UNICEF Annual Report 2017

Ethiopia

Executive summary

Ethiopia has achieved impressive progress in reducing poverty and expanding investments in basic social services. Despite strong economic growth and a comprehensive policy framework, developmental outcomes remained uneven, with significant disparities in terms of wealth quintiles, geographic location and gender.

In 2017, Ethiopia continued to experience significant humanitarian needs due to the Indian Ocean Dipole-induced Horn of Africa drought, combined with floods, disease outbreaks and disruption of basic public services, affecting the lives and livelihoods of 10.5 million Ethiopians. Health emergencies, including the outbreak of acute watery diarrhoea (AWD), measles and scabies and the drought-induced surge in undernutrition strained an already overstretched health system and rendered women and children in the hardest to reach areas even more vulnerable. The State of Emergency declared in response to political protests in October 2016 remained in place until August 2017. In mid-2017, an ethnic conflict erupted between Oromos and Somalis. A total of 1.3 million people were internally displaced as a result of conflict and drought by the end of 2017.

UNICEF Ethiopia supported the Government of Ethiopia and humanitarian partners in meeting complex challenges through building on existing government delivery systems and development programmes. This included the health extension programme (HEP), community-based management of malnutrition programme, and productive safety net programme (psnp), as well as mobile health and nutrition teams that provided lifesaving treatment to 483,701 people. UNICEF Ethiopia assisted 2.4 million children and adults with access to safe water, alternative hygiene and sanitation facilities and supplies. UNICEF supported mobile maintenance teams (MMTs), which maintained and rehabilitated 148 boreholes benefiting 547,950 people and contributing to the reduction of non-functionality of water supply facilities.

Leveraging government systems, multisectoral coordination mechanisms and resources, the UNICEF response strengthened the capacity of those structures to better respond to future humanitarian crises. Significant advances in the country’s resilience building agenda were achieved. Domestic financing was mobilized with US$29 million health sector pooled funds pivoted to respond to the humanitarian crises. Leveraging its convening role as the co-chair of the education sector working group, UNICEF Ethiopia successfully advocated for the first-ever inclusion of a specific budget for humanitarian response into the new education sector pooled fund. Through the building self-reliance for refugees and vulnerable host communities programme, UNICEF initiated an integrated multisectoral approach toward service delivery across refugees and host communities, linking health, education, WASH, nutrition and child protection services.

UNICEF continued to influence government policies and programmes to realize the rights of children and women. The National Children’s Policy was finalized with UNICEF technical support, providing a robust framework to implement the Convention on the Rights of the Child. A ground-breaking achievement for refugee protection was realized through UNICEF’s advocacy
for the amendment of existing legislation, with refugees now able to register their vital life events with national authorities. Advocacy on domestic financing and child sensitive public budgets also resulted in the development and dissemination of sectoral budget briefs.

Service coverage for children also improved through UNICEF support. Civil registration coverage increased from 55 percent to 84 percent at sub-district level between 2016 and 2017. Integrated community case management of childhood illnesses (iCCM) and community based newborn care (CBNC) were scaled up to 94 percent and 97 percent, respectively, in all agrarian health posts. Treatment services for girls affected by female genital mutilation were expanded.

UNICEF Ethiopia leveraged partnerships and resources to promote results for children. It played a key role in leveraging US$75 million of World Bank resources by successfully advocating for the inclusion of nutrition indicators among the Disbursement Linked Indicators. UNICEF and the World Bank also committed to enhanced collaboration through joint design of a holistic early childhood education initiative within the general education quality improvement for equity programme.

Effective and efficient resource management to deliver sustainable results for children remained a high priority. UNICEF Ethiopia successfully closed all recommendations from the 2016 internal audit.

In 2018, UNICEF will continue to focus on supporting government policies and programmes to bridge equity gaps and investing in building resilient government systems. In particular, UNICEF Ethiopia will focus on rolling out birth registration and strengthening multi-sectoral linkages between systems, such as health- and nutrition-sensitive social protection and ending child marriage. UNICEF Ethiopia will continue to advocate for rolling out public finance for children and integrated early childhood development (IECD). Support will be provided to drought and conflict-affected internally displaced people and to advance Ethiopia’s resilience building agenda. UNICEF Ethiopia also will focus on the implementation of the 2018 midterm review (MTR).

**Humanitarian assistance**

In 2017, Ethiopia continued to experience significant humanitarian needs due to the ongoing impacts of the 2016 El Niño-induced droughts and the onset of the 2017 Horn of Africa droughts. Erratic and inadequate rainfall particularly impacted the southern and eastern lowland areas. Conditions deteriorated throughout 2017: from an initial estimate of US$948 million to meet humanitarian needs in January 2017, the Government and humanitarian partners revised the estimate to US$1.258 billion in August to provide food to 8.5 million people and safe water to 10.5 million people. Large-scale displacement as a result of conflict and drought intensified humanitarian and protection needs, with 1.696 million people displaced as of early December 2017. Ethiopia is the second largest refugee-hosting country in Africa, hosting 889,071 refugees. In 2017, 103,263 new refugees arrived in Ethiopia, of which more than 73,000 were South Sudanese, and a majority were women and children.

UNICEF Ethiopia, under the leadership of the Government of Ethiopia, supported the development of WASH, education, child protection and nutrition cluster plans, and coordination of national responses. UNICEF also provided support to the development and implementation of the health response. Under the framework of the Humanitarian Requirements Document (HRD), UNICEF Ethiopia appealed for US$135.9 million to reach the most vulnerable children and women. The appeal was 66 percent funded, with 93 percent of funds received for WASH,
nutrition and health interventions. With the exception of health, critical funding gaps remained across all sectors. Child protection and education experienced the most severe funding shortfalls.

UNICEF Ethiopia targeted its health and nutrition support through the Emergency Nutrition Coordination Unit of Ethiopia and the Federal Ministry of Health (FMoH). It also supported the Government to launch an integrated nutrition, WASH, health and communication for development (C4D) response, with lessons learned informing programming for 2018. As of November 2017, UNICEF Ethiopia procured and distributed stocks of ready-to-use therapeutic foods to treat some 380,000 children with severe acute malnutrition (SAM). From January to October 2017, 93 percent of the 284,804 children admitted for treatment of severe acute malnutrition were cured. In Afar and Somali regions, 483,701 people living in remote areas received medical consultations through 60 mobile health and nutrition teams (achieving 121 percent of the 400,000 target). These teams were deployed by the respective regional health bureaus with UNICEF support for provision of essential drugs, medical and nutrition supplies plus technical/financial assistance.

The Ministry of Education (MoE) for the first time included conflict-affected children in the emergency response. UNICEF provided 163,337 children in displacement and refugee sites with access to emergency education programmes. It also supported the development of education emergency response plans in the three most-affected regions of Somali, Oromia, and Southern Nations, Nationalities and Peoples (SNNP), which will inform emergency education responses through to June 2018.

Despite a significant child protection funding shortfall, 7,453 of an anticipated 10,000 unaccompanied and separated children were reunified with their families or placed under alternative care, while 22,235 vulnerable children received psychosocial support (out of a planned 50,000).

UNICEF Ethiopia assisted more 2.4 million people affected by drought with access to safe water, alternative hygiene and sanitation facilities and supplies. In collaboration with regional government and NGO partners, UNICEF Ethiopia supported water provision to the worst-affected communities in Somali, Oromia, SNNP and Afar regions, through a combination of water-trucking, borehole rehabilitation and expansion of water schemes, the latter a resilience building measure. This included 1,892,962 individuals who accessed water trucking, water chemicals and WASH non-food items including soap, jerry cans and water tanks. An additional 534,383 people benefited from clean and safe water through the construction, expansion, and rehabilitation of water supply systems. More than 2.7 million people were reached with communication activities that promoted good hygiene and sanitation practices and equipped them with the information to protect themselves and their families against disease outbreaks.

UNICEF Ethiopia’s humanitarian response faced two main challenges: the lack of real-time data (except for the WASH response in Somali region) and site monitoring to inform programme response and the conflict along the Somali and Oromia regional border, which led to large-scale displacement and limited access to areas.

In 2018, UNICEF Ethiopia will continue to work through government, NGO and UN partners to address the anticipated humanitarian needs, taking a cross-sectoral approach. UNICEF Ethiopia will build on its current approach of delivering through government systems, supporting disaster preparedness and inter-agency efforts to address chronic needs through recovery and resilience interventions, conflict-sensitive approaches and meeting immediate life-saving needs.
Equity in practice

Ethiopia has achieved significant progress in economic growth and human development. As a result of equity-focused development agenda, the percentage of the population living below the national poverty line was reduced from 29.6 percent in 2010/11 to 23.5 percent in 2015/16, with approximately 5.3 million people lifted out of poverty. However, everyone has not benefited from the development efforts and strong disparities exist in terms of wealth, geographic location and gender. In line with the 2014-2017 Strategic Plan (SP), equity remained the underlying principle for UNICEF Ethiopia’s 2016-2020 Country Programme, with a specific focus on the most economically marginalized, in order to address multidimensional root causes and drivers of intergenerational poverty and inequity and child marriage.

As a result of contributions by UNICEF Ethiopia and its partners to equity-focused evidence generation and advocacy, equity is now reflected in all major national development policies and programmes. Most recently, with support of partners, the health extension programme (HEP) was revised in 2017 to address the specific needs of people living in rural, urban and pastoralist settings.

In 2017, UNICEF Ethiopia continued to support the development of poverty- and equity-focused analytical work, including the chronic poverty analysis, community-based health insurance – PSNP synergies, and a study on long-lasting impact of the El Niño drought emergency. Critical pieces of evaluation were carried out to better understand targeting and programme impact on the most vulnerable beneficiaries, including the evaluation of alternative basic education for pastoralist communities.

UNICEF supported district level immunization equity analysis and planning in Addis Ababa, Amhara, Oromia and SNNP, home to nearly 80 per cent of Ethiopia’s unimmunized children. A total of 394 health managers were provided with improved understanding and skills on equity to better target disadvantaged children and link them to social protection programs. This pro-equity work will benefit an estimated 752,000 infants from poor and marginalized families.

In support of equitable service delivery, UNICEF enabled integrated community case management of childhood illnesses (iCCM) and community based newborn care (CBNC) to be scaled up to 94 percent and 97 percent, respectively, in all agrarian health posts. Significantly, CBNC was introduced in Afar and Benshangul Gumuz, two regions with high newborn and child mortality rates.

Equity was the driving force of UNICEF’s support to ending child marriage. Through UNICEF-supported social mobilisation events and community dialogues, 759,051 community members in 73 woredas of six regions were sensitised on the negative effects of child marriage. As a result of ongoing efforts by UNICEF, the Government of Ethiopia and development partners, a significant number of planned child marriages were reported in 2017 to law enforcement bodies, with 2,776 out of 8,778 reported cases cancelled. The number of child marriage cases identified and reported was four times higher than in 2016 due to improved reporting mechanisms and the empowerment of girls to speak out.

Children from poor, rural and/or pastoralist communities have the odds stacked against them before they enter primary school. Young children who face multiple disparities stand to benefit the most from participation in high-quality early childhood education programmes, as evidenced by reduced primary school repetition and drop-out rates and increased academic achievements.
UNICEF built on strong evidence generated from a pilot accelerated school readiness initiative to successfully leverage US$60 million for targeted early childhood education interventions financed within a multi-donor general education sector pooled programme.

UNICEF, through its operational research, helped bring a sharper equity focus to the productive safety net programme (PSNP), the country’s flagship social protection initiative, which reached approximately 8 million beneficiaries nationwide. UNICEF’s ongoing improved nutrition through integrated basic social services with social cash transfer (IN-SCT) project generated information on the feasibility, cost-effectiveness and impact of multi-sectoral interventions for the current phase of the PSNP. In response to data that showed the third phase of PSNP had little impact on the nutrition status of clients and that stunting among PSNP children was higher than the national average, the IN-SCT programme tested modalities to make the PSNP nutrition-sensitive. These included soft conditionalities for pregnant and lactating women and chronically malnourished children, nutrition sensitive public works and income generating activities, plus integration of C4D on health and nutrition into the programme.

UNICEF Ethiopia will strengthen its engagement on public finance and budget allocation analysis to support the Government of Ethiopia in targeted spending for more inclusive development. UNICEF worked with the Ministry of Finance and Economic Cooperation and Ministry of Women and Children’s Affairs on a child public expenditure measurement study to improve long-term domestic financing for the most vulnerable children, with the aim to identify bottlenecks and gaps at federal and regional levels in budget allocation and expenditure.

**Strategic Plan 2018-2021**

UNICEF Ethiopia built on the 2016/2017 midterm review process of its current Country Programme 2016-2020 to align with the new Strategic Plan (SP) and the Gender Action Plan (GAP) 2014-2017 where relevant and feasible within the country context.

UNICEF Ethiopia’s revised programmes integrated the lessons learned from the previous SP, including the increased focus on operationalizing the call to leave no one behind, strengthening national systems, linking humanitarian and development programming, systematically applying gender analysis during programme design and delivery, and supporting inclusive and meaningful community engagement and child participation in decisions that affect them. The revised programmes also took into consideration the latest findings of the Ethiopia Demographic and Health Survey 2016.

UNICEF Ethiopia revised the child protection programme results structure to align with Goal 3 in the SP, including the growing evidence on the elaboration of theories of change to inform programming and policy investments, notably concerning addressing violence against children and strengthening routine data collection. The education programme was revised to reflect the shift from access alone to learning, and an additional output was added to reflect the SP’s guiding principle and cross-cutting priority of mainstreaming gender equality. A focus on internal displacement and migration was also added. Indicators in the social protection programme were changed to better align with the SP’s focus on the multiple dimensions of deprivation. UNICEF Ethiopia’s advocacy strategy was revised to better incorporate the SP’s cause framework. As part of the midterm review process, climate change was incorporated as an emerging area.

UNICEF Ethiopia monitored progress against the SP as part of its regular reporting through the mid-year review exercise.
The new SP provides a number of key opportunities for country-level implementation in Ethiopia. Overall, the SP’s focus on the most disadvantaged provides a strategic opportunity to further advance the equity agenda at the country level. In particular, the SP’s integrated approach to gender discriminatory roles and practices, adolescent girls’ empowerment, child poverty and social protection provides a strategic framework for UNICEF Ethiopia’s programming on addressing the root causes of multidimensional deprivation, such as the multi-sectoral outcome on adolescent girls with a particular focus on harmful traditional practices.

The SP’s cross-cutting priority on faster, more effective, and at-scale humanitarian action through national systems presents a critical opportunity to guide and accelerate UNICEF Ethiopia’s efforts toward a government-led, financed and coordinated humanitarian response.

Ethiopia’s underdeveloped private sector, low tax base, and limited domestic resources within a context of declining Overseas Development Assistance presents challenges for advancing child sensitive, inclusive and sustainable development financing.

Development in Ethiopia is marked by a high level of fragility. The country’s population dynamics of a very young age structure combined with continued high levels of fertility, ongoing urbanization and internal migration within a context of widespread poverty and deprivation present a significant risk to social cohesion and political stability. Ethiopia’s vulnerability to environmental shocks also presents critical challenges to achieving long-term development progress, in particular for the most disadvantaged who are disproportionally affected by recurring crises.

**Emerging areas of importance**

**Climate change and children.** In 2017, UNICEF responded to both short- and long-term needs of children and communities affected by climate shocks. Drought remained one of the major natural disasters disrupting the livelihood of Ethiopians, resulting in significant water insecurity, especially in lowland regions of the country. UNICEF continued to support the Government of Ethiopia to improve water security through the ONE WASH National programme and other regular development and humanitarian assistance activities. UNICEF prioritized the implementation of resilient WASH programming by constructing large multi-village water supply systems, drilling deep boreholes in Afar, Somali and Oromia and expanding existing water sources to enable access to sustainable water supplies. As a result of UNICEF Ethiopia engagement, a Climate Resilient WASH component is now part of the One WASH National Programme, with a budget of US$5 billion for five years to specifically focus on the provision of adequate, safe, resilient and sustainable WASH services.

**Refugee and migrant children.** Ethiopia was host to the second largest refugee population in Africa, with 889,071 registered refugees and asylum-seekers residing in the country as of 31 October 2017, according to United Nations High Commissioner for Refugees (UNHCR). UNICEF implemented the US$50 million building self-reliance programme (DFID-funded) in partnership with UNHCR and the Government of Ethiopia that will directly contribute to the Government’s Comprehensive Refugee Response Framework (CRRF). The programme seeks to build resilient government systems for provision of social services for both refugees and host communities. It is based on an integrated multi-sectoral approach that includes water, sanitation, health, nutrition, education and child protection. In 2017 UNICEF convened high-level discussions with the Government and development partners on efficient and effective ways to address the significant education gaps for refugees and host communities; developed a national case management system framework for systematic referral of vulnerable children to
specialized services; and delivered major water schemes across refugee and host communities in Itang woreda. Those initiatives focused on long lasting and resilient solutions; equitable distribution of services that preventing conflicts for access to water resources; and engagement of the private sector to ensure quality and efficiency in WASH service provision.

**Greater focus on second decade of life.** UNICEF Ethiopia placed greater focus on the second decade of life in its country programme (2016-2020), emphasizing evidence-based programming and advocacy, with a focus on an integrated, cross-sectoral approach to adolescent girls’ survival, development, protection and participation. Based on the Ethiopian Demographic and Health Survey (EDHS) 2016, UNICEF conducted data analysis to refine its priorities in ending child marriage and female genital mutilation/cutting (FGM/C), and secured funding for a baseline to collect gender-disaggregated data. UNICEF and its partners also successfully promoted the adoption of a national menstrual hygiene management (MHM) guideline and the development of national quality standards for the local production of reusable sanitary pads. UNICEF technical support contributed to inclusion of adolescent nutrition in the school health programme and the MoE's life skills manual being rolled out in 100 PSNP woredas. UNICEF supported an adolescent de-worming campaign in 473 high and moderate soil-transmitted helminthiasis woredas and reached 1,850,652 adolescent girls through the promotion of dietary diversity and hygiene and sanitation. More than 61,000 adolescent girls were reached with HIV testing and counselling, training on life skills and peer education in 120 target hotspot woredas of six regions.

**Accelerate integrated early childhood development (ECD).** Integrated early childhood development (IECD) is one of the overarching cross-sectoral strategies for UNICEF Ethiopia's country programme (2016-2020). In 2017, UNICEF supported the development of the national Baby and Mother WASH implementation guideline, with plans to initiate field-based Baby WASH activities and C4D support to behaviour change in 2018. To accelerate adoption of optimal infant young child feeding practices, UNICEF supported the Government with the 1,000 days mass media campaign to disseminate key messages. UNICEF successfully advocated for the inclusion of nutrition indicators sensitive to the needs of children aged 0-3 years in the World Bank-supported project. In 2018, UNICEF Ethiopia will focus on revitalizing government institutional networks for IECD policy setting and coordination, and on ensuring adequate human resources to influence wider investments in IECD programming.

**Urbanization and children.** To better understand the impact of rapid urbanization in Ethiopia, UNICEF continued to work closely with the Ethiopian Centre for Child Research (ECCR) on a study on urbanization trends and urban child poverty. As part of its Urban WASH programme, UNICEF supported the Government in constructing water supply and sanitation facilities in urban and peri-urban areas. The multi-year programme is expected to be benefit 250,000 children and their family members in the localities by 2018.

### Summary notes and acronyms

**Note:**
In this report, woredas refer to districts, and kebeles refer to sub-districts.

**Acronyms**
- ARIDA: acute respiratory infection diagnostic aid
- AWD: acute watery diarrhoea
- C4D: communication for development
- CBNC: community based newborn care
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<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tr>
<td>CBHI</td>
<td>community based health insurance</td>
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<td>CRBP</td>
<td>Child Rights Business Principles</td>
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<td>CRRF</td>
<td>Comprehensive Refugee Response Framework</td>
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<td>ECCR</td>
<td>Ethiopian Centre for Child Research</td>
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<td>ECD</td>
<td>early child development</td>
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<td>EDHS</td>
<td>Ethiopian Demographic and Health Survey</td>
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<td>FGM/C</td>
<td>female genital mutilation/cutting</td>
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<td>FMoH</td>
<td>Federal Ministry of Health</td>
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<td>FO</td>
<td>field office</td>
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<td>GAP</td>
<td>gender action plan</td>
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<td>GEROS</td>
<td>Global Evaluation Reports Oversight System</td>
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<td>GoE</td>
<td>Government of Ethiopia</td>
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<td>GS</td>
<td>general service</td>
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<td>HEP</td>
<td>health extension programme</td>
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<td>HIV</td>
<td>human immunodeficiency virus</td>
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<td>HPV</td>
<td>human papillomavirus</td>
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<td>HRD</td>
<td>Humanitarian Requirements Document</td>
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<td>iCCM</td>
<td>integrated community case management of childhood illnesses</td>
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<td>IDP</td>
<td>internally displaced people</td>
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<td>ILO</td>
<td>International Labour Organization</td>
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<td>INGO</td>
<td>international non-government organization</td>
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<td>IN-SCT</td>
<td>Improved Nutrition through Integrated Basic Social Services with Social Cash Transfer</td>
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<td>IP</td>
<td>international professional</td>
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<td>MHM</td>
<td>menstrual hygiene management</td>
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<td>MMTs</td>
<td>mobile maintenance teams</td>
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<td>MNCH</td>
<td>maternal, newborn and child health</td>
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<td>MoE</td>
<td>Ministry of Education</td>
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<td>MPLS-VPN</td>
<td>Multi-Protocol Label Switching-Virtual Private Network</td>
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<td>MTR</td>
<td>midterm review</td>
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<td>NHRAP</td>
<td>National Human Rights Action Plan</td>
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<td>NGO</td>
<td>non-governmental organization</td>
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<td>NO</td>
<td>national officer</td>
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<td>OWNP</td>
<td>One WASH National Programme</td>
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<td>PLW</td>
<td>women who are pregnant or lactating</td>
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<td>PRIME</td>
<td>plan for research, impact monitoring and evaluation</td>
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<td>PSNP</td>
<td>productive safety net programme</td>
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<td>SAM</td>
<td>severe acute malnutrition</td>
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<td>SaTo</td>
<td>safe toilet</td>
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<td>SDD</td>
<td>Solar Direct Drive</td>
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<td>Sustainable Development Goals</td>
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<td>SP</td>
<td>Strategic Plan</td>
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<td>school-related gender-based violence</td>
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<td>Southern Nations, Nationalities and Peoples’</td>
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<td>UN</td>
<td>United Nations</td>
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<td>UNESCO</td>
<td>United Nations Educational, Scientific and Cultural Organization</td>
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<td>UNHCR</td>
<td>United Nations High Commissioner for Refugees</td>
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<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
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<td>VERA</td>
<td>Vital Events Registration Agency</td>
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<tr>
<td>WASH</td>
<td>water, sanitation and hygiene</td>
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UNICEF Ethiopia prioritized capacity building to improve quality of services for children and women.

Through a multi-year partnership between UNICEF and UNESCO’s International Institute of Education Planning, a certified course on sector planning and management was initiated for senior Ministry of Education staff.

