Executive Summary

Major achievements:

The launch of the Strategic Guidelines of Early Childhood Policy marks an important step forward for young children, as a result of UNICEF and its partners’ continuous technical assistance and advocacy since 2007.

The introduction of new training courses on prevention and control of child trafficking in the National Schools of Judiciary and the Public Prosecution and in the Military Academy, open to the participation of the Haitian Law Enforcement officials, will contribute to improve the capacities and coordination of the Government of Dominican Republic to fight against these crimes in the Hispaniola.

The Government, supported by the international community, put in place crucial prevention and control strategies to reduce the confirmed cases of cholera and save lives. Sectoral coordination, communication, and community mobilization, and water, sanitation and hygiene interventions at community and school level were vital to maintain the number of reported cases significantly lower than initially feared.

National capacities to produce, compile and analyse statistical information on the situation of children have been improved. ENHOGAR/MICS 2011, with a specific module on children, the information system CONANIINFO, a localised version of DevInfo, and the Index of the Rights of Children and Adolescent, generated, for the first time, data on disparities across geographic locations, quintiles, gender and different population groups.

Shortfalls.

Although CONANI has demonstrated a stronger political leadership during the year, especially in the areas of early childhood or adolescents in conflict with law, a further strengthening of the management and leadership capacity is expected in order to succeed in the chairing of the Children’s Round-table, as the national governing body for children’s rights.

Key Partnerships:

- UNICEF, PAHO/WHO, Ministry of Health, National Breastfeeding Commission, the Breastfeeding League, 57 NGOs, churches and universities at central and local levels designed and coordinated the implementation of the breastfeeding campaign. A significant number of national artists and well-known professionals joined to appear in the TV and radio spots, and the most important media in the country collaborated with no cost.

- Key partners for the control and prevention of cholera were the Ministries of Health and Education, National Institute of Potable Water (INAPA), National Group of Water and Sanitation (GASH) and the 35 provincial groups, Municipalities, UNICEF, PAHO/WHO, CDC, EC, USAID, AECID and over 200 religious organizations and civil society organisations at local level.

- National School of Judiciary, National School of Public Prosecutors, Ministry of the Army, Supreme Court, General Persecutor’s Office, National Council for Children and Adolescents (CONANI), Specialised Land border Corps (CESFRONT), UNICEF, UNHCR and IOM were key actors to establish the courses on prevention and control of child trafficking.

- In a context that 20% of pregnant women in the country are adolescent girls, a Strategic Plan for Teenage Pregnancy Prevention was launched, aiming to reduce teenage pregnancy to 18% by 2016. Over 50 organizations participated representing the government, such as First Lady’s Office, Ministries of
Women, Health, Education, Youth, CONANI, Technological Institute for Training and Planning, civil society, adolescent organisations, PAHO/WHO, UNFPA, and UNICEF.

Country Situation

The global economic crisis is gradually impacting Dominican Republic, and in 2011 the Gross Domestic Product (GDP) decreased by 4.5%, compared to 7.8% of 2010. The Ministry of Economy, Planning and Development (MEPYD), based on the data from National Workforce Survey of the Central Bank, estimates that 31.6% of the population live under the poverty line, while the level of indigence is at 8.8% in 2011. In an effort of improving the situation of the most impoverished families, the Government included 60,000 new families into its Conditional Cash Transfer Programme "Solidaridad" reaching an additional 600,000 households. The unemployment rate remained stable at 14%, affecting mainly women and youths, however, on a positive note, the ENHOGAR 2010 (MICS) showed a decrease in child labour by 14% compared to the year 2000.

The Ministry of Education (MINERD) issued a directive instructing school principals to admit all children in the classrooms with or without the birth registration certificate to guarantee the right to education for all children in the country. At the same time, civil society intensified its public presence and social mobilization to demand a 4% of GDP for education, as defined in the constitution. It resulted in an increase of 2011 National Budget for education to a 3% of GDP. The movement also managed that all presidential candidates for 2012 signed a commitment to assign a 4% of GDP starting in 2013.

The President of the Republic and the National Childhood Council (CONANI) launched the “Early Childhood Policy Guidelines,” a strategic document that defines, for the first time, the grounds for the implementation of a policy in favour of children between 0-5 years of age. The Government recognised teenage pregnancy as a social problem that transcends the health dimension in the context of 20% of the nation’s pregnant women being adolescents (ENDESÁ 2007) and developed a Strategic Plan for Teenage Pregnancy Prevention with the support of the United Nations (UN) system and the civil society.

Also this year, a Children’s Round Table was established by the Vice-Minister of International Cooperation in October, chaired by CONANI. It aims to serve as a mechanism for an effective aid for development through a permanent dialogue and exchange of information between the government, donor community and civil society in order to set goals, identify funding sources and optimize the use of resources.

The new regulation for the application of the Migration Law contains advances and setbacks in terms of children’s rights. As advances, it prohibits the detention of children for migratory reasons, lactating or pregnant women, establishes a flexible migratory regime for the residents of the border communities, and incorporates procedures in compliance with the Hague Convention on Civil Aspects of International Child Abduction. As setbacks, it highlights the obligation of health centres to report to the migration authorities of child birth by foreign undocumented women, establishing sanctions to the directors of such centres.

Human rights organizations mobilised demanding the revocation of the resolution 12/07 of the Central Electoral Board (JCE), which prohibits the issuance of birth certificates to the children of undocumented immigrants in the country, thus denying them the right to the nationality. This resolution gravely affects Dominicans of Haitian descendants, and it is supported by the Migration Law which defines all irregular immigrants and non-residents as “persons in transit,” limiting their access to various public services.

In a pre-election context and in argument for improving the public safety, Chamber of Deputies approved a reform of the Code for the Protection System and Fundamental Rights of Children and Adolescents, which increases the years of deprivation of liberty for adolescents in conflict with law. This initiative was strongly questioned by Judicial Power, Attorney General, CONANI, civil society, the UN Secretary General’s (SG) Special Representative on Violence against Children, and UNICEF.
Violence against women increased, reporting 229 feminicides in 2011, marking the highest in the recent years. According to the III International Report on Violence Against Women by Queen Sophia Centre in Spain (2010), Dominican Republic has the highest rate of feminicides in Latin America and the Caribbean with a rate of 21 per every million women. During the year, Dominican society and the media actively mobilized to denounce this form of violence, and for the first time, one million men signed a document condemning gender violence. As a result, the number of criminal investigations against the offenders has increased, and although there is still much to be done, attention to victims as well as psychological treatment for aggressors has been improved.

As of 15 December 2011, 21,432 cholera cases and 363 deaths were reported in Dominican Republic. It was noted that during the rainy season (May-July) there was an increase of weekly cases up to 1,800. However, it decreased and stabilized from September to a range of 100 to 200 cases per week. It is worth mentioning that the level of reported cholera cases remained significantly lower than initially feared, and it is evident that, up to date, the epidemic is under control, thanks to the timely and efficient interventions by different government institutions, UN, religious organizations and civil society, under the leadership of Ministry of Health (MoH). The actions to eliminate cholera in Hispaniola Island have been reinforced with the support of the international community.

In 2011, the UN Development Assistance Framework 2012-2016 (UNDAF) was signed, with specific focuses towards the compliance of the rights of children. The National Congress approved the National Development Strategy Law, after a long consulting process which included the participation of adolescents and youths. Also, with the support of UNICEF, the government submitted in time to the Committee of the Rights of the Child, the third, fourth and fifth reports in one document altogether.

**Who are the deprived children in your country context?**

The pattern of inequities in the country is widespread, and there are large groups of deprived children in Dominican Republic who live in impoverished rural areas, especially in the border areas with Haiti, and marginalised urban areas. The manifestations of inequities are: high infant mortality rate (32 for 1,000 live births in a context where 98% of births are attended by qualified personnel at national level, and an elevated 45-60 for 1,000 live births in border provinces); malnutrition (7.2% national average, 10.5% in border provinces, and 14% among Dominican children of Haitian descendants and migrants); limited access to and completion of secondary education (44% secondary school enrolment rate, and 22% of adolescents are or have been pregnant); and a widespread violence including abuse, sexual exploitation and trafficking.

The main causes of these inequities are various. Firstly, the social factors, including the culture of machismo, racial discrimination against children of Haitian descendants (including the Constitution 2010), secondly, the economic factors, i.e. an unequal distribution of wealth, thirdly, inefficient and low quality of basic social service delivery (41% of children in first quintile do not have birth certificates), and finally, an inefficient system with low social investment (7.5% of GDP, while regional average is 14%) and inefficient management of human and financial resources.

**Data/Evidence**

UNICEF supported the Observatory of the Rights of Children and Adolescents (ODNA), a civil society group composed of well-respected individual experts on statistics analysis embedded in Santo Domingo Catholic University, in analysing statistical data produced by the National Office of Statistics (ONE) to visualise the social and territorial inequities that affect children in Dominican Republic.

