Executive Summary

2014 has seen enormous focus on Millennium Development Goal (MDG) 3 (promote global equality and empower women) and MDG 5 (improve maternal health) in Ethiopia. Further to progress in highlighting equity in development programming, humanitarian assistance to chronic, recurring and emerging crisis has underlined focus on building resilience at the community and systems level. The mid-term review emphasized further focus on disparities, gender, and C4D mainstreaming.

UNICEF supported national scale up of the quality of Integrated Community Case Management of major childhood illnesses. UNICEF provided sectoral leadership through the launch of the OneWASH Programme, bringing together major partners such as the World Bank, African Development Bank (AfDB) and the Department for International Development (DFID). Nearly 50,000 additional children (48 per cent girls) in the Developing Regional States enrolled into school as a result of the back to school campaign, where UNICEF supported the Ministry of Education.

At the July Girls’ Summit in London, the Deputy Prime Minister committed to eliminating Harmful Traditional Practices (HTP) in Ethiopia by 2025. UNICEF contributed to the design of the National Social Protection Policy and Productive Safety Net Programme, through focus on nutrition outcomes, ensuring that Ethiopia’s pro-poor development agenda remains child-focused and equity driven.

Approximately 200,000 South Sudanese refugees arrived in Gambella region following inter-communal conflict that erupted in December 2013. UNICEF Ethiopia developed a multi-sectoral emergency response strategy for both refugees and vulnerable host communities and as a result more than 140,000 women and children received assistance, in close collaboration and coordination with UNHCR and other partners.

Implementation of the Harmonized Approach to Cash Transfers (HACT) was a major focus in 2014, within UNICEF and in the UNCT, continuing to increase risk management, both internally and with Implementing Partners. A peer review of all 7 field operations was conducted to improve subnational management systems. UNICEF Ethiopia moved to new, purpose-built premises on the UNECA compound in August, where most UN agencies are located. This significantly enhanced staff security and furthers the UN Delivering as One principles regarding shared premises and services.

Several shortfalls need to be addressed in 2015. These include the establishment of an independent central authority for inter-country adoption and the need for four regions to adopt a legal framework on vital events registration to ensure national commencement of registration services in 2015. Furthermore the education sector continues to suffer from the lack of a National Education Act and the legal framework for Disaster Risk Management has yet to be published. Despite some improvement in all three nutrition indices, Ethiopia remains in a precarious situation.
2015 will see accelerated progress to reach unmet needs: such as HTP, girl’s empowerment, civil registration, maternal and neonatal mortality, and building social protection systems. The national Growth and Transformation Plan will be updated. Addressing disparities remain an overarching theme across all efforts. Strategies will include a focus on the worst-off as the first priority, emphasizing building resilience and community based interventions in the face of limited national resources and weak decentralised systems.

**Humanitarian Assistance**

In 2014, UNICEF Ethiopia responded to three major humanitarian situations: influx of South Sudanese refugees to Gambella; chronic food insecurity and nutrition emergencies; and other international and national population displacements caused by flooding and conflicts.

Despite normal to above normal rainfall leading to improved food security and nutritional outcomes for the country, an estimated 3.2 million people required emergency food aid and an estimated 264,298 severely malnourished children required treatment.

In 2014, 643,010 refugees, mainly from South Sudan, Somalia, Eritrea and Sudan were residing in Ethiopia. A total of 191,375 South Sudanese refugees arrived in Gambella following conflict in South Sudan in December 2013. This is a burden for the fragile basic social services in Gambella. A nutrition survey carried out in May 2014 in Lare Woreda, Gambella, indicated that malnutrition rates among children are high – Global Acute Malnutrition 18 per cent and Severe Acute Malnutrition 4 per cent.

UNICEF has developed a multi-sectoral emergency response strategy for refugees and host communities in Gambella. The strategy includes support to UNHCR in the provision of basic social services in the refugee camps, support to host communities around refugee camps, and support to host communities in other areas, as a contribution to conflict prevention.

UNICEF Ethiopia has seconded WASH, Education, Child Protection, and Nutrition specialists and a Health/Expanded Programme of Immunisation officer to UNHCR to support emergency response in the refugee camps in Gambella Region. With UNICEF support, between January and November 2014, 117,542 children aged 6 months to 15 years were vaccinated against measles and 98,289 children under 15 years of age received oral polio vaccine while 51,913 children aged 6 months to 5 years received vitamin A supplementation at entry points and in refugee camps. UNICEF’s ‘Back to School’ campaign conducted in September for the academic year 2014-2015 registered over 36,279 school aged children in the refugee camps. Child friendly spaces established in refugee camps provide recreational activities for an estimated 25,000 refugee children.

With UNICEF support, 21 water schemes were constructed to provide access to water for an estimated 10,600 people - both refugees and host community members. UNICEF Ethiopia is supporting the establishment of a permanent water system in Kule and Tierkidi refugee camps that is expected to serve some 120,000 refugees and host communities. As a component of conflict sensitive programming, UNICEF and partners constructed seven water schemes in Lare and Abobo woredas for host communities; providing access to clean water for 2,550 people.

In 2014, an increased arrival of Eritrean refugees was registered in Tigray Region, Ethiopia. The majority of the new arrivals are young people. In November, 3,588 new arriving refugees were registered. In support of UNHCR, UNICEF seconded a Child Protection Specialist to Shire refugee camp to support the child protection programmes.
UNICEF Ethiopia continued to contribute to building the resilience of vulnerable communities affected by chronic food insecurity. Using the existing health extension programme, a package of services has been scaled up and established to include the management of severe acute malnutrition, micronutrient supplementation and promotion of vital events registration. By the end of September, the Federal Ministry of Health, UNICEF and non-governmental organisations had treated 194,697 severely malnourished children through the Community Management of Acute Severe Malnutrition programme. UNICEF supported mobile health and nutrition teams in providing life-saving care to 224,379 people in hard-to-reach communities in Afar and Somali regions. UNICEF and its partners improved access to clean water for an estimated 699,000 people. Around 116,000 children affected by emergencies were able to continue their education due to the learning and teaching supplies provided by UNICEF. Following WHO declaration of the global Ebola outbreak, UNICEF has been supporting the Government’s national Ebola Technical Working Group with the development of information, education and communication materials and with the procurement of personal protective equipment and supplies. As a preparedness measure, UNICEF has pre-positioned emergency supplies to enable the quick response to 125,000 people affected by various emergency situations.

To address the chronic food insecurity and malnutrition in Ethiopia, WFP, UNICEF and FAO triggered a joint programming initiative on resilience-building around food and nutrition security.

In December 2014, the Government of Ethiopia launched the Disaster Risk Management Policy and its Strategic Programme Investment Framework to address chronic vulnerabilities of populations.

UNICEF Ethiopia appealed for US$ 36,086,000 to meet the humanitarian needs of children in 2014, and later revised to US$ 42,311,000 to reflect the additional resources needed for the South Sudan refugee crisis. A total of US$ 32,000,000 (76 per cent of the revised requirement) has been received.

**Equity Case Study**

Ethiopia currently does not have a fully comprehensive, integrated social protection system, although several support mechanisms and interventions exist that serve social protection purposes albeit with gaps in their design, implementation, budget allocation, scope, coverage, and service quality. The new National Social Protection Policy (NSPP), approved during the 77th Council of Ministers on 14 November 2014, addresses these gaps and aims to reduce vulnerability and poverty by providing social assistance and insurance, promoting employment opportunities, and enhancing productive capacity.

Evaluations of the pilot Cash Transfer Programme in Tigray and the Productive Safety Net Programme (PSNP) informed the design of the Social Protection Policy and PSNP4. The Social Protection Policy and Productive Safety Net Programme supports the transition from a set of individual time-bound programmes to an efficient and effective integrated system for delivery of social protection, access to basic social services and disaster risk management. The PSNP4 and the NSPP will result in enhanced household and community resilience to shocks and improvements in household food security, nutrition, access to basic social services and economic wellbeing.

The main objective of PSNP4 is to ensure that poor and vulnerable households benefit from an essential suite of services, including: safety net transfers, livelihood interventions, key health
and nutrition services, and construction of community assets through public works. UNICEF Ethiopia contributed to the design of the NSPP and PSNP4 through technical and financial support to the Social Protection Platform, participation in policy discussion and development and capacity building of regions through supporting the research activities of the platform. The PSNP represents an important contribution to the Government of Ethiopia’s pro-poor development agenda, to which approximately 9 per cent of pro-poor spending and 1 per cent of Gross Domestic Product are allocated. The current PSNP benefits 11 per cent of all rural households in Ethiopia, including one in five of the poorest rural households, and reaches 7 to 8 million persons (including an estimated 3.3 million children).

Since 2011, UNICEF has been working with the Government of Ethiopia on the implementation of a Social Cash Transfers programme. In line with the new role of the Ministry of Labour and Social Affairs in providing direct support to beneficiaries under PSNP4, in 2014 UNICEF Ethiopia has designed a Social Cash Transfer programme to support and strengthen the implementation and scale up of multi-sectoral nutrition interventions in the fields of agriculture, health, education and the safety net system. The support to the Social Cash Transfer pilot programme focuses on joint implementation by the Ministries of Agriculture, Education, Health and Labour and Social Affairs in Southern Nations, Nationalities and Peoples’ and Oromia regions. The activities proposed are aligned with the systems approach to multi-sectoral coordination and implementation of nutrition sensitive interventions that will contribute to addressing inequities by strengthening community level food and nutrition security to reduce the prevalence of malnutrition.

The Social Cash Transfer programme in these two regions supports the transition from isolated safety net programmes to the development of a system for delivering social protection, nutrition and disaster risk management, using a harmonised and integrated approach. This will be achieved by making systematic use of the synergies between safety net functions and promotion and provision of access to basic social services for the most vulnerable households. As agreed at Federal level with the PSNP4, the regional project will develop and test essential tools to achieve a system approach for effective and sustainable social protection activities, including:

• Revised targeting mechanism;
• Single unified registry;
• Unified programme with one project logframe at the district level;
• Improved coordination to reduce operational complexity;
• Enhanced capacity of Ministry of Labour and Social Affairs to assume responsibility for permanent direct support clients;
• Targeting and soft conditionalities organised in a nutrition-sensitive way.

This programme will not repeat what has been tested in Tigray, but will be integrated into and provide lessons learned for the design and implementation of the Productive Safety Net. The programme aims to develop procedures to target labour endowed chronically food insecure households for the public works component coordinated by Ministry of Agriculture and for labour constrained chronically food insecure households for Direct Support transfers coordinated by Ministry of Labour and Social Affairs using one common targeting mechanism.

While the Tigray programme was unconditional, the project in Southern Nations, Nationalities and Peoples’ Region will test ‘soft’ conditionalities for pregnant women and young children aligned with human capital accumulation and nutrition outputs. It will be the task of social workers in cooperation with officers from sector ministries (Health and Education) and with committees (Health Development Army), Social Development Committees and Community Care...
Coalitions) at woreda (district) and kebele (sub-district) levels to determine which conditionalities are appropriate depending on the availability of easily accessible basic services.

The programme will enable testing of how the intentions of the National Nutrition Programme and the PSNP can best be operationalised and integrated. In line with the National Nutrition Programme that focuses on the first 1,000 days, the project will target adolescents in schools, pregnant and lactating mothers and children under one year of age over a three year period, 2015-2017. Given the lack of knowledge on cross-sectoral approaches to reduce undernutrition, the project plans to support capacity building and an important research and knowledge management component in partnership with international and national research institutions.

**Summary Notes and Acronyms**

**Acronyms**

ACRWC - African Convention on the Rights and Welfare of the Child
BEmONC – Basic Emergency Obstetric and Neo-natal Care
CC - Community Conversation
CEDAW – Convention on the Elimination of All Forms of Discrimination Against Women
CHD - Community Health Day
CMT - Country Management Team
CP/GBV – Child Protection/Gender Based Violence
CRC – Convention on the Rights of the Child
CiCSRP - Child-to-Child Approach for School Readiness Programme
C4D – Communication for Development
DRS - Developing Regional States
ESARO - Eastern and Southern Africa Regional Office’s
ESDP - Education Sector Development Plan
GCAO – Government Communication Affairs Office
GAAP - Gender Analysis and Action Plan
HDA – Health Development Army
HEP – Health Extension Programme
HEW - Health Extension Workers
HIV/AIDS - Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome
HRBA – Human Rights Based Approach
ICBPP - Integrated Community Based Participatory Planning
ICT – Information and Communication Technology
iDE – International Development Enterprise
IEC - Information, Education and Communication
IMEP - Integrated Monitoring and Evaluation Plan
MoCI – Ministry of Communication and Information
MoWCYA – Ministry of Women, Children and Youth Affairs
MP4R – Managing People for Result
MTR – Mid Term Review
NSPP - National Social Protection Policy
OPSCEN - UNICEF Emergency Operations Centre/Operations Security Centre
PBR - Programme Budget Review
PPP - Programme Policy and Procedure
PSNP - Productive Safety Net Programme
REC - Research and Evaluation Committee
REPOM - Research, Evaluation, Policy and Monitoring
UNICEF Ethiopia focuses on developing capacity in evidence-based programming and enhancing the quality of results. In 2014 this included mainstreaming of Communication for Development (C4D) as a cross-cutting strategy to support programme delivery. C4D capacity support reached 782 schools through hygiene and nutrition Behaviour Change Communication, plus 22 media professionals and 1,000 religious leaders around polio mobilisation. In line with the European Union-ANSP project, training on nutrition was organised for 70 journalists, focusing on promoting positive nutrition practices and emphasising multi-sectoral responsibility for nutrition. In four regions and at national level, capacity of the multi-sectoral coordination teams was strengthened and a monitoring mechanism established; both key contributions to National Nutrition Programme. A capacity building strategy on Child Protection in emergencies was developed and 300 practitioners increased their knowledge and skills to provide quality services to children in emergencies, in addition 8 regional governments have been trained on DRM.

UNICEF supported the Government to adopt a strategic framework addressing Harmful Traditional Practices, with a work plan and social norms change communication strategy. An Islamic religious leaders’ consensus-building workshop has resulted in a declaration to address Harmful Traditional Practices. The Ministry of Women, Children and Youth Affairs assisted the Ministry of Information and Communication to develop a gender mainstreaming guideline and trained 125 women and 45 men. Training on education indicators and their analysis reached 1,612 education experts; community participation and school management training reached 148 Parent Teacher Association and Kebele (sub-district) Education and Training Board members. The Education Management Information System was supported with the initiation of Global Positioning System-based data collection and development of Short Messaging Service software. Results-Based Management was strengthened by training 220 civil servants. Five regions integrated demographic and socio-economic data, including disaggregated data on children and women, into their development plans. 687 experts were trained on child focused data collection, Geographic Information Systems and DevInfo. Capacity-building support was provided on immunisation, cold chain and vaccine management, BEmONC, community case management of newborn and childhood illnesses, PMTCT/Paediatric AIDS, and capacities of the 3 million members of the Health Development Army were strengthened towards promoting optimal health practices.

Evidence Generation, Policy Dialogue and Advocacy

Several policy breakthroughs are directly attributable to UNICEF’s evidence generation and policy advocacy work, including: the national Social Protection Policy; newborn and maternal health policy; and civil registration. Strategic focus is on creating linkages across the following areas 1) knowledge management, monitoring, evaluation and operations research; 2) policy
advocacy; and 3) programme service delivery. Partnerships are established with international
and national universities to support the generation of evidence and build the institutional
capacity of the Central Statistical Agency (CSA) to deliver quality research products, including
in-depth analyses on child labour and child wellbeing and socio-economic disparities. Support is
also planned to CSA in 2015 to include specific modules in the Demographic and Health Survey
(DHS), so additional analyses and evidence can be produced in the coming years. The Child
Research Practice Forum within the Ministry of Women, Children and Youth Affairs (MoWCYA)
and the establishment of a research hub within the National Planning Commission are
supported to improve utilisation of research and to influence evidence-based policy decision-
making. In 2014, with the Ethiopian Public Health Institute and Ministry of Finance and
Economic Development the dissemination of further analyses of the DHS data, the Amharic
language version of the Situation Analysis and finalisation of the health sector Service Provision
Assessment were supported.

Lack of progress against MDGs 3 and 5 remains a major concern and is a priority area for policy
dialogue including reducing preventable maternal and child mortality via continued public
engagement on Committing to Child Survival: A Promise Renewed; the National Nutrition
Programme and launch of the national version of the Lancet medical journal's latest thematic
series, Every Newborn.

UNICEF with MoWCYA supported the participation of the Minister and the Deputy Prime
Minister at the Girl Summit in London where they committed to end Harmful Traditional
Practices (HTPs) by 2025. Events (such as the Convention on the Rights of the Child 25th
anniversary and International Day of the Girl Child celebrations, and national launch of the
African Union's Ending Child Marriage campaign) were used to engage Government and
partners towards advancing the agenda of empowering girls and ending HTPs.

**Partnerships**

Strong partnerships with international and local governments, civil society organisations,
academia and the private sector continued towards achieving the targets of Committing to Child
Survival: A Promised Renewed; the Every Newborn Action Plan and the National Nutrition
Programme. The Minister of Health attended the 2014 A Promise Renewed meeting, presenting
recent updates on the national scorecard, demonstrating Government commitment and
engagement. Similarly, 2014 saw the establishment of the consolidated WASH account, which
the World Bank, African Development Bank, DFID and UNICEF contributed to as part of the
One WASH National Programme. This provides the platform for large scale national level
strategies to be implemented by the partners mentioned and Ministries of Finance and
Economic Development; Water; Health and Education. A mission to all regions to kick-off
activities was conducted in fourth quarter 2014.

UNICEF Ethiopia was instrumental in initiating the partnership between the health and vital
events registration sectors towards integration of birth and death registration and health
services and supported a joint consultation that resulted in the signing of a Memorandum of
Understanding for service integration at Federal and Regional levels.

In 2014, UNICEF Ethiopia translated its partnership with the UN High Commissioner for
Refugees into a detailed agreement on areas of collaboration in support of the South Sudan
refugee operation. The agreement is regarded as a model for other refugee operations.

Discussions with private sector partners are ongoing to explore areas for collaboration and
identify mutually beneficial outcomes that positively impact women and children. UNICEF Ethiopia is looking for shared value opportunities and developing innovative and meaningful partnerships through which there can be an exchange of skills, knowledge and networks. These discussions have included Communication for Development technical support and stimulating partnerships between the Government of Ethiopia and large multinational corporations.

2014 saw a significant increase in partnering with international Foundations. These partnerships mainly focus on maternal and child health programmes. In addition to financial resources, the Foundations provided technical assistance to UNICEF's programme development and facilitated exploring opportunities to enhance service delivery, including a new cold chain device to be piloted in 2015.

**External Communication and Public Advocacy**

A major focus of UNICEF Ethiopia's external communications work in 2014 was supporting advocacy around Millennium Development Goals 3 and 5, including the issue of preventable maternal, new-born and child deaths. UNICEF Ethiopia supported the national launch of The Lancet medical journal's thematic series Every New-born. UNICEF Ethiopia's national Ambassador played a key role in raising the visibility of this issue through the Toronto, Canada Summit on Maternal, New-born and Child Health in May 2014. The Minister of Health participated in the Annual Committing to Child Survival: A Promise Renewed meeting in Washington DC. In April 2014, the European Union announced a US$ 44.75 million grant to the Federal Ministry of Health and UNICEF through the Enhancing Skilled Delivery in Ethiopia 2014-2016 project.

Continued commitment for nutrition was exemplified in the International Micronutrient Forum in June, and the active role of the First Lady as the Ambassador for Nutrition, through a field visit and advocacy event in Amhara in November.

Other key national public advocacy events supported in 2014 included: launch of the rota virus vaccine; World Humanitarian Day. The International Day of the Girl Child; the national launch of the African Union's Ending Child Marriage Campaign; and national celebrations of the 25th anniversary of the Convention on the Rights of the Child, were supported by a national ambassador.

UNICEF Ethiopia is embracing new social media and maintains a website, a Facebook page and a Twitter account alongside other social media tools. 2014 saw a 2,488 per cent rise in traffic to the website to more than 260,000 views; a 754 per cent increase in the number of Facebook fans (to 8,049); and a 142 per cent increase in Twitter followers (to 6,300).

Numerous communication activities supported by UNICEF Ethiopia in 2014, including 25 key events, 54 briefing notes, 81 blog posts, including three high level Op-eds and 40 visits, helped raise public awareness on issues affecting women and children in Ethiopia and led to important commitments by Government, including a commitment to end Harmful Traditional Practices in Ethiopia by 2025, announced by the Deputy Prime Minister at the Girls' Summit in London, UK.

**South-South Cooperation and Triangular Cooperation**

UNICEF Ethiopia has strong commitment to South-South cooperation and in 2014 implemented key activities:

A delegation from the Government Communication Affairs Office visited Ghana to observe the
media landscape and explore the potential for collaboration. The delegation gained first-hand information on operation of the Ghanaian media system, including integration of different institutions, and discussed a draft collaboration agreement towards disseminating communication products and providing mutual capacity-building support.

Aiming to develop cooperation between Ethiopia and Brazil with potential benefits for the Ethiopian WASH sector, UNICEF Ethiopia organised a visit to Brazil for a delegation of 15 senior officials and experts. A roadmap for cooperation was developed that focuses on: Urban Sanitation; Delegated Management Framework and regulatory aspects in urban WASH service delivery; and river basin management. Local authorities have endorsed the proposed programme as a key vehicle for the promotion of sector reforms and establishment of new policies. A delegation of 10 technical experts from Brazil will visit Ethiopia from 18 to 25 January 2015 to support programme start-up.

UNICEF Ethiopia and the World Bank jointly supported Ethiopian civil servants from the Ministries of Agriculture and Labour and Social Affairs to attend the Community of Practice of Cash and Conditional Cash Transfer meeting in Zambia. The meetings objective was to enhance understanding on how to transition from a cash transfer programme to a comprehensive social protection system, and focused on three approaches: linking human and economic development, systems-based approaches; and operational approaches. The Ethiopian delegation won acclaim for innovation, for its Disbursement of Social payments using the M-BIRR Mobile Money Service, which was piloted in Tigray and supported by UNICEF. Participation of the two Ministries facilitated discussions on the design of the new Productive Safety Nets Programme and accountabilities for building the social protection system.

UNICEF Ethiopia, in collaboration with UN Economic Commission for Africa, organised a study tour to South Africa and Botswana for five officials of the Federal Vital Events Registration Agency and the Ministry of Health, to facilitate learning from the best practices in using the management and implementation of vital events registration system and services.

**Identification Promotion of Innovation**

UNICEF Ethiopia, the Bill and Melinda Gates Foundation, and Global Good completed the first phase of an evaluation of the potential to introduce Passive Vaccine Storage Devices to improve cold chain stability in remote locations. This new technology can maintain potency of vaccines for over 30 days, using only 8 kg of ice. Although still in the pilot phase, the frequency of vaccination sessions per health post increased from monthly to daily in selected sites. UNICEF Ethiopia will scale up the intervention in 2015.

UNICEF Ethiopia pioneered the use of solar technology in the mid-1990s when it installed three solar water pumps in Tigray region. Solar pumping was initially introduced in schools and has been combined with multiple use services / vegetable gardening in line with the Africa Adaptation Project. UNICEF organised a solar symposium in 2014 in the Somali Region, following an exchange visit to India in 2013, with the aim of bringing supply and demand together, and creating a meeting space for solar pump businesses and WASH partners. As a result, more WASH partners are adopting the technology, which serves as a viable energy source, while contributing to carbon reduction and cost savings in operating WASH facilities.

In 2011, a national WASH inventory was conducted throughout the country, except for the Somali region. Survey data collection was paper based, and the huge volume of data collected, its quality, and the time needed to conduct basic analysis (two years) were major constraints. In
2014, the use of mobile phone technology and an online database system (FLOW software) was adopted in the Somali region. AVKO, a private company with substantial experience in similar data collection provided technical support, including for the establishment of a 'dashboard' for data analysis and visualisation. AVKO also cleaned, analysed and uploaded 500,000 data entries from the existing paper questionnaires from 2011 into the system. The new approach will be adopted for future inventories. This exercise has resulted in a complete national WASH inventory, which presents a complete picture of the WASH coverage levels and is a useful tool for planning resource allocations and targeting.

**Support to Integration and cross-sectoral linkages**

UNICEF Ethiopia facilitated integration and development of linkages across Health, Nutrition and Hygiene and Sanitation at both health facility and community levels. Using the platform of the Health Extension Programme and the Health Development Army, an integrated package of services has been scaled up from 88 per cent coverage of health posts nationally in 2013 to 94 per cent in 2014. Identification and treatment of uncomplicated Severe Acute Malnutrition and hygiene promotion have been incorporated into integrated community case management and micronutrient supplementation is provided at community level and in 94 per cent of the 16,000 health posts countrywide.

The Health and Child Protection programmes jointly established mechanisms in Tigray and Amhara regions to promote vital events registration using existing health system platforms, namely the Health Extension Programme, Health Development Army and the Family Folders. The integration of registration and certification services into the health sector enabled rapid scale up of enhanced delivery of birth and death registration, with minimal resource implications.

The Research, Evaluation, Policy and Monitoring, Child Protection and Nutrition programmes jointly contributed to the design of the next phase of the Productive Safety Nets Programme (PSNP). A systems approach has been adopted by the Social Protection and Nutrition sectors, New Cash Transfer Programmes were launched in Oromia and Southern Nations Nationalities and Peoples' regions for the most vulnerable PSNP clients and a capacity building strategy was developed for the social welfare workforce.

In 2014, the WASH, Education and Child Protection sections supported the integration of Menstrual Hygiene Management activities to reduce the risk of girls dropping out of school and getting married. The outcomes of the pilot interventions will influence future policies and scale-up.

UNICEF Ethiopia initiated a cross sectoral partnership with the Ministry of Finance and Economic Development to support the Central Statistical Agency and the newly established National Planning Commission to monitor progress against the Millennium Development Goals and economic development more broadly. A child labour report, a child well-being report, a Socio-economic Atlas and an alternative sampling methodology to improve survey coverage in pastoralist areas are planned.

**Service Delivery**

Supporting Government to create demand for, and deliver essential services is a core strategy for the Country Programme. UNICEF plays a direct role in service delivery in situations where national institutional capacity for delivery is weak, especially in underperforming regions and zones and during humanitarian crises. Procurement services are also provided by UNICEF, mainly in the areas of vaccine and ready-to-use therapeutic food.
Since the 2013 Mid-Term Review, C4D has been mainstreamed across all Country Programme sectors to support behaviour change and demand creation activities in key areas. For example, inclusion of C4D in Integrated Refresher Training for Health Extension Workers and in Health Development Army is being used as a key capacity building and demand creation intervention.

In response to the refugee crisis in the Gambella region, UNICEF developed a multi-sectoral emergency response strategy for both refugees and vulnerable host communities in support of UN High Commissioner for Refugees for the provision of basic social services in the refugee camps, support to host communities at border crossings and in the vicinity of refugee camps, as well as in areas that are not directly affected by the refugee crisis as a contribution to conflict prevention.

Monitoring and review of quality, timeliness, and effective reach of services is conducted through Government joint review missions and annual reviews, donor visits, independent evaluations, and regular field monitoring by UNICEF staff. Implementing partners are subject to Programme Cooperation Agreements that clearly define roles, responsibilities and implementation timelines and incorporate detailed mechanisms to assess progress.

Monitoring of progress and quality of service delivery is facilitated by UNICEF’s participation in several high-level bodies and forums. UNICEF Ethiopia participates in the Education Development Assistance Group; leads the UN Development Assistance Framework-Basic Social Services Education Sub-group; and co-chairs the Education Cluster, Early Childhood Care and Education Task Force and the Education Management Information System Working Group. UNICEF Ethiopia co-chairs the Health, Population and Nutrition donors group, and manages the Health Pool Fund for the Ministry of Health. In addition, UNICEF used independent verification systems and surveys to gather information on quality and reach of service delivery.

**Human Rights-Based Approach to Cooperation**


The Ministry of Women, Children and Youth Affairs, with the inter-sectoral CRC Committees at federal and regional level disseminated the recommendations of the CRC Committee on Ethiopia's third state report and the major elements of the fourth and fifth state reports, which are scheduled for review in 2015.

Specific actions taken by Ethiopia to facilitate implementation of the recommendations include:

- Five regions have adopted regional laws and established agencies for coordination of vital registration services. The third quarter of 2015 is the target date for starting conventional registration of all vital events.
- The Alliance to End Child Marriage and the Network against Female Genital Mutilation stepped up their efforts as Ethiopia committed to end both practices by 2025 (Girls’ Summit, London, July 2014).
• The National Plan of Action on Children has been revised to strengthen multi-sectoral ownership and action.
• The Social Protection Policy was adopted, it includes provision of special cares for children with disabilities.
• Progress against the Beijing Declaration and Platform for Action have been reviewed and compiled in a report submitted to the UN Commission on the Status of Women.

Aligned with recommendations of the 2012 global evaluation, a child rights mainstreaming guideline highlighting the role of each sector in advancing the wellbeing and rights of children was developed and will be disseminated. The participation of youth and children was supported through youth centres and volunteer groups, school clubs and child parliaments. Furthermore, Integrated Community-based Participatory Planning manuals were distributed and efforts to strengthen the integration of child participation commenced. Training on application of the Human Rights-Based Approach was provided to 63 UNICEF Ethiopia staff.

Gender Mainstreaming and Equality

Gender mainstreaming is supported by a National Officer gender specialist in the Research, Evaluation, Policy and Monitoring Section, one Technical Assistance post serving WASH and Nutrition sections, and gender focal persons in Child Protection and Education sections.

WASH and Nutrition sections commenced implementation of the 2014-17 Gender Analysis and Action Plan. A working group chaired by the Ministries of Health and Education was established to develop a national guideline on Menstrual Hygiene Management and organise the first ever national conference. Twenty five male and 1 female Federal and regional WASH coordinators were trained in gender mainstreaming, and this has led to the specific and expressed needs of women, men, boys and girls being addressed in all interventions.

Accomplishments in education include: adoption of a Code of Conduct on Gender Based Violence for primary and secondary schools; adoption of a gender mainstreaming guideline; training on gender sensitive pedagogy, data management for 3,642 (52 per cent female) teachers, principals and experts; and educational support to 805 economically disadvantaged girls in secondary school in Oromia region.

Following the adoption of the national strategy to end Harmful Traditional Practices and the formation in 2013 of a National Alliance to End Child Marriage in Ethiopia, high level advocacy activities resulted in a public commitment, during the July 2014 London Girl’s Summit, to end child marriage and Female Genital Mutilation/Cutting by 2025 through improving data generation and use, improving coordination and accountability and increasing national resource allocations by 10 per cent. Advocacy events included the commemoration of the international day of the girl child and the Ethiopian launch of the African Union campaign to end child marriage. Under the auspices of the platform, a national results framework on ending child marriage was adopted. The National Alliance embarked on a child practice and programme mapping exercise to identify the best practices and operationalise the Government's commitments. To further strengthen Government commitment to implementing the Convention on the Elimination of all forms of Discrimination Against Women, capacity building activities on gender mainstreaming for 166 sector heads and experts were provided and two forums were held to review progress in gender equality.
Environmental Sustainability

Under the Urban WASH programme, environmental and social concerns have been incorporated into programme design, focusing primarily on environmentally sound criteria for water facilities, wastewater disposal, appropriate on-site latrine location and solid waste management. Environmental Impact and Social Assessments have been conducted in eight small towns and are being used to identify and evaluate in advance any effect (positive or negative), resulting from the implementation of the urban WASH sub-programmes. These eight small towns are being sensitised on the environmental aspects of their sub-programmes, and will be subsequently trained in the sustainable use of water, and natural resources in general.