Delivery of quality preventative and curative nutrition services was enhanced through integrated training of 5,636 health workers supported by UNICEF. Agricultural extension workers were also trained, resulting in effective implementation of nutrition provisions of the productive safety net programme (PSNP) and promotion of nutrition practices. Training conducted for media and religious leaders also improved awareness on malnutrition among communities.

The Government was supported to establish a utilities model in eight towns of Amhara, Tigray, Oromia and Somali regions to improve technical and financial capacity in managing delivery of WASH services, shifting towards full-fledged utilities structures.

With UNICEF support, service coverage and standards of civil registration were enhanced, increasing from 55 percent to 84 percent at kebele level between August 2016 and July 2017. Pre- and in-service trainings, supportive supervision and quality assurance were provided to 31,000 civil registrars.

To improve healthcare seeking norms related to maternal, newborn and child health (MNCH), an adapted strategy was developed with UNICEF support to address challenges and bottlenecks, which emphasized building skills of communities for dialogue to demand quality MNCH services and use media and new technologies as means of dissemination of newly adopted norms. The strategy will be further implemented in 2018.

Regionally, UNICEF worked with the African Union to develop TRANSFORM, an inter-agency training for an Africa-specific social protection scheme, and supported the Government with its rollout. Implementation and case management of children’s vulnerabilities and underlying deprivations improved through a strengthened social welfare workforce.

In 2018, UNICEF will continue to emphasize strengthening capacity of government systems, in particular shock responsive social protection, nutrition and birth registration systems.

UNICEF Ethiopia supported the mainstreaming of the Sustainable Development Goals (SDGs) at subnational levels and finalization of the SDGs Voluntary National Report. The National Children’s Policy was finalized with technical support from UNICEF, providing a robust framework for engagement with all social ministries and the Ethiopian Human Rights Commission to fulfill and implement the Convention on the Rights of the Child.

Groundbreaking achievement for refugee protection was realized through UNICEF advocacy for
the amendment of existing legislation, with refugees now able to register their vital life events, including birth, directly with national authorities.

In partnership with UNICEF, the Ethiopian Centre for Child Research (ECCR) widely disseminated its first research on chronic poverty, highlighting how child sensitive social protection plays a crucial role in preventing intergenerational transmission of poverty.

The second phase of the health extension programme (HEP) was finalized with three tailored designs for rural, urban and pastoralist settings in order to shift responsibility for implementation to community level structures. UNICEF provided technical inputs.

UNICEF, through a comprehensive nutrition assessment, significantly influenced the nutrition component of the additional PSNP funding from the World Bank. Through intensive advocacy, a set of nutrition-related indicators were included in the World Bank initiative for Enhancing Shared Prosperity through Equitable Services, which specifically focuses on PSNP clients as a proxy for the most vulnerable. In collaboration with WHO, UNICEF developed a technical guidance on detection and fluid management of children with severe acute malnutrition and acute watery diarrhoea, which informed the WHO global guideline on this subject.

In 2018, UNICEF Ethiopia’s evidence generation, policy dialogue and advocacy priorities will focus on ending child marriage and reducing neonatal and child mortality.

**Partnerships**

UNICEF Ethiopia leveraged its convening power to co-chair the health, population and nutrition group, as well as the WASH and education sector working groups. Through these platforms, UNICEF influenced the use of pooled funds for an integrated health, nutrition and WASH response to acute watery diarrhoea and increased grant allocations for primary schools affected by drought and conflicts.

UNICEF Ethiopia continued to foster partnerships to build an environment conducive to the realization of children’s rights. UNICEF played a key role in leveraging US$75 million of World Bank resources for nutrition through the early years initiative and successfully advocated for the inclusion of nutrition indicators among the Disbursement Linked Indicators. UNICEF and the World Bank also committed to enhanced collaboration through joint design of a holistic early childhood education initiative within the general education quality improvement for equity programme.

Partnerships with faith-based organizations led to dialogue on female genital mutilation and cutting (FGM/C) and child marriage. UNICEF supported the development of ‘Concerted Efforts of Faith-based Organizations to Abandon Female Genital Mutilation & Child, Early and Forced Marriage in Ethiopia’, in partnership with the Ethiopian Orthodox Church. UNICEF Ethiopia also partnered with the Islamic Affairs Religious Council in Somali region to engage in similar dialogues with community members across 35 woredas.

UNICEF Ethiopia also supported the rollout of the Children’s Rights and Business Principles (CRBP) and conducted the Child Rights in Business training in collaboration with ILO for more than 40 participants from different factories. Action plans were developed to integrate CRBP into factories’ business operational manuals and human resources policies, with particular focus on maternity rights and child care.
External communication and public advocacy

In response to the ongoing emergency situation, UNICEF Ethiopia supported strategic international media and donor visits to the affected regions, raising awareness on the critical situation amid several humanitarian situations globally.

Although the main focus of external communication and public advocacy was to highlight the devastating effects of the humanitarian situation, UNICEF Ethiopia also engaged in key global and local advocacy on issues affecting children in Ethiopia, particularly early childhood development (ECD), female genital mutilation/cutting, child marriage, birth registration and climate resilience. UNICEF took part in the Cause Framework global campaigns on ECD, engaging Ethiopian celebrities to join the #EarlyMomentsMatter movement on Father’s Day. Through social media platforms, UNICEF reached more than a million people, and engaged 30 percent of them with key child development messages.

UNICEF Ethiopia continued to work with the Government Communication Affairs Office to jointly advocate on children’s issues, training more than 100 journalists across the country. Given the importance of media in advancing the discourse on children’s rights, UNICEF also partnered with a national broadcaster for public advocacy on key priority areas of birth registration and ending child marriage and FGM/C.

UNICEF Ethiopia leveraged key events to conduct external communication and public advocacy. On World Children’s Day, UNICEF provided a platform for child parliamentarians to shadow government ministers and highlight crucial issues affecting children in Ethiopia. Children also took over primetime television to anchor the news as part of the global UNICEF initiative. At the 4th Act on the Call Summit, UNICEF played a critical role in supporting the Federal Ministry of Health (FMoH) to communicate key messages related to Maternal, Newborn and Child Health, and reached close to a million people through social media. Ministers and Heads of Country Delegations from 26 countries adopted the ‘Addis Ababa Declaration’ and committed to ending preventable maternal and child deaths.

South-South cooperation and triangular cooperation

South-South cooperation continued to be a key driver for knowledge exchange and leveraging donor resources in 2017.

In the WASH sector, UNICEF Ethiopia continued to support and strengthen South-South cooperation between the Government of Ethiopia and the Government of Brazil. Brazil serves as a good example for decentralized regulatory entities at state, district and even municipal levels. Accordingly, Brazil supported Ethiopia in the creation of regulatory agencies at regional level and the broader discussion of regulation as part of the sector’s enabling environment. The Brazilian government also provided technical support in the development of decentralized sewerage systems for condominiums in Ethiopia urban areas.

In the health sector, UNICEF Ethiopia facilitated South-South cooperation between the Government of Ethiopia and the Government of China, putting maternal and child health on the bilateral agenda and continuing to advocate for leveraging Chinese aid resources for MNCH to sustain the gains achieved on maternal and child mortality in Ethiopia. In partnership with the Government, UNICEF Ethiopia designed a proposal to enhance routine care for mothers and newborns through improved management of complications during labour, childbirth and the early postnatal period, advance neonatal intensive care for newborns in primary hospitals, strengthen the health information systems, and improve monitoring and evaluation capacity in
the health sector. This project, once approved, will increase the investment and positive impact on MNCH in the context of SDGs, universal health coverage and resilient health system.

Identification and promotion of innovation

To ensure access of the poorest households to basic social services, UNICEF Ethiopia assessed the linkages between the productive safety net programme (PSNP), a flagship cash transfer programme, and the community based health insurance (CBHI). A policy brief was produced for advocacy and findings will be used to fine-tune CBHI premium payment exemption criteria, adapt the legal directives for health insurance, improve system efficiencies, leverage additional resources for CBHI and strengthen collaboration on financial protection of the poor.

Recognising the success of improved sanitary platforms in other East African countries, UNICEF Ethiopia introduced plastic pan and stool products in March 2017 as a means of accelerating achievement of national sanitation targets. UNICEF Ethiopia worked in partnership with Lixil, the company that designed the initial products, to donate pans and stools for field trial. The piloting of Safe Toilet (SaTo) products was endorsed by the Federal Ministry of Health (FMoH) and field trials began in two regions (Oromia, SNNP) led by regional health bureaus, woreda health offices and an NGO partner. The purpose of the field trial is to assess the effectiveness and acceptability of plastic pans and stools in Ethiopia, which can be retro-fitted into existing unimproved latrines. Should SaTo pans and stools be found effective, UNICEF will advocate to scale up the use of this technology, to be produced in-country at scale.

Pneumonia was a significant cause of children’s deaths in Ethiopia. In collaboration with UNICEF Supply Division and Headquarters, UNICEF Ethiopia engaged in a field trial of an acute respiratory infection diagnostic aid (ARIDA). Initial results led to a further review of the ARIDA technology to improve the device prior to large scale production, marketing and use.

Support to integration and cross-sectoral linkages

UNICEF Ethiopia applied an integrated multisectoral approach to service delivery across refugee and host communities through the ‘Building Self-reliance for Refugees and Vulnerable Host Communities by Improved Sustainable Basic Social Service Delivery’ programme. The programme sought to strengthen government planning, implementation and reporting related to identifying needs in health, education, WASH, nutrition and child protection.

In the ‘Improved Nutrition through Integrated Basic Social Services and Social Cash Transfer’ pilot supported by UNICEF, sectors combined efforts to apply a systems approach to social protection within the flagship PSNP IV. The social protection sector worked with agriculture, health, nutrition, and child protection sectors to ensure sustainable impacts on the most vulnerable children and households.

UNICEF led the multisectoral, inter-agency emergency response to the nutrition crisis that affected Somali region in 2017, and together with WHO succeeded in controlling the spread of acute watery diarrhoea at the height of the outbreak, when more than 750 cases were recorded per day. The effective integrated response encompassing WASH, health, communication for development and nutrition was consequently rolled out to other regions to prevent similar outbreaks.

UNICEF supported multisectoral coordination of the nutrition sector at federal and regional levels, and played a big role in ensuring a multisectoral approach for stunting reduction. Among the 13 line ministries that signed the National Nutrition Policy II, five either created a nutrition
unit or appointed a focal person to ensure a multisectoral response to stunting. UNICEF contributed to the first multisectoral Ethiopian Food and Nutrition Policy, the School Health and Nutrition Strategy, the Nutrition Sensitive Agriculture Strategy, and integration of nutrition-sensitive interventions in the PSNP IV.

A key lesson learned was that the success of integrated approaches relies on robust knowledge of how government structures at all levels interact. In 2018, UNICEF will continue to improve multisectoral and integrated responses working through government systems.

### Service delivery

UNICEF Ethiopia supported service delivery through a systems strengthening approach.

With UNICEF support, integrated community case management (iCCM) and community-based newborn care (CBNC) were scaled up to 94 percent and 97 percent, respectively, in all agrarian health posts. CBNC was introduced in Afar and Benishangul Gumuz, regions with high newborn and child mortality. To ensure government ownership and programme sustainability, key components will be mainstreamed into regional and woreda planning, training and monitoring.

Investment by UNICEF, the Federal Vital Events Registration Agency (VERA), and regional VERA in capacity building and supportive supervision improved quality and timeliness of birth registration. Of the 445,144 births registered in 2016, 49 percent registered within 90 days, 25 percent registered after 90 days but within one year, and 26 percent registered after one year. As of May 2017, 93.6 percent of registrations met required standards.

UNICEF supported the Somali Region Water Bureau to establish mobile maintenance teams (MMTs) that back-up woreda water offices and WASH committees to ensure functionality of water facilities. MMTs strengthened capacity at woreda and regional levels, maintained and rehabilitated 148 boreholes in 41 woredas that benefited 547,950 people, and contributed to reduction in non-functionality of water supply facilities, from 40 percent to 28 percent in six months.

Availability of quality supplies is paramount to service delivery. In collaboration with Supply Division, UNICEF Ethiopia procured 6,000 solar direct drive (SDD) refrigerators to improve routine immunization cold chain systems and medical equipment for 80 hospitals to deliver quality intensive care for newborns. This was the largest UNICEF procurement in the past decade using government resources. The Federal Ministry of Health capacity on procurement and supply chain quality assurance was advanced through UNICEF trainings on comprehensive procurement, distribution, monitoring and planning and facility readiness assessment methods and tools.

To strengthen routine monitoring and government accountability, UNICEF continued to conduct surveys to triangulate data that informed UNICEF development and humanitarian programming.

### Human rights-based approach to cooperation

UNICEF Ethiopia continued to take a human rights-based approach to programming and cooperation.

In 2017, the Government of Ethiopia launched its second five-year National Human Rights Action Plan (NHRAP). With partners, UNICEF Ethiopia supported the implementation of areas related to the Convention on the Rights of the Child and prioritized by the Government in the
NHRAP, including strengthening efforts to expand birth registration for children born as refugees in Ethiopia. UNICEF and UNHCR successfully advocated and provided technical support for the amendment of the existing law on vital events registration and national identity cards to allow for the national system to accommodate the vital events registration of refugees and migrants residing in Ethiopia. The revised proclamation (No1049/2017) was gazetted in August 2017 and the vital events registration system for refugees was launched in October 2017 across the country. With the new civil registration law coming into effect, 70,000 refugee children born in Ethiopia now have the right to equal access to civil registration services without discrimination associated with nationality or origin. This contributes to achievement of one of the nine pledges of the CRRF made by the Government during the Leaders’ Summit on Refugees in September 2016.

UNICEF Ethiopia continued to support the Ministry of Women and Children Affairs and the Ethiopian Human Rights Commission to disseminate and monitor the implementation of the UN Committee on the Rights of the Child Concluding Observations and Recommendations adopted in May 2015. The concluding observations were translated into three local languages (Amharic, Tigrigna and Oromiffa) and disseminated widely to stimulate discourse on progress and gaps in implementing human rights of children in Ethiopia. With UNICEF technical and financial support, an intersectoral Convention on the Rights of the Child Committee was established to systematically monitor the implementation in Ethiopia. A national child rights strategy and action plan was also drafted based on the concluding observations.

**Gender equality**

Guided by the Gender Action Plan (GAP), implementation of UNICEF Ethiopia’s Adolescent Girls Strategy (2016) utilized ending child marriage and eliminating FGM/C as entry points to integrating gender across programmes and delivering on targeted priorities for adolescent girls.

The EDHS 2016 revealed progress in reducing the prevalence of FGM/C and increasing the median age of marriage. In 2017, UNICEF strengthened its partnership with faith-based organisations as an important entry point to reach vulnerable girls and women and protect them from harmful practices. UNICEF supported the module on FGM/C and child marriage and provided evidence of generational changes on these harmful practices. The development of a national roadmap on ending child marriage and female genital mutilation/cutting progressed, with the methodology for expenditure tracking and baseline setting finalized.

The Scoping Study on School Related Gender Based Violence (SRGBV) was completed in 2017 and the findings informed the Adolescent Girls’ Education initiative. Following technical support from UNICEF to develop data fields in 2016, the annual school census questionnaire gathered data on school-related gender-based violence for the first time. Through school-level reporting systems, in Oromia region alone, 780 incidents of violence were reported and subsequently referred to relevant protection/legal institutions. Through UNICEF’s engagement, the number of schools documenting and reporting school-related gender-based violence incidents increased from 478 in 2016 to 580 in 2017. Successful advocacy from UN agencies, including UNICEF, contributed to the first module on violence against girls and women, contributing to SDG target 16.2.

UNICEF and FMoH jointly undertook a baseline assessment which revealed that girls lacked information on menstrual hygiene management (MHM) at their first menstruation; teasing and harassment from boys was one of the main reasons girls missed school during menstruation; and affordability of sanitary pads remained a challenge. Informed by these findings, UNICEF
and partners successfully advocated for the adoption of a national MHM guideline and development of national quality standards for production of reusable sanitary pads. Advocacy was underway for revision of institutional WASH design and construction standards to include safe, private and MHM-friendly facilities in schools and to integrate MHM in the HEP.

**Environmental sustainability**

Analysis of the water supply technologies used to achieve the water supply Millennium Development Goals target revealed that 40 million people in Ethiopia utilized water supply systems largely dependent on rain-fed shallow aquifers. Those types of water sources are easily affected by drought, rendering communities unable to access water and hindering socio-economic wellbeing, resulting in an increased reliance on external (emergency) support. UNICEF Ethiopia advocated for the implementation of climate resilient water supply technology and consideration of environmental sustainability of water supply sources as a strategic point in planning water supply programmes.

To support environmental sustainability, UNICEF Ethiopia undertook groundwater monitoring in its urban WASH programme to understand the impact of recent policy changes in service norms on the available water resources. UNICEF also implemented a water supply programme in SNNP using solar pumping systems and supported the Regional Water Bureau in the use of solar pumps, sharing knowledge and information in solar pump design, costing and effectiveness.

UNICEF applied the use of green technology for cold chain system establishment in 2017. Seventy five percent of health facilities in Ethiopia were equipped with kerosene-powered refrigerators. This type of cold chain storage was affected by supply interruptions, low efficiency, poor temperature control and frequent maintenance needs, and posed a threat to the environment because of their ozone depletion potential. UNICEF supported FMoH in the procurement of 6,000 SDD refrigerators in addition to the 3,000 already installed. FMoH received an additional procurement of 5,600 SDD refrigerators through the GAVI Cold Chain Equipment Optimization Platform. UNICEF promoted the use of Arktek passive vaccine storage devices, with 75 devices being installed around the country. If proven successful, these new solar devices could replace the kerosene-powered refrigerators, thus improving the national cold chain system with an environmentally friendly option.

In line with UNICEF Ethiopia’s Greening Committee Action Plan 2017, key measures to reduce energy and resources consumption were implemented. A carpooling system was introduced to reduce fuel consumption, and a ban on plastic cups and bottles was instituted across all offices to reduce waste.

**Effective leadership**

Monthly programme management team (PMT) meetings and country management team (CMT) meetings were used as tools for monitoring, strategic oversight and accountability. The PMTs provided a platform for strategic programme updates, collective review and solutions for improved key performance indicators and relevant advice to the country management team. The country management team ensured open, transparent and participatory decision-making and accountability for key performance indicators across the team.

Following a senior management retreat in January 2017, UNICEF Ethiopia agreed on an Accountability Framework to enable staff to assume clear responsibility and accountability for fulfilling their duties. The review of the framework took place in October, with staff consultations
conducted as part of the midterm review process to take into account perspectives and realities, including in the field offices.

The final report of the 2016 Internal Audit was received in January 2017, and an Audit Task Force focused on the implementation of the nine recommendations. All the recommendations cited by the Office of Internal Audit and Investigations (OIAI) were closed in October 2017.

Technical support, tools and guidance in key operational and programmatic areas were provided to UNICEF Ethiopia in Addis Ababa, at the field offices and to implementing partners throughout the year. UNICEF Ethiopia amended the Risk Control Self-Assessment to integrate regional-specific risks and encourage regions to develop and manage their own risk profiles. The table of authority and business continuity plan (BCP) were updated by the country management team and shared with all UNICEF staff.

**Financial resources management**

The last internal audit review of operating procedures and financial controls as part of financial and budget management was rated satisfactory. UNICEF Ethiopia established key financial controls with respect to bank reconciliations and segregation of duties for the payment processes related to direct cash transfer (DCT) to implementing partners, and procurement of supplies and institutional services.

UNICEF Ethiopia revised the harmonized approach to cash transfer (HACT) commitments to ensure assurance activities were conducted on time and necessary follow-up was carried out. Outstanding disbursement and liquidation were regularly reported to the CMT and benchmarks for DCTs more than six and nine months were consistently monitored. As of 31 December, outstanding DCTs of 6 to 9 months totalled US$412,439, representing 2 percent of the total. There were no outstanding DCTs over 9 months. A total of US$59.3 million of DCTs was released to implementing partners.

Total allocation in 2017 was US$220,660,281 million: US$439,177 non-grant, US$88,651,229 Other Resources-Regular (ORR), US$87,358,280 Other Resources-Emergency (ORE) and US$44,211,595 Regular Resources.

UNICEF Ethiopia conducted 367 programmatic visits (achieving 140 per cent of its target), 96 spot check (meeting 76 per cent of its target), and five training sessions on HACT for 87 key government and civil society organization implementing partners and 55 staff of UNICEF field offices. UNICEF Ethiopia used local audit firms to conduct micro-assessments on 15 implementing partners and to audit 67 implementing partners.

The UNICEF Ethiopia budget committee conducted a cost centre budget analysis indicating clear areas for cost savings which are now being implemented. Quarterly reviews on cross-sectoral cost savings were conducted and presented to the country management team.

**Fundraising and donor relations**

In 2017, UNICEF Ethiopia finalized its Partnerships, Resource Mobilization and Leveraging Strategy for the current country programme (2016-2020). Within the context of a changing donor climate (tightening budgets, shifts in priorities, and heightened scrutiny on use of funds), the strategy aimed to realize diversified, predictable and long-term funding, leverage resources for children using a partnership approach and strengthen donor trust.
Since July 2016, UNICEF Ethiopia raised a total of US$120,504,967 in Other Resources, with an additional US$43 million in the pipeline – achieving 53 percent against the Country Programme planned budget. Through the Humanitarian Requirements Document (HRD), UNICEF appealed for US$136 million and received 70 percent of its Other Resources Emergency target (US$94 million, which includes carryover from 2016). The funding target for Other Resources Regular in 2017 was US$76 million. UNICEF Ethiopia raised 66 percent of this target (US$50 million).

In 2017, UNICEF Ethiopia continued its fundraising drive, developing 49 proposals, of which 28 were funded and eight were in the pipeline at year end (potential of US$40.5 million). UNICEF Ethiopia managed a total of 93 grants from 36 separate funding sources and donors, ranging from institutional donors and governments to foundations and UNICEF National Committees.

Donor relations were further strengthened, with frequent and proactive engagement with donors throughout the year, including several high level donor visits to UNICEF-supported programmes. The Representative undertook high level engagement with key resource partners including DFID, European Union, USAID and the Governments of Germany, Italy, Japan, Norway, South Korea and Sweden.

Despite a high reporting burden (122 reports), UNICEF Ethiopia achieved 100 percent compliance on timely donor reporting, reinforced through internal contribution management support mechanisms under the Deputy Representative’s Office. Utilization of funds and quality/timeliness of donor reports were monitored at weekly meetings of the section chiefs and monthly meetings of the country management team.

Evaluation and research

UNICEF Ethiopia continued to draw on research and evaluation findings to inform programming and policy advocacy.

Evidence generated from the evaluation findings on the national alternative basic education programme, the midline survey of the One WASH Plus programme, and the evaluation of WASH achievements supported national policy development. Synergies between the midline evaluation of the integrated nutrition and social cash transfer pilot and the research paper on CBHI/PSNP informed the delivery of integrated social protection. A study on the long-term impact on children’s well-being impacted by El Niño informed policy and programmes to improve adaptive capacity among the most affected and vulnerable households. UNICEF’s situation analysis on children and women also informed the 2017 development of Ethiopia’s first SDGs Voluntary National Report.