In 2011, 9 provincial reports were developed by Human Development Office of United Nations Development Programme (UNDP) with support of UNICEF, visualizing the principal deprivation factors that affect children at a local level from a human development perspective.
UNICEF Dominican Republic used both of the above mentioned information sources, in addition to others, as a part of its analysis for the development of the programme components, strategies, and intervention areas for a new Country Programme 2012-2016 to make it equity focused. The comparative analysis on access and quality of services and infrastructures, decentralization, natural resources, economic activities, levels of poverty, index of children’s rights, and organizational capacities facilitated the identification of inequities that affect children by socio-cultural and economic groups, geographic and residential zones. As a result, the new Country Programme identified 8 border provinces and 2 marginalised urban areas of main cities in the country.

**Monitoring Mechanism**

During 2011, the office reviewed its programmatic strategies using Equity Tracker. UNICEF selected priority areas of intervention for the new Country Programme 2012-2016, and identified monitoring tools to measure the achievements of results through the information systems and mechanisms used by the counterparts.

UNICEF assesses and evaluates achievements for the most deprived children by using the information produced and analysed by the partners, such as CONANIINFO and the Index of the Rights of the Children and Adolescents by ODNA. When such general information system does not provide required analysis, UNICEF developed characterization studies to learn about the specific situation of and the determinants for the most excluded, such as children with HIV/AIDS, and children living in the most impoverished neighborhoods. A bottleneck analysis identified the challenges and gaps within the national child protection system.

**Support to National Planning**

UNICEF supported ONE in producing statistical data through household surveys and administrative records, which include the identification of the least favoured social groups. In 2011 the ENHOGAR/MICS data were generated, which evidenced the situation of children, adolescents, and women nationwide. In collaboration with IPEC-ILO, UNICEF supported the production of a report on child labour which analysed its causes and consequences.

An information subsystem CONANIINFO, a localised version of DevInfo, was created by CONANI with UNICEF’s support. This tool facilitates the analysis of different existing official statistical data and allows the government to track and monitor the situation of children and its progress throughout the country in various themes and geographic areas.

UNICEF supported ODNA in strengthening its technical capacity as well as in advocacy so that their analysis will be widely used by decision makers for the evidence-based planning for public policies and budget allocations, making them more inclusive and equitable, and also by the civil society for their effective interventions. The Index of the Rights of the Children and Adolescents forms a part of CONANIINFO, while the analysis is done independently.

UNICEF continued to strengthen the epidemiologic surveillance system of MoH, through the training of epidemiologists in all hospitals and Provincial Health Departments (DPS), and the provision of necessary equipment to ensure the weekly notification of the major epidemiological events, such as child and maternal mortality and mandatory notification of certain illnesses. Also supported was the periodical sentinel surveillance of HIV, syphilis and Hepatitis B with sexual workers as well as pregnant women, which allows prevalence estimation and identification of trends of these diseases at both national and subnational levels.
Country Programme Analytical Overview

2011 was the last year of the Country Programme 2007-2011, and the efforts were focused on tightening loose ends by consolidating capacities built over the last five years, and to sharpen the focus of the issues and strategies for the new Country Programme 2012-2016.

With a new focus on addressing equity and overcoming disparities, special efforts were made to improve the management of the statistical data in order for UNICEF to take crucial actions which maximises the impact of interventions by integrating the programmes in the most excluded geographic areas of the country. Efforts were also made to enhance the coordination among different counterparts and public services in order to improve the quality of services at national and local levels. Good examples were the strategy to link the services of the Central Electoral Board (JCE), MoH and Ministry of Education (MINERD) for birth registration, and the coordination among water and sanitation partners at the national and community level for the prevention and control of cholera epidemic.

There is a positive scenario in terms of policy development regarding children in 2012. Although there remains much to be done, by the end of 2011, various results were achieved in health and education sectors. While delays are expected in programme implementation due to the planned Presidential Election in May, the new Country Programme will start in a favourable context, which counts with a signed UNDAF, an approved National Development Strategy Law, and Children´s Round Table for a donor coordination.

Effective Advocacy

Mostly met benchmarks

UNICEF, PAHO, UNFPA and the Dominican Pro-Family Association (PROFAMILIA) have advocated effectively to reduce teenage pregnancy, contributing to the formulation of the National Strategic Plan for Preventing Teenage Pregnancy, which aims to reduce the teenage pregnancy to 18% by 2016. The process of reflection and awareness started in 2009. The analysis of the qualitative studies and national statistics of the geographical areas, age, and socio-economic status concluded that the root causes of the problems are inequity, social disparity, gender discrimination, and social classes. Best practices and similar situations were sought among other Latin American countries to nourish the proposals for a public policy. In 2011, under the leadership of the Government, a Technical Inter-institutional Committee for the Prevention of Teenage Pregnancy, composed of over 50 organizations representing the government, civil society, UN system and adolescents, launched the Strategic Plan for Teenage Pregnancy.

Changes in Public Policy

An important advance for the public policy concerning children in 2011 was the launch of the “Strategic Guidelines of Early Childhood Policy” by the President of the Dominican Republic and the Chairperson of CONANI, with the support of UNICEF and UNESCO. The strategy is in-line with the National Development Strategy 2010-2030, and a result of continuous technical assistance and advocacy to Early Childhood Advisory Table since 2007, which consists of the government, UN agencies, NGOs and academia. UNICEF’s contribution also included the generation of evidences through a study of child health profile, a characterization study of early childhood, systematizing the health services and legal framework, and the facilitation of the exchange of experiences with other countries within the region. In 2012, UNICEF plans to continue its contribution to the strategy by facilitating the cost estimation exercise of the implementation of
the strategy, as well as identifying government funding sources, and an action plan. UNICEF also plans to position the theme of early childhood in the public opinions and the debates of the presidential candidates in 2012.

**Leveraging Resources**
The effective communication about the results achieved during the implementation of the Country Programme 2007-2011 stimulated interests of multilateral donors, UNICEF national committees and private sectors to fund interventions in areas of reducing child and maternal mortality, eradicating child trafficking, sexual commercial exploitation, improving the quality of basic education, and disaster preparedness at schools. UNICEF also enhanced the partnership with the tourism sector in promoting the “Guest from the Heart” programme which enhances corporate social responsibility and raises funds.

In response to the cholera outbreak which started in Haiti in October 2010, UNICEF received an important funding contribution from European Community Humanitarian Office (ECHO). Also, UNICEF took part of different inter-agency groups in joint programmes and funding proposals, such as MINERD’s School Feeding programme and the Human Security Trust Fund.

**Capacity Development**

*Partially met benchmarks*

UNICEF supported the updating of the Strategic Risk Management Plan of MINERD which allowed re-defining of the priority actions to ensure the right to education and protection of children during emergency situations. A focal point group was formed and trained at the central level with responsibilities to monitor the development of emergency situations; 53 national and regional technical personnel were trained for the first-line response; and 122 technical personnel were designated at the regional and local levels to follow up the implementation of the Plan. School emergency brigades were formed and School Emergency Response Plans were developed in 541 schools in Santiago region, which is particularly vulnerable to seismic activities.

In prevention and control of trafficking and smuggling of children, capacities were strengthened at the National School of Judiciary, General Prosecutor’s Office, and the Border Land Security Corps (CESFRONT), in collaboration with International Organization for Migration (IOM). As a result, 40 judges and prosecutors, and 66 military agents in charge of border security are now equipped with clear concepts, methodologies and tools to replicate local level trainings, and to establish national and bi-national networks of authorities working in border areas in order to prevent and pursue those crimes. Also, 25 psychologists from 8 Provincial Courts, where UNICEF installed Gesell cameras, are trained with technical knowledge and skills to conduct interviews with children and adolescents victims or witnesses of crimes to avoid re-victimization.

UNICEF contributed to develop the capacity to analyse and monitor children’s rights at a local level, by adopting the methodology of “Child-Friendly Cities” developed by the Innocenti Research Centre. After the national adaptation and validation of the methodology in one Municipality, training was provided to the Dominican Federation of Municipalities (FEDOMU), World Vision and Fundación Solidaridad, who then started to apply the methodology in four municipalities.
Communication For Development

Mostly met benchmarks

The cholera epidemic started in Haiti in October 2010 was a newly introduced disease for the Hispaniola Island, and people were unaware of the prevention or control measures. Immediately after the first confirmed case in the country, UNICEF, donor community, and civil society supported MoH in developing the communication and social mobilization strategy aimed at prevention and control of the cholera by improving hygiene practices and basic water and sanitations conditions in the communities. A risk assessment concluded that the majority of the population did not exercise the hygiene practices, and it allowed identifying the most vulnerable communities to the epidemic. Information materials for the prevention and control of cholera were produced for general public in Spanish and Creole, as well as for teachers and students, and over 15,000 health personnel, communicators, teachers, students and community leaders were trained. Hundreds of community forums passed on the messages about practical ways to improve personal hygiene, handle foods, chlorine water, and prepare oral rehydration solutions. Hundreds of social and religious organizations joined the initiative in the most excluded parts of the country, such as bateyes, rural areas, border areas, and marginalized urban areas of the main cities of the country. The Group of Actors in Sanitation and Hygiene (GASH) was reactivated at the national level, and established at local levels. Also, these groups shared in a timely manner the epidemiological information, the socio-cultural determining factors for the outbreak, and the situation of services, such as water quality.