Water utilities in the eight towns are being assisted to develop the ability to undertake environmental assessments of future water supply and sanitation developments.

The programme also promotes environmentally friendly approaches, including:
• The use of renewable energy for water pumping;
• Minimising, recycling and re-using solid waste;
• Promotion of biogas production for cooking instead of firewood in selected areas;
• The use of ecological sanitation (reuse of human waste) especially in areas with high water table where groundwater could be contaminated by conventional pit latrines.

Latrine facilities in refugee camps are sited at least 100m away from any water point to minimise the potential impacts of waste water seepage into groundwater.

UNICEF promoted the shift from kerosene powered to solar powered refrigerators. In 2014 UNICEF procured and distributed 40 devices. This resulted in the Federal Ministry of Health ordering over 2,000 additional solar refrigerators for routine immunisation. This will contribute to reductions in carbon emissions.

To build on the culture of protecting the environment, the Education section supported 837 school environmental education clubs in target sites of Amhara, Benishangul Gumuz, Tigray and Southern Nations, Nationalities and Peoples' regions. These clubs are instrumental in raising awareness on environmental challenges and mitigating them in a sustainable manner. The clubs’ major activities include school gardening and beautification, community outreach on environmental conservation, climate change, and mobilising school communities in tree planting and reforestation.

Effective Leadership

A major initiative taken by the CMT in 2014 included the standing agenda items of programme implementation indicators, and operations indicators to monitor ongoing work, in addition to finalizing the Mid-Term Review of the Country Programme. The MTR provided a platform for the CMT to take stock of successes and bottlenecks found half way through the country programme and identify future focus areas. Of the 101 results planned for the four year programme (term), 1 result was already achieved, 81 were on track and 19 faced challenges. The CMT analysed the 19 that faced challenges and redesigned the programmes to strategically eliminate these bottlenecks for the latter part of the Country Programme. Subsequently, the CMT played a major role in discussing and approving the PBR, to ensure that UNICEF is fit for purpose with regards to staffing for the remainder for the Country Programme. Operationally, the CMT also updated the Risk Control Self-Assessment, oversaw the office move into the ECA compound and the streamlining of fleet management.
The Risk Management and Audit Committee, led by the Representative, monitored the progress towards closing all audit recommendations within 6 months of the November 2013 external audit. The CMT was kept abreast of actions being taken, and used to enforce changes/actions as a result of the audit. Of particular note was the full implementation of HACT, all of which elements – including monitoring L2 and L3 MORES (real time monitoring) - were monitored on a monthly basis by the CMT, also after closing the audit recommendations. Significant progress was made in UNICEF's capacity and procedures to conduct financial Spot Checks under HACT. As a result it increased the number of Spot Checks conducted, and established clear lines or reporting any irregularities identified in these checks to manage and mitigate risks. A comprehensive Peer Review by a senior consultant was also conducted in 2014 for all UNICEF's field offices to identify areas of potential risk and mitigate these in a clear action plan.

As a result of CMT discussions regarding the increasing needs of refugees displaced in western Ethiopia by the internal conflict in South Sudan, a committee to regular meet to coordinate the South Sudan emergency response led by the Representative was established. These were subsequently held on a fortnightly basis to ensure all risks to programming for the L3 emergency were addressed, including funding initiatives, intersectoral collaboration, conflict sensitive programming and surge capacity and human resources.

Other related initiatives which managed risk include the Resource Mobilization Task Force which meets quarterly under the leadership of the Representative to track funding trends, coordinate the approach to donors, prioritise funding gaps and capitalize on all donor opportunities.

The Business Continuity Plan was updated in November as part of the UN Country team, and two simulations were attended to ensure that ECO remains ready for any threats to programming.

**Financial Resources Management**

The Budget Committee implemented its new process to plan and monitor expenditures on a quarterly basis, finding that the office was on target as regards programme support and cross sectoral expenditures throughout 2014. As a result, the processes are being replicated for the 2015.

UNICEF Ethiopia managed a total of 119 individual grants/funding sources during 2014. In addition to its regular contribution management activities, the Country Office instituted a new Grant Opening Meeting process which acts as an internal kick-off to the grant.

Centralisation of cash transfer processing in the Vision system has continued to yield efficiency in terms of timeliness and quality of cash transfer transactions such as Direct Cash Transfer, Direct Payment, Direct Cash Transfer liquidation, refund and re-programming. This arrangement has also enabled the programme staff to focus on programmatic work such as field monitoring and spot checks rather than transaction processing in SAP. All other financial transactions processed for the field offices were also centralised in Addis Ababa Finance Unit thus reducing the cost and number of staff involved in the process. As a result three bank accounts in the field offices have been closed.

The capacity building training of field office staff in Operations Functions greatly contributed to improvement of the quality of financial documentation and adherence to IPSAS and financial procedures.
All recommendations issued by 2013 audit were closed by June 2014. Within this were major efforts to comply with HACT. General HACT training for programme sections in Addis Ababa and field offices were conducted, as was spot check training. As per HACT Risk Assurance Activities, 222 Programme Monitoring visits, 86 Financial Spot Checks and 33 Audits were conducted in 2014. 148 Implementing partners were Micro Assessed. HACT indicators were monitored regularly at the CMT and by the HACT Working Group.

**Fund-raising and Donor Relations**

With a large and diverse donor/partner base, UNICEF Ethiopia has substantial donor reporting requirements. All 103 Donor Reports due in 2014 were submitted on time, and where received, feedback was positive. In addition to monitoring the reporting requirements in VISION, the Donor Relations Unit manually tracked and cross-checked reporting dates, requirements and adjustments made during the life of a grant. Donor reports were monitored on a weekly basis by Section Chiefs and on a monthly basis by the Country Management Team. Each grant’s donor reporting schedule, with key internal milestones, was established during the Grant Opening Meetings (GOMs). Two months prior to the deadline for submission to the donor, the Donor Relations Unit reminds relevant Sections of the upcoming report, and ensures all relevant donor information (reporting templates, quality checklists, etc.) is available to the Section preparing the report. The reporting Section provides a draft report to the Donor Relations Unit one month before the deadline for submission to the donor. Draft reports are subject to quality control prior to a final review and approval by the Deputy Representative or Representative, and are then submitted to the donor.

UNICEF Ethiopia utilised 94 per cent of available Other Resources in 2014. The remaining balance were on continuing grants that will be utilized in 2015. All of UNICEF Ethiopia’s Government partners agree and sign Annual Work plans that describe activities to be conducted in each quarter of the coming year. In 2014, UNICEF Ethiopia signed 148 Annual Work plans. Programme Cooperation Agreements containing similar information are signed with non-governmental partners. In 2014 the Country Office had 52 active Programme Cooperation Agreements. All outputs (both financial and programmatic) from implementing partners are monitored on a quarterly basis. In cases where progress is not proceeding as planned, adjustments are made in consultation with the partner.

**Evaluation**

The Standard Operating Procedures of the Research and Evaluation Committee (REC) were revised to improve the quality of evaluation and research and tailor it to the needs of each sector, and support the development of high quality Terms of Reference. This encourages collaboration and discussion of the research activities with sections and engagement of the Research and Evaluation experts in programme design. The REC meets regularly (five general and four sector meetings in 2014) and reports quarterly to the Country Management Team (CMT) on the quarterly update analysis of the Integrated Monitoring and Evaluation Plan (IMEP). An electronic version (E-IMEP) was introduced for pilot testing with support from UNICEF’s Eastern and Southern Africa Regional Office (ESARO).

Seven evaluations and assessments were planned for 2014-2015. Child to Child evaluation and its management response for the school readiness programme in three regions were completed. A baseline, end-line, and five monitoring surveys and reports for the evaluation of the Social Cash Transfer pilot in Tigray, ongoing since 2011, were completed and used for the design of the extension of Social Cash Transfer Programme. Well-being, livelihood, education
and health indicators for participating and non-participating households, including operational factors, were analysed. ESARO completed a mid-term evaluation of the European Union-funded Africa’s Nutrition Security Partnership which will provide input for the revision of the National Nutrition Programme. Four evaluations and assessments on the education learning pilot, mobile health and nutrition, integrated community-based participatory planning, and community based local production of complementary food are underway.

Every semester, progress was achieved on updating the implementation of management responses. UNICEF’s Mid-Term Review (MTR) and the MTR of the UN Development Assistance Framework were completed in 2014. Evaluations conducted since 2011 informed the UNICEF MTR and led to changes in programme structure and focus in several areas, e.g. social protection and nutrition.

**Efficiency Gains and Cost Savings**

In 2014, following the Business Operations Strategy adopted by the UN Country Team (UNCT), the UNICEF Ethiopia Management Team continued to work on the seven areas prioritised for establishing joint Long-Term Arrangements (uniforms; printing; Harmonised Approach to Cash Transfer-micro-assessments; ICT equipment; cleaning services; conference services and vehicle maintenance). It is estimated that a significant amount will be saved through inter-agency procurement in these seven categories during 2013-2015. Long-Term Arrangements for procurement of uniforms and micro-assessment were in place from January 2014 and as a result, the UNCT is estimated to have saved US$211,000 and UNICEF Ethiopia US$137,000 (US$120,000 from Harmonised Approach to Cash Transfers and US$17,000 from uniforms). Supported by UNICEF, the UN Inter-Agency Procurement Working Group established several Long-Term Arrangements for printing and graphic design that can be used by all UN agencies; and members of the working group received training on printing and design. The UN ICT Working Group is consolidating the IT networks of interested UN agencies, to improve connectivity while ensuring cost-effectiveness. The project is expected to provide a return on investment in about eighteen months.

UNICEF Ethiopia’s move to new Minimum Operating Security Standards-compliant premises on the Economic Commission for Africa compound in August 2014 contributed to efficiency gains and cost reduction in terms of shared costs for security, rent, ICT, cleaning and maintenance services. Close proximity of the office to the Economic Commission for Africa’s conference, banking, medical and travel facilities enabled UNICEF staff to receive the relevant services on time.

**Supply Management**

In 2014, UNICEF Ethiopia’s total procurement value was estimated at US$ 137 million. This figure includes programme supplies valued at US$48 million of which local procurement component is valued at US$16.90 million, procurement services totalling US$ 70 million carried out on behalf of the Government of Ethiopia of which US$56.84 million represents goods procured for the GAVI Alliance. Excluding procurement services US$67 million represents 34 per cent of the Country Programme budget of US$192 million.

Regular consultations with Government partners, including formulating the supply plan, and frequent joint status reviews across all sectors continued during 2014, providing a strong platform and enhancing integration between programme and supply.
2.2 million doses of measles and polio vaccines were procured for routine immunisation. 11 million doses of Oral Polio Vaccine for supplementary immunisation and 700,000 polio vaccines for vaccination of South Sudan refugees in Gambella were also provided.

A complex logistics operation was carried out to support UNICEF South Sudan operations in Akobo and Pagak to meet the acute needs of displaced children and women by supplying essential health, nutrition, WASH and education supplies. Personal Protective Equipment was procured towards strengthening Ebola prevention and preparedness activities of the Federal Ministry of Health and UN Health Clinic.

For the Community Management of the Acute Malnutrition Programme, 190,482 cartons of Ready-to-use Therapeutic Food was procured, 49 per cent of which was procured locally.

The warehouse storage capacity of Pharmaceutical Fund and Supply Agency (PFSA) is estimated to be 580,000 cubic meters by 2015, which comprises a 12 fold increase over 7 years. In view of this dialogue around transitioning nutrition supplies storage and distribution to the PFSA is ongoing. In principle an agreement was reached for transition.

The Commodity Assessment of Essential Commodities was initiated during the last quarter of 2014.

**Security for Staff and Premises**

Minimum Operating Security Standards (MOSS) assessment was conducted twice in 2014 and the following issues were addressed: the Country Office moved to a MOSS-compliant building on the UN Economic Commission for Africa compound; Emergency Trauma Bag and First Aid training, Fire Safety training, Building Evacuation drill and security briefings were conducted at all field offices and the Country Office. New Emergency Trauma Bags and First Aid Kits were provided to the Country Office and Field Offices. A MOSS-compliant facility was constructed for Awasa Field Office; two observation towers were constructed for Mekelle field office; and a new building provided by Government for the Bahir Dar field office was assessed and approved by UN Division of Safety and Security.

A security assessment was conducted for International staff residences, the staff list was updated quarterly and sent to UN Division of Safety and Security and OPSCEN (UNICEF Emergency Operations Centre/Operations Security Centre) and security advisories were sent to all staff on a weekly basis.

Various measures will be put in place to upgrade security at field offices and the ICC warehouse in 2015.

Following approval of the Programme Budget Review (PBR) submission, 78 new positions were created and 68 positions abolished (48 with incumbents, 20 vacant). As of end of November 2014, 32 positions comprising two International Professionals, 19 National Officers and 11 General Service, had been filled. To ensure smooth implementation of the Programme Budget Review recommendations with minimum disruption, the Country Office prepared a phased, prioritised recruitment plan that fully considered the abolished posts with incumbents. The Country Office implemented a support plan for staff on abolished posts, which included organising careers workshops, counselling, and providing support to those applying for vacant posts.

There is gender parity among International Professional staff (51 per cent male, 49 per cent...
female. The Country Office continued to face challenges in recruiting National Officers, particularly for sub-offices, due to high demand for female professionals from what is a small pool of qualified candidates. To attract Ethiopians living in the diaspora, especially female professionals, all vacant National Officer Positions were shared with the Eastern and Southern Africa Regional Office for wider circulation. This was in addition to placing advertisements in local media and internally within the UN System. Four National Officer vacancies (two Chief of Field Office positions and two Child Protection Specialists) were shared with Human Resources at headquarters for advertisement through the e-Recruitment system. Although the exercise did not attract strong external female candidates for the positions, good candidates were identified for lower level positions and this led to a modest increase in gender parity among National Officers (now 35 per cent female, 65 per cent male).

More rigorous monitoring of performance assessments led to an improved completion rate. By the end of February 2014, 96 per cent of staff had submitted their 2013 assessments and 59 per cent of 2014 work plans had been submitted (85 per cent by end March). By September, 92 per cent of mid-year reports had been submitted. The Country Office is analysing rating trends to ensure more consistent performance ratings.

The 2014 training plan was informed by Global and Regional office priorities as well as staff/supervisor discussions which identified skill gaps and areas for development. Five cross-cutting and 15 section-specific group trainings and 53 individual trainings were approved. By the end of November 2014, 11 (73 per cent) of the group trainings had been implemented benefiting 287 staff, plus 29 (55 per cent) of the individual trainings. Priority group trainings conducted in 2014 included Programme Procedures and Policy, Managing People for Results, Harmonised Approach to Cash Transfers and Communication for Development. Implementation of the approved training plan was regularly tracked through assigned focal persons who reported to the Country Management Team on a monthly basis, under a standing agenda item.

As part of the Peer Review Recommendations, Human Resources delivered training to field office staff in several areas, such as Ethics, Managing Performance, Entitlements, among others.

**Effective Use of Information and Communication Technology**

The move to new premises was a major exercise for the Information and Communications Technology (ICT) Section in 2014, although careful planning contributed to a smooth transition for staff, with virtually no interruption to services. A major network optimisation exercise is being conducted to identify solutions to connectivity issues, focusing on optimising data traffic and upgrading bandwidth. Improved connectivity will ultimately require VSAT installation in Addis Ababa and selected field offices and to this end, UNICEF successfully obtained a permit to import and install four VSAT stations for four field offices. A permit for the Addis Ababa office could not be obtained, but negotiations are ongoing.

A new UNICEF Ethiopia Team site web platform for online collaboration and knowledge management was implemented. Despite the connectivity limitations, the team site allows sections and field offices to interact and collaborate and the site includes dynamic linkages to UNICEF Ethiopia global web pages, social media outlets and blog content. The strategic approach to social/digital media is yielding results: frequent updates through blogs, photos, videos and other content resulted in a 2,167 per cent increase in web views, a 651 per cent increase in Facebook fans, and a 127 per cent increase in Twitter, Flikr, Delicious, and LinkedIn followers. ICT staff were engaged in several innovation projects with partners, including
establishment of an Integrated Management Information System platform for the education sector and development of online and offline data collection tools. Short Messaging Service based projects could not be scaled up due to limitations of network coverage and reliability. However, discussions are ongoing with the cellular service provider. The UN conducted an exercise to harmonise different disaster preparedness and continuity plans among UN agencies. A UN wide Business Continuity Plan simulation exercise was conducted, alongside an internal UNICEF review exercise, which led to an updated Business Continuity Plan.

Programme Components from RAM

Due to alignment with the national government’s plan, reporting against the UNICEF country programme is through to June 2014 (and not the end of the year) for most outcomes.

ANALYSIS BY OUTCOME AND OUTPUT RESULTS

OUTCOME 1 Ministry of Health (MOH) capacity to respond to polio virus strengthened in regions and zones with a large numbers of unimmunized children, including pastoralist areas

Analytical Statement of Progress:
In 2014, UNICEF Ethiopia made critical technical and financial investments in policy dialogue, setting standards and defining strategies, leveraging resources, procuring and distributing health supplies, knowledge sharing, and coordinating efforts with the Ministry of Health and health sector partners.

The Government of Ethiopia continued its leadership on child survival having reached Millennium Development Goal 4 (reducing child mortality) three years ahead of target. In June 2014 the governments of Ethiopia, India and the United States together with UNICEF, mobilised the world towards achieving the ambitious goal of ending preventable child deaths. Towards that end, the national child survival strategy (2015-2020) was revised to include an emphasis on neonatal mortality. The 20-year health sector visioning road map towards Universal Health Care and the Health Sector Transformation Plan (2015-2020) were developed, with a focus on equity (targeting pastoralist areas and the Developing Regional States [Afar, Benishangul-Gumuz, Gambella and Somali]) and quality improvement of health services. The Lancet medical journal's latest thematic series, *Every Newborn* was launched in Ethiopia and the Every Woman Every Newborn Action Plan was also launched. The National Routine Immunization Improvement Plan (2014-2015) was prepared, which outlines Government and partner plans to improve immunisation coverage in 20 low performing woredas (districts). A new National Malaria Control Strategic Plan (2014-2020) was developed, which sets ambitious goals of achieving near zero malaria deaths, reducing malaria cases by 75 per cent from 2013 baseline and eliminating malaria in selected low transmission areas. The Ethiopian Public Health Institute, in collaboration with UNICEF Ethiopia, conducted a Countdown Case Study, which provided evidence to further strengthen national plans and strategies.

In 2014 UNICEF Ethiopia supported the delivery of maternal, newborn and child health services through a comprehensive package of financial and technical support designed to improve human resources skills in health and provide essential supplies and equipment, including in emergency affected regions. UNICEF Ethiopia supported all regions to scale up, consolidate and improve quality of Integrated Community Case Management of major childhood illnesses. With 14,930 (94 per cent) health posts reached all regions except Afar and Somali have attained full coverage with integrated Community Case Management and more than 1 million sick children received care. Basic Emergency Obstetric and Newborn Care was extended to 57
per cent of health centres. Community based newborn care was initiated in 13 zones (2,553 health posts). The national Newborn Corner health facility coverage is 45 per cent. UNICEF Ethiopia supplied half of annual routine Oral Polio Vaccine supplies.

Encouraging progress in health service uptake by children and women in Ethiopia was registered in 2014. Skilled birth attendance increased from 20 per cent in 2012 to 41 per cent in 2014. UNICEF Ethiopia supported the Ministry of Health to roll out lifelong anti-retroviral therapy for pregnant women living with HIV (Option B+) and paediatric HIV care guidelines. Option B+ is being delivered in 62 per cent of health facilities and antiretroviral uptake by pregnant women living with HIV increased from 26 per cent (2012) to 61 per cent (2014). The neonatal mortality rate reduced to 27 deaths per 1,000 live births in 2014 (from 37). As of June 2014, the national administrative coverage for penta-3 vaccine is reported at 91 per cent, although the World Health Organization-UNICEF estimate is 72 per cent for 2013. 22,532 (>98 per cent) children were immunised in Gambella refugee camps and host communities and Ebola Virus Disease preparedness and prevention supplies were provided to the Government.

As co-chair of the Health, Population and Nutrition donors group, UNICEF provided coordination and partnership support to the Ministry of Health and influenced and leveraged key policies and resources for children and women. For example, the UNICEF 2014 planned health budget was US$28 million, while the final amount mobilised reached US$67 million. UNICEF Ethiopia manages the Health Pool Fund for the Ministry of Health.

While service access and community engagement have improved, disparity amongst and within regions remains a challenge, especially in pastoralist areas and the Developing Regional States. Service quality and human resource retention remain challenges for the sector. Of significant concern is the gap in funding for the proposed measles campaign scheduled for late 2015. Due to limited access to funds and a prioritisation of non-measles vaccines within the Vaccine Alliance (GAVI) and among donors, the current measles outbreaks experienced in nearly all regions threaten to set-back achievements in reducing the national and global measles mortality and morbidity.

With the preparation of its new Country Programme Document in 2015, UNICEF will sharpen its equity and quality improvement focus, strengthen partnerships, including with the private sector, and further leverage its strategic position with regional and national health entities. The Health Sector Transformation Plan and the revised Newborn and Child Survival Strategy will be finalised and implementation initiated. The national supply chain and regulatory system will be handed over to the national procurement and distribution agency. UNICEF Ethiopia will advocate for an adapted service delivery strategy for pastoralist areas and scaling up of sustainable Community-Based Newborn Care. Technological innovation will be used to strengthen the Maternal, Newborn and Child Health platform for follow-up of mother-baby-pairs, including HIV care and treatment. Birth registration and care for women affected by Female Genital Mutilation / Cutting using the Health Extension Programme, Health Development Army and family folders will be promoted.

**OUTPUT 1** Government’s capacity to coordinate, develop and implement evidence based, equitable and gender sensitive policies, strategies, plans & budgeting strengthened

**Analytical Statement of Progress:**
In 2014, UNICEF Ethiopia supported the Ministry of Health to produce evidence, develop and revise strategic documents and plans and monitor implementation of the Health Sector Development Plan IV. UNICEF Ethiopia also provided technical support, direct cash and supply
support and assisted in managing the Health Pool Fund and provided coordination support to various forums and working groups.

Through UNICEF Ethiopia’s financial and technical contributions, the Ethiopian Public Health Institute (EPHI) produced a report entitled “Countdown to 2015: Ethiopia’s progress towards MDG-4”, which describes how Ethiopia was able to achieve Millennium Development Goal 4 targets (reducing child mortality) three years ahead of schedule. Health facility census and service provision assessment studies were supported and draft reports were shared with stakeholders. Evidence from these studies will help to fine-tune future plans, strategies and programme implementation.

The Ministry of Health prepared or revised documents and strategic plans for several health programmes during 2014. Ethiopia's 20-year health sector visioning document (Visioning Ethiopia’s path towards Universal Health care through primary health care) and a draft five-year Health Sector Transformation Plan 2015/2016 to 2019/2020 were both prepared in 2014. The Ministry of Health is also revising its newborn and child survival, Health Management Information System, health communication and maternal health improvement strategic documents in line with the new health sector plan. New initiatives such as the community-based newborn care initiative have been included in the revised strategies based on new evidence on what works. UNICEF Ethiopia’s support and engagement in the development of these key health sector strategic documents ensured that the strategies and plans focus on improving quality of and equitable access to health services. However, monitoring the quality and equity dimensions using clearly-defined and measurable indicators is an area that requires further development.

In 2014, the Ministry of Health conducted a joint review mission in all regions to assess the implementation status of the Health Sector Development Plan IV and conducted its Annual Review Meeting. UNICEF Ethiopia supported these processes by hiring consultants and playing a technical and coordination role in both meetings. With support from UNICEF Ethiopia and other partners the Ministry of Health’s capacity to plan, monitor and implement its health programmes has been strengthened. However, data quality and variation in capacity among the different regions to implement programmes effectively are recognised as constraints.

**OUTPUT 2** Federal Ministry of Health’s (FMOH) capacity is strengthened, to plan and implement C4D programmes including capacity for assessing the traditional way of communication

**Analytical Statement of Progress:**
In 2014, UNICEF Ethiopia and other partners supported the Federal Ministry of Health to develop and disseminate the National Health Communication Strategy, related health communication materials and an implementation guideline. The strategy is based on identifying health development gaps at individual, community and macro levels, and reviewing the possible interactions across the different gaps, using the socio-ecological model. The strategy is expected to provide a framework to support the communication component of specific health programmes.

UNICEF Ethiopia supported the Ministry of Health to carry out routine immunization training for mid-level managers, with a focus on Communication for Development. More than 35 Zonal Technical Assistants from all regions were trained.

UNICEF Ethiopia also supported the Ministry of Health in its revision of the Maternal Neonatal
and Child Health module of the Integrated Refresher Training manuals and guidelines for Health Extension Workers (Chapter One of the manual and guidelines is devoted to communication for behaviour and social change). A National Master Training of Trainers for four Regions (Amhara, Oromia, Tigray and Southern Nations Nationalities and Peoples') was supported by UNICEF Ethiopia and technical assistance was provided to the Ministry of Health in developing communication activities around Ebola Virus Disease prevention.

**OUTPUT 3** MOH capacity to deliver essential package of basic high impact maternal, newborn and child health interventions (antenatal care, skilled delivery services, post-natal care, IMCI, BEmONC, PMTCT, Paediatric HIV Care, CBMNC) strengthened.

**Analytical Statement of Progress:**
The Federal Ministry of Health's Annual Performance Review of 2014 indicates that delivery by skilled birth attendants has increased from 20 per cent in 2012 to 41 per cent in 2014. UNICEF Ethiopia continued to support accelerated Basic Emergency Obstetric and Neonatal Care training and supportive supervision and this initiative is reinforcing efforts to reach Millennium Development Goal 5 (maternal mortality reduction).

Building on the integrated Community Case Management (iCCM) platform and the Health Extension Programme, UNICEF supported the Government and partners to initiate the Community Based New-born Care programme in 13 zones in the agrarian regions, including Amhara, SNNP, Oromia and Tigray. UNICEF played a critical role in setting standards, designing strategies, mobilizing resources, procuring and distributing supplies, and coordinating efforts with technical working groups. A Newborn Intensive Care Unit training manual was developed in 2014. The 2014 facility-based assessment indicates that Newborn Corner coverage has reached 57 per cent of health facilities nationally. The national neonatal mortality estimate has declined from 37 to 27 deaths per 1,000 live births reported in 2010. In Afar, one zone has been identified to develop the community-based new-born care model in remote pastoralist regions to strengthen the health system in a complex environment for health service delivery.

In 2014, UNICEF supported all regions to scale up, consolidate and improve quality of iCCM services. Full coverage of iCCM has been attained in all parts of the country except one zone in Afar and five zones in Somali. The remaining areas are scheduled to be fully covered during 2015. A total of 14,930 (94 per cent) health posts were offering iCCM services at end 2014 and over 1 million sick children under five years had received care; and more than 75 per cent of health posts had all of the recommended iCCM drugs, including Cotrimoxazole/Amoxicillin dispersible tablets, Oral Rehydration Salts and Zinc. Quality of iCCM care (measured as the level of agreement between assessment and classification, and classification and treatment) exceeds 80 per cent.

Following the launch of the national strategic plan for Elimination of Mother-To-Child-Transmission of HIV in November 2013, UNICEF supported the roll-out of lifelong antiretroviral therapy for pregnant women living with HIV (option B+), by developing option B+ guidelines and paediatric care and treatment guidelines, including procurement support for revised paediatric formulations. During 2014 Prevention of Mother-To-Child Transmission of HIV coverage greatly increased from 26 per cent in 2012 to 61 per cent. The proportion of HIV infected children in need who received ART is now 16.2 per cent.

**OUTPUT 4** MOH Capacity to prevent vaccine preventable childhood illness strengthened in regions and zones with large numbers of unimmunized children, including pastoralist areas.
Analytical Statement of Progress:

UNICEF provides intensive support to 20 of 42 priority zones identified in the national Routine Immunization Improvement Plan. These zones contribute up to 50 per cent of the total unimmunized children in the country. By assigning 20 zonal technical assistants (ZTA), the aim is to improve immunization using existing structures and resources. Deployed in August 2014, the ZTA completed baseline assessments, identified priority woredas (districts), and supported campaigns in their respective zones. At national level, the Federal Ministry of Health immunization communication working group developed a package of advocacy materials to raise awareness and engagement of elected officials, senior administrators, and community leaders around the benefits and needs for quality immunization. Roll out of this advocacy was supported through the GAVI Business Plan. Staff turnover in the Ministry of Health threatens the sustainability of technical leadership in the Government team to implement and monitor the Routine Immunization Improvement Plan. UNICEF seconds one staff member to the Ministry to reduce the gap.

UNICEF supplied approximately half of the annual routine Oral Polio Vaccine supplies and contributed to measles vaccine procurement. Delays in releasing Government financing for procurement of vaccines remained a challenge and led to national level stock-outs of BCG and Tetanus Toxoid for nearly 60 days in 2014. Working with cold chain partners, John Snow, Clinton Health Access Initiative and the World Health Organization, UNICEF assists the national Pharmaceutical Fund and Supply Agency to take over vaccination stock management and delivery at sub-national level, initially in three locations: Mekelle, Bahir Dhar, and Jimma.

In response to the 2013 cold chain inventory, which found large numbers of non-functional equipment, and to the Effective Vaccine Management Assessment, national and regional efforts to improve cold chain performance in 2014 included a maintenance campaign, repairing 2,919 refrigerators. In addition, UNICEF Ethiopia worked with Global Good and the Gates Foundation on the second phase of the introduction of Passive Vaccine Storage Devices to the cold chain system, based on findings of an initial trial of six devices that was finalized in July 2014. This work together with an assessment of solar direct-drive refrigerators guides large-scale procurements using GAVI support of more than US$20 million.

While plans for sustaining Maternal and Neonatal Tetanus Elimination nationally were delayed due to competing priorities, campaigns in the two remaining high risk zones of Somali region were completed, reaching 151,857 of the targeted 191,369. The second phase of the MenA campaign was implemented as planned.

OUTPUT 5 MOH capacity to respond to polio virus strengthened in regions and zones with large numbers of unimmunized children, including pastoralist areas

Analytical Statement of Progress:

Following an outbreak of polio in the Horn of Africa in 2013, which included 10 cases in Ethiopia, 11 vaccination campaigns (seven in 2014) were conducted in addition to intensified vaccination in high-risk areas. Based on administrative data, all campaigns exceeded the target coverage of 90 per cent; however, independent monitoring identified pockets of sub-optimal performance that remain a concern given the proximity to neighbouring Somalia, where cases persist, and the regular movement of pastoralist communities across borders. For example, the most recent polio campaign in September 2014, targeting nearly 1 million children under 5 years in the Somali Region and refugee camps, reached on average 98 per cent of targeted children,
but coverage was as low as 90 per cent in Dollo Ado, one of the high risk zones. On a positive note, Ethiopia has been polio-free since 05 January 2014.

