Country Office Annual Report 2019
Dominican Republic

Update on the context and situation of children

Social, political and economic context of the country.

The Dominican Republic is a democratic country with a medium-high income level, and an economic growth superior to that of the region during recent years, a trend that was maintained in 2019. The year-on-year economic activity growth was 5.2% (October), with an inter-annual inflation rate of 2.2%.[1] Monetary poverty has continued reducing, dropping to 22.8% in 2018.

Despite this economic growth and the important reduction in poverty, inequality still persists. In 2018, the country had a Human Development Index of 0.745, slightly below the average for the Region (0.759), ranking 89 among higher developed countries. However, with the HDI adjusted for inequality, the country is ranked 97.[2] The GINI index has increased slightly in the last three years, from 0.433 (2016) to 0.439 (2018).[3] Investment in children increased in recent years from 1.9% of GDP in 2011 to 5.1% in 2016.[4]

However, in 2017 more than 1,3 million people aged 19 or less still lived in households with poverty income levels.[5] In the same year, 28.1% of the population under 18 lived in conditions of multidimensional poverty.[6] Poverty in childhood favors school drop-out, child marriage, teenage pregnancy, child sexual exploitation etc., as described in the following paragraph.

Situation of children in the Dominican Republic; 30 years after the Convention on the Rights of the Child.

The main violations of child rights continue to be poverty, inequality, violence (especially gender-based violence), the persistence of high maternal and neonatal mortality rates, the low quality of education, and school dropout.

Despite the high coverage of prenatal care (92.9%)[7] and the births attended in health services (97.9%)[8], the maternal mortality rate is 104.4 per 100,000 live births[9], higher than the Latin American average of 74.0.[10] The neonatal mortality rate is 20.8 per 1,000 live births, more than twice the regional rate (9.0). This rate has remained unchanged for the last two decades and represents 80% of infant mortality. 71% of these neonatal deaths occur in the first seven days of life.

However, according to preliminary Ministry of Health (MoH) data, for the first time a reduction in maternal and neonatal mortality rates was observed in 2019, dropping by 24% and 29% respectively compared to 2018. Hopefully, this trend will continue under the new Government, to be elected in 2020, and that the country will be able to achieve the SDG 3.1 and 3.2, related to those indicators.

Additionally, the country has reduced chronic malnutrition in children under 5 to 5.2%.[11] The improvement has passed (or “is above”) the regional average and could meet the SDG target 2.2.

The prevalence of HIV at the national level has stabilized at 0.8%. About 3,500 adolescents (15 -19 years old) live with HIV.[12] Vertical transmission of HIV, according to the UNAID estimate, is 6.35%, increasing to 11.25% when considering the lactation period.

Adolescent pregnancy occupies fifth place in the region and has remained constant in recent years. 21.4% of women between 20 and 24 years old had at least one child alive before 18.[13] This level has been maintained in recent years. One in five maternal deaths is an adolescent.

The country has significantly increased the number of children under 5 attended by comprehensive early childhood services, increasing from 15,000 in 2015 to 195,618 in 2019.[14] The net initial education coverage rate adjusted in 2018 was 50.2%, in primary education 92.5%, and in secondary education 70.6%. In secondary education, the professional-technical modality is 11.7%.[15] Children with disabilities face higher rates of exclusion from schools; 62% between 3 and 5 years old, 21% between 6 to 11 years old and 35% between 12 to 17 years old do not attend school.[16]

The major advance has been the right to identity. Between 2009 and 2018 the percentage of children under 5, whose births were registered, increased from 82.2% to 92%.[18] If this progress can be maintained, the SDG 16.9 can be achieved.
63% of children up to 14 years have been victims of physical or psychological violence in their homes. 3% have suffered severe punishment. In total, 12.6% of children and adolescents between the ages of 5 to 17 work.[19] 67.7% of adolescents aged 15 to 17 report having been victims of some type of violence in the last twelve months.[20] During the first 10 months of 2018, there were 5,370 complaints about crimes of sexual violence. Although the information is incomplete, at least 32% of the victims were female adolescents.[21] There is no statistical data on sexual exploitation of children, but in 2017 CONAVIHSIDA reported testing 4,405 under 18 who claimed to be “sex workers”.[22]

Child marriage and early unions (CMEU) are serious problems. 35.9% of young women married or lived in early unions before the age of 18, and 12.3% did so before the age of 15.[23] Both figures are among the highest in the Region.