The internal budget for research and evaluation of UNICEF Ethiopia was US$8 million for 2017, with the role of the research and evaluation committee strengthened through quarterly discussions presented by national and international experts to the country management team. Quality of terms of reference and research and evaluation commissioned underwent a rigorous peer review process. Throughout 2017, UNICEF Ethiopia performed quarterly monitoring of the integrated monitoring and evaluation plan activities and followed up with programme sections on the management responses (88 percent implementation rate). Fourteen reports were uploaded to PRIME, and one of them (ABE evaluation) was uploaded in GEROS.

With UNICEF support, the Ethiopian Centre for Child Research (ECCR) established a national centre of excellence for research on children and hosted the Africa conference on ‘Putting
Children First’ in October. UNICEF Ethiopia shared the latest research through the Child Research and Practice Forum, including the report on chronic poverty collaboratively developed with ECCR that was presented at international conferences in Morocco, Canada and Ethiopia. UNICEF technical support to the Central Statistics Agency contributed to the finalization of the EDHS 2016.

**Efficiency gains and cost savings**

UNICEF Ethiopia implemented several measures to reduce the operational cost of the Addis Ababa office and field offices, including establishing car-pooling systems, closely monitoring vehicle maintenance costs and reviewing warehouse management costs. This resulted in savings of US$1.49 million.

To streamline and harmonize office work processes, UNICEF Ethiopia invited the Field Result Group, Division of Financial and Administrative Management, Global Shared Service Centre and Supply Division to undertake a review of UNICEF Ethiopia processes. UNICEF Ethiopia accordingly implemented the recommendations to reduce bottlenecks and improve business processes to achieve significant efficiency gains.

The Vision HUB continued to ensure efficiency in transaction processing and improvements of quality transactions. In 2012, the OIAI internal audit report indicated that the average cash transfer processing took 52 days. From 2014 to 2017, processing time was reduced to an average of nine days, because UNICEF Ethiopia successfully improved the capacity of specialised VISION users and experts.

The United Nations Country Team adopted the Business Operations Strategy in 2013 and supported simplification and harmonization of the UN’s business operations for successful programme delivery and impact in Ethiopia with the target to achieve US$34 million savings on material and labour costs by 2020. As the chair of the UN Clinic Budget Committee, UNICEF Ethiopia strengthened overall budget management, which resulted in more than US$3 million surplus from previous years, and reduced the overall contribution of UN agencies by 35 percent. Consequently, UNICEF Ethiopia saved US$66,000 in its contribution to UN Clinic in 2017.

**Supply management**

UNICEF continued to procure supplies and provide capacity building to improve supply and procurement in Ethiopia.

UNICEF’s supply component in 2017 totalled $177,054,005.05, with $53,304,210.60 in programme supplies, $1,407,743.34 in operational supplies, $89,269,020.79 in procurement services, $29,859,134.06 in other services (including construction works), and $3,213,896.26 in international freight costs, as detailed below.

To respond to the various emergencies in 2017, a consolidated supply and logistics plan was developed and the business continuity plan was updated. In total, $20,716,845.22 worth of emergency supplies were procured and delivered. Missions were undertaken to assess logistics capacity of Somali zonal health offices and Ethiopian Red Cross Society, and to strengthen supply chain management in the drought affected zones.

As part of capacity building of government partners, 84 zonal logistic and nutrition staff were trained to strengthen supply chain management. Warehouse and inventory management...
training was provided to Pharmaceutical Fund and Supply Agency (PFSA) staff, with four PFSA staff selected for the Training of Trainers to disseminate learnings more widely.

UNICEF supported government and other partners with procurement services that totalled $89,269,020.79. Contracts were signed for distribution, installation and training of end users where needed. For example, UNICEF supported FMoH in the procurement, kitting and distribution of nutrition kits to 150 woredas. UNICEF conducted end-to-end supply chain management of 5.3 million long lasting impregnated nets in 121 woredas across five regions of Ethiopia.

Supplies managed by UNICEF Ethiopia totalled $40,492,868.05, out of which $3,543,958.66 was in prepositioned supplies.

The lack of access hampered the delivery of supplies to southwestern Somalia. Alternate transit routes were proposed to reach affected populations, through which UNICEF Ethiopia facilitated supply and transportation of ready-to-use therapeutic food.

<table>
<thead>
<tr>
<th>Description</th>
<th>Value in US$</th>
<th>Total in US$</th>
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<tbody>
<tr>
<td><strong>Total value of supplies, services and construction works</strong></td>
<td></td>
<td>53,203,297.56</td>
</tr>
<tr>
<td>a. Programme supplies</td>
<td>20,202,965.95</td>
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<tr>
<td>b. Operation supplies</td>
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<td>c. Services</td>
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<tr>
<td>d. Construction works</td>
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<tr>
<td>e. Procurement on behalf of other country office</td>
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<td><strong>Total Value of supplies and services received (irrespective of procurement location)</strong></td>
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<tr>
<td>a. Programme supplies including PS-funded</td>
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<tr>
<td>Regular procurement services</td>
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<tr>
<td>Channelled via GAVI</td>
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<tr>
<td>Channelled via programme</td>
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<tr>
<td>b. Operational supplies</td>
<td>1,407,743.34</td>
<td></td>
</tr>
<tr>
<td>c. Services</td>
<td>29,859,134.06</td>
<td></td>
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<tr>
<td>d. International freight</td>
<td>3,213,896.26</td>
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<tr>
<td><strong>Total value of supplies managed in CO’s controlled warehouses</strong></td>
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<td>40,492,868.05</td>
</tr>
<tr>
<td>a. Prepositioned</td>
<td>3,543,958.66</td>
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<tr>
<td>b. Other inventories</td>
<td>36,948,909.39</td>
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</tr>
</tbody>
</table>

**Security for staff and premises**

UNICEF Ethiopia staff received regular security briefings based on weekly Minimum Operating Security Standards (MOSS) and security updates on road access and potential unrest that could hamper programme implementation. The emergency communication tree was regularly updated and tested.

Public demonstrations and riots were reported, mainly in Oromia, Amhara and SNNP regions, along with ethnic-based conflict in the border areas of Oromia and Somali regions. An
international Security Advisor provided support to enable emergency response in Somali Field Offices, and provided a Facility Safety and Security Survey (FSSS) assessment for Somali, Gambella, Hawassa, and Afar Field Offices. Based on the results, UNICEF decided to move the Somali field office to a more secure facility and to build new facilities on allocated government land for the Gambella field office. Based on the 2016 MOSS assessment, the Amhara field office was moved to a newly rented MOSS compliant building. The Tigray field office was also moved to a new office in a more safe and secure area.

The National Security Officer conducted fire safety training, building evacuation drills, security briefings and defensive driving training at the office in Addis Ababa and at all seven field offices. Advanced driving training was provided to Somali and Hawassa field office drivers, with the aim of providing training in all field offices by 2018. The National Security Officer also conducted security assessment of international staff residences. The staff list was updated quarterly and sent to the UN Department of Safety and Security and UNICEF Emergency Operations.

**Human resources**

By December 2017, UNICEF Ethiopia had 405 established positions, of which 351 were filled (51 international professionals, 149 national officers and 151 general service). Thirty seven temporary appointments and 31 personnel were mobilized for emergency response.

UNICEF Ethiopia had 150 female and 234 male staff. The ratio for international professionals was 61 percent female and 39 percent male, for national officers was 34 percent female and 66 percent male, and for general service was 36 percent female and 64 percent male. UNICEF Ethiopia continued to work toward improving gender ratio at national officer level, and launched the Women’s Mentorship Walk (to be extended to a mentorship program) to develop female talent within UNICEF Ethiopia. A female talent pool will be launched in 2018 to build a roster of pre-vetted female candidates.

The 2017 Learning and Training Plan included three cross-cutting group trainings, two section-specific trainings and 40 individual trainings. The results-based-management training was conducted for 210 staff. More than 90 percent of staff completed the mandatory ethics training. Thirty staff were trained in first aid and 25 new staff went through group orientation. Thirty six staff benefited from national and international stretch assignments, staff exchanges and development missions.

Two team building workshops for the country management team were conducted in 2017, with focus on ways of working. An all-staff retreat was conducted in April, which emphasized living the values of UNICEF Ethiopia.

On performance management, 100 percent of staff completed their 2017 Performance Evaluation Review plans in ACHIEVE. Regular trainings were ongoing, with particular focus on performance conversations, giving and receiving feedback, and year-end appraisal. Stress and Wellness Trainings through the United Nations Health Care Centre plus HIV/AIDS awareness training were also organized.

In follow-up to the Global Staff Survey 2017, a concrete action plan was developed and actions were regularly monitored and reviewed.
Effective use of information and communication technology

UNICEF continued to leverage information and communication technology (ICT) to improve effectiveness and efficiency in programming and operations.

Private (MPLS-VPN) links between Addis Ababa and the seven field offices were terminated and replaced with Internet connections in 2017. This resulted in cost savings of US$5,000 per month and simplified the WAN network for easy management. An additional VSAT was installed this year in Amhara field office. Six field offices had a backup link, leading to improved service connectivity and availability.

A significant increase in online presence was observed through strategic content placement, resulting in 99,884 web views, 805,590 photo views on Flickr, and 37,623 views on WordPress. UNICEF continued to increase the number of its social media followers. In 2017 there were 65,659 Facebook followers, 40,407 Twitter followers and 3,938 Instagram followers.

The ICT unit continued to provide technical support to programme sections in implementation of ICT for Development. The Government is restrictive in permitting the use of innovative technology citing security reasons. Use of drone, cloud services for programme data, SMS real time monitoring/data collection are still not permitted.

Technical support was provided in the assessment of Unified Nutrition Information System for Ethiopia in Amhara region, solar power installation in hospitals in Afar and Somali region, and CCTV for child friendly justice in Oromia region. Preliminary discussions were ongoing with programmes in implementation of eTools and Primero.

Operational efficiencies were achieved through revival of the local helpdesk system to record and respond to user requests. An asset management system (TrackIT) was fully implemented for ICT asset tracking. Shared drive was moved to cloud ‘OneDrive’ to provide access to mobile users. Online e-Forms were developed in SharePoint for Transport Request and Protocol Management Information System database. On risk management, BCP and IT Disaster Recovery Plan documents were revised and simulation tests were conducted.

Programme components from RAM

ANALYSIS BY OUTCOME AND OUTPUT RESULTS

OUTCOME 1 By 2020, equitable and affordable coverage of quality health interventions for newborns, children, adolescent girls and women improved across the continuum of care at community and primary healthcare levels

Analytical statement of progress
UNICEF played a key role to advocate for and improve children’s and women’s health through policy dialogue, resource leveraging, capacity building and scaling up of lifesaving health interventions.

UNICEF continued to co-chair the Health, Population and Nutrition (HPN) Sector Working Group and played a key role in developing a joint action plan to strengthen harmonization and alignment in the health sector. The HPN Working Group also rallied the HPN donor partners to successfully advocate with the Ministry of Health (MoH) and leverage US$24 million from the Sustainable Development Goal Pool Fund (SDG-PF). The reprogrammed fund provided critical
lifesaving response activities to drought-related public health and nutrition emergency in Somali Region. The SDG-PF complemented the Global Alliance for Vaccines and Immunizations (GAVI) fund for measles vaccinations in Somali Region, where 2,085,435 children aged 6 months to 14 years from all 11 zones (98 per cent) received an additional dose of the vaccine. UNICEF’s health and social protection sections supported the Government of Ethiopia to review synergies and complementarities of productive safety net program (PSNP) and community-based health insurance (CBHI), and identify existing and potential linkages between PSNP, CBHI and the health fee waiver system. The ensuing policy brief summarized the potential areas for improved collaboration and is a valuable advocacy resource.

UNICEF supported the capacity building of woreda (districts) health managers to conduct district-level immunization equity analysis and planning, identify unimmunized children and bottlenecks to reaching them, and provide an evidence base to prioritize interventions and investments for the most disadvantaged children. UNICEF supported this exercise in 10 zones within the regions of Addis Ababa, Amhara, Oromia, and Southern Nations, Nationalities, and Peoples (SNNP), which is home to nearly 80 per cent of Ethiopia’s 700,000 unimmunized children. A pool of 394 health managers were provided with improved skills on equity to better target disadvantaged children and link them to other social protection programmes. This pro-equity work will benefit an estimated 752,000 infants from poor and marginalized families.

There was an increasing recognition that the current health extension programme (HEP) approaches should be adapted to different regions. UNICEF supported an assessment of the HEP to inform its revitalization in agrarian regions. UNICEF also supported the development of the Pastoralist HEP Strategy. Strengthening national supply chain management capacity was initiated in 2017 in collaboration with UNICEF Supply Division and the UNICEF Ethiopia Supply and Health teams. As part of the procurement services of 6,000 Solar Direct Drive refrigerators and sets of neonatal intensive care unit medical equipment for 80 hospitals, UNICEF provided technical support to the MoH and the regional health bureaus (RHBs) in improving the standards of procurement services, including planning, procurement and delivery, installation, and commissioning to end-user health facilities.

Ethiopia was one of the pilot countries for UNICEF’s global Health Systems Strengthening (HSS) formative evaluation to help UNICEF Ethiopia reflect on its HSS strategy. The recommendations will inform the 2018 annual work plans.

UNICEF supported the availability of a diagnostic aid for pneumonia among young children in poor rural settings through partnership with Philips and the MoH. A one-year field trial of Philips’ Children’s Respiration Monitor (also known as ChARM) products for acute respiratory infection diagnostic aid (ARIDA) innovation was initiated in 2016 and a technical failure was identified in the product. As a result, UNICEF Ethiopia and MoH decided to focus on understanding the acceptability of ARIDA devices at first level health facilities and communities, and provide feedback to the manufacturer prior to the procurement and scale up.

UNICEF Ethiopia facilitated South-South cooperation between China and the MoH, targeting the child health agenda in bilateral partnerships to mobilize and leverage resources for the benefit of children in Ethiopia. All these efforts contributed to improving coverage of high impact interventions. The National Health Management Information System (HMIS) indicated that skilled birth attendants at health facilities increased from 60.7 per cent (2015/16) to 72.7 per cent (2016/17), while postnatal care during the first two days of life was estimated at 49 per cent. Ethiopia met two goals of the comprehensive five-year national immunization plan: the country was certified for eliminating maternal and neonatal tetanus countrywide, and was
declared polio-free. DTP3 coverage increased from 90 per cent (2015/16) to 94.8 per cent (2016/17).

Integrated community case management (ICCM) and community-based newborn care (CBNC) were scaled up to nearly 94 per cent and 97 per cent, respectively, in all rural health posts. In hard-to-reach areas in Afar, Somali and Oromia regions, nutritional services were provided through 49 UNICEF Ethiopia-supported mobile health and nutrition teams (MHNT), delivering an integrated package of health, water, sanitation and hygiene (WASH) and nutrition services, including treatment of moderate acute malnutrition (MAM).

In 2018 UNICEF Ethiopia will prioritize provision of strategic investment to improve selected health system pillars, including: coordination/policies/strategies, strengthening the HEP, strengthening HMIS, health care financing for indigents, and supporting supply chain management. Priority MNCH integrated interventions packages will be scaled up. The scope and scale will depend on the regional typology, and priority will be given to geographic locations with low service coverage. UNICEF also will continue to invest in improving the quality of care and promoting community demand and accountability. Essential MNCH services will be delivered to humanitarian-affected newborns, children, adolescents and mothers, while building a resilient health system. This will involve strengthening the capacity of primary health care to deliver lifesaving interventions.

OUTPUT 1 National, regional and woreda capacity strengthened to develop evidence-based health strategies and costed plans to coordinate and mobilize resources, and monitor and evaluate progress towards universal health, focusing on the most disadvantaged areas.

Analytical statement of progress
UNICEF Ethiopia provided technical support to the MoH in the revision of the national HMIS indicators and successfully advocated for the inclusion of key newborn and maternal indicators into the HMIS, which enabled the MoH and partners to systematically monitor progress and take timely action.

UNICEF Ethiopia played a vital role in increasing partners; awareness of the HEP’s needs and frame perspectives for its revitalization. In these efforts, UNICEF Ethiopia made an important contribution to the development of the Pastoralist HEP Strategy, which aims to deliver key primary health and nutritional services to remote and pastoralist populations not reached by the current HEP. To improve the Civil Registration and Vital Statistics (CRVS) system, birth and death notifications, business process guidelines and forms for health facilities were developed with UNICEF Ethiopia support. As a result, 457 health facilities recently began registering births and deaths.

To ensure access of the poorest households to basic social services, UNICEF Ethiopia assessed the linkages between the PNSP and the CBHI. A follow up policy brief was produced to facilitate dialogue and advocacy and findings were shared with government stakeholders, which will improve both system targeting and strengthen collaborative engagements for financial protection of the poor.

The Afar RHB partnership forum was established to leverage partners’ resources and actions. This resulted in the targeting of 15 low performing woredas as priority MNCH intervention areas by USAID’s new TRANSFORM/Developing Regional State project. UNICEF Ethiopia facilitated
a South-South Cooperation with China for improving newborn health. Ethiopia was one of the pilot countries for UNICEF Global HSS formative evaluation to help the UNICEF Ethiopia reflect on its HSS strategy. The recommendations will inform implementation in 2018.

In collaboration with UNICEF Supply Division and New York Headquarters, UNICEF Ethiopia promoted a better and higher-quality diagnostic aid for pneumonia among young children in rural poor resource settings through a public and private partnership. A one-year field trial of Philips ChARM products for ARIDA innovation was initiated. As result of the pilot, technical failure and inaccuracy were identified, leading the MoH and UNICEF Ethiopia to stop the study and focus on understanding the acceptability of ARIDA devices at first level health facilities and communities, and provide feedback to the manufacturer, prior to scale up.

OUTPUT 2  Primary healthcare system has capacity to provide quality package of essential maternal, newborn, child and adolescent health interventions at scale, focusing on underserved areas

Analytical statement of progress
Essential newborn care service provisions for 236 health facilities was enhanced through the delivery of essential drugs and supplies, and training of 472 health care workers. ICCM and CBNC were scaled up to nearly 94 per cent and 97 per cent in all agrarian health posts. A quality improvement and transition plan was developed to document recommendations and lessons learned from programme implementation. CBNC was introduced in Afar and Benishangul-Gumuz, two regions with high newborn and child mortality rates. To enhance the quality of services for maternal and newborn health, 264 health care workers from 194 facilities received training on basic emergency obstetric and newborn care, as well as technical guidance and career assistance to provide updated knowledge and skills on maternal, newborn, child and adolescent health (MNCAH).

UNICEF Ethiopia continued to support the pilot of Point-of-Care HIV Testing for early infants in 11 health facilities. Results are expected in mid-2018. Six hospitals, 51 health centres, and 252 health posts acquired better knowledge and skills to provide care and support to victims of FGM/C.

UNICEF Ethiopia was certified for the elimination of maternal and newborn tetanus. UNICEF Ethiopia provided technical assistance to 20 identified priority zones for routine immunization improvement plans, significantly improving immunization coverage in these zones. UNICEF supported immunization equity analysis and planning at district and health facility levels in 10 zones with high numbers of unimmunized children. This work will benefit an estimated 752,000 poor and marginalized infants.

UNICEF made significant contribution to the development and revision of the National Immunization Policy and UNICEF Ethiopia also supported the development of the Human Papilloma Virus Introduction Plan, the Measles Elimination Five Years Forward Plan, and the Effective Vaccine Management Implementation report, in addition to the introduction of the measles second dose routine vaccinations, the approval of the Cold Chain Equipment Optimization Plan (US$ 27 million), and the redesigning of home-based recordings to improve evidence generation efforts. The Long Cold Holdover Passive Vaccine Storage Device that aims to increase immunization outreach services in very remote locations with no power grid was under field trial in 75 selected health posts within five regions. UNICEF Ethiopia, in collaboration with the Clinton Health Access Initiative and John Snow Inc., trained 45 cold room managers
and technicians on cold room management and maintenance to ensure safe vaccines are administered to 3 million infants annually.

UNICEF Ethiopia supported the procurement and distribution of 5.3 million long lasting insecticide-treated nets benefiting more than 2.7 million families living in malaria risk areas of Oromia, Amhara, Tigray, Gambella and Benishangul-Gumuz regions. In addition, 2.7 million doses of artemisinin-based treatment, three million rapid diagnostic tests for effective malaria diagnosis and treatment, as well as ICCM, were procured and handed over to the MoH. Technical assistance was provided to the MoH and RHBs in planning, implementation and monitoring of the programme as well as for the development of the manual on malaria case management training and two rounds of training for trainers.

**OUTPUT 3** Community health system platforms strengthened to support use of services and ensure sustained adoption of positive practices and social norms that affect the health of mothers, newborns, children and adolescents, particularly in the most disadvantaged areas

**Analytical statement of progress**

The National Health Communication and Promotion Strategy (NHPCS, 2016-2020), with strong components of MNCAH, including immunization, was developed and disseminated by the MoH with technical support from UNICEF Ethiopia. A study was prepared to identify barriers to MNCAH service utilization and analyse the decision-making mechanisms and community platforms in the pastoralist and semi-pastoralist regions of Afar, Benishangul-Gumuz, Gambella and Somali. These four regions also host refugees, and the study will address the integrated refugee-host community SBCC activities to adjust the comprehensive communication strategy.

To strengthen the coordination and monitoring of health-related SBCC activities, the MoH and its partners, including UNICEF Ethiopia, revitalized the former National Health Communication Working Group (now called the National SBCC Task Force). Thematic SBCC working groups were also established or revitalized, namely for Maternal and Newborn Health, Child Health, Nutrition, WASH, Malaria, HIV/AIDS and Non-Communicable Diseases.

UNICEF Ethiopia supported the development of a rapid assessment tool and a communications for development (C4D) reporting tool for responding to the acute watery diarrhoea (AWD) outbreak. Under the leadership of the MoH and with UNICEF Ethiopia’s technical support, an SBCC quality assurance guideline was drafted by the National Health SBCC Taskforce.

To build skills of community platforms in promoting MNCAH services, UNICEF Ethiopia provided support to the MoH in designing and developing MNCAH communication tools (Family health guide, extended programme on immunization speaking book, MNCH speaking book) to be used by health extension workers (HEW), the Women’s Development Army (WDA) and other community platforms. A total of 998 health extension workers were trained on interpersonal communication and negotiation skills in targeted and low performing woredas. Community health workers (HEWs, WDA) were also equipped with the Family Health Guide (FHG), the nationally recognized standardized communication materials encompassing approximately 78 key integrated MNCAH messages. For this purpose, 350,000 copies were distributed to the regions. The MNCAH speaking book was also being prepared with 32 messages based on the National FHG.

Polio supplementary immunization activities were conducted, targeting 33 per cent of the country’s children under-five. As a result, 98 per cent of household children and 89 per cent of
out-of-household children were vaccinated against polio. Mass media and sensitization meetings at district levels and religious platforms and other social mobilization networks (WDAs, HEWs) were utilized to reach communities. As a result, 81 per cent of parents had an improved awareness of the needs and benefits of the polio vaccination. Only three percent of children were missed due to refusals.