In 2014, UNICEF Ethiopia focused support on vaccine supply and strong social mobilisation to facilitate identification of children missed by vaccination and to reduce the numbers. Zonal Communication Coordinators were recruited in Somali Region to provide technical support and to work with community leaders to resolve vaccination refusals. In addition, UNICEF Ethiopia strengthened engagement with clan leaders in Dollo Zone. Mapping of more than 1,640 pastoralist settlements (up from 244) and engagement of local vaccinators to reach remote communities helped to identify and reach missed children. Through a new partnership with the Islamic Affairs Supreme Council in Somali Region, all Council Sheikhs and Imams were trained on key polio and child survival messages. The Islamic Affairs Supreme Council network now identifies missed children and the reasons why they were missed (including refusals). Reports from Zonal Coordinators and the Islamic Affairs Supreme Council indicate that the majority of refusals are due to the high number of vaccination rounds.

For the polio campaigns, UNICEF Ethiopia purchased more than 38 million doses of polio vaccine. To ensure timely delivery, cargo flights were chartered to deliver vaccines to the most remote zones in Somali region. In addition, UNICEF Ethiopia purchased an additional 8,000 vaccine carriers and facilitated efforts by the Somali Regional Health Bureau to complete cold chain maintenance ‘campaigns’ to ensure vaccines remain potent.

**OUTPUT 6 MoH Capacity to prevent malaria strengthened in regions and zones in malaria endemic areas**

**Analytical Statement of Progress:**
In 2014, UNICEF Ethiopia supported the Federal Ministry of Health to finalise a new National Malaria Control Strategic Plan (2014-2020). A Concept Note, incorporating Integrated Community Case Management for Common Childhood Illness, submitted to the Global Fund in June 2014, was approved for funding in September, assuring critical funding for Ethiopia’s malaria programme and strengthening of community case management for the next three years.

UNICEF Ethiopia supported annual district level malaria commodity planning for improved quantification of commodities and development of a distribution plan covering all regional states. Over 700 malarious districts participated in 14 workshops across the country from July to September 2014. The data generated improved quantification of malaria commodity needs (diagnostic tests, medicines and mosquito nets) and will inform procurement and distribution plans. In addition, malaria morbidity data collected during the planning exercise complements the existing health information system and Public Health Emergency Management weekly reporting. The micro-plan data were used to update the epidemiological stratification of the country, a component of the National Malaria Control Strategic Plan. Micro-plan meetings also provided a platform to review malaria programme performance and to disseminate technical updates, including the new Strategic Plan.

Using the US President’s Malaria Initiative resources, UNICEF Ethiopia purchased and distributed over 4.3 million Long-Lasting Insecticidal Nets (LLINs) to protect over 8.6 million people living in malaria risk areas. 1.7 million nets were distributed in Oromia, 1.1 million in Amhara, 0.5 million in Tigray and the remaining 1 million were distributed in Benishangul-Gumuz, Afar, Gambella, Somali, Dire Dawa and Harari regions. The 2014 distribution complements the procurement of more than 12 million LLINs by the Government, using Global Fund resources. Due to delays in this procurement, those provided by UNICEF Ethiopia were
used to cover the areas of greatest malaria risk. A significant LLIN gap remains to be covered in 2015. UNICEF is currently being requested to provide procurement services to accelerate the process. UNICEF Ethiopia, with support from the US President's Malaria Initiative also procured and distributed over 3 million treatment doses of Artemisinin-based Combination Therapy and 250,000 vials of Artesunate 60 mg injection to ensure prompt and effective treatment of malaria. These drugs were distributed through the national Pharmaceutical Fund and Supply Agency.

OUTPUT 7 Increased country capacity and delivery of services to prevent excess mortality among girls, boys and women in humanitarian situations

Analytical Statement of Progress:
While the number of emergency health interventions was modest in 2014, the second half of the year saw UNICEF Ethiopia focus on providing health support to the South Sudan refugees arriving in Gambella. In response to this refugee influx, UNICEF Ethiopia worked with the Gambella Regional Health Bureau to ensure that measles vaccination reached over 22,532 (>98 per cent) children aged 6 months to 15 years. In addition, UNICEF Ethiopia supplied more than 24,219 Long-Lasting Insecticidal Nets, which were subsequently distributed. Performance against UNICEF Core Commitments for Children on health in this emergency exceeded global targets. However, an anticipated shortage of measles vaccine in the national programme may affect delivery of this vital intervention if the situation is not resolved in early 2015. UNICEF is working to mobilise resources to cover the gap.

As part of the emergency response to address the needs of the most inaccessible communities in Somali and Afar regions, UNICEF Ethiopia supported 28 Regional Health Bureau Mobile Health and Nutrition Teams. From July through October (Somali) and July through September 2014 (Afar), more than 60,130 consultations were provided; two-thirds for women and children. An evaluation of the cost effectiveness of mobile teams compared to expansion of the health service is currently being prepared for completion in early 2015.

In response to floods in Somali, Afar, Gambella and Oromia, UNICEF worked with Regional Health Bureaus to re-deploy Mobile Health and Nutrition Teams to secure a timely response. In addition, 15,000 Long-Lasting Insecticidal Nets and additional drug kits were provided to ensure free treatment within health centres. Extra emphasis was given to flooding in Gambella due to the refugee situation there. Working with the Gambella Regional Health Bureau, additional medical teams and drug kits were deployed to existing facilities providing free primary health care services. Consultations were provided to 11,700 displaced people, including 5,700 children under-five years of age.

In relation to the global Ebola outbreak, UNICEF supported the Government’s high level Ebola Technical Working Group to develop and print Information, Education and Communication materials in local languages, procured Personal Protection Equipment and supplies for screening and isolation of suspected cases, and assigned a communication specialist to the Ebola Technical Working Group. To date, no Ebola cases have been detected within Ethiopia.

OUTPUT 8 Project Support

Analytical Statement of Progress:
UNICEF staff in Addis Ababa and field offices remain critical for providing reliable technical support to the Government and implementing partners in the process of planning, programme implementation, Monitoring and Evaluation and reporting at all levels. The competency and skills of UNICEF staff are important to carry out policy dialogue, networking and partnership,
advocate for women and children, and monitor service delivery. UNICEF staff collaborated with Nutrition, WASH, Child Protection, and Media and External Relations sections to avoid any overlap in activities and to identify areas for joint implementation, such as abandonment of Female Genital Mutilation / Cutting, and facility support at health centres/posts.

In 2014, the proportion of the project support salary cost was 3 per cent, which is below the target of 7 per cent. This indicates that the section effectively managed a very high level of programme implementation and supply procurement with a minimum number of staff.

**OUTPUT 9 Project Support**

**Analytical Statement of Progress:**
UNICEF Ethiopia staff members travelled frequently to field locations, with a particular focus on Developing Regional States, and areas affected by health emergencies, in addition to the regular programme monitoring trips and spot checks. During these field visits, progress and challenges were identified and used to inform programme implementation and take corrective measures. Some field visits were to accompany donor representatives, UNICEF National Committees and strategic partners, which are critical for fundraising and partnership. All trip reports are kept in the system in a good manner. UNICEF staff participated in training courses and meetings both inside Ethiopia and outside of the country, for both capacity development as well as sharing the Ethiopian experience with other UNICEF country offices and organisations.

In the future, more frequent joint monitoring/supportive supervision trips will be encouraged with other relevant sections such as Nutrition, WASH and Media and External Relations. This will further support the identification of project areas that the sections could work together on, and will also reduce the burden on the Government and implementing partners to receive UNICEF staff on field visits.

**OUTCOME 2 Project Support**

**Analytical Statement of Progress:**
A mini-Demographic and Health Survey was conducted in 2014 which showed a decrease in stunting from 44 per cent (2011) to 40 per cent nationally, and a reduction in wasting from 10 per cent (2011) to 9 per cent. Data on feeding practices, minimum acceptable diet and exclusive breastfeeding were not collected in the mini-Demographic and Health Survey, but will be collected during the full Demographic and Health Survey in 2015. Despite some improvement in all three nutrition indices, Ethiopia remains in a precarious situation. Approximately 5 million children are stunted and 1 million children wasted. The health sector is implementing nutrition specific interventions at large scale. However, nutrition sensitive programmes are not yet strong enough to contribute to a reduction in malnutrition. The revised National Nutrition Program (2013) intends to address the gaps and accelerate stunting reduction through multi sectoral approaches. In 2014, multi sectoral nutrition coordination mechanisms have been established at national and regional levels. The Ministry of Health and Ministry of Agriculture have created nutrition units and the other sectors have assigned nutrition focal persons. UNICEF has supported the capacity building for national and four regional multi sectoral nutrition coordination committee members and focal persons.

The Community Based Nutrition programme support provided by UNICEF, which covers 378 woredas (districts) in agrarian regions and the Community Infant and Young Child Feeding programme covering 65 woredas in the Developing Regional States (Afar, Benishangul-Gumuz, Gambella and Somali) is working on behavioural change communications that will help to
improve the two Infant and Young Child Feeding indicators (Minimum Acceptable Diet and Exclusive Breastfeeding). Based on the latest available data from August 2014, a total of 1,206,211 children (615,465 girls and 590,756 boys) are accessed with monthly Growth Monitoring and Promotion. The participation rate was 61 per cent with an 80 per cent reporting rate. The Community Management of Acute Malnutrition programme is functioning at community and facility levels. Currently more than 13,000 sites are providing the service and have treated 195,000 Severe Acute Malnutrition cases in 2014. The improvement seen in household coverage of iodized salt (95 per cent) is very encouraging (EPHI survey 2014). More effort is required to improve quality as the proportion of adequately iodized salt is still only 43 per cent (EPHI survey 2014).

OUTPUT 1 By 2015, the percentage of Caretakers knowledge, attitude and practice to provide appropriate caring and feeding practice for girls and boys under two is strengthened

Analytical Statement of Progress:
In 2014, UNICEF Ethiopia continued to support Infant and Young Child Feeding promotion, including in the developing regions (Afar, Benishangul Gumuz, Gambella and Somali), aimed at building the capacity of mothers and caregivers to improve infant and young child feeding and caring practices. The programme focused on: promotion of early initiation of breastfeeding within one hour of birth, exclusive breastfeeding for the first six months, continued breastfeeding for two years, and beyond, and provision of timely, adequate, and safe complementary food from the age of six months. The Health Extension Programme, which is the platform for Infant and Young Child Feeding counselling and support, reaches 85 per cent of communities and more than 38,000 Health Extension Workers have been trained to provide counselling services. The heavy workload of health extension workers represents a challenge to effective implementation. Training and capacity building for members of the Health Development Army and the ‘one-to-five network’ on infant and young child feeding and growth monitoring will address these constraints.

The existence of diverse cultural practices and beliefs around young child feeding and care in Ethiopia can act as bottlenecks to positive behavioural change. Operational research in 2015 will identify the major social and behavioural barriers and the findings will be used to design appropriate messages and delivery methods.

In 2014, the Adolescent Nutrition programme targeted adolescents with Behaviour Change Communication activities. A total of 350 schools in 70 woredas (districts) of Amhara, Oromia, Tigray and Southern Nations, Nationalities and Peoples’ regions conducted nutrition Behavioural Change Communication through school clubs and 368,000 adolescents and parents were reached with messages focusing on adolescent nutrition, the consequences of early marriage and the importance of delaying first pregnancy until age 18 years. Accessing out-of-school adolescents before they become pregnant is a challenge, as reproductive health programmes only reach adolescents after they have become pregnant or once they are mothers. The Ministry of Women, Children and Youth's community level structures provide an opportunity to better access out-of-school adolescents with nutrition interventions. A pilot community based complementary food production project commenced in 20 woredas of Tigray, Amhara, Oromia and Southern Nations, Nationalities and Peoples’ regions in partnership with the Micronutrient Initiative, Global Alliance for Improved Nutrition, and two non-governmental organizations (RiPPLE and EOC). Preparatory activities are largely complete and food processing and distribution commenced in November 2014.
By 2015, the capacity of the health system is strengthened to provide quality promotive, preventive and curative nutrition services for pregnant and lactating women, girls and boys under five and adolescent girls

**Analytical Statement of Progress:**
Vitamin A supplementation, deworming and nutritional screening are being delivered through the Enhanced Outreach Strategy, Child Health Days and the Routine Health Extension Programme. In 2014, only Afar region completed the second round of Vitamin A Supplementation, achieving 97 per cent coverage.

Starting in June 2012, an initial 39 woredas (districts) conducting Child Health Days transitioned to providing routine Vitamin A Supplementation through the Health Extension Programme, and this has now been expanded to 143 woredas. However, the coverage of vitamin A is dropping and is below acceptable levels (80 per cent). For example, twenty routine implementing woredas in Southern Nations, Nationalities and Peoples' Region reported only 37 per cent coverage. Poor reporting from routine implementing woredas is one of the reasons for the decline in coverage. In order to strengthen routine Vitamin A Supplementation and implementation of Child Health Days, strengthen reporting and maintain coverage of interventions, UNICEF Ethiopia is assisting the regions to conduct woreda-level review meetings and carry out supportive supervision.

265,037 children aged 2-5 years (62 per cent of target) were dewormed and 4.1 million children under five and more than 800,000 Pregnant and Lactating Women were screened for malnutrition.

Iodized salt production and distribution coverage improved from 30 per cent in 2012 to over 95 per cent in 2014. 43 per cent of salt is adequately iodized (>15 ppm). The partnership between Population Services International and UNICEF Ethiopia on Universal Salt Iodization communications created public demand for iodized salt. The iodization technology currently available in Ethiopia is insufficient to improve the quality of iodized salt produced. The Universal Salt Iodization partners have agreed to promote and support a centralized Iodization Facility operating a mechanised industrial process.

Community Management of Acute Malnutrition activities are implemented throughout the country and the recovery rate of acutely malnourished children during 2014 was 88 per cent (target >75 per cent). The contract for monitoring Community Management of Acute Malnutrition supplies in each region expired during the reporting period and hence data were only available from one region (Somali). Nine woredas (districts) of 29 visited in Somali region reported stock-outs.

**OUTPUT 3 Nutrition Guidelines and manuals**

**Analytical Statement of Progress:**
A multi-sectoral structure has been established at national level comprising a National Nutrition Coordination Body, which met twice in 2014, and a technical working group, which met six times. A capacity building workshop was held in February 2014. Eleven regions have established regional coordination bodies, mirroring the structure and representation of the regional sector bureaus and meetings were held periodically. A nutrition unit was formed in the Ministry of Health and in the Ministry of Agriculture, while sector focal points have been appointed in all nine line Ministries.
The absence of institutional arrangements to address nutrition in the agricultural extension programme, is a major challenge, as are the difficulties in adequately integrating nutrition into agricultural monitoring and information systems. UNICEF is supporting the Development of National Nutrition Program Monitoring toll that will help to capture and analyse nutrition-specific as well as nutrition-sensitive information.

Coordination, participation and timely reporting across the line Ministries were challenges. This is partly because of limited technical capacity and partly due to absence of mandatory reporting and participation within the multi sectoral coordination system. Extensive support in collaboration with Cornell University is taking place. Tracking implementation of the multi-sectoral plans will be a focus of the work in 2015.

**OUTPUT 4 TG Technical Assistance to regional and federal Emergency Nutrition Coordination Units/DRMFSS**

**Analytical Statement of Progress:**
The Emergency Nutrition and Coordination Unit, which comprises a federal office and six regional offices, and is fully supported by UNICEF Ethiopia, was actively engaged in emergency nutrition cluster coordination. In 2014, 11 monthly nutrition early warning and nutrition information system bulletins were produced at regional and federal levels from data collected from over 600 woredas (districts). Actions were undertaken by Government and non-governmental organisations based on the reports.

The Emergency Nutrition and Coordination Unit also coordinated emergency nutrition responses. In 2014, out of the total 65 hotspot priority one woredas in six regions, 97 per cent of them were covered with Out-Patient Therapeutic Programme, 86 per cent with Therapeutic Feeding Unit, and 25 per cent with Targeted Supplementary Feeding programmes during January to March 2014. Between April and June, from a total of 73 priority one hotspot woredas in six regions, 99 per cent were covered with Out-patient Therapeutic Programme, 85 per cent with Therapeutic Feeding Units, and 38 per cent with Targeted Supplementary Feeding. Similarly, during July through September, of 121 priority one woredas in six regions, 94 per cent were covered with Out-Patient Therapeutic Programme, 81 per cent with Therapeutic Feeding Units and 50 per cent with Targeted Supplementary Feeding.

The Disaster Risk Management policy approved by the Council of Ministers in July 2013, and the Strategic Programme and Investment Framework is due for approval in December 2014. A familiarisation workshop was convened in December 2014 and implementation of the policy and framework will follow development of guidelines and legislation, and institutional re-structuring. 21 bi-annual nutrition surveys were conducted in six regions (three in Afar, four in Amhara, four in Oromia, four in Southern Nations, Nationalities and Peoples', three in Somali and three in Tigray) in May/June 2014. The nutrition situation was classified as normal in eight, poor in seven, serious in five and critical in one and emergency responses were undertaken in areas where an emergency situation was reported and observed.

Proposals and logistics arrangements were prepared for the second biannual nutrition survey in six regions in 2014. The survey commenced in three woredas in Afar in November. Surveys in the other five regions (Oromia - four woredas, Amhara - four woredas, Southern Nations, Nationalities and Peoples' Region - four woredas, Tigray - three woredas and Somali - three woredas) were conducted in December and preliminary survey results for all six regions (21 woredas) are expected in January 2015.
OUTPUT 5 Project Support

Analytical Statement of Progress:
Total Project Support funding from January to December 2014 is US$ 3,030,579, of which the salary allocation is US$1,952,140. The overall project support utilisation was US$2,333,276 (77 per cent of the total allocation). Out of the total project support utilisation US$1,254,838 is accounted for by salaries (54 per cent of the total project support utilisation). When looking at overall NFS expenditure during this period, this Project Support makes up 3 per cent of the overall expenditure for the Section.

OUTPUT 6 Project Support

Analytical Statement of Progress:
Total project support funding from January to December 2014 is US$3,030,579, from which the non-salary (travel and miscellaneous) allocation is US$1,078,438. The overall project support utilisation was US$2,333,276 (77 per cent of the total allocation). Out of the total project support utilisation US$1,078,438 is accounted for by travel and miscellaneous (46 per cent of total project support utilisation). When looking at the overall NFS expenditure during this period, project support non-salary makes up 3 per cent of the overall Section expenditure.

OUTCOME 3 Ethiopian population living in healthy environments, using safe drinking water and adequate sanitation services, and practicing hygiene is increased

Analytical Statement of Progress:
UNICEF Ethiopia provides continuous capacity building support in the water, sanitation and hygiene sectors to 86 woredas (districts). This includes the establishment and training of WASH Community Organisations, establishing a WASH-Management Information System in UNICEF-supported woredas and updating of WASH inventory data using the Management Information System.

UNICEF Ethiopia played an instrumental role in introducing sanitation marketing through the piloting of a Human Centred Design approach and the preparation of a sanitation guideline. An intensive market assessment was conducted, which provided much detail on the rural environment and latrine experience and identified the enabling environment for sanitation marketing in rural Ethiopia. The prototype latrine design focused on gathering community preferences on slab, drop-hole cover, foot pads and drop-hole shape to determine the prototype one product option design. A total of 16 local manufacturers and six local sales agents were trained in prototype slab production.

Multiple water and sanitation Use Systems is being implemented in 60 schools through provision of equipment, tools and materials and conducting water balance assessments to ensure availability of water prior to implementation. UNICEF Ethiopia also supported the study on sustainability of WASH systems and water balance assessment for school Multiple Use Systems activities.

UNICEF Ethiopia recognises the need to incorporate resilience in its upstream and downstream work and accordingly a discussion paper on prioritising resilience in UNICEF programming was
drafted and shared during the Mid-Term Review discussions. Furthermore, in partnership with the UN Education, Scientific and Cultural Organization, a groundwater assessment study, with the aim of increasing drilling success rates, was conducted in two woredas of Afar and one woreda of Tigray regions and a preliminary report submitted. A validation workshop was conducted in December 2014 to incorporate feedback from Government partners and finalise the report.

UNICEF Ethiopia’s focus in water supply continues to evolve from one of service delivery towards support in procurement, contract and financial planning through the use of the Direct Payment modality within the Harmonised Approach to Cash Transfers. UNICEF Ethiopia was heavily involved in the application, at scale, of a mobile phone based data collection system to conduct WASH inventory in Somali region, which meant Ethiopia’s National WASH Inventory is considered complete. The experience gained from Somali region will be applied to updating the WASH inventory in other regions of the country.

With direct support from UNICEF Ethiopia, in 2014, a total of 658,038 people had access to improved water supply against an annual target of 887,500. The cumulative result of providing improved water supply for communities as of 10 December 2014 is 2,571,447 which is 99 per cent of the target for the country programme and 32 per cent more than the expected result of providing safe water for 1,950,000 people by 31 December 2014. In terms of sanitation and hygiene activities a total of 3,164,654 people gained access to self-constructed latrine facilities, which exceeds the planned country programme result of 2.6 million.

A total of 298 health facilities have been provided with the complete WASH package, which is 86 per cent of the expected result (or 65 per cent of the planned country programme result). Similarly, 299 Schools have been provided with the complete WASH package, which is 89 per cent of the expected result (66 per cent of the country programme planned result).

A programme in urban WASH is being implemented in 8 small towns (and 40 satellite villages) with the objective of addressing bottlenecks in WASH service supply, market response and value for money through support to private sector organisations; enhanced partnership with Civil Society Organisations, and improved resilience to environmental hazards. The programme is benefiting 100,000 people. The partnership with civil society organisations is also designed to: promote innovative approaches in small towns and satellite villages; improve access to Urban WASH services for 100,000 people with a specific focus on providing capacity development support to water utilities on PRO-POOR approaches and social tariff setting; and addressing the problem of hygiene and sanitation for 250,000 people living in urban areas with a specific focus on linking the findings of the sanitation master plans with physical uptake of sanitation services.

To develop South to South cooperation UNICEF Ethiopia organised a study tour to Brazil to enable 15 Government counterparts to see the successful implementation of an urban WASH programme.

Emergency water supply (river treatment and water trucking) was provided to 110,000 people in Gambella (Kule, TierKidi, Pamdong refugee camps) at a cost of US$250,000 per month. WASH emergency response for refugee camp operation in Gambella is equivalent in technology and magnitude to an Urban WASH operation. Permanent water system development with the projected cost of US$7 million is being carried out to provide sustainable water supply for the refugee camps and host communities.
OUTPUT 1 WASH sector capacity, to coordinate development and emergency related work at the federal and regional levels with a particular focus on policy, leveraging, advocacy, knowledge management and monitoring and evaluation, is strengthened

Analytical Statement of Progress:
UNICEF Ethiopia supported the development of ONE WASH National Programme (OWN-P) as a multi-sectoral wide approach aimed at involving the water, education, health and finance and economic development sectors in its implementation. A Programme Operational Manual (POM) was prepared, a consolidated WASH Account (CWA) opened in November 2014 and made an initial disbursement of US$1million into the account in December 2014. Regional structures for implementing One WASH National Programme are established. UNICEF Ethiopia is strengthening human resources capacity development under the “readiness criteria” through providing technical support in several areas of the OWN-P to strengthen governance systems for equitable, effective and transparent resource allocation and delivery.

UNICEF Ethiopia supported the development of a guideline on Woreda (district) Support Groups and a Community Managed Project manual (with Netherlands Development Organization - SNV); supported the Social and Behaviour Change Communication Strategy for Multiple Use Services, sustainability of WASH services and school water balance assessment (in partnership with the non-governmental organisation- RİPPEL-Research inspired Policy and Practice Learning in Ethiopia). UNICEF also supported the development of an Integrated Urban WASH strategy, and Sanitation Marketing guideline and training manual.

Emergency WASH coordination meetings were regularly conducted at national level and in four regions (Somali, Afar, Oromia and Amhara). UNICEF Ethiopia provided support for donor harmonisation, alignment of WASH programme to Government systems and planning and managing the WASH programme towards achieving measurable results. UNICEF Ethiopia also alternately chaired the WASH sector Working Group and Water sector Technical Committee.

A WASH inventory for Somali region was completed using mobile phone technology, which included exporting data from the Akvo software system to the Management Information System and importing existing regional inventory data into a FLOW dashboard for visualisation and analysis. Following the successful demonstration of the feasibility of the data gathering and data importation, the Ministry of Water and Energy proposed updating the WASH inventory data for the remaining regions using Akvo flow software.


OUTPUT 2 Enhanced capacity of rural communities to provide and maintain adequate and sustainable water, sanitation and hygiene services

Analytical Statement of Progress:
Capacity building support was provided to 22 woredas (districts) in the four Developing Regional States (Amhara, Benishangul-Gumuz, Gambella and Southern Nations, Nationalities and Peoples' regions) and 64 woredas outside of the Developing Regional States and explicit and continuous core capacity development support that includes establishment/updating of WASH-MIS and establishment and training of WASH Committees is delivered to 30 selected woredas of Amhara, Southern Nations, Nationalities and Peoples’ Oromia and Tigray regions. For every water supply scheme constructed, a Water Sanitation and Hygiene Committee is trained and
In partnership with the UN Education, Scientific and Cultural Organization, a groundwater assessment study, with the aim of increasing drilling success rate, was conducted in two woredas in Afar and one woreda in Tigray regions and the preliminary report was submitted and presented during a validation workshop conducted in Semera town with 14 participants from Afar and Tigray region water bureaus, Mekele University, UNICEF, UNESCO and Acacia Institute.

During 2014, WASH section diversified its operational modality for financial transactions and the Direct Payment modality was introduced at scale. Significant progress was made in monitoring results by conducting programmatic and spot checks as part of the Harmonised Approach to Cash Transfers. A total of 62 lots are managed and progressively monitored for Water and Sanitation contracts with a total budget of about US$8 million. Annual Work Plans, with procurement and micro plans for WASH activities were prepared for the period July 2014 to June 2015.

In 2014, a total of 658,038 people were provided with improved water supply against an annual target of 887,500 people. The cumulative result for providing improved water supply for communities as of 10 December 2014 is 2,571,447, or 99 per cent of the country programme target and 32 per cent more than the expected result of providing safe water for 1,950,000 people by 31 December 2014. In terms of sanitation and hygiene activities a total of 3,164,654 people gained access to self-constructed latrine facilities, which exceeds the country programme target of 2.6 million. Moreover, 6,415 villages became Open Defecation Free, which is 92 per cent of the national target for the country programme of 7,000 villages.

As part of sanitation marketing, the prototype latrine slab was designed focusing on community preferences on slab, drop-hole cover and shape and foot pads. A total of 16 local manufactures and six local sales agents were trained in prototype slab production.

**OUTPUT 3** Enhanced capacity of urban communities to provide and maintain adequate and sustainable water, sanitation and hygiene services

**Analytical Statement of Progress:**
The One WASH Programme completed its first year of operation. In line with the principle of universal access to WASH services, UNICEF mobilised DFID funding for an urban WASH programme in 8 towns amounting to US$35 million. The Programme includes resilience work in 40 villages in close proximity to these eight towns. The following activities were implemented during the reporting period:

The feasibility studies for the eight urban WASH towns have been completed and the validation workshops were successfully held in all regions. Tender documents with the final designs for the schemes are expected to be ready by January/February 2015 so that tenders for construction works can be launched. The Programme Cooperation Agreement with World Vision Ethiopia is in place and the first deliverables (preliminary assessment to start up activities in programme sites) is expected by January 2015. The baseline study and the private sector bottleneck analysis from International Research Centre are expected by mid-January 2015 while the consultancy for the development of the Urban Sanitation Policy Document is in place and the inception mission was completed in December 2014. An Integrated Urban Sanitation and Hygiene Strategy and Health and Safety training manual is under preparation. A Memorandum of Understanding was signed with Water Resources Development Fund for managing
finance/loans to be provided to utilities companies and the Urban WASH Technical Working Group meetings were regularly held.

As a result of the exposure visit conducted in Brazil last September, a South-South Cooperation Programme with Brazilian water and sanitation sector authorities has been launched and an inception mission of 10 experts from Brazil is planned for January 2015.

OUTPUT 4 Enhance capacity of Government and communities to prepare and respond to, and recover from WASH related emergencies in accordance with the CCCs

Analytical Statement of Progress:
Emergency response for refugees and host communities in Gambella region was a major component of activities conducted during the reporting period. Due to floods in Afar, Oromia, Southern Nations, Nationalities, and Peoples' and Somali regions WASH support was provided to displaced persons who lost their properties and crops. In order to respond to these emergencies, coordination meetings were conducted regularly, safe access to potable water of sufficient minimum quantities was provided to 474,724 men, women, girls, and boys in line with minimum international standards and 325,000 emergency affected people participated in various hygiene promotion activities. Emergency latrine facilities were constructed to meet the needs of an estimated 150,000 refugees, including people who attended the annual religious pilgrimage event at Tsedkanie Mariam Monastery. Water supply and sanitation services were also provided to several host communities in the vicinities of the refugee camps in Gambella region. The design of a permanent water supply scheme that will serve Kule/Teirkidi camp residents and Itang host community members (a total estimated population of 150,000) was completed and tenders launched in December 2014, with construction set to commence in early 2015. The design was prepared in close collaboration with the Regional Water Bureau to ensure sustainable use, including appropriate operation and maintenance.

OUTPUT 5 Project Support

Analytical Statement of Progress:
UNICEF WASH programme staff followed up on WASH project activities, including through situation assessment, programme management, monitoring, participating in joint plans, coordination meetings, participating/facilitating several WASH advocacy events, and organising/facilitating workshops and participating in joint technical and project evaluation activities. Staff also actively participated in joint WASH programme planning under the UN Development Assistance Framework and produced inter-sectoral joint plans with Health, Nutrition, Education and Communication Sections.

35 staff participated in various individual/group trainings and exposure visits for developing individual knowledge and skills and keeping up to date on developments in the WASH sector. This included urban WASH experience sharing visit to Brazil that helped participants acquire knowledge and experiences on WASH programming, understand different approaches in town WASH operational modalities and system management.

In 2014, UNICEF-WASH section have 43 staff (International professionals, National Professionals and General Service staff) who are at work in eight zonal offices (23 staff) and in Addis Ababa (20 staff).

Salary utilisation amounts to US$2,005,778 which is 9 per cent of total utilised programme costs of US$21,578,944.
OUTPUT 6 HR Travel

Analytical Statement of Progress:
US$ 342,000 was utilized, mainly staff members engaged in field programmatic and spot checks, attended joint review meetings and field visits, attended workshops and meetings.

OUTCOME 4 Equitable enrolment and retention for boys and girls in 11 regions expanded and increased at pre-primary, primary and lower secondary levels of education by 2015

Analytical Statement of Progress:
UNICEF Ethiopia's interventions in the education sector in Ethiopia support the overall goals of the General Education Sub-Sector within the Education Sector Development Plan IV, namely to improve access to quality primary education so that all children, adolescents and adults acquire competencies and skills. The specific objectives designed to achieve these overall goals include: improving and sustaining equitable access to quality primary and secondary education services; and bringing about a steep reduction in the pupil drop-out rates, with a particular focus on the emerging regions.