The breastfeeding campaign “Breastfeeding is the best to ensure the life of your baby,” was developed based on the analysis provided by the Gallup survey in 2010 which identified a low rate of exclusive breastfeeding of 8%. While the majority of the population values breast milk as the best feeding source for a child’s nutrition, it highlighted the influence of the man over a woman’s decision not to breastfeed. The information materials for breastfeeding were updated for the first time after 15 years. An emphasis was put on reinforcing the role of the father in supporting breastfeeding, as well as that of health personnel who have a vital influence on mothers in selecting the type of nutrition for their new born babies. Materials were tested with the target population in various territories before finalizing. These information materials facilitate the face-to-face dialogues with families in the communities, Primary Attention Units (UNAP), hospitals, day-care centres, and lactating mothers’ work environments, among others. The National Breastfeeding Commission led the mobilization of over 56 government organizations, 57 NGOs, churches and universities at central and local levels. The Commission established its decentralized sub-commissions in 16 provinces to disseminate the information through workshops, household visits, and local radios and TVs. In addition, UNICEF’s support to Child-Friendly Hospital initiatives allowed a direct access to 100,000 pregnant women during their pre-natal check-ups and post-delivery stays in 16 prioritized hospitals.

Service Delivery

Mostly met benchmarks

The delivery of health services at the community level was brought to scale with 147 new communities with 2,638 children under age 5 and 1,908 pregnant women, out of which 24% were adolescent girls. UNICEF’s partner catholic organization Pastoral Materno Infantil works in the most impoverished communities where the public health network does not reach. The beneficiaries received household visits and counseling on young child healthcare, early stimulation, and information on the signs and situations when they need to refer children to health centres. UNICEF supports MoH in order to incorporate this effective community methodology within the public system in the low income communities in the border areas with Haiti, as well as in the catchment areas of the prioritized hospitals.
UNICEF contributed to increase births registration through establishing permanent links among different government entities. The establishment of a tripartite alliance among JCE, MINERD and MoH in 3 provinces is accelerating the birth registration of 5,000 undocumented children and adolescents in schools, and facilitating the process of obtaining birth certificates or national identity cards for undocumented pregnant adolescents. The pre-natal cards facilitate adolescents to obtain identity documents during pregnancy so that the baby can be registered in a timely manner when s/he is born. In order to facilitate this new partnership, JCE formed a technical team for late registration, and trained school principals, teachers, and health personnel at Integral Attention Programme to Adolescents. It also undertook awareness-raising campaigns to guide families to be informed about the necessary documents and procedures in order to obtain birth registration for their children.

UNICEF supported Participative Anti-Corruption Initiative (IPAC), which is co-managed by the President and MEPYD, 2 private sector associations, 14 international cooperation agencies, and a range of civil society organisations. IPAC is a methodology to facilitate an open dialogue among the government, private sector and civil society to promote transparency and integrity in public administration, and to identify their solutions. Almost all IPAC’s recommendations were addressed by the Government through a formal resolution by the Council of Ministers. UNICEF provided technical assistance in the areas of education, health, water, hygiene and sanitation, and economy. In October, the monitoring of the IPAC activities identified, among 98 objectives set, 62 were achieved, 16 were in progress, and 20 were not completed. The current phase of the initiative will be finalized in February 2012.

UNICEF supported and accompanied the public mobilization of Judicial Power, General Prosecutor’s Office, Public Defense, CONANI and National NGO Children Coalition to detain the reform of the Code for the Protection System and Fundamental Rights of Children and Adolescents proposed by the National Congress to increase the years of deprivation of liberty for adolescents in conflict with law. Official statistical information was compiled on juvenile and adult delinquency, informative documents were developed, press conferences and informative meetings with the press were organised. A public meeting was held to discuss the reports of UNICEF, UNHCR and Inter-American Commission on Human Rights (CIDH) on citizen’s security, human rights and juvenile justice. Within the context of the Sub Regional Meeting for following up SG’s Study on Violence Against Children, the SG Special Representative presented the opinion of the UN to a group of senators, and sent a letter to the President of the Republic requesting his office not to prosper the reform. While the proposal was approved by Chamber of Deputies, and discussion is currently pending at the Senate, the mobilization had positive results in increasing the media and public interest in the conditions of adolescents who are deprived of liberty, and visits to the detention centres were undertaken to produce timely reports about their precariousness, visualising the need to invest in social reinsertion programmes. The public opinion against the reform continues to grow, and opinion leaders, academics, judges, and other professionals are emphasizing the need to invest more on education and employment, as well as in the need to professionalize the police, and to combat corruption in the armed forces and security corps.

**Knowledge Management**

*Mostly met benchmarks*
In 2011, UNICEF supported two studies focused in the most deprived and marginalised children:

Characterization of Early Childhood: to understand the situation of the childcare at community and family level. The information allowed a better monitoring of the progress of community initiatives supported by UNICEF in marginalised urban areas.

Characterization of the profile and situation of children living with HIV/AIDS: to understand the quality of integral attention they receive. The information will allow the government to define policies and strategies for this vulnerable group of children.

UNICEF also supported the Public Defense in elaboration of the first census on adolescents who are deprived of liberty. The findings provide critical information to develop adequate programs and interventions to promote their social reintegration. It will also provide the foundation to advocate for increasing the adequate budget allocation and corporate social responsibility for adolescents in conflict with the law.

The study "Institutional Practices in the Child Protection System: Institutional Ethnography" provides information about how the system operates. It identified gaps and bottle necks in the judicial system process when dealing with children victims of violence. It showed that there is a gap between institutional norms and everyday practices. More investment is needed for the physical and mental recovery of child victims of abuse and exploitation. The research concluded on the need for a unique protocol for dealing with children victim of violence, and the development of the investigation capacities and coordination between the police and prosecutors.

Human Rights Based Approach to Cooperation

Mostly met benchmarks

In line with the Convention on the Rights of the Child, UNICEF continued to promote children’s rights in all the programme components and activities, as well as the dissemination and implementation of the Recommendations of the Committee on the Rights of the Child. The programming for 2011 provided a base for defining the groups that are the right-holders and the duty-bearers, in order to focus the programme interventions on strengthening capacities for completing the international and regional commitments made by the Dominican State.

The development of the new Country Programme 2012-2016 and Country Programme Action Plan (CPAP) provided an excellent opportunity for UNICEF to promote CRC and CEDAW. Through a participatory planning process with more than 80 public organizations, other UN agencies, NGOs, academia and religious organisations, the priorities for children in Dominican Republic were identified. It resulted in a programme document which has a strong focus on addressing the equity and human rights based programming. It also promoted the integrated programming, and prioritized geographic areas were identified in order to maximize the impact of interventions for the most excluded children in the country. The support provided to the Government during the development of the Report to the Committee of the Rights of the Child was also an opportunity to raise awareness on children’s rights.

UNICEF supported the organization of an international conference “Human Development and Human Rights: Two Decades of Advancement. What’s next for children and youth? Agency and Participation for Enhancing Equity” together with UNDP and UNFPA. A group of international experts discussed various issues around the themes, with active participation of Dominican youth leaders, contributing in identifying ways forward.
Gender

Initiating action to meet benchmarks

UNICEF forms a part of the thematic inter-agency group on gender, which develops activities aimed at promoting the gender equity focus in the UN system programming. During the year, the group shared good practices and conducted an internal analysis of technical expertise, and as a follow-up, technical tools will be developed to facilitate the gender mainstreaming. The group also organized a workshop on “new masculinity” for university students, focusing on the new understanding of the concept of masculinity which differs from the traditional one in the context of the culture of machismo, promoting pacific coexistence with women without using violence, and equality without competing for authorities.

UNICEF continued working on gender equity as a cross-cutting issue in planning and implementation of all programmatic components, and as a strategy for preventing exclusion, violence and exploitation and other violations of rights associated with iniquity, infant-maternal mortality, teenage pregnancies, HIV/AIDS, sexual exploitation, among others.

Environmental Sustainability

Initiating action to meet benchmarks

UNDAF 2012-16 will support the country in environmental sustainability, by mitigation of the climate change effects, promoting a rational use of the ecosystem and biodiversity, and reducing Emergency risks.

South-South and Triangular Cooperation

The office enhanced the coordination with UNICEF Haiti for the south-south cooperation. A regular coordination mechanism was established, alternating the site of the meetings on both sides of the island. The main focus for coordination is trafficking and smuggling of children mainly from Haiti to Dominican Republic, aiming at a coordinated response. The coordination also included sharing the strategies and information materials related to the cholera outbreak as well as information exchange on programming around HIV/AIDS.

Three key government partners of Haiti participated in a training of judges and attorneys for the prevention of child trafficking, organized at the National Judiciary School in Santo Domingo. During the training, the Director of the School offered technical assistance to Haitian counterparts in the framework of bi-national cooperation for the prevention and control of trafficking and smuggling of children.