Even though the coverage of the programme of conditional cash transfers Progresando con Solidaridad (PROSOLI in Spanish) reached 802,102 families with the programme “Eating is First” (Comer es Primero) in 2019[24], it has limitations in reaching the most excluded people. Adults without identity documents, including foreigners without regular residence in the country, cannot receive conditional cash transfers.

Foreign children without regular residence, especially Haitians, can access education and basic health services, that are not denied because of their immigration status. However, children without a birth registration document (Dominicans or foreigners) cannot receive study certificates after finishing school.

Emergency risk
Due to their geographical location, children in the country are exposed to tropical storms, floods, droughts and earthquakes. The country has a good ability to respond immediately to disasters caused by climatic shocks. It has a National System for Disaster Prevention, Mitigation and Response coordinated and led by an Emergency Operations Centre, and among its main tools is a Climate Shock Vulnerability Index (IVACC) that calculates the vulnerability of a home to a climate disaster and allows the immediate response to be focused.

The support after the initial response, and especially the support for poor populations that are more impoverished after disasters, is still in the process of being organized. To that end, and to improve the coordination between national emergency response institutions and social protection programmes, UNICEF is strengthening the shock-responsive of the social protection programmes, jointly with other UN agencies.

Regional events and trends
Migration from Venezuela has been on the public agenda. Between January and October 2019, 82,202 Venezuelans entered the country and 75,429 left.[25] The situation of instability in Haiti was followed attentively, but it has not generated greater migratory flows to this country. However, given that Haiti is the second largest importer of Dominican products, it seems that it will have a certain economic impact.

Approximately 209,000 immigrants who regularized their immigration status through the National Plan for the Regularization of Foreigners (2016) have renewed their residence (mostly in the “non-residents” category). Of these, 11,191 are under 18.[26]

In the second half of 2019, primary elections were held in the political parties, which resulted in a split of the party in power for 16 years. The political debate focuses on the presidential elections of May 2020.

SDGs and international commitments
The Dominican Government is strongly committed to the 2030 Agenda. To this end, in 2016 it created a High-Level Inter-institutional Commission for Sustainable Development that integrates the ministries and other Government agencies, the private sector, society and academia to coordinate the policies and programmes that seek to meet the SDGs. UNICEF actively participates in the People Subcommittee, in which it is responsible for monitoring the SDGs of the social sector, and in the Data Committee, in which it is responsible for the information for monitoring the goals.

Major contributions and drivers of results

The major contributions of UNICEF in 2019 were the **programming at scale** and the leveraging outcome level changes of two programmes that started in the previous CPD:

**Every Child Survives and Thrives**

In the framework of the UNDAF[1] outcome 2.1, UNICEF contributed in a very important way to reduce the maternal mortality rate (by 24%) and the neonatal mortality rate (by 29%), according the preliminary data of the MoH in relation to 2018, after a stagnation of 20 years. UNICEF's contribution strengthened the National Health Service (NHS) through advocacy, technical assistance and the transfer, for appropriation by the NHS, of the Mothers and Babies in Good Care initiative designed by UNICEF. That increased to 45% the number of children born in public hospitals that follow standard protocols on maternal and neonatal care.

UNICEF designed the creative innovation of the continuous quality improvement initiative “Mothers and Babies in Good
Care” in 2015, based on the external observation of compliance with protocols in clinical practice in antenatal labor care, birth, postpartum, and immediate attention to newborns and birth registration. To complete the initiative, based on its level of protocol compliance, each hospital designed and implemented an Improvement Plan.

The Initiative was implemented in some hospitals between 2015 and 2017. This Initiative was evaluated in 2018, and it was recommended that the methodology be transferred to the NHS.

In 2019, after a major effort of advocacy and technical assistance, NHS appropriated the Initiative, hired 20 staff and a coordinator for the external observations, who were trained by UNICEF, and provided doctors, nurses and equipment at various hospitals.

This year, the Initiative was implemented in 24 public hospitals, (in which 77% of the children of the total births in public hospitals were born). Each hospital was monitored twice by external observation teams from the NHS, and all hospitals are implementing Improvement Plans.