UNICEF Ethiopia supports policy development, systems strengthening through capacity building, developing norms and standards and tools for measurement, and at the ground level influences access to and quality of education services through innovation and trialling new ideas for reaching vulnerable populations.

Major advances in the area of policy and national strategy in 2014 include the continuation of the back to school campaign launched in 2013. The success of the 2013 campaign encouraged Government to repeat it in 2014, with a greater emphasis on public participation and community dialogue, and this resulted in more than 47,511 children (48 per cent female) entering school in the developing regions (Afar, Benishangul-Gumuz, Gambella and Somali). At the request of the Ministry of Education, UNICEF Ethiopia commissioned a report that compiles the best of national and international experience to support development of a costed strategy to facilitate development of new initiatives to bring children back to school. In addition, UNICEF Ethiopia used its presence in high level decision making committees to spearhead important directives, including: release of the “code of conduct for schools” in October 2014 that is expected to ensure that school environments become more gender sensitive; and development of the Education Sector Development Plan V covering the next five years (2016 to 2020). UNICEF is a member of the drafting task force.

System strengthening activities in 2014 include the commissioning of a capacity gap analysis study for the developing regional states to analyse the strengths and weaknesses of business processes of the Regional and Woreda (district) Education Bureaus and identify measures to ensure that social inclusiveness is addressed. The recommendations are expected to result in short, medium and long term reforms to the business processes. In addition, support to the Government’s information management initiatives included the initiation of the school management information system, which is expected to feed into the national information system, and interfacing the Education Management Information System with Geographic Information System / RALS for timely collection, processing, storage, and analysis of geographic and sex disaggregated data for evidence-based decision making.

Specific support to improving the quality of schools and teaching and learning outcomes included continued engagement in the Accelerated Literacy, Numeracy and Life Skills for
primary grades (1 to 4) initiatives, with a focus on continuous assessment. Under a new agreement with the Ministry of Education, UNICEF will focus on strengthening assessment by developing and implementing a system of formative assessment based on MLCs to be implemented in all regions. Other region-specific interventions include: developing and distributing supplementary reading materials to schools in Amhara region to improve learners' literacy and numeracy and life skills, training school personnel on monitoring of learning achievement in Benishangul Gumuz, Somali and Afar regions and the development of literacy and numeracy materials in three local languages in Benishangul Gumuz to ensure that children who do not speak or understand Amharic can receive instruction in their mother tongue.

At the ground level, in addition to supporting scaling up of the Child-to-Child initiative and 'O' classes for improving school readiness, UNICEF Ethiopia and the Ministry of Education agreed to pilot an Accelerated School Readiness Programme that is expected to lead to a significant increase in children entering formal schooling with readiness skills. The school readiness programme will be implemented in Benishangul Gumuz region in 2015-16 academic year and will be accompanied by a costing exercise and an evaluation to check its impact on readiness levels as well as retention and achievement in grade I. Support to construction and upgrading of Alternative Basic Education Centres to support the education of out of school children continued as planned.

2014 saw a massive influx of refugees from South Sudan, the majority of whom were women and children. UNICEF Ethiopia in close collaboration with UN High Commissioner for Refugees and the Administration for Refugees and Returnees Affairs, as well as other implementing partners, launched a major school enrolment drive in September 2014 that helped over 33,200 refugee children to return to school in temporary classrooms equipped with text books and essential stationery. The host community received additional classrooms, training for 308 teachers, and learning materials benefiting a total of 15,400 children. In addition, temporary learning spaces were established and Education in Emergency kits were provided to 3,000 children in the Somali district and 3,006 children in Afar district whose schooling was disrupted by floods.

**OUTPUT 1** By 2015, quality ECD/ early learning services are expanded and equitably accessible to girls and boys in UNICEF targeted regions

**Analytical Statement of Progress:**
UNICEF Ethiopia supported the scaling up of the Child-to-Child initiative and 'O' classes (a one year downward extension of grade I in primary school). 790 schools initiated a school readiness programme (cumulative total 4,300) through these two initiatives and 59,500 children (50 per cent girls) across five regions are benefiting. Ensuring the quality of 'O' classes remains a challenge. The Ministry of Education and UNICEF Ethiopia are developing learning-teaching materials and providing training to improve quality of O-classes. Child-to-Child materials have been translated into three local languages, improving access to education for approximately 5,000 children from indigenous communities in Benishangul Gumuz region. The final report of the “Impact Evaluation on Child to Child programme” conducted by the University of Toronto was presented to senior Ministry of Education officials and will be disseminated more broadly in 2015. A major finding of the evaluation is that school readiness skills (numeracy, literacy and learning) among participating children is significantly higher than non-participating children. Recommendations include the need to expand resources, scale-up the programme and focus more on literacy aspects.

In 2014, UNICEF Ethiopia helped define a two-month Accelerated School Readiness programme to ensure a significant increase in the number of children entering formal schooling.
with appropriate readiness skills. The programme will be implemented in Benishangul Gumuz in academic year 2015-16. The Ministry of Education has formed a steering committee and technical working group to support implementation of Accelerated School Readiness, including: the development of materials, provision of technical support to the regions; and monitoring and evaluation support.

17,490 (57 per cent female) of the targeted 67,750 parents and caregivers received parenting training in two regions, and this will be replicated in the remaining five regions. A manual on parenting has been completed, translated into Amharic language and integrated into the Functional Adult Literacy programme.

In order to scale up Early Childhood Care and Education initiatives, personnel from the ministries of Health, Education, and Women, Children and Youth Affairs, Regional Education Bureaus and other partners engaged in consultative review meetings and capacity building workshops at woreda (district) and regional levels. In addition, 565 professionals (25 per cent female) were trained on Early Childhood Development in Somali and Southern Nations, Nationalities and Peoples’ regions. A monitoring and reporting mechanism was established in seven regions through the intersectoral regional taskforce for Early Childhood Care and Education Coordination and three of seven regions have developed quality standards for Early Childhood Development services.

OUTPUT 2 By 2015, regional capacity to provide equitable access to education for boys and girls at primary and lower secondary level strengthened in 11 regions

Analytical Statement of Progress:
Following the 2012 study on out-of-school children, a fully-costed strategy for getting them into school was drafted and shared with the Ministry of Education. The national media campaign on “All Children in School by 2015”, that was launched in 2013, was repeated in August/September 2014 and resulted in an additional 47,511 children (48 per cent female) entering school in the four Developing Regional States (Afar, Benishangul Gumuz, Gambella, and Somali). Despite the successes achieved, 'traditional' media campaigns are costly and more cost-effective alternatives are being sought.

As a contribution to addressing the challenges faced in ensuring access and equity in education service provision, three Alternative Basic Education centres were constructed and a further 16 are under construction in pastoralist areas, benefiting 2,850 children (50 per cent female). A total of 237 centres have been constructed as at end 2014 (2015 target = 350). Nine Alternative Basic Education centres were upgraded to second cycle primary enabling 1,800 children to continue their education. Tigray has reinstated its Alternative Basic Education programme as a result of advocacy by UNICEF Ethiopia. The low capacity of local contractors is a challenge for the construction of quality Alternative Basic Education facilities.

Pedagogical and classroom management training was provided for 2,846 Alternative Basic Education facilitators (40 per cent female) in order to address the skills gap. 50 experts and supervisors from Regional Education Bureaus and Woreda (district) Education Bureaus were trained in the multi-grade teaching approach to support cost effective utilisation of teachers and to avoid children dropping out due to insufficient numbers of learners in the classroom.

In order to promote education for disadvantaged rural children, particularly girls, education materials and uniforms were provided for 10,594 (60 per cent female) children. In addition, 1,522 girls in lower secondary schools were supported with “girls' selected packages”, which include financial and tutorial support and menstrual hygiene management support. Over 3,642
(52 per cent female) teachers, principals and experts were trained on gender responsive pedagogy, gender responsive school environment, gender data analysis and life skills education implementation, thereby developing their capacity to improve the school environment and mainstream gender in the learning-teaching process. 30 education module writers were trained on gender responsive pedagogy and a documentary film on female empowerment was produced for advocacy purposes.

OUTPUT 3 Education sector has the capacity to respond to emergency situations in 8 emergency prone regions

Analytical Statement of Progress:
A total of 58,206 school children (50 per cent girls), who were affected by various emergency situations, were supported to continue their education during the reporting period. UNICEF Ethiopia’s interventions included provision of supplies, establishment of child friendly learning spaces and capacity building through training for teachers on psychosocial support and basic pedagogy.

More than 33,200 refugee children (47 per cent girls) from South Sudan benefited from: Education in Emergency related supplies; text books; establishment of classrooms, Early Childhood Care and Education centres, and temporary learning spaces. 304 teachers (11 per cent female) were trained to provide educational services in the refugee camps. Moreover, 302 volunteer students (25 female) were trained and provided with incentive materials to assist students and teachers in their daily learning activities, thereby alleviating the challenges faced by teachers in managing the large classrooms in the camps.

In the refugee host community in Gambella, around 308 teachers (8 per cent female) were trained and 3,600 children (50 per cent girls) were provided with learning materials. Additional classrooms are under construction that will benefit 15,400 children (48 per cent girls) in these host communities. Temporary learning spaces were established and Education in Emergency kits were provided to 3,000 children (55 per cent girls) in Somali and 3,006 children (43 per cent girls) in Afar affected by a flooding emergency. In total 25,006 children (49 per cent girls) from Gambella, Afar and Somali regions were supported during the reporting period.

UNICEF Ethiopia, as co-lead agency supported and coordinated the monthly education cluster meetings. The cluster conducted rapid education in emergency assessments in Gambella, Afar and Somali. The rapid assessment report was shared with all concerned agencies for action. Temporary learning spaces were established in Afar based on feedback received from the post emergency assessments. The absence of an education task force in some regions hampered coordination of efforts for timely emergency response. UNICEF will continue its advocacy and support to put in place a functional education taskforce in all regions. The Humanitarian Action for Children document and the South Sudan refugee response plan for 2015 were prepared.

OUTPUT 4 By 2015, UNICEF targeted Woredas in Ethiopia are able to provide improved quality education and learning to boys and girls

Analytical Statement of Progress:
UNICEF Ethiopia continues to engage on Accelerated Literacy, Numeracy and Life Skills for primary grades (1 to 4), with a focus on continuous assessment. Through this programme, 2,858 (585 female) teachers, supervisors and school principals were trained on classroom-based assessment and active learning methodology in Amhara, Southern Nations, Nationalities and Peoples’ and Somali regions in the reporting period. These efforts were aimed at
strengthening teachers’ capacity for classroom formative assessment to ensure improved learning outcomes of learners. In addition, 11,495 supplementary reading materials were developed and distributed to schools in Amhara region to improve learners’ literacy and numeracy and life skills.

As part of the School Improvement Programme 148 (4 per cent female) Parent Teacher Association and Kebele (sub-district) Education and Training Board members were trained on community participation and school management to strengthen their engagement in school affairs. Furthermore, 275 school personnel (20 per cent female) were trained on Child Friendly Schools / SIP implementation and monitoring of learning achievement in Benishangul Gumuz, Somali and Afar. As at end 2014, 20 per cent of primary schools in UNICEF-supported districts meet minimum Child Friendly Schools / SIP standards (2015 target = 25 per cent).

Consultation forums were conducted with 187 (4 per cent female) education stakeholders at woreda (district) level to ensure that minority groups in the region continue to access basic quality education. A guidance and counselling manual has been developed to address positive disciplining strategies in schools and the region has already trained 25 teachers and 350 Parent Teacher Association members (40 per cent female). This training has contributed to initiate, promote and strengthen positive behaviour among children making them responsible for managing their own actions.

In Benishangul Gumuz region UNICEF Ethiopia continues to support the development of literacy and numeracy materials in three local languages to ensure that the children in this region who do not speak or understand Amharic can receive instruction in their mother tongue. To this effect a Steering Committee has been established to lead and coordinate language development efforts in the region. UNICEF Ethiopia has also supported the development of gender sensitive teaching and learning curriculum materials in three local languages for Grade 7 students. These materials are being printed and will benefit over 25,000 school children (47 per cent girls).

OUTPUT 5 The education system in Ethiopia has an enabling policy and institutional environment in place for enhanced access to quality education

Analytical Statement of Progress:
In order to strengthen public awareness of the national education vision, the Ministry of Education, with support from UNICEF Ethiopia, has commenced development of a Communication for Development (C4D) strategy, which will be finalised by mid-2015. Capacity development for effective sector performance is supported by 10 technical assistants deployed in four regions (Tigray, Amhara, Oromia and Gambella) who support regional capacity in evidence-based planning, implementation, monitoring and evaluation. Consultative review meetings on programme implementation and joint field monitoring missions conducted by Regional Education Bureaus, Bureaus of Finance and Economic Development, and UNICEF have been organised in five regions and have facilitated coordination, experience sharing and mapping out of future directions with partners.

Support for effective use of the Education Management Information System included training of 1,612 experts (32 per cent female) from the Ministry of Education and four regions (Tigray, Afar, Somali and Benishangul Gumuz) on education indicators, analysis and utilisation of data for evidence-based programming, and Global Positioning System data collection to facilitate interfacing the Education Management Information System with a Geographical Information System platform. A national consulting firm has been engaged to develop the appropriate
software.

In Benishangul Gumuz region, 77 education professionals (28 per cent female) were trained on context-specific peace building education, including recording and reporting School Related Gender Based Violence thereby building their capacity to promote social cohesion and resilience in their respective schools. The documentation and reporting of the magnitude of School Related Gender Based Violence is ongoing in Amhara, Benishangul Gumuz and Gambella regions.

Major ongoing studies include: a capacity gap analysis in the four Developing Regional States (Afar, Benishangul Gumuz, Somali and Gambella); strategy development to reach out-of-school children and a Knowledge, Attitudes and Practices survey on peace-building, social cohesion and resilience. A mid-term review of the “assessment for learning” project is planned for 2015. Teachers and school principals have also carried out action research in Amhara and Gambella regions to enrich classroom learning.

UNICEF Ethiopia participates actively in the Education Development Assistance Group; leads the UN Development Assistance Framework-Basic Social Services Education Sub-group; and co-chairs the Education Cluster, Early Childhood Care and Education Task Force and the Education Management Information System Working Group. This has positioned UNICEF to play a key role in advocating and promoting the rights of children to access quality education. UNICEF Ethiopia participated in the 2014 Education Sector Development Plan Joint Review Mission that focused on implementation of the new curriculum reform.

OUTPUT 6 National Staff Salary

Analytical Statement of Progress:
UNICEF Ethiopia’s education team is composed of 26 staff members: of which 4 are International Professionals, 17 are National Professionals and 3 are Support Staff. The Section has 17 staff based in the Centre and 9 staff based in different regions where UNICEF has sub-offices. In addition, there are 2 staff members on Temporary Assistance contracts: 1 International Professional and 1 National Officer.

OUTPUT 7 Project Support - Non Salary

Analytical Statement of Progress:
UNICEF Education programme staff participated in the 2014 Education Sector Development Joint Review Mission (JRM) with the Ministry of Education and development partners and in a situation analysis towards designing planned priorities for the Education Sector Development Plan V. Consultative meetings with the Ministry of Education and Regional Education Bureaus, and review meetings by the Regional Bureaus and the Bureaus of Finance and Economic Development were also conducted to coordinate, review, and share experiences, identify good practices and challenges, and map out possible responses and future direction.

UNICEF actively participated in the two main Risk Assurance Activities (Spot Check exercises and Programme Monitoring fields) as well as Annual Work Plan monitoring missions. Quarterly consultative review meetings were also conducted in 2014 which helped to jointly identify and document major achievements of planned results, implementation bottlenecks encountered and remedial solutions for accelerating rate of execution of planned interventions and achievement of planned results.
OUTCOME 5 By 2015, increased number of children who are registered, live in child-protecting families and communities and vulnerable children, including those in emergencies, benefit from gender sensitive and child friendly comprehensive interventions and services

Analytical Statement of Progress:
In 2014, the UNICEF Ethiopia child protection programme continued to support the Government of Ethiopia to strengthen child protection systems. UNICEF Ethiopia’s policy level engagement, together with partners, was successful in creating an enabling environment and building the capacity of Government bodies at federal and regional levels to accelerate investments on birth registration, as part of a vital events registration system. UNICEF Ethiopia was instrumental in initiating a partnership between the health and vital events registration sectors towards integrating birth and death registration into health services. Although registration has not commenced, the federal and regional states have committed to make ready all the required human, material and financial resources in order to start registering births by July 2015. UNICEF Ethiopia continued to support the establishment of registration structures in the 8 regions as well as building technical capacity of the federal registration agency in ensuring that they have the required capacities to develop of standardised registration materials and tools and manage services delivery.

Advocacy efforts helped solidify Government commitment towards eliminating harmful traditional practices. The participation of a high-level government delegation supported by UNICEF and DFID and led by the Deputy Prime Minister, at the Girls’ Summit held in London, in July 2014 was a clear manifestation of this commitment. Four strategic areas for intervention were identified at the Summit: improving data quality, strengthening coordination, strengthening accountability mechanisms, and increasing resource allocations by 10 per cent. With the support of UNICEF Ethiopia and other partners, through a coordinated platform, the Government of Ethiopia is currently developing an operational plan to ensure the implementation of key strategic and catalytic interventions to meet the commitments made. Child friendly social services were delivered to vulnerable children in 81 woredas (districts) through the support of social workers and community based structures. UNICEF Ethiopia is currently building the capacities of the Ministry of Labour and Social Affairs to ensure that the required resources and systems are in place to support vulnerable families and children and to reduce the risks of children becoming victims of violence, exploitation and abuse at household and community levels. This support facilitated the provision of comprehensive services, including alternative care services, to 69,000 children. In 2015, the programme will support reinforcement of the case management system. While the establishment of an independent central authority for inter-country adoption was not realised in 2014, the Government has developed short and mid-term strategies to accelerate progress. A total of 1,542 of children were reunified with their families and provided with other community based alternative care placement.

The Ministry of Justice and corresponding regional bureaus led expansion of coordination mechanisms and referral pathways for children in contact with the justice system. In Amhara, Southern Nations Nationalities and Peoples’, Afar and Somali regions existing coordination and referral pathways were strengthened through development of services’ standards and protocols and training.

UNICEF Ethiopia has stepped up investments for the expansion and strengthening of the child friendly justice package in the regions. An important manifestation of Government commitment is the inclusion of social workers supporting children in the justice system into the Government payroll.
Together with the Federal Supreme Court and UN Office on Drugs and Crime a national assessment on justice for children was initiated. The assessment is the first of its kind in Ethiopia and aims to critically review the situation of children undergoing justice processes across the country. In addition to addressing gaps in the knowledge base on child justice, the assessment will lead to development of a comprehensive national strategy governing justice for children.

Support to regional supreme courts continued in 2014. 600 justice professionals at federal and regional levels now have the capacities to provide adequate services to children in contact with the law. Similarly, in order to bridge gaps in technical knowledge and expertise on the management of community based diversion programmes, training has been organised for relevant representatives of justice and social welfare bureaus. As a result, over 2,800,000 children have access to child friendly justice services in 51 woredas.

To strengthen implementation of interventions for child protection in emergencies, the partnership with UN High Commissioner for Refugees (UNHCR) and UN Population Fund (UNFPA) was strengthened. The partnership with UNHCR, which has a focus on coordination of operations in support of South Sudan, Eritrea and Somali refugees, is recognised as a model for similar operations. A capacity building strategy on child protection in emergencies was developed in collaboration with the Child Protection / Gender Based Violence federal sub cluster (led by UNICEF and UNFPA) to reach federal and regional government, international non-governmental organisations and other UN agencies. Training of social workers was conducted at regional level. The expanded support has allowed the provision of services to more than 36,000 children. The collaboration with the International Organization for Migration facilitated the safe return and reintegration of some 600 migrant children.

With the support of UNICEF Ethiopia, an essential minimum package and standards comprising HIV and violence prevention, youth friendly services, skills training, as well as livelihood components, are in place. Advocacy efforts were supported to mobilise the participation of key stakeholders at the national, woreda and community levels to create an enabling environment for policy and programmatic interventions towards expanded utilisation of the essential packages. During 2014, 67,800 additional adolescents benefited from these services.

**OUTPUT 1** By 2015, the enabling policy, legal and institutional environment for birth registration, child justice, child-friendly social welfare and violence prevention strengthened at national, regional and kebele level

**Analytical Statement of Progress:**
In 2014, significant strides were made in reinforcing policy, legal and coordination frameworks, as well as improving the knowledge base on social welfare, birth registration and adolescent development. The National Social Protection Policy was adopted by the Council of Ministers. In the area of birth registration five regional states have enacted laws governing vital events registration and 4 regions have set up bodies responsible for coordination and oversight of vital events registration. The national council on vital events registration, in a meeting held on 29 November 2014, passed a resolution to commence conventional registration of vital events in the third quarter of 2015. Despite adoption of a legal framework on vital events registration by five regions, four regions have not adopted a legal framework and this could adversely affect commencement of registration services nationally. UNICEF Ethiopia continues to advocate for accelerated progress in adopting the framework nationally.
To inform development and reform of policy, strategy and related programmes, UNICEF Ethiopia supported strengthening of data management systems and the knowledge base on key elements of the child protection programme. The Ministry of Women, Children and Youth Affairs worked with UNICEF Ethiopia to develop a national youth database or Youth Information Management System, which is due to be finalised by January 2015. This database was created to provide access to information and data on services for youth/adolescents for use by policymakers, UN agencies, youth organisations, non-governmental organisations, academics, voluntary organisations and youth themselves. Progress was also made in the development of the child well-being information management system. UNICEF assisted the Ministry of Women, Children and Youth Affairs to finalise an assessment of similar data management systems in all regions to inform design of data capture tools and indicators and also supported training activities.

As an outcome of the high–level Government delegation visit conducted to the Philippines in 2013 to learn from their experience in the establishment and management of a central authority on inter-country adoption, short and mid-term reform strategies and plans were developed under the leadership of the Ministry of Women, Children and Youth Affairs.

OUTPUT 2 By 2015, at least 30 woredas in three regional states (Amhara, SNNPR, Somali) are able to provide comprehensive child-focused social welfare services to vulnerable children.

Analytical Statement of Progress:
UNICEF Ethiopia continued to support the Ministry of Labour and Social Affairs (MoLSA) and the regional bureaus in the design and implementation of child friendly social welfare programmes, including alternative programmes for children without adequate parental care. The Tigray Social Cash Transfer pilot is benefiting 3,367 households at end 2014. Results of an evaluation indicated that the Social Cash Transfer project positively impacted the lives of family members in supported households, with improvements reported in nutritional and health status; educational attainments of children and improved social acceptance of recipients. Development of tools and standards for the planned Social Cash Transfer pilot in Oromia and Southern Nations Nationalities and Peoples’ regions continued and the programme design and Operational Guideline were shared with regional counterparts. Activity plans were developed and the regional Agencies of Labour and Social Affairs are working on establishing community care structures, purchasing the required supplies, and recruiting Technical Assistants and social workers. While para social workers have been trained and recruited at the regional and woreda (district) levels to support service delivery to identified poor households and vulnerable children, there was limited progress in developing the social welfare workforce at the national level. The implementation of Alternative Care interventions progressed well in 2014, particularly in relation to the de-institutionalisation and placement of an increased number of children from assessed child care institutions into family based care; and in changing the strongly held belief that residential care facilities are good places for children to grow up.

In 2014, a total of 1,542 children living in child care institutions and street children were placed in alternative family based care. 65 children (48 male, 17 female) in interim care also benefited from financial support and 298 reunified children received life skills and business skills training. Moreover, various capacity building trainings have been conducted for 695 staff at regional Bureaus of Women, Children and Youth Affairs, and community care coalition members and parents.

In spite of good progress in the regions, the pace of implementation of planned social welfare activities at national level is slow. For example, recruitment of a database manager was delayed.
and this affected implementation of related activities, e.g. re-initiation of the Alternative Care Management Information System database, which has not been functional since mid-2013.

OUTPUT 3 By 2015, 50 woredas in 8 regions are able to provide child-friendly justice package of services to children in contact with law

Analytical Statement of Progress:
UNICEF Ethiopia increased investments in support of the expansion and strengthening of the child friendly justice package in the regions. The high-level child justice peer review platform, which was officially formed with the signing of a Memorandum of Understanding involving presidents of the Federal Supreme Court and corresponding presidents of regional supreme courts, is leading the formal integration of the programme into regular Government structures. An important manifestation of the Government's commitment is the inclusion of social workers who support children in the justice system on the Government payroll. At federal level, nine social workers were recruited through Government budget lines to support child friendly benches in Addis Ababa and Dire Dawa autonomous administration cities. Amhara Region has approved positions for 46 social workers to assist children undergoing justice processes. UNICEF, through the child-justice peer review platform, is advocating with other regional states to follow a similar path.

UNICEF Ethiopia has partnered with the Federal Supreme Court and UN Office on Drugs and Crime for the purpose of undertaking a national assessment on justice for children. In order to create a better understanding and buy-in among all justice officials. An inception workshop was held in Addis Ababa on 21 November 2014 and was attended by presidents of all regional supreme courts, heads of bureaus of justice and chiefs of police and prison commissions. The national assessment, in addition to addressing gaps in the knowledge base on child justice, will lead to development of a comprehensive national strategy.

Support to regional supreme courts has continued to strengthen implementation of child-justice packages. 600 justice professionals were trained on child justice administration at all levels. Similarly, in order to bridge gaps in technical knowledge and expertise on the management of community based diversion programmes, training was organised for relevant representatives of justice and social welfare bureaus from three regions. Professionals have also benefited from a study tour to a community based diversion facility in Addis Ababa. In Somali Region, with a financial contribution from the UK Department for International Development, preparations have been made to set up the child justice package in a total of 35 woredas (districts).

Limited progress has been made in establishing diversion programmes for children in contact with the justice system. The partnership forged with Forum on Sustainable Child Empowerment is designed to address the technical capacity gaps in the regions in the area of community based diversion programmes

OUTPUT 4 By 2015, 6 regions are able to provide comprehensive child-friendly interventions and services against violence including on HIV prevention

Analytical Statement of Progress:
The Ministry of Justice and regional bureaus of justice led the expansion of coordination mechanisms and referral pathways for children affected by violence, exploitation and abuse. In Amhara, Southern Nations Nationalities and Peoples', Afar and Somali regions, existing coordination and referral pathways were strengthened through development of service standards, protocols and training. In Oromia Region the one-stop centre was provided with
supplies and office furniture, which enabled deployment of justice and social welfare professionals in support of comprehensive service provision for victims of violence.

With the support of UNICEF Ethiopia, an essential minimum package and standards on HIV and violence prevention, youth friendly services, skills training, as well as livelihoods, are now in place. Advocacy efforts helped mobilise the participation of key stakeholders at national, woreda (district) and community levels to create an enabling environment for implementation of the essential package. This was achieved in partnership with Federal HIV/AIDS Prevention and Control Office (FHAPCO), the Ministry of Women, Children and Youth Affairs, the Ministry of Health, the Ministry of Education and the UN system.

Fifteen universities, 85 high schools and 68 youth centres in six regions are implementing a minimum HIV/AIDS intervention package that includes behavioural, structural and biomedical services. A communication strategy for Most At Risk Adolescents (MARA) was finalised and will be launched in January 2015. More than 14,650 adolescents and youth were reached with direct HIV/AIDS youth friendly services, including HIV prevention, behavioural change interventions, peer education, Training of Trainers on youth dialogue, HIV testing and counselling and leadership skills training in 66 woredas (districts). Simultaneously, more than 38,000 young people benefited from youth centre services and 530 boys and girls received life skills training. With regard to livelihoods, 735 boys and girls in Amhara, Oromia, Southern Nations Nationalities and Peoples’ regions and Tigray benefited from livelihood and entrepreneurship skills training which assisted them in reducing their vulnerability to school dropout, HIV/AIDS prevention, illegal migration, sexual exploitation and violence.

Quarterly and annual review meetings, international youth days, conferences and symposia, field monitoring, supportive supervision and technical assistance were offered by the Ministry of Women, Children and Youth Affairs and HIV/AIDS Prevention and Control Offices at federal and district levels to youth centres and schools. UNICEF Ethiopia and partners are working with Government to ensure that capacity building of implementing partners is based on documented needs assessments and is quality-assured.

**OUTPUT 5** By 2015, 30 woredas in 3 regions have functional birth registration structures to deliver birth registration and certification services

**Analytical Statement of Progress:**
With support from UNICEF Ethiopia, birth registration is now a fully-fledged national programme. Progress in 2014 focused on strengthening the federal and regional vital events registration bodies. Five out of nine regional states have adopted regulations governing vital events registration and successfully established an agency to coordinate and lead establishment of registration structures at all administrative strata. Preparatory activities, including budget allocations, recruitment of staff and designation of registration officials and physical spaces were accelerated in most regions in order to meet the timeline set for commencement of registration services, namely third quarter of 2015. At federal level, the Vital Events Registration Agency developed registration certificates, data capturing tools and manuals and these are expected to be finalised in early 2015.

UNICEF Ethiopia played an instrumental role in initiating the process towards incorporating birth and death registration into health services. A high-level consultation led by the Minister of Health and the Director General of the Federal Vital Events Registration Agency considered the strategic directions and structural and operational arrangements for the integration of the two services. Heads of regional vital events registration agencies and heads of regional health
bureaus participated. Following the consultation, a Memorandum of Understanding was signed between the two sectors at federal and regional levels. The national council on vital events registration, which comprises relevant Ministers and Presidents of regions, and which is the highest level oversight body, met on 30 November 2014 to review progress at federal and regional level towards meeting the target date set for commencement of registration services. An important outcome of this meeting was the unanimous decision given by the council members to commence nationwide conventional vital events registration by third quarter 2015.

OUTPUT 6 By 2015, at least three emergency - prone regions are able to provide child protection services to children affected by emergencies

Analytical Statement of Progress:
In 2014, UNICEF Ethiopia's Child Protection in Emergencies programme focused on delivery of emergency services to refugees in Gambella, Shire and Dollo Ado, support to migrant children, and capacity building and preparedness strengthening of federal and regional Child Protection sub-clusters. UNICEF Ethiopia strengthened its partnership with UN High Commissioner for Refugees (UNHCR), the International Organization for Migration, as well as with regional Government bodies and non-governmental organisations and Child Protection and Gender-Based Violence sub-cluster partners.

The major activity under service delivery was supporting UNHCR to respond to the influx of refugees from South Sudan. Agreement on a framework for support was reached and a joint action plan developed with Gambella regional Government and humanitarian actors. UNICEF Ethiopia seconded a technical expert and provided consultant support. UNICEF Ethiopia provided support in the areas of case management, Child Protection Information Management System, and psychosocial support through Child Friendly Spaces and community systems. 201 volunteers and Government officials were trained on Child Protection in Emergencies, 30,331 children accessed psychosocial support, and 300 children received referral support. In collaboration with UNHCR, a total of 5,683 separated and 2,423 unaccompanied children were verified and 215 were reunified with their families.