**OUTPUT 4** National and subnational capacity to respond to health-related disaster risks strengthened

**Analytical statement of progress**

UNICEF Ethiopia contributed to averting excess morbidity and mortality in the country undergoing recurrent droughts, disease outbreaks and refugee influxes. MHNTs were deployed in Somali and Afar regions to provide health and nutrition interventions to vulnerable communities, including pastoralist populations. A total of 483,701 medical consultations were provided through 49 UNICEF and RHB MHNTs and 11 international non-governmental organizations (INGO) teams. This included 188,671 medical consultations for children.

UNICEF Ethiopia provided technical, logistical and coordination support to the Government and partners to respond to disease outbreaks. More than 48,732 AWD cases benefited from 198 cholera treatment kits procured and distributed by UNICEF Ethiopia in the affected regions (Somali, Amhara, Oromia, SNNP, Afar, Tigray, Benishangul-Gumuz, Dire Dawa). A total of 516,768 people affected by scabies benefited from treatment with the permethrin drug that was procured and distributed by UNICEF in 237 affected districts in five regions (Amhara, Tigray, SNNPR, Oromia, Benishangul-Gumuz).

UNICEF Ethiopia supported the RHB to conduct a measles campaign in Somali Region in July 2017 where 2,085,435 children aged six months to 14 years received an additional dose of measles vaccine. UNICEF provided support in the procurement and distribution of the campaign forms and facilitated the measles vaccine procurement services.

Approximately 60,000 families benefited from 126,615 Long Lasting Insecticide Nets in malaria-risk areas for displaced families in Somali and Afar regions and for new arrival refugees in Gambella, Tigray and Benishangul-Gumuz regions.

UNICEF Ethiopia supported the provision of primary health services to refugees through the Government’s system. Newly arriving refugee children under 15 years of age were screened and received polio and measles vaccinations at entry points.

To meet the increased health needs of conflict-related internally displaced persons in Oromia, UNICEF dispatched 30 emergency drug kits to treat nearly 75,000 people for three months. Twelve MHNTs were relocated to woredas hosting internally displaced persons in Somali Region, providing lifesaving health and nutrition services to those sites.

UNICEF Ethiopia provided technical support at the national and regional levels in the coordination, planning, and monitoring of health interventions in emergencies. UNICEF will continue to work with the health cluster and partners to support responses and strengthen linkages between humanitarian and development programs. UNICEF Ethiopia’s priorities for 2018 are to support national/sub-national risk-orientated programming and on-time response to disease outbreaks, strengthen the MHNT operation in hard-to-reach areas of pastoralist communities, assist the Sustainable Outreach Strategy to integrate the MHNT operation in the
existing health system, and work with UNHCR and the Administration for Refugees and Returnee Affairs (ARRA) to support the health services in refugee camps.

For nearly two years Ethiopia has witnessed protracted emergencies due to food insecurity, prolonged water shortages, unrest, and high influxes of refugees, all under wide variations of decentralized regional health system infrastructures and capacity levels. UNICEF Ethiopia’s strong leadership, prepositioning strategy and external partnerships with government and humanitarian partners were lessons learned to maintain its comparative advantage during complex crises management. UNICEF Ethiopia will continue to respond while supporting resilient health system building.

OUTCOME 2 By 2020, an increased percentage of under-five girls and boys, adolescent girls, and pregnant and lactating women are appropriately nourished and cared

Analytical statement of progress
Ethiopia was ranked second in Africa with regard to the number of stunted children (5.7million under-five children in 2016). The high prevalence of undernutrition among young children is an obstacle to national development. The annual cost associated with child undernutrition equates to US$2.03 billion (16.5 per cent of the county’s GDP). Reducing the prevalence of malnutrition among vulnerable groups was a national priority, as indicated in the Growth and Transformation Plan II (GTP II), the Health Sector Transformation Plan, the National Nutrition Programme (NNP) and the Seqota Declaration.

The nutritional status of the Ethiopian population improved during the past decade. The Average Annual Reduction Rate (AARR) in stunting between 2000 and 2011 was estimated at 1.5 percentage points (ppts), the highest in Africa. In order to achieve the national target of 26 per cent by 2020 (as per the NNP II), Ethiopia needs to accelerate the AARR to 3.0 ppts.

In 2017, Ethiopia strengthened the policy environment for stunting reduction with the development of the Ethiopia Food and Nutrition Policy, the Food Fortification Standard, and the Nutrition Sensitive Agriculture Strategy. The multisectoral coordination mechanisms for nutrition continued to gain momentum at federal and regional levels. The upcoming Food and Nutrition Council, under the leadership of the Deputy Prime Minister, and advocacy for nutrition by the First Lady will contribute to improving commitment and accountability among all signatories to the NNP II.

Access to nutrition services continued to improve, with the number of secure acute malnutrition (SAM) treatment sites increasing from 16,687 in 2016 to 18,036 in 2017. Government capacity to deliver, monitor and evaluate nutrition services also improved. To this end, UNICEF facilitated the training of 5,636 health workers using the Blended Integrated Nutrition Learning Module (BINLM) to enhance their skills. In hard-to-reach areas in Afar, Somali and Oromia regions, nutrition services were provided through 49 UNICEF-supported MHNTs, delivering an integrated package of health, WASH and nutrition services, including treatment of MAM. Ethiopia maintained the quality of SAM treatment in line with international standards with a cure rate above 90 per cent and death rate below 5 per cent. Young children, adolescents and women who are pregnant or lactating also benefited from preventative quality nutrition services, including growth monitoring and promotion (GMP), vitamin A supplementation and deworming. UNICEF supported adolescent de-worming in 473 woredas with moderate to high caseloads of soil-transmitted helminths, reaching 1,850,652 adolescent girls and 2,005,156 adolescent boys.
To ensure that factors influencing nutritional status of children were addressed, UNICEF supported the MoH to develop the Comprehensive Integrated Nutrition Services (CINUS), aimed at improving nutritional status of adolescents, women who are pregnant or lactating, and children through provision of a comprehensive package of nutrition services at all delivery platforms. UNICEF supported the implementation of the CINUS in 100 woredas.

To guide programming and ensure accountability, Ethiopia took steps to strengthen its Nutrition Information System. In 2017, thanks to advocacy and technical support from UNICEF, nutrition indicators included in the Ethiopia HMIS increased from three to 10. The Government of Ethiopia, with technical and financial support from UNICEF, developed the Unified Nutrition Information System for Ethiopia (UNISE) combining nutrition-sensitive and nutrition specific indicators. To date, UNISE includes indicators from 10 of 13 sectors. UNISE will soon be integrated with the District Health Information System 2 (DHIS-2) platform, resulting in fast scale up and sustainability.

Somali, Afar and part of Oromia and SNNP regions were affected by a severe drought and the situation was further complicated by an AWD outbreak. UNICEF supported the emergency response by providing lifesaving nutrition supplies, improving access to treatment, building capacity of service providers through the training of 1348 staff on community-based management of acute malnutrition (CMAM) and 457 on infant feeding in emergencies (IYCF-E), and coordinating responses at federal and regional levels. Given the complexity of the emergency in Somali Region, UNICEF supported the regional government by deploying nine zonal nutrition coordinators and nine nutritionists to strengthen nutrition coordination and response in the most affected zones. With UNICEF support, 255,623 children received quality treatment from January to September 2017. UNICEF also supported the implementation of quality assurance activities through the deployment of third party CMAM/IYCF-E monitors in seven regions, and promotion of adequate nutrition, health and WASH practices through integrated C4D services in Somali Region.

UNICEF supported nutrition interventions among the refugee communities through provision of technical assistance for programme implementation and monitoring, and supplies that treated 6,680 SAM children in 2017.

While supporting the Government’s efforts to respond to the health and nutrition emergencies, UNICEF continued to facilitate the implementation of preventative services addressing underlying causes of undernutrition through the community-based nutrition (CBN) programme, contributing to strengthening community and health system resilience. A total of 10,615,998 children aged 6-59 months received vitamin A supplements, and 6,812,110 children aged 24-59 months received deworming tablets. On average, 808,687 children under-two participated in growth monitoring every month.

UNICEF played a key role in mobilizing resources for nutrition interventions, including emergency responses. In addition to direct resources for nutrition, in 2017 UNICEF built on its field experience and its convening capacity to successfully advocate for the inclusion of nutrition-related Deliverable Linked Indicators in the World Bank-supported health project, leveraging US$75 million for nutrition interventions.

The acceleration of stunting reduction in Ethiopia is compounded by recurrent crises. Outcomes for nutrition interventions depend on the ability of the HEP to deliver. A stronger and resilient pastoralist HEP will significantly contribute to improving nutrition indicators in Ethiopia.
OUTPUT 1 Multisectoral coordination and capacity of sectors engaged in National Nutrition Plan implementation strengthened with a focus on policy, information systems and knowledge management

Analytical statement of progress
The policy environment improved to accelerate progress toward reduction of all forms of malnutrition in Ethiopia. UNICEF Ethiopia contributed to strengthening the capacity of the MoH and other nutrition-sensitive sectors to guide and oversee strategic discussions. With UNICEF Ethiopia’s technical and financial support, the MoH led the National Nutrition Coordination Body (NNCB) and multisectoral nutrition coordination mechanism to develop the Ethiopia Food and Nutrition Policy and Food Fortification Standards, providing a legal framework that promotes food safety and quality and enhances food and nutrition systems in Ethiopia. Advocacy by UNICEF Ethiopia and nutrition partners contributed to establishment of a National Nutrition Council under the Deputy Prime Minister to enhance multisectoral accountability.

To strengthen the information management system for nutrition, UNICEF Ethiopia engaged in the revision of the HMIS indicators and ensured that key missing nutrition indicators were included with clear definitions and age disaggregation. UNICEF Ethiopia took steps to set up the UNISE, combining nutrition-specific and nutrition-sensitive indicators. UNICEF Ethiopia also led the advocacy work to integrate the UNISE to the DHIS-2, an open source software platform used in more than 50 countries and allowing governments and organizations to collect, manage and analyse health and nutrition data. The adoption of the DHIS-2 will ensure a fast scale up and sustainability. UNICEF is the major partner supporting the MoH in this process, providing financial and technical support.

UNICEF Ethiopia leveraged funds from key donors, including the World Bank’s funding for Health SDGs Programme for Results (PforR) and the Enhancing Shared Prosperity through Equitable Services (ESPES). UNICEF Ethiopia successfully advocated for the inclusion of nutrition-related Disbursement Linked Indicators (DLI) worth US$35 million from the ESPES and an additional US$40 million from the SDG PforR. Additional funds from DLIs will contribute to improved health system strengthening for the delivery of nutrition-specific interventions and improved linkages and coordination with nutrition-sensitive interventions, namely the PSNP. Despite considerable progress, the nutrition sector was still confronted by several challenges. In its current structure, the NNCB is led by the MoH without a mandate to hold other sectors accountable for their contribution to the realisation of the NNP II objectives. Establishing the National Nutrition Council under the leadership of the Deputy Prime Minister will alleviate this challenge. UNICEF Ethiopia and partners will continue to work on establishing the knowledge base to track the multisectoral contribution for stunting reduction through operationalizing nutrition-sensitive indicators through UNISE.

In 2018, UNICEF Ethiopia will prioritize the implementation of the Food and Nutrition Policy and support the capacity building of the line ministries on the enforcement of the Food Fortification Standards to ensure that high-level political commitment is translated to reality.

OUTPUT 2 Percentage of pregnant women, caregivers of girls and boys under 2, and adolescent girls equipped with knowledge of optimal nutrition and caring behavior increased

Analytical statement of progress
UNICEF Ethiopia supported the MoH’s efforts toward stunting reduction during the first 1,000 days of life. Communities’ capacity to better understand nutrition needs of children and mothers during this critical period continued to improve, as illustrated by the increasing trend in the practice of early initiation of breastfeeding, exclusive breastfeeding, and proportion of children receiving quality complementary foods (Ethiopian Demographic and Health Survey [EDHS] 2016). UNICEF supported the nationwide ‘The First 1000 Days’ campaign using multi-media, which, combined with UNICEF’s sustained support to community-based interventions through the CBN programme, contributed to the improved awareness and knowledge of community members on maternal, adolescent, infant and young child nutrition and care. In agrarian regions, GMP provided a platform for mothers and caregivers of children under-two to access IYCF counselling. In Afar, Benishangul-Gumuz, Gambella and Somali regions, the mother-to-mother support group structure continued to serve as a forum to encourage mothers and caregivers to adopt optimal IYCF caring practices. In total, 488 rural districts provided IYCF counselling via CBN platforms or support group structures.

With the financial and technical support of UNICEF, 125 media officials in five regions were sensitized on their role to promote and advocate for nutrition through mass media in the communities. Similarly, 50 religious leaders were trained on the cause and contributing factors of malnutrition and the role they can play in reducing malnutrition.

In 473 woredas with moderate to high caseloads of soil-transmitted helminths, the knowledge of school-aged children and adolescents on nutrition and WASH improved through nutrition education integrated into the school-based deworming campaign and through the life skills training supported by UNICEF.

UNICEF also sought to strengthen the linkage with the agriculture sector in its awareness-raising interventions. UNICEF supported the MoH to develop and rollout an integrated Agriculture Development Agent (ADA) and HEW training on nutrition-sensitive agriculture and IYCN. A total of 2,481 ADAs were equipped with better skills and knowledge on nutrition-sensitive agriculture.

UNICEF supported the MoH to conduct a complementary feeding (CF) workshop to take stock of the lessons learned and develop an action plan for improving complementary feeding in Ethiopia. This multi-stakeholder workshop facilitated identification of bottlenecks and provided short-, medium- and long-term recommendations to improve complementary feeding. The following three main axes were identified for acceleration: continue to improve knowledge of communities on CF good practices, increase access and availability to meat, dairy, vegetables and fruits, and build capacity and ability of health workers to promote CF.

The findings from the EDHS 2016 and the CF workshop revealed that access to diversified complementary food remained a challenge requiring innovative and creative programming. The quality of community-based structures to support women who are pregnant or lactating, caregivers and adolescents to translate knowledge to practice also needed to be improved. To address this, in 2018 UNICEF will support the MoH in developing a quality of care framework for preventative nutrition interventions, including counselling. The Quality of Care framework will also guide the community-based structures to support nutrition of vulnerable groups.

**OUTPUT 3** Quality nutrition services for pregnant women, caregivers of girls and boys under 5 and adolescent girls strengthened
Analytical statement of progress
The quality of nutrition services delivered through the health system continued to improve. One key preventive nutrition service supported by UNICEF Ethiopia was vitamin A supplementation and deworming. As the regional governments changed the service delivery modality from campaigns to routine health services, the coverage of these two interventions decreased in 2015/16, in particular in Tigray and Amhara regions. UNICEF, through collaboration with the Micronutrient Initiative, strengthened its advocacy to prioritize the nutrition programme in these regions. As a result, the coverage of vitamin A supplementation and deworming improved to 80 per cent in 2017. Under the leadership of the MoH, the transition of service delivery modalities continued in 2017, whereby 430 woredas provided the above services through routine health systems (167 in Amhara, 46 in Tigray, 68 in SNNPR, and 149 in Oromia). CBN interventions contributed to enhancing households’ ability to cope with the negative impacts of drought on young children and improving the capacity of the health system to identify SAM cases at an early stage, increasing the chances of successful treatment.

During 2017, with UNICEF’s support, 10,615,998 children aged 6-59 months received the first dose of vitamin A suppletions and 3,825,813 children received the second dose. A total of 6,812,110 children aged 24-59 months received the first dose of treatment against intestinal worms, and 3,803,720 received the second dose. On average, 808,687 children under-two participated in the GMP every month. The adolescent deworming programme was scaled up, and a total of 3,855,808 adolescents (1,850,652 girls and 2,005,156 boys) received their first dose of deworming tablets.

The Government’s capacity to treat SAM increased. The number of treatment sites expanded from 16,687 in 2016 to 18,036 in 2017. The quality of treatment was maintained above international standards. To further reinforce the quality of health services, UNICEF Ethiopia supported the training of 5,636 health staff in Afar, Oromia and Gambella regions using the BINLM.

To optimize nutrition impacts for adolescents, women who are pregnant or lactating and children, UNICEF Ethiopia supported the Government to develop and introduce the CINUS, intended to be a flagship nutrition care package at the community level and beyond, across the continuum of prevention-treatment-recovery. In 2018, UNICEF Ethiopia will support the roll out of the CINUS in 100 woredas to document lessons learned before national scale-up.

Ethiopia experienced continued threats to the nutrition status of its children and women in the past years due to consecutive droughts, disease outbreaks and conflicts. This indicated the dire need for building community and institutional resilience. To ensure MAM/SAM continuum of care and strengthen health system resilience, UNICEF and the World Food Programme (WFP) successfully advocated for the integration of MAM management (IMAM), formerly handled by Ethiopia’s National Disaster Risk Management Commission, into routine health services. UNICEF Ethiopia will prioritize the implementation of this integrated management of acute malnutrition in 2018 in pilot woredas through regular engagement and guidance to the IMAM technical working group.

OUTPUT 4 Government and partner capacities to respond to nutrition in humanitarian crises strengthened
**Analytical statement of progress**

The Government’s capacity for planning, coordination and implementation of nutrition emergency responses was further strengthened in 2017. All regions developed a preparedness response plan, and health service providers were equipped with the knowledge to respond to nutrition in emergencies. As a result, the system adequately responded to nutrition emergencies in Somali, Afar and part of Oromia and SNNP regions. To enhance government capacity to respond to nutrition emergencies, 1,718 health workers/HEWs were trained on SAM management, including the promotion of IYCF-E, and 108 were trained in nutrition supplies management. UNICEF Ethiopia also trained 225 staff in Somali Region through UNOPS to support the emergency response. The Government’s capacity to provide SAM treatment was further strengthened with 1,349 new SAM treatment sites opened in 2017, of which 990 were in the four drought-affected regions. As of September 2017, 213,874 children with SAM were treated in the four emergency-affected regions (out of 255,623 children nationwide). Quality of care remained above international standards, with a cure rate above 90 per cent and death rate below 5 per cent. UNICEF remained the sole provider of life-saving nutrition supplies throughout 2017 and ensured no supply pipeline break for SAM management.

UNICEF Ethiopia supported the regional Disaster Prevention and Preparedness Bureau to deploy a sub-regional nutrition cluster coordinator and information manager to Jijiga, Somali Region capital, and nine zonal coordinators in the most affected zones. UNICEF, in collaboration with WHO, developed technical guidance on detection and fluid management of SAM children with AWD. This guided the WHO global guideline on the subject. A total of 212 health personnel were trained to properly manage AWD in SAM children.

UNICEF, through the Global Nutrition Cluster, improved the capacity of government partners to analyse and visualize nutrition information by training 24 staff from six regions on the Geographic Information System (GIS). UNICEF supported the bi-annual hotspot classification and seasonality assessment to identify the most vulnerable populations. UNICEF also supported a series of surveys including 16 coverage surveys and five Standardized Monitoring and Assessment of Relief and Transitions (SMART) surveys across regions. To standardize the quality of coverage survey, a national guideline was developed.

Improvements were made in emergency response in 2017, including mobilizing human and financial resources to support the response.

After two years of consecutive droughts, Ethiopia faces another year of likely erratic and poor rainfall. Humanitarian needs are expected to persist well into the second half of 2018. Some 320,000 Ethiopian children are expected to be at risk of developing SAM in 2018, a level that remains significantly elevated when compared to pre drought years. The children and women affected by droughts and conflicts will constitute the core of UNICEF’s 2018 emergency nutrition response. UNICEF will maintain its expanded support to the national and subnational nutrition cluster coordination mechanism. While supporting the Government in meeting immediate nutrition needs, UNICEF will work toward reinforcing the resilience of the routine health system and engage in the UN-wide effort to transcend humanitarian/development divides.

**OUTCOME 3** By 2020, the Ethiopian population, in particular women, children, adolescent girls and vulnerable groups, use affordable, safe, reliable, sustainable and adequate water supply, sanitation and appropriate hygiene practices in households, communities and institutions in rural and urban areas.
Analytical statement of progress
UNICEF Ethiopia’s WASH sector contributed US$57 million in 2017 for development programming and emergency WASH activities, including contributing to the ONE WASH National Programme (OWNP) through the Consolidated WASH Account (CWA). UNICEF Ethiopia supported the Ministry of Water, Irrigation and Energy (MoWIE) in the development of the US$5 billion CR-WASH Programme that focuses on drought recurrent lowland areas of the country. As a result of UNICEF Ethiopia’s advocacy, the programme includes groundwater mapping for more informed deep borehole drilling and professionalization of the management of water schemes for more sustainable operations of water supply schemes.

UNICEF Ethiopia undertook a full WASH sector costing exercise to achieve the SDG 6.1 and 6.2 target for Ethiopia and worked with the World Bank and the UK Department for International Development (DFID) to review and revise the sector-wide approach to ensure alignment with the SDG indicators and financing. UNICEF Ethiopia ensured leadership of the programme revision through the financing of the ONEWASH technical drafting team and advocated for the inclusion of a sanitation specific micro plan, a greater focus on CR-WASH to ensure a nexus between development and emergency, and a stronger focus on institutional WASH.

The development of the Baby and Mother WASH Implementation Guideline was launched during the World Toilet Day advocacy workshop and was an important step toward systematizing Baby and Mother WASH as a primary component of the WASH programme. The focus in 2018 will be on implementing the guidelines for these initiatives, thus contributing to UNICEF Ethiopia’s integrated early childhood development (IECD) strategic goals and priorities.

UNICEF Ethiopia contributed to WASH governance by supporting the Government to review the operational constraints for operation and maintenance throughout the country and supported the Government in developing the first Rural Public Utility Operation and Maintenance Implementation Manual for Multi-Village Water Supply Schemes. The manual was instrumental in supporting new policies and guidelines for professionalizing water supply management in rural areas of the country through public utilities. It provided general guidance for utilities formation and operation within a systems approach to ensure sustainable and efficient service provision. It also aimed to guide the formation and operation of rural water utilities to manage, operate and maintain water utilities for multi-village schemes in Ethiopia.

Lessons learned in 2017 included the need for close partnership with the World Bank to ensure efficient and effective policy revisions and the need to scale up sanitation microplanning.

OUTPUT 1  ‘Enhanced support for children, families and institutions leading to resilient, equitable use of safe and adequate gender- sensitive water and sanitation services with increased hygiene knowledge and attitude focusing on children under 5 in rural areas

Analytical statement of progress
The OWN is a sector-wide and multi-sector approach involving four key government ministries managing water, health, education and finance (MoWIE, MoH, MoE, and MoFEC) and their related sectors to modernize the way WASH services are delivered. The first phase of the programme (July 2013 to June 2015) did not include emergency preparedness and intervention activities. The 2015/16 and 2016/17 droughts showed that communities located in drought-prone areas were increasingly affected by water security, which demonstrated the importance of systematically addressing the challenges of drought and water insecurity in arid and typically pastoralist areas. To address this issue, UNICEF advocated for the inclusion of emergency
programming to the OWNP, with special consideration for lowland areas affected by recurrent droughts. As a result, in October 2017, the MOWIE developed and launched the CR WASH Programme with a corresponding budget of US$5 billion over a period of seven years. CR-WASH focuses on the provision of adequate, safe, resilient and sustainable WASH services to people living in arid and semi-arid areas of Ethiopia.