UNICEF also facilitated a coordination meeting between the Presidents of CONANI and IBESR, the two national government agencies responsible for children’s well-being, in the framework of implementing the Protocol of Attention for Children Displaced by Haiti earthquake, in order to seek for long-term solutions for unaccompanied Haitian children in Dominican Republic, based on the principle of the best interests of the child.
Country Programme Component: Child survival and development

**PCR (Programme Component Results)**

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<th>PCR</th>
<th>EQRank</th>
<th>OTDetails</th>
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<td>The office enhanced the coordination with UNICEF Haiti for the south-south cooperation. A regular coordination mechanism was established, alternating the site of the meetings on both sides of the island. The main focus for coordination is trafficking and smuggling of children mainly from Haiti to Dominican Republic, aiming a coordinated response. The coordination also included sharing the strategies and information materials related to the cholera outbreak as well as information exchange on programming around HIV/AIDS.</td>
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**Resources Used in 2011(USD)**

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**Results Achieved**

The program budget exceeded the CPD approved ceiling due to the emergency funding received after the Haiti earthquake in 2010, some of which activities continued in 2011.

UNICEF supported advancement with policies and programmes for the sustainable reduction of infant and maternal mortality, through improving the quality of public services and the users’ knowledge, and providing essential equipment, aimed at the progressive achievement of MDGs 4 and 5.

The principal maternity hospital in the country, with over 20,000 childbirths per year (10% of the total childbirths nationwide), was certified as Mother-Child Friendly Hospital. It is expected that the hospital’s improved quality level reached by complying with newly added criteria, such as humanized childbirth attention and non-commercialization of breast milk substitutes, contributes to the continuing reduction of infant and maternal mortality. The hospital also set up the country’s first Breast Milk Bank. For the evaluation and certification of Mother-Child Friendly Hospitals initiative, 15 independent professionals were trained.

A nationwide C4D campaign on breastfeeding was launched in August using the mass media, training of health personnel at different levels, and through face-to-face communication with beneficiaries. Training was carried out for the management of breastfeeding programmes at a local level for 222 community peer counselors and 28 coordinators/educators from 16 DPS. Informative sessions were organized at 102 work environments about how to apply the Labour Law to support lactating mothers. In the health sector, 137 professionals were certified to improve the clinical handling of breastfeeding in 16 hospitals and UNAP, and 14 breastfeeding sub-commissions monitor the compliance of the international code of breast milk substitute commercialization.

Fort the first time, the first-line health services are equipped with the Clinical Guides for the care of women, as well as for the nutritional monitoring and attention for the prevalent morbidity of children under 5 years old. Also, training modules for first-line health care promoters were updated to guide their actions for health

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promotion in the most excluded and vulnerable communities.

In order to reduce infant mortality in the most excluded communities, UNICEF supplied the essential neonatology equipment to 14 hospitals in the border areas, according to the base line study. Also, the equipment for the epidemiology surveillance was improved at 10 hospitals in the border areas and 2 maternity hospitals in Santo Domingo in order to facilitate compliance with the Protocol for Epidemiologic Surveillance.

The President presented the “Strategic Guidelines of Early Childhood Policy,” with the support of UNICEF and UNESCO, earmarking an important step forward. This accomplishment is the result of continuous technical assistance and advocacy since 2007. In support of day care centres for working mothers in marginalised urban areas, which is a part of the government’s Solidarity Programme, 15 care centres were equipped with educational materials. For the improved services of early childhood, a curriculum for caregivers was developed, as well as handbooks on early stimulation for the families.

**Most Critical Factors and Constraints**

- Absence of a coordination protocol for maternal-child health care interventions at hospitals and UNAP leads to a lack of accurate information about patients’ conditions, making it an obstacle for offering timely and quality service when the patients are referred to the hospitals from UNAP.
- Inadequate management and supervision capacities of MoH at the subnational level pose challenges in improving the quality of services and the follow-up of their programmes.
- Culture in favour of artificial products and breast milk substitutes by medical staff, among other reasons, due to scarce scientific information about the benefits of breastfeeding, aggressive promotion by main importers of the products which provide incentives for promoting the use of their products pose challenges in promoting exclusive breastfeeding.
- Lack of culture of rights in using public health services weakens people’s capacity to demand the users’ rights and the investigations through judicial mechanisms about avoidable cases of deaths at public medical facilities.

**Key Strategic Partnerships and Interagency Collaboration**

First Lady’s Office, CONANI, MoH, MINERD, Ministries of Women, Youth, Technological Institute for Training and Planning, National Council for Social Security, Catholic Church (Pastoral Materno Infantil), and NGOs (Plan International, World Vision, Oxfam, Red Cross, Fé y Alegría, the Pediatric and Gynecological Associations, UJEDO, EDUCA, among others). There has been significant interagency collaboration with the PAHO/WHO, UNFPA, AECID, EC, ECHO, and USAID.

For the cholera epidemic, a coordination mechanism GASH, led by MoH, played a key role with a participation of actors working in water and sanitation.

**Humanitarian Situations**

1. A year after the cholera outbreak in Haiti in October 2010, a timely and good coordination among MoH, UNICEF, PAHO/WHO, CDC, donors, and other national actors in prevention and control of cholera resulted in maintaining the epidemic well under control with the number of confirmed cases of 21,432 and 363 deaths, which is notably lower compared to the initially projected, especially in highly populated communities without regular access to water and sanitation facilities.

2. In this joint effort, with a financial contribution of ECHO, UNICEF’s support focused on: i) technical strengthening of GASH at the national level, and the establishment of provincial GASH; ii) development and implementation of a community mobilization strategy in 13 high-risk provinces. Together with the local
government and NGO partners, 258 community forums took place, and trainings were carried out for 1,925 health personnel from DPS and provincial MoH offices, community promoters and members of the Associations of Fathers, Mothers and Friends of the School (APMAES); iii) improvement of water and sanitation infrastructure at 65 schools, 6 detention centres for adolescents, and 12 child care centres; iv) training of education personnel (teachers, headmasters, district and regional education directors) on practical measures to prevent cholera; v) distribution of water chlorination supplies and hygiene kits to 6,000 most vulnerable families, and procurement of 300,000 oral rehydration solutions for the hospitals; vi) awareness raising through the organization of workshops for 3,100 children and adolescents (among them, 150 youth volunteers on Global Hand Washing Day); and vii) production of 75,000 flipcharts on cholera prevention and stickers delivering key messages for students and teachers in Spanish and Creole.

Key partners the control and prevention of the cholera were the MoH, MINERD, INAPA, municipalities, PAHO/WHO, CDC, EC, USAID, AECID, GASH with 35 organisations at the national level, and over 200 local government instances, religious organizations and civil society organisations at local levels.

3. In close coordination with MoH, MINERD, National Institute of Potable Water and Sewage (INAPA) and PAHO/WHO, UNICEF will continue to support the nation’s efforts for the eradication of cholera in Hispaniola.

Summary of Monitoring, Studies and Evaluations
The results of an Early Childhood characterization study showed the limited service coverage for children of 0-3 years of age and the need for improving the programmes to guide families’ activities for early stimulation and integral development of children. The quality of some private day care centres were found questionable, as they are not subject to supervision or meeting standards, yet families put value and make great efforts in order to afford such services. The study also alerted the lack of affection and communication between parents/caregivers and young children while playing, and the presence of violence as an integral part of discipline. Disabilities are detected late by parents and caregivers, leaving limited treatment or therapy options to avoid further complications.

UNICEF supported MoH, in collaboration with PAHO/WHO, in developing the first Child Health Profile disaggregated by provinces and municipalities, which also includes main child health indicators up to 4 years of age. This will contribute in monitoring and evaluating impacts of interventions for young children, and in developing evidence-based strategies to improve the health profile of children.

Future Work Plan
UNICEF’s future work plan includes the following:
· Cost estimation study for the implementation of Strategic Guidelines of Early Childhood Policy. Also, a creation of a public platform to advocate for the compliance of policies within the context of 2012 Presidential election, and to demand and monitor the policy execution.
· Compliance of the 10 breastfeeding steps in 10 priority hospitals, UNAP, and the communities in their catchment areas.
· Introduction of the rotavirus vaccine within the vaccination scheme to children under 5 years old to reduce the diarrheal prevalence.
· Development of a system for early alert of disabilities in at least 2 priority hospitals, and it’s gradual expansion.
· Quality improvement of mother-child health care services, through the integration of the clean birth interventions, breastfeeding, new born care, emergency obstetric care, and protocol of neonatal morbidity in 10 priority hospitals.
· Capacity development of neonatology services of 14 hospitals in 3 border provinces with Haiti, through the application of clinical performance guides, health personnel training, and installation of neonatology equipment.
• Strengthening of analysis and social surveillance of the quality of health services, through sharing information about maternal mortality cases in 10 prioritized hospitals, and Maternal Health Profile disaggregated per province and municipality.

• Prevention of teenage pregnancy in the Integral Health Units for Adolescents and UNAP in priority areas, and the training of multiplier peer educators in the communities in partnership with NGOs.

• Cholera prevention and control in Hispaniola, in close coordination with MoH, PAHO/WHO and CDC.