In support of Somali refugees in Dollo Addo, UNICEF Ethiopia financially supported UNHCR and Save the Children International to reach around 2,220 vulnerable children (45 per cent girls) through Child Friendly Spaces. 206 unaccompanied and separated children were identified and registered with alternative care services. 100 vulnerable girls participated in vocational skills programmes. UNICEF Ethiopia provided technical support to UNHCR through a staff secondment to assist refugees from Eritrea in Shire region. The programme in Shire reached 1,270 children and provided them with care arrangements. In collaboration with the International Organization for Migration and the Ministry of Women, Children and Youth Affairs, 420 unaccompanied migrant children (57 girls) returning from third countries were reunified with their parents. Afar regional Government was supported to conduct a Child Protection Rapid Assessment following flooding.

Child Protection in Emergencies training was provided for regional sub clusters in three regions (Gambella, Southern Nations Nationalities and Peoples’ and Afar regions) to support emergency preparedness. Somali and Oromia Regions will receive training in 2015. National training of trainers in Child Protection Rapid Assessment is scheduled for 2015.

The demands of the South Sudan refugee emergency led to a reduced emphasis on preparedness activities.
By 2015, child protection practices are adopted and implemented in targeted woredas in 8 regions.

Analytical Statement of Progress:
At the July 2014 Girls' Summit in London, the Government of Ethiopia committed to eliminate Female Genital Mutilation / Cutting and child marriage by 2025, through improving data reliability, strengthening accountability mechanisms to ensure implementation of the law, strengthening coordination mechanisms, and increasing allocation of resources by 10 per cent.

With support from UNICEF Ethiopia, the Ministry of Women, Children and Youth Affairs adopted a National Harmful Traditional Practices strategy, with a related action plan and Social Norm Change communication strategy. UNICEF Ethiopia also supported the facilitation of a consensus-building workshop for Islamic religious leaders that involved participants from all regions and resulted in a declaration to address Harmful Traditional Practices.

UNICEF Ethiopia's engagement in ending child marriage and Female Genital Mutilation / Cutting was solidified with the development of a national results framework with the involvement of five regions. In Amhara region a fully-fledged ending child marriage programme was developed and annual work plans are under development. UNICEF supported the Ministry of Women, Children and Youth Affairs in realising the 'London Commitment' through supporting a study on Harmful Traditional Practices and agreeing to provide capacity building support to the national alliance. UNICEF Ethiopia also supported the launch of the African Union's Ending Child Marriage campaign. Changing social norms requires wider and long term engagement with all key community actors. However, current programmes are at small scale and require improved coordination at district level to achieve the desired changes in a sustainable manner.

In line with the Ministry of Health's elimination of Mother to Child Transmission (eMTCT) of HIV by 2015 plan, UNICEF Ethiopia supported activities to enable health workers, health development armies and mother groups to create demand for and increase knowledge on prevention of mother to child transmission (PMTCT) services among pregnant women and their partners at community level. In 2014, UNICEF Ethiopia provided training for 606 health extension workers and 930 development army personnel, and 364 religious leaders on PMTCT. The trained health extension workers and women leaders played a significant role in reaching more than 87,000 mothers and mother support groups. The training increased community awareness of HIV/AIDS transmission and prevention and the necessity of protecting children from violence.

Analytical Statement of Progress:
Total Programmable and Project Support funding (from RR, OR and ORE) from January to 31 December 2014 is US$31,668,936; out of which US$1,801,794 was spent on project support. US$1,514,471 was spent on salary from the total allocation made of US$1,808,470, which means 83 per cent of the total allocation for salary was spent.

Therefore from the total Project Support allocation US$2,318,657 (RR, OR & ORE) to Child Protection; US$1,801 794 has been spent; i.e. 78 per cent had been used on project support.

When looking at the overall Child Protection expenditure during this period, Project support - salary makes up 6 per cent of the overall Section expenditure.

Analytical Statement of Progress:
Analytical Statement of Progress:

Total Project Support allocation for travel and other related expense is US$510,186 out of which US$287,377 was spent. 56 per cent was used for project support, both for travel and miscellaneous. When looking at the overall Child Protection programme component expenditure during this period, project support - non salary makes up 1 per cent of overall section expenditure.

OUTCOME 6 Populations receive humanitarian assistance (life & livelihood saving relief and recovery response) in emergencies in line with CCCs

Analytical Statement of Progress:

In 2014, UNICEF Ethiopia worked with the Government and partners to respond to the needs of women and children affected by various humanitarian situations such as floods, severe water shortages, and malnutrition and refugee influx, among others.

In 2014, normal to above normal rainfall led to improved food security and nutritional outcomes for most of the country. However, an estimated 3.2 million people still required emergency food assistance and an estimated 264,298 severely malnourished children required treatment. The gu/ganna/belg/sugum rains (March to June) were characterised by intermittent and unevenly distributed rainfall in some drought-prone woredas (districts) of Somali, Oromia and Afar regions. For example, the nutrition surveys in Bore and Dollo Ado woredas revealed a “critical” malnutrition situation according to national nutrition guidelines.

From August to September 2014, floods occurred in Afar, Gambella, Somali and Southern Nations, Nationalities and Peoples’ regions affecting more than 268,320 people and displacing over 139,780. UNICEF Ethiopia and partners provided multi-sectoral emergency response in health, nutrition, education and Water, Sanitation and Hygiene, while also focusing on mid to longer term solutions in building the resilience of affected communities.

In 2014, 192,695 children under five with severe acute malnutrition were treated through the joint efforts of the Ministry of Health, UNICEF and nutrition partners. 127,586 children under five and pregnant and breastfeeding women were screened and referred to supplementary feeding programmes in humanitarian situations. UNICEF Ethiopia worked with partners to ensure that 116,916 people accessed water for drinking, cooking and personal hygiene and that 450,000 people received sanitation and hygiene information to prevent child illnesses in humanitarian situations.

With UNICEF support, 150,961 people, including women and children, gained access to essential health services through preventive and curative interventions delivered by mobile health and nutrition teams in the remote and difficult to access areas of Somali and Afar regions. Populations affected by disease outbreaks accessed life-saving curative and preventive interventions and more than 2,049,310 people (>96 per cent coverage) were vaccinated against measles.

UNICEF Ethiopia supported partners to provide access to appropriate care and services for an estimated 12,325 children at risk of violence, exploitation and abuse and affected by humanitarian crisis.

UNICEF Ethiopia and partners also provided teaching and learning materials to some 29,291
school aged children to enable them to continue their education in spite of the emergencies. Additionally, UNICEF Ethiopia supported trainings for refugee and host community teachers in Gambella: 308 teachers were trained, contributing to improved quality of education for nearly 15,400 children.

In 2014, 643,010 refugees, mainly from South Sudan (39 per cent), Somalia (38 per cent), Eritrea (17 per cent) and Sudan (6 per cent) were residing in Ethiopia, with more than 217,663 arriving in 2014 alone. 191,375 South Sudanese refugees arrived in Gambella region of Ethiopia following inter-communal conflict that erupted in December 2013. UNICEF Ethiopia developed a multi-sectoral emergency response strategy for both refugees and vulnerable host communities in Gambella Region. The three pronged strategy included support to UN High Commissioner for Refugees (UNHCR) in sectoral coordination, technical assistance and provision of basic social services in the refugee camps, support to the host community at the border crossing points and in the vicinity of the refugee camps, and support to the host communities in the other areas that are not directly affected by the refugee crisis as part of conflict prevention programming.

UNICEF seconded Water, Sanitation and Hygiene, education, child protection, and nutrition specialists and a Health/Expanded Programme on Immunisation (EPI) officer to UNHCR to support the emergency response in the refugee camps of Gambella region.

With UNICEF support, between January and November 2014, 117,542 children between the ages of 6 months and 15 years were vaccinated against measles and 98,289 children under 15 years of age received oral polio vaccine, while 51,913 children aged 6 months to 5 years received vitamin A supplementation at the entry points and refugee camps. UNICEF Ethiopia’s ‘Back to School’ campaign in September for academic year 2014-2015 registered over 36,279 school aged children in the refugee camps. Child friendly spaces established in refugee camps provided recreational activities for an estimated 25,000 refugee children.

With UNICEF Ethiopia support, 21 water schemes were constructed to provide access to water to an estimated 10,600 people: both refugees and host community. UNICEF is supporting the establishment of a permanent water system in Kule and Tierkidi refugee camps that is expected to serve some 120,000 refugees and host communities living in the surrounding areas in a sustainable manner.

As a contribution to conflict sensitive programming, UNICEF Ethiopia and partners constructed seven water schemes in Lare and Abobo woredas (districts) for host communities; providing access to clean water for 2,550 people.

Commencing in August 2014, a sudden spike in the number of Eritrean refugee arrivals was registered in Tigray region – the majority of the new arrivals are young people. In November alone more than 3,588 new arrivals were registered. In support of UNHCR and the Administration for Refugees and Returnees Affairs, UNICEF seconded a Child Protection Specialist to Shire refugee camp complex to support the comprehensive child protection programmes.

**OUTPUT 1**

**FD EPRP support to IPs (Training, NFIs)**

**Analytical Statement of Progress:**
In December 2014, the Disaster Risk Management and Food Security Sector of the Ministry of Agriculture and its partners launched the Disaster Risk Management Policy and its associated
Strategic Programme Investment Framework.

At federal level, under the leadership of the Disaster Risk Management and Food Security Sector and the UN Office for the Coordination of Humanitarian Affairs, the Disaster Risk Management Technical Working Group and its associated sub-groups met on a monthly basis to provide updates from the various sectoral clusters on the ongoing humanitarian situation in Ethiopia and its neighbouring countries, on-going responses and the linkages to disaster prevention, mitigation and early recovery. At the regional level, the Disaster Risk Management technical working group meetings were also held on a monthly basis to address region-specific emergencies. While most of the emergency response-related programme gap analyses were completed during the year, making the linkages with the prevention and mitigation components of the Disaster Risk Management cycle requires strengthening. The effectiveness of Government arrangements for implementing the legal framework and regulatory systems for disaster risk reduction at all levels, and with decentralised responsibilities and capacities, is crucial for ensuring effective Disaster Risk Management in Ethiopia. In 2015, more support will be provided by UNICEF Ethiopia and partners for the successful implementation of Disaster Risk Management Policy across the country.

As regards UN coordination, Ethiopia Humanitarian Country Team met on a monthly basis in 2014 to set the humanitarian strategy, policy and advocacy priorities. Inter-cluster coordination was conducted through cluster lead meetings, convened and chaired by UN Office for the Coordination of Humanitarian Affairs, and comprising cluster coordinators. These platforms were used by UNICEF Ethiopia to advocate for the specific needs of women and children to be taken into account while defining the strategies of emergency response and linking them to resilience and Disaster Risk Management.

With close to 200,000 South Sudanese refugees crossing the border into Gambella region in 2014, the refugee response task force coordination meetings both at the federal level and in Gambella were of paramount importance in spearheading the emergency response. In 2014, UNICEF seconded four specialists (Water, Sanitation and Hygiene, Education, Nutrition and Child Protection) to UN High Commissioner for Refugees to support sector coordination and provide technical assistance to the partners working in emergency response in Gambella.

**OUTPUT 2**

**FD EPRP support to IPs (Training, NFIs)**

**Analytical Statement of Progress:**

UNICEF Ethiopia provided technical support to eight regional governments (Afar, Amhara, Benishangul Gumuz, Gambella, Oromia, Southern Nations, Nationalities and Peoples’, Somali, and Tigray) to develop regional Emergency Preparedness and Response Plans. UNICEF Ethiopia along with the UN Office for the Coordination of Humanitarian Affairs and other partners is working with Disaster Risk Management and Food Security Sector/DRMFSS to incorporate the regional preparedness and response plans into national disaster risk reduction processes. UNICEF supported the Administration for Refugees and Returnees Affairs and the UN High Commissioner for Refugees in responding to the influx of South Sudanese refugees into Gambella Region; nearly 200,000 refugees have arrived since December 2013. This support included secondment of Water, Sanitation and Hygiene, Nutrition, Health, Education and Child Protection Specialists to support sector coordination, to provide leadership in the respective sectoral responses and to provide technical support.

In 2014, UNICEF Ethiopia, with the support of the United States Government, procured 5,150 non-food items kits to further strengthen the partnership between UNICEF and Ethiopian Red
Cross Society around non-food items and capacity building for emergency preparedness and response. UNICEF Ethiopia maintains a prepositioning stock of emergency supplies in four pre-positioning hubs in the country to respond to the emergency needs of 125,000 people (Ethiopians and refugees) that could be affected by various emergencies.

The Humanitarian Requirement Document released at the beginning of 2014 was reviewed based on a multi-agency national humanitarian needs assessment, conducted in June. UNICEF Ethiopia provided technical and logistics support to the assessment and review. In addition, UNICEF Ethiopia participated in four multi-sectoral, multi-agency assessments under the leadership of the Government of Ethiopia, to assess the impact of floods on the population in Afar, Somali, Southern Nations, Nationalities and Peoples’ and Gambella regions.

In 2014, UNICEF Ethiopia participated in key humanitarian coordination forums, including the Humanitarian Country Team meeting, Disaster Risk Management Technical Working Group and cluster coordination meetings, during which we advocated for the rights of women and children affected by humanitarian crisis.

OUTCOME 7 By 2015, Ethiopia has an improved policy environment, evidence informed, child-friendly, gender-sensitive and result-oriented planning and financing in support of the sustainable and equitable realization of child rights

Analytical Statement of Progress:
Partnerships are being built with international and national universities with the objective of strengthening the link between research and policy for the realization of children's and women’s rights. Several analyses and evaluations were developed and disseminated. Examples include: situation analysis in the national language, with videos covering various themes; further analysis of the Ethiopia Demographic and Health Survey looking at child poverty, mortality and women; and a fact book on women and children. Advocacy for the implementation of action points arising from evaluations was strengthened through sharing published reports, policy briefs and journals, and convening of consultation workshops and forums. In addition, capacity building programmes for key Government institutions, such as the Central Statistical Agency, the National Planning Commission and other relevant Government ministries were implemented. In 2015, UNICEF Ethiopia will contribute to supporting key surveys such as the Demographic and Health Survey, Welfare Monitoring Survey and Household Income Consumption Expenditure Survey. To increase the effective utilization of research products in the second phase of the Growth and Transformation Plan, efforts towards the establishment of a Policy Research Hub with the National Planning Commission have commenced. National level surveys and key research analysis in the areas of child marriage, child mortality, child poverty, child labour, health equity and regional situation analysis (five regional analyses) are expected to influence the content and direction of the next Growth and Transformation Plan and related sector strategies. UNICEF Ethiopia works with Government Ministries, the Central Statistical Agency, (Ministry of Finance and Economic Development, Ministry of Women, Children and Youth Affairs, Ministry of Labour and Social Affairs, Central Statistical Agency, Federal Ministry of Health, and Ethiopia Public Health Institute) and non-government partners (United States Agency for International Development, the UK Department for International Development, Irish Aid, and the UN Population Fund) towards increasing national capacity for evidence generation and use. The major challenges include the high degree of coordination and advocacy required to build new partnerships.

To improve gender mainstreaming at the regional and sector level, five regional states (Amhara, Oromia, Somali, Afar and Benishangul Gumuz) and one sector at federal level (Ministry of
Information) adapted gender mainstreaming tools with UNICEF’s support through the UN flagship joint programme on gender equality and the empowerment of women. To further strengthen Government commitment to implementing the Convention on the Elimination of all forms of Discrimination Against Women, capacity building activities on gender mainstreaming for 166 sector heads and experts were provided and two forums were held to review progress in gender equality. The Government received from the Committee on the Convention on the Rights of the Child a list of issues on Ethiopia’s 4th and 5th periodic reports on implementation of the Convention. UNICEF Ethiopia provided support to the Ministry of Women, Children and Youth Affairs in addressing the issues raised. UNICEF Ethiopia and partners supported production of the 2014 report on the African Charter on the Rights and Welfare of the Child as well as the responses to issues raised. To further strengthen the mainstreaming of children’s issues in the implementation of sector programmes, the Ministry of Women, Children and Youth Affairs revised the national child mainstreaming guideline and orientation of sectors in the regions on the guideline continued.

The 77th Council of Ministers approved the National Social Protection Policy (NSPP) on 14 November 2014. Preparatory activities for its implementation, such as a capacity gap assessment and development of a draft strategy were completed during 2014. Preliminary activities for the piloting of the integrated social cash transfer with basic social services programme in two additional regions (Southern Nations Nationalities and Peoples’ Region and Oromia) and development of social protection regional action plans are underway. The evaluation results of the Tigray pilot cash transfer programme, which was completed in November, and the upcoming evaluations in the other two regions are expected to provide useful practical experience for scaling up of social protection programmes throughout the country. Ethiopia currently does not have a full comprehensive, integrated social protection system, although several support mechanisms and interventions exist that serve social protection purposes albeit with gaps in their design, implementation, budget allocation, scope, coverage, and service quality. The new Policy addresses these gaps and aims to reduce vulnerability and poverty by providing social assistance and insurance, promoting employment opportunities, and enhancing productive capacity. The NSPP and the PNSP4 support the transition from a set of individual time-bound programmes to an efficient and effective integrated system for delivery of social protection, access to basic social services and disaster risk management. The PSNP4 and the NSPP will result in enhanced household and community resilience to shocks and improvements in household food security, nutrition, access to basic social services and economic wellbeing.

Monitoring and planning capacity of Government partners was strengthened through support to establishing database systems using DevInfo software in Afar, Oromia, Amhara, Somali, Southern Nations, Nationalities and Peoples’ Region and the Central Statistical Agency, plus Results-Based Management training. A guide for integrated woreda (district) development plan preparation has been drafted and capacity building for community participation in planning was expanded to 284 woredas.

OUTPUT 1 GoE and stakeholders capacity to report, implement and follow-up recommendations from CRC, CEDAW and ACRWC strengthened

Analytical Statement of Progress:
In 2014, the Government of Ethiopia received a list of issues from the Convention on the Rights of the Child (CRC) Committee relating to the country’s 4th and 5th periodic reports. UNICEF provided support to the Ministry of Women, Children and Youth Affairs to address the issues raised. The Child Rights Committees at federal and regional levels met on average quarterly to
review progress in implementing the remaining recommendations of the CRC Committee and to assess the status of children in their respective regions and woredas (districts). 70 per cent of the Committee's recommendations have been addressed, including: adoption of national legislation on Registration of Vital Events and the National Identity Card Registration Proclamation in 2012 and the establishment of a national agency in 2013, and the ratification of the Optional Protocol to the CRC on children in Armed Conflict on May 2014 and the Optional Protocol on Sale of Children, Child Prostitution and Child Pornography on March 2014. Based on the recommendations of the Committee, some indicators proposed for the Government's next Growth and Transformation Plan focus on children with disability, children imprisoned with their mothers, and public private partnership on child rights. The African Charter on the Rights and Welfare of the Child report was presented before the Committee in 2014 and the list of issues arising was addressed with support from UNICEF and other partners.

The national child mainstreaming guideline was revised and the Ministry of Women, Children and Youth Affairs provided orientation on the guideline to CRC committee members (29 female, 61 male) drawn from Gambella, Benishangul-Gumuz, Southern Nations, Nationalities and Peoples', Dire Dawa, Somali and Hariri regions. This is aimed at strengthening the capacity of the committees. In addition, there is an ongoing effort to revise the structure and working manual of the federal CRC committee which will require approval by the Ministry of Women, Children and Youth Affairs management. The Child Research and Practice Forum held monthly seminars on the various child rights research activities undertaken and published its summary report on 2013 research.

OUTPUT 2 GOE's capacity for research, evaluation and evidence for policy dialogue on the efficiency and equity of sector programme strengthened

Analytical Statement of Progress:
A Memorandum of Understanding aimed at establishing a long term partnership among the Ethiopian Central Statistical Agency (CSA), UNICEF and the University of Southampton was signed and is expected to contribute towards building the research and survey capacity of CSA. The CSA is mandated to undertake the national surveys required for tracking progress against the Growth and Transformation Plan and Millennium Development Goal indicators. A Service Provision Assessment that provides information on the capacity and quality of health care facilities in the country was supported, with a focus on building national technical capacity to undertake such surveys in the future. The final draft report of the Service Provision Assessment was completed, and the fifth round National Health Accounts report was published. The National Health Accounts are primarily supported by US Agency for International Development through the Health Sector Financing Reform project and UNICEF Ethiopia has provided technical contributions alongside the World Health Organization and other partners. Further analysis of the 2011 Ethiopia Demographic and Health Survey, a Situation Analysis of Children and Women in Amharic language and a fact book on children and women in Ethiopia were disseminated. Five regional situation analysis reports were endorsed by regional authorities. Opportunities for partnership with the National Planning Commission towards the establishment of a Policy Research Hub at the national level are being explored and will contribute towards the increased utilization of evidence for tracking national development targets.

OUTPUT 3 National and sub-national results-based management capacity and system to monitor GTP progress strengthened

Analytical Statement of Progress:
Results-Based Management (RBM) training was provided for 160 regional officials and experts
and 222 civil servants were trained on programme and financial management. The Ministry of Finance and Economic Development (MoFED) and all Regional Bureaus of Finance and Economic Development (BoFEDs) undertook review meetings and conducted 13 joint field monitoring visits. MoFED and Oromia Public Service College developed a curriculum on RBM to strengthen results based reporting. An RBM Planning Guideline for woreda (district) development was prepared and shared with MoFED and eight BoFEDs. 284 woredas and kebeles (sub-districts) performed community-consulted participatory planning. 175 woreda plans have been developed. 100 woredas from Oromia benefited from the community consulted planning exercise and the Government provided matching funds (US$200,000), which is considered best practice. The Developing Regional States UN Joint Programme aims to enhance public service delivery to accelerate development outcomes in 22 woredas of the four states (Afar, Benishangul-Gumuz, Gambella and Somali), under which 49,500 Integrated Community-based Participatory Planning (ICBPP) field guide manuals were distributed to 284 woredas and their kebeles and 545 participants were trained as trainers. Overall, there is a lack of disaggregated data at the kebele/woreda level for planning purposes. In the ICBPP programme the monitoring and evaluation component is weak and lacks a child-focused tool for incorporating child participation in community level planning. To address this, ICBPP monitoring and evaluation guidelines are being developed in one region for testing prior to scale-up to other regions. A Terms of Reference has been developed for incorporating child-focused participation in the ICBPP, with implementation planned for 2015.

The Central Statistical Agency updated its EthioInfo database with new data sets to support evidence based planning and monitoring. CSA also prepared dashboards and profiles containing data from multiple national surveys enabling complex data to be presented clearly and in a standard format. UNICEF Ethiopia provided support to the UN Resident Coordinator in adopting Di-Monitoring as the database for tracking progress towards achievement of the UN Development Assistance Framework (2012-2015) results. Somali and Afar regions have launched their independent DevInfo databases and Amhara and Southern Nations, Nationalities and Peoples’ regions have updated their regional DevInfo databases. Five regions (Oromia, Amhara, Tigray, Southern Nations, Nationalities and Peoples’ and Somali) integrated demographic and socio-economic data into their regional development plans; and trained 687 planning and monitoring, Geographic Information System (GIS) and Information Technology experts on child focused socio-economic data collection, GIS and DevInfo software.

OUTPUT 4 Government sectors at federal and regional level capacity for gender mainstreaming into programme strengthened

Analytical Statement of Progress:
In 2014, four regional states (Amhara, Oromia, Somali, and Benishangul Gumuz) and one sector at federal level (Ministry of Communication and Information) adapted and/or disseminated gender mainstreaming tools with UNICEF’s support through the UN flagship joint programme on gender equality and the empowerment of women. At present, 19 of the 21 federal sectors and all regional Bureaus of Women, Children and Youth Affairs have a gender mainstreaming strategy. However, more work is needed to improve the quality of implementation. For this reason, much of the work in 2014 focused on training on the tools, analysis and review as well as consultation on findings. Support to Benishangul-Gumuz was provided by the Ministry of Women, Children and Youth Affairs through training (53 females, 27 males) and supportive supervision, which covered eight pro-poor sectors (Health, Education, Justice, Labour and social affairs, Agriculture, Urban development and construction, Water, irrigation and energy, Small and micro enterprises). The findings of the supervision were shared in a consultative forum involving senior officials (8 female, 22 male) and through a report. Sector
coordination forums on gender were carried out in Oromia region and at federal level. The third quarter federal forum supported by UNICEF brought together gender focal points of sectors and experts (90 females, 26 males) to review gender equality progress against the commitments in the Growth and Transformation Plan and the Convention on the Elimination of All forms of Discrimination Against Women. In Somali region, the Bureau of Women, Children and Youth Affairs in collaboration with bureaus of Education and Health is in the process of developing a sector specific gender mainstreaming tool for those sectors. In Amhara region, the Bureau of Women, Children and Youth Affairs collaborated with health and land use sectors to carry out a sector-specific gender audit and conduct consultation on the results. The findings of the gender audit have highlighted, among other things, that there are gaps in gender disaggregation of data during planning and reporting as well as limited knowledge and skills and financial resources for gender mainstreaming. The need for follow-up actions is taken into account in the regional Bureau plans.

OUTPUT 5 GOE's capacity to develop a social protection policy and strategy at federal and regional level strengthened

Analytical Statement of Progress:
The National Social Protection Policy was approved during the 77th Council of Ministers. The National Social Protection Platform has finalized the capacity gap assessment of the regional bureaus to ensure the development of a comprehensive capacity building strategy for the handover by Ministry of Labour and Social Affairs of permanent direct support to clients of the Productive Safety Nets Programme. The first draft of the national Social Protection Strategy needs minor revision to be aligned with the approved Social Protection Policy before the launch of the process of developing regional action plans. UNICEF is now a member of the Productive Safety Nets Programme Donor Working Group. UNICEF is supporting Oromia and Southern Nations Nationalities and Peoples' regions, to implement an Integrated Social Cash Transfer with Social Basic Services Programme that will lead to the adoption of a systems approach by Ministry of Labour and Social Affairs, the Productive Safety Nets Programme and the Ministry of Health, utilizing a common Management Information System and a unified single registry.

OUTPUT 6 Project Support - Salary

Analytical Statement of Progress:
The total project support – salary budget for 2014 is US$438,007.24 (US$360,940.56 RR & US$77,066 OR); Total expenditure as at December 2014 is US$436,978.02. This is 99 per cent of planned budget for the project support salary. These resources are used to cover the costs of international and national staff salaries.

OUTPUT 7 Project Support - Non Salary

Analytical Statement of Progress:
The total project support- non salary budget for 2014 is US$98,650 (US$89,087 RR & US$8,063 OR); Total expenditure for the year 2014 is US$97,158. This is 98 per cent of planned budget for project support - non salary. These resources are used to cover the costs of staff travel as they interact with counterparts to develop strategies, prepare plans and review progress, for office equipment, staff training and other miscellaneous expenditures.

OUTCOME 8 Policy guidance, technical leadership and support for planning, implementing and monitoring of the CP and UNICEF contribution to UNDAF effectively managed
Analytical Statement of Progress:
ECO has carried out a Midterm Review (MTR) in 2014. The MTR has looked at the results achieved during the first two years of ECO Country Programme (2012-2013). Findings of the MTR indicated that out of 101 Intermediate Results, 9 were achieved, 81 on-track and 11 constrained. ECO’s programme result structure was revised following the MTR to align with UNICEF’s new strategic plan (2014-2017) and to incorporate proposed changes and new programme priorities. The new programme focus areas that the revised result structure has incorporated include urbanization, adolescents, resilience and convergence. The MTR has also reviewed ECO’s operational modalities and recommended the need to diversify payment modalities to address the DCT related budget disbursement and utilization drawbacks. As a result, a consensus was reached with government partners to increase the use of Direct Payment and Reimbursement modalities. The UNDAF MTR was conducted shortly after the conclusion of UNICEF’s MTR. ECO has shared experience and ensured that findings from UNICEF MTR were considered.

EFY 2007 and 2008 Annual Work Plans (AWPs) were prepared during this fiscal year. UNICEF has played a key role in the signing of the EFY 2007 federal AWPs, which were delayed due to the busy schedule of the federal ministries.

ECO has been implementing HACT to ensure effective and efficient utilization of resources for agreed work plans with government and PCAs/ SSFAs with CSO partners. Implementation of the HACT risk assurance activities have contributed to manage the risks emanating from programme implementation and reporting. The strategic partnership with CSOs has contributed to better and quality implementation and delivery of results on maternal and child focused programmes prioritized for the year. The emergency response to South Sudanese refugees in Gambella region of Ethiopia has also benefited a lot from the CSO partnership.

ECO has been actively pursuing new donors/partners as well as retaining and upgrading existing ones. Likewise, in 2014, the country office has been engaging with traditional and emerging donors at a strategic level to promote enhanced relations between relevant public and private donors. To this end, an attempt was made to acquire a thorough understanding of the policies and priorities of these donors, to identify relevant counterparts and potential partners with shared areas of interest, and to promote and guide the development and growth of strategic cooperation opportunities and programmes with them. In line with its Resource Mobilization Strategy, ECO finalized and submitted 71 proposals (total of around US$ 262 million) between January and December 2014. In addition, currently partnering with about 50 public and private donors, the country office has sent all the 105 donor reports to donors on time and to a high standard of quality.

Following the restructuring of C4D from a standalone section into an embedded strategy, consultation was undertaken with sections and field offices to agree on strategic directions. The results frame work revision also provided the opportunity to mainstream C4D results within sector outputs. The C4D Technical Working Group is established to ensure coordination and matrix management among the C4D team. The output from the MTR consultation and deliberations from C4D team retreat were presented to the CMT as a discussion paper in January 2014 followed by progress review in June 2014.

Key cross-sectorial strategies were initiated during the year; high level consultation with major religious leaders was undertaken and taskforce is established to develop a framework for core partnership. In discussion with FMOH, strategic C4D interventions were incorporated to support WASH, Nutrition and Health results within the 2007 AWPs. Internal capacity was strengthened.
through enrolment of 11 POs/C4D focal persons in UNICEF C4D learning course.

OUTPUT 1 FD Guidance and technical support for planning and programme reviews

Analytical Statement of Progress:
This year ECO has revised its result structure following a Midterm Review of the Country Programme (2012-2015). The revised structure has been operational starting from July 2014, which was the beginning of the Ethiopian fiscal year (EFY) 2007. The PIDB coding of the revised result structure was carried out as per the global guideline to ensure alignment with UNICEF’s new strategic plan (2014-2017).

Quarter reports were prepared for the last two quarters of EFY 2006 and joint follow up actions were identified with partners to be implemented in the first two fiscal years of EFY 2007. ECO has signed 148 AWPs with government implementing partners for EFY 2007. Reporting and reviews of the accomplishments made in the first two quarters of EFY 2007 will be conducted from January to April 2015. EFY 2008 AWPs were also drafted to be reviewed and signed in June 2015 before the beginning of the new Ethiopian fiscal year.

Findings and recommendations from assurance activities (field monitoring trips, spot checks and audits) were also tracked and monitored. A total of 187 staffs (144 UNICEF and 43 Government) have been trained on HACT focusing on the main elements of HACT. The office has organized the first HACT peer review meeting for 33 staffs from UNICEF HQ, ECO and 11 selected Country Offices in ESAR.

The average time for processing PCAs has reduced from 31 days in 2013 to 20 days in 2014 and for SSFAs it has reduced from 3 days in 2013 to 2 days in 2014. Besides a shorter PCA review process has been put in place for emergency response PCAs.

