundraising without certainty for funding.
Donor report management in UNICEF Congo is strong: 100 per cent timely submissions and of two sample donor reports evaluated by UNICEF Headquarters, one was scored as excellent and one was scored as satisfactory.

For the first time, substantial thematic funds were received for WASH as catalytic funds to leverage government resources. Thematic funds received for education were less than in previous years. Earmarked funds from GAVI Alliance/HSS were not flexible enough to address other important child health issues.

Programme implementation in 2017 for protection, social policy and child survival and development is of concern with the reduction of regular resources and no short-term opportunity for resource mobilization.

Nevertheless, UNICEF Congo pursued advocacy with the Government and traditional donors, bilaterally and within the United Nations collective approach.

**Evaluation and Research**

An integrated monitoring and evaluation plan was prepared for 2016, validated by the country management team and updated when necessary.

During the past two years, UNICEF Congo, in close collaboration with partners, conducted two evaluations in the areas of education and human rights promotion and protection of indigenous people. A management response was developed for each of the two evaluations. Findings of these evaluations have been used to inform advocacy and strategic programming not only by UNICEF Congo but also by other development partners from bilateral/multilateral cooperation, United Nations agencies and government entities.

More specifically, the evaluation of the Education Sector Strategy in 2014 informed the development of the Education Sector Plan 2015–2025. The latter was recognized by the Global Partnership for Education as credible. It will inform the development of the National Development Plan 2017–2021.

The evaluation of interventions aimed at improving the quality of life of indigenous people has been instrumental in mobilizing development partners, including United Nations agencies, as well as the new government on the issue of the promotion and protection of indigenous people's rights. A commitment was agreed upon to develop a joint programme on that issue.

All evaluations were conducted by external international consultants supported by national experts.

In the last quarter of 2016, humanitarian agencies composed of the United Nations Population Fund (UNFPA), the United Nations High Commissioner for Refugees (UNHCR), UNICEF and WFP committed to conducting an evaluation of humanitarian interventions for refugees in the first quarter of 2017. UNICEF Congo volunteered to draft the terms of reference for the evaluation. The terms of reference were circulated by UNHCR to other involved United Nations agencies and shared with the Minister of Social Affairs for validation.

**Efficiency Gains and Cost Savings**

In 2016, UNICEF Congo achieved efficiency gains (more so than cost savings) by closing most outstanding items and cleaning up financial indicators to bring them in line with UNICEF management standards.
In operations, the implementation of the 22 LTAs will soon bring significant savings and help UNICEF Congo become more efficient in terms of managing vehicles, transporting goods and HACT.

The operations management team (OMT) has been providing support to ensure that long-term arrangements (LTAs) are serving the Delivering as One purpose and are taking the United Nations as one operational team into account. Preparatory work has been implemented for the development of a United Nations business operating strategy in 2017.

Significant savings have been registered in regards to the telecommunications budget item due to measures undertaken by management to minimize costs (regulations on private communications, use of Skype for Business, a deal with Maritime Telecommunications Network on free mobile calls between UNICEF staff, use of the off-net, use of the on-net, ceilings on staff communications and elimination of roaming service for some staff). These measures allowed the office to reduce telecommunication costs from US$69,055.21 in 2015 to US$45,860.24 in 2016, representing a 34 per cent reduction.

### Supply Management

In 2016, the value of the country programme supply component goods and services increased compared with 2015. This increase is mainly due to supplies received as part of UNICEF Congo support to the Government through regular procurement services and the project GAVI Alliance/HSS.

In collaboration with the United Nations OMT, UNICEF Congo established 22 LTAs in the areas of transport, customs clearance, vehicle maintenance and repair, mobile telephony, HACT, vehicle rental, printing and publishing for local procurement purposes. However, the situation of the local market has not changed compared with previous years, and it was UNICEF Congo’s main procurement challenge in 2016.

Despite improvement of road infrastructure between the southern and northern departments, mobility within the country slowed due to rail and road disturbances related to security issues in the Pool Department.

Through its LTA on goods transportation and its partnerships, UNICEF Congo managed to meet the delivery of programme supplies to the partners in the Likouala and Pool departments where UNICEF Congo is providing humanitarian assistance to refugees along with other United Nations agencies.

The value of the inventory of programme supplies controlled by UNICEF Congo and recorded as being in the warehouses as of 31 December 2016 is US$47,657.10, of which US$1,360.64 is pre-positioned emergency supplies.

The value of programme supplies issued from local warehouses controlled by UNICEF Congo recorded in the Virtual Integrated System of Information as of 31 December 2016 is US$486,019.
### UNICEF CONGO 2016

<table>
<thead>
<tr>
<th><strong>Value of all supply input (goods and services) (US$)</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Programme supplies</td>
<td>425,660</td>
</tr>
<tr>
<td>Operational supplies</td>
<td>178,136</td>
</tr>
<tr>
<td>Services with constructions</td>
<td>801,991</td>
</tr>
<tr>
<td>Construction (where applicable)</td>
<td>0</td>
</tr>
<tr>
<td><strong>Grand total</strong></td>
<td><strong>1,405,787</strong></td>
</tr>
</tbody>
</table>

### UNICEF CONGO 2016

<table>
<thead>
<tr>
<th><strong>Value of supplies channelled via procurement services (US$)</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Via regular procurement services</td>
<td>3,860,914</td>
</tr>
<tr>
<td>via GAVI Alliance</td>
<td>422,141</td>
</tr>
<tr>
<td><strong>Grand total</strong></td>
<td><strong>4,283,055</strong></td>
</tr>
</tbody>
</table>

### UNICEF CONGO 2016

<table>
<thead>
<tr>
<th><strong>Value of locally managed procurement (US$)</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Programme supplies</td>
<td>140,788</td>
</tr>
<tr>
<td>Operational supplies</td>
<td>178,136</td>
</tr>
<tr>
<td>Services</td>
<td>801,991</td>
</tr>
<tr>
<td><strong>Grand total</strong></td>
<td><strong>1,120,915</strong></td>
</tr>
</tbody>
</table>

The total value of supplies managed in the UNICEF Congo-controlled warehouse in 2016 was **US$813,299**

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### Security for Staff and Premises

The business continuity plan was tested by UNICEF Congo with the assistance of the UNICEF Regional Office in 2015, and an action plan for addressing the shortcomings was devised. The year 2016 focused on the implementation of the latter.

In 2016, UNICEF Congo benefited from the visit of the regional security adviser who made recommendations for meeting the security standards requirements. UNICEF Congo carried out the latter thanks to the regional contingency fund received in December 2016.

Moreover, the Fire Safety Risk Assessment was conducted with the support of the United Nations Department of Safety and Security (UNDSS) Congo Brazzaville, and most of the recommendations were implemented.
UNICEF Congo is working to ensure that travel in the field is as safe as possible by trying to minimize risks through the following mechanisms to protect staff:

UNICEF Congo has established memoranda of understanding with other agencies such as UNHCR to ensure that staff members can travel safely to remote places. For example, there will be no need for the traveller to carry cash to purchase fuel in the field. UNHCR will provide cars, drivers and fuel.

UNICEF Congo arranged to rent vehicles in safe conditions for the traveller by establishing agreements with local suppliers, such as Europcar, specialized in renting vehicles in good condition.

### Human Resources

After the staff retreat in February 2016, UNICEF Congo devised a learning plan that was implemented at a rate of 61 per cent (75 per cent of group learning activities and 48 per cent of individual learning activities were completed). All staff members benefited from the training plan through different approaches (online, face-to-face and group learning). Uncompleted activities are either ongoing or were postponed. Five per cent of activities were cancelled.

The number of staff members fluctuated between 29 and 31 due to vacations and recruitments. The breakdown of the 31 staff members by category is as follows: 16 general service staff, 12 national officers and 4 international professionals with one professional level 4 position that has been vacant since February due to lack of funds. Gender diversity is a challenge as the share of female staff is 28 per cent.

Implementation of ACHIEVE improved performance management review. UNICEF Congo successfully used ACHIEVE tools to enhance performance review. By the end of October 2016, 100 per cent of mid-year discussions between staff and supervisors had taken place, and two performance improvement plans were developed.

UNICEF Congo completed three recruitments through the talent management system (TMS) (staff and consultants), and three others are underway.

A total of 100 per cent of the 2014 Global Staff Survey activities were implemented.

Four operations staff funded on other resources were funded through regular resources for two months in 2016.

The United Nations dispensary is responsible for activities related to HIV/AIDS in United Nations workplaces. They provided information and training on voluntary confidential counselling and testing (VCCT), and information related to HIV/AIDS. They held the United Nations day care with the participation of all United Nations staff members and dependents.

An emergency response plan was developed, and a training on programme criticality awareness was held in the office.

### Effective Use of Information and Communication Technology

UNICEF Congo set up a team site using SharePoint for the Congo Brazzaville office, and continued to use OneDrive and Skype for Business, which were rolled out in 2015. An effort was made to train users on the Microsoft Office 365 tool. This was possible because of the improvement in the quality of the Internet connection at the office. Internet connectivity was upgraded through a local provider that provided the necessary throughput to improve the
use of Microsoft Office 365.

The programme team made a significant effort to innovate through the introduction of a technology for development (T4D) component. The use of the RapidPro open source UNICEF platform to send SMS reminders to families with children in need of vaccination will help to boost routine immunization coverage and reduce drop-out rates.

UNICEF Congo increased the visibility of its work, as well as the situation of children and key challenges, through the expansion of its social media work. UNICEF Congo launched its revamped website with up-to-date information and a new visual aesthetic, which will facilitate the transition towards the new unicef.org website roll-out in 2017.

In 2016, the UNICEF Congo official Facebook page was in the top five in the West and Central Africa region, with 11,780 registered users (77 per cent men and 23 per cent women) mostly between the ages of 18 and 34. The year’s most effective publications in terms of reach were: 1) human interest stories; 2) global campaign launches; and 3) vacancy announcements and data visualization infographics.

Lifetime statistics for all publications (since late 2014) include 1,665 reads, 20,703 impressions and seven followers. The top 10 readers around the world in a 30 days period at the end of 2016 were from France (53), the Congo (41), Haiti (31), Senegal (28), Côte d'Ivoire (17), the Democratic Republic of the Congo (17), Morocco (16), Cameroon (15), Mali (14) and Algeria (9).

Programme Components from the Results Assessment Module

ANALYSIS BY OUTCOME AND OUTPUT RESULTS

OUTCOME 1 By 2018, girls and boys, in the most vulnerable areas benefit from inclusive social policies and more resources thanks to evidence-based advocacy.

Analytical statement of progress:
In recent years, UNICEF Congo switched its major focus from downstream to upstream work, through increased engagement in national level policy dialogue and advocacy. However, the momentum in the last two years has slowed down, particularly in 2016 due to a context that was not conducive to achieving key programmes results. The highly busy political agenda in the first half of the year did not allow for annual workplan implementation to start on time. Moreover, due to the strong dependence of public finances on oil revenues (nearly 85 per cent of government revenue), the decline of oil prices led to a drastic reduction of the Government's income in 2016 and caused two revisions of the national budget. This has resulted in the reduction of public investment, particularly in the social sector, and the non-disbursement of national counterpart funds planned for the implementation of partners' programmes, including UNICEF.

Despite these major constraints, great progress has been made towards the achievement of key results. The final MICS Congo report for 2014–2015 and the study on multidimensional child poverty have been published. These two documents are very useful at a time when the Government is ready to implement the SDGs through its National Development Plan 2017–2021, which is due to be finalized at the beginning of 2017.

In regards to public finance, UNICEF Congo is continuing to advocate for the mobilization of domestic resources to finance the implementation of its programme. Investments for children
are still prioritized in the national budget, but the main constraint remains the disbursement of national counterpart funds.

UNICEF Congo also reaffirmed its commitment to supporting the Government to implement decentralization and local governance. A joint project was signed with the new Ministry of Decentralization and Local Development. This project aims at strengthening the planning capacities of local actors in two pilot areas.

**OUTPUT 1** By 2018, national counterparts have skills and tools needed to allocate adequate resources to social sectors and are accountable for their use

**Analytical statement of progress:**
In 2016, the work of UNICEF Congo on public finance focused on advocacy with the Ministry of Planning and technical support for the social ministries to ensure that investments for children were maintained in the national budget after two revisions and to secure the registration of national counterpart funds for the UNICEF programme in the 2017 national budget. These two results were achieved after the revision of the 2016 budget, with almost US$5 million maintained as national counterpart funds for nine projects covering all UNICEF Congo programmes. In addition, the Ministry of Planning selected all project proposals amounting to US$4.5 million that had to be funded through the 2017 national budget.