UNICEF is still leading the follow-up of the hospitals’ quality Improvement Plans, accompanied by NHS personnel, through 200 field visits to hospitals, regional health services and meetings with the national team.

UNICEF held two innovative accountability and advocacy workshops with 120 doctors, at which the directors and the heads of the departments of pediatrics and obstetrics of each hospital, as well as the regional directors, publicly presented the results of their external observations and the actions implemented from their Improvement Plans. The presentation made to the authorities, colleagues and UNICEF, and sharing of problems and good practices that have been obtained during the implementation of this initiative, were considered by all participants to be an important improvement in the strategy as well as to win the support of health personnel and directors to achieve sustainable improvement.

As a result, protocol compliance was improved, in 19 out of 24 hospitals. Nine hospitals (in which 45% of the children of the total births in public hospitals were born) achieved a compliance rate of more than 75%. These hospitals showed important reductions in intra-hospital maternal and neonatal mortality rates compared to 2018.

According to the MoH, 573 more newborns and 29 more mothers were saved in relation to 2018. The NHS Director recognized, in media and in national events, UNICEF’s Initiative “Mothers and Babies in Good Care” for its important contribution to these achievements.

UNICEF, in a joint effort with UNFPA, PAHO, Project Hope and the University of Chile, has supported the professionalization of the first cohort of 30 nurses as obstetricians and neonatologists, and jointly advocated, and achieved, an agreement with the Autonomous University of Santo Domingo (UASD) to start a post-degree course in obstetrics and neonatology directed at nurses.

This Initiative contributes to the SDG 3, the National Development Strategy Objective 2.2, the Presidential Goals and the results of UNDAF effect 2.1. It also responds to the UNICEF Gender Action Plan (GAP), promoting quality and dignified maternal care, and it has already included some practices of the humanization and the reduction of obstetric violence.

It is important to point out that in recent years the partnerships with the local private sector (Rica Foundation, Ramos Group, BHD Leon Bank and Marítima Dominicana) have mainly financed this programme.

For 2020, UNICEF will include new components in the Initiative and will create an online monitoring system of the Initiative to more easily follow the hospitals’ progress and, as a priority, it will strengthen the evidence-based advocacy with the new Government in 2020, to reconfirm this Initiative as public health policy.

Birth registration

The strengthening of the system, cross-sectoral work and political commitment increased the timely birth registration rate.

A timely birth registration pilot programme was developed in 2014 by the Central Electoral Board (CEB) and UNICEF in four hospitals. In 2015, another eight hospitals joined this programme. In 2017, an external evaluation was carried out that concluded that the initiative was successful, and that it could be scaled-up to a public policy.

With the successful evidence generated by the evaluation, the Presidency of the Republic, CEB, MoH, NHS and UNICEF signed an Inter-Institutional Agreement for the Timely and Late Birth Registration to implement the recommendations of the Committee on the Rights of the Child (CRC) for birth registration and fulfill the SDG 16.9 and the UNDAF outcome 3.1.

In 2019, UNICEF technically supported its partners to continue implementing the above-mentioned Agreement and the
recommendations of the evaluation. The commitments were periodically monitored by an Implementation Commission led by UNICEF.

As a result, the timely birth registration rates grew from 41% in 2012 to 61% in 2017, 70% in 2018 and to an impressive rate of 83% in 2019. Nationally, the percentage of unregistered children under five years (SDG 16.9.1) has decreased from 12% in 2014 to 8% in 2018[2].

After increased, and focused, UNICEF efforts, birth registration also increased in the most marginalized populations. The birth registration of the children of adolescent mothers grew from 20% in 2017 to 68% in 2019, and the birth registration in the “book for foreigners” (that does not give Dominican nationality) grew from 37% to 81%.

In the framework of the above-mentioned Agreement, the Ministry of the Presidency, in collaboration with the CEB, issued late birth registration certificates to 1,567 children under sixteen years old.

Due to the successful results, in 2019 the institutions decided to increase the prioritized hospitals from 21 to 22, (responsible for 70% of the births in all public hospitals) and the CEB expanded the civil registry offices to seven new hospitals (for a total of 63). The prioritized hospitals received technical assistance from UNICEF and its partners to implement a work plan with 36 tasks, such as leveraging technical and financial resources, assessing procedural gaps and existing bottlenecks, and increasing cross-sectoral coordination between civil registrars and health officials.