The revised OWNP will incorporate the CR-WASH Programme and will be in line with the SDGs and Ethiopia’s GTP II targets of providing universal access to WASH services. In addition to the updated service levels, the revision will analyse the existing enabling environment and lessons learned from the implementation of the first phase. UNICEF financed the recruitment of one international (lead) and three national consultants for the review of Phase I of the OWNP document and development of Phase II. UNICEF Ethiopia also supported the revision and updating of the OWNP-CWA to address the issues mentioned above. UNICEF Ethiopia led the advocacy on leveraging the CWA budget for both resilient and institutional WASH as a priority in Phase II of the ONEWASH Programme. UNICEF Ethiopia also advocated for budget allocation for institutional WASH from the CWA. As a result, approximately four per cent of the CWA budget allocated to regions was used for institutional WASH, a significant increase from less than one per cent in June 2016.

**OUTPUT 2** ‘Improved knowledge management through data generation that informs and strengthens service delivery, policies, procedures, monitoring and evaluation at the federal and regional levels

**Analytical statement of progress**

UNICEF Ethiopia continued to generate evidence and promote its uptake to enhance its WASH programming and advocacy. UNICEF Ethiopia applied the results of the study, ‘Three-phase Approach to Improving Deep Groundwater Supply Availability’, conducted in 2016, to drill productive boreholes in complex hydrogeological areas of the Afar and Somali regions. The programme will be further extended to 39 drought-affected woredas in the Afar, Amhara, Oromia, SNNPR, and Somali regions where the EU is financing a resilience building programme. UNICEF Ethiopia was in the process of signing a contract for US$6.1 million to implement a programme that includes drilling of 16 test-productive boreholes based on the results of the hydrogeological study. The programme will be implemented in partnership with the European Union Joint Research Centre and other partners involved in remote sensing and groundwater studies.

Guided by its Adolescent Girls Strategy (2016) and the UNICEF global Gender Action Plan (2014-2017), UNICEF Ethiopia prioritized programmes that facilitate accessible and dignified Menstrual Hygiene Management (MHM) options for adolescent girls. UNICEF Ethiopia, together with the MoH, undertook a baseline assessment in six regions that revealed the majority of girls in Ethiopia lacked information on MHM. Informed by those findings, UNICEF Ethiopia, with other partners, successfully promoted the adoption of a national MHM guideline and development of national quality standards for the local production of reusable sanitary pads. UNICEF Ethiopia continued to advocate for the revision of institutional WASH designs and construction standards to include the provision of safe, private, and MHM-friendly WASH facilities in schools and the integration of MHM in the HEP.
OUTPUT 3  ‘Enhanced support for children, families and institutions leading to resilient, equitable use of safe and adequate gender-sensitive water and sanitation services with increased hygiene knowledge and attitude focusing on children under 5 in rural areas

Analytical statement of progress
In Somali Region, UNICEF Ethiopia supported the establishment of mobile maintenance teams (MMTs) to reduce the non-functionality of water supply systems from 40 per cent to 28 per cent. The capacity of woredas and regional water bureau was strengthened to maintain water schemes. More than 534,483 people in remote and arid areas benefited from the rehabilitation and maintenance of 148 boreholes in 41 woredas. UNICEF Ethiopia supported capacity-strengthening of 154 MMT technicians and borehole operators and 122 local WASH Committees (WASHCOs) in Somali Region. The MMTs worked with WASHCOs to develop systems for service and routine maintenance.

Baby and mother WASH activities in SNNPR Region included safe disposal of childhood faeces, hand washing, face washing for trachoma prevention, safe food-handling, and protective play.

UNICEF undertook detailed kebele (neighbourhood) micro-plans for sanitation that formed the basis for ONEWASH Phase 2 Programme. UNICEF Kenya provided technical support to introduce an MIS system that was awaiting government approval. To improve basic sanitation coverage, field trials were carried out in the Tigray, Oromia, and SNNPR regions to examine existing technology and test new technology. UNICEF supported the field trial of SaTo toilet pans and stools in Oromia Region and advocated for scaling up. Findings were shared with Population Services International, which worked with UNICEF to establish a supply chain for local manufacturing.

UNICEF supported a study reviewing water supply management models and the development of the Rural Public Utility Operation and Maintenance Implementation Manual for Multi-Village Water Supply Schemes. The manual provided guidance to ensure sustainable service provisions. It was presented by UNICEF in a meeting with the Government and partners, was endorsed, and was implemented in select regions.

The non-functionality of water supply systems was reduced to less than 10 per cent in the Afar, Benishangul-Gumuz, Gambella, and Tigray regions. The proportion of non-functional water supply systems at the national level was reduced from 26 per cent to 24 per cent.

Some 200,000 adolescents in 140 primary schools were equipped with better awareness of MHM. UNICEF supported the direct provision of sanitary pads in schools and promoted their local production. Women’s groups in 12 sites started producing sanitary pads following training and receipt of start-up materials.

A total of 295,193 people accessed improved water supply and 369 kebeles became open defecation free (ODF) in rural areas (excluding emergency interventions). The non-functionality of water supply systems was reduced to 16 per cent (down from the baseline of 23 per cent). The UNICEF-EU joint programme on groundwater resources assessment (RESET II) was completed and results were presented to stakeholders. A new contract was signed between UNICEF and the EU for groundwater assessments in 39 drought-affected woredas. Priorities for 2018 include the finalization and inclusion of Costed Sanitation Micro-Plans within the ONEWASH Phase 2 Programme, accompanied by an improved MIS on sanitation to monitor progress toward an ODF Ethiopia. The MIS for groundwater mapping and rural water utilities operations will be scaled-up.
OUTPUT 4: Enhanced support for children, families and institutions leading to equitable access to regulated water, liquid/solid waste management services, with increased knowledge and attitude for hygienic behaviors in urban/peri urban areas

Analytical statement of progress
As part of its Urban WASH Programme, UNICEF Ethiopia was a key partner to the Government in constructing water supply and sanitation facilities in urban and peri-urban areas. Ninety-nine per cent of the sanitation and water supply construction works in Maksegnit, Wukro, and Adishehu towns and associated satellite villages were completed. The construction works for Kabridehar, Abomsa, Shenzo, and Welenchiti towns were nearing completion. The people in six of these towns now have access to 25 communal latrines built by local artisans trained by the UNICEF-led Urban WASH Programme. This multi-year urban WASH project is expected to be completed in 2018, with 250,000 children and their family members provided with access to WASH services. Lessons learned have been shared through learning notes, field visits and donor coordination presentations and best practices were being financed at scale through ONEWASH-CWA by the World Bank, DFID, African Development Bank (AfDB), UNICEF Ethiopia, Government of Finland and the Government of Ethiopia.

Ethiopia developed a plan to organize trainings on water safety plans in all project towns starting in July 2017. Due to the focus on completing construction activities, the cascade training was not completed. The plan is to complete the trainings by the end of January 2018. UNICEF Ethiopia sought innovative ways to build the capacity of Ethiopia’s WASH sector staff and UNICEF Ethiopia regional staff members. UNICEF Ethiopia disseminated the open WASH training programme developed in 2016 for institutional uptake to improve the curricula in Ethiopia’s technical and vocational education and training institutions. The modules, available online and free of charge, were used to train UNICEF Ethiopia urban WASH staff. During the urban WASH training in October 2017, organized by UNICEF ESARO and hosted by UNICEF Ethiopia. During the training, UNICEF Ethiopia shared the knowledge and experience gained from its urban WASH programme, which is one of the largest managed by UNICEF, and presented its capacity building model using local utilities.

To foster South-South cooperation and technology transfers on urban WASH, UNICEF Ethiopia continued to support the partnership between Tigray Regional Water Bureau and the Government of Brazil, focusing on the Condominium Sewerage System in Wukro Town. The construction work was completed in October 2017, and the system was being tested. UNICEF Ethiopia recruited consultants to help fine-tune the operational aspects and facilitated the final mission from Brazil, scheduled for January 2018, to support regulatory planning for the Government. Whereas management and ownership of the sewerage system fall under the town water utility’s mandate, UNICEF Ethiopia will engage residents through a committee for day-to-day maintenance of the system.

Priorities for 2018 include the finalization of the WASH Sector Regulatory Body with a mandate to initiate pro-poor tariffs and financing for urban and small-town utilities, as well as the consolidation of the current DFID-UNICEF Urban WASH Programme and its transition into a new Urban WASH Business Case.
OUTPUT 5 Populations affected by WASH emergencies receive WASH services in line with minimum standards

Analytical statement of progress
UNICEF Ethiopia, as the WASH cluster lead agency, coordinated emergency preparedness and response activities across the country. UNICEF supported the collection of WASH emergency response data from regions by deploying Information Management Officers in regions to support regional water bureaus to carry out data analysis and reporting using the 4W Matrix. The method allowed for information to be collected on emergency WASH response activities and for regular and harmonized gap analysis that facilitated informed decision making of the MOWIE-led WASH Cluster with partners.

The information management system developed by UNICEF contributed to systematic analysis of the required response and gaps of emergency preparedness and response. The data and analysis included in the WASH chapter of the humanitarian bulletin was used by WASH cluster partners as a valuable tool to monitor the response.

UNICEF Ethiopia supported reforms for service delivery to refugees and host communities through integrated service delivery by government-led systems for both populations. These service delivery methods prioritized regional water bureaus as leads, though refugee interventions that also engage other line ministries responsible for WASH services through water boards and WASH technical groups. UNICEF Ethiopia continued to support the operation of the Itang Water Supply System, which provided water to the three largest refugee camps in Ethiopia, serving a population of 250,000. The professionalized utility model for service provision was scaled to other UNICEF Ethiopia refugee programmes as one of the first implementations aligned with the Government’s Comprehensive Refugee Response Framework pledges. As part of its building self-reliance programme, UNICEF Ethiopia developed sanitation master plans for the management of liquid and solid waste for host populations and refugees in Gure-Shembolla camps in Benishangul-Gumuz Region and in Adi Harush and Mai Ani camps in Tigray Region. These sanitation master plans, expected to be completed in 2018, will be incorporated with water supply planning in those locations to ensure integrated service provision and to outline the waste management systems that will be integrated into the later stages of utility model implementation. The institutional latrines planned under this programme will be included in the sanitation components that will be outlined in the sanitation master plans which are under development for Benishangul-Gumuz and Tigray and will commence at a later date for Afar, Gambella and Somali. UNICEF Ethiopia supported capacity development for the utilities that will be managing water supply systems for these five targeted areas, including six refugee camps. UNICEF Ethiopia also built the permanent water supply infrastructure for the camps in Tigray and Benishangul-Gumuz. These systems will serve a population of approximately 140,000.

OUTCOME 4 By 2020, equitable access created and quality education and training provided to all learners at pre-primary and primary level and girls’ access to secondary education increased, with a focus on the most disadvantaged and vulnerable children, populations and localities

Analytical statement of progress
An ongoing drought across four regions of Ethiopia, coupled with significant inter-regional conflict, directly impacted the achievement of the national Education Sector Development Plan V (ESDP V) (2015/16 - 2019/20) targets and the learning and development programme results. By December 2017, there were more than 1.9 million primary school-aged children whose
education was disrupted due to these emergencies. Approximately 116,000 of those children accessed emergency ECE programmes and temporary primary school learning spaces with UNICEF Ethiopia’s support. Insufficient prioritization for education within the broader humanitarian community hampered the sector’s ability to meet the immediate needs of a far larger number of children and young people.

In 2017 UNICEF successfully advocated for the next iteration of the general education quality improvement program project (GEQIP) to include a discrete budget line for support to educational structures and students impacted by emergencies. This was the first sector programme designed to offer flexibility for addressing the impact of emergencies. UNICEF continued to serve as a contributing member of GEQIP and as co-chair of the education sector working group. The importance of investing additional human and financial resources in these roles was recognised by the programme, thus extending the organization’s programming experiences in ECE and primary education for disadvantaged children at scale.

In partnership with UNESCO’s International Institute for Education Planning Centre of Excellence (IIEP), Oromia and Amhara regions developed costed Regional Education Sector Plans and Benishangul-Gumuz and SNNP regions built on support delivered in 2016 to draft Regional Education Sector Results Frameworks through 2020. UNICEF’s multi-year investment in strengthening institutional capacity of Regional Education Bureaus (REBs) in planning and management helped improve the equity and efficiency of investments to the sector. In the five regions hosting refugee camps, ARRA joined REBs and Woreda Education Offices (WEO) in education sector planning to move toward the integration of refugee educational structures within the national host system.

A total of 137,590 young girls and boys accessed three UNICEF-supported ECE programmes in 2017, namely, the child-to-child (CtC) initiative, the accelerated school readiness (ASR) programme and the formal pre-primary class. As a key pre-condition for effective ECE services, UNICEF supported the training of 7,080 ECE teachers and 400 young facilitators across these three programme modalities. The UNICEF-designed ASR programme was introduced to an additional three regions (Oromia, Amhara and SNNP), reaching implementation in five out of Ethiopia’s eight regions. An adapted ASR curriculum was introduced by the Ministry of Education (MoE) to all 501 pre-primary classes across Benishangul-Gumuz Region through financing from the Global Partnership for Education. The MoE formally requested all regions to support the introduction/extension of the ASR programme in 2018/19 as an interim strategy for increasing access to ECE in remote, disadvantaged areas. Parenting education interventions continued to be supported by UNICEF through the integration of UNICEF-designed child care and growth modules within the national Functional Adult Education programme, reaching 15,840 parents and caregivers in 2017.

A revised national Pastoralist Education Strategy was launched in 2017, with adapted versions drafted for Somali and SNNP Regions. Three regions supported the broader dissemination of the revised strategy among education authorities at regional and woreda level. Through support to school enrolment campaigns, four regions ensured the timely enrolment of 203,768 primary school children and the return of 5,074 student dropouts. An independent evaluation was undertaken of the Government’s national alternative basic education (ABE) programme, considering the high degree of support provided by UNICEF to ABE centres since 2006. A study on the mobility patterns of pastoralists in Somali Region identified the need for complete primary schools along migratory routes as well as within temporary settlement areas.
Building on UNICEF’s support for the incorporation of school-related gender-based violence (SRGBV) data items within the Education Management Information System (EMIS) in 2016, the MoE generated and analysed data on incidences of violence and on cases of early marriage. In Amhara Region alone, 325 cases of girls’ arranged marriages were annulled after the girls reported them to their schools. In Oromia Region, 780 cases of sexual, physical, and psychological violence against girls were reported and recorded within the Education Management Information System. The number of primary and secondary schools that documented and reported incidences of SRGBV increased from 478 in 2016 to 580 in 2017.

In 2018, the MoE will embark on a revision of its primary curriculum, which will allow for an updating of content and, more importantly, increased attention on foundational literacy and numeracy skills. With UNICEF’s support, a costed road-map for the revision of the primary curriculum was developed and will form the basis for various development partners’ technical and financial support. UNICEF Ethiopia continued to support the implementation of an Assessment for Learning (AfL) flagship initiative across eight regions. A total of 9,040 primary school teachers participated in training programmes on the utilization of continuous assessment practices that support them in responding to the individual learning needs and progress of their students. The AfL teacher materials and associated training programme will be taken to scale in 2018 through the GEQIP pooled programme, which has committed US$57.5 million for meeting of AfL results by the MoE.

In 2018, UNICEF will also prioritise the provision of educational services for displaced (refugee and internally displaced) children and young people, and support for the MoE’s development of a national ECE expansion plan.

**OUTPUT 1** Capacity of education system strengthened to meet Education Sector Development Plan V goal of equitable expansion of quality early childhood education services

**Analytical statement of progress**
UNICEF Ethiopia’s support resulted in more than 137,590 children accessing ECE programmes in nine regions of the country, including 64,163 (of which 48 per cent were girls) through the ASR and the CtC programmes. With UNICEF support, a total of 7,080 teachers across the three ECE modalities (child-to-child, ASR and pre-primary class) were trained on pedagogical approaches and curriculum delivery. These efforts were supplemented by provision of a minimum package of ECE teaching/learning materials for all O-classes (the Government’s formal pre-primary classes) within the Learning and Development programme’s target districts. The training of 687 woreda education experts, supervisors and school directors improved their understanding of the ECE policy, supervision guidelines and accountabilities, and community mobilization approaches.

Based on the positive findings of a prior impact evaluation of the ASR initiative, the programme was expanded to Oromia, Amhara and SNNP regions, benefiting 35,885 children, including children in refugee camps. Young refugee children in Benishangul-Gumuz Region also benefited from the construction of 10 furnished preschool classrooms within primary school compounds, creating access for 400 six-year-old girls and boys. Refugee children in Benishangul-Gumuz Region also benefited from the implementation of the ASR programme, for which 29 refugee teachers were trained.

The ASR programme brought a renewed sense of commitment from the MoE to revisit existing
teaching approaches in pre-primary and early years. UNICEF Ethiopia joined the MoE and World Bank in designing a curriculum package and teacher education intervention for pre-primary education, drawing on the success of the ASR approach. The pre-primary package was rolled out to all 501 pre-primary classes in Benishangul-Gumuz Region, with financial support from the Global Partnership for Education. UNICEF played a technical leadership and coordination role in this initiative and supported capacity building interventions for the sustainable implementation of the new preschool curriculum package in Benishangul-Gumuz Region and for scaling this up across Gambella Region.

UNICEF Ethiopia also supported the MoE in further development of preparatory ECE courses for teachers and the harmonization of dated ECE curriculum with new ECE curriculum at the College of Teacher Education (CTE). UNICEF provided technical guidance and inputs for designing ECE interventions within the next pooled sector programme (GEQIP E 2018/2019-2022), which resulted in the leveraging of US$60 million allocated for improving the quality of pre-primary education services.

UNICEF Ethiopia continued its support for parenting education interventions through the national Functional Adult Education programme, reaching more than 15,840 parents and caregivers. The Somali REB, in partnership with Jijiga University, undertook a large media campaign on ECE (regional TV and radio) and conducted a series of consultative meetings with partners (bureaus of health, water, women and children affairs) to strengthen multi-sectoral collaboration in pre-primary class settings.

In 2018, UNICEF will prioritise support for the development of a costed ECE roadmap, which will inform ECE expansion strategies and targets within the ESDP V and ESDP VI.

**OUTPUT 2** Equitable and inclusive access to primary and secondary school strengthened for out-of-school children

**Analytical statement of progress**

Building on a 2016 situation analysis of pastoralist education services, UNICEF Ethiopia supported the finalisation and launch of a revised Pastoralist Education Strategy. This updated strategy then formed a key topic of discussion at an annual pastoralist education conference, which brought together participants from universities, REBs and woredas to identify interventions for improving pastoralist children’s participation in education services. Through this conference, a national roadmap and strategic plan were developed to ensure the practical implementation of the strategy. UNICEF Ethiopia supported the formation of a national task force involving government and NGOs working on pastoralist education. Led by the MoE, the task force mapped education partners supporting pastoralist education, maximising the impact of the support provided, and documented successes and challenges faced in implementing the strategy. UNICEF Ethiopia supported a study on the mobility patterns of pastoralist communities in Somali Region, highlighting a need for education services to be established along community mobility corridors and settlements.

Through an independent evaluation of the Government’s national ABE programme, recommendations highlighting immediate and longer-term actions required to improve the efficiency and effectiveness of the ABE centres were identified and will be considered within the revision of the ESDP V scheduled for the first half of 2018. In support of government efforts on universal primary education, campaigns were conducted in the four pastoralist regions that
ensured the timely enrolment of 203,768 children.

In line with a national Gender Education Strategy (2015) and Ethiopia’s ambitious gender parity targets, UNICEF Ethiopia continued its efforts to improve the safety of primary school environments for all learners, and girls in particular. A scoping study on SRGBV was completed in 2017, and the findings informed the programme’s theory of change for adolescent girls’ education initiatives. In addition to demonstrating the potential of primary school gender clubs to improve the skills of girls and boys to prevent and respond to violence, UNICEF supported REBs in the expansion of a national school code of conduct. As a means of mitigating negative social norms that perpetuate SRGBV, dialogue with religious and community leaders was undertaken in the targeted woredas. UNICEF Ethiopia also supported the production of communication materials encouraging community support for girls’ education through billboards and television programmes in Somali Region as well as radio broadcasts in Gambella Region. The 2016/17 school year was the first time the annual school census questionnaire (EMIS) gathered data on SRGBV, following technical support from UNICEF Ethiopia to develop relevant data fields. Through school-level reporting systems, 325 cases of arranged marriages in Amhara Region were cancelled. In Oromia Region alone, 780 incidences of sexual, physical and psychological violence were reported by students and subsequently referred to relevant protection/legal institutions. More schools documented and reported SRGBV incidences in 2017 through UNICEF Ethiopia’s engagement, increasing from 478 schools in 2016 to 580 schools in 2017.

In 2018, UNICEF will prioritise the expansion of a skills development package for girls and boys by means of gender clubs within primary schools.

**OUTPUT 3 Equitable and improved delivery of quality primary education**

**Analytical statement of progress**

In 2017 UNICEF Ethiopia completed the development of the AfL package for primary teachers, which was adapted and translated into four local instructional languages (Amharic, Afan Oromo, Af Somali, Tigrinya). Among the supplementary materials were a teaching manual on mathematics for Grade 1-4 primary teachers, developed in collaboration with Japan International Cooperation Agency. AfL gives considerable attention to transparent, regular communication with parents on their children’s progress and the areas requiring greater attention. A pre-existing checklist for school cluster supervisors was revised to include an AfL component, which means that teachers are graded and guided in their teaching by continuous assessment practices.

The AfL initiative was expanded across eight regions, and there was a significant increase in the number of teachers, teacher educators and technical cadre introduced to continuous assessment practices with UNICEF Ethiopia’s support. A total of 9,040 primary school teachers, including 103 primary teachers from the refugee camps of Benishangul-Gumuz Region, participated in a 35-day phased training course on the AfL package. By the end of the 35-day training course, primary school teachers are able to develop quality assessment tools and apply continuous assessment strategies within their daily lessons. Within the initiative, teachers are encouraged to undertake action research to better understand the impact of their teaching approaches on student learning.

In Amhara Region, 141 primary school teachers participated in training on the use of action research to inform their teaching practices. To ensure the rigorous implementation of the pilot
initiative and its successful scale up, a detailed AfL project document was finalized and was utilised to garner government and development partner support. UNICEF successfully leveraged the national expansion of the AfL initiative through its inclusion within the GEQIP, which will provide up to US$ 57.5 million for the successful implementation of AfL by the MoE. In 2018, UNICEF will prioritise the integration of Activity Based Learning within the AfL initiative for implementation in pastoralist and refugee settings.

The MoE will embark on an extensive revision of the primary education curriculum, starting in 2018. Technical assistance was provided by UNICEF Ethiopia for the training of 45 newly appointed curriculum experts to build their capacity in defining the scope and scale of the curriculum reform exercise. Subsequently, a Curriculum Review Roadmap was drafted, which outlines the steps entailed and the cost for each. It is UNICEF Ethiopia’s expectation that development partners will come forward to finance the components of the curriculum reform process against the roadmap, in a coordinated manner which avoids any duplication of resources.