These efforts were undermined, however, by the fact that funds disbursement has not materialized over the last two years due to the Government’s cash flow difficulties. Although the Government has indicated its willingness to maintain this level of investment, difficulties since 2015 show a decline in public spending, particularly in the social sectors.

In addition, the implementation of cooperation activities with the United Nations system has been severely limited due to the non-disbursement of national counterpart funds.

**OUTPUT 2** By 2018, national and local counterparts, including civil society (NGOs, communities, religious groups) acquire technical skills required to effectively plan, implement and monitor child-sensitive and equity-centred social policies and programmes.

**Analytical statement of progress:**
In 2016, the Government of the Congo reaffirmed its political commitment to decentralization with the creation of a new Ministry for Decentralization and Local Development.

UNICEF Congo has seized this opportunity to build a partnership with the new ministry and a joint project for 2016–2018 has been signed between the two parties to strengthen local governance. The main objective of the project is to strengthen the capacities of decentralization and local development actors for the development and implementation of local development plans. Project implementation began with the organization of two training workshops in the intervention areas of Lékoumou and Plateaux. These workshops initiated the process of developing sectoral plans (health, education, WASH and protection) that will integrate local development plans. More specifically, they represented an opportunity to: 1) sensitize local authorities on the importance of local development for the two departments; 2) set up a multidisciplinary technical team to coordinate the collection of basic information for each sector; 3) collect basic data on each department and information on key sectors that influence the situation of children in order to produce departmental monographs and to have a baseline that will serve for the entire planning process.

To ensure the success of this process, UNICEF Congo will continue to support the Government to organize a dialogue with all partners involved in decentralization to identify the contribution of each partner.
**OUTPUT 3** By 2018, the National Statistical Information System provide disaggregated data and strategic information needed to analyse the situation of child deprivation, and children and women’s vulnerability.

**Analytical statement of progress:**
Launched in 2014, the MICS report was finalized in 2016. Its publication in December 2016 corresponds to the launch of the SDGs by the Government of the Congo. The results of the MICS Congo survey will serve as a baseline for the National Development Plan 2017–2021, which will integrate the SDGs.

As part of the exploitation of data from the MICS Congo 2014–2015, UNICEF Congo carried out a multidimensional poverty analysis of children in the Congo using National Multiple Overlapping Deprivation Analysis methodology. The analysis allowed for estimation of the incidence of multidimensional poverty of children in general and showed that 61 per cent of children in the Congo are suffering from multidimensional deprivations. This represents about 1.3 million children. This report provides the country with strategic information on child poverty such as the number of children living in poverty, their location and the deprivations that affect them. Used judiciously in the process of developing the National Plan of Development 2017–2021, the report findings will help national planners identify appropriate policy measures and strategies to effectively combat child deprivation.

UNICEF Congo documented the experience of decentralized planning and equity-based monitoring conducted in two districts in the Léoumou Department. This documentation was based on the evidence gathered during the project implementation period (between September 2014 and November 2016). It provides local actors, programme managers and field partners with tools for mastering the process and arguments for replication in other convergence districts as well as for scaling up the equity-focused programming approach.

**OUTPUT 4** By 2018, the programme’s performance is measured and monitored

**Analytical statement of progress:**
The lack of other resources for social policy was a challenge. However, UNICEF Congo allocated regular resources to ensure that key activities were conducted. Participation of social policy programme staff in thematic technical meetings was effective. The Unit coordinated the organization of a results-based management workshop.

**OUTCOME 2** By 2018, at least 90 per cent of pregnant women, under-five children living in the targeted most vulnerable areas have access to and utilize a package of high-impact interventions for their survival

**Analytical statement of progress:**
The downward trend in vaccination coverage observed in 2015 was confirmed in 2016. According to data available through the expanded programme on immunization (EPI), no health district had more than 90 per cent immunization coverage for all antigens. The proportion of health districts with coverage of 90 per cent or more in the campaigns against polio is 58 per cent. During the campaigns against measles organized in the departments of Brazzaville and Pool, 84 per cent of children were vaccinated. UNICEF support enabled EPI to obtain vaccines and other immunization materials, organize two national polio immunization campaigns and facilitate the introduction of injectable polio vaccine and the replacement of oral polio vaccine in routine immunization.
UNICEF supported seven health districts in the development of the integrated management of diseases including malnutrition at the community level approach. Household enumeration and identification and training of community health workers are the core of UNICEF Congo support. The percentage of community health workers trained increased from 20 per cent in 2015 to 67 per cent in 2016. In addition, an orientation guide for community workers is being developed. To strengthen accountability, recognition and motivation of community health workers, in 2016, UNICEF Congo initiated the implementation of PBF at the community level, which will be effective from the first quarter of 2017 with the implementation of the GAVI Alliance/HSS-funded project.

The MICS 2015 data show that newborn mortality was high at 21 per 1,000 live births. This represents approximately 40 per cent of the under-five mortality rate. Ninety per cent of newborn mortality occurs in hospitals. Together with other United Nations agencies, UNICEF Congo has contributed to updating guidelines and training health workers on the use of these guidelines. For example, the percentage of facilities providing delivery services that have guidelines for essential care for childbirth has increased from 30 per cent in 2015 to 50 per cent in 2016.

With the support of WHO, UNICEF and UNFPA, the MoHP has been developing and validating a dashboard for the maternal, child and neonatal platform since 2015 that is meant to serve as a basis for the development of decentralized plans to secure women and children’s access to high-impact interventions in health and nutrition.

The year 2016 was the starting point for the extension of planning based on the analysis of bottlenecks and the monitoring of equity in access to services. This approach stems from the need to strengthen systems at the point of contact between the population and services by improving the quality of supply and demand. On the basis of a guide developed by UNICEF, the Government of the Congo, with the support of WHO, established a pool of trainers and enabled seven health districts to have decentralized plans to improve access to basic social services.

The emergency response in 2016 enabled 80 per cent of the refugees from the Central African Republic and the Democratic Republic of the Congo to benefit from comprehensive primary health care services, both preventive and curative. For example, 25 per cent of households of refugees and host communities received information on essential family practices.

As part of the response to the Pool Department emergency, UNICEF Congo supported the organization of two rapid assessment missions and mobilized financial resources to assist 12,986 displaced persons, including 2,192 children under 5, 900 pregnant women and 5,922 youth/adolescents under 18.

To improve the use of services and particularly immunization, UNICEF Congo is supporting the Government to establish a system to monitor and improve the immunization status of children using mobile technology. A digital health system is also being set up using the RapidPro application and U-Report.

Regarding epidemic prevention and response, UNICEF Congo contributed to strengthening the national response to two threats. For yellow fever in neighbouring countries (Angola and the Democratic Republic of the Congo), UNICEF Congo supported the Government of the Congo to set up a response plan for yellow fever and cholera (with three deaths out of 18 cholera cases reported in Brazzaville). Technical assistance was also provided to enable the Government to develop a cholera response plan.
OUTPUT 1 By 2018, at least 80 per cent of health districts in the Congo have immunization coverage for all vaccines greater than 90 per cent

Analytical statement of progress:
The downward trend in vaccination coverage observed in 2015 was confirmed in 2016. According to EPI data, no health district had more than 90 per cent immunization coverage for all antigens. The proportion of health districts that achieved coverage above or equal to 90 per cent in the polio campaigns was 58 per cent. During the campaign against measles organized in the departments of Brazzaville and Pool, approximately 84 per cent of children were vaccinated.

UNICEF support has enabled EPI to obtain an adequate quantity of vaccine supplies requested by the country. The measles vaccination campaign in the departments of Brazzaville and Pool were fully funded by UNICEF Congo. UNICEF Congo and WHO provided financial and technical support for EPI in the organization of two national polio immunization campaigns in 2016 and the introduction of the injectable polio vaccine in routine immunization.

The Congo received funding from the GAVI Alliance as part of the HSS project, with emphasis on routine immunization and the transition plan. UNICEF and WHO provided technical support to the MoHP on the implementation of the project and the development of the transition plan. Since then, logistical equipment such as vehicles, motorcycles, boats, refrigerators and computers has been delivered to some health districts to enable them to boost their performance mainly in routine immunization. These health districts were also supported in the development of micro-plans, especially the communication plan on routine vaccination.

Moreover, in the framework of the GAVI Alliance-funded HSS project, UNICEF, in collaboration with the MoHP as well as mobile phone companies, provided technical support to ensure the use of mobile phones to boost routine immunization coverage.

OUTPUT 2 By 2018, at least 80 per cent of health structures in the 15 targeted health districts provide IMCI at all levels (health centre and communities)

Analytical statement of progress:
The Congo has obtained a grant from GAVI Alliance to finance the HSS project to increase immunization coverage in the country. This project has two components: the institutional component implemented with the technical support of WHO and the community component implemented by UNICEF Congo.

In 2016, using vaccination as a gateway, UNICEF Congo has engaged seven health districts targeted by this project in a process of setting the conditions for the implementation of community-based integrated maternal and child care. Thus, 14 health areas in these seven health districts carried out enumeration at the household level and advocated for community involvement in the process. In these health districts, community workers were identified to carry out home visits for communication, follow up and management of simple cases. A guide is being developed to serve as an orientation for the work of the extension health workers.

Two innovations have been included in the GAVI-funded project: the use of T4D with SMS to boost demand for immunization and the introduction of the PBF scheme. This innovation is meant to improve the accountability of key actors and motivate them to achieve results. Implementation tools were already produced and validated with the collaboration of all involved partners. The tools include design of the PBF approach, development of protocols and development of contract templates for entities and structures at various levels. Actors
involved in the implementation (community health workers, health service providers, etc.) will get incentives based on their performance. A similar scheme will also be used to provide incentives to health institutions to boost their performance.

OUTPUT 3 By 2018, at least 90 per cent of pregnant women benefit from four antenatal clinics in the 15 targeted health districts

Analytical statement of progress:
MICS 2015 data confirmed the high newborn mortality rate (21 per 1,000 live births). This represented approximately 40 per cent of the under-five mortality rate. Ninety per cent of newborn mortalities occur in hospitals, and the main causes are respiratory distress, prematurity and infections.

These data are in line with the 2014 study on the unmet need for emergency obstetric and neonatal care, which contributed significantly to the increase in newborn deaths. To improve this situation, UNICEF supported the MoHP to develop a community health-based approach policy, which includes newborn care. The proportion of facilities providing delivery services that have guidelines for essential care for childbirth increased from 30 in 2015 to 50 in 2016.

In 2016, UNICEF, UNFPA and WHO assisted the MoHP to review the roadmap for reducing maternal and infant mortality.

OUTPUT 4 By 2018, at least 70 per cent of under-one children receive quality postnatal care at least two days after delivery in the 15 health districts

Analytical statement of progress:
In 2016, coverage of postnatal care was at 80 per cent (General Directorate of Population). Thanks to the support of WHO, UNICEF and UNFPA, since 2015, the MoHP has developed and validated a scorecard for the maternal, child and newborn platform that allowed health personnel to effectively monitor progress on the implementation of high-impact interventions for maternal and child survival. Despite this high percentage, several efforts still have to be made, notably in the training of qualified personnel, the coverage of BEmONC facilities and the supply of drugs.

OUTPUT 5 By 2018, at least 80 per cent of households have insecticide-treated nets

Analytical statement of progress:
In 2016, Congo was hit by an economic crisis following the fall in the price of oil. This situation reduced the MoHP budget, thus preventing the acquisition and distribution of insecticide-treated nets.

OUTPUT 6 Effective preparedness and response to emergency situations regarding child survival and development (Early Warning Early Action)

Analytical statement of progress:
As was the approach in 2015, the UNICEF Congo humanitarian response in 2016 was related to two broad types of emergencies: support to refugees and epidemic prevention and response.

1. Support to refugees:

UNICEF Congo was on the ground in the Likouala Department (northern Congo), which hosts the majority of all refugees in the country (30,278 from the Central African Republic
and 8,000 from the Democratic Republic of the Congo), and the Pool Department, where more than 15,000 people were forced to flee their homes due to political instability in the aftermath of the March 2016 presidential elections.

Emergency response in 2016 aimed to provide comprehensive primary health care services, both preventive and curative. In 2016, 25 per cent of refugees and host community households received information on health, hygiene and referral systems for health services through community health workers trained and deployed by UNICEF.

Nearly 7,459 children aged 6–59 months were screened for malnutrition in the Likouala Department (Bétou District). The 582 children with severe acute malnutrition were admitted into the programme, and 570 were discharged and 555 recovered, representing a recovery rate of 98.9 per cent. Overall, 0.4 per cent died and 0.7 per cent defaulted. These rates conform to Sphere standards.