To increase awareness regarding the importance of birth registration, UNICEF and its partners addressed the demand side by producing informative material in Spanish and Creole. In addition, 2,676 people took part in informative sessions in the hospitals.

To address the supply side, UNICEF and its partners implemented capacity-building activities combined with awareness-raising sessions that reached 1,583 staff from among the health sector, civil registry officials and birth registration promoters.

UNICEF finished the implementation of the evaluation’s management response of the project, through:

a) the inclusion of a gender approach session in the training of hospital promoters, and gender-sensitive language in the information material distributed, and

b) the preparation of a resolution of the NHS reminding the health staff attending the birth as to who must sign the live birth certificate.

The country experience was singled out by the UNCT as an SDG 16+ Country Case Study to be showcased at the Global Alliance for Reporting Progress on Peaceful, Just and Inclusive Societies. Additionally, UNICEF[3] documented as a case study on how to scale-up pilot initiatives. This Initiative contributes to the UNDAF effect 3.1.4

In the year 2020, UNICEF will redouble its advocacy with the new Government, to maintain the political commitment.

One of the main contributions of UNICEF is the promotion of integrating programming in several outputs, the one implemented under the “Cause Framework” being the most successful.

Early Childhood Development (ECD)[4].

UNICEF contributed to the strengthening of ECD national policy “Quisqueya Starts with You” through integrated programming, by:

1. Improving the quality of comprehensive early childhood care services of the National Institute for Integrated Attention to Early Childhood (INAIPI) through an online monitoring system for home visits to families and by training its staff in Communication for Development (C4D).
2. Implementing an inter-sectoral initiative to include Care for Child Development for early childhood service providers.
3. Developing a communication campaign reinforcing the father’s role in the stimulation and care of his children in their first years of life.
4. Promoting family-friendly policies in the workplace, and in good business practices to make it easier for employees to take care of their children during early childhood.

A monitoring system was created for INAIPI staff in charge of supporting poor families with children under the age of five to improve their early childhood development through home visits. To this end, UNICEF developed a mobile application for
family data entry, provided tablets, trained technical teams and monitored their use. The system has been piloted in the service networks of each of the 4 municipalities prioritized. These networks serve more than 4,000 families. A total of 134 home visitors from these networks are currently using this system. The recorded data allows for the monitoring of the evolution of the families benefiting from these services, and will provide INAIPI with important information to assess the efficiency of its work.

UNICEF technically supported INAIPI in the design of material with a C4D approach to support home visitors to promote behavioral changes of families that affect their children’s development, and provided direct training to 150 home visitors using this material, and to 70 national trainers for scaling-up this training.

UNICEF promoted the coordination among early childhood service providers, and supported the strengthening of local service networks that serve early childhood, through the inter-sectoral pilot scheme for the integration of the Care for Child Development (CCD) approach in three municipalities. UNICEF has trained 40 trainers and 150 direct family service providers in this approach. These teams include top-level local technicians from several sectors such as MoH, National Health Service (NHS), INAIPI, National Council for Children and Adolescents, (CONANI), and NGOs that reach families.

As a measure of Early Childhood Development, in the Dominican Republic, only 6.4% of children aged three to four have interacted with their biological father in four activities, such as reading, singing, walking and playing, according to the MICS Household Survey 2014.

To increase this rate, UNICEF leveraged the power of business by promoting family-friendly policies.

A total of 45 companies participated in a forum organized by UNICEF on family-friendly policies in the workplace and in good business practices to make it easier for parents to take care of their children during early childhood. UNICEF advocated the extension of paternity leave, the creation of breastfeeding rooms in companies and flexible schedules for caring for their children. The paternity leave is legally only two days in the Dominican Republic. Thanks to UNICEF’s advocacy, at least 8 companies extended paternity leave from 7 to 10 days, and more companies now have breastfeeding rooms. The President of the Republic announced an extension of the legal paternity leave from 2 to 7 days for public workers.

Furthermore, UNICEF developed the “Dad All the Time” communication campaign. Fifteen companies shared “Dad All the Time” material on social networks achieving 9,583,056 interactions and reaching 2,385,012 individuals. In addition, five companies received UNICEF internal awareness talks on the importance of stimulation and care of children during early childhood.

In the second decade, UNICEF worked with adolescents on the prevention of violence in schools, the prevention of sexual exploitation and the prevention of child marriage, and it has restarted the youth participation initiative.