OUTPUT 4 Education system capacity in knowledge management strengthened

Analytical statement of progress

Through a multi-year collaboration the IIEP, UNICEF Ethiopia supported four regions (Amhara, Oromia, Benishangul-Gumuz and SNNP) in the development of regional ESDPs and associated results frameworks as a means of focussing resources toward key performance indicators. The ESDP results frameworks in Benishangul-Gumuz and SNNP regions were utilised by the REBs, WOEs and regional governments to prepare more accurate annual sector reports as well as to inform their review of the regional ESDPs. In late 2017, a blended online/face-to-face course on sector planning and management was developed by IIEP for implementation in Ethiopia over 2018 for MoE and UNICEF Ethiopia. A total of 331 sector experts from Amhara Region participated in training on results based management in line with the Government and development partners’ shift toward performance-based financing.

With UNICEF Ethiopia technical and financial assistance and in collaboration with UNHCR, the 2016/17 EMIS Statistical Abstract for the first time included a chapter on refugees. This was a significant achievement because it demonstrates the gradual integration of refugee education services within national education planning, implementation and monitoring systems.

UNICEF Ethiopia supported the REBs from the five regions that host refugee camps to undertake the national assessment of primary refugee schools against national minimum quality standards. The results of this assessment allowed the REBs to better understand the challenges within the refugee primary schools and to measure progress against investments made through recent large refugee education programmes (Education Cannot Wait and Building Self-Reliance Project).

In 2017, 732 sector specialists (104 from Tigray, 263 from Amhara, 384 from Oromia, 83 from SNNP, 22 from Benishangul-Gumuz, 207 from Afar, and 40 from the federal MoE) were trained on the utilisation of Geographic Information System (GIS)-based EMIS and School Management Information Systems (SMIS). As a result of this training, GPS coordinates for 248 schools in Amhara region and 3,927 schools in Oromia region were included in regional EMIS systems. The Tigray and Benishangul-Gumuz REBs published their annual education statistics abstract using the GIS-based EMIS Web Application System, which allowed for more detailed school-level analyses of progress against key sector performance indicators.
Through support provided to 283 School Cluster Resource Centres in UNICEF Ethiopia’s 32 target woredas of Oromia and in Tigray regions, school improvement plans were drafted for the 2017/18 academic year, which will ensure the schools receive their school grant allocations.

In 2018, UNICEF will prioritise technical support to an MoE-led midterm review of the ESDP V.

**OUTPUT 5** Education sector capacity in provision of basic education in emergencies strengthened

**Analytical statement of progress**

In 2017 Education Emergency Operational Response Plans were developed for Oromia, SNNP and Somali regions. These plans guide government and development partners’ financial assistance for children affected by the drought, conflict and flooding in the 2017/18 academic year. They have been endorsed by the REBs, and provided an opportunity to introduce government and partner staff to the core humanitarian principles and education in emergency minimum standards (the SPHERE project). The response plans were informed by multi-sectoral emergency assessments led by the Government of Ethiopia and within which the education cluster had successfully incorporated data items relating to children’s access to education programmes.

The availability of timely data on children impacted by emergencies remained a significant challenge. The education cluster responded by trailing an open data knowledge (ODK) platform in a few sites within three regions. Based on the lessons learned and the evidence generated, the ODK application will be further extended by the MoE through financing from the national pooled sector programme. UNICEF Ethiopia supported a federal cluster training for all regional education emergency coordinators and focal points, and a region-specific training for 80 education personnel in Oromia and Amhara regions, on disaster risk reduction and emergency coordination. Three regions hosting refugees and that are prone to sudden onset emergencies developed risk-informed regional costed sector development plans that included analysis, strategies and targets relating to mitigating risks for schools.

In 2017, 163,337 children and young people affected by emergencies were able to access or return to educational services. In Somali Region, 10 temporary learning spaces were constructed for 5,000 children who were displaced since 2016 due to conflict. A total of 50,000 primary school-aged children were provided with scholastic materials as a means of encouraging their retention in or return to school. In Oromia Region, 28,072 children in 129 schools benefited from the provision of water tanks, which allowed for more consistent availability of water for drinking and hand washing. In partnership with Volunteer Services Overseas, 1,411 primary school teachers from SNNP, Tigray, Amhara, Oromia, and Afar regions enhanced their knowledge and skills on how best to support and manage children impacted by emergencies.

Reaching children within temporary settlements and internally displaced persons sites remained challenging in light of ongoing security concerns. Resources obtained for education emergency responses fell far below what is required to address the significant number of displaced children and families.

An orientation workshop on AWD prevention was conducted for 200 experts in the Amhara REB to ensure school-level attention to hygiene-promoting behaviours and steps to be taken in an
AWD outbreak. Through this communication campaign, brochures and posters with AWD prevention messages were disseminated to 143,403 children in schools.

In 2018, UNICEF will prioritise the provision of emergency education services in internally displaced persons sites of Oromia and Somali regions.

**OUTCOME 5** By 2020, an increased number of children and adolescents who are susceptible to violence, exploitation and abuse, in emergency and non-emergency settings, benefit from quality, gender-sensitive, community-based and formal child protection and response services

**Analytical statement of progress**

Of the available 18,617 registration centres country-wide, 84 per cent have started registration. According to data from Ethiopia’s Federal Viral Events Registration Agency (VERA), 10 per cent of births have been registered nationally. Out of the total registered births between August 2016 and July 2017, 49 per cent were registered on-time (registered within the 90 day legal requirement), 25 per cent were late (registered after 90 days, but below one year), and there was a backlog of 26 per cent (more than one year after birth). In August 2017, the Government issued a new law (Proclamation No. 1049/2017) that extends the scope of the system to refugees and other non-nationals and also provides new responsibilities for the health sector. Health institutions are now requested to notify about out-of-facility births in addition to the in-facility birth notifications.

The EDHS 2016 findings revealed that Ethiopia made progress in reducing the prevalence of FGM/C and increasing the median age of marriage. Compared to the EDHS 2005, the prevalence of FGM/C for girls and women in the age group 15-49 was reduced from 74 per cent to 65 per cent, and in the age group 15-19, it dropped from 62 per cent to 47 per cent. The median age of marriage increased from 16.5 years in 2011 to 17.1 years for women currently aged 25-49 in 2016. Preliminary findings suggest that in addition to ongoing social and economic change, the programme and policy strategies are working. UNICEF Ethiopia strengthened its partnership with faith-based organisations (FBOs) as an important entry point to reach vulnerable girls and women and to prevent them from harmful practices. The report, ‘Concerted Efforts of FBOs to Abandon FGM and Child, Early and Forced Marriage in Ethiopia’ was launched in October 2017. The development of a national roadmap on ending child marriage and FGM/C progressed. The methodology for expenditure tracking and setting baselines was agreed upon.

The evaluation of Phase II of the UN Joint Programme (UNJP) was undertaken in June 2017. Key findings showed its alignment with national priorities and relevance to the SDGs, success in increasing capacities of the target groups on HIV and sexual reproductive health and achievements in reaching targets and strengthening implementing partners’ capacities. The evaluation’s recommendations included the need for increased emphasis on reaching the most vulnerable adolescents (including domestic workers) and younger adolescents aged 10-14 years. These recommendations were taken into account for development of a Phase III (2018-2021) of the UNJP, which includes a 9-month inception phase that was approved by the Royal Norwegian Government.

UNICEF Ethiopia supported government partners in strengthening response systems and institutions (i.e. referral pathways and One Stop Centres). Data collection improved, as indicated by an increase in cases reported since July. Between January and November 2017, more than 3,262 children and 332 women (and an additional 412 cases without age or sex
disaggregation) experienced some form of violence and received comprehensive justice, health and psychosocial services in all nine regions of Ethiopia, including two city-states.

UNICEF Ethiopia contributed to the development of a child-friendly justice system. A multi-year DFID-funded justice project was completed in Somali Region, exceeding most of its targets. As a result, 64 child-friendly justice facilities were renovated and constructed in Somali Region alone. In total, UNICEF Ethiopia supported the establishment and renovation of 82 child-friendly justice facilities in 22 woredas in four regions.

UNICEF supported the Ministry of Women’s and Children’s Affairs (MoWCA) and the Ministry of Labour and Social Affairs (MoLSA) to develop a case management framework and tools for service providers to ensure that vulnerable children receive the services they need. UNICEF supported the Government to improve the quality and standardization of services at regional and community levels. Occupational standards and a curriculum were being developed and community care coalitions [CCC] were strengthened to identify and refer child protection cases to case managers.

Despite funding limitations, UNICEF continued to respond to natural and humanitarian disasters. A total of 7,246 refugee children were placed in alternative care arrangements in Gambella Region, 392 children were reunited with their parents and 1,120 refugee children at risk of abuse and violence were identified and received multi-sectoral protection services (i.e. psychosocial and legal support). A total of 20,187 children in five drought-affected regions accessed structured, recreational, socializing and learning platforms in child-friendly spaces to restore and help ensure their psychosocial well-being. An additional 266 children separated from their parents due to the drought were reunited with their families. UNICEF continued to co-lead the national child protection sub-clusters and strengthened regional sub-clusters in Somali and SNNPR regions.

The key priority for 2018, as part of the midterm review of the country programme, is to bring further coherence and focus through reconfiguration of the programme and results framework around three outputs (compared to the current seven), each aligned with a theory of change or business case and UNICEF’s 2018-2021 Strategic Plan.

OUTPUT 1 150 woredas provide sustainable, comprehensive, child-focused social welfare services to vulnerable children and adolescents as part of an integrated social protection scheme

**Analytical statement of progress**

The MoWCA drafted an implementation strategy for the 2017 National Children’s Policy. UNICEF Ethiopia contributed to the policy through technical review and advocacy. Together with the National Social Protection Policy, the new National Children’s Policy is expected to help articulate the responsibilities of all service providers for promoting the well-being and protection of vulnerable children and their families. With technical inputs from UNICEF Ethiopia and other implementing agencies, MoWCA finalized the manual for foster care and domestic adoption. The MoWCA completed an assessment of the child protection case management system in five regions. UNICEF Ethiopia supported the development of a National Case Management Framework and tools based on the assessment findings, consultations with key NGOs and government sectors and benchmarking of international experiences. The Technical Working Group, led by MoWCA and comprised of key government ministries, research institutions and civil society organizations, reviewed the draft framework, which was pending endorsement.
The development of a behaviour change and communication strategy by MoWCA to prevent violence and promote positive child-rearing practices was underway.

Under the pilot integrated social cash transfer programme (IN-SCT) in four woredas in Oromia and SNNPR, social workers were sensitized on child protection issues, which enabled them to identify and refer cases to appropriate officials. For example, two cases of child marriage were reported, and the social workers helped to ensure the marriages were annulled. A Management Information System (MIS) consultant supported the IN-SCT woredas and MoLSA to help ensure full functionality of the MIS. The findings will be used to address issues of user friendliness so that social workers linked to Permanent Direct Support (PDS) beneficiaries in the PSNP can effectively monitor and follow up with vulnerable household members on access to social services. The experience will also inform the development of the wider PSNP and Urban PSNP MIS.

Following the finalization of a UNICEF-funded national social service workforce assessment report, MoLSA, with support from USAID and the Ethiopian Society of Sociologists, Social Workers and Anthropologies, led a workshop in November with the joint action plan members to discuss the report findings and agree on the priority occupations, which will be presented to the ministerial level steering committee. The steering committee will identify the occupations for which occupational standards will be developed.

A capacity assessment study of CCCs was supported by UNICEF to inform the development of a strategic framework and operational guidelines. Based on the findings, a national CCC strategic framework and guidelines with a capacity strengthening plan were drafted. Key lessons learned include the need to link system-building work to the provision of multi-sectoral services affecting children on the ground. A priority for 2018 will be to better integrate this programme area into the efforts on violence against children, justice for children, and adolescent empowerment, aligned with UNICEF’s draft theory of change on violence against children.

**OUTPUT 2** 125 woredas provide comprehensive child- and adolescent-friendly justice services

**Analytical statement of progress**

A multi-year DFID-funded justice project was completed in Somali Region, exceeding most of the established targets. The Regional Supreme Court committed to include 54 out of 108 project-supported social workers (who were recruited, trained and deployed to child justice facilities across 35 woredas) into the Government structure and payroll. All nine social workers in Benishangul-Gumuz Region were put on the Government payroll of the Regional Supreme Court.

The DFID-funded project included the renovation and construction of 64 child-friendly justice facilities in Somali Region. UNICEF Ethiopia supported the establishment and renovation of 82 child-friendly justice facilities in 22 woredas in four regions. Available data from these regions showed that 5,610 children accessed or were referred through the newly-established child friendly justice facilities.

A total of 1,636 justice professionals in six regions, including 1,084 in Somali Region and 180 social court judges in Tigray Region, were trained in child-friendly justice administration that
enhanced their knowledge in addressing the special needs of children in contact with the justice system.

Five diversion centres were established in Somali Region, where 1,124 children received services. In Amhara, 2,982 children were referred to the diversion centre. Most of the children were involved in petty crimes and were diverted away from the justice system. No data was available from diversion centres in other regions.

The Federal Supreme Court provided free legal aid services to 5,533 children in Addis Ababa. A total of 1,772 children received services in the Jigjiga University-supported legal aid centres in Somali Region, and 96 children in Amhara Region. UNICEF’s support for the establishment and operation of an inter-agency referral network for improving child justice administration at the federal level helped 139 child victims of violence receive psychosocial services. The social workers embedded in the child justice facilities of federal courts and in Somali courts, police and justice facilities handled the cases of 1,662 children (925 federal and 737 in Somali Region) to ensure the best interest of the child was respected.

The national justice for children assessment was drafted. The findings of the assessment will be validated by high-level justice officials in a workshop in late 2017.

UNICEF Ethiopia supported the Federal Justice Professionals Training Centre (FJTC) to include a module on justice for children in the judicial training programmes, and successfully advocated for the training programmes to include social workers working in courts. As a result, in coordination with the Federal Supreme Court, two rounds of trainings were provided for 75 social workers from federal and regional courts. The FJTC committed to include the training of social workers in federal courts in its annual work plan.

UNICEF ESARO’s child protection advisor visited Ethiopia in October 2017 to review and provide concrete recommendations on the justice for children programme. Among the key recommendations was the need to strengthen the systems approach and create linkages between justice for children and other programme areas. These recommendations, together with the reconfiguration of the programme outputs, are priorities for 2018.

OUTPUT 3 50% of woredas provide civil registration services

Analytical statement of progress
The 2016 EDHS data showed that 3 per cent of children under-five had their births registered with civil authorities. This provided a timely baseline for SDG reporting and against which to track progress since the system was launched in August 2016.

Through joint efforts with government partners, UNICEF Ethiopia exceeded its target of 50 per cent coverage of birth registration. Eighty four per cent of kebeles in the country have started providing birth and other vital events registration services. Geographic disparities in coverage exist. Requirements for both mothers and fathers to be present during registration and for parents to show their identity card, and fees charged for the certificate remained major bottlenecks to registration, especially for rural and socio-economically marginalized households. Gaps in interoperability with the health sector also impeded registration. These are advocacy points for UNICEF with federal and regional VERAs.
A joint field monitoring mission of UNICEF Ethiopia, ESARO, World Bank and the Federal VERA took place in November 2017 to assess the civil registration system in Amhara Region. Progress was observed in birth notification and community participation. Improvements are needed on the above-mentioned challenges and for the interoperability with health (including a review and alignment of data collection systems and making use of the opportunity presented by the EDHS II to review the notification forms).

UNICEF Ethiopia supported analysis of administrative data from VERA which revealed that out of 3,482,734 expected births annually, approximately 10 per cent were registered between August 2016 and July 2017.

With support from UNICEF Ethiopia, significant investments were made by VERA in capacity building of civil registrars (kebele managers) and creating awareness and demand from parents for registration service uptake. The results of these investments have not yet been tracked. During the Leaders’ Summit on Refugees in September 2016, the Prime Minister pledged to register vital events of refugees. The pledge was realized in August 2017 with the new law (Proclamation No. 1049/2017) that extends the scope of application of the system to refugees and other non-nationals. Ethiopia launched the registration of refugees’ vital events on 27 October 2017. The new law requests the health sector to notify of out-of-facility births.

To strengthen the civil registration system for refugees and host communities in five regions, a two-year programme was being finalized by UNICEF, UNHCR and UNFPA with the European Union and the Royal Netherlands Embassy. The agency is new and, as such, requires more support in institution building, including priority setting. A key lesson learned was around ensuring the alignment of support from funding partners so that UNICEF Ethiopia can increasingly focus on the provision of technical support (drawing on international expertise available from the UNICEF Regional Office) and transition out of supply-provisioning. A key priority for 2018 is to strengthen the interoperability with health to improve the percentage of on-time registration (registration of newborns under 90 days).

OUTPUT 4 Capacities of institutions’ and communities’ strengthened to prevent and respond to violence against children and adolescent girls in 100 woredas and cities

Analytical statement of progress
UNICEF Ethiopia’s advocacy efforts contributed to a comprehensive module on violence against girls and women being included in the 2016 EDHS for the first time (timely for SDG reporting for target 16.2). Almost one-quarter of girls and women aged 15-49 have experienced physical violence since age 15 and one in ten have experienced sexual violence. Help-seeking behaviour is low: one-quarter of girls and women who have experienced any type of physical or sexual violence have sought help, while 66 per cent have neither sought help nor told anyone about the violence. Boys also experience violence, but their cases have so far not been tracked systematically at a national level.

The Government strengthened response services (including establishing OSCs and referral pathways) for violence against children and women at federal and regional levels. By November 2017, 3,262 children (1,778 girls and 1,389 boys, and 95 cases without sex disaggregation) who experienced various types of violence (including physical and sexual violence) received services such as legal aid, psychosocial and medical support across nine regions and two city-states. Three OSCs were opened in three regions. Twenty-six referral pathways were launched across
the regions: 10 in Oromia, 4 in Gambella, 5 in Amhara, 1 in Benishangul-Gumuz, 1 in Tigray and 5 in Somali. All relevant government sectors formally agreed to handle cases of violence. UNICEF Ethiopia supported three regions to systematize and standardize the referral mechanisms so that all victims/survivors receive appropriate services.

The quality of the services in the existing OSCs and the efficiency of referral pathways improved through the UNICEF-organized training for service providers (i.e. from the Bureau of Women and Children Affairs, health, education, police, and justice sectors). In Addis Ababa city-state and Harari region, 48 OSC staff were trained on multi-sectoral response to survivors of gender-based violence. Trainings were also conducted in other regions for OSC staff and government staff.

With UNICEF Ethiopia support, phone hotlines established in Addis Ababa and Harari region further enhanced the services for victims of violence. The hotline in Harari was launched in August 2017, and BoWCA and the Harari Police Commission developed standard operating procedures (SOPs) for its implementation and data collection. In Addis Ababa, BoWCA adopted a Memorandum of Understanding and drafted SOPs for the hotline centre.

UNICEF conducted a data flow mapping on violence against children and women in three regions. Recommendations to strengthen the routine administrative data system by implementing partners were included in the 2017/18 AWP (2010 Ethiopian Fiscal Year). In Benishangul-Gumuz Region, data collection tools were harmonized and reviewed to enable disaggregated data collection. The revision of data capturing and referral tools were also conducted in Gambella Region.

In 2018, key priorities will be the reconfiguration of this programme to align with the global theory of change on violence against children. UNICEF will focus on improving the reporting and quality assurance mechanisms, including the standardisation of data collection formats and reporting mechanisms and establishment of minimum standards.

**OUTPUT 5** Institutional and community capacities to prevent the spread of HIV among adolescents strengthened in 120 'hotspot' urban woredas

**Analytical statement of progress**

The evaluation of Phase II of the UNJP was undertaken by independent consultants. Key findings included its alignment with national priorities and relevance to the SDGs, and success in educating target groups on HIV and sexual reproductive health, reaching targets, and strengthening implementing partners’ capacities. Recommendations included the need for increased emphasis on reaching the most vulnerable adolescents and younger adolescents. Those recommendations were taken into account for the development of a Phase III (2018-2021) of the UNJP, which includes a nine-month inception phase approved by the Royal Norwegian Government.

Through UNICEF Ethiopia and UNFPA’s collaboration with government partners, 7,716 duty bearers, including teachers, community leaders and parents, were trained on violence and HIV/AIDS prevention and awareness-raising. They learned how to provide a protective and enabling environment for children and adolescents in their families and communities. The Government managed to reach 122,000 adolescents with direct services (HIV testing and counselling, training on life skills and peer education) in 120 targeted hotspot woredas in six regions. More than half of those reached with direct services were adolescent girls.
UNICEF Ethiopia provided technical and financial support to the Federal HIV/AIDS Coordination Office to generate evidence among adolescents in Ethiopia using the ‘ALL IN’ rapid data assessments and bottleneck analysis. ALL IN engaged different stakeholders to compile and review the multisectoral data and promote a culture of data-driven programming and advocacy for disaggregated data. The findings from ALL IN will help the Government to design a high-impact evidence-based national HIV/AIDS action plan in the coming year. Key lessons learned included the importance of engaging with multiple ministries and of adolescent participation in the bottleneck analysis.

A high level advocacy workshop was conducted in Gambella Town in October with the participation of 196 representatives from zonal and woreda government administrations, community leaders, CSOs and the regional HIV/AIDS Consultative Committee. The objective of the workshop was to strengthen the capacities of implementing partners to revitalize prevention interventions across all sectors, ensure government ownership, and mobilize domestic resources. A plan of action was developed to harmonize and align interventions for all sectors involved to reduce the HIV prevalence rate.

The mechanisms for partnership and coordination of adolescent and HIV activities, including regular review meetings, resulted in better alignment of activities, reduced duplication of efforts and leveraging of domestic resources. For instance, the education and health sectors allocated 2 per cent of their budget from their regular resources to implement HIV prevention activities in line with the Government’s policies.

Priorities for 2018 will include realigning the programme to better integrate it into a new multisectoral programme output area, and to incorporate a successful nine-month inception phase to inform phase III of the UNJP, with its focus on the most vulnerable adolescents. UNICEF Ethiopia will also focus on strengthening linkages with other child protection areas, notably violence prevention and social service workforce strengthening.

**OUTPUT 6** Coordination and accountability mechanisms, and community and institutional capacities for social mobilization to end child marriage and FGM/C strengthened at federal level, in three regions and other ‘hotspot’ woredas

**Analytical statement of progress**

The 2016 EDHS provided the first update on FGM/C since 2005, and the first on child marriage since 2011. To inform future programming, UNICEF Ethiopia undertook an analysis of the data for girls up to age 18 years and by region.

UNICEF Ethiopia supported the Ethiopian Orthodox Church to develop and launch a document in October to help detach harmful traditional practices from religious teachings and prevent priests and community members from justifying such practices through religion.

In their efforts to develop a costed roadmap to end FGM/C and child marriage by 2025, MoWCA, UNICEF and UNFPA reviewed a core package of interventions and agreed on the methodology to track expenditures and costing of the interventions.

Through government efforts, since January 2017, 8,778 cases of child marriage were identified in four regions. Most of the cases of planned child marriage reported to law enforcement bodies were cancelled (2,776 cases). A total of 6,002 cases were approved based on the age
examination result (which, however, does not confirm the exact age of a girl). The number of child marriage cases identified and reported was four times higher than in 2016. This was due to improved reporting mechanisms and the empowerment of girls to speak out.