UNICEF Congo provided technical, financial and material support to implementing partners, which contributed to improving IYCF interventions. A total of 1,048 parents and caregivers of children aged 0–23 months received IYCF counselling and were empowered to prepare complementary feeding recipes for their children. Stunting among children under 5 declined from 48.7 per cent in 2014 (Standardized Monitoring and Assessment for Relief and Transitions survey conducted by UNHCR, UNICEF and WFP in Bétou in 2014) to 42.4 per cent in 2016 (JAM conducted by UNHCR, UNICEF and WFP in June 2016).

The decrease may be attributed to the implementation of IYCF interventions in health facilities and communities through 80 community health workers.

In the Pool Department, UNICEF Congo is providing emergency assistance to 15,000 internally displaced persons through non-food items, handwashing equipment, construction of emergency latrines and temporary showers, as well as medical supplies.

2. Epidemic prevention and response:

The Congo faced cholera, yellow fever and measles outbreaks in 2016. As a preparedness measure for the yellow fever outbreak that struck Angola and the Democratic Republic of the Congo in 2016, UNICEF Congo supported the Government to establish a yellow fever response plan.

In response to the cholera outbreak, which led to three deaths out of 18 cases reported in Brazzaville, UNICEF Congo provided technical assistance that allowed the Government to develop a cholera response plan.

A measles outbreak took place in Pointe Noire in 2015. The outbreak spread to other departments in 2016 (Niari, Brazzaville, Bouenza, Pool and Cuvette). UNICEF Congo supported a measles campaign in three departments (Bouenza, Brazzaville and Pool) that were referred as high risk. UNICEF Congo provided vaccines and supported social mobilization activities around the campaign. Eighty-eight per cent of children under 5 (about 165,000 children) were vaccinated, dewormed and supplemented with vitamin A once in 2016.

OUTPUT 7 By 2018, all 15 targeted health districts have an annual action plan based on bottleneck analysis

Analytical statement of progress:
The year 2016 was the starting point for the effort to scale up planning based on the analysis of bottlenecks and monitoring in the Congo. To facilitate this scale up, UNICEF Congo
developed a guide on decentralized planning and equity monitoring. A pool of national trainers was created. WHO, which received funding from GAVI Alliance to support the strengthening of the health institutions, used this guide and the national pool of trainers to support the organization of decentralized planning workshops in seven health districts where the project is implemented.

Using the same guide, the Government, with the support of UNICEF Congo and the World Bank, organized five training sessions in five regions, involving 15 mayors of urban communities, 26 senior staff members at the regional level, 10 general secretaries, 24 senior staff members at the sectoral level (health, education, birth registration and social affairs), chiefs of health districts, 16 school district officials and 11 birth registration officials. These trainings, which used HIV/AIDS as an entry point, have enabled urban and suburban communities to develop micro-plans at the local level to improve access for children, particularly indigenous children, to basic social services.

In 2016, seven health districts organized decentralized plan reviews under the presidency of the head of the region. These reviews were used to analyse bottlenecks and underline the progress made since the plans were drawn up. In five of the seven districts, there was a significant increase in the use of health services. For instance, in these districts: 1) the use of refocused four antenatal care visits with HIV screening increased from less than 40 per cent to more than 55 per cent (the national average was 30 per cent according to health facility data); and 2) the proportion of children who obtained three doses of pentavalent vaccine increased from 80 per cent to 91 per cent. It should be noted that the proportion of women receiving four refocused antenatal care visits with HIV testing would have been much greater if health districts were regularly supplied with screening tests and medicines. The main constraint remains the financial contribution of the Government to purchasing vitamin A capsule, mebendazole and supporting operational costs.

OUTPUT 8 By 2018, all targeted health districts implement monitoring exercise (L3 monitoring)

Analytical statement of progress:
In 2016, nine additional districts integrated MoRES into their work processes. This brings the number of health districts that are currently using MoRES to 15. Besides the health sector, MoRES includes primary education and protection (birth registration). Led by mayors and heads of districts, MoRES gives an opportunity to integrate all services at the local level by responding to the question: is every child, according to his age, without any discrimination, receiving the required package of services? In 2016, each health district organized two monitoring sessions on average, which is 50 per cent of the performance rate according to initial planning.

For example, in the Lékoumou Department under the leadership of its Prefect, the workshop on the ownership of the 2015–2020 plan to improve the registration of births enabled more than 50 actors (sub-prefects, mayors, general secretaries, civil servants of different allied sectors and heads of districts and villages) to gain a common understanding of the issues impeding poor and indigenous children’s access to social services and to commit themselves to the objective of “zero child (indigenous and Bantu) without a birth certificate in the districts of Sibiti and Zanaga of the Lékoumou Department”. Each district and urban community (eight entities) has an operational micro-plan on this commitment.

The systematic progress monitoring and reduction of bottlenecks indicate significant improvement in birth registration with an increase from 60 per cent in 2015 to more than 100 per cent in 2016.

The workshops on the use of services have enabled all actors to develop, in a participatory
manner, micro-plans of their districts and to assess the progress in the removal of bottlenecks. From one workshop to the next, a significant increase in the use of services among the population, especially children and women, has been noted. The proportion of women who received four antenatal clinics visits with HIV testing for prevention of mother-to-child transmission increased from 44.2 per cent in May 2016 to 56.84 per cent in August 2016.

To achieve this result, the Government, with UNICEF support, organized five training sessions in five departments. Participants included 15 mayors of urban communities, 26 heads of department, 10 general secretaries, 24 departmental directors of sectors (health, education, birth registration and social affairs), a number of chiefs of health districts, 16 school district officials and 11 birth registration officials. These training sessions, which used HIV/AIDS as an entry point, have enabled urban and suburban communities to develop micro-plans locally in order to improve access for children, particularly indigenous children, to basic social services.

In terms of lessons learned, because of its highly participatory nature, the process built strong government ownership. Where decentralized government authorities are really involved, especially mayors, commitments and results are significant.

**OUTPUT 9**  By 2018, package of high impact interventions on child survival will be reflected on all policies and other strategic documents at national and decentralized levels

**Analytical statement of progress:**
With the support of UNFPA, UNICEF and WHO, the MoHP has been developing and validating a dashboard for the maternal, child and neonatal platform since 2015 that will enable health staff to effectively monitor the progress made in the implementation of high-risk interventions for child survival. This dashboard serves as a basis for decentralized planning exercises for women and children’s access to the high-impact service packages for reducing morbidity and mortality in children.

**OUTPUT 10**  Health programme coordination is effective and efficient

**Analytical statement of progress:**
The CCIA, a mechanism involving all immunization partners, met regularly in 2016. A total of four meetings were held, meeting the planning target. Unfortunately, there is a low level of representation and poor ownership of this mechanism at the national level.

In the coordination of the UNDAF action plan, only one meeting was held.

Regarding the management of the programme, DCT were managed fairly, and all reports to donors were transmitted on time. The utilization level of all expiring grants was close to 100 per cent.

**OUTCOME 3**  By 2018, programme coordination is effective and efficient

**Analytical statement of progress:**
According to the Multiple Overlapping Deprivation Analysis conducted in 2016, malnutrition is one of the two main areas of deprivation affecting children under 5. The results therefore seem to indicate that the nutritional status of children under 5, pregnant women and lactating women is improving. In fact, malnutrition among children under 5 dropped from 24.4 per cent in 2011 to 21.3 per cent in 2015 at the national level, and exclusive breastfeeding increased from 21 per cent to 32.9 per cent.
This year, the legal and institutional framework has been reinforced through the development and validation of three strategic documents: 1) the national strategy for control of micronutrient deficiencies, including the action plan; 2) the national strategy for IYCF; and 3) the recipe guides for complementary feeding of children aged 6–23 months.

Resource mobilization was one of the priorities for UNICEF Congo. The UNITLIFE initiative, which will contribute to the global effort to fight malnutrition by using 10 cents for every barrel of oil produced, moved forward significantly in 2016 with the signature of the contribution agreement of US$10 million by the Secretary-General to the President. However, the disbursement did not follow due to the economic and financial crisis the Congo is facing due to the drastic drop in oil prices globally.

UNICEF supported the budget-tracking exercise in the Congo, the results of which were presented at the Nairobi workshop by the SUN focal point, the Secretary-General to the President. The results of this exercise indicated that limited investment funds have been allocated to nutrition in sectoral budgets (5.9 per cent for nutrition and 3 per cent for nutrition-specific interventions). Recommendations have been formulated by the SUN focal point for substantially increasing allocations to nutrition in sectoral budgets.

In addition, the Congo hosted a regional workshop, ‘Repositioning Nutrition as a Development Factor’, with the financial support of the UNICEF West and Central Africa Regional Office, FAO and WFP. This meeting was attended by seven countries from ECCAS. Specific roadmaps for the coming years were developed with clearly defined actions and responsibilities and an increased commitment to finance nutrition interventions. The workshop also issued the Brazzaville Declaration on repositioning nutrition as a development factor. The Declaration is planned to be presented at the next meeting of Heads of State of ECCAS, for their approval.

The multi-sectoral coordination platform was strengthened in 2016 through coordination meetings, including SUN teleconferences, which involved stakeholders at different levels (key ministries, civil society, academics and the private sector).

UNICEF Congo provided technical support to develop the institutional and operational capacity of the Food and Nutrition Division and implementing partners to improve results for children. This included a coordination meeting, programmatic visits and participation in regional trainings such as on nutrition-in-emergencies.

The mid and annual reviews of the UNDAF annual action plan were conducted in 2016 with the involvement of all partners.

A joint project with WFP for the fortification of food with micronutrients was developed. Through this joint project, UNICEF Congo and WFP conducted advocacy targeting the Ministry of Industry to accelerate the funding of national food fortification. Technical support was provided to WFP to carry out a study on food consumption patterns using the Fortification Rapid Assessment Tool methodology. The results were meant to inform the national planning of food fortification programmes. The final report of this survey was validated by the Ministry of Industry, and a commitment was made to finance the national food programme.

In 2016, UNICEF Congo support also contributed to the following key results:

The launch of the first round of vitamin A supplementation for children was integrated into the second round of the polio campaign, and 82 per cent of children aged 6–59 months received vitamin A supplementation. Sixty-five per cent of children were supplemented during routine supplementation. UNICEF supported a measles campaign in three
departments (Bouenza, Brazzaville and Pool) that were referred to as at high-risk. Eighty-eight per cent of children under 5 were vaccinated, supplemented with vitamin A and dewormed. Polio or measles campaigns were the only opportunities to organize nationwide vitamin A supplementation.

High-impact intervention coverage was extended to 33 out of 82 health facilities (40 per cent) in the 15 targeted health districts in eight departments such as exclusive breastfeeding, quality complementary feeding after six months through communication aids. UNICEF also supported the development of a departmental action plan for implementing IYCF.

As part of the humanitarian response for the Central African refugees living in the Likouala Department, nutritional support was provided and a survey was conducted, in partnership with WFP and UNHCR, to identify their needs and develop an integrated action plan. The technical and operational capacities of the district management team were strengthened to conduct coverage-monitoring exercises in five health facilities, and recommendations were formulated to strengthen the health system in this department. A mass campaign was organized to deliver high-impact interventions for refugees and the local population, focusing on IYCF. As a result, 92 per cent of children aged 6–59 months were supplemented with vitamin A and dewormed with mebendazole.

The main challenge was the lack of funding from the Government and other donors to support the scale up of nutrition programmes in the country.

**OUTPUT 1** By 2018, at least 90 per cent of under-five children are supplemented with vitamin A and dewormed

**Analytical statement of progress:**
Vitamin A supplementation for children was integrated into the second polio campaign, and 82 per cent of children aged 6–59 months were supplemented with vitamin A. A measles outbreak occurred in Pointe Noire in 2015 and spread to other departments in 2016 (Niari, Brazzaville, Bouenza, Pool and Cuvette). UNICEF Congo supported a measles campaign in three departments (Bouenza, Brazzaville and Pool) that were referred to as high-risk. UNICEF Congo provided supplies (vitamin A and deworming tablets) and supported social mobilization activities around the campaign. Eighty-eight per cent of children under 5 were supplemented with vitamin A and dewormed.

The main constraint was the financial contribution of the Government for the purchase of vitamin A capsules, mebendazole and operational costs.