All donor reports due in 2014 were submitted on time and to a high standard of quality. In line with ECO’s Resource Mobilization Strategy, 71 proposals (total of around US$ 262 million) were finalized and submitted between January and December. Of these, 27 proposals have been funded (around US$ 98 million) and 38 are in the pipeline (potential income of around US$ 148 million).

OUTPUT 2 Guidance and technical support for C4D mainstreaming

Analytical Statement of Progress:
During the MTR consultation, the socio-ecological framework, which is a C4D model that emphasizes multi-level action beyond the primary target group to ensure sustained results is agreed to guide C4D approaches in the new structure, and key strategic interventions were identified based on a set of criteria agreed. In the effort of focusing strategic C4D engagement for the remaining country programme period, five selected strategic interventions were agreed including; strengthening the Health Extension System through building C4D capacity of the Health Extension Workers (HEWs) and Health Development Army (HDA), reaching children/adolescents in school both as a target group and as agents of change through multiple platforms including school clubs, mini-media, and PTA, building capacity of out of school youth centres, initiating core partnership with major religious leaders, and media capacity building for edutainment interventions. While these office wide strategies are agreed as key cross-sectoral C4D platform, region specific opportunities are also being explored. Key C4D questions are incorporated in regional Situation Analysis studies to understand such opportunities.
Key cross-sectorial strategies were initiated during the year; high level consultation with major religious leaders was undertaken and taskforce is established to develop a framework for core partnership. The draft is finalized and expected to be finalized by the end of 2014. In discussion with FMOH, strategic C4D interventions were negotiated and incorporated to support WASH, Nutrition and Health results within the AWP, which is being operationalized to support the FMOH effort in developing the competency framework and curriculum package for training of the HDAs.

In collaboration with MoE and MoWCYA, the development of capacity building packages for school-mini media, youth centres and media professionals is finalized and rolled out to 69 youth centres and 20 media stations through PCA with Population Media Centre. Mapping of school interventions by programmes and geographic coverage is also undertaken to improve alignment cross-sectoral linkages between various media capacity building efforts and programme implementation.

The engagement of eleven, officially assigned and trained C4D focal persons from field offices has strengthened the ECO C4D team through establishing a system for regular engagement in planning evidence based C4D interventions at federal and regional levels.

**OUTCOME 9** Government capacity and systems for evidence based, equitable and gender sensitive planning, management, logistics, information system at the national, regional and woreda level are improved to support the implementation of HSDP, UAP and NNS by 2015.

**Analytical Statement of Progress:**

In the first half of 2014, UNICEF Ethiopia implemented several strategies to achieve results: support to development of key policies, capacity development through provision of quality technical assistance, enhancing coordination and partnership, facilitating south-south cooperation, strengthening service delivery, supporting evidence generation, and leveraging resources for children.

Key successes during the period were the development of a US$2.41 billion ONE WASH multi-sectoral National Programme (OWN-P) that uses a sector wide approach. The programme aims to align all development partners and donors with Government systems. The Health Sector Transformation Plan (2015-2020), which includes a focus on equity and quality improvement, will facilitate access to health services by women and children in the hard to reach zones and regions (Developing Regional States and Pastoralist areas) that account for over half of the mortality burden.

UNICEF Ethiopia supported the development of several nutrition guidelines, including: Infant and Young Child Feeding, Micronutrients, Acute Malnutrition and Multi sectoral Nutrition. UNICEF Ethiopia also contributed to the revision and development of the Health Management Information System. Advocacy work led to the inclusion of additional nutrition indicators into the Health Management Information System and woreda (district) annual plans.

Through UNICEF Ethiopia’s support, routine immunisation was strengthened in six pastoralist zones as part of the national routine immunisation improvement plan. Cold chain maintenance services for more than 300 refrigerators were supported by UNICEF Ethiopia, as well as capacity building in equipment maintenance for cold chain technicians and users. UNICEF Ethiopia in collaboration with Clinton Health Access Initiative and the Regional Health Bureaus,
promoted piloting of options for grassroots cold chain technologies, particularly Solar Direct Drive refrigerators. Integrated community case management was scaled up in Gambella, Afar and Somali regions. As part of the National WASH Inventory, data collection using mobile phone technology was successfully conducted in Somali Region, with technical and financial support from UNICEF Ethiopia, including procurement of equipment.

Through the Health Pool Fund III, UNICEF supported the Ministry of Health to monitor progress, identify key bottlenecks and conduct policy dialogue. Nine technical assistants were hired to fill human resource gaps in key areas. Nutrition sensitive interventions in the agriculture, WASH and education sectors targeting adolescents, mothers and children were promoted.

While service access has been improved, disparity amongst regions and within regions remains a challenge. Service quality, health facility cleanliness and high turnover of skilled health personnel are persistent constraints.

**OUTPUT 1** Support capacity of national, regional and local level vaccine management and cold chain maintenance

**Analytical Statement of Progress:**
Following finalisation of the National Cold Chain Inventory and Effective Vaccine Management Assessment in 2013 UNICEF Ethiopia supported the development and implementation of improvement plans for both the national cold chain and vaccine management systems. As first steps to implement these recommendations, a task force was formed to guide the transfer of responsibility for vaccine management to the national Pharmaceutical Fund and Supply Agency. In addition, UNICEF supported Regional Health Bureaus to conduct a national campaign to repair more than 8,000 refrigerators. As part of this effort, in partnership with the Biomedical and Laboratory Equipment Engineers Association more than 300 refrigerators were repaired or maintained. On-the-job training on cold chain maintenance was provided to 20 mid-level cold chain technicians and 290 cold chain users towards sustained local capacity building.

Innovation and simplification are key components of UNICEF Ethiopia’s investments in improving quality of Maternal, Neonatal and Child Health services. A report on the testing of Solar Direct Drive refrigerators conducted in 2013 indicated their functionality and suitability in different climatic zones and as a result 500 units were procured by UNICEF Ethiopia and Clinton Health Access Initiative and distributed to regions with weak cold chain systems. A field trial of Passive Vaccine Storage Devices in partnership with the Bill and Melinda Gates Foundation and Global Good continued and results are expected in 2015.

UNICEF Ethiopia deployed an expert to the Federal Ministry of Health to support vaccine logistics. Quarterly stock review meetings helped prevent stock-outs at all levels. UNICEF Ethiopia and partners plan to assist the Government to develop the rehabilitation and procurement plan as well as the plan for transitioning vaccine management responsibility to the national Pharmaceutical Fund and Supply Agency by early 2015.

**OUTPUT 2** Identify and map hard to reach areas in pastoralist areas with strategy and action plan for improving access to these areas over short and medium term

**Analytical Statement of Progress:**
In the first six months of 2014, UNICEF Ethiopia prioritised support to the four Developing Regional States (Afar, Benishangul Gumuz, Gambella and Somali), home to a majority of the pastoralist communities. Technical support was provided to the Ministry of Health and the
Family Health Equity, Effectiveness and Efficiency (FHE-3) Project to conduct health systems assessments in the four developing regional states. In addition, UNICEF Ethiopia deployed technical assistance in six pastoralist zones as part of the national routine immunisation improvement plan. The capacity of the four developing regions in planning, implementing and monitoring improved through deployment of 22 technical assistants funded through the Health Pool Fund III. Integrated community case management was scaled up in Gambella (3 woredas [districts]), Afar (2 zones) and Somali (2 zones) The number of woredas in these regions implementing integrated Community Case Management increased from 18 to 27 during the reporting period. Coverage of some key indicators improved in Afar and Benishangul Gumuz regions compared to 2013, but progress was unsatisfactory in Gambella and Somali regions (source FMoH HSDP IV fourth year performance report).

**OUTPUT 3** Support to strengthening health systems and services in particular implementation of policies and strategies, standardisation of services and resource mobilisation at national and subnational level

**Analytical Statement of Progress:**
UNICEF Ethiopia, as a member of a technical core committee contributed to the development of the draft health sector transformation plan (2015-2020) that will be finalised in May 2015. The Ethiopia Financial Year 2007 (2014/2015) health sector plan was prepared based on an analysis of key health system constraints (mainly policies, strategies, service continuity, finance, socio-cultural, geographic, human resource and commodity aspects). UNICEF Ethiopia supported national and sub-national level planning. During the reporting period UNICEF Ethiopia supported the Federal Ministry of Health and Regional Health Bureaus to monitor implementation, progress and bottlenecks in realising the targets of Health Sector Development Plan IV, including through the provision of financial and technical support for quarterly and biannual integrated supportive supervision and review meetings. Coverage of most health indicators increased during the reporting period. In coordination with other development partners, UNICEF Ethiopia advocated for the prioritisation of health services quality improvement and equitable access to health care and these are the main focus areas in the upcoming health sector transformation plan. However, appropriate indicators to monitor quality and equity improvement still need to be designed.

**OUTPUT 4** Support MDG + Health pool fund

**Analytical Statement of Progress:**
UNICEF Ethiopia, in its role as manager of the Health Pool Fund supported the Federal Ministry of Health to conduct routine monitoring of key health interventions. Three bi-monthly joint steering committee meetings, two quarterly performance reviews, one policy dialogue forum and periodical consultative meetings with national and sub-national officials were facilitated. Nine qualified technical assistants were hired to fill the human resource gaps in critical areas at both national and sub-national levels; e.g. policy planning, grant and finance management, human resources for health, and information technology. A motivation scheme (technical assistants’ allowance) was initiated to motivate and deploy 22 health workers in four developing regions. Several south to south experience sharing and learning visits were facilitated through the Health Pool Fund III and as a result, the Federal Ministry of Health mobilised more than US$10 million in additional funding, signed bilateral agreements, and benefited from capacity building and experience sharing. UNICEF Ethiopia played a key role in facilitating periodic meetings between Health Pool Fund contributors and the Ministry, which contributed to improved donor coordination and relations towards increased resource mobilisation.
UNICEF Ethiopia and other development partners who signed the joint financing arrangement provided technical support to the Federal Ministry of Health through the biweekly Joint Core Coordinating Committee meetings, quarterly discussions on the Millennium Development Goal Pool Funds report and the Joint Consultative Forum. UNICEF Ethiopia has been the co-chair of the Health, Nutrition and Population development partners' group in Ethiopia for the last two years, where it has played a key role in advocating for improved quality and equity of health care delivery.

**OUTPUT 5** Provide support in strengthening medicines and health commodities supply, regulatory framework, and institutions at various levels

**Analytical Statement of Progress:**
During the reporting period, UNICEF Ethiopia supported the Food, Medicine and Health Care Administration and Control Authority and the Pharmaceutical Fund and Supply Agency to update the essential drugs list, the list of drugs available over the counter and the medical supplies list in order to ensure that all essential drugs and supplies for Maternal Neonatal and Child Health are incorporated. The Pharmaceutical Fund and Supply Agency supported the distribution of integrated Community Case Management starter kits to health posts, which, with the support of the Micronutrient Initiative, included co-packaged Oral Rehydration Salts and Zinc.

Under the leadership of the Federal Ministry of Health and the Pharmaceutical Fund and Supply Agency, quantification of integrated Community Case Management and Community Based Newborn Care supplies and drugs need was completed for 2014 and 2015. In-country manufacture of chlorhexidine gel has commenced and discussions around the local manufacture of other essential medicines, including Amoxicillin dispersible tablets, zinc dispersible tablets and Gentamycin are on-going and these discussions will be facilitated through the newly established public private partnership unit within the Ministry of Health.

**OUTPUT 6** Support strengthening of national capacities for the management of mental health

**Analytical Statement of Progress:**
Mental health services are not widely available in Ethiopia and many people, including women and children, do not have access to mental health services close to home. A National Mental Health Strategy, which aims to increase basic mental health service provision at the lower health facility level, as part of basic health care, was developed in 2013, with UNICEF Ethiopia support. In 2014, the Federal Ministry of Health convened a mental health symposium in which more than 200 participants from different fields participated. The objective of the symposium was to advocate for additional funding to support the scaling up and integration of mental health services into basic health services. The Federal Ministry of Health signed a memorandum of understanding with six Ethiopian universities to scale-up training of mental health professionals and to expand services. Access to mental health services expanded to more than 200 health facilities during the first half of 2014.

**OUTPUT 7** Support federal and regional governments for planning and prioritization of the national nutrition programme.

**Analytical Statement of Progress:**
During the reporting period, additional nutrition indicators (underweight rate, Iron Folate [IF] for pregnant women, Severe Acute Malnutrition treatment outcomes), were included in the revised Health Management Information System and *woreda* (district) based annual plans were
produced by all woredas. As follow up to the endorsement of the revised national nutrition programme in June 2013, four implementation guidelines: (i) Adolescent, Maternal and Infant and Young child Nutrition Guidelines (ii) Micronutrients guidelines (iii) multi sectoral nutrition coordination guidelines and (iv) Management of acute malnutrition guidelines were drafted during the reporting period and submitted to the Federal Ministry of Health management for endorsement.

OUTPUT 8  Capacity, and systems to plan, manage and monitor integrated and sustainable decentralised WASH services strengthened at Regional and Federal levels

Analytical Statement of Progress:
UNICEF supported the preparation of a National Sanitation Strategy document and Behavioural Change Communication strategy for Multiple use WASH Services.

UNICEF Ethiopia supported the development of a guideline on Woreda Support Groups and development of a Community Managed Project manual (with SNV); supported the Social and Behaviour Change Communication Strategy for Multiple Use Services, sustainability of WASH services and a school water balance assessment (with a national non-governmental organisation RiPPLE [Research inspired Policy and Practice Learning in Ethiopia])

OUTPUT 9  Development, communication and use of the National WASH Inventory and other evidence based products to inform Regional and National policy and plans and reporting

Analytical Statement of Progress:
Data collection for the National WASH Inventory using mobile phone technology and Avko FLOW software was successfully conducted in 2014 in Somali Region, with technical and financial support from UNICEF Ethiopia. Akvo provided technical support, including for the translation of data into a format for upload into the national Management Information System.

WASH inventory data for Gambella region was successfully imported to Akvo FLOW and this will enable visualisation of analyses of the Key Performance Indicators via a customised online dashboard. This demonstration of the feasibility of transferring data from the national Management Information System to the FLOW dashboard has resulted in the Ministry of Water, Irrigation and Energy proposing that WASH inventory data are updated for the remaining regions using the Akvo FLOW software.

OUTPUT 10 Improved capacity to support improved caregiver/duty bearer knowledge, attitude and practices; increased demand and utilization of services and improved social norms related to Health, Nutrition and WASH

Analytical Statement of Progress:
In response to the bottleneck around infant and young child feeding identified in 2013, UNICEF supported a rapid assessment in Afar, plus the production of Infant and Young Child Feeding pocket guides developed to support facilitation and discussion by mother support groups in 10 woredas (districts) of Afar.

A National Health Communication Strategy was drafted, based on identified health development gaps at individual, community and macro levels, and a review of the possible interactions across the identified gaps.

Based on the positive findings of UNICEF Ethiopia-supported 2010 – 2011 promoting Health
Extension Programme, namely Miraf Radio Serial Drama, various lessons were learned and enhanced community capacity and positive behaviour were encouraged. UNICEF Ethiopia developed a new partnership with the Population Media Centre to expand the drama programme into a broader, cross-sectoral behaviour and social change programme to promote priority messages in the areas of Maternal, Neonatal and Child Health, vaccination, malaria, early child care education, girls' education, Harmful Traditional Practices, hygiene and sanitation, and child, adolescent and maternal nutrition in both rural and urban settings. 1,500 interactive school Social and Behavioural Change Communication packages were developed in Amharic, Afan Oromo and Tigrigna languages for schools, and distributed to school health and nutrition clubs in 171 UNICEF-supported Community Based Nutrition woredas.

**OUTPUT 11** Support travel, mobility of UNICEF staff for implementation of CP activities.

**Analytical Statement of Progress:**
UNICEF staff in Addis Ababa and field offices remain critical for providing reliable technical support to the Government and monitoring programme implementation in the field. The competency and skills of UNICEF staff are important to carry out policy dialogue, networking and partnership, advocate for women and children, and monitor service delivery. UNICEF staff members have been travelling to the field frequently with particular focus on developing regions, and areas affected by health emergencies. During these field visits, progresses and challenges have been identified, which are important to inform programme implementation and take corrective measures. Some of these field visits are for donors, UNICEF National Committees and joint field visits with strategic partners, which are critical for fund raising and partnership. UNICEF staff have participated in training courses and meetings both inside Ethiopia and outside of the country, for both capacity development as well as sharing the Ethiopian experience with other UNICEF country offices and organisations.

From January to June 2014, the expenditures on salaries amounted to 3 per cent of overall expenditures.

**OUTPUT 12** Nutrition project support (CBN & CHD)

**Analytical Statement of Progress:**
The proportion of total expenditures allocated to salary and travel is 6 per cent for the reporting period. Out of US$17,882,724 of total programmable cost, US$300,536 (2 per cent) was spent on travel and miscellaneous and US$773,994 (4 per cent) on salary.

The Nutrition staff received substantial technical support for resource mobilisation and fund management. Several donor visits were entertained in order to show results achieved using Donor's contributions and to show them gaps that could be considered for more financial support. UNICEF staff supported Government counterparts to improve their financial and technical reporting. One concept note and two donor proposals (European Union and Irish Aid) were finalised and submitted to donors during the reporting period.

Securing long term funding (two years or more) for the Community Management of Acute Malnutrition programme has been a challenge, but during the reporting period, five years funding was mobilised from the UK Department for International Development.

**OUTPUT 13** WASH Project Support - (Non-salary)

**Analytical Statement of Progress:**
UNICEF WASH programme staff members are following up WASH project activities including situation assessment, programme management, monitoring, participating in joint plans, coordination meetings, participating/facilitating WASH advocacy events, and organising/facilitating workshops and participating in joint technical and project evaluation activities. Staff actively participated in joint WASH programme planning under the UN Development Assistance Framework and UNICEF cross-sectional joint plans with Health, Nutrition, Education and Communication Sections.

Staff participated in individual trainings and exposure visits to develop individual knowledge and skills and keep themselves up to date on current developments in the WASH sector. This included participation in the waste water management and solar pumping exposure visit in India and in the sanitation marketing exposure visit to Cambodia. These visits helped participants acquire knowledge and experiences from the Wise Water Management schemes, integrated fluorosis mitigation projects, solar pump installations and mapping out a way forward on Sanitation Marketing for Ethiopia.

**OUTCOME 10** At least 80 per cent of Children, youth and women in rural, pastoralist and urban areas use quality, gender sensitive and equitable preventive, promotive and basic curative health and nutrition services at community and health post level by 2015.

**Analytical Statement of Progress:**
UNICEF Ethiopia’s inputs to advocacy, technical leadership and coordination contributed to scaling up community based newborn care with sepsis treatment through Health Extension Workers, increasing coverage in the expanded programme on immunization, responding to the recent polio outbreak, and implementation of community health days.

Support to strengthen procurement and supply distribution of medicines and supplies led to increased coverage of quality gender sensitive preventive, promotive and basic curative health and nutrition services that are provided by 90 per cent of health posts. All health posts have capacity to offer integrated community case management of pneumonia, diarrhoea, malaria and severe acute malnutrition. In focus woredas in the Developing Regional States (Afar, Benishangul-Gumuz, Gambella and Somali) an increase in the proportion of functional health posts has improved access to health services. The Ministry of Health is committed to the rapid expansion of community-based newborn care, with a rapid acceleration seen in the first half of 2014.

According to administrative reports 88 per cent of children under one year of age received pentavalent vaccine-3, protecting them against pertussis, diphtheria, tetanus, hepatitis B and Haemophilus influenza type b. More than 58 per cent of districts achieved 80 per cent or greater penta-3 coverage. Procurement and distribution of 4.3 million long-lasting insecticidal nets, and 3.6 million treatment doses of Artemisin-based Combination Therapy significantly contributed to national malaria prevention and control efforts.

UNICEF provided technical, financial and logistics support for Vitamin A Supplementation which reached 9.3 million children aged 6 to 59 months (79 per cent coverage). Commencing in June 2012, an initial 39 Child Health Day implementing woredas transitioned to routine vitamin A supplementation through the Health Extension Programme, and this has subsequently expanded to cover a total of 143 woredas. Iodized salt production and distribution coverage improved from 30 per cent in 2012 to over 80 per cent in 2013 (FMOH report 2014). Preventive nutrition programmes like Growth Monitoring and Promotion and Infant and Young Child Feeding reached 884,170 children in 378 woredas. A total of 884,170 children below the age of
two years were reached in 378 woredas implementing the core package of Community Based Nutrition, this includes growth monitoring for children and provision of age specific counselling to improve child feeding, covering exclusive breastfeeding as well as adequate, quality, complementary food with the right frequency

**OUTPUT 1** Provide support to ensure quality immunisation services to increase coverage of all nationally recommended antigens through enhanced support to regions and zones with large numbers of unimmunized children, including pastoralist areas

**Analytical Statement of Progress:**

Although incomplete, national penta-3 vaccination administrative data (July 2013 to June 2014) reports coverage of 89 per cent, which represents a 23 per cent increase in comparison to the results of the 2012 coverage survey. Coverage, as indicated by administrative data, is increasing overall but varies across regions, with Somali and Gambella regions lagging behind with less than 80 per cent coverage (Somali 40 per cent and Gambella 32 per cent). Even in the regions that achieved coverage greater than 80 per cent, coverage varied across districts. In response, the Federal Ministry of Health and partners designed and implemented a Routine Immunization Improvement Plan to address disparities in coverage. About 50 zones with high proportions of unvaccinated children have been identified and UNICEF plans to support improved coverage in these zones through supplying technical assistance and vehicles.

Wild polio virus continues to pose a threat and one case was reported during the period January – June 2014. In response, repeated, localised polio vaccination campaigns were conducted in high risk zones in Oromia, Somali and Gambella regions. Suboptimal coverage of Sub National Immunization Days due to access issues in areas of Somali region and 'campaign fatigue' remain as challenges.

UNICEF Ethiopia and Somali Regional Health Board entered into a Project Agreement with the Ethiopian Islamic Affairs Supreme Council to support increased community awareness and gain the support of higher officials/decision makers towards improving polio immunisation coverage. UNICEF also supported the deployment of an additional 12 social mobilisation experts.

**OUTPUT 2** Support national capacity for trainings, coordination, drugs supply and monitoring of ICCM

**Analytical Statement of Progress:**

In 2014, UNICEF Ethiopia supported all regions in the national effort to scale up, consolidate and improve quality of Integrated Community Case Management (iCCM) services. All regions except Afar and Somali have achieved full coverage of iCCM. From January - June 2014, two zones in Afar, two zones in Somali and three woredas (districts) in Gambella commenced iCCM implementation. Nationally, 14,930 (94 per cent) health posts are currently offering iCCM for pneumonia, diarrhoea, malaria and severe acute malnutrition. During January to June 2014 1,043,524 sick children under the age of five received iCCM services. UNICEF, together with its partners, is mobilising communities to further increase demand for and utilisation of services. Data indicate that the quality of care, as expressed by the level of agreement between assessment and classification and treatment of cases exceeds 80 per cent. Supervisory visits confirmed that more than 75 per cent of health posts had all of the recommended life-saving drugs available at the time of the visit, including Cotrimoxazole/Amoxicillin, Oral Rehydration Salts and Zinc.
During January to June 2014, training materials were updated to reflect the change in first line drug for pneumonia treatment from Cotrimoxazole to Amoxicillin. Amoxicillin dispersible tablets have been imported and distributed.

UNICEF Ethiopia played a critical role in resource mobilisation, supply procurement and distribution and coordination of efforts alongside the Ministry of Health. Strong partnerships with local and international counterparts, including Save the Children, Integrated Family Health Programme, John Snow Inc. / The Last Ten kilometres project have been key in delivering results.

**OUTPUT 3** Improve malaria control through micro planning, procurement and distribution of ITN, RDT, ACT and supplies for HEWs, social mobilization and M&E

**Analytical Statement of Progress:**
Since 2013, UNICEF has used resources from the US President's Malaria Initiative to procure and distribute over 5.7 million Long-Lasting Insecticidal Nets (LLINs), protecting more than 11.4 million people living in malaria risk areas. During the first half of 2014, 1.4 million LLINs were distributed in Southern Nations, Nationalities and Peoples', Benishangul-Gumuz, Afar, Somali, Dire Dawa and Harari regions. A procurement order for over 4.3 million LLINs was placed by UNICEF Ethiopia for distribution in early 2015. When these procured nets are distributed, the total number of LLINs distributed (10.1 million) will have exceeded the five-year target of 10 million. The largest source of LLINs for Ethiopia is from the Global Fund, with procurement and distribution managed by the national Pharmaceutical Fund and Supply Agency. Government plans to procure over 12 million LLINs using Global Fund resources were unfortunately delayed, and as a result, a significant LLIN gap was experienced during the reporting period.

UNICEF procured and distributed over 1.7 million treatment doses of Artemisinin-based Combination Therapy and procured over 250,000 Artesunate 60 mg injection vials for the Government to support effective treatment of malaria cases. In addition, malaria commodity planning was supported to improve quantification and distribution of malaria commodities in 700 malaria risk districts. UNICEF Ethiopia supported the Federal Ministry of Health to prepare a malaria and integrated Community Case Management concept note and proposal for consideration by the Global Fund.

**OUTPUT 4** Support [HEW and] Health Development Army (HAD)

**Analytical Statement of Progress:**
The Health Development Army has been actively promoting community and household ownership of health issues. Frequent community-level meetings were held, with support from Health Extension Workers, to disseminate key messages on maternal, new-born and child health. Health Development Army members visit women in their homes and encourage pregnant women to give birth at health facilities; take newborns to Health Extension Workers to receive postpartum care; and encourage early initiation and exclusive breastfeeding. Health Development Army members have gone beyond raising awareness on early care seeking behaviour for pregnant women and their children, facilitating the formation of various community structures to support early care-seeking behaviour. Subsequently, in some areas in Oromia and Tigray, the rate of health facility/skilled delivery has increased significantly, an important intervention for the reduction of maternal and new-born death. In Oromia region it increased from just over 20 per cent to close to 50 per cent. This approach is being replicated in other regions where the Health Development Army is deployed.
UNICEF Ethiopia’s role has been critical in supporting the Health Development Army indirectly through training of Health Extension Workers, revising and providing tools like the Family Health Guide and engaging in policy dialogue. The Family Health Guide includes all key messages, including use of zinc for the treatment of childhood diarrhoea, a 2014 addition.

**OUTPUT 5** Improved access to and use of quality HEALTH services in selected woredas in Developing Regional States (DRS) regions

**Analytical Statement of Progress:**
To improve access to health services in Developing Regional States (Afar, Benishangul-Gumuz, Gambella and Somali), the Government of Ethiopia developed a policy to establish health posts in every kebele (sub-district) and assign two health extension workers to each health post. To help translate the policy into action, UNICEF supported Developing Regional States to develop an annual work plan (July 2013-June 2014) through a community based participatory planning exercise. The workplan focuses on selected woredas in order to address disparities in access and use of health services within regions. The selection criteria for the woredas include: population coverage, access to health services, availability of resources and implementing capacity. The activities in the workplan focus on improving the resilience of woredas and creating synergy among different sectors.

In line with the workplan, UNICEF Ethiopia assisted the planning process; supported training of more than 130 Health Extension Workers to improve their technical efficiencies on immunisation (vaccine management, cold chain use and disease surveillance) and malaria case management in various woredas, 16 Health Extension Workers in safe and clean delivery skills, and more than 790 community members on HSEP and malaria control in Gambella and Benishangul-Gumuz regions through awareness creation sessions; provided support to expand immunisation outreach sessions and assist health posts to provide regular immunisation sessions; provided supplies including medicines and vaccines; supported advocacy and social mobilisation; and supported supportive supervision. The result of these activities together with the technical assistance to improve monitoring and supervision is that 86 per cent of health posts in Developing Regional States regions are currently providing primary health care services (82 per cent in 2013).

**OUTPUT 6** Conduct CHD for biannual VAS and deworming and for quarterly nutritional screening for SAM and MAM

**Analytical Statement of Progress:**
The first round of Vitamin A Supplementation took place in all regions during the first half of 2014, reaching 9.7 million children aged 6 to 59 months (83 per cent coverage). A second round was conducted in Afar region. Community health days were conducted in Amhara, Oromia, SNNPR and Tigray, while an Enhanced Outreach Strategy was implemented in the Developing Regional States (Afar, Benishangul-Gumuz, Gambella and Somali) and UNICEF Ethiopia supported the implementation of Child Health Days and the Enhanced Outreach Strategy.

Commencing in June 2012, an initial 39 Child Health Day implementing woredas (districts) were supported to transition to routine vitamin A supplementation through the Health Extension Program, and this was subsequently expanded to cover a total of 143 woredas as at June 2014. However, vitamin A supplementation coverage is falling and is currently at 61 per cent, which is below acceptable levels (80 per cent), except in East Haraghe zone in Oromia region. Poor reporting by the woredas implementing routine vitamin A supplementation is a contributory
factor in the decline in coverage. In order to strengthen routine vitamin A supplementation and Child Health Days and maintain coverage of interventions, UNICEF Ethiopia is assisting the regions to conduct woreda level review meetings and supportive supervision.

To monitor vitamin A coverage and verify the administrative data reported by regions, UNICEF Ethiopia conducted surveys in Amhara, Oromia, Southern Nations, Nationalities and Peoples' and Somali regions in 2014. The results showed that coverage in Amhara and Oromia is less than 80 per cent.

UNICEF is working with the Ministry of Health to strengthen routine vitamin A supplementation, including a bottleneck analysis.

OUTPUT 7 100 per cent of CBN woredas will have micronutrient deficiency control program mainly targeting adolescent girls and PLW for stunting reduction outcome

Analytical Statement of Progress:
UNICEF Ethiopia successfully supported advocacy efforts to include Iron supplementation indicators in the Health Management Information System and these will be reported from 2015/2016. Iron supplementation for pregnant women is provided as part of antenatal care and antenatal care coverage is currently used as a proxy indicator for iron supplementation. Antenatal care coverage is 60 per cent. Iron folate supplementation is included in the refresher training manual for Health Extension Workers. The revised National Nutrition programme excludes provision of micronutrient/iron supplementation for adolescent girls; preferring instead food-based dietary improvement initiatives. A total of 222 (19 per cent) schools are implementing school nutrition and related Behaviour Change Communication (96 per cent of the 2015 target).

Iodized salt production and distribution coverage improved from 30 per cent in 2012 to over 95 per cent in 2014 (EPHI National Iodized salt coverage survey report). A Knowledge Attitudes and Practices assessment, targeted at salt producers and distributors, and focusing on salt iodization and legislation was completed and the recommendations will be used to update the Iodine Deficiency Disorder-Universal salt iodization communication strategy. Population Services International signed a new Programme Cooperation Agreement with UNICEF Ethiopia in 2014 in order to continue the collaboration that commenced in 2012 aimed at increasing consumer awareness on use of iodized salt and to support to Universal Salt Iodization legislation enforcement, dissemination and implementation.