A total of 101 cases of female genital mutilation/cutting were reported to law enforcement bodies in two regions. The number of cases increased since 2016, which could be due to an improved FGM/C reporting system.

At the regional level, through social mobilization events and community dialogues, 759,051 community members in 73 woredas in six regions were sensitized on the negative effects of child marriage and FGM/C. More than 62,971 community members were reached with interventions to end child marriage. Eighteen kebeles in four woredas in Somali Region made a public declaration to abandon the practice of FGM/C and 77 kebeles in Amhara Region also declared that they are free from child marriage.

In response to child marriage and FGM/C cases, law enforcement improved, and the number of cases reported increased. A total of 3,560 justice professionals from 73 woredas in six regions received training on the development of working manuals and materials. The programme also enhanced the legal awareness of 812,987 community members.

The baseline survey for the Amhara Ending Child Marriage Programme was completed and data collection was completed for the midline survey. There were delays in finalizing the midline survey report, which was expected in January 2018.

Priorities in 2018 will include the implementation of the recommendations from the Joint UNICEF Ethiopia Child Protection and Education mission and the New York Headquarters and ESARO mission to Amhara’s child marriage programme, which include quality checking the ‘Community Conversation Manual’ and ‘Life Skills Manual,’ and working with UNICEF Ethiopia’s Social Policy section on linkages with the PNSP. Preparatory work for Phase III of the UNJP on ending FGM/C will be undertaken. Noting the increased demands in both programme areas, additional human resources will be recruited and resource mobilization will be undertaken.

OUTPUT 7 Child protection and gender-based violence services provided to children and adolescents affected by emergencies

Analytical statement of progress
Limited resources for child protection in emergencies remained a constraint, with a funding gap of 80 per cent. This had an impact on the prioritization of addressing violence (including gender-based violence), separation and psychosocial support needs and impeded a more systematic response.

As co-lead of the child protection gender-based violence sub-cluster, UNICEF Ethiopia supported the revision of child protection tools for the belg and meher assessments. The 2017 Humanitarian Requirements Document (HRD) highlighted child protection risks. Engagement of the MoWCA and BoWCA on child protection, including gender-based violence issues, remained a challenge, given the limited number of social workers in communities to prevent and mitigate violence.

UNICEF Ethiopia worked together with UNHCR and NGOs to provide alternative care
arrangements for 7,246 refugee children in Gambella Region. A total of 392 children were reunited with their parents and 1,120 refugee children at risk of abuse and violence were identified and received multisectoral protection services (psychosocial and legal support). A total of 18,796 children were reached with key child protection messages on self-protection and available services. In the camps, 81 child protection committees were established and members were trained on protection concerns. The committees identified 258 child protection cases (including violence, abuse and family reunification or alternative care).

To address gaps in service provision, UNICEF Ethiopia organized a training for supervisors of frontline workers on focused psychosocial support in refugee camps in Gambella Region. UNICEF finalized a partnership with Plan International to mainstream child protection across the health and nutrition sectors in Gambella refugee camps and host communities, to help children and caregivers access psychosocial support at health and nutrition centres and use the nutrition sector as their entry point.

Together with Addis Ababa BoWCA and IOM, UNICEF supported the return of 254 unaccompanied minor returnees from Yemen, Djibouti and Saudi Arabia who were reunited with their families.

UNICEF supported child protection interventions in the five drought-affected regions where 20,187 children accessed structured, recreational, socializing and learning platforms in child-friendly spaces to restore and help ensure their psychosocial well-being. Some 266 children separated from their parents due to the drought were reunited with their families. Child protection messages were provided to 8,584 children and 21,375 adults, which resulted in enhanced safety for children at the community level.

UNICEF received a six-month surge capacity support for Somali Region, where the drought induced by the Indian Ocean Dipole led to significant displacement and development of temporary settlements. In partnership with BoWCA, UNICEF supported targeted interventions in two camps, including awareness on GBV, which reached 1,700 people. Government social workers identified and referred 45 children to the CMAM programme and 13 children for health services.

In response to the recent border conflict in Oromia and Somali regions, UNICEF participated in field missions to inform programmes, policy response and advocacy efforts.

Key priorities in 2018 will be to strengthen the Child Protection GBV Sub-Cluster, including MoWCA’s engagement; advocacy for a social service workforce, including for emergency response; strengthening technical support, including for GBV in emergencies; and improving resource mobilization efforts.

OUTCOME 6 By 2020, Ethiopian children benefit from an improved policy environment, and evidence-informed, child-friendly, gender-sensitive and results-oriented planning and financing in support of the inclusive, sustainable and equitable realization of child rights

Analytical statement of progress
Several critical studies were supported to fill the knowledge gap on the situation of children and women and to inform policy dialogue. A Multiple Overlap Deprivations Analysis was conducted to establish a national baseline of the SDG1.2 on child poverty. The Child-Focused SDGs Costing and Financing Study was carried out to assess fiscal space for domestic financing to
achieve the SDGs. The Generation El Niño Study assessed the impacts of recurring droughts on children’s well-being and promoted adaptive and resilient programming.

The Ethiopian Centre for Child Research (ECCR), established in 2016 within the Economic Development Research Institute, widely disseminated its first research on chronic poverty, highlighting how social protection programmes play a crucial role to avoid intergenerational transmission of poverty. The ECCR played a pivotal role for Ethiopia’s representation and for hosting the Africa conference ‘Putting Children First.’ Promising partnerships, such as those with Gender and Adolescents: Global Evidence (GAGE) and Zurich University, were established to sustain the national vision of the research centre. With UNICEF Ethiopia’s support, the 2016 EDHS was released and crucial social indicators for children were updated.


The new fiscal year 2017/18 budget reflects Ethiopia’s changing budget landscape, with the decline in Official Development Assistance, which echoes Ethiopia’s rapid development and pathway toward lower middle-income country status. The 2017/18 approved budget of US$13.9 billion is a record budget, with a 17 per cent nominal increase compared to last year. Ten years ago, the budget was only approximately US$2 billion. There has been a significant expansion of public financing and in the role of domestic resources for social investment and emergencies response, with 86 per cent of the 2017/18 budget coming from domestic resources. The 2017/18 budget formulation remained pro-poor oriented and aligned with the SDGs agenda, with more than 60 per cent of the budget allocated to basic services.

Building on these significant and profound budgetary trends UNICEF Ethiopia engaged in a strategic partnership with the Ministry of Finance and Economic Cooperation (MoFEC) and the MoWCA on public finance management. Four budget briefs were released analysing the last ten years of budget allocation for social sectors. A tax reform research agenda study was launched. The Child Public Expenditures Measurement (C-PEM) study was introduced, which aims to keep public investment of social services for children at the top of the agenda in 2018.

The 2017/18 budget also reflects the Government of Ethiopia’s commitment to the PSNP4, with an allocation of national resources increased from US$7.02 million in Ethiopian Fiscal Year (EFY) 2009 to US$0.098 billion in EFY 2010 in order to fill the PSNP4 funding gap and to secure the 12 months transfers to PDS Beneficiaries. In 2017 UNICEF intensified its support to the Ministry of Labour and Social Affairs for its role in the PSNP4 for PDS and to coordinate the effective implementation of the Social Protection Policy and Strategy. In 2017, one federal and four regional Social Protection Action Plans were finalized. Technical and financial support continued to strengthen capacities at federal level and in two regions to implement the CashPlus pilot IN-SCT programme. The midline evaluation and an operational research of the IN-SCT, finalized in 2017, showed promising impact of the ongoing integrated systems approach. This occurred through an extensive case management system, implemented through social workers who were trained jointly by UNICEF Ethiopia’s child protection and social policy sections, and were recruited as civil servants by regional bodies in three regions. The
establishment of a web-based MIS, which digitizes the case management system, was finalized. The IN-SCT MIS informed the national discussion around the MIS development within the PNSP.

The PSNP Joint Review and Implementation Support Mission revealed commendable progress in the area of streamlined nutrition, a positive result of the UNICEF-supported pilot and tailored trainings in the PSNP targeted regions in early 2017. On the same note, through a comprehensive PSNP Nutrition Assessment, UNICEF significantly influenced the nutrition component of the additional PSNP World Bank funding. Through intensive advocacy, a set of nutrition-related indicators were included in the World Bank initiative for Enhancing Shared Prosperity through Equitable Services, which will specifically focus on PSNP clients as a proxy for the most vulnerable. UNICEF co-led two technical working groups of the PSNP4 midterm review, which revealed commendable progress related to streamlined nutrition. This was a result of the IN-SCT pilot and tailored trainings in four highland regions in early 2017.

An extensive assessment of the potential linkages of the CBHI and the PSNP was endorsed by the Ethiopian Health Insurance Agency. In 2018, this will support the next steps of the equity and inclusion agenda by testing the concrete ways forward to enable safety net clients to access the CBHI premium waiver.

OUTPUT 1 Government institutional capacity for child- centered, equity-focused, evidence-based and inclusive national development policies and strategies enhanced

Analytical statement of progress
UNICEF Ethiopia focused its technical support on strengthening national institutional capacity to conduct research on children, establish a baseline of the SDG 1.2 on child poverty, include costing on the child focused SDGs, and successfully launch, with the UNCT, the Voluntary National Report (VNR) at the High Level Policy Forum (HLPF).

UNICEF Ethiopia provided financial and technical support to the ECCR in partnership with the Economic Development Research Institute (EDRI), Young Lives Project, MoWCA, Addis Ababa University, National Planning Commission (NPC) and Central Statistics Agency (CSA). The partnership aims to promote policy formulation based on evidence on children and women. In 2017, ECCR finalized a chronic poverty report, which highlights trends in multi-dimensional child poverty. The report was widely disseminated, at the Child Research and Practice Forum (CRPF), the 15th Annual Conference of the Ethiopian Economics Association in Ethiopia, the international conference on Child Poverty in the Middle East and North Africa, the 6th International Society for Child Indicators (ISCI) conference in Canada, and the international conference in Ethiopia on child poverty, where ECCR provided a leading role in the overall organization.

UNICEF worked with ECCR on a study that focuses on urbanization trends and urban child poverty in Ethiopia, to be finalized in 2018. The ECCR’s advisory board met in 2017 to assess progress made and identified research areas based on knowledge gaps and priorities in national policies. ECCR also provided technical backstopping for government departments and child-focused organizations to contribute to increased utilization of evidence for tracking national development targets and informing programmes and policies.

UNICEF Ethiopia also supported CSA to generate evidence and establish a baseline for SDG target 1.2 on child poverty. CSA staff were trained in the Multiple Overlap Deprivation Analysis
approach. The findings will be included in the final report in 2018 and will be based on the latest data sets of the EDHS 2016, Household Consumption and Expenditure (HCE), and Welfare Monitoring Survey (WMS) 2016. UNICEF Ethiopia, with other partners, supported the report writing of the EDHS 2016, which included key indicators to inform baselines for SDGs indicators such as FGM/C, health facility verification of child immunization, violence against women, and birth registration. UNICEF Ethiopia also supported the National Health Accounts and provided technical support for the census planned for 2018. A child-focused SDGs costing and financing study, in collaboration with the NPC, was underway and preliminary results were presented, including costing needs and financing options. UNICEF contributed to the national consultations for the VNR SDG report and provided technical support to the SDG taskforce in supporting a SDGs needs assessment.

Preliminary findings of the research conducted on long-term impacts of the El Niño 2015/16 drought on the wellbeing of children were available. Additional findings to be release in 2018 will be useful to propose long-term options to prevent shocks and to promote adaptive programming options that will promote child well-being.

**OUTPUT 2** Capacity of key Government institutions and other stakeholders to address child rights obligations enhanced

**Analytical statement of progress**

With support from several partners, the National Children’s Policy was adopted by the Government and published for nationwide dissemination. A draft national strategy was also developed to facilitate implementation of the policy. To strengthen the implementation and progress monitoring of the 2015 CRC concluding observations and recommendations (CORs), the Ethiopian Human Rights Commission (EHRC) and MoWCA organized forums involving 153 representatives from five regions (37 males and 116 females). The CORs were translated into three local languages (Amharic, Oromifa and Tigrayan) to be disseminated locally. The MoWCA and BoWCA conducted consultative forums and supportive supervisions to strengthen the federal and sub-national CRC committees to systematically monitor the implementation of the CORs. The Amhara and Addis Ababa BoWCAs developed draft child action plans based on the CORs and regional SiTAN recommendations. Upon endorsement of the Action Plans, the regional CRC committees are expected to meet quarterly to review the implementation progress. UNICEF Ethiopia supported the EHRC to assess the implementation status of the CORs. The assessment tool was under development and expected to be finalized in 2018. Findings of the assessment will be discussed in 2018 at a high level forum with parliamentarians and line ministers.

The Ethiopian Institute of Ombudsman (EIO) conducted an independent supervision of selected social sectors focused on maternal and child healthcare, child friendly and inclusive school environment and trafficking. Service provisions and conditions were assessed against human rights standards and mandates under the domestic law. The findings were validated in a workshop and the recommendations were forwarded to the all concerned government institutions. Building on the issues identified during the first supervision, EIO prepared to undertake follow-up supervision in the health sector.

The publication of contextualized Amharic versions of the global guideline on Child Friendly Cities/Communities framework (CFCF) and its rollout was underway and will continue in 2018. The Amhara BoWCA and Tigray Bureau of Labour and Social Affairs (BoLSA) also developed child rights mainstreaming guidelines, both of which were in the pipeline for
endorsement. In collaboration with MoWCA, UNICEF Ethiopia worked on a child wellbeing factsheet to track progress on key indicators identified based on the SDGs and GTP II.

The EHRC and Addis Ababa BoWCA conducted awareness-raising on child rights for children (135 females, 149 males), of which 101 were child parliamentarians. A child-friendly version of the CRC was produced and distributed at the forums. Reaching out to regions, the EIO revitalized the child parliament model from Harari Region along with awareness-raising on child rights to child parliamentarians and regional government officials (56 females, 78 males) in Harari and Afar regions.

Children were engaged in policy dialogues with decision-makers during events organized on the Day of the African Child. The media coverage of the event created awareness on child rights among the public. UNICEF Ethiopia and partners commemorated World Children’s Day and UNICEF’s 65th birthday in Ethiopia through different activities that reflect the 2017 theme, 'A day of action for children, by children'.

OUTPUT 3 Institutional capacities for public finance management for children strengthened

Analytical statement of progress
Studies were launched on Child-focused Public Expenditure Measurement, which for the first time in Ethiopia analysed budget expenditures on children at all administrative levels, and on Costing and Financing of the Child-focused SDG, analysing 15 years of fiscal space for social development. Both studies will be finalized in 2018. UNICEF Ethiopia supported MoFEC to produce a research agenda that in 2018 will identify and prioritize areas for fiscal policy and tax reforms. Four national budget briefs that analyse budget allocations and expenditures were produced. With the decline in ODA, these efforts will support Ethiopia’s changing budget landscape, which reflects Ethiopia’s rapid development and pathway toward lower middle-income country status. Ethiopia’s parliament approved a 2017/18 federal budget of US$13.9 billion, a record budget with a 16.9 per cent nominal increase compared with last year. Ten years ago, the budget was only approximately US$2 billion. This indicates a recent significant expansion of public financing and of the role of domestic resources. Reflecting on the Government’s commitment to domestic financing, 85.8 per cent of the budget is from domestic resources (including 17 per cent from domestic borrowing).

With the objective to promote allocation on social sectors, the Cost-Benefit Analysis of Social Cash Transfers was completed, providing evidence of a positive rate of return. The study was being adapted for submission to an academic journal. UNICEF also supported an OECD analysis on the long-term fiscal space for social protection. An inception was conducted with a wide range of stakeholders and involving the Planning Commission and the MoFEC.

There was sustained progress to rollout the participation of citizens in decentralization and local governance processes. To date, UNICEF supported 372 woredas, including their respective villages, to implement the Integrated Community-Based Participatory Planning as a core element of woreda/community development planning, enabling them to identify opportunities and challenges and plan appropriate interventions. In 2018, UNICEF will support a better integration of child and adolescent participation, which was being piloted in selected woredas in Amhara and Tigray.

UNICEF Ethiopia also provided support for developing and updating the GTP monitoring tool using Devinfo technology at national and regional levels. This strengthened the planning,
monitoring and evidence-based reporting by building capacity to manage, organize, analyse and disseminate timely socioeconomic data. Emphasis was placed on improving the data quality of sectoral-generated data and the data entered into the Regional info database. Regional info was updated with 2016/17 DevInfodata and was being established in three additional regions (Benishangul-Gumuz, Harar and Gambella). The Ethioinfo database was updated with new surveys and data from the EDHS 2016, and a national and regional SDGs factsheet and SDG Dashboard were prepared to present available SDGs data visuals. The Diredawa city-state and Oromia, SNNP and Amhara regions published and disseminated statistical bulletins and district-level development indicator booklets that include public finance data.

**OUTPUT 4** Government capacity to implement child-sensitive social protection strengthened

**Analytical statement of progress**

UNICEF Ethiopia continued to support MoLSA to coordinate the implementation of the National Social Protection Policy and Strategy. In 2017, UNICEF focused on strengthening the national social protection platform secretariat and finalizing the implementation of one federal and four regional Social Protection Action Plans.

Because of UNICEF Ethiopia’s technical support, government capacity was strengthened to implement the CashPlus pilot on Improved Nutrition through the IN-SCT programme. The IN-SCT programme aims to strengthen nutrition, gender and social development provisions of PSNP4 by linking permanent and temporary direct support clients to basic social services, with a focus on maternal, newborn and child health services and education. The IN-SCT was based on an integrated system approach, which materialises through an extensive case management system, implemented through trained social workers. The midline survey of the rigorous IN-SCT impact evaluation and additional operational research (both finalized in October 2017) revealed promising results of the pilot.

A web-based MIS in the IN-SCT pilot regions and federal level, which digitizes the case management system, was finalized. Lessons learned from the IN-SCT informed a new UNICEF intervention launched in October 2017. Aimed at strengthening integrated safety nets for the most vulnerable women and children in Ethiopia, the five-year programme (2017-2022) will focus on linkage creation between the PSNP and the CBHI programme, as well as strengthening the Urban PSNP.

A comprehensive assessment of CCCs in five regions was conducted to inform the national discussion around strengthening their mandate toward implementing sustainable social protection activities at community levels.

UNICEF continued to play a significant role in the PSNP coordination and policy dialogue. The PNSP4 midterm review revealed the commendable progress related to streamlined nutrition, which is a result of the IN-SCT pilot and tailored trainings conducted in four highland regions in early 2017. Through a thorough PSNP nutrition assessment, UNICEF significantly influenced the nutrition component of the additional PSNP World Bank financing, which was in effect in September 2017. Through intensive advocacy, a set of nutrition-related indicators was included in the World Ban ESPES initiative.

UNICEF Ethiopia conducted an extensive assessment of the potential linkages of the CBHI programme and the PSNP to move forward the common equity and inclusion agenda. A promising working relationship with the Ministry of Health and the Ethiopian Health Insurance
Agency was initiated, which will be further strengthened in 2018 within the new partnership on building integrated safety nets in the PNSP and Urban PSNP (UPSNP) frameworks.

UNICEF Ethiopia supported the PSNP Federal Contingency Budget to ensure tailored support to households with SAM/MAM children in drought-affected areas and strengthened the general function of the PSNP as a scalable safety net in case of shocks. UNICEF also fostered the common Continuum of Response agenda of the Government of Ethiopia.

**OUTPUT 5** Capacity of Government and other stakeholders for systems and database on gender equality commitments strengthened

**Analytical statement of progress**

The end-line evaluation of the UN flagship Joint Programme on Gender Equality and Women’s Empowerment (JP GEWE) that UNICEF Ethiopia contributed to was finalized and validated. The key findings were endorsed and a management response was developed by the programme management committee. The evaluation acknowledged the contribution made by the programme in empowering women and girls as well as strengthening systems and institutions to address gender equality. It recommended that a future joint programme on gender equality should be more geographically and thematically focused.

As part of the JP GEWE bridging phase initiatives, UNICEF supported the MoWCA to develop a background framework document for the establishment of a national gender database and MIS. This support aims to ensure the availability of a comprehensive set of data on the gender profile of the country that could be periodically updated and utilized to track progress and report against GTP II, the Committee on the Elimination of Discrimination against Women, SDGs and other national and global commitments on gender equality and women’s empowerment.

Based on a review of literature and consultation with relevant sectors and MoWCA, the gender indicators per domain, variables, sources of data, and institutional responsibilities were identified and consolidated. A consultation with sectors at the sub-national level was being organized to identify and discuss indicators that the MoWCA/BoWCA will be directly responsible for. The software development was underway with financial support from AfDB. In parallel, UNICEF recruited an information, communication and technology (ICT) firm to train relevant staff from the MoWCA and sectors on ICT to build the capacity required for the development and administration of the gender MIS. Five staff from the MoWCA and five from other ministries were trained and acquired in-depth knowledge and skills on querying, developing and administering the SQL server database.

With the objective of strengthening multisectoral coordination on gender, the federal level gender coordination forum was conducted, involving 72 participants (43 female) from line ministries, regional bureaus, women parliamentarians and other government agencies. One of the aims of the federal forum was to strengthen similar coordination mechanisms in the regions. As a result, two consultative forums were carried out in Afar and Benishangul-Gumuz regions, resulting in consensus in both regions to establish a gender coordination forum. MoWCA conducted its annual sectoral meeting in October. Messages related to the international day of the girl child were published and disseminated in connection with the national conference.

With financial support from UNICEF and in collaboration with the Ethiopian Civil Service University, five gender mainstreaming training manuals on gender concepts, mainstreaming, audit, analysis, and gender-sensitive M&E were developed by the MoWCA, translated into
Amharic, and disseminated. In 2018 the manuals are planned to standardize gender trainings throughout the country and support regional bureaus to strengthen their capacity to integrate gender into their plans and budgets. A key priority in 2018, linked to UNICEF’s Gender Action Plan II, will support the elaboration of a national ending child marriage costed plan.

OUTCOME 7 Country programmes are efficiently designed, coordinated, managed and supported to meet quality programming standards in achieving results for children.

Analytical statement of progress
The country management team (CMT) prioritized the follow up of annual management plan priorities related to programme areas and the closure of all 2016 audit recommendations. As part of routine follow up, the CMT tracked key performance indicators (KPIs) for grants and budget management, risk assurance activities, supplies, human resources and ICT. The CMT also ensured effective follow up of recommendations to improve performance against the KPIs. To increase efficiency and effectiveness of UNICEF Ethiopia, an accountability framework between UNICEF Ethiopia and its field offices was developed and implemented.

UNICEF Ethiopia continued to focus on ensuring secure and Minimum Operational Security Standards (MOSS)-compliant premises in all its field offices. This resulted in moving the Somali field office to a more secure facility, and building new facilities on allocated government land for the Gambella field office. Based on the 2016 MOSS assessment, the Amhara field office moved to a newly rented MOSS-compliant building. The Tigray field office also moved to a new office in a safer and more secure area.

UNICEF Ethiopia initiated a midterm review of the country programme based on the country’s situation along with functional and affordability analyses. The key principles guiding the review throughout included: transparency and fairness, consultation with and participation from staff, and engagement with all relevant external stakeholders. Results-based management (RBM) formed the methodological basis of the programme review, applying optimal solutions that delivered programme results and ensured operational continuity. The midterm review was ongoing, with support from the UNICEF East and Southern Africa Regional Office, and will be finalized in 2018.