**OUTPUT 2** By 2018, at least 30 per cent of children suffering of severe acute malnutrition are screened and well managed at health centre and community levels in targeted districts

**Analytical statement of progress:**
The implementation of high-impact interventions was pursued in targeted districts to prevent stunting. These included IYCF for children, pregnant and lactating women and management of acute malnutrition. In the departments of Brazzaville, Pointe Noire, Bouenza, Likouala, Cuvette and Pool, 625 community health workers were trained on IYCF counselling services and received communication tools. They then provided IYCF counselling services to communities.

In response to the humanitarian situation in Likouala, UNICEF support enabled the delivery of high-impact interventions, both preventive and curative, to 80 per cent of refugees and at least 25 per cent of the local population.
UNICEF Congo provided financial and technical support to the district management team of Bétou to monitor the coverage of nutrition interventions and identify bottlenecks in five health facilities. In addition, the capacities of 80 health providers and 80 community health workers were reinforced on IYCF and ECD counselling in the Bétou District (Likouala Department).

Regarding the integrated management of malnutrition, due to the lack of supplies (therapeutic milk and ready-to-use therapeutic food), only 14 health facilities were targeted and received supplies to manage acute malnutrition: seven in the Likouala Department (Bétou and Impfondo), three in Brazzaville and four in Pointe Noire. Other interventions (antenatal care, growth monitoring, IYCF, vitamin A supplementation, deworming and awareness of essential family practices) were pursued in 33 out of 82 health facilities (40 per cent) in the 15 targeted health districts in eight departments.

One of the constraints was that health providers and community volunteers did not have adequate communication support to promote IYCF based on formative research with a view to effectively addressing bottlenecks. Another challenge remains the lack of funding to scale up nutrition interventions.

**OUTPUT 3** By 2018, at least three widely consumed foods are fortified with micronutrients

**Analytical statement of progress:**

In the Congo, micronutrient deficiencies are a public health issue. From 2011 to date, two widely consumed foods were fortified with micronutrients. The MICS 2014–2015 showed that iodized salt was utilized by 86 per cent of Congolese households. In the Congo, 85 per cent of wheat flour consumed by the population was produced by the company MINOCO (Minoterie du Congo), which has been fortifying with iron since 2013. In 2015, WFP and UNICEF Congo signed a Memorandum of Understanding with the Ministry of Industry to provide funds to UNICEF Congo to launch key activities such as home fortification with multimicronutrient powder and sugar fortification with vitamin A. UNICEF Congo and WFP Congo conducted strong advocacy with the Ministry of Industry to fund a joint proposal on food fortification. UNICEF Congo also provided technical support to WFP to carry out a study on food consumption patterns using the Fortification Rapid Assessment Tool methodology, the results of which will help to plan national food fortification programmes. With the aim of making the fight against micronutrient deficiencies more effective, the National Strategy to Control Micronutrient Deficiencies was validated, including an action plan of the National Commission for Food Fortification.

Although there was a specific line in the national budget for food fortification (multi-micronutrient powder, wheat flour and sugar), the funds were not released and therefore activities planned for 2016 were not implemented. Another constraint was the lack of norms on food fortification in the Congo.

**OUTPUT 4** By 2018, at least 30 per cent of households in the three targeted districts are informed on nutrition behaviours

**Analytical statement of progress:**

In 2016, UNICEF Congo contributed to creating enabling and supportive environments for the promotion and adoption of good practices on nutrition through behaviour and social change activities in the health facilities (33 out of 82) of 15 targeted districts, focusing on Brazzaville, Pointe Noire, Likouala, Lékoumou, Niari and Kouilou. In addition, communication tools on IYCF and essential family practices in nutrition were developed and distributed to community health workers and health facilities (125 primary health care facilities).

The National Strategy on Infant and Young Child Feeding was developed and validated and includes ECD and activities addressing anaemia among adolescent girls such as weekly
iron/folic acid supplementation and annual deworming. To support the empowerment of caretakers to cook with diversified local food, UNICEF Congo supported the development of a recipes guide to complementary feeding for children aged 6–23 months.

The six targeted health departments (Brazzaville, Pointe Noire, Likouala, Lékoumou, Kouilou and Niari) were supported to develop the departmental plans of action for implementing IYCF. The international code of marketing of breast milk substitutes was adapted and integrated in the roadmap issued from the regional workshop on nutrition held in Brazzaville.

As part of the humanitarian response to Central African refugees living in the department of Likouala, the capacities of 80 community health workers, including 37 women, were reinforced to allow them to provide information on good nutritional practices to 1,048 pregnant and lactating women.

OUTPUT 5 By 2018, programme coordination is effective and efficient

Analytical statement of progress:
Under the leadership of the Secretary-General to the President, the multi-sectoral coordination platform was reinforced by the participation of the Cabinet of the Prime Minister, the media, members of Parliament, the private sector and the education sector. Although considerable progress has been made, the lack of a promulgation of a decree endorsing this coordination mechanism remains the main constraint. However, the platform will be formalized by a verbal note of the SUN focal point.

Coordination meetings were held with all multi-platform stakeholders, including SUN teleconferences to share best practices with SUN countries.

The SUN implementation plan was strengthened by establishing the United Nations Network for SUN. The SUN self-assessment carried out in 2016 indicated that the Congo is on track for three indicators: bringing people together in the same space for action; ensuring a coherent policy and legal framework; and aligning actions around a common results framework. Resource mobilization remains the main challenge for this initiative.

UNICEF Congo also joined six government participants, including the SUN focal point and the Secretary-General to the President, in a workshop in Nairobi on public financing and managing results for better nutrition in SUN African countries.

UNICEF Congo supported the budget-tracking exercise in the Congo, the results of which were presented at the Nairobi workshop by the SUN focal point. The results of this exercise indicated that limited investment funding has been allocated to nutrition in sectoral budgets (5.9 per cent for nutrition with 3 per cent for nutrition-specific interventions).

Regarding the implementation of the annual work plan, quality programming of high-impact interventions was carried out and contributed to reinforcing the capacities of national partners for planning, designing, implementing, monitoring and evaluating nutrition programmes.

OUTPUT 6 By 2018, at least 30 per cent of children suffering of severe acute malnutrition are screened and well managed at health centre and community levels in targeted districts

Analytical statement of progress:
The integrated protocol for the management of acute malnutrition has been revised to integrate the 2013 WHO guidelines. A training of trainers was conducted to disseminate new orientations on the management of acute malnutrition. In addition, UNICEF Congo supported institutional capacity building of six nutrition focal points and the Food and Nutrition Service
in planning, monitoring and managing the integrated management of malnutrition (IMAM) programme.

Due to the lack of funds, it was not possible to scale up activities to manage acute malnutrition. However, 100 community health workers and 80 health workers in three health districts in Likouala were trained on management of acute malnutrition. In 14 outpatient therapeutic programmes and inpatient therapeutic care interventions, 697 children aged 6–59 months with severe acute malnutrition were admitted for treatment, and 94 per cent were discharged as recovered.

OUTCOME 4 By 2018, at least 90 per cent of the most vulnerable pregnant women, children and teenagers living in the targeted areas utilize prevention and health care services

Analytical statement of progress:

While 2015 marked an important turning point for the integration of HIV into the maternal, infant and neonatal health platform with the inclusion of HIV in the maternity health record, 2016 marked the beginning of a much more inclusive approach, with stronger integration of HIV into the health sector, education and protection through the life-cycle approach. The life-cycle approach is a holistic and participatory approach that allows the community to ensure that at every stage of life, the child is receiving all services that are available and necessary for their survival and development.

This approach is developing the capacity of both communities and their leaders to: 1) analyse on a continuous basis the barriers that limit the access of women, children and adolescents to the available services; 2) identify actions that can remove these barriers; and 3) monitor not only the implementation but also the progress made in the use of these services by the population. It is also about strengthening the health system in charge of the provision of basic social services to ensure that HIV is in all actions organized at both the community and institutional levels.

In the two departments (Plateau and Lékoumou) where this approach was developed, there was: 1) a significant improvement in children’s access to birth registration (from 60 per cent to 100 per cent); 2) more women reaching the four antenatal cares and benefiting from all HIV testing within the framework of the prevention of mother-to-child transmission (the proportion of women who had had four antenatal visits with HIV testing for prevention of mother-to-child transmission increased from 44.2 per cent in May to 56.84 per cent in August); 3) in collaboration with local education administration, health districts were organizing systematic visits to schools, colleges and high schools to detect diseases in children and adolescents attending school, including HIV; 4) teachers were regularly organizing pedagogical support activities to improve school performance and child retention in schools; and 5) participatory monitoring of equity in the use of services was part of the working standards in districts and municipalities.

This equity focus approach was developed under the leadership of the HIV component of the office because of its multi-sectoral nature. Such an approach enables better positioning on the agenda of these two pilot departments, the acceleration of access to prevention, screening and treatment for children and adolescents in order to achieve the 90-90-90 targets (90 per cent diagnosed, 90 per cent on treatment and 90 per cent low viral load) for children and adolescents. Access to HIV services for children and adolescents is now one of the areas monitored at the local level. Unfortunately, regular stock outs of supplies (antiretroviral medicines, tests) limit the effectiveness of this approach, which is already working well in the areas of health, education and protection.
OUTPUT 1 By 2015, at least 50 per cent of health structures are offering antenatal care (ANC), testing and health care to HIV positive pregnant women and their children

Analytical statement of progress:
Towards fulfilling the 90-90-90 targets, UNICEF Congo supported the widespread screening, treatment and monitoring of antiretroviral therapy for pregnant women, children and adolescents. Thus, UNICEF Congo has accompanied the country in the integration of screening and care in the monitoring tools for both the mother and the child.

Unfortunately, the frequent stock outs of supplies to prevent HIV testing and treatment for more than six months limit the country’s ability to be ambitious in regards to this goal. This is associated to the weakness of the health system, which has not be able to offer quality services to the population, including children.

OUTPUT 2 By 2015, at least 50 per cent of health structures provide testing to children and teenagers and health care to those who are positive

Analytical statement of progress:
Overall, 100 per cent of public and private health facilities with a technical platform to provide paediatric care for children living with HIV have integrated paediatric care. With the support of the Global Fund to Fight AIDS, Tuberculosis and Malaria, the programme received sufficient antiretroviral drugs for paediatric treatment.

OUTPUT 3 By 2018, at least 80 per cent of health structures are offering information to teenagers on HIV transmission

Analytical statement of progress:
Since 2013, 100 per cent of health facilities in UNICEF-targeted health districts have integrated HIV into the package for behaviour change communication for adolescents and women. This year, UNICEF Congo did not support specific action in this area.

OUTPUT 4 By 2018, programme coordination is effective and efficient

Analytical statement of progress:
In the Congo, the HIV coordination mechanism is under the leadership of the President, who leads an annual meeting to assess progress. Although the meeting has not been conducted at this level since 2014, technical meetings have been conducted at various levels. The CCM is functional and is the mechanism through which partners are discussing the HIV programme around Global Fund support. The UNDAF annual workplan is another opportunity for partners to meet, plan activities and discuss progress. Two meetings were conducted in 2016.

OUTCOME 5 By 2018, at least 85 per cent of rural, peri-urban and urban populations use potable water and 30 per cent of them use hygienic sanitations

Analytical statement of progress:
In 2016, UNICEF Congo did not have a WASH specialist and did not mobilize or receive financial resources for this programmatic component. This seriously reduced the office’s ability to support government WASH efforts. Nevertheless, UNICEF Congo actively supported the Government in the development and validation of the National Water and Sanitation Strategy. The Strategy was a major step forward, constituting a reference framework for all actors involved in the WASH sector.

UNICEF Congo also pursued discussions and advocacy with the Government to secure domestic resources to strengthen and complement the Government’s efforts to improve
population access to drinking water through the Water for All project. This project has enabled the construction of more than 4,400 water points in 2,000 villages that provide safe drinking water to about 90 per cent of the population of the project areas. As a result, despite budgetary constraints, the national budget included the line for UNICEF support, but the disbursement did not materialize. In addition, thematic funds were received by the end of 2016 from UNICEF Headquarters thanks to successful advocacy by the Regional Office. These funds will be used to increase the response for improved sanitation and community mobilization.

In the implementation of MoRES, indicators related to WASH have been included in the monitoring exercises. The mayors and heads of departments of Lékoumou and Plateaux, where the integrated model is being piloted (districts of convergence), these indicators, such as for health, nutrition, education and protection, are now part of the monitoring indicators at the community level. During the workshops, community leaders and decentralized authorities participated in the development of key messages addressing bottlenecks related to social norms and the use of water and sanitation facilities. This approach is already laying the groundwork for the ‘sanitized village’ approach that will be developed in 2017.