UNICEF is strategically positioned to promote the prevention of Child Marriage and Early Union (CMEU) for the first time in the country[5].

UNICEF strengthened the social protection system to implement the prevention of CMEU programme among its beneficiaries, and also strengthened the inter-sectoral coordination of the Social Policy Coordination Cabinet (SPCG) for the design of the National Plan for the elimination of CMEU.

In 2017-2018, UNICEF carried out important communication campaigns and studies leading the positioning of the importance of the prevention of CMEU, for the first time, on the public and political agenda of the country.

In 2019, UNICEF continued leading this agenda, jointly with the social protection programme Progressing with Solidarity, (PROSOLI), and finished the Knowledge, Attitudes and Practices (KAP) on CMEU study in 6 communities. The voices of girls and women, as well as of their male peers (2,300 people) were heard in this study. The study, with the C4D recommendations, was launched with the Vice President of the Republic and a Memorandum of Understanding (MoU) was signed by UNICEF, the Vice President, the SPCG, and PROSOLI.

Under this MoU, UNICEF implemented several initiatives to promote behavioral changes that would lead to the prevention of CMEU among adolescent girls, families and communities, in line with the UNICEF Gender Action Plan (GAP) “Targeted priorities for the Empowerment and Well-being of Adolescents Girls”, and in the framework of a C4D strategy.

UNICEF:

a) supported the institutional and community prioritization of interventions of the recommendations of the KAP on CMEU study,
b) designed of the first public project in the country to prevent CMEU,

c) developed guides to work with girls, families and communities in CMEU prevention,

d) built capacity of national and local teams, mainly from PROSOLI, on gender and social norms, child marriage and behavioral change strategies, and

e) leveraged resources to PROSOLI from the European Union (EU).

Additionally, UNICEF leads the technical assistance to the SPCG to design an inter-sectoral National Plan to eliminate CMEU. This process was started in November 2019 by the Vice President of the Republic.

UNICEF also strengthened its legislative, political and social advocacy to reduce CMEU and to establish the age of 18 as the minimum age for legal marriage through:

a) meetings with the Minister of Woman, the MoH, the President of CONANI, the presidents of commissions of the Congress, the President of the Congress and the Vice President of the Republic,

b) the presentations of the “Causes and Consequences of CMEU” to the National Commission of the SDGs (CMEU is considered by the Dominican Republic as a key accelerator of SDGs implementation),

c) the presence in multiple media and,

d) a successful Twitter strategy.

Furthermore, UNICEF designed material to prevent CMEU in secondary education, and implemented a pilot phase in 11 schools. The results are being analyzed and will be available in the first quarter of 2020.

This Initiative contributes to the country fulfilling SDG 5, UNICEF’s Gender Action Plan and UNDAF effect 2.4.-

UNFPA, UN Women, and NGOs, such as Plan International and Save the Children, are the main partners in this programme. The EU and the Generalitat Valenciana (autonomic government) are the major donors.

Due to their geographical location, children in the country are exposed to tropical storms, floods, droughts and earthquakes. UNICEF continued to include the perspective of risk-informed programming. The CPD has a product to increase the support of the Social Protection System to the most vulnerable. Because these emergencies can lead vulnerable families to poverty or worsen the situation of those who are already poor, UNICEF decided to strengthen shock-responsive social protection.

The coordination between the social protection system and the civil protection system to work in emergencies is under a limited institutional framework that does not integrate it into emergency preparedness, response and recovery.

In order to strengthen the connection between humanitarian action and development programmes, and to improve coordination between national emergency response institutions and social protection programmes, UNICEF is strengthening the shock-responsiveness of the social protection programmes, jointly with other UN agencies, as follows:

1. With UNDP, UNICEF is providing technical support for the implementation of the “Social Protection National Protocol of Action Against Climate Shocks” with the training of national agents and trainers of PROSOLI on risk management and protection of children’s rights in emergencies in two selected provinces, to promote family resilience.

2. Working with WFP, UNICEF is supporting the social protection institutions to create standard operating procedures for cash transfers in emergencies focused on the most vulnerable children, and the use of UNICEF cash transfers in emergencies with serious impacts.

In 2019, UNICEF continued its effort to promote the inclusion of children with disabilities[6].