OUTPUT 8 Core package of CBN will be implemented in 100 per cent of 365 CBN woredas

Analytical Statement of Progress:
In 2014, a total of 884,170 children under two years of age were reached in 378 woredas (districts) implementing the core package of Community-Based Nutrition, which includes growth monitoring for children and provision of age specific counselling to improve child feeding - both exclusive breast feeding as well as adequate, quality, complementary food at the correct frequency. The number of woredas implementing the Community-Based Nutrition package of in Oromia, Southern Nations, Nationalities and Peoples' and Amahara regions has increased by 150 since 2012. However, the growth monitoring and promotion participation rate is still low, as monthly implementation constitutes a heavy additional workload for Health Extension Workers. Efforts are underway to use the health development army to support Health Extension Workers around community mobilisation and nutrition messaging. The kebele (sub-district) reporting rate improved from 50 per cent to 82 per cent (79 per cent at end 2013) and the Growth Monitoring
and Promotion participation rate increased from 40 per cent to 49 by June 2014. Underweight prevalence declined marginally among those participating in Growth Monitoring and Promotion from 10 per cent (December 2013) to 9 per cent (June 2014). The pilot production of local complementary food in 20 woredas in four regions (Amhara, Southern Nations, Nationalities and Peoples’, Tigray and Oromia), is underway.

**OUTPUT 9** Improved access to and use of quality nutrition services in selected woredas in DRS regions

**Analytical Statement of Progress:**
Following the community Infant and Young Child Feeding (IYCF) training provided by UNICEF, women support groups were established in 32 kebeles (sub-districts) in woredas (districts) in Developing Regional States (Afar, Benishangul-Gumuz, Gambella and Somali) to support mothers with children under two years of age to practice Infant and Young Child Feeding. All of the Developing Regional States will complete the cascade training before end of 2015 so that the number of kebeles with mother support groups will increase to 50 per cent

**OUTPUT 10** Integrated Early Childhood Care and Education (IECCE) will be provided during GMP sessions

**Analytical Statement of Progress:**
Integrated Early Childhood Care and Education activities reached 884,170 children under two years of age through individual counselling of mothers on how to improve home-based care.

Since 2013, training on Integrated Early Childhood Care and Education has been included in the community based nutrition and community maternal, new-born and child health integrated refresher training. According to June 2014 data, a total of 378 woredas (districts) (327 in June 2013) are implementing the core package of Community-Based Nutrition, including Integrated Early Childhood Care and Education, and are submitting monthly reports

**OUTPUT 11** Support national capacity for training, coordination, drugs supply and monitoring of community based newborn care and referral health centres.

**Analytical Statement of Progress:**
Building on the integrated Community Case Management platform and with funding from the ELMA foundation, UNICEF Ethiopia supported initiation of Community Based New-born Care programme in seven zones in the agrarian regions (Amhara, Tigray, Oromia and Southern Nations, Nationalities and Peoples’ regions). A total of 3,782 Health Extension Workers and 1,391 health posts have been provided with the necessary skills, tools and supplies to identify and treat sick newborns. More than 75 per cent of these Health Extension Workers received one supervisory visit to ensure that they had commenced providing services and to ensure quality of care. According to preliminary analysis of UNICEF’s central database, quality of care and treatment of sick new-borns exceeds 70 per cent.

From January to June 2014, through other funding sources, UNICEF Ethiopia supported the scale up of Community-Based Newborn Care in an additional seven zones, where a total of 1,325 Health Extension Workers in 660 health posts were provided with the necessary skills, tools and supplies to identify and treat sick newborns.

Observations from the field have shown that newborns are receiving home visits as soon as they are born and a total of three visits in the first week of life, although this is not occurring
everywhere. This is the most critical step in ensuring that sick newborns are identified and this step needs to be strengthened in all implementing areas.

UNICEF Ethiopia’s role has been critical in resource mobilisation, supply procurement, capacity building and distribution and coordination of efforts together with the Ministry of Health. One of the success factors is the partnership with local and international counterparts, including Save the Children, Integrated Family Health Programme, John Snow Inc. / The Last Ten Kilometres project.

OUTCOME 11 3,200 health centres and 120 hospitals deliver quality, equitable, gender sensitive curative and lifesaving services focusing on common newborn, child and maternal illnesses and complications integrated with PMTCT by 2015.

Analytical Statement of Progress:
In 2014, UNICEF Ethiopia focused on helping to sustain the child survival gains made in Ethiopia in recent years. This included: quality technical support for policy dialogue; advocacy; capacity building and provision of life saving commodities to the Federal Ministry of Health and partners towards improving equitable access and utilisation of high impact interventions by women and children, with particular attention to pastoralist regions and the Developing Regional States. Basic Emergency Obstetric and Newborn Care service provision in 257 health facilities was supported through competency based training for 517 midwives/nurses and provision of essential supplies, commodities and equipment. Following the development and launch of the national strategic plan for elimination of Mother-To-Child Transmission of HIV and development of paediatric AIDS treatment guidelines and lifetime antiretroviral therapy for pregnant women living with HIV (Option B+) guidelines in 2013, UNICEF Ethiopia supported the roll-out of Option B+ in 2,297 health facilities.

Skilled birth attendance increased from 10 per cent in 2010 to 41 per cent in 2014, as indicated in the 2014 Annual Performance Review report; maternal antiretroviral coverage for prevention of mother-to-child transmission of HIV increased from 8 per cent in 2009 to 61 per cent in 2014, and Ethiopia’s performance ranking among the 22 priority countries for the elimination of Mother-To-Child Transmission improved. These positive results contributed to accelerated progress towards the attainment of Millennium Development Goal 5 (reduce maternal mortality) and led to a significant reduction in neonatal mortality, which will sustain the gains made on Millennium Development Goal 4 (reduce child mortality). The national neonatal mortality estimate declined from 37 deaths per 1,000 live births in 2010 to 28 in 2014.

Access to treatment for complicated cases of severe acute malnutrition has improved with 92 per cent of health centres (662) and 96 per cent of hospitals (85) running stabilisation centres as of June 2014. In addition, 66 per cent of health posts (9,655) and 53 per cent of health centres (1,224) provide out-patient treatment of the uncomplicated cases of severe acute malnutrition.

311 health facilities have been provided with the complete WASH package (68 per cent of the planned country programme target), with 90 facilities receiving the full package in the first six months of 2014. All latrine/hand washing facilities are constructed in accordance with specifications contained in the National Design and Construction Manual for WASH facilities.

OUTPUT 1 Enhance capacity to provide access to quality maternal and newborn health

Analytical Statement of Progress:
In response to the shortage of skilled nurses and midwives an additional 1,915 nurses and midwives received three weeks of intensive training followed up with supportive supervision on Basic Emergency Obstetric and Newborn Care (BEmONC) during the period January 2012 to June 2014. A total of 389 maternity providers were trained on BEmONC in 2014. The training was conducted in partnership with the Ethiopian Midwives Association, with technical support from UNICEF Ethiopia. The added skills combined with supportive supervision and mentoring increased the capacity of health workers to provide quality care to mothers and newborns in health centres. In addition, supervision and support were provided to 15 BEmONC training sites established under the partnership agreement between UNICEF Ethiopia, Federal Ministry of Health and JHPIEGO (an affiliate of Johns Hopkins University).

In partnership with the Ethiopian Paediatrics Society, newborn corner / essential newborn care training was provided to health workers from 1,523 health centres from January 2012 to June 2014. During the training, trainees from each health centre also received essential items such as resuscitation bags and suction bulb syringes. Post-training follow-up was conducted for all health centres in collaboration with regional Paediatrics Society chapters and Regional Health Bureaus and Zonal Health Departments. The health centres were found to be equipped with basic essential newborn care supplies and to be applying essential newborn care practices. As per project implementation reports obtained from the Ethiopian Paediatric Society, the newborn registration books were observed to be filled in completely and newborn care service utilisation at health centres had increased. Newborn Care is available at 57 per cent of health facilities nationally.

**OUTPUT 2** Increase number of Health Facilities implementing.

**Analytical Statement of Progress:**
To ensure a continuum of care, UNICEF Ethiopia continued to support the implementation of integrated Management of Neonatal and Childhood Illness in health centres and hospitals. Currently, there is at least one health worker with the necessary skills to provide these services to children under the age of five in each health facility. As a result, children under the age of five are assessed, classified and treated using an integrated approach; health centres give technical support in providing integrated Community Case Management services to health posts under their supervision; health centres conduct supportive supervision and performance review and hold clinical mentoring meetings to ensure quality of services provided; and bottlenecks are identified and solved.

In 2013, 16,774 children were admitted and treated (40 per cent cured, 3 per cent mortality and 3 per cent defaulter rates) and in the period from January to June 2014, 8,178 children were admitted (42 per cent cure, 2 per cent mortality and 2 per cent defaulter rates). These performance indicators are within the national protocol benchmarks, as well as international SPHERE standards. In addition, access to treatment for the complicated cases of severe acute malnutrition has improved with 29 per cent of health centres (662) and 96 per cent of hospitals (85) running stabilisation centres as of June 2014.

**OUTPUT 3** Support implementation of PMTCT programme expansion and integration to SRH/MNCH services

**Analytical Statement of Progress:**
UNICEF Ethiopia, in its role as technical lead, supported the Federal Ministry of Health and partners to develop the national strategic plan for Elimination of Mother-to-child-transmission of HIV that was completed in 2013. Since then UNICEF Ethiopia has provided financial support for
launching the strategic plan and for rolling out lifetime antiretroviral therapy for pregnant women living with HIV (option B+). UNICEF Ethiopia also provided Technical Assistance to Technical Working Groups and forums and in developing the option B+ guidelines and the paediatric care and treatment guidelines. In collaboration with Clinton Health Access Initiative and the Ethiopian Public Health Institute, the national and regional Training of trainers on PIMA POC (point of care) was conducted for 45 health centres and PIMA devices and modems were installed.

**OUTPUT 4** 380 health facilities provided with full WASH package by Woreda WASH Teams in 64 learning woredas and Dire Dawa and Harari.

**Analytical Statement of Progress:**
As at end June 2014, a total of 235 health facilities (160 at end 2013) had been provided with the complete WASH package (94 per cent of target). The provision of the complete WASH package includes: capacity building in the design of WASH facilities, construction of water supply and sanitation facilities and hygiene promotion to health institutions through construction and dissemination of information on hygiene and environmental sanitation.

The latrine and hand washing facilities are constructed according to the standard Design and Construction Manual for WASH facilities in institutions, the roll-out of which was supported by UNICEF Ethiopia. The manual contains detailed design drawings as well as bills of quantity, enabling immediate and practical application to WASH construction and rehabilitation efforts throughout Ethiopia.

**OUTPUT 5** 80 health facilities provided with full WASH package by Woreda WASH Teams in 22 DRS woredas

**Analytical Statement of Progress:**
As at end June 2014, 76 health facilities in the Developing Regional States (Afar, Benishangul Gumuz, Gambella and Somali) had been provided with the complete WASH package (95 per cent of country programme target). Fifteen of these received the package during the first half of 2014.

**OUTCOME 12** Government capacity and systems to improve sustainable access to basic WASH services strengthened at Woreda, Regional and Federal level, with a focus on evidence based prioritization and planning; cost-effective and integrated approaches to service delivery; localized decision making with a strong gender dimension, and intensive programmatic support in 80 learning districts spanning all Regions in the country.

**Analytical Statement of Progress:**
In line with the principle of universal access to WASH services, UNICEF mobilised funding from the UK Department for International Development for urban WASH programming amounting US$35 million. A pre-feasibility study was conducted for all eight towns included in the programme, including signing of a sub-agreement with a non-governmental organisation for providing capacity building support and implement hygiene promotion activities.

Direct UNICEF support for access to basic services resulted in 2,380,427 people gaining access to protected water supplies (467,018 people gained access to protected water supplies during the reporting period) and 3,254,818 people gaining access to basic/improved sanitation both in Developing Regional States (Afar, Benishangul-Gumuz, Gambella and Somali and other regions (832,646 people gained access to basic/improved sanitation). UNICEF Ethiopia’s focus in water supply continues to evolve from service delivery towards support in procurement,
contract and financial planning through the use of the Direct Payment modality of the Harmonised Approach to Cash Transfers. UNICEF also supported the development of House Hold Water Technology (local production of rope pumps) and manual drilling in four regions. UNICEF Ethiopia organised a study tour to Brazil to give government counterparts the opportunity to witness successful urban WASH programme implementation first hand.

UNICEF Ethiopia is heavily involved in the application at scale of a mobile phone based data collection system, which was successfully implemented in conducting a WASH inventory in Somali region. Experiences from Somali region will be used in updating the WASH inventories in other regions of the country.

OUTPUT 1 Capacity, systems and related hardware to plan, implement and monitor integrated and sustainable WASH services, strengthened in 64 learning woredas and in Dire Dawa and Harari

Analytical Statement of Progress:
Core capacity development in 30 selected woredas (districts) in four regions (Amhara, Southern Nations, Nationalities and Peoples’, Oromia and Tigray) is continuously provided in partnership with SNV and the four Regional Government Bureaus. The activities focused primarily on revitalising of woreda WASH Teams and strengthening their capacity in management information systems and scaling up of Guided Learning on Water and Sanitation.

The first draft of a Community Managed Project manual was finalised but the cash transfer modality is still under development. As a result, UNICEF Ethiopia is not fully applying this funding modality and is implementing it only in selected woredas of Amhara region.

UNICEF Ethiopia also supported water balance assessment in 60 schools identified for Multiple Use Services. Selection of schools for this intervention both from water secure and water scarce woredas was done in partnership with Government and non-governmental organisations.

UNICEF Ethiopia recognises the need to incorporate resilience in its upstream and downstream work.

A WASH Gender Analysis and Action Plan study was conducted by UNICEF with an objective of identifying issues related to gender disparity in WASH service delivery and informing the WASH sector in mitigating problems related to gender inequality. Gender Analysis and Action Plan actions are part of annual work plans. Implementation of the gender action plan as proposed in the study will be commenced in 2014. Preparations are complete for provision of training for Government and UNICEF staff on WASH and Nutrition focused gender mainstreaming and is expected to be conducted later in 2014. A Menstrual Hygiene Management manual is scheduled for completion in 2014.

OUTPUT 2 2.5 million men and women, boys and girls, in 64 learning Woredas and Dire Dawa and Harari use new or rehabilitated safe water supplies, managed by local water and sanitation committees

Analytical Statement of Progress:
During 2014, UNICEF WASH Section introduced at scale a Direct Payment modality for financial transactions, including the establishment of Standard Operating Procedures. Cash transfers to vendors are now made on the basis of results achieved as per procurement plans and Letters of Intent provided to Bureaus of Finance and Economic Development (BoFEDs).
This has led to significant progress in monitoring results through programmatic and spot checks. A total of 62 Letters of Intent are currently being managed and progressively monitored for water and sanitation activities with a total budget of about US$7 million. Each Letter of Intent contains specific projects/activities that are identified during the procurement process and monitored and updated.

During the first two quarters of 2014, 334,518 people were provided with safe water in the four states not classified as Developing Regional States, as well as in Dire Dawa and Hariri, against an annual target of 812,500 people (41 per cent). Cumulatively, improved water supply has been provided for 1,894,215 people as of June 30, 2014, which represents 76 per cent of the country programme target and exceeds the June 2014 target of 1,650,000 by 15 per cent.

In 2014 UNICEF WASH Section supported the commencement of urban WASH activities in eight towns located in Amhara (Maksegnit town), Oromia (Sheno, Abomsa and Welenchiti towns), Somali (Kebridehar and Gode towns) and Tigray (Wukro and Adishihu towns). Institutional contract agreements have been signed for feasibility studies/designs and Baseline studies with consulting firms and knowledge management activities with a non-governmental organisation.

**OUTPUT 3** 2.5 million men and women, boys and girls in 64 learning woredas and in Dire Dawa and Harari use basic or improved household sanitation and practice hand-washing

**Analytical Statement of Progress:**
UNICEF Ethiopia continued to provide technical and financial support to the implementation and scaling up of the Community Led Total Sanitation and Hygiene approach. This approach is implemented by Health Extension Workers with the aim to make communities open defecation free. Although many communities have achieved open defecation free status, most latrines constructed by households are unimproved. UNICEF Ethiopia is engaging in Sanitation Marketing, an approach where both demand and supply for improved sanitation products and services is promoted, and an enabling environment for improved sanitation (production and usage) is created. UNICEF has given technical support to the Government in drafting national guidelines for Sanitation Marketing, and is working with non-governmental organisations to conduct supply chain assessments, design and test prototypes and build capacity of the private sector for adopting appropriate business models. Eight **woredas** (districts) in four regions were selected for piloting sanitation marketing in collaboration with Regional Bureaus of Health. The Human Centred Design study has been finalised and the results discussed with stakeholders under the leadership of the Ministry of Water, Irrigation and Energy. Actions are now being undertaken in accordance with the recommendations received. Other technological options for sanitary platforms are being explored.

Implementation of the Community-Led Total Sanitation and Hygiene approach has been successful and some 3,126,321 people (more than 625,000 households) have gained access to self-constructed latrine facilities since 2012 which exceeds the country programme target of 2,500,000 by end 2015. Through the application of Community Led Total Sanitation and Hygiene a total of 6,415 villages attained open defecation free status. The practice of hand washing and transitioning from basic to improved latrines are both showing progress, although challenges remain. Sanitation marketing activities are starting to be implemented to address the challenges.

**OUTPUT 4** Provision of integrated WASH services for 300,000 people in 22 DRS Woredas
Analytical Statement of Progress:
486,212 people have been provided with improved water supply, significantly exceeding the
country programme target of 300,000. This is due to the fact that a significant budget from Other
Resources was allocated to the construction of water supply schemes in four regions. However,
self-constructed latrine use continues to be below the target set in the annual plan. Cumulatively
128,947 people (25,700 households) have been reached, which represents only 43 per cent of
the country programme target (65 per cent by June 2014) for the Developing Regional States
(Afar, Benishangul Gumuz, Gambella and Somali). Integrated WASH coverage (households
provided with water supply and latrine facilities) is at 61 per cent, compared with a target of 70
per cent. However, provision of integrated WASH services has accelerated recently as a result
of Community-Led Total Sanitation and Hygiene activities and now appears to be on track. The
challenges in the implementation of Community-Led Total Sanitation and Hygiene in the
Developing Regional States include the presence of pastoralist communities who do not take
part in the triggering activities, high expectation of subsidy, different approaches used by
various organisations and the lack of well-trained facilitators. UNICEF focused on conducting
training in Somali Region which helped build local facilitation capacity. UNICEF supported the
Ministry of health to develop Community-Led Total Sanitation and Hygiene implementation
guidelines for pastoralist communities. The guideline helps in harmonising activities
implemented by different organisations.

OUTCOME 13 Ministry of Education, Regional Education Bureaus, Woredas Education Offices,
School Clusters and schools have the organizational, human and institutional capacity and
improve sector performance and achieve learning performance, with emphasis on reaching
remote/pastoralist and vulnerable populations in selected lagging woredas including in the DRS
by 2015.

Analytical Statement of Progress:
The Ministry of Education, 11 Regional Education Bureaus, and all 142 target woredas
(districts) have their own Sector Development Programme/strategic plans (2010-2015).
Capacity building interventions included: (a) training of 10,074 experts, supervisors and
principals (19 per cent female) on management, planning, and results based monitoring and
reporting (5,597 trained in the reporting period); (b) Provision of 1,000 computers to woredas in
two regions; (c) The Education Management Information System units in the Ministry of
Education, 11 Regional Education Bureaus and 142 woredas (25 in the reporting period) have
been equipped with computers, Global Positioning System equipment and digital cameras. A
consulting firm is on board to interface the Education Management Information System with
RALS / Geographic Information System; (d) over 947 experts were trained on data collection,
analysis and utilisation. Biannual enrolment data are being collected in 142 woredas (37
commenced in the reporting period); (e) development of a user-friendly Schools Management
Information System software is in progress for completion in 2015.

13 technical assistants were deployed in the four Developing Regional States (Afar,
Benishangul Gumuz, Gambella and Somali) to build capacity of Regional Education Bureaus.
Studies on assessing the capacity gap in the Developing Regional States, a strategy to reach
out-of-school children, and a contextual analysis of equity, social cohesion and resilience in the
Developing Regional States were initiated.

Children/youth multimedia capacity building, production and dissemination of a two-year serial
drama on cross-sectoral issues, and training of media producers/journalists working with
children and youth are underway. Multimedia training packages were finalised; and 72 media
producers were trained in creative production to enable them to better communicate thematic
messages. Programmes on the value of sending children, particularly girls, to school were disseminated on the national radio for three months.

UNICEF is an active member of the Education Development Assistance Group; leads the UN Development Assistance Framework-Basic Social Services Education Sub-group; and co-chairs the Education Cluster, Early Childhood Care and Education Task Force and the Education Management Information System Working Group. UNICEF participated in the 2014 Education Sector Development Plan Joint Review Mission that focused on implementation of the curriculum at school level.

Consultative meetings with the Ministry of Education and Regional Education Bureaus facilitated coordination, review, experience sharing and mapping out future directions with partners, including US Agency for International Development, the UN Education, Scientific and Cultural Organization, Save the Children, and Universities.

**OUTPUT 1** By the end of 2015, effective sector performance capacity enhanced in MOE, 11 REBs and UNICEF supported Woredas and schools to enable them to develop, implement, manage and monitor need-based sector development plans, including a longer term plan for sustained capacity development.

**Analytical Statement of Progress:**
The Federal Ministry of Education and the 11 Regional Education Bureaus each has a five-year Education Sector Development Programme covering the period 2010-2015. All nine regions and the two city administrations as well as 142 target woredas (districts) also have Sector Development Programme/strategic plans.

To support implementation of the strategic plans, a total of 35 Ministry and Regional Education Bureau experts (14 per cent female) and 10,039 educational managers, planners, supervisors and principals (19 per cent female) were trained on educational management planning, results based monitoring and reporting (5,597 trained in the reporting period). The low proportion of females (19 per cent) among the trainees is indicative of the low position held by females in leadership and management positions.

The 1,000 computers that were distributed to UNICEF-supported woredas in Oromia and Amhara towards the end of 2013 have been used to create an enabling environment for data storage and analysis. Oromia Region distributed 29 motorbikes to 20 cluster resource centres in the reporting period to enhance supervision and monitoring.

The Ministry of Education deployed 13 technical assistants to the four Developing Regional States to build Regional Education Bureau capacity through on the job-training, including capacity building for planning and Results-Based Management for effective implementation of the sector plans.

Three studies: "Assess the capacity gap of the education sector in the four developing regional states and recommend ways of improving and strengthening the system"; "Developing a comprehensive strategy document to reach out-of-school children by 2015"; and "Equity, Social Cohesion and Peacebuilding Through the Education Sector: Context Analysis for the Developing Regional States of Ethiopia" were conducted at Federal level and draft reports received.
In addition, 44 action researches were conducted by teachers in Amhara Region to improve quality of learning and the five best examples were identified and awarded at the Regional Education Research Symposium.

**OUTPUT 2** Enhanced evidence based planning at the federal level (MoE), in 11 REBs and UNICEF supported WEOs by the end of 2015, based on data generated by an established and functional EMIS system with GIS interface.

**Analytical Statement of Progress:**
UNICEF Ethiopia’s support to the Education Management Information System aims at developing capacities in the Ministry of Education, 11 Regional Education Bureaus and 142 target woredas (districts) for effective data management and utilisation. With UNICEF support, the Education Management Information System units in the Ministry, the Regional Education Bureaus and 142 woredas have been equipped with computers, Global Positioning System equipment and digital cameras (25 woredas equipped in the period January to June 2014). A consulting firm has been engaged to interface the Education Management Information System with RALS/Geographic Information System, with completion expected by end 2014.

With UNICEF support, the collection, analysis and production of bi-annual enrolment data has been initiated in all 142 UNICEF supported woredas (37 in January to June 2014). This is expected to enable better understanding of six-monthly enrolment and retention patterns, rather than relying on annual school census data. During the first six months of 2014, technical training on sex and geographic disaggregated data collection, analysis and utilisation was conducted for 947 planning and Education Management Information System experts in Afar, Somali, Gambella and Addis Ababa. All UNICEF supported woredas prepared sector plans using data disaggregated by sex and geographical location. During the first six months of 2014, 51 woredas in Amhara, Somali and Benishangul Gumuz regions reported having revised / updated their sector plans using woreda level data.

With UNICEF support, the Ministry of Education is developing user-friendly School Management Information System software to decentralise the Education Management Information System to woredas and schools. A request for technical and financial proposals has been advertised, and the full design, development, installation and effective utilization of the software will be consolidated during the next 17 months.

**OUTPUT 3** Improved caregiver/duty bearer knowledge, attitude and practices; increased demand and utilization of services and improved social norms related to EDUCATION

**Analytical Statement of Progress:**
Through a Programme Cooperation Agreement with Population Media Centre signed in 2013, three interventions related to capacity building and behaviour change communication are underway; children/youth multimedia capacity building, production and dissemination of a two-year serial drama on cross-sectoral issues, and training of media producers / journalists working with children and youth. The multimedia training packages have been reviewed and finalised under the leadership of the Ministries of Education and Women, Children and Youth Affairs. Seventy two media producers from Education Media Centres were trained in creative production to enable them to better communicate priority thematic messages.

With the main objective of increasing communities’ knowledge of the value of sending their children, particularly girls, to school, three months of radio programmes were aired on national radio. In addition, a serial drama ‘Yberhan Atsnafat’ (Rays of Light in Amharic) will run over the
coming 18 months. The drama introduces priority themes, including education, interwoven with the realities of rural and urban family life.

**OUTPUT 4** Support travel, mobility of UNICEF staff for implementation of CP activities

**Analytical Statement of Progress:**
UNICEF Education programme staff continued to be heavily involved in programme development, including undertaking situation assessments, managing programmes, monitoring, participating in the Development Assistance Group Education technical working group and sector coordination meetings, participating in and facilitating education and other multi-sectoral advocacy events, organising / facilitating workshops and participating in joint technical reviews and programme / project evaluation activities.

In 2014, UNICEF Education staff led the UN Development Assistance Framework-Basic Social Services Education Sub-group comprising UNICEF, UN Educational, Scientific and Cultural Organization, World Food Programme and the Ministry of Education. The Education team actively participated in the UN Gender Joint Programme, and took the lead on Output 2 on Education. UNICEF and Save the Children co-chair the Education cluster in Ethiopia.

UNICEF actively participated in the 2014 Education Sector Development Joint Review Mission with the Ministry of Education and development partners. The Joint Review Mission focussed on implementation of the curriculum at school level. UNICEF’s participation in the sector includes co-chairing the Education Cluster, Early Childhood Care and Education Task Force and the Education Management Information System Working Group.

UNICEF Education staff participated in individual trainings including Equity, Quality and Leadership in Education and Dynamic Leadership Certificate programme with Harvard University/Business Publishing, Monitoring and Evaluation and Teacher Policy with World Bank Institute as well as in group trainings such as Communication for Development (C4D) in South Africa and Programme, Policy and Procedures organised by the office.

Consultative meetings with Ministry of Education and Regional Education Bureaus, and review meetings by the Regional Education Bureaus and Bureaus of Finance and Economic Development were conducted to coordinate, review, and share experiences, identify good practices and challenges, and map out possible responses and future direction.

**OUTCOME 14** Children from pre-natal stage to age 7 in selected Woredas are well nourished, healthy, and are physically, emotionally, socially, and cognitively ready to learn by 2015.

**Analytical Statement of Progress:**
UNICEF’s current country programme was developed based on the government’s Early Childhood Care and Education policy and strategy framework launched in 2010 to deliver integrated services for children. Following the development of the comprehensive integrated parental education training manual, 13,574 (3,297 in 2014) education and health professionals were trained on parental education as trainers in Oromia, Tigray, Benishangul Gumuz and Southern Nations, Nationalities and Peoples’ regions. Training has been conducted for 440,548 parents and caregivers on childcare, parenting and early stimulation (75,548 in 2014). Implementation of parenting education is on track to achieve the Mid-Term Review revised target of 500,000 parents and caregivers reached by 2015.

With support from UNICEF Ethiopia, in 2014 a total of 166,223 children (49 per cent girls)
enrolled in both formal and non-formal school readiness programmes. However, there is limited
capacity in terms of sufficient trained professionals and the training curriculum for Early
Childhood Care and Education may need revision. UNICEF Ethiopia is providing technical
support to the Ministry of Education to enhance the capacity of Parenting Education and
Teacher Education colleges to better deliver Early Childhood Care and Education.

Peace building education through Early Childhood Development was initiated by the Ministry of
Education in 2013 to build capacity and generate evidence. The College of Education and
Behavioural Studies, Addis Ababa University is expected to provide the technical support
towards expansion of the Early Childhood Development approach in the four Developing
Regional States (Afar, Benishangul Gumuz, Gambella and Somali) through capacity building,
development of materials, and research on parenting education and socialisation through quality
parent-child interactions to promote peace building and social cohesion.

Based on positive experiences to date, the Child-to-Child programme has been scaled up in
some regions resulting in increased access to Early Childhood Care and Education services for
26 per cent of children.

**OUTPUT 1** By the end of 2015, formal and non-formal school readiness and pre-school
initiatives implemented and scaled up nationally for enhanced awareness and capacity on
ECCE programming at all levels, with threefold increment in registered number of pre-school
boys and girls with a focus on the most vulnerable in UNICEF supported Woredas

**Analytical Statement of Progress:**
The Child-to-Child approach is as a major strategy to provide school readiness opportunities for
disadvantaged children as part of the Government's Early Childhood Care and Education policy.
As at June 2014, 436,223 children (49 per cent girls) enrolled in non-formal school readiness
programmes had improved their school readiness (including 166,223 in the first six months of
2014) in the targeted *woredas* (districts) in Southern Nations, Nationalities and Peoples',
Somali, Amhara, Tigray and Oromia regions, with UNICEF support. A syllabus and teachers’
guide for 'class zero' and pre-literacy, pre-numeracy and environmental science workbooks
have been developed and shared with the regions for adaptation and translation into local
context and language. The parental education training manual has been reviewed by experts
from the University, Ministry of Education and Regional Education Bureaus. Review and
validation for inclusion in the Functional Adult Literacy syllabus has been completed and
integration of the manuals will take place in January 2015.

Southern Nations, Nationalities and Peoples', Somali, Amhara and Benishangul Gumuz regions
have completed translation, adaptation and printing of the Child to Child materials, benefiting
over 50,000 children. In 2014, the supplementary materials on hygiene, sanitation and nutrition
developed by the Child to Child Trust were adapted and translated into local context and
language and will be printed in early 2015. In 2014, a consultative review meeting was held with
ministries of Health, Education, Women, Children and Youth Affairs, and Regional Education
Bureaus and other partners on scaling up Early Childhood Care and Education interventions.

An Impact evaluation of the Child to Child programme by the University of Toronto, Canada has
been completed and the final report is being reviewed. Positive outcomes in terms of pre-
literacy, pre-numeracy and school readiness were identified. A dissemination and action
planning workshop is scheduled for February 2015.
OUTCOME 15 All out-of-school girls and boys living in selected lagging woredas including in the DRS and those affected by emergencies are accessing, participating in and completing general education of high quality by 2015

Analytical Statement of Progress:
A 2012 study by the Ministry of Education and UNICEF revealed that there were over 3 million out-of-school children in Ethiopia. A national media campaign “All Children in School by 2015”, launched in 2013, continued in 2014. The back-to-school campaigns and community dialogue brought over 167,000 children to school.