OUTPUT 1 By 2018, at least 40 per cent of villages in the three targeted departments are declared end of open defecation free villages

Analytical statement of progress:
In recent years, the Government made significant efforts to improve population access to drinking water through its Water for All project. This project has enabled the construction of more than 4,400 water points in 2,000 villages. In 2016, about 90 per cent of the population in the project areas had safe drinking water.

Despite the lack of staff and resources dedicated to the WASH component, UNICEF Congo continued to assist the Government to develop and disseminate updated messages on good hygiene practices in households. These messages were disseminated in the community by community leaders and decentralized authorities.

UNICEF Congo also pursued discussions and advocacy with the Government to secure domestic resources. Advocacy for resource mobilization targeted the Regional Office. As a result, despite budgetary constraints, the national budget included a line for UNICEF support even though the disbursement did not materialize. In addition, thematic funds were received recently from UNICEF Headquarters thanks to effective advocacy from the Regional Office. These funds will be used to expand the response for improved sanitation and community mobilization, especially in support of the Government’s Water for All project. The Community-Led Total Sanitation approach to end open defecation will be resumed and expanded.

OUTCOME 6 By 2018, 100 per cent of girls/boys of primary school and 70 per cent of girls/boys of first cycle of secondary school, particularly the most vulnerable, achieve quality and inclusive education, and 100 per cent of girls/boys and adolescents out of formal school benefit from alternative education.

Analytical statement of progress:
As part of its education and gender equality programme, UNICEF Congo, in collaboration with the ministries of education (basic education, vocational and technical education, higher education) and civil society organizations (the Forum of African Women for Education-Congo, the Spiritan’s Association of Congo, Talitha Koum Action, Caritas-Congo and AARREC), made significant contributions in two major strategic sub-sectors of the Congolese education system: equity in terms of access for all children and quality.
Key results were achieved through the development of strategic documents, strengthening human resource capacity and the information system, increasing the availability of curricula and manuals both for formal and non-formal education, strengthening equity and inclusion in both formal and non-formal education, with special attention to girls and indigenous populations, and responding to emergencies for schoolchildren.

Concerning girls’ education, priority was given to the finalization and validation of the National Strategy for Girls’ Education. Implementation is planned for 2017 with the objective of addressing the bottlenecks that impede girls’ achievement at all levels of the educational system.

In the framework of the partnership, UNICEF and the United Nations Educational, Scientific and Cultural Organization (UNESCO) signed in 2015 an agreement for the “training of 3,000 teachers”. As a follow up, 200 primary- and secondary-level teachers were trained in 2016 and are ready to roll out teacher training throughout the country.

The access of indigenous children to school was realized and enhanced through the support of ORA schools. UNICEF support included the allocation of incentives to teachers and non-teaching staff for their coaching and attendance, the training of 41 ORA school teachers in the use of textbooks (the educator’s guide, the language manual, the mathematics manual and the reading and writing manual). This support allowed ORA schools to operate throughout the year with 3,393 children enrolled, including 1,523 girls.

For out-of-school children and adolescents, 632 (292 girls and 340 boys) were enrolled in re-schooling centres as their re-entry into the formal educational system, 600 adolescents (332 boys and 268 girls) were trained in vocational training centres with a special focus on their future socio-economic integration and 135 teachers from re-schooling centres were trained on life skills.

In order to enable refugee children in the Likouala Department and displaced children in the Pool Department to attend school regularly, UNICEF Congo focused on education-in-emergencies by providing 9,305 pupils, including 3,721 girls, with educational kits and additional courses for low performers.

In regard to the school data collected in 2015, the validation of these data and the production of three statistical yearbooks by three ministries of education in 2016 will strengthen the Education Management Information System.

In two modelling zones (in the Lékoumou and Plateaux departments), the implementation of MoRES made it possible to identify the major bottlenecks that affect primary education and design micro-plans in close collaboration with front-line actors.

**OUTPUT 1** By 2018, access to basic education for girls, adolescents and indigenous children is increased including actions on school readiness

**Analytical statement of progress:**
Girls’ access to basic education is still a major concern in the Congo. The MICS 2015 showed that gender parity was achieved in the Congo both at primary and secondary levels, with a parity index of 1.003 for primary school and 1.015 for the first secondary cycle, slightly favouring girls. However, analysis of disaggregated data showed that there are still some disparities between girls and boys with regards to access to education in some rural departments.

In 2016, UNICEF Congo included girls’ education at the lower secondary level among the priorities of its gender action plan, focusing on the revision of the national strategy for girls’
education and its action plan. UNICEF Congo therefore supported the three ministries of education to develop and validate the national strategic document for girls’ education and an action plan. The process also involved the Ministry for the Advancement of Women and the Integration of Women in Development and the Forum of African Women in Education-Congo. Its implementation, scheduled to begin in 2017, will contribute to improving access and retention of girls, particularly in secondary school, their participation at all levels of the education system, and strengthening institutional capacity for girls’ education.

OUTPUT 2 By 2018, quality of education is improved for all children, girls and boys, including the most disadvantaged

Analytical statement of progress:
The quality of education depends largely on the quality of the curricula and the availability of teachers in terms of number and performance. In this context, UNICEF Congo targeted two outputs in 2016: 1) training 200 primary and secondary school teachers; and 2) validating the study on the situation of teachers in primary and secondary education.

Through a partnership agreement signed between UNICEF Congo and UNESCO in 2015 on training 3,000 teachers, pedagogical supervisors trained as trainers in 2015 trained 200 primary and secondary teachers in 2016. These teachers have acquired transversal skills that will enable them to better train students in 2017 and beyond and contribute to improving the quality of education.

To improve the performance of Congolese schools and achieve the objectives of quality education, the Ministry of Basic Education, with UNICEF support, validated a study on the situation of teachers in primary and secondary education conducted in 2015. The aim of this study was to formulate recommendations for more effective management of teachers. In 2016, a roadmap for the implementation of the recommendations was adopted. The implementation of the recommendations of this study is planned for 2017.

OUTPUT 3 D’ici 2018 la SSE 2015-2025 est mise en oeuvre

Analytical statement of progress:
With the support of the education sector technical and financial partners (UNICEF, UNESCO, WFP, the World Bank and the French Development Agency), a workshop in 2016 on the Sectoral Strategy of Education for the period 2015–2025 was organized with the support of UNICEF Congo, to facilitate training for staff of the three ministries of education on the use of this educational policy document. Through the organization of three field missions and a national workshop with the support of UNICEF Congo, a national action plan and 12 departmental action plans for the implementation of this educational policy for the period 2017–2018 were developed and validated.

OUTPUT 4 By 2018, in community preschools, re-schooling centres and ORA schools in the six departments where the programme activities are implemented, the enrolment rate in non-formal education increases by 10 per cent

Analytical statement of progress:
In order to improve the re-schooling of out-of-school children and adolescents, including indigenous children, UNICEF Congo targeted as outputs: 1) the training of indigenous children in ORA schools; 2) the training of ORA school trainers and re-schooling centre trainers; 3) the training of out-of-school children in re-schooling centres; and 4) the training of out-of-school adolescents in vocational training centres.

Concerning the access of indigenous children to basic education in the Likouala Department, UNICEF support to the Spiritan’s Association of Congo enabled the NGO to carry out
awareness missions to indigenous communities, in collaboration with the Ministry of Basic Education. Through these field missions, 4,348 indigenous children, including 2,099 school-aged girls, were identified and enrolled in ORA schools.

Among these registered indigenous children, 3,393, including 1,523 girls, attended the entire school year and 2,363, including 1,014 girls, were admitted. Thus, the retention rate was 78 per cent (73 per cent girls and 83 per cent boys), and the admission rate was 70 per cent (67 per cent girls and 72 per cent boys).

To improve the quality of education in ORA schools and re-schooling centres, UNICEF Congo, in collaboration with the Ministry of Basic Education, drafted a training strategy for 116 trainers. In this context, 41 teachers from ORA schools were trained to better manage the textbooks received in 2015 (the educator’s guide, the language manual, the mathematics manual and the reading and writing manual for ORA schools). Some 135 teachers from re-schooling centres were trained on life skills.

As part of the pilot project on empowerment of out-of-school youth in four departments (Brazzaville, Pointe-Noire, Sangha and Likouala) funded by the Government of Japan with the support of UNICEF Congo, 124 pedagogical actors were trained in the pedagogical management and animation of re-schooling centres. UNICEF Congo support to the NGO Talitha Koum Action enabled it to conduct outreach missions to out-of-school children in these four departments, in collaboration with the General Directorate of Literacy of the Ministry of Basic Education. Through these field missions, 1,232 children were identified and enrolled in non-formal education centres. Among these children, 632 (292 girls and 340 boys) were trained in re-schooling centres with the objective of supporting their enrolment in the formal education system, and 600 adolescents (332 boys and 268 girls) were trained in the vocational training centres in hotel catering, sewing, hairdressing, masonry, welding, carpentry, silk screening, electricity, market gardening and plumbing.

**OUTPUT 5** By 2018, all children in emergency situations benefit from the package of essential services of education in accordance with UNICEF’s Core Commitments for Children in Humanitarian Action

**Analytical statement of progress:**
The humanitarian situation in the Likouala Department, particularly in Bétou and Ikpengbele, is marked by the presence of refugees from the Central African Republic and the Democratic Republic of Congo due to the political/military crises in those countries.

In the Likouala Department, through the humanitarian project, ‘Promoting a holistic and quality response to the living conditions of the Central African Republic and the Democratic Republic of the Congo refugees’, 8,912 refugee children (3,653 girls and 5,259 boys), 6,571 primary school pupils (2,628 girls and 3,943 boys) and 1,216 secondary school pupils (486 girls and 730 boys) were enumerated.

With UNICEF support, 30 educators from the community awareness centre and child-friendly spaces and 64 teachers in the organization of tutoring courses for refugee and other pupils were trained. In addition, 7,787 primary and secondary school pupils (3,114 girls and 4,673 boys) received school supplies, including school bags, notebooks, pens, pencils, erasers, rulers, compasses, squares, reading books and mathematics books. More than 1,700 primary and secondary school children benefited from additional courses designed to improve their performance. UNICEF Congo also supported the organization of two editions of recreational and sportive days that allowed more than 2,000 students from primary and secondary schools in Bétou and Ikpengbele to enjoy time together around soccer, dance and other activities.
In 2016, the post-electoral context in the Congo was marked by political tension following the presidential elections, which caused massive population displacement from the Pool Department. In this context, UNICEF Congo worked in 2016 to equip students in emergency situations with school kits. In the context of the emergency, 1,518 displaced primary school pupils (911 boys and 607 girls) were identified. UNICEF Congo provided displaced students with school kits (school bags, notebooks, pens, pencils, erasers, rulers, compasses, squares, reading books and mathematics books).

OUTPUT 6 By 2018, decentralized planning and monitoring are implemented in two districts.

Analytical statement of progress:
In 2016, UNICEF Congo targeted two outputs:

1. The validation and dissemination of school statistics collected in 2015 within the three ministries of education: With UNICEF support, each ministry of education organized a validation workshop of the statistical yearbook. These three documents, which inform the user about the national educational system’s school indicators, contributed to strengthening the Education Management Information System. Secondary analysis of these statistics will provide ready-to-use data and information on the education system.

2. The implementation of MoRES in Lékoumou and Plateaux departments to identify the bottlenecks that affect the quality of education: In the two modelling zones (Lékoumou and Plateaux departments), the implementation of MoRES, with the support of UNICEF Congo, enabled 160 local actors to be trained, including 95 in the Lékoumou Department and 65 in the Plateaux Department. It also improved their knowledge on the bottlenecks that affect the quality of education. The preliminary analysis of the school data collected on the 2015 school year showed that school indicators (enrolment rate, completion rate, parity between girls and boys) at primary and secondary schools are slowly improving in the two modelling areas. For example, the admission rate of indigenous children increased from 35 per cent to 40 per cent in 2015.

The availability of three-month micro-plans for each department is an important step towards the improvement of the pupils’ educational achievements.

OUTPUT 7 By 2018, programme management and coordination are effective.

Analytical statement of progress:
Technical support for the implementation of programme activities was performed by programme staff and consultants, as planned. This strategy will be pursued and strengthened to ensure that UNICEF Congo has the tools, skills and resources (both financial and human) needed to implement the national/departmental education sector action plans and the National Plan on Girls’ Education.

In terms of education section programme coordination and management, the main achievements were: 1) annual report and midterm report (six months) on the UNDAF basic education results group; 2) no outstanding DCT of more than nine months; and 3) expired grant in 2016 with 100 per cent utilization rate.