Country Programme Component: Children, adolescents and HIV/AIDS

PCRs (Programme Component Results)

<table>
<thead>
<tr>
<th>PCR</th>
<th>EQRank</th>
<th>OTDetails</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children, adolescents and expecting mothers agree to an adequate prevention and integral attention on HIV/AIDS and syphilis.</td>
<td>1</td>
<td>FA3OT1, FA3OT2, FA3OT4, FA3OT6, FA3OT8</td>
</tr>
</tbody>
</table>

Resources Used in 2011(USD)

<table>
<thead>
<tr>
<th>Resource Type</th>
<th>Planned for 2011 (as per CPAP ceiling )</th>
<th>Allocated in 2011</th>
<th>Estimated Year-End Expenditure</th>
<th>%Spent (4)/(3) * 100</th>
</tr>
</thead>
<tbody>
<tr>
<td>OR-E</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>OR-R</td>
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</tr>
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<td>Total</td>
<td>$438,000.00</td>
<td>$233,256.15</td>
<td>$227,220.88</td>
<td></td>
</tr>
</tbody>
</table>

Results Achieved

An inter-institutional group was established to implement Mother-to-Child HIV and Syphilis Transmission Elimination Strategy (ETMIVS) with the following objectives: i) to launch the strategy; ii) to draft the ETMIVS National Plan; iii) to estimate the cost of National Plan using tool provided by PAHO/WHO; and iv) to monitor the implementation of ETMIVS in 16 prioritized hospitals, introducing rapid test for HIV and syphilis, reinforcing counseling as a part of the integral attention, and adjusting the pre-natal control procedures at hospitals to ensure the inclusion of the test.

Together with MoH, counseling service capacities were reinforced and volunteer testing for HIV increased by 30% at the 107 adolescent health service units. The observation of the ETMIVS programme at two maternity hospitals with the highest number of annual childbirths (33,000) identified causes and moments which pregnant women who visit hospitals for the pre-natal control abandon the process before completing the HIV protocol. It also evidenced the need to improve the technical skills of the hospital personnel in order to adequately implement the ETMIVS, and to integrate the care of the mothers with new-borns. A particular attention is needed to improve the quality of service for Creole-speaking population, which is estimated to be about 25% of pregnant women that visit hospitals in the country. To ease the blood test sampling in a safe and quick manner for HIV and syphilis, the physical relocation of two Mother-to-Child transmission units was supported.

In partnership with NGO Dominican Network of Persons Living with HIV (REDOVIH), the RESCATE Program was expanded to 5 hospitals in border areas to ensure the HIV and syphilis test for all pregnant women, and their Anti-Retroviral Virus (ARV) treatment, as well as for HIV positive new-borns.

For the prevention of sexual transmitted diseases (STDs) and teenage pregnancy, the content of MINERD's
Sexual-Affectionate Education Programme (PEAS) was adapted with a focus on life skills, and also incorporated a communication strategy for the out-of-school adolescents. The "National Guide for Paediatric Attention for Children and Adolescents Living with HIV" was revised and educational materials for children of ages 5-12 living with HIV were distributed.

**Most Critical Factors and Constraints**
The ETMIVS has not yet been incorporated into MoH’s regular programme for pregnant women, and it is considered as a missed opportunity for applying the protocol and functioning of a unique information system that contributes to reducing maternal and neonatal morbidity-mortality derived from HIV and congenital syphilis.

In 2011, there was a notable delay in the implementation of UNICEF’s HIV Annual Work Plan due to MoH’s internal difficulties related to the lack of clarity about responsibilities of involved instances.

The lack of a unique protocol for the elimination of Mother-to-Child HIV and syphilis transmission constitutes a bottleneck to advance with the goal of elimination of HIV in children.

The limited national investment in the HIV programme and the decrease of external funding threaten the continuity of ARV treatment and lab tests to provide adequate follow-up for the patients.

**Key Strategic Partnerships and Interagency Collaboration**
MoH, National HIV AIDS Council (CONAVIHSIDA), MINERD, Harvard University, PAHO/WHO, CDC, UNAIDS, UNFPA, REDOVIH+, ASOLSIDA, Paloma Group.

**Summary of Monitoring, Studies and Evaluations**
- The Characterization Study of HIV+ Children and Adolescents in Dominican Republic shows the need for improved quality of care. The majority of HIV+ children are unaware of their condition and it often leads them to abandon the ARV treatment which causes drug resistance and deterioration of their health conditions.
- Study of Integration on Prenatal Care and HIV and Syphilis Control served as a basis for drafting the National Plan for the Elimination of Mother-to-Child HIV and Syphilis Transmission.
- Base-line study of the RESCATE Program for the Prevention of Mother-to-Child Transmission (PMTCT) evaluation in hospitals with high number of Haitian users will provide key inputs for the improvement of services.

**Future Work Plan**
UNICEF’s future work plan includes the following:
- Support to the implementation of ETMIVS in the prioritized hospital and UNAP, with an emphasis on communication and social mobilization.
- Strengthening of counseling and volunteer testing in the Integral Care Units for Adolescents and their participation in PEAS.
- Strengthening paediatric services and increased attention to adolescents with HIV+.
- Support to the national sentinel surveillance survey for HIV, syphilis and hepatitis B.
- Drafting of a strategy for HIV and teenage pregnancy prevention for out-of-school and higher risk adolescents.
Country Programme Component: Protecting children against violence, abuse and exploitation

PCRs (Programme Component Results)

<table>
<thead>
<tr>
<th>PCR</th>
<th>EQRank</th>
<th>OTDetails</th>
</tr>
</thead>
<tbody>
<tr>
<td>All children and adolescents have a guaranteed right to protection against violence, abuse and exploitation.</td>
<td>2</td>
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</table>

Resources Used in 2011(USD)

<table>
<thead>
<tr>
<th>Resource Type</th>
<th>Planned for 2011 (as per CPAP ceiling )</th>
<th>Allocated in 2011</th>
<th>Estimated Year-End Expenditure</th>
<th>%Spent (4)/(3) * 100</th>
</tr>
</thead>
<tbody>
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<td>Total</td>
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<td>$1,171,016.37</td>
<td></td>
</tr>
</tbody>
</table>

Results Achieved

The program budget exceeded the CPD approved ceiling due to the emergency funding received after the Haiti earthquake, some of which activities continued in 2011.

In the prevention and control of trafficking of children, UNICEF contributed to improve coordination and strengthen capacity of government counterparts at central and local levels on both sides of the border. In close coordination with UNICEF Haiti, UNHCR and IOM, trainings were carried out for judges, attorneys, and CESFRONT, and handbooks were prepared to facilitate their local training sessions. Psychologists were trained to conduct forensic interviews with children who are victims or witnesses of crimes, without victimizing them.

The support continued to strengthen CONANI in implementing Protocol of Attention for Children Displaced by Haiti Earthquake, in collaboration with UNHCR. To date, the Protocol resulted in family reunification of 407 Haitian children. For those without identified families, long-term solutions, including foster families, are being searched. A lesson learned from the implementation of the protocol has facilitated the draft of the new guidelines to protect all vulnerable children in the country. Also, Local Boards for Protection were established in nine municipalities with the highest number of displaced and immigrants from Haiti.

Following the III World Conference on Sexual Exploitation of Children (Brazil 2008), UNICEF organised in March the First Sub-regional Conference on Commercial Sexual Exploitation, participated by governments, judicial power, legislators, social organizations, children, and the Dominican Republic National Hotel and Restaurant Association (ASONAHORES), which ended with an agreement to develop a sub-regional agenda 2011- 2013. In Dominican Republic, a national level alliance was built among MINERD and Ministry of Labour and Tourism, and training handbooks on prevention and detection of CSE were distributed for over 12,000 students and tour operators.

To reduce violence at school, UNICEF supported the MINERD’s plan on positive discipline and over 36,000 teachers and school counselors were trained on non-violent techniques, mediation and respect in schools. The municipalities with Local Boards for Protection of Children are developing child friendly mechanisms to report violence. UNICEF supported NGO partners to work for the social and physiological reintegration of children victims of violence and abandonment. The office played a key role in supporting the public mobilization of the government and NGO partners to detain the proposal on the reform of Law 136-03 to increase the years of liberty deprivation for the adolescents in conflict with law.
In support to the UN Secretary General Special Representative on Violence Against Children and the Global Movement for Children, the Office represented TACRO and facilitated the organization of the Central-America Follow Up Conference to the UN Study on Violence Against Children, in alliance with the CONANI and National NGO Coalition for Children.

UNICEF promoted a tripartite strategy among JCE, MOH, MINERD, and other allies, to accelerate the coverage of birth registration, and also accompanied and supported the national delegation in the Conference on Birth Registry and Right to Identity, organized by TACRO in September.

**Most Critical Factors and Constraints**

- The generalized perception that citizen insecurity is provoked by adolescents and youths from marginal neighbourhood is causing a negative impact on the consolidation of the juvenile justice system.
- One of the consequences of the historical authoritarian processes in Dominican society is a tendency to use violence as an acceptable form of dealing with problems, disputes and conflict, thus setting back the establishing of a peace and respect-to-rights abiding culture.
- Although CONANI has demonstrated a stronger political leadership during the year in areas of early childhood or adolescents in conflict with law, in order to strengthen its role as rector entity of the childhood policy, and to improve the technical management skills, it is necessary that it receives the legally assigned 2% of the government budget, unlike the current 0.18%.