A conflict-sensitive context analysis was undertaken in the four Developing Regional States (Afar, Benishangul Gumuz, Gambella and Somali) to support programming for improved equity in education service provision, social cohesion and resilience.

218 Alternative Basic Education Centres have been established in the woredas (districts) outside of the Developing Regional States since 2012 (40 in the reporting period), benefiting 6,000 pastoralist children (54 per cent female). 168 Alternative Basic Education Centres have been upgraded to second cycle primary (28 in the reporting period), enabling 6,203 children (44 per cent female) who would have dropped out due to long distances to school, to continue their education. Renovation of classrooms and provision of furniture made learning spaces child friendly for 30,940 students (42 per cent female) (5,043 in the reporting period).

Pedagogical and classroom management training was given to 3,232 Alternative Basic Education facilitators (42 per cent female); 2,063 (31 per cent female) in the reporting period. Upgrading the qualifications of 195 facilitators (20 per cent female) commenced in Southern Nations, Nationalities and Peoples’ Region in partnership with college of teachers' education.

Capacity of 744 (35 per cent female) personnel in the 22 woredas in Developing Regional States was enhanced in educational planning and management. 359 teachers (27 per cent female) were trained on school improvement and girls’ education. 12 Alternative Basic Education Centres were constructed benefitting 3,600 pastoralist children (40 per cent female). Learning and sanitary materials were provided to 4,094 girls; and Information and Communications Technology centres were established, serving over 3,500 girl students in Afar.

Over 900 parents (50 per cent females) were sensitised on positive parenting practices, peace-building and resilience. 309 educational personnel (26 per cent female) were trained on peace-building, gender-sensitive student-centred teaching methodologies and prevention of Gender-Based Violence. Over 180 (40 per cent female) health extension workers and teachers were trained on parental education.

Revision of the National Gender Strategy in Education is being finalised. A school-based gender violence monitoring tool, life-skills module, Code of Conduct, and a comprehensive framework for girls’ education were developed. In Southern Nations, Nationalities and Peoples’ Region, 20,000 copies of booklets containing stories of model girls and women were distributed to 1,048 schools to inspire female students.

OUTPUT 1 By the end of 2015, cost effective approaches and modalities of education service provision, including ABE, put in place for accelerated learning of out of school boys and girls in UNICEF supported Woredas in all the 11 regions.
**Analytical Statement of Progress:**

Between January and June 2014, Afar Regional Education Bureau constructed and furnished 24 Alternative Basic Education Centres in eight supported woredas (districts) benefitting 3,600 pastoralist children (60 per cent female). Construction of 16 new centres was completed in Oromia Region providing access to basic education to 2,400 out-of-school children (46 per cent female). Renovation of old classrooms was carried out in seven learning spaces and construction of three latrine blocks and six shallow wells was completed in nine learning spaces in Gambella Region benefiting over 7,000 students (47 per cent girls).

A total of 168 Alternative Basic Education Centres have been upgraded to second cycle primary status as at June 2014. During the first half of 2014, one centre was upgraded to formal primary status and school materials and furniture were provided in Tigray Region benefiting 350 children (55 per cent female). Afar Region upgraded 15 existing Alternative Basic Education Centres in five woredas to second cycle primary schools benefitting 2,250 pastoralist children (40 per cent female). Similarly, 12 centres were upgraded in Oromia Region benefiting 3,603 children (48 per cent female).

Building the pedagogical capacity of facilitators is critical to improving the learning / teaching process in Alternative Basic Education Centres. To this effect, a total of 3,232 facilitators (1,368 female) received on-the-job training in the first six months of 2014. Of these, 31 female Alternative Basic Education facilitators in Tigray and 2000 facilitators (600 female) in Oromia were trained on basic pedagogy and classroom management. Southern Nations, Nationalities and Peoples’ Region has initiated the training and upgrading of qualifications of 195 (39 females) facilitators in partnership with the regional college of teachers’ education.

**OUTPUT 2** Improved access to and use of quality basic education services in select woredas in DRS regions by 2015

**Analytical Statement of Progress:**

The Developing Regional States Joint programme is being implemented in 22 woredas (districts) of Somali, Benishangul Gumuz, Afar and Gambella.

Capacity of 1,030 (336 female) education personnel (286 in the first half of 2014) in evidence-based planning, management and improved access and quality of education was enhanced; 359 teachers (27 per cent female) were trained on School Improvement Programme and promotion of girls’ education.

In Somali region, 3,000 children (35 per cent girls) were reached with remedial classes, HIV/AIDS, Life Skills and Mini Media clubs. 167,000 out-of-school-children were enrolled through back-to-school campaigns and community dialogue. Afar region provided sanitary materials to 100 schools and 56 Alternative Basic Education Centres benefiting over 2,000 students (60 per cent females). Old classrooms were renovated in five remote schools in Gambella creating child friendly learning spaces for over 900 students (47 per cent girls); and Information Communications Technology centres were established in six cluster schools to create opportunities for over 3,500 girl students from 19 satellite schools to acquire basic computer skills and access to information.

In Afar, 12 Alternative Basic Education Centres were constructed and furnished benefitting 3,600 pastoralist children (40 per cent female). 17 Education Management Information System unit heads and supervisors were trained on data collection and analysis and 125 education personnel (30 per cent female) were oriented on Education Development Management. Reference books were provided to two cluster resource centres benefiting about 1,200 children.
In Afar and Benishangul Gumuz 904 parents (50 per cent female) were oriented on early stimulation and positive parenting practices, peace-building and resilience. In Gambella and Benishangul Gumuz, 309 experts, directors, supervisors and club leaders (26 per cent female) were trained on guidance and counselling, peace-building skills, gender-sensitive student-centred teaching methodologies and prevention of Gender-Based Violence. A total of 183 (40 per cent female) health extension workers, education experts, teachers and other stakeholders were trained on parental education.

**OUTPUT 3** By the end of 2015, gender parity in terms of NIR at pre-primary, primary and general secondary education achieved in UNICEF supported woredas in all the 11 regions.

**Analytical Statement of Progress:**
UNICEF Ethiopia participates in the UN Gender Joint Programme (2012-2015) to support women's empowerment and gender equality. UN Girls Education Initiative partners contribute to national girls’ education efforts through support to the Ministry of Education and specific projects. Nationally, girls' primary education completion rate was 52 per cent while the Gross Enrolment Rate in secondary education was 37 per cent in 2013/14, representing small increases over 2011/12. Gender equity is a pillar of the Education Sector Development Plan (2010/11-2014/15).

A revised National Gender Strategy in Education was endorsed. The strategy will be adapted by all regions and be used to enhance systematic mechanisms of supporting girls’ education in a more comprehensive fashion. The Ministry of Education has developed a school-based gender-based violence monitoring tool, a life skills module and a Code of Conduct to address sexual violence in schools.

Recognising some weaknesses in support to girls' education, the Ministry of Education developed a comprehensive framework of girls’ education support package. This will facilitate a common framework of support and involves grassroots stakeholders in beneficiary selection and monitoring mechanisms, including class attendance and learner performance. Regions that are benefiting from such support have started implementing the framework by adapting it to their respective context and rolling out to woredas (districts) and schools in the form of guidelines for implementation.

Since January 2014, an additional 1,982 girls in lower secondary schools in three regions have been supported with “girls' selected packages”. The support included provision of basic educational materials, family based scholarship and provision of water schemes and electric power services for girls living in hostels. In Southern Nations, Nationalities and Peoples' Region, 20,000 copies of booklets containing stories of 'model' girls and women in the region were printed and distributed to 1,048 target schools to inspire female students.

**OUTPUT 4** 376 primary schools provided with full WASH package by Woreda WASH Teams in 64 Learning Woredas and Dire Dawa and Harari

**Analytical Statement of Progress:**
206 (43 in the reporting period) schools have now been provided with the complete WASH package, which represents 55 per cent of the planned Country Programme target for 2015. As a result 206,000 students and school communities are benefiting from safe water supply and sanitation facilities. The WASH ‘package’ includes a reliable year-round water supply, gender-
segregated toilet blocks, hand washing facilities, and hygiene promotion. School sanitation clubs were also established in each location, complemented by teacher training. Interventions are intended to serve as an advocacy strategy with government and development partners to leverage resources for WASH in schools. These are expected to improve girl’s enrolment, retention and transition rates.

The latrine and hand washing facilities are constructed based on the standard “Design and Construction Manual for WASH facilities in institutions”, the publication of which was supported by UNICEF. The Manual represents an important step in the standardisation of both construction norms and unit costs and contains detailed design drawings as well as bills of quantity, enabling immediate and practical application to WASH construction and rehabilitation efforts throughout Ethiopia.

60 schools in 30 woredas (districts) in four regions are linked with woreda Education, Health and Water offices for demonstration of vegetable gardens, as part of Multiple Use Services. Water balance studies are also conducted for schools to determine water requirements and gaps for domestic and productive use. Solar power water pumping technology is applied in selected schools and training is provided on solar powered water pumping technologies to participants from the federal government and the four regional states. UNICEF is in the process of developing a lessons learned document on solar powered water pumping experiences in Ethiopia.

**OUTPUT 5** 74 primary schools provided with full WASH package by Woreda WASH Teams in 22 DRS Woredas

**Analytical Statement of Progress:**
A total of 35,750 students in 55 schools have been provided with safe water supply and sanitation facilities (74 per cent of the Country Programme target of 74). The WASH ‘package’ includes a reliable year-round water supply, gender-segregated toilet blocks for girls and boys, hand washing facilities, and hygiene promotion. School sanitation clubs were also established in each location, complemented by teacher training. Interventions are intended to serve as an advocacy strategy with government and development partners to leverage resources for WASH in schools. These are expected to improve girl’s enrolment, retention and transition rates.

**OUTCOME 16** 204 All school girls and boys living in lagging woredas including in the DRS are demonstrating core learning competencies through the School Improvement Programme (SIP) as defined by the National Curriculum Standards System and measured by the National Learning Assessment for grade four by 2015

**Analytical Statement of Progress:**
Following the release of the 2007 National Assessment and Early Grade Reading Assessment (2010), both of which indicated low learning outcomes in grades 4 and 8, US Agency for International Development and UNICEF Ethiopia initiated support to the Ministry of Education. USAID has focused on revising the Mother Tongue syllabus. UNICEF Ethiopia has targeted support to three Regions (Amhara, Addis Ababa and Harari) and at the first cycle of primary education to improve classroom instruction and assessment in Languages (Amharic, English), Mathematics and Environmental Science.

4,906 teachers, school cluster supervisors and education experts (1,781 female) have been trained in Amhara, Addis Ababa and Harari in crafting Minimum-Learning Competency-based classroom tests to determine learners’ competency levels and provide appropriate instruction to
ensure learners achieve desired standards. In the process 9,236 test items aligned with pacing
guides and Minimum Learning Competency were constructed for English, Amharic,
mathematics and environmental science.

Since the initiation of the Africa Adaptation Project, which aimed to establish an integrated
approach to Ethiopia’s management of climate change opportunities and risks, UNICEF has
continued implementation of Environmental Education and Climate Change in seven regions.
An Environmental Education and Climate Change scale-up strategy was drafted in collaboration
with the Ministry of Education to contribute to the Education Sector Development Plan IV
targets, namely: “50 per cent primary school learners have access to innovative Environmental
Education by 2015”. The strategy also aims to contribute to “resilience” through education.
Environmental Education and Climate Change is one of the core subjects from grade 1 and
effective instructional practices aim to contribute to improved learning outcomes and also
changes in learners' behaviours, relating to environmental awareness, protection and
adaptation practices in school, home and community.

To date, 8,162 (2,221 female) education personnel and other key stakeholders have been
trained on the implementation of context relevant Environmental Education and Climate
Change. In Tigray region, establishment of Environment Clubs was scaled up in 43 School
Cluster Resource Centres in eight UNICEF targeted woredas

OUTPUT 1 By end of 2015, teachers, supervisors & other education personnel effectively use
classroom based assessment system at pre- primary through first cycle of primary including
ABE equivalent for an increased percentage of learners, girls and boys, demonstrating a
mastery of MLCs at each grade level.

Analytical Statement of Progress:
The current status of learning is benchmarked on The National Learning Assessment (2007)
that revealed that nationally by grade 4 half of students have barely mastered the basic grade
level competencies. The 2010 Early Grade Reading Assessment reports that a third of Grade 2
and a fifth of Grade 3 students cannot read a single word in their mother tongue. This triggered
action by development partners, including the US Agency for International Development and
UNICEF Ethiopia to demonstrate different approaches to improving learning outcomes. UNICEF
Ethiopia is focusing on ‘assessment for learning’ as a strategy that will contribute to the
Education Sector Development Plan IV target of 70 per cent of learners in all grade levels
scoring at least 50 per cent in examinations and assessments of every subject by 2015. In order
to monitor progress, a baseline study was conducted in schools in UNICEF supported-woredas
(districts) which revealed that within the first two grades learners are performing at the required
standard, but by Grade 4 the majority have fallen behind and girls generally perform worse than
boys.

UNICEF focused on supporting the Regional Education Bureaus to build teachers’ capacities in
effective and gender responsive instruction and assessment.

To date, a core group of 4,906 teachers, school cluster supervisors and education experts
(1,781 female) have been trained in Amhara, Addis Ababa and Harari.

In 2014, a total of 3,679 (1,253 females) Parent Teacher Student Associations, teachers,
principals, and cluster supervisors in Amhara and Addis Ababa participated in training activities
to create awareness on the importance of the classroom based assessment system and to
enhance teachers' knowledge on Minimum Learning Competency. As a result, teachers have
started implementing/practicing Minimum Learning Competency-based assessment and remedial action benefiting 748,800 children (366,912 girls and 381,888 boys) across 2,946 schools in the three regions.

OUTPUT 2 By the end of 2014, national and international good practices in environmental education and climate change implemented, documented, shared and scaled up

Analytical Statement of Progress:
Since the initiation of the Africa Adaptation Project in 2010, which aims to establish an integrated approach to management of climate change, UNICEF Ethiopia has continued implementation of Environmental Education and Climate Change in seven regions and a strategy has been drafted by UNICEF and the Ministry of Education. This strategy also aims to incorporate “resilience” into education sector strategic planning processes. Environmental Education and Climate Change is a core subject from Grade 1 and effective instructional practices aim to contribute to improved learning outcomes, changes in behaviour relating to environmental awareness, protection and adaptation practices in the home and community, and contribute to resilience and peace-building.

To date, a total of 8,162 (2,221 females) education personnel and key stakeholders (student club members, kebele [sub-district]) managers, health and agricultural extension workers, and community leaders) have been trained on the implementation of Environmental Education and Climate Change (3,256 as at December 2013). A total of 118 school environmental education clubs are active in Amhara, Benishangul Gumuz, Tigray and Southern Nations, Nationalities and Peoples' regions. Clubs are established in 837 Schools/School Cluster Resource Centres (712 as at December 2013) allowing 16,740 (10,680 in December 2013) learners (45 per cent girls) to be involved in improving school-community partnership and scaling up Environmental Education and Climate Change adaptation and resilience building. In Tigray, solar pump installation and maintenance training was provided to 27 personnel as part of appropriate technology options for climate change adaptation.

During the first six months of 2014, in Amhara, Addis Ababa and Oromia 4,697 (1,403 female) teachers and community members have been trained on school based Environmental Education. In Tigray, establishment of Environment Clubs was scaled up in 43 School Cluster Resource Centres in eight UNICEF targeted woredas (districts) and more than 2,000 indigenous tree seedlings have been planted.

OUTCOME 17 Effective child friendly justice system operationalized in all regions.

Analytical Statement of Progress:
UNICEF Ethiopia supports federal and regional justice institutions to strengthen institutional and technical capacity to deliver child friendly services nationally. UNICEF Ethiopia supported the renovation of child protection units and child friendly benches, and provided supplies in a total of 16 woredas (districts). As a result, fully functional child friendly justice systems comprising child protection units and child friendly benches are operational. Simultaneously, 1,618 justice professionals; mainly police officers and judges, underwent in-service training on child abuse investigation techniques and justice for children. 16 social workers were recruited and trained on investigation of cases, interviewing and counselling of children. Children in contact with the law are now able to access child sensitive investigation and adjudication procedures in line with international and national minimum standards. In order ensure sustainability and effectiveness, support has been given to improve coordination among Federal and regional supreme courts in the management and implementation of the child justice programme. A regular (annual) peer
review platform on justice for children was officially formed with the signing of a Memorandum of Understanding involving presidents of the Federal Supreme Court and corresponding presidents of regional supreme courts. This initiative aims to improve sharing of experiences and best practices among these institutions to strengthen implementation and deliver results. The Court Advisory Body initiative, which is operational at Federal level, is being replicated in Oromia Regional State. The initiative brings together a pool of social workers and lawyers under the auspices of child friendly benches to provide technical assistance on mediation, counselling, investigation of child cases on the relevant child offender, child victim and family benches. As part of efforts to improve the treatment of children deprived of their liberty, and introduce diversion and restorative justice practices, community-based diversion facilities are being established in six woredas in Oromia, Southern Nations, Nationalities and Peoples' and Amhara regions.

In order to improve children's access to child friendly legal aid, a strategic partnership was formed between the Federal Supreme Court and regional universities and law schools. In Southern Nations, Nationalities and Peoples' and Oromia regions, university legal aid clinics were strengthened and technical and material assistance was provided to expand outreach services and improve data management systems.

OUTPUT 1 Institutional and technical capacity of the justice organs and professionals increased to improve children's access to justice and delivery of legal services

Analytical Statement of Progress:
During the reporting period, UNICEF Ethiopia focused on strengthening of the institutional and technical capacity of justice institutions and professionals to deliver child friendly services nationally. Renovation of child protection units and child friendly benches, and provision of supplies, helped strengthen the system in a total of 16 woredas (districts). 1,618 justice professionals (police officers and judges) underwent in-service trainings on issues of child abuse investigation techniques and justice for children, against a Country Programme target of 6,000 by end 2015. In addition, 16 social workers were recruited and trained to support investigation of cases as well as interviewing and counselling of children. In order to improve coordination among Federal and regional supreme courts in the management and implementation of the child justice programme an annual peer review platform on justice for children was formed with the signing of a Memorandum of Understanding involving presidents of the Federal Supreme Court and corresponding presidents of regional supreme courts. This initiative is aimed at improving sharing of experiences and best practices among these institutions to improve effectiveness of programme implementation and delivery of results. Similarly, the Court Advisory Body initiative, which has been operational at Federal level is now being replicated in Oromia Regional State. The initiative brings together a pool of social workers and lawyers under the auspices of child friendly benches to provide technical assistance on areas of mediation, counselling, and investigation of child cases on the relevant child offender, child victim and family benches. As a combined outcome of these investments children in contact with the law in the target locations – child offenders, victims and witnesses, and children in need of care and protection are provided with child friendly and gender sensitive investigation, prosecution and adjudication processes.

OUTPUT 2 Standardised system on legal aid and diversion in place at federal and regional level to benefit children in contact with the law (*)

Analytical Statement of Progress:
UNICEF has forged a public-private partnership towards improving children’s access to diversion in target regions. As a result of this partnership community based diversion programmes are operational in Oromia, Southern Nations, Nationalities and Peoples’ and Amhara regions. This investment has enabled children who are committing non-serious offences to be systematically screened and diverted to community based diversion facilities for their rehabilitation and reintegration, as opposed to undergoing adversarial judicial processes that may entail incarceration. This intervention is helping to protect children from potential social and psychological impacts they may face as a result of exposure to formal justice processes.

In the area of improving children’s access to child friendly legal aid, a strategic partnership was forged with the Federal Supreme Court and regional universities and law schools. In Southern Nations, Nationalities and Peoples’ and Oromia regions university legal aid clinics were strengthened through technical and material assistance to expand outreach services and improve data management systems.

OUTCOME 18 National child focused social welfare system strengthened and increased availability of social welfare services in all regions.

Analytical Statement of Progress:
Establishing a strong Child Well-Being Database requires the assessment and identification of existing programmes and services as well as identification of relevant indicators. A national Management Information System assessment was conducted, the report of which identified child-focused indicators at federal levels. The analysis of the indicators was conducted with the active participation of stakeholders at federal level and the process of developing the database has commenced.

OUTPUT 1 HR strategy defined for social welfare workforce, including defined scope of practice and accreditation system (*)

Analytical Statement of Progress:
At the federal level, the assessment of Human Resources needs for implementation of the Social Protection Policy was completed and will be followed by the development of a curriculum, scope of work, a competency framework for social work development and overall systems building. This will contribute to training of the social work workforce in line with the government approved Technical and Vocational Education and Training model. However, the process was delayed as the Ministry of Labour and Social Affairs was not able to move the implementation of the joint Action Plan with the Ministry of Education. At regional level (Oromia, Tigray, Southern Nations, Nationalities, and Peoples’, Gambella, Benishangul Gumuz, Somali and Amhara) a total of 850 participants (430 CCC members and 86 Focal persons of social affairs) from 86 Tabias benefited from a 3-day refresher training on Community Resource mobilisation and utilisation, financial management and documentation. These trainings are designed to address the current needs for social workers to provide social services at the community level. Consultations with the Ministry of Labour and Social Affairs to link federal level social workforce systems development to the community level training of para-social workers are ongoing.

OUTPUT 2 Child well-being MIS including children in care and other registered groups of vulnerable children in place

Analytical Statement of Progress:
The national assessment of the Child Well-Being Management Information System was completed and the report was validated in a series of workshops attended by members of the
National Child Well-Being Steering Committee. This was followed by the development of a Monitoring and Evaluation framework that was subsequently endorsed by the Ministry of Women, Children and Youth Affairs. In terms of database development, a Task Force was established under the leadership of the Ministry of Women, Children and Youth Affairs to develop a Terms of Reference for the recruitment of consultants to develop the database and this process is currently ongoing.

OUTPUT 3 Appropriate alternative care regulatory framework and social welfare services for children without parental and adequate care operationalised (*)

Analytical Statement of Progress:
There is a growing interest in fostering children in the regions that commenced implementation of alternative care in 2011 and there are many potential foster parents who are waiting to receive children. Foster care placement is proven to be a good opportunity for foster parents to develop attachments to the child that ultimately lead to adoption. In the first six months of 2014, a total of 1,233 children were deinstitutionalised, of whom 842 were reunified with their birth parents or other relatives, 192 were placed in foster care, 169 were adopted locally by Ethiopian families and 30 were placed in independent living arrangements. The child friendly social welfare system (alternative care) used for reunification and reintegration of other separated children proved to be functional. The Ministry of Women, Children and Youth Affairs conducted an assessment of 142 child care institutions but the report has not been finalised and has not yet been shared with UNICEF Ethiopia.

OUTPUT 4 Defined community care structures operationalized in 250 woredas (*)

Analytical Statement of Progress:
Community care structures play a critical role in addressing social protection issues and providing social welfare services to vulnerable populations in Ethiopia. The mobilisation and strengthening of such grass-roots structures is an innovative approach to designing and implementing social services. These structures are a vital means of mobilising community-based efforts around social welfare and social protection of vulnerable members of the community. Their roles include identification of beneficiaries, coordination of services and monitoring the provision of services. The Regional Bureaus of Labour and Social Affairs have been leading the establishment and strengthening of community care structures in almost all regions. So far a total 2,246 Community Care Structures have been established in 160 woredas (districts) in eight regions of the country and Addis Ababa, not including Harari and Dire Dawa. The country programme target is to have functioning Community Care Structures in 250 woredas by end 2015. Refresher trainings on various topics (resource mobilisation, the basics of financial management, etc.) have been provided for the Community Care Structures focusing on social welfare services and resource mobilisation.

OUTPUT 5 ERP - Improved access to and use of quality child focused social welfare services in selected Woredas in DRS Regions

Analytical Statement of Progress:
The development of child focused social welfare services started with the establishment of Community Care Structures in Somali and Gambella regions to facilitate social welfare-child protection services and training of community-based social workers in Somali region to facilitate the operation of the community care structures. Currently the Ministry of Labour and Social Affairs and the Ministry of Education are developing a national framework to guide the training and accreditation of different levels of social workers in the social welfare workforce. In the short
term, the regional bureaus have been training community based social welfare workers in
partnership with their respective training institutions. A total of 133 Social Workers have been
trained in four regions.

**OUTCOME 19** National social protection plan endorsed and operationalized in all regions based
on a roll out of a basic minimum package

**Analytical Statement of Progress:**

The Social Protection Policy has been finalised and endorsed by the Council of Ministers and
the related Social Protection strategy has also been finalised. The Ministry of Labour and Social
Affairs is currently working on developing a Social Protection Plan in consultation with the
National Social Protection Platform. The Action Plan should link the Policy with the regional
Social Cash Transfer Pilot Programmes and other social welfare programmes and services.

**OUTPUT 1** Development of a social protection policy and strategy at federal and regional levels
supported (*)

**Analytical Statement of Progress:**

A first draft of a National Social Protection Policy was submitted to the Prime Minister’s Office.
The Social Protection Platform received comments from The Social Affairs Committee and a
revised version of the Policy was re-submitted to the Prime Minister’s Office. A first draft
National Social Protection Strategy has been elaborated and shared with regions during a
National Forum organized by the Ministry of Labour and Social Affairs in Mekelle, Tigray. It is
expected that four regions will develop their Regional Social Protection Action Plans in
2015.

**OUTPUT 2** Child sensitive national social protection minimum package (instruments)
implemented (*)

**Analytical Statement of Progress:**

The Tigray Social Cash Transfer pilot has been progressing as planned and is now benefitting
3,367 households, where it has positively impacted the lives of family members. There have
been demonstrated improvements in wellbeing, such as nutritional and health status;
educational attainments of their children and social acceptance by the community. The cash
transfer modality has been improved through the use of electronic funds transfer through mobile
'M-Birr' technology. Existence of the project has introduced the wider community to the new
technology of mobile cash transfers. The development of the design and the required tools and
standards for the planned Social Cash Transfer pilot in Oromia and Southern Nations,
Nationalities and Peoples’ regions has been delayed due to time and human resources
constraints experienced by the Ministry of Labour and Social Affairs. Currently the draft
programme design has been completed and a workshop to discuss the programme has been
scheduled for October 2014.

**OUTPUT 3** Public private partnership strategy for delivering credit for vulnerable households
defined (*)

**Analytical Statement of Progress:**
The UNICEF management response developed following the evaluation of the Revolving Loan programme is focused on developing a comprehensive public-private partnership strategy, but this has not been completed to date. As an interim measure, regional Bureaus (Tigray, Benishangul Gumuz and Gambella) have developed Memoranda of Understanding with Micro-Finance Institutions in their respective regions to implement the economic empowerment for vulnerable households. The Micro-Finance Institutions have accordingly transferred the cash to the selected beneficiaries in the respective regions. A total of 965 vulnerable households caring for 3,461 children benefited from the programme in Benishangul Gumuz and Gambella regions.

**OUTCOME 20** Functional birth registration system in place

**Analytical Statement of Progress:**
UNICEF Ethiopia strategic investments in the area of birth registration focused on strengthening national and regional coordination mechanisms that will lead and oversee implementation of preparatory activities towards commencement of registration services. As part of this effort the Federal Vital Events Registration Agency was equipped with office furniture and a technical professional is embedded to assist the Agency in the process of development of registration guidelines and tools. At regional level, UNICEF advocacy efforts have yielded results with the enactment of vital events registration laws in five regions: Amhara, Somali, Southern Nations, Nationalities and Peoples’, Gambella and Hariri. Of these, Amhara and Somali have successfully set up coordination agencies along with the requisite human resources and budget.

As an outcome of the strategic contributions of UNICEF Ethiopia, coordination mechanisms and a strategy framework are in place at national level and in selected regions. Furthermore, UNICEF supported the National Vital Events Registration Agency to initiate discussion with the Ministry of Health around interoperability of birth registration and health services. As part of the effort to build the technical capacity the Agency and other key government entities a study tour to South Africa and Botswana created an opportunity to learn from the best practices of the two counties in the management and implementation of vital events registration system and services. Likewise, officials representing vital events registration offices in all regions underwent intensive training, including a visit to the Federal Vital Events Registration Agency. At the end of the reporting period drafting of registration instruments and guidelines has been initiated by the Federal Agency with active involvement of the corresponding regional agencies.

**OUTPUT 1** Civil Registration Act enacted, and operational strategies and tools adopted by 2012

**Analytical Statement of Progress:**
UNICEF Ethiopia contributed to the establishment of coordination mechanisms and a strategy framework for vital events registration at national level and in selected regions. UNICEF has supported the Federal Vital Events Registration Agency to initiate discussions with the Ministry of Health on interoperability of vital events registration with health services. With establishment of the Council and Board, an accountability and oversight framework was created to ensure standardisation of efforts to operationalise vital events registration throughout the country. At Federal level, development of an operational strategy, together with a costed plan has been finalised. Regions have initiated the process of adapting the strategy and plan of action to fit with the specific local context. As at June 2014, drafting of registration instruments and guidelines has been initiated by the Federal Agency with active involvement of the corresponding regional agencies.
OUTPUT 2 System for implementation, coordination and data management on birth registration in place at federal and regional levels (*)

Analytical Statement of Progress:

UNICEF Ethiopia investments in the area of birth registration have focused on strengthening national and regional coordination mechanisms that will lead and oversee implementation of preparatory activities towards commencement of registration services. As part of this effort the Federal Vital Events Registration Agency was equipped with office furniture and a technical professional is embedded within the Agency to assist in the process of development of registration guidelines and tools. At regional level, UNICEF advocacy efforts have yielded results with the enactment of vital events registration laws in Amhara, Somali, Southern Nations, Nationalities and Peoples', Gambella and Hariri regions. Amhara and Somali regions have successfully set up coordination agencies along with the requisite human resources and budget. As part of efforts to build technical capacity the Agency and other key government entities participated in a study tour to South Africa and Botswana. This created an opportunity to learn from the best practices of these two counties in the management and implementation of a vital events registration system and services.

OUTCOME 21 Violence against women and children prevented and mitigated

Analytical Statement of Progress:

UNICEF Ethiopia has adopted a strategy of establishing and strengthening coordination structures at national and regional levels in order to guide the multi sectoral interventions required to address violence against women and children. The national coordinating body on Violence Against Women and Children has been strengthened and is actively engaged in providing guidance and support to sectors to ensure the integration of interventions in sector plans and reports. Likewise, regional coordination structures have been set up in Amhara, Somali, and Southern Nations, Nationalities and Peoples’ regions. Support is being provided to these regions to adapt the strategy and action plan documents. Afar, Benishangul Gumuz and Oromia regions are receiving technical support towards the establishment of similar structures which are expected to play an important role in guiding and coordinating interventions to prevent violence against women and children.

Improving access to comprehensive and survivor-friendly services is the other strategy used to address Violence Against Women and Children. Through the provision of technical and financial support it was possible to ensure the provision of such services to survivors in Addis Ababa, Oromia, Southern Nations, Nationalities and Peoples’ regions. In Amhara and Somali services are provided through one-stop centres, referral pathways and/or special investigation and prosecution units. The provision of such services in addition to facilitating the administration of justice through the timely collection and preservation of evidence has been instrumental in avoiding the secondary victimisation of survivors.

In order to reduce the prevalence of Female Genital Mutilation / Cutting and mitigate its impact, UNICEF Ethiopia supported