OUTCOME 7 By 2018, 50 per cent of girls and boys, especially the most vulnerable, are better protected against abuses, violence, exploitation and discrimination.

Analytical statement of progress:
Since 2014, the Congo has been investing in strengthening the child protection system. A budgeted strategic and operational framework has been established to launch the pilot
project at the decentralized level in Brazzaville and Sibiti.

In 2016, UNICEF Congo mainly supported operational capacity-building activities. More than 200 professionals and community actors were trained in the management of the 26 existing community mechanisms for the protection of children. Nevertheless, the challenge of operationalization remains critical. This pilot phase is still fragile.

UNICEF Congo support to civil society organizations (Actions de Solidarité Internationale and Espace Jarrot) helped to improve the situation of 400 children deprived of parental care (310 boys living in the street, 60 girls working in prostitution and their 30 children).

Currently the results in regards to child protection have suffered due to the lack of a legal framework. Despite daily and concerted advocacy aiming to consolidate the legal framework, decrees related to legislation for the protection of children and indigenous peoples have not yet been adopted and published by the Government.

UNICEF Congo has supported some initiatives to accelerate progress for children in the Congo, including through its key role in strengthening the capacity of civil registries and advocating for greater government commitment.

In 2016, the country hosted a pre-assessment mission of the Africa Program for Accelerated Improvement of Civil Registration and Vital Statistics with the support of partners (ECA, African Development Bank, WHO, UNFPA, UNICEF and UNHCR). This process created conditions for interoperability among the various services involved in the civil registration process and will result in a budgeted action plan to sustain the improvement of civil registration and the vital statistics systems. Although the birth registration rate in the Congo is approximately 96 per cent, this evaluation will allow for a deeper analysis of national disparities and improve the likelihood of resource mobilization. The next evaluation is planned to take place in 2017.

In 2016, the Congo also hosted the third annual meeting of the Community of Practice on Cash Transfers in Francophone Africa with the support of UNICEF and partners such as the World Bank and the French Development Agency. This important meeting of professionals helped to strengthen the understanding of the holistic concept of social protection in the Congo.

In 2016, the Government, through the Ministry of Social Affairs, Humanitarian Action and Solidarity accelerated the implementation of the social protection programme largely through the Lisungi project, which involves social cash transfers to poor households and elderly people. UNICEF Congo accepted the government request to develop a communications project aimed at helping beneficiaries meet the project requirements for eligibility, namely the use of basic social services (health, education and birth registration). To this end, and to strengthen the overall programme, UNICEF Congo introduced an innovation that consists of using PBF for key actors whose services are critical to the results. These key actors include community workers, social workers and the decentralized institutions of the Ministry of Social Affairs, Humanitarian Action and Solidarity.

UNICEF Congo, as lead agency for advocating for the rights of indigenous minorities in the Congo, continued to consolidate strategic partnerships and multi-stakeholder coordination. In this regard, the results of the evaluation of interventions aimed at improving the conditions of indigenous minorities were disseminated at a high-level restitution meeting. Partners expressed their commitment to the development and funding of a future joint programme on indigenous minorities.

The implementation of MoRES with the integrated thematic approach resulted in significant
progress regarding birth registration. For example, in the intervention areas (Sibiti and Zanaga), birth registration increased from 60 per cent in 2015 to more than 100 per cent in 2016.

Under the leadership of the Prefect, a workshop on the appropriation of the 2015–2020 plan to improve birth registration enabled more than 50 actors (heads of districts, mayors, general secretaries, civil servants of different sectors and chiefs of villages) to develop a common understanding of the issues and commit themselves to the objective of “zero child (indigenous and Bantu) without a birth certificate in the districts of Sibiti and Zanaga of the Lékoumou Department”. Each district and urban community now has an operational micro-plan that includes birth registration.

National capacity to better protect children from violence, abuse and exploitation in humanitarian situations was strengthened throughout the year. In the Likouala Department (northern Congo), UNICEF Congo promoted a holistic response and substantively improved the living conditions of refugees from the Central African Republic and the Democratic Republic of the Congo. This project was funded by the Government of Japan and implemented through partnerships with civil society organizations (Terre Sans Frontière and AARREC). Key results included improved quality of services through: 1) the treatment of 1,500 children of which 57 per cent were girls traumatized by violence; 2) the management of child-friendly spaces where 1,253 children aged 2–5 years old, including 1,042 refugees (83 per cent), were safe and received stimulation and food to improve their cognitive, physical and emotional development; and 3) the referral of 144 children with special needs to specialized facilities.

In response to the humanitarian crisis in the Pool Department, UNICEF participated in two joint situation assessment missions and is currently providing, in collaboration with the national team trauma-counselling and the Association of Educators for Development, psychosocial and protection support to affected children.

**OUTPUT 1** By 2018, a national child protection system is developed in accordance with the National Social Policy and Action Plan

**Analytical statement of progress:**
As part of the process of strengthening the child protection system, UNICEF Congo has primarily supported operational capacity development activities with more than 200 professionals and community actors trained in managing, 26 community-based protection of children in the two pilot areas (Brazzaville and Sibiti).

This pilot experimentation of a systemic approach at the decentralized level, is a cornerstone to develop an efficient national child protection system. Indeed, this project implemented in two different contexts (urban/rural) aims to establish mechanisms, evaluate them and capitalize on the lessons learned to generate models that can be adapted to other areas.

Despite this progress, major operational challenges remain. The pilot phase remains very fragile. The next steps are critical and decisive and include: 1) the adoption of official texts setting up the national coordination committee and the district coordination committees; 2) the implementation of the child protection systems at the two pilot sites; and 3) the supervision of child protection neighbourhoods and village committees.

UNICEF Congo has also supported other initiatives contributing to accelerating the child protection system. UNICEF Congo played a key role in strengthening the capacity of civil registries and lawyers to foster government commitment. With support from UNICEF Congo and partners (ECA, the African Development Bank, WHO, UNFPA and UNHCR), the country
hosted a pre-assessment mission of the Africa Program for Accelerated Improvement of Civil Registration and Vital Statistics. This process creates conditions of interoperability between different services involved in the civil registration process and will result in a budgeted action plan to sustain the improvement of civil registration and vital statistics systems. Although the birth registration rate in the Congo is approximately 96 per cent, this evaluation will allow for deeper analysis of national disparities and improve the likelihood of mobilizing resources.

With the support of the World Bank and UNICEF Congo, the Congo hosted the third annual meeting of the Community of Practice on Cash Transfers in Francophone Africa. This platform for the exchange of experiences helped to strengthen the understanding of the holistic approach to the concept of social protection.

As a result of Lisungi, the government-led pilot project on social cash transfers, the number of households registered in the Unified Social Register reached 19,341, and 3,455 beneficiaries were already receiving cash transfers. To support this project, UNICEF Congo mobilized resources from the French Development Agency through the Government to ensure that beneficiaries can meet the requirements for accessing cash transfers, namely the use of basic social services (health, education and birth registration). To this end, and to strengthen the overall programme, UNICEF Congo introduced an innovation that consists of using PBF for key actors whose services are critical to the results (community workers, social workers and decentralized institutions of the Ministry of Social Affairs, Humanitarian Action and Solidarity).

Despite regular advocacy, the decrees of the existing laws (child protection in 2010 and indigenous peoples in 2011) have yet to be adopted by the Government. This constraint is weakening progress.

**OUTPUT 2**

By 2018, at least 50 per cent of indigenous girls and boys in target areas receive a package of essential services including birth registration, schooling, health care and HIV/AIDS information.

**Analytical statement of progress:**

On the issue of indigenous minorities, UNICEF Congo, the lead agency, has continued to consolidate strategic partnerships and multi-stakeholder coordination. The report on the evaluation of interventions aimed at improving their living conditions was published and disseminated during the high-level meeting lead by the Ministry of Justice, Human Rights and Protection of Indigenous People. Partners expressed their commitment to the development and funding of a future joint programme on indigenous populations.

The UNICEF Congo advocacy objective was to ensure that the Government is leading efforts to protect the rights of indigenous persons and that multi-sector government entities and United Nations agencies are active participants. This is gradually being realized through positive changes in legislation in favour of these populations but also through the commitment to form a group of indigenous elite. For example, authorities are committed to taking exceptional measures to improve indigenous student retention in schools and facilitate access to universities through scholarships and accommodations on campus.

The main constraints in moving forward on issues related to indigenous populations remain the non-adoption of law enforcement decrees.

UNICEF Congo is implementing a pilot project on MoRES, targeting the removal of bottlenecks, which impede the access of indigenous persons to social service in the Lékoumou Department. Under the leadership of the Prefect of the department, the workshop on the ownership of the 2015–2020 plan to improve birth registration enabled more than 50 actors (sub-prefects, mayors, secretary generals, civil servants of different allied sectors and
heads of districts and villages) to develop a common understanding of the problem and to commit themselves to the objective of “zero child (indigenous and Bantu) without a birth certificate in the districts of Sibiti and Zanaga of the Lékoumou Department”. Each district and urban community (eight entities) has an operational micro-plan on this commitment. Significant progress was observed in birth registration with an increase from 60 per cent in 2015 to more than 100 per cent in 2016.

In terms of lessons learned, because of its highly participatory nature, the process built strong government ownership. Where decentralized government authorities were really involved, especially mayors, commitment and results were significant.

The model is being documented to inform the systematic approach to integrated programming.

**OUTPUT 3** By 2018, all boys and girls from risk areas, including in emergency settings, are better protected against violence, trafficking, abuse and exploitation.

**Analytical statement of progress:**
UNICEF Congo has actively participated in two rapid assessments (June and November 2016) in the Pool Department conducted by the United Nations in close collaboration with the Government.

In the Likouala Department, specifically in the Bétou District, UNICEF conducted an assessment of the needs of refugees in order to adjust its response.

Thanks to the project funded by the Government of Japan and in partnership with civil society organizations (Terre Sans Frontière and AARREC), significant results were achieved in regards to assistance to refugees in Likouala Department: 1) treatment of 1,500 children of which 57 per cent were girls traumatized by violence; 2) management of child-friendly spaces where 1,253 children (aged 2–5 years), including 1,042 refugees (83 per cent) were safe and received stimulation and food to improve their cognitive, physical and emotional development; and 3) the referral of 144 children with special needs to specialized facilities.

As for the Pool Department, which was prone to insecurity following the presidential elections, in collaboration with the national team trauma-counselling and the Association of Educators for Development, psychosocial and protection support was provided to affected children with CERF funding raised by UNICEF Congo during the last quarter of 2016.

**OUTPUT 4** By 2018, programme coordination is effective and efficient.

**Analytical statement of progress:**
To support the programme, UNICEF Congo remained very active and continued to act as a catalyst within the non-contributory social protection outcome group. A collaborative dynamic is gradually being built among partners. The annual workplan was drawn up and signed at the beginning of March.

Despite the disruptions related to the post-presidential election, the level of workplan implementation was found to be satisfactory. This was illustrated through the capacity building of field partners, the systematization of HACT quality assurance activities and sustained advocacy for the application of existing protection laws.

However, the coordination mechanism within the result group (regular biannual and annual reviews) needs to be strengthened to ensure the quality of implementation and performance evaluation.
Despite advocacy and resource mobilization efforts, with the exception of the emergency component, the child protection section did not receive other resources, including thematic funds.

OUTPUT 5 Preparedness and response in child protection-in-emergencies are effective.

Analytical statement of progress:
The preparation and response to the situation of girls and boys affected by various emergencies that occurred in the country in 2016 were prompt and effective.

For example, in preparation for the national elections, more than 30 partners from government, civil society and United Nations agencies attended the restitution of the Abidjan Workshop on Child Protection in Emergency Coordination. This opportunity allowed practitioners involved in this sector to set up a Child Protection Working Group. UNICEF Congo also contributed to the development of the National Strategy for Risk and Disaster Management.

At the decentralized level, in the Bétou District (Likouala Department), thanks to funds mobilized from the Government of Japan and a partnership with civil society organizations (Terre Sans Frontière and AARREC), UNICEF helped to promote a holistic response aimed at improving the living conditions of the refugees from the Central African Republic and the Democratic Republic of the Congo. Thus, the psychosocial support system put in place made it possible to take care of: 1,500 children traumatized as a result of the violence (57 per cent of girls); 1,253 children aged 2–5 years old, including 1,042 refugees (55 per cent girls) in child-friendly spaces; and 144 children with special needs referred to specialist facilities and provided with adequate care.

Finally, in order to help the population better cope with the presidential election-related humanitarian crisis in the Pool Department, UNICEF Congo participated in two joint assessment missions and is currently supporting psychosocial support for affected children in partnership with the national team of trauma-counselling and the Association of Educators for Development, a local NGO with expertise in running child-friendly spaces.