**Key Strategic Partnerships and Interagency Collaboration**


**Humanitarian Situations**

Within the humanitarian assistance framework caused by the Haiti earthquake in 2010, UNICEF incorporated an emphasis of disaster risk reduction (DRR) in education sector. In close coordination with MINERD, the Strategic Risk Management Plan was updated, with a clear vision to develop response plans at central, regional and district levels. 541 schools in Santiago region, the area with a particular vulnerability to seismic activities, were trained for developing School Risk Management Plans, and their School Emergency Brigade received basic supply items, such as first aid kits. Seven emergency evaluation simulations at schools were performed with the support of central and local technical teams.

The Return to Happiness programme, developed for the psychological support of children affected by the Haiti earthquake, was updated to be used in any emergency situation in Hispaniola.

**Summary of Monitoring, Studies and Evaluations**

Institutional Practices in the Child Protection System: institutional Ethnography. This study identifies existing bottle necks in the care process to children victims of violence.
Future Work Plan

- Expansion and improvement of the quality of health services with attention to children victims of violence, trafficking and exploitation.
- Creation of effective and child-friendly mechanisms to allow children to report violence, obtain information, and receive counseling.
- Formulation and implementation of a strategy to eradicate school violence.
- Promotion and signature of the ECPAT Code of Conduct by the hotel industry.
- Development and implementation of a Protocol for Coordination for Children and Adolescents in Vulnerable Situations.
- Design of an alternative care modality for unaccompanied children and adolescents.
- Establishment of an independent supervision mechanism of the detention centres for adolescents in conflict with the law.
- Improvement of procedures and coordination among JCE, MINERD, MoH and other allies to increase the coverage of birth registration.

Country Programme Component: Public policies and alliances for children

**PCR (Programme Component Results)**

<table>
<thead>
<tr>
<th>PCR</th>
<th>EQRank</th>
<th>OTDetails</th>
</tr>
</thead>
<tbody>
<tr>
<td>Government organisms, NGOs and civil society, at both local and national level, formulate and implement policies and social as well as economic programs targeted at compliance of the rights of children and adolescents, and to the achievement of the MDGs.</td>
<td>2</td>
<td>FA5OT1, FA5OT2, FA5OT3, FA5OT4, FA5OT6, FA5OT7, FA5OT9</td>
</tr>
</tbody>
</table>

**Resources Used in 2011(USD)**

<table>
<thead>
<tr>
<th>Resource Type</th>
<th>Planned for 2011 (as per CPA ceiling )</th>
<th>Allocated in 2011</th>
<th>Estimated Year-End Expenditure</th>
<th>%Spent (4)/(3) * 100</th>
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</thead>
<tbody>
<tr>
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<td><strong>Total</strong></td>
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<td><strong>$206,675.37</strong></td>
<td><strong>$188,326.24</strong></td>
<td></td>
</tr>
</tbody>
</table>

**Results Achieved**

UNICEF continued strengthening the national statistics system to generate reliable data on children and adolescents. CONANI launched CONANINFO system, a localised version of UNICEF’s DevInfo, which compiles all available information at national, regional and local level on children, adolescents, and women. ONE was supported in the ENHOGAR/MICS 2010 survey, with a platform of information on children and women, and the development of a specific module for child labour was also supported by Ministry of Labour and IPEC-ILO. ONE, together with Judicial Power, advanced in the systemization of statistics on juvenile justice.

To close information gaps and visualize the most excluded children in the country, the ODNA developed the Index of Children’s Rights for the age groups of 6-12 and 13-17 years, in addition to an already finalized index for the age group of 0-5 years. UNICEF supported UNDP’s Human Development Office in the development of nine human development provincial reports in the border and Southwest region, where the most deprived and excluded people live. The analysis of the reports contributed in defining the geographical
areas of intervention for the new Country Programme 2012-2016.

In continuous dialogue with MEPYD and CONANI, the first draft of the Situation Analysis on Children (SITAN) was developed, with specific focus on identifying the country’s most excluded groups and the social, economic and discriminatory determinants. The SITAN will be published in the first quarter of 2012, coinciding with the signature of the new CPAP.

Adolescents’ participation was promoted through the elections of Child and Youth Town Hall (AJI) in 7 municipalities, with the participation of 1,200 volunteers and around 50,000 children and adolescent voters. Inter-provincial adolescent and youth networks were promoted and a National Coalition of Juvenile Organizations was established with 30 organizations. UNICEF, together with UNFPA and NGO partners, facilitated the participation of youth organizations in a public hearing in the Chamber of Deputies to present their opinion on the recently approved National Development Strategy Law, which will be the strategic framework of all policies and public investments for the next 20 years.

A proposal for strategic guidelines for the local development with children and adolescents participation was designed and validated by MEPYD, CONANI, FEDOMU, and National Council for State Reform (CONARE). The national capacity for the child-focused budget analysis and its follow-up continued to be strengthened. With the support of UNICEF, the Budget Analysis Unit of the Chamber of Deputies supported the Permanent Congress Commission by providing 10 reports on Central Government’s investments in health, education and childhood in general. These inputs will contribute to consolidate the capacity of the Congress to monitor and effectively control the government budget in health, education and protection.

**Most Critical Factors and Constraints**

- The delay in processing and analysis of the National Census 2010 by ONE resulted in delaying the finalization of SITAN.
- High turn-over of technical personnel in partner institutions, especially Chamber of Deputies, City Hall of the National District and Chamber of Accounts, made the continuity of the activities difficult.
- The donor’s financial support to the Focus Area 5 is not as prominent as it could be, limiting the predictability of the multi-year commitment with the national institutions.

**Key Strategic Partnerships and Interagency Collaboration**

MEPYD, CONANI, Ministry of Labour, ONE, CONARE, FEDOMU, Dominican Telecommunication Institute (INDOTEL), National Council of Population and Family (CONAPOFA), Chamber of Accounts, Santo Domingo Catholic University, City Hall of the National District, Baní Town Hall, Azua Town hall, Ocoa Town Hall, World Vision, Plan International, Fundación Solidaridad, Centro Bono, Dominican Advisors Network of Youth Town Halls, UNFPA, UNDP, ILO.

**Summary of Monitoring, Studies and Evaluations**

- Development and publication of a specialized module on child labour in the National Multipurpose Household Survey (ENHOGAR 2009-2010).
- A community self-assessment report on the compliance of the rights of children in the municipality of Dajabón with the methodology of Child Friendly Cities.

**Future Work Plan**

- Support to undertake cost estimate studies for the implementation of public policies and programmes to include the most excluded children in the programmatic areas of health, education and protection.
Increased use of quality information for evidence-based decision making on public policies and budget allocation by central and local government, and civil society organizations.

Coordination of the national and local authorities in 8 prioritized provinces for the inclusion of the most excluded groups into basic health, education and child protection services.

Strengthening of surveillance mechanisms for ensuring the compliance of children’s rights and promoting their participation in decision-making processes that affect them.

Country Programme Component: Cross-sectoral costs

<table>
<thead>
<tr>
<th>PCR</th>
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Resources Used in 2011(USD)

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<tr>
<th>Resource Type</th>
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<th>Allocated in 2011</th>
<th>Estimated Year-End Expenditure</th>
<th>%Spent (4)/(3) * 100</th>
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<tr>
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</tbody>
</table>

Results Achieved

This programme component consisted of sub-components of: 1) information, communication and social mobilisation; 2) achievement of programme results; and 3) effective and efficient management of human resources.

The good relation with the media, as UNICEF’s partner, led to a greater dissemination of information on the situation of children’s rights in the country, and increased UNICEF participation in public debates and interviews. The capacity development to adequately report children’s issues in the media continues with the training workshop for 22 journalists in alliance with World Vision and Plan Dominican Republic. UNICEF Goodwill Ambassador Jatna Tavarez, actively participated in communications activities supporting UNICEF and the UN Country Team (UNCT).

A C4D Breastfeeding Campaign was launched in August. The printed materials, such as brochures, flipcharts and booklets, were updated with modern but culturally adopted illustrations. UNICEF Dominican Republic website was frequently updated, also linked with social media such as Facebook and Twitter, disseminating the information about UNICEF’s work in the country, increasing the organization’s visibility.

The Office facilitated the organisation of regional and sub-regional events, planned by TACRO throughout the year, and ensured visibility. Such events included First Sub-regional Conference on Commercial Sexual Exploitation, in March; Education and WASH Cluster Lead training, in June, and the Central America and the Caribbean Follow-up of the Study of the SG on Violence Against Children, in December. Support was also provided to TACRO in the organization of the Central America Communication meeting in March.

The Communication Officer retired in September, and the office was benefitted by existing expertise within the region by bringing in technical assistance from TACRO, the office in Chile, and a retired UNICEF colleague from South America.
The Regional Areas of Planning and Monitoring offered a continuous and effective support to the Country Office, especially through the development of CPD and CPAP.

**Most Critical Factors and Constraints**
The Communication Officer retired in September, and the recruitment of her replacement is in process.