In 2018, UNICEF Ethiopia’s management team will continue to focus on ensuring improved quality of risk assurance activities, and pushing forward programme results against the Country Programme (2016-2020).

OUTPUT 1 Governance and systems exist to support the direction of the country operations.

Analytical statement of progress
Monthly PMT meetings and CMT meetings were used as tools for monitoring, strategic oversight and accountability. The PMTs provided a platform for strategic programme updates, collective review and solutions for improved key performance indicators, and relevant advice to the CMT. The CMT ensured open, transparent and participatory decision-making and accountability for key performance indicators across the team.

Following a senior management retreat in January 2017, UNICEF Ethiopia agreed on an accountability framework for the office to enable staff to assume clear responsibility and accountability for fulfilling their duties. The review of the framework took place in October 2017,
with staff consultations conducted as part of the midterm review process.

The final report of the 2016 Internal Audit was received in January 2017, and an Audit Task Force focused on the implementation of the audit’s nine recommendations. All the recommendations cited by the Office of Internal Audit and Investigations were closed in October 2017.

Technical support, tools and guidance in key operational and programmatic areas were provided to the country office in Addis Ababa, field offices, and implementing partners throughout the year. The Risk Control Self-Assessment was amended to integrate regional-specific risks and encourage regions to develop and manage their own risk profiles. The table of authority and business continuity plan were updated by the CMT and shared with all UNICEF staff.

**OUTPUT 2** Stewardship of financial resources creates the conditions to pursue country operations

**Analytical statement of progress**

The last internal audit review of operating procedures and financial controls was rated as satisfactory. UNICEF Ethiopia established key financial controls with respect to bank reconciliations and segregation of duties for the payment processes related to direct cash transfer (DCT) to implementing partners, and procurement of supplies and institutional services.

The country office revised the HACT commitments to ensure assurance activities were conducted on time and that necessary follow-up was carried-out. Outstanding disbursement and liquidation were regularly reported to the CMT, and benchmarks for DCTs more than six- and nine-months-old were consistently monitored. As of 31 December, outstanding DCTs of six to nine months totalled US$412,439, representing 2 percent of the total. There were no outstanding DCTs over nine months.

A total of US$59.3 million of DCTs was released to implementing partners. Overall, the total allocation in 2017 was US$220,660,281 (this includes US$439,177 from non-grant, US$88,651,229 from OR, US$87,358,280 from ORE, and US$44,211,595 from RR). Financial utilization was 99 percent of the funded resources.

UNICEF conducted 367 programmatic visits (achieving 140 per cent of its target), 96 spot checks (meeting 76 per cent of its target), and five training sessions on HACT for 87 key government and CSO implementing partners and 55 staff from UNICEF field offices. UNICEF used local audit firms to conduct micro-assessments on 15 implementing partners and to audit 67 implementing partners.

The UNICEF Ethiopia budget committee conducted a cost centre budget analysis indicating clear areas for cost savings that were being implemented. Quarterly reviews on cross-sectoral cost savings were conducted and presented to the country management team.
OUTPUT 3 Human Resources Management

Analytical statement of progress
By December 2017, UNICEF Ethiopia had 405 fixed term and permanent positions, of which 351 were filled (51 international professionals, 149 national officers and 151 general service staff). In addition, 37 temporary appointments and 31 personnel were mobilized for the emergency response.

UNICEF Ethiopia’s staff included 150 females and 234 males. The ratio for IP staff was 61 percent female and 39 percent male; for NO staff it was 34 percent female and 66 percent male; and for GS staff it was 36 percent female and 64 percent male. UNICEF Ethiopia continued to face challenges in balancing the gender ratio in NO and GS categories.

The 2017 Learning and Training Plan included three cross-cutting group trainings, two section-specific trainings and 40 individual trainings. The RBM training was conducted for 210 staff. More than 90 percent of staff completed the mandatory ethics training. Thirty staff were trained in First Aid. Twenty-four individual trainings were completed, and 25 new staff went through a comprehensive group orientation. Thirty-six staff benefited from national and international stretch assignments, staff exchanges and development missions.

Two teambuilding workshops for the country management team were conducted in 2017, with a focus on the ways of working. An all-staff retreat was conducted in April, which emphasized living the values of UNICEF Ethiopia.

A training on performance management was conducted for all staff. One-hundred percent of staff completed their 2017 Performance Evaluation Review plans in ACHIEVE. Further performance management training was ongoing, with particular focus on performance conversations, giving and receiving feedback, and year-end appraisal. Stress and Wellness Trainings through the United Nations Health Care Centre, as well as HIV/AIDS awareness training, were also organized.

In follow-up to the Global Staff Survey 2017, a concrete Action Plan was developed, and actions were regularly monitored and reviewed.

OUTCOME 8 Country programmes are efficiently designed, coordinated, managed and supported to meet quality programming standards in achieving results for children

Analytical statement of progress
The midterm review (MTR) of the current country programme (2016-2020) was initiated in August 2017 and will be completed in March 2018. As part of the MTR process, the situation of women and children in Ethiopia was updated and the progress made toward achieving the programme and operational targets set in the results matrix of the country programme document (CPD) was assessed. He key strategies implemented to address the programme bottlenecks and barriers were also reviewed. A functional review was underway and, along with the affordability analysis, will ensure programme, staff and operational costs are fit for purpose and well-resourced through the remaining part of the programme cycle and beyond.

In six RBM trainings, all 210 UNICEF Ethiopia professional staff were trained as part of the UNICEF global initiative to build the capacity of staff on results-focused programming and to strengthen the RBM practice. Each four-day training was facilitated by the UNICEF RBM
external master trainers with support from the UNICEF Ethiopia RBM champions and resource persons. Participants in the RBM training used the knowledge and skills acquired from the training to review and amend their results structures and theories of change, and to update their programme strategy notes and measurement frameworks.

To ensure sustained effectiveness and efficiency in programme management, the programme management team (PMT) and country management team (CMT) continued to regularly monitor the set UNICEF Ethiopia key performance management indicators. Of the total available funds, 99 per cent were utilized by the end of December 2017. The PMT and CMT meetings were utilized to ensure team-led solutions to timely grant utilization. The meetings also helped limit time overruns by linking the results milestones to direct cash transfer and releases. The PMT and CMT also reviewed progress of the Annual Management Plan and compact indicators twice throughout the year.

The office budget committee was convened once every quarter to ensure transparent budget review and a full budget analysis of all cost centres to determine cost saving measures. These measures were suggested to the CMT and were implemented and reviewed across the Addis Ababa office and the eight Field Offices. As a result of the regular monitoring and oversight, the required management actions were taken to improve programming and achieve results for women and children.

The UNICEF Ethiopia Resource Mobilization Strategy was finalized in 2017. The recommendations extracted from the strategy document were presented and discussed at the Resource Mobilization Task Force and the October 2017 PMT meetings. As a result, an action plan was developed and the respective programme and cross-sectoral teams pursued agreed upon shared roles and responsibilities to implement the agreed actions. In line with the Resource Mobilization Strategy, UNICEF Ethiopia submitted 49 proposals (totalling approximately US$ 176.3 million) between January and December 2017, and 66 per cent was raised against the 2016-2020 CPD target.

UNICEF Ethiopia continued to co-chair the interagency harmonized approach to cash transfer (HACT) technical working group, which is a platform for capacity building, networking and information sharing. UNICEF shared 25 implementing partners (IPs) with UNDP and UNFPA. UNICEF staff and its partners (including Government CSOs) were equipped with the knowledge of the HACT principles and procedures through trainings to improve quality of HACT assurance activities. A total of 15 partners (six government and nine CSOs) were assessed for compliance with UNICEF’s mandate and for capacity to implement programmes, and 67 partners (45 government and 22 CSO) were audited in 2017 as part of the implementation of the annual HACT Assurance Activity Plan. As a result, the capacities and risk levels of the IPs were assessed and identified, with quality assurance activities planned and executed accordingly.

Staff were trained on the new UNICEF eZHACT system intended to facilitate smooth integration into the HACT transaction processes. Preparatory work was completed and the new system was launched per the planned schedule.

Successful and timely partnerships were established with CSOs through programme cooperative agreements (PCAs) and small-scale funding agreements (SSFAs). The number of days to process a new PCA/SSFA was reduced from eight days in 2016 to an average of 2.5 days in 2017. For emergencies, all PCAs and SSFAs were processed within a day.
UNICEF Ethiopia reached 2.4 million girls, boys, women and men impacted by drought, flood and conflict with health and nutrition services, education and protection interventions and access to safe water, sanitation and hygiene. UNICEF Ethiopia supported the government-led humanitarian response to critical life-saving needs, and its interventions directly contributed to two of the three strategic objectives in the national humanitarian response plan: saving lives and reducing morbidity due to drought and acute food insecurity, and preparing for and responding to other humanitarian shocks.

UNICEF Ethiopia improved emergency preparedness and response capacity in eight regions of Ethiopia through technical support to regional governments’ emergency preparedness planning. Timely response to sudden-onset crises improved through the pre-positioning of non-food item stocks in Addis Ababa and two regional hubs in Gambella and Jijiga, sufficient for 120,000 people.

For 2018, UNICEF Ethiopia will work toward effective rollout of the new UNICEF Strategic Plan 2018-20210 and the new ESARO Regional Priorities and Compact.

**OUTPUT 1** Improved capacity for coordination of disaster management

**Analytical statement of progress**

In 2017, Ethiopia continued to be impacted by climate-induced hazards, such as drought, floods, and disease outbreaks, including acute watery diarrhoea (AWD) and scabies, as well as large scale internal displacement. The number of people in need of humanitarian assistance rose through the year as a result of continued shocks. During the midyear review of the 2017 Humanitarian Requirements, the population in need of food assistance rose from 5.6 million to 8.5 million, and those in need of access to safe water rose from 9.2 million to 10.5 million.

Throughout 2017, UNICEF Ethiopia engaged in federal and regional humanitarian coordination mechanisms to ensure that life-saving needs for vulnerable children, women and communities were addressed. As a member of the Disaster Risk Management Technical Working Group, cluster lead for WASH, nutrition and child protection sectors, and sub-cluster and co-lead for the education cluster, UNICEF Ethiopia played a critical role in enhancing coordination in strategic planning, needs assessment and data management, resource mobilization and humanitarian response implementation.

UNICEF Ethiopia supported eight regional Disaster Risk Management Bureaus in the development of emergency preparedness and response plans. Significantly, UNICEF Ethiopia provided logistical, technical and financial assistance to the seasonal assessment process to assess needs of affected communities, which informed the revision of the 2017 HRD and the development of the 2018 HRD, which will provide the basis for humanitarian assistance in 2018. UNICEF provided technical assistance to the Government’s National Flood Taskforce in the development of flood contingency and response plans. Consequently, lives were saved and livelihoods were protected as a result of early warnings that communities received through flood alerts issued by the National Flood Task Force.

UNICEF Ethiopia ensured internal emergency preparedness and response capacity through regular risk assessments, updated key emergency preparedness actions and pre-positioned supplies in Addis Ababa and two regional hubs in Gambella and Jijiga to support an initial response for an estimated 120,000 people. As the cluster lead agency for WASH, nutrition and child protection, and co-lead for education, UNICEF Ethiopia worked with the Government and
partners to reach 2.4 million girls, boys, women and men impacted by drought, flood and conflict with integrated health and nutrition services, education and protection interventions and access to safe water, sanitation and hygiene (numbers as of 8 December 2017).

South Sudanese refugees received coordinated humanitarian response through UNHCR and ARRA, with technical support from UNICEF across WASH, health, nutrition, education and child protection. Three UNICEF staff were seconded to UNHCR from the health, nutrition, and WASH sectors.

OUTPUT 2 Improved capacity for evidence-based learning and risk management

Analytical statement of progress

UNICEF Ethiopia’s Learning and Training Plan for 2017 included three cross-cutting office priority group trainings, two section-specific trainings and 40 individual trainings. More than 286 staff benefited from trainings that included RBM, First Aid, C4D and New Staff Group Orientation.

A total of 49 individual trainings (73 percent of the planned target) were implemented. Thirty-six staff benefited from both national and international stretch assignments, staff exchanges and developmental missions.

UNICEF Ethiopia engaged in two team building workshops for the CMT, focusing on communication and ways of working. An all-staff retreat was conducted in April and focused on building and living the values of the organization. Numerous staff consultation processes were conducted as part of the midterm review.

Orientation sessions and practical workshops were conducted for Global HR Reforms in Recruitment and Performance Management. One-hundred per cent of staff completed their 2017 PER plans in ACHIEVE. UNICEF Ethiopia adapted the Recruitment Reforms with preferences for Direct Selection (where possible), as well as for internal recruitments, while using the Blended Interview Process for selection.

The staff development committee continued to provide the necessary support and guidance in planning, implementation and review of learning priorities.

In 2018, UNICEF Ethiopia will focus on regular updates to staff and CMT on progress, lessons learned and tracking to ensure the learning and development (L&D) plan is fully implemented. Demonstrating clear linkage between PER discussions and L&D plans for individuals will be a key priority, along r with efforts to improve the overall performance management experience.

More than 90 per cent of staff completed the mandatory online ethics training. Seventy five per cent of staff completed the online course on Prevention of Sexual Exploitation and Abuse. Face-to-face trainings on Ethics, Fraud and Conflict of Interest were conducted by the operations team.

An internal audit was conducted in 2016, and the final report was received in January 2017. All recommendations were closed in October 2017 and the office agreed to establish a mechanism to follow on sustainability of actions to prevent pitfalls from the past. UNICEF Ethiopia revised and updated the Risk Control Self-Assessment Library in March. Field offices drafted Risk
Control Self-Assessment profiles, which were consolidated into the overall 2017 UNICEF Ethiopia profile. The table of authority was updated in February. HACT trainings were conducted for staff and implementing partners and spot checks were facilitated. An audit exercise was started for 67 IPs and final reports are expected in 2018.

UNICEF Ethiopia reviewed the Early Warning/Early Action Plan and revised the business continuity plan (BCP) in February 2017. A simulation test was conducted in November 2017 and the revised document now covers both the Addis Ababa country office and field offices. The ICT Working Group, representing all UN agencies, met three times in 2017 to discuss the action plan for implementing a harmonized BCP for UN agencies. The alternate sites were identified, and UNECA, on behalf of all UN agencies, was in the final stage of signing an MoU.

**OUTPUT 3** UNICEF staff and partners are provided guidance, tools and resources to effectively plan and monitor programmes

**Analytical statement of progress**

UNICEF Ethiopia implemented the 2017/18 AWPs starting in July, following their signing on 30 June 2017. An internal reflection meeting was held to discuss and document the lessons learned, which will contribute to improved quality of the AWPs and enhanced efficiency of the planning process. The meeting also identified key actions, including the need to conduct high level discussions with the MoFEC and partners to sign two-year AWPs, and the need to reduce the number of AWPs. The process was reviewed by UNICEF FRG and recognized as a good model. This was due to the level of government engagement and leadership, depth of systematic guidance given, and capacity of partners to grasp and rollout the guidance, resulting in quality AWPs.

A deep dive into UNICEF Ethiopia’s monitoring system was conducted to streamline internal processes. The need for strengthening end user monitoring systems was among the key findings. End user monitoring and reporting tools were developed to enhance the accountability of UNICEF and partners at all levels. The end user monitoring tools were field tested, involving programme sections and field office teams.

The government-led regional and federal midyear review meetings are planned for February 2018 under UNDAF. Findings of the midyear review meetings will be used to improve programme implementation in the next two quarters of the AWPs. UNICEF finalized the preparation of midyear reports in December 2017 as part of its year-end reporting process. UNICEF Ethiopia plans to provide technical and financial support to federal and regional levels in preparatory actions of midyear review meeting.

The internal HACT committees were revitalized at field office and national levels to provide guidance and monitor the implementation of HACT. Key outcomes of the field office monthly HACT committee meetings were presented and discussed at the national committee meetings under the leadership of the Deputy Representative. This resulted in quality improvements of HACT assurance activities, including the tracking and closing of findings and recommendations of programmatic monitoring and spot check visits. UNICEF Ethiopia instituted a system for quality assurance of field monitoring reports to ensure value-for-money in relation to contribution to improve programme implementation and management. The findings were reviewed and reported to PMT and CMT monthly.

All 122 donor reports due in 2017 were submitted on time. UNICEF Ethiopia prepared and
finalized its Partnerships, Resource Mobilization and Leveraging Strategy for the current country programme (2016-2020). Within a changing donor climate (tightening budgets, shifts in priorities and heightened scrutiny on the use of funds), the strategy aimed to realize diversified, predictable and long-term funding, leverage resources using a partnership approach and strengthen donor trust.

UNICEF Ethiopia had a fundraising target of US$248 million, including US$36 million in Regular Resources (RR), US$76 million in Other Resources (OR) and US$136 million in Other Resources-Emergency (ORE). By December 2017, UNICEF Ethiopia raised 66 per cent of the OR target (approximately US$50 million). Through the Humanitarian Action Appeal, UNICEF appealed for US$136 million and received 70 per cent of its funding target (approximately US$94 million, including 2016 carryover).

OUTPUT 4 Enhanced organizational capacity for efficient and effective planning and coordination

Analytical statement of progress
UNICEF Ethiopia field offices continued to provide strong advocacy platforms through relevant and quality programme implementation and monitoring and evaluation at the community level, especially in highly deprived communities in hard-to-reach areas. This provided a comparative advantage for UNICEF Ethiopia to strengthen its evidence-based advocacy work in the country. Effective and efficient field coordination systems/mechanisms were designed and implemented to ensure strong linkages and timely communication between the country office and field offices.

During the second half of 2017, zonal management team meetings were conducted in all field offices in the country, which served as an effective communication platform between the country office and the field offices to monitor progress and receive timely feedback on major programme and management indicators. The zonal management team reports and meeting minutes from all field offices were collected and analysed to initiate evidence-based corrective measures by sections, field offices and IPs and improve project performance.

To support the full implementation of HACT across field offices, HACT assurance committees were established and strengthened in all field offices. The committees brought together key programme and operation staff to regularly review reports from monitoring visits and spot-check exercises, identify key project implementation bottlenecks, and support IPs who have a shared accountability for the agreed results, including budget.

The emergency and field coordination section in Addis Ababa provided coordination support to all teams on planning, implementation and monitoring to ensure smooth programme implementation and regular and enhanced monitoring during the state of emergency period (October 2016 to August 2017) to monitor and address any disruption of services to women and children.

OUTPUT 5 New Element

Analytical statement of progress
UNICEF Ethiopia continued to be a credible and trusted voice for children. Both development and emergency issues affecting children were highlighted using different arenas, culminating on World Children’s Day, where UNICEF convened seven sector ministries to be shadowed by
child parliamentarians. Another major advocacy event was the Fourth Act on the Call Summit, where UNICEF played a critical role in supporting the MoH in communications and reached out to nearly 1 million people through social media.

UNICEF Ethiopia partnered with Fana Broadcasting Cooperation to foster public discussions on key priority areas, including birth registration, ending child marriage and FGM/C. UNICEF reached an agreement with the Government Communication Affairs Office to include trainings for journalists and communicators to improve their understanding of children’s and women’s issues.

Critical communication support was provided to UNICEF’s response to the Horn of Africa drought. Donors and media visiting drought-affected regions were regularly updated with key messages and briefing notes. Somali Region hosted one-third of the visits. In total, 30 emergency and routine donor visits were supported.

Partnership support was provided to implement the Corporate Social Responsibility and Child Rights Business Principles through expanded strategic engagement with the private sector. Partnerships were explored with umbrella organizations such as Ethiopian Chamber of Commerce and Sectoral Associations, and the Confederation of Ethiopia Trade Unions, with UNICEF supporting the development of children’s policies to be implemented by more than 500 business members of the two unions.

UNICEF Ethiopia was involved in 25 key events and undertook 18 media interviews. Thirteen audio-visual productions were created, and 43 blogs were published with 2,189 photo updates. Strong social/digital media presence led to 99,884 web views, 805,590 photo views on Flickr, and 37,623 views on WordPress. UNICEF Ethiopia continued to increase the number of social media followers, with 66,181 Facebook followers, more than 1 million Facebook likes, 42,000 Twitter followers and 3,938 Instagram followers.

UNICEF provided technical support to the development of the National Health Communication and Promotion Strategy and trained 998 health extensions workers on interpersonal communication in targeted woredas. MNCAH messages were delivered to communities through mass media and other platforms, through which 91 per cent of women heard about antenatal care.

During the AWD outbreak, more than 8,236 religious/community leaders, health workers, volunteers, and local officials were mobilized to educate communities in the prevention of AWD and scabies. More than 209,000 households in Somali Region, 176,000 in Oromia Region, and 950,772 people in Amhara Region were reached. A recent UNICEF Knowledge, Attitudes, and Practices assessment on AWD in Somali Region revealed that the majority of people received information from local officials, religious and community leaders. The capacity created during the emergency could potentially be used for development interventions and may contribute to building resilience.

Based on the lessons learned of providing a focused approach to the advocacy priorities, UNICEF Ethiopia will strategically build on the advocacy activities of ECD, Ending Child Marriage and FGM/C, as well as launch the cause framework ‘Every Child Alive’ campaign in 2018.
OUTPUT 6 Strengthened stewardship and oversight of human, supply and financial resources

Analytical statement of progress
UNICEF Ethiopia continued to place an emphasis on providing emergency response to vulnerable children, women and communities in Ethiopia in a timely manner. Supplies worth US$40.4 million were distributed to partners. Ageing stocks (more than two years) were monitored on a monthly basis, which resulted in reducing the aged supplies to zero for both programme and pre-positioned supplies. Supplies expiring in 18 months were closely monitored and reported to sections, which led to no expiring supplies in the warehouses. End-of-year inventory count of all warehouses was completed in a timely manner, with no stock difference.

With the establishment of the Global Shared Service Centre (GSSC), the financial transaction processing was centralized in Budapest. UNICEF Ethiopia successfully transferred transactions to GSSC since 18 July 2016, with increased efficiency in transaction processing and improvements of quality transactions.

UNICEF Ethiopia invited FRG to review and streamline its processes. Supply Division, the Division of Financial and Administrative Management (DFAM) and GSSC teams were part of the joint review, and they assessed different work streams related to their specific areas. Based on the lessons learned from the VISION Hub, UNICEF Ethiopia proposed to establish a fully flagged Business Centre in 2018 that will be responsible for encoding all VISION transactions. This will reduce major risks linked to field level transactions in VISION and streamline processes. It will also ensure spot checks, oversight on supporting documentation and standalone files in all offices, and free up time for programme staff in the field to carry out programme activities.

UNICEF Ethiopia continued to strive to maintain a higher level of integrity and transparency, including all-staff participation in decision-making processes, as well as improving the overall working environment. Emphasis was given to staff capacity building though national and international stretch assignments, staff exchanges and development missions.

Based on lessons learned and positive feedback received, in 2018 UNICEF Ethiopia will improve capacity for evidence-based learning and risk management, provide onsite joint reviews, guidance, tools and resources to effectively plan and monitor, and strengthen stewardship and oversight of human, supply and financial resources.

Document centre

Evaluation and research

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