UNICEF, together with PAHO and UNDP, leads the inter-agency project ”Developing national capacities to achieve social inclusion of persons with disabilities in education, employment and participation”. UNICEF has supported the Ministry of Education (MoE) in the initial implementation of the National Plan for Inclusive Education, launched in 2019, through technical assistance from the University of Murcia, Spain. In 2020, this technical assistance will support the expansion of the capabilities of the National Center of Resources for Visual Disability to convert it into a National Resource Center that promotes inclusive education for children with other disabilities.
Based on the evidence generated in the study of the economic impact of the Congenital Zika Syndrome on families, UNICEF advocated and provided technical support to PROSOSLI for the inclusion of children with disabilities in social protection programmes. The first cases are being studied.

In 2019, UNICEF improved its efforts to protect children on the move[7].

Based on the Best Interests of the Child and the principle of Family Unity, in 2016 the Dominican Government promised not to deport children or adolescents, pregnant women, or families with children. UNICEF continued supporting this commitment and strengthened the capacity of the migration and the child protection authorities to address the rights of children on the move, as well as the local coordination of child protection institutions and migration authorities on both sides of the Dominican-Haitian border.

To that end, UNICEF has maintained a permanent presence of observers at 3 out of the 4 official border crossing points, (Dajabon, Jimani, and Elias Pina), that offer technical assistance to the authorities to avoid erroneous deportations of children or parents, and to facilitate family reunification.

In 2019, the number of undocumented migrant children taken for deportation by Dominican authorities has been reduced by 18% in comparison to 2018. UNICEF assisted 875 adolescents, of whom 328 were reunited with their families in the Dominican Republic, and 481 children without a family in the country were referred to the Haitian Consular Authorities by the Dominican Child Protection System for family reunification. Additionally, 29 pregnant women were able to return to their homes in the Dominican Republic.

Since 2016, UNICEF, IOM and UNHCR have established a strong partnership to technically assist the Dominican Government in meeting international human rights standards in the protection of people migrating to the Dominican Republic, especially from Haiti, that continued in 2019. This has significantly strengthened the results obtained by these UN agencies.

In 2019, the EU, under the Instrument contributing to Stability and Peace, approved the joint programme "Integrated Border Management & Referral Mechanisms to Improve Protection between Haiti and the Dominican Republic" for IOM and UNICEF of both countries to work on both sides of the border. The UNICEF Dominican component aims at generating evidence, strengthening capacities of the child protection system to assist and to refer cases of migrant children, and to better inform migrant families about the rights of migrant children.

At the beginning of the hurricane season (June-November), the CO made a complete review of its response capabilities for emergencies. The risk assessment was updated, adding the scenario of increased displacement of Haitians due to the social conflicts in that country. In addition, a simulation of the activation of the Business Continuity Plan was carried out and, with its results, the Plan was updated.

[3] Latin American and Caribbean Regional Office, LACRO
[4] UNDAF outcome 3.2
[5] UNDAF outcome 2.4
[6] UNDAF outcome 3.1
[7] UNDAF outcome 3.1

Lessons Learned and Innovations

An important general lesson learned in the implementation of the first two years of the current cycle of Programme Document, is that, in many of the problems that UNICEF tackles in the country, people’s behavior has a very important role to play in improving children’s rights. For this reason, UNICEF is strengthening the C4D approach to promote behavioral changes in several of its components such as ECD, Health, and Social Protection[11], which has been added to the
Another important general lesson learned is that the success of programmes generally takes several years, sometimes longer than a CPD period. The programmes in which UNICEF is currently achieving changes at the level of outcomes, and even contributing significantly to the impact, are programmes that were designed several years ago, in which UNICEF was involved since the initial phases (pilots) that were evaluated and were scaled-up to national level with the evidence of these recommendations (maternal and neonatal mortality and birth registration).

The conclusion is that in the cycle of strategic planning, it is important to know in which phase of evolution is each project or intervention, to know how to continue with the next steps with realistic goals. It is important as well that staff have this knowledge to define an annual workplan according to the phase of each project.

One important lesson learned related to the prevention of CMEU, a subject that until now has been considered normal in country, is that UNICEF had to develop several investigations and make intensive political, public and legislative advocacy to put the issue on the public and political agenda, before obtaining institutional commitments. In summary, research and evaluations are always needed to promote evidence-based decisions and policies, but in several cases, advocacy and campaigns, utilizing the research data, are also needed to obtain political commitments.