**Future Work Plan**
UNICEF’s future work plan includes the following:
- During the new Country Programme 2012-2016, UNICEF will work to position itself as a reference for all the issues concerning children in the territory of Dominican Republic, and a lead to address equity.
- A media campaign is planned for the candidates of the Presidential Election in May. A survey will be undertaken in early 2012 in order to collect the voices of children which is to be presented to the Presidential candidates in April.
- Dissemination of the knowledge generated by ODNA, SITAN and the contents of the new Country Programme.
- Support to national platforms for the 4% of GDP in education, early childhood development, end violence against children, birth registration, among others.
### Effective Governance Structure

The office has a governance structure that monitored the implementation of priorities and planned results within the Annual Work Plans, and the proper application of norms, policies and procedures. The Annual Management Plan (AMP), elaborated in a participative manner and approved by the Country Management Team (CMT), synthesized 2011 programme and management priorities, defined the composition and responsibilities of the management and coordination committees, and identified the focal points with their respective responsibilities, to implement UNICEF Mid-Term Strategic Plan (MTSP), through the application of cross-cutting issues, coordination of emergency responses, and representation of UNICEF in inter-agency groups. The 2011 AMP featured an updated Table of Authorities, and also contained documents and existing management tools to strengthen capacities of staff and different committees in effectively exercising their respective functions. The document was presented to all staff in two informative sessions, and is made available in the local area network. Committees held their meetings as planned, and their minutes were shared with all staff.

Active participation was maintained at the UNCT, Senior Management Team (SMT) and Office Management Team (OMT) meetings, as well as at different task forces created to enhance the efficiency of key procurement processes and inter-agency services.

The preparation for the implementation of International Public Sector Accounting Standards (IPSAS) and the migration to Vision has been a recurrent topic of analysis in all CMT meetings, to understand changes and processes, to agree the actions to follow, and to define the indicators that ensure their due compliance.

### Strategic Risk Management

In January 2011, the CMT approved the Risk and Control Self-Assessment (RCSA) and the risk profile library. The Office utilised UNICEF’s existing monitoring and reporting mechanisms to improve the governance system. The RCSA will be updated to the new Country Programme in early 2012.

The Standard Operating Procedures were updated for all processes: travel, supply, contracts, and Direct Cash Transfers (DCT). Informative sessions were organized with all corresponding staff for their due implementation. The preparation for the migration to Vision and the adoption of IPSAS required extraordinary efforts by the Country Office, especially in areas of training and in the definition of user’s roles.

Business Continuity Plan (BCP) and Early Warning Early Action (EWEA) are up to date. EWEA was found extraordinarily heavy in terms of required time and effort to provide required information. The office is MOSS compliant, as proved during the inspection performed by UNDSS in October 2011. The inter-agency security plan is updated and ready for activation in required cases.

A seismic risk evaluation was completed for the UN House, funded by UN agencies that share the premises. In 2012, the necessary technical solutions will be applied.

### Evaluation

In early 2011, Integrated Monitoring and Evaluation Plan (IMEP) was developed, with detailed information for the planned studies, investigations, diagnosis and assessments. Monitoring and follow-up actions were identified during semi-annual revisions and in the program team meetings. As of December 2011, 80% of the planned activities in IMEP were completed.
Effective Use of Information and Communication Technology

Information and Communication Technology (ICT) contributed for the achievement of the Country Program objectives, by providing network and system access to all UNICEF staff and also by providing advises to different counterparts on ICT issues for the implementation of UNICEF-supported programmes.

To ensure business continuity, security and emergency response, the office has backup emergency telecommunication equipment, such as 6 Iridium, 2 BGAN, and a mobile phone fleet that reaches all staff. All vehicles have Very High Frequency (VHF) mobile radios installed and fixed antennas supporting Iridium. Each of the wardens and key staff are provided with and trained for VHF handsets.

There is no obsolete ICT equipment at the office. This is essential for the migration to the new systems. In 2011, SAP-HR project was started and further on, Vision client and training programs were installed for all users.

Two new HP Proliant DL-380 G7 servers were acquired and installed. They will host virtual systems for the Windows Server 2008 Operating System. Other important acquisitions were a Digital Sender, to facilitate document digitalization on Vision, a new tape backup and network equipment with fiber optic ports.

The office ended with SITA services on 12/31/2011 and contracted a new local internet provider (TRICOM) with a 3Mb bandwidth. This allows UNICEF Dominican Republic to have backup services provided by two local providers that will alternate in the event of service interruptions. It is expected the bandwidth will be sufficient for the concurring access of all Vision users.

Fund Raising and Donor Relations

The office has placed a regular mechanism through weekly Coordination Meetings to monitor the fund utilization, outstanding DCTs and donor report submissions. In order to reach the full utilization of expiring funds, a detailed budget plan was developed and closely followed up, and modifications were introduced when necessary and in a timely manner. Three out of five donor reports due for submission in 2011 were sent in time, although the rest was sent out but with a delay. One report for Bureau of Population, Refugees and Migration (BPRM) of United States government was sent on time, however, it was not correctly registered in the system in Headquarters and appeared as delay for 8 months.

The office proactively raised funds for Other Resources (OR) to support activities necessary in achieving programme objectives (see Leveraging Resources section).

Although UNICEF in the country does not have a Private Fundraising and Partnership programme, some corporate social responsibility activities were developed. The agreement with National Hotel and Restaurant Association (ASONAHORES) is active, and the “Guest of the Heart” programme was initiated, by signing an agreement with Viva Resorts. Some local companies have made small donations to fight against cholera outbreaks in the country. Based on the agreement signed between the Spanish Committee for UNICEF and Sol Meliá S.A, all personnel in its five hotels in the country were trained, and started to collect donations for child protection activities.

In May, the cards and gifts operation in the country came to an end, and the UNICEF shop was closed. This was due to changes adopted by UNICEF headquarters to move toward the implementation of the licensing model.
Management of Financial and Other Assets

The average financial implementation rate against the funded amount of the programme in 2011 was 97.59%. Among them, 99.3% implementation rate for the OR Emergency, 93.96% for the OR Regular Programmes, and 99.92% for the Regular Resources (RR). As for the programme implementation, among 33 expected products as programme results defined in AMP 2011, 49% were completed, 33% are in progress, and 18% were not achieved. The reasons for no completion were due to the workload generated by the formulation of UNDAF, CPD, and CPAP.

The implementation of RR and the support budget reached 100%, according to the planned results. Some activities, mainly funded by OR Emergency, were rephrased to 2012.

The CMT approved and monitored throughout the year the implementation of financial controls, the compliance of the Table of Authorities and the proper use of the special operating procedures. Bank reconciliations were done timely. Parting from September, the number of outstanding DCT older than nine months was maintained zero.

All standard mechanisms aimed at ensuring the most competitive prices for goods and services were applied. Operational processes in general were made more efficient, hence reducing staff time and liberating staff to better attend other priorities. Payment via cheques to all UNICEF staff was reduced to zero, limiting this payment method solely for the counterparts, consultants and providers without an account in a local bank Banco León, where UNICEF has accounts. SAP HR project was locally implemented in June.

Life Line Haiti office (LLH), opened shortly after the Haiti earthquake in 2010, was closed in June 2011. UNICEF Dominican Republic and Haiti worked closely to facilitate the process and ensured the timely closure of LLH. Although the payments with emergency funds on behalf of UNICEF Haiti were still made by UNICEF Dominican Republic office until the end of the year, it was drastically reduced after the LLH closure.

Supply Management

The percentage of programme funds dedicated to the procurement of supply items in 2011 reached 20%, of which 77% was financed by emergency funds linked to the effects of the Haiti earthquake and improving the health services in the border areas.

Supplies are delivered directly to the counterparts and partners by the local providers, allowing the office not to maintain a warehouse. UNICEF has credit with almost all suppliers, facilitating the procurement process to be even more efficient.

In 2011, the office facilitated a market survey for emergency items in the country, funded by UNICEF Haiti office and coordinated by Supply Division in Copenhagen. This survey was also conducted in other countries of the region to identify potential suppliers for Haiti emergency projects. Five providers were identified by the specialists for the supply items in the areas of WASH, Education and Construction, and establishing a long-term agreement is expected in 2012. Direct Orders were issued for ICT equipment, and offshore procurement was conducted in other cases. Monitoring of the distribution and usage of donated supply items was carried out during field visits by programme staff.

One staff participated in the 15-day Vision Training of Trainers, which concluded with the replication of the training at country level.
Human Resources

The structure of human resources corresponded to the office needs in 2011. In addition to the Fixed-Term posts, the office counted with 11 Temporary Appointment positions, half of which were funded by UNICEF Haiti and linked to the Haiti earthquake response. The office is the Administrative Place of Assignment for Haiti, providing assistance to the lives of staff’s families who reside in the country.

The Communication Officer retired in September 2011 as well as Program Assistant in December. The recruitment process in both cases will conclude in early 2012.

Completion of 2010 Personal Evaluation Reports (PER) was affected by the fact that the office changed Representative and Deputy Representative simultaneously. The post of Representative was hold by five different persons in 2010, because of the response to the emergency in Haiti, and previous Deputy Representative was transferred to another office in October 2010. Taking into consideration those key factors for the completion of PERs, together with the increased workload and variety of tasks performed by staff members in 2010 due to the Haiti earthquake, the office considers that the non-timely completion of 2010 PERs before the end of February 2011 was justifiable.