OUTCOME 8 By 2018, in an enabling social and political environment, households, communities, families and individuals, especially the marginalized groups, in the targeted interventions areas, adopt regularly, essential family practices relative to child survival, development and protection and mobilize themselves to request for access to essential services package offered to them.

Analytical statement of progress:
UNICEF Congo support to the Government in the area of C4D has been effective and targeted three categories of people: 1) the refugees from the Central African Republic and the Democratic Republic of the Congo in the Likouala Department (extreme north of the Congo); 2) families in the poorest households in three departments (Brazzaville, Pointe-Noire and Cuvette); and 3) children aged 0–11 months in seven health districts with poor immunization coverage with the objective of increasing current coverage to 85 per cent.

Specific efforts were made to ensure programming and implementation that meet quality standards, thus paving the way for effective adoption and maintenance of promoted behaviours, increased demand for basic social services and increased ability of duty bearers to express their needs and claim their rights.

New practices have been introduced in the programme, including:
PBF, to strengthen accountability at all levels, in the management of the Lisungi safety net project;

The development of new training modules such as cash transfers and productive inclusion and home economics as well as new tools on communication for behaviour change. These materials will facilitate capacity building of social workers and other officials of the Ministry of Social Affairs, Humanitarian Action and Solidarity in communication for behaviour change. They will also be used to respond to training needs within the broader framework of the C4D programme;

Communication micro-plans for health districts with important population and low immunization coverage. These plans reflect their own realities and account for their specific features. This micro-planning is realized within the project health system strengthening (GAVI Alliance/HSS). The implementation of these plans will ensure increases in demand, supply and the use of the health services including immunization services.

These are important milestones and elements in a changing global context on the survival, growth and promotion of the rights of children in the Congo.

The C4D team also influenced the strengthening of C4D activities in sector strategies and action plans through technical support during the development or validation of these documents. Examples include the National Strategy of Girls' Education, the National Policy of Community-Based Health Interventions and the review of the Gender Action Plan.

Major difficulties and constraints included:
- The socio-political unrest between March and April, which slowed programme implementation;
- The long delays for the availability of C4D materials due to the process of developing and signing the LTA with partners;
- The difficulty adjusting activity implementation schedules with partners and internally with other sections.

**OUTPUT 1** Effective and functioning coordination is guiding the planning, implementation and management of the communication programme

**Analytical statement of progress:**
The leadership of the C4D unit improved in 2016 due to the effort to streamline the working mechanisms between the different sections. This was done through the systematization of meetings and working sessions, the sharing of methodological approaches and tools, taking into account the specific needs of programmatic sections. Some key results include:

- Strengthening of the collaboration among the C4D team, the external communications team and the child survival and development C4D team for immunization as well as productions on social media and other channels, including those of the United Nations system;
- Greater integration in programming and implementation of activities among the sections to improve knowledge and individual and social behaviour change;
- Increased volume and quality of the support provided to partners, despite the negative impact of the socio-political situation and the economic crisis on achieving key results (e.g. the implementation of the C4D project with the Ministry of Communication);
Significant resources mobilized from the French Development Agency through the Government (US$406,300) for the implementation of the Lisungi social cash transfer project under the leadership of the C4D team;

Quality C4D materials and a toolkit produced through the effective involvement of all sections.

The C4D unit was also strengthened with the recruitment of an additional staff at NOB level.

**OUTPUT 2** By 2018, a partnership is effective between the Government, NGOs, associations and media for the promotion of norms and behaviour favourable to health, education and the protection of children

**Analytical statement of progress:**

C4D strategic partnership with entities related to the MoHP, the Ministry of Social Affairs, Humanitarian Action and Solidarity and the Ministry of Communication were effective. In 2016, partnerships with civil society organizations were focused on two NGOs (AAREC and Terre Sans Frontière) in order to respond to the humanitarian crisis in the Likouala Department, which hosts refugees from the Central African Republic and the Democratic Republic of the Congo.

A joint process with EPI and the Direction of Public Hygiene within the implementation of the GAVI Alliance/HSS project enabled: 1) the production of a guidebook which will serve as an assessment tool for the elaboration of communication plans in health districts to improve complete vaccination rates among children aged 0–11 months; 2) the training of 10 facilitators in the use of the guidebook; 3) the organization of three workshops on the elaboration of health district communication plans with various stakeholders; and 4) the availability of communication micro-plans for three health districts (Moungali, Ouenzé and Talangai).

The micro-plan design includes mechanisms for the effective participation of communities at all stages (planning, implementation, monitoring and evaluation) and include:

- Participation of community workers in the development of workplans with health districts;
- Periodic meetings within a framework of strengthened coordination and monitoring platforms.

With regards to capitalizing on the Congo’s experience regarding Ebola prevention, in early 2015, the Government implemented a contingency plan with the support of UNICEF Congo. Some prevention activities were completed in 2016 (awareness campaign through the media, delivery of handwashing devices in the departments, simulation exercises and the implementation of media plans for public awareness by eight media outlets, including four radio stations, three television channels and one news agency).

In 2016, a strategic partnership materialized with the Government (the Ministry of Social Affairs, Humanitarian Action and Solidarity) and the French Development Agency around the promotion of non-contributory social protection (the Lisungi project). A Memorandum of Understanding was signed between the Government and UNICEF Congo, and US$406,300 was allocated by the Government to support the implementation of the project’s C4D component.
OUTPUT 3 By 2018, actors from all levels in the Government, civil society organizations, community-based organizations in each intervention area are able to design and implement community-based mobilization interventions in favour of children

Analytical statement of progress:
Within the refugee assistance project in the Likouala Department, 90 community workers were identified and trained in essential family practices and interpersonal communication techniques. These trainings were supported by materials produced by UNICEF Congo. Thus, 59,256 people (21,492 refugees and 37,764 non-refugees) were reached in the community, and 8,933 pupils were reached in schools. The knowledge, skills and attitudes acquired by the community and the project beneficiaries will impact the health, education and protection of children and local communities in the department.

In the framework of the GAVI Alliance/HSS project, UNICEF Congo produced a guidebook that will serve as an assessment tool for the development of communication plans in health districts to improve complete vaccination rates among children aged 0–11 months. The guidebook was used in the training of 10 facilitators on the development of health district communication plans. Such plans are available in the health districts of Moungeali, Ouenze and Talangaï (Department of Brazzaville). These districts are home to groups of vulnerable populations. They are among the most populated of the country and have the lowest levels of immunization coverage. Improving their coverage will have a major impact on national coverage.

C4D is critical to increasing demand for services and adopting new behaviours, yet capacity is limited for planning and implementing C4D interventions at the central and decentralized levels within government structures, media and NGOs.

OUTPUT 4 By 2018, individuals, households and communities in the targeted interventions areas receive and share information on child survival, development, education and protection through mobile phones

Analytical statement of progress:
In 2016, UNICEF Congo took steps towards the introduction of innovations in health using T4D, which has just begun to be implemented. T4D is embedded in the GAVI Alliance/HSS project, and the new technology will be used to boost routine immunization. The initiative started in 2013, but implementation was not possible due to a lack of funding. The funded HSS project provided the opportunity to re-launch the initiative.

Through technical support from the Regional Office and the Global Innovation Center and additional financial support from UNICEF Headquarters, UNICEF Congo, in close collaboration with the MoHP, has begun to implement the project.

Key results included the availability of short code from the National Agency for the Regulation of Communication and the contract signed with the platform management using the open source RapidPro and U-Report tools. The government will lead the discussion with the phone companies on the use of SMS to remind families of vaccination schedules and reduce vaccination drop outs.

OUTPUT 5 Families and children enrolled in social protection programmes adopt essential family practices related to health, education and hygiene.
Analytical statement of progress:
In 2016, a strategic partnership materialized with the Government (the Ministry of Social Affairs, Humanitarian Action and Solidarity) and the French Development Agency around the Lisungi social protection project. A Memorandum of Understanding was signed between the Government and UNICEF Congo, and US$406,300 was allocated by the Government to support the implementation of the project’s C4D component.

The objective of the C4D component of the Lisungi project is to bring poor families who are also cash transfer beneficiaries to meet project requirements, especially the use of basic social services. This includes:

Regular visits to health centres including ante- and post-natal visits, compliance with vaccination schedule and use of growth monitoring services;

Consistent and a minimum of 80 per cent regular school attendance per month for school-aged children in beneficiary families;

Beneficiary participation in all awareness meetings organized by the project.

To implement the communication activities aimed at getting beneficiaries to adopt essential family practices, change their behaviour and respect the conditionality of the project, UNICEF Congo will rely on trained social workers. Training materials were thus produced and include:

Six modules on the following: mother and child health, keeping children in school, declaration of births and protection of children against violence, cash transfers and productive inclusion, family economics and communication for behaviour change;

Two image boxes: this work was done under the coordination of the C4D team and brought together all partners involved in the project.

Another important result is the introduction of the PBF approach into a social protection project. This innovation was meant to improve the accountability of key actors in achieving results linked to the project conditionality. For the first time, UNICEF Congo will coordinate the implementation of the activities using this PBF scheme. This is a qualitative step that has strong potential for developing capacities in the office and those of the partners in terms of PBF implementation. The preliminary key results and outputs in implementing the PBF include:

PBF implementation tools (PBF approach, protocols, contract templates for entities and structures at various levels) produced and validated with the collaboration of all partners involved in the project;

Institutional capacity for implementation evaluated for three departmental directorates of social affairs for supervision and 11 districts of social action. The evaluation identified the weaknesses of these structures and planned technical support to address and correct them.

OUTCOME 9 New outcome statement: The identity, direction and well-being of UNICEF and staff are managed efficiently and effectively to enable the achievement of results for children in the country. (Old appellation: programme support with outcome statement: management and support to the cooperation programme implementation are effective and efficient)

Analytical statement of progress:
Most of the 2016 targets and key performance indicators set in the Annual Management Plan in 2016 were met, and most of the activities were achieved. For the few activities not
achieved, the office established mechanisms for decreasing the external and internal constraints that hampered the achievement of activities.

The launch of Global Shared Service Centre activities impacted UNICEF Congo in 2016 and allowed time for focusing on the implementation of HACT assurance plans, as well as establishing a new standard operating process to ensure efficiency and efficacy in the day-to-day transactions.

The focus on staff security was important in 2016 due to the insecurity in Brazzaville and the Pool Department in the aftermath of the presidential elections.

Management worked closely with the local staff association to find innovative ways of ensuring UNICEF Congo staff well-being during the year.

**OUTPUT 1** To ensure that action related to setting the direction and governance of Country Programme operations and office structures including business continuity and risk management are in place. (Old appellation and outcome statement: Governance and management systems are effective and efficient)

**Analytical statement of progress:**

The programme team was trained on how to conduct spot checks. This investment will help the office to save money on private film consultants for spot checks.

In regards to enterprise risk management, UNICEF Congo established a mechanism to minimize the risk of travel to the field by working with United Nations agencies such as UNHCR in the field through memoranda of understanding and through the implementation of LTAs for vehicle rental.

Management also focused on the operating environment by making sure that enterprise risk management and the Early Warning Early Action system were up to date in 2016 to ensure that all aspects of risk management in operating are mitigated.

Regarding staff security, UNICEF Congo updated the Business Continuity Plan tested in 2015 with the support of the Regional Office. In 2016, UNICEF Congo reinforced and updated the Minimum Operating Security Standards. The Regional Security Adviser visited the office and made recommendations, some of which are being implemented with the support of regional contingency funds received in December 2016. One of the recommendations was to review the Fire Safety Risk Assessment, which was done in collaboration with UNDSS in Congo-Brazzaville. The test of the latter was conducted in October 2016 with some recommendations implemented.

The Annual Management Plan prepared during the staff retreat in early February 2016 was adopted during a Country Management Team meeting. The Annual Management Plan set the goals to be attained in 2016 in terms of efficiency and efficacy for the Congo Brazzaville office making the global key performance indicators standards indicators to monitor the performance of the office. During adoption by the Country Management Team, management ensured that all committees needed to ensure good governance were in place and functioning well. As a good governance practice, management has enjoyed working in close collaboration with the local staff association and made the Joint Consultative Committee meetings very active in terms of decision-making and staff consultation.

Management has encouraged the preparation and implementation of a staff retreat in the programme and operations sections and the recommendations
OUTPUT 2 Stewardship of financial resources creates the conditions to pursue country operations.

Analytical statement of progress:
UNICEF Congo successfully maintained very low DCT amounts for more than nine months throughout the year, meeting UNICEF standards and financial targets.