Another lesson learned is the importance of a good analysis of the situation, prior to starting programme implementation. UNICEF, from the KAP Study on CMEU, learned that the social determinants and gender roles that normalize early unions in Dominican society are widespread, very strong and greater than expected. Therefore, before working in communities through public institutions, it is necessary to work with the staff of these institutions.

For this reason, it is necessary to sensitize and repeatedly train PROSOLI staff about their own beliefs in this regard, especially at the local level, and in the same way to train teachers about their own beliefs before introducing the prevention initiative of CMEU in schools. In the later phases, UNICEF will need to do intensive training with the staff of other institutions that will work in the prevention of CMEU.

The most important lessons learned from the KAP Study on CMEU are:

a) Due to the community gender behaviors being so strong (the main conclusion of the KAP) and also being shared by civil servants of local institutions, more effort will be required, and for longer period of time than the one originally planned, to implement a successful CMEU prevention programme.

b) the complexity and magnitude of this problem requires a comprehensive, multi-sectoral approach.

The conclusion is that, although the theory of change for CMEU prevention remains valid, UNICEF needs to lower its expectations, to adapt them to this reality and adjust programme indicators and scheduling, and to reinforce the support for coordinating with a multi-sectoral working group for the formulation of the National Strategy to Eliminate CMEU.

An important lesson learned in 2019 comes from the evaluation on sexual exploitation initiatives and the advocacy against CMEU supported by UNICEF between 2015-2018. These interventions were evaluated as part of a multi-country regional evaluation focused on the prevention of violence. The recommendations concluded that it is necessary to review the theory of change of the child sexual exploitation component, strengthening the gender approach in all activities in accordance with the Gender Action Plan. UNICEF will implement these recommendations in 2020.

UNICEF learned several lessons in the “Learning for All” programme component. UNICEF has strengthened the education system in the implementation of the new Pedagogical Model of teaching reading, writing and mathematics in the first years of primary education, through:

a) technical assistance in the design a monitoring system for the quality implementation of this Model,

b) implementing this monitoring system in the Villa Mella district,

c) strengthening the leadership of the team and the schools’ pedagogical coordinators, with conceptual and management knowledge, and

d) strengthening their decision-making based on the evidence of the monitoring results.

The lessons learned in this programme are that, to guarantee the full implementation of the new Pedagogical Model, it is necessary to develop highly capable local district technical teams, and school pedagogical coordinators with strong leadership skills, and conceptual and management knowledge. Also, the training of teachers should be focused on
improving the pedagogical work carried out in the classroom, and, therefore, the training scenario par excellence is the school itself, through continuous accompaniment and reflexive dialogues that allow progressive adoption of the new Pedagogical Model.

UNICEF utilized the 30th anniversary of the CRC to create a platform to support the participation of adolescents in demanding children’s rights. UNICEF brought together 120 adolescent leaders, who participated in private or public adolescent initiatives at a National Adolescent Summit.

At the Summit, the adolescents discussed the advances in the implementation of the CRC and drafted a Manifesto with 11 action points for the Government. On World Children’s Day, the adolescents took over 30 TV and radio programmes and read their Manifesto. This impactful participation and advocacy initiative culminated with the presentation of the Manifesto to the Vice-President.

This intervention with adolescents was very time-consuming and demanded the involvement of the staff for several days, thus jeopardizing the normal work of the CO. This forces UNICEF to think of a long-term strategy for working with them, but one which can be implemented with existing human and financial resources.

UNICEF promoted key technological innovations in the public sector in 2019:

a) For the first time, the National Statistical Office (NSO) used tablets in the MICS Household Survey 2019, thus improving the integrity of the information and the speed of its processing. The capacity to continue doing so was established in the NSO, which assured the possibility of it being replicated in future data collection exercises with national capacities.

b) UNICEF designed and supported the implementation of an on-line monitoring system in three local networks of the National Institute for Integrated Attention to Early Childhood (INAIPI), for home visits that the INAPI staff carry out with families with children up to five years old. The recorded data facilitates the monitoring of the evolution of children and families benefiting from these services, and will provide INAIPI with important information to assess the efficiency of their work.

[1] CO GICs number 2

[2] CO GICs number 1