The well-being of the staff was given an adequate attention. The office participated actively in the UN Cares initiative, HIV/AIDS standards in the workplace were met, and the office counts with a peer support volunteer elected by the staff and trained in 2011 at the regional level. Various meetings were carried out with all staff to discuss about staff wellbeing, including two sessions about the Code of Conduct. The UN Joint Ombudsperson visited the country in May, and led a session with all UN staff to inform about formal and informal conflict resolution procedures. A team building session was carried out to analyse how to improve the work climate.

Each staff duly completed their full responsibilities with a number of training activities on IPSAS, Accounting and Vision, on the top of their regular workload. Five super-users participated in the Vision regional Training of Trainers in Panama that concluded with a set of activities at the country office where the rest of the users was trained.

Crime is a major factor of the insecurity in the country as a consequence of multiple causes. During 2011, several security incidents directly affected UNICEF staff.

Efficiency Gains and Cost Savings

UNICEF Dominican Republic shares premises with other 5 UN agencies that have a signed Memorandum of Understanding (MOU), with specified joint operational costs, such as cleaning, maintenance, security and other issues, and are significantly low. Inter-agency long term agreement and areas of collaboration have been identified in 2011, and will be implemented in 2012.

During 2011, the office reduced the travel costs planned with Support Budget funds by 50%.

Changes in AMP and CPMP
<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>AECID</td>
<td>Agencia Española de Cooperación Internacional (Spanish International Development Cooperation)</td>
</tr>
<tr>
<td>AMP</td>
<td>Annual Management Plan</td>
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<tr>
<td>APMAES</td>
<td>Asociaciones de Padres, Madres y Amigos de la Escuela (Associations of Fathers, Mothers and Friends of the School)</td>
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<tr>
<td>ARVs</td>
<td>Anti-Retrovirals</td>
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<tr>
<td>ASONAHORES</td>
<td>Asociación Nacional de Hoteles y Restaurantes (National Hotel and Restaurant Association)</td>
</tr>
<tr>
<td>AWP</td>
<td>Annual Work Plan</td>
</tr>
<tr>
<td>BPRM</td>
<td>Bureau of Population, Refugees and Migration, US Department of State</td>
</tr>
<tr>
<td>C4D</td>
<td>Communication for Development</td>
</tr>
<tr>
<td>CEDAW</td>
<td>Convention on the Elimination of All Forms of Discrimination Against Women</td>
</tr>
<tr>
<td>CESFRONT</td>
<td>Cuerpo de Seguridad Fronteriza Terrestre (Border Land Security Corps)</td>
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<tr>
<td>CMT</td>
<td>Country Management Team</td>
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<tr>
<td>CONANI</td>
<td>Consejo Nacional para la Niñez y Adolescencia (National Council for Children &amp; Adolescents)</td>
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<tr>
<td>CONARE</td>
<td>Consejo Nacional para la Reforma del Estado (National Council for State Reform)</td>
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<tr>
<td>CPAP</td>
<td>Country Programme Action Plan</td>
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<td>CPD</td>
<td>Country Programme Document</td>
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<tr>
<td>CPMP</td>
<td>Country Programme Management Plan</td>
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<tr>
<td>CRC</td>
<td>Convention on the Rights of the Child</td>
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<tr>
<td>CSE</td>
<td>Commercial Sexual Exploitation</td>
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<tr>
<td>DevInfo</td>
<td>Development Information (Statistical Presentation System)</td>
</tr>
<tr>
<td>DPS</td>
<td>Departamento Provincial de Salud (Provincial Department of Health)</td>
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<tr>
<td>EC</td>
<td>European Community</td>
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<tr>
<td>ECHO</td>
<td>European Community Humanitarian Office</td>
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<tr>
<td>ENHOGAR</td>
<td>Encuesta Nacional de Hogares (National Household Survey)</td>
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<tr>
<td>FEDOMU</td>
<td>Federación Dominicana de Municipios (Dominican Federation of Municipalities)</td>
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<tr>
<td>GASH</td>
<td>Grupo de Agua, Saneamiento e Higiene (Group of Water, Sanitation and Hygiene)</td>
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<tr>
<td>GDP</td>
<td>Gross Domestic Product</td>
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<tr>
<td>GS</td>
<td>General Service</td>
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<tr>
<td>HACT</td>
<td>Harmonized Approach for Cash Transfer</td>
</tr>
<tr>
<td>HIV/AIDS</td>
<td>Human Immunodeficiency Virus / Acquired Immunodeficiency Syndrome</td>
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<tr>
<td>ILO</td>
<td>International Labour Organization</td>
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<tr>
<td>IMEP</td>
<td>Integrated Monitoring and Evaluation Plan</td>
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<tr>
<td>IPSAS</td>
<td>International Public Sector Accounting Standards</td>
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<td>INAPA</td>
<td>Instituto Nacional de Aguas Potables y Alcantarillados (National Institute of Potable Water and Sewege)</td>
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<tr>
<td>INOTEL</td>
<td>Instituto Dominicano de Telecomunicaciones (Dominican Telecommunications Institute)</td>
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<tr>
<td>ITS</td>
<td>Infecciones de Transmisión Sexual (Sexual Transmission Diseases-STD)</td>
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<tr>
<td>JCE</td>
<td>Junta Central Electoral (Central Electoral Board)</td>
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<tr>
<td>MDG</td>
<td>Millennium Development Goals</td>
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<tr>
<td>MINERD</td>
<td>Ministry of Education</td>
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<tr>
<td>MoH</td>
<td>Ministry of Health</td>
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<tr>
<td>MTSP</td>
<td>Medium-Term Strategic Plan</td>
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<tr>
<td>NGO</td>
<td>Non-governmental Organization</td>
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<td>ONE</td>
<td>Oficina Nacional de Estadística (National Statistics Office)</td>
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<tr>
<td>OR</td>
<td>Other Resources</td>
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<tr>
<td>PAHO/WHO</td>
<td>Pan American Health Organisation/World Health Organisation</td>
</tr>
<tr>
<td>PEAS</td>
<td>Programa de Educación Afectivo-Sexual (Sexual and Affective Education Programme)</td>
</tr>
<tr>
<td>PER</td>
<td>Performance Evaluation Report</td>
</tr>
<tr>
<td>PMTCT</td>
<td>Prevention of Mother to Child Transmission</td>
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<tr>
<td>RCSA</td>
<td>Risk and Control Self-Assessment</td>
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### Evaluation

<table>
<thead>
<tr>
<th>Number</th>
<th>Title</th>
<th>Sequence Number</th>
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<tbody>
<tr>
<td>1</td>
<td>Characterization of Integral Child Care Centers and Early Childhood Services (Caracterización de los Centros de Atención Integral Infantil y los Servicios a Primera Infancia)</td>
<td>1</td>
<td>Study</td>
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<td>2</td>
<td>Characterization of Children and Adolescents Living with HIV/AIDS (Caracterización de Niños, Niñas y Adolescentes Viviendo con VIH/SIDA)</td>
<td>1</td>
<td>Study</td>
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<tr>
<td>3</td>
<td>Study on Integration of Prenatal Care for the Detection and Clinical Handling of HIV and Syphilis (Estudio sobre Integración de la Atención Prenatal con los procesos de detección y manejo clínico del VIH y de la sífilis)</td>
<td>1</td>
<td>Study</td>
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<tr>
<td>4</td>
<td>Baseline Study on Affective-Sexual Education Program (Estudio Línea de Base del Programa Educativo Afectivo Sexual)</td>
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<td>Study</td>
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<td>5</td>
<td>Institutional Ethnography: Institutional Practices of the Protection System (Etnografía Institucional: Prácticas Institucionales del Sistema de Protección)</td>
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<td>Study</td>
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<td>6</td>
<td>Child Labour in the Dominican Republic (El Trabajo Infantil en la República Dominicana)</td>
<td>1</td>
<td>Study</td>
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<td>7</td>
<td>National Household Survey: Childhood and Women Situation (Encuesta Nacional de Hogares (ENHOGAR 2010): Situacion de la Infancia y las Mujeres)</td>
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<td>Survey</td>
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### Other Publications

<table>
<thead>
<tr>
<th>Number</th>
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<tbody>
<tr>
<td>1</td>
<td>Educational Handbook for Children living with HIV (Manual Educativo para Niños y Niñas Viviendo con VIH)</td>
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<tr>
<td>2</td>
<td>Handbook on Preventing Sexual Commercial Exploitation of Children and Adolescents in the Tourism Sector (Manual de Prevención de la Exploitación Sexual Comercial de Niños, Niñas y Adolescentes en el Sector Turismo)</td>
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<tr>
<td>3</td>
<td>Handbooks of Return to Happiness (Manuales del Programa Retorno a la Alegria)</td>
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<tr>
<td>4</td>
<td>Handbooks on Violence, Abuse and Commercial Sexual Exploitation for Teachers and Students of the Youth and Employment Programme of Ministry of Labour</td>
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### Lessons Learned

### Programme Documents