UNICEF Congo set up a team site using SharePoint for the Congo Brazzaville office and continued to use OneDrive and Skype for Business (in use since 2015).

An effort was made to train users on the Microsoft Office 365 tool. This was made possible by the improvement in the quality of the office’s Internet connection. In 2016, UNICEF Congo chose to boost Internet connectivity by using a local provider who provided the necessary throughput to improve the use of Microsoft Office 365.

To reduce the carbon footprint of the UNICEF Congo Brazzaville office, a major investment was made in the installation of a solar electricity system, particularly for the electricity supply of all information and communication technology equipment in the office. This system was reinforced with the purchase of new, more efficient equipment, which makes the office quite autonomous in terms of electrical energy but also contributes to reducing the carbon footprint. In the same vein, all printing equipment was configured for minimum paper consumption, and the SharePoint team site has facilitated online work and printing the minimum amount needed.

In regards to budget control and financial procedures, UNICEF Congo gained efficiency by establishing LTAs with suppliers for recurring services and goods in order to gain qualitative time in implementation. This initiative was done in collaboration with the Operations Management Team under the supervision of the United Nations Country Team. The office established 22 LTAs in the areas of transport, customs clearance, vehicle maintenance and repair, mobile technology, HACT, vehicle rental, printing and publishing for local procurement purposes.

Management established a clear mechanism for following up on outstanding items in financial management such as bank reconciliation, open payables, PAR accounts and liquidations of cash assistance. For the outstanding items in the bank, an effort was made to reduce their amount and their.

Moreover, UNICEF Congo ensured that all balances of expiring grants were kept to 0 per cent.

OUTPUT 3 Human resources have the capacities, skills, morale and motivation to support country operations.

Analytical statement of progress:
UNICEF Congo emphasized personnel performance evaluation and discussion between supervisors and supervisees as a way of improving personnel and office performance. The implementation rate of the annual training plan progressed but was impeded by the cancellation of some workshops and the shortage of available resources. This last point also applies to the implementation of the Office Improvement Plan, even though a few actions and investments to improve the quality of the working environment were implemented (e.g. renovation of the staff paillote, installation of a television set for the staff and renovation of the drivers’ room).
After the staff retreat in February 2016, UNICEF Congo came up with a learning plan that was implemented at a rate of 61 per cent (75 per cent of group learning and 48 per cent of individual learning activities were completed). All staff members benefited from the training plan through different approaches (Agora, etc.). Incomplete activities are ongoing or postponed. Only 5 per cent were cancelled.

The number of staff members fluctuated between 29 to 31 due to vacations and recruitments. The breakdown of the 31 staff members by category is as follows: 16 general service staff, 12 national officers and four international professionals with one Professional Level 4 position that has been vacant since February due to lack of funds. Gender diversity is a challenge as the proportion of female staff is 28 per cent.

The implementation of Achieve improved the performance management review. All staff (100 per cent) completed the EPAS discussion with their supervisors by the completion date. UNICEF Congo ensured the wide use of Achieve tools to enhance performance review. By the end of October 2016, 100 per cent of mid-year discussions had taken place, and two performance improvement plans had been developed.

UNICEF Congo completed three recruitments through TMS (staff and consultants), and the recruitment of three others is ongoing.

The transition to MyCase for human resources-related issues was smooth for the IP. So far, the human resources offices as focal point is doing the submission for local staff. Awareness trainings on MyCase are planned for 2017 to ensure staff comprehension and wild use of the tool. Given that the Agora training is in English, the human resources officer will need to hold complementary trainings in French.

In total, 100 per cent of the 2014 Global Staff Survey activities have been implemented.

Four operations staff funded by other resources were funded with regular resources for two months in 2016.

The United Nations dispensary is in charge of all activities regarding HIV/AIDS at United Nations workplaces for better confidentiality. They provide voluntary and confidential counselling and testing (VCCT) information and all training and information related to HIV/AIDS, so are the pep kits. They hold the United Nations day care with the participation of all United Nations staff members and dependents. UNICEF Congo needs to improve access to male and female condoms. First aid kits were available at the workplace and in vehicles.

The emergency response plan is in place, and a training in programme criticality awareness was held.

**OUTCOME 10** Country programmes are efficiently designed, coordinated, managed and supported to meet quality programming standards in achieving results for children

**Analytical statement of progress:**
The national political context has impacted programme planning and implementation. Some delays occurred in the finalization of the planning stage, and fluctuations were also observed in DCT management by partners. However, all issues were promptly and effectively addressed and did not jeopardize UNICEF Congo’s ability to meet quality standards in programme implementation.

Substantive discussions on key thematic issues and priorities during dedicated thematic programme coordination meetings allowed more inter-sectoral common understanding and
decision-making on key actions and approaches.

DCT management was impeded by the involvement of government partners in election preparedness and changes in several ministries, but these situations were promptly and effectively addressed and have been opportunities for UNICEF Congo to improve its capacity to effectively address the setbacks that emerged. However, no unliquidated DCT reached nine months in 2016. By the end of the year, effective strategies were established to increase section accountability for proactive prevention and mitigation of delays in DCT liquidation in the volatile political context.

As in 2015, in 2016, UNICEF Congo maintained good standards for donor reporting and grant utilization.

External communication and advocacy was strengthened and improved with the inclusion of new features in the UNICEF Congo social media systems. UNICEF expanded its digital media presence and engaged with new partners for wider social engagement with the broad public and the Congolese diaspora.

A HACT assurance plan was developed during the first quarter of 2016, with timely reporting as planned throughout the year and a good implementation rate at the end of the year, with 110 per cent of programmatic visits, 142 per cent of micro-evaluations, 145 per cent of spot checks and 100 per cent of audits conducted. For the first time, UNICEF Congo attempted to conduct all spot checks using its own staff; however, implementation was slow and necessitated a mix of strategies through both a consulting firm and staff. The audit implementation suffered from delays in partner acceptance of the process, but all planned audits took place by the end of the year.

In regards to its humanitarian mandate, UNICEF Congo demonstrated its performance in terms of preparedness, response and resource mobilization. Within the United Nations system, UNICEF has been instrumental in positioning the United Nations as a key actor in preparedness and response to emergencies by ensuring the update of the United Nations contingency plan and the training of key players for rapid assessment, including the Government and civil society organizations. UNICEF Congo also showed good compliance regarding regularly updating the Early Warning Early Action key actions.

The gender action plan was implemented, and a gender review is being conducted with the support of the Regional Office.

The lack of funding from domestic sources has been one of the major constraints in the implementation of the workplan. Thanks to funds raised from CERF and the supplementary budget from Japan, UNICEF Congo was able to fulfil its mandate regarding the humanitarian crisis.

OUTPUT 1 UNICEF staff and partners received guidance, tools and resources to effectively design and manage programmes

Analytical statement of progress:
All programme coordination meetings were held consistently, allowing for better follow up on programme commitments on key indicators and strengthening of cross-sectoral team thematic discussions for results delivery in a coherent and more efficient way. The modelling of cross-sectoral interventions that started in 2015 was strengthened in 2016, with some interesting results in regards to birth registration in Lékoumou Department (60 per cent of children in 2015 compared with 100 per cent in 2016).

Another effective approach to programme coordination was the introduction of new
approaches in service delivery such as PBF (in social protection and in health) and T4D (use of SMS to improve routine immunization of children). These processes involved almost all sections at both the planning and implementation stages.

Thanks to the systematic use of monitoring tools to follow up on key indicators in programme management, UNICEF Congo performed well in donor reporting, with 100 per cent of donor reports submitted on time. All grants expired with a 100 per cent utilization rate. The political context had a negative impact on DCT management performance especially during the first semester of 2016. However, delays in DCT liquidation were effectively and promptly addressed.

OUTPUT 2 UNICEF staff and partners are provided guidance, tools and resources to effectively plan and monitor programmes

Analytical statement of progress:
In the previous two years, United Nations agency workplans were developed based on the UNDAF result groups. Delays in the availability of some of the workplans were compounded by the political context. Only one of the statutory steering committee meetings was conducted. Documentation of the result group workplan on education and WASH co-led by UNICEF are available to inform the second steering committee meeting, planned for early 2017.

During the second quarter of 2016, following the presidential elections, the workplans were finalized, and implementation was accelerated, allowing all sectors to carry out key activities. However, as in 2015, access to domestic resources was the main constraint for all United Nations agencies as no funds were received from the government budget despite the inclusion of specific lines in the national budget. This was the result of the economic and financial crisis that the Congo faced due to the drastic drop in oil prices on the global market.

A participatory mid-year review of the UNDAF conducted in 2016 was an opportunity to reflect agencies’ contributions, identify gaps and discuss areas of improvement related to both content and process. The results of this review will be used to inform discussions on the next country programme document.

OUTPUT 3 UNICEF staff and partners are provided tools, guidance and resources for effective advocacy and partnerships on child rights issues with stakeholders

Analytical statement of progress:
UNICEF expanded its digital media presence and broadened its social engagement with the public as well as the Congolese diaspora.

UNICEF Congo launched its revamped website with up-to-date information, and a new visual was designed to facilitate transition towards the new unicef.org platform roll-out in 2017.

With regards to statistics, the UNICEF Congo official Facebook page is now in the top five in the West and Central Africa Region, with 11,780 registered users (77 per cent men and 23 per cent women) mostly between the ages of 18 and 34. The most effective publications in terms of reach in 2016 were: 1) human interest stories; 2) global campaign launches; and 3) vacancy announcements and data visualization infographics.

The social media publishing platform ‘issuu’ recorded valuable statistics with a total of 60 uploaded publications divided into 14 stacks spanning programme section publications and cross-sectoral productions to more strategic documents and other publications shared by
UNICEF Headquarters. ‘issuu’ is now accessible via the UNICEF Congo website and on mobile phones thanks to the application’s new mobile-friendly updates.

Lifetime statistics for all publications (since late 2014) include 1,665 reads, 20,703 impressions and seven followers. The top 10 readers around the world in last 30 days were from France (53), the Congo (41), Haiti (31), Senegal (28), Côte d’Ivoire (17), the Democratic Republic of the Congo (17), Morocco (16), Cameroon (15), Mali (14) and Algeria (9).

Several other instrumental publications were produced and are currently being copy edited and printed: 1) the MICS 2014–2015; 2) a handbook on decentralized planning in the health sector; 3) a national policy on innovative approaches to community health; 4) a national protocol on integrated action against acute malnutrition; 5) an updated image box on immunization; 6) an image box on child and maternal health; and 7) an image box on parent education, child protection, family economy and family practices essentials.

OUTPUT 4 Strategies to address cross-cutting issues related to child rights are developed and applied

Analytical statement of progress:
The difficulties following the presidential elections in March 2016 resulted in displaced populations in two departments (Brazzaville and Pool).

Thus, during the first semester of 2016, workplan implementation was slow. Anticipating the deterioration of the situation, UNICEF Congo was instrumental in supporting the United Nations processes for emergency preparedness. In addition to actively contributing to the update of the United Nations contingency plan, UNICEF Congo trained more than 40 partners on rapid assessment of humanitarian situations using the Multi-sector Initial Rapid Assessment approach.

A few days after the onset of these issues and the subsequent population displacement, the method and tools were successfully used by Caritas, United Nations agencies and the Government to assess the humanitarian situation in the Pool Department in June and November 2016, allowing for prompt responses.

UNICEF also successfully raised emergency funds through the supplementary budget from the Government of Japan and CERF rapid response funds, allowing for response to the humanitarian needs of the Central African refugee population in the north and displaced populations of the south (Pool Department).

Regarding the implementation of HACT, an assurance plan was available during the first quarter and was implemented throughout the year. Increased monitoring of projects and funds helped to raise partner awareness of quality in project implementation and accountability for expenses. Planned programmatic visits were implemented at 110 per cent, spot checks at 145 per cent, micro-evaluations at 142 per cent and audits at 100 per cent. A more systematic process of assessing the assurance activity recommendations is being planned for 2017.

UNICEF Congo’s key priority for the implementation of the Gender Action Plan were the promotion of girls’ secondary education and child protection-in-emergencies. In 2016, implementation was focused on the formulation of the National Strategy for Girls’ Education, which includes girls’ secondary education. The last gender review was conducted in 2011 with a series of recommendations. The current ongoing gender review will allow for an assessment of progress against those recommendations and provide information for next
year’s discussions on the new Country Programme. The review is also meant to be an opportunity to sharpen UNICEF Congo’s implementation of the Gender Action Plan.

**Document Centre**

**Evaluation and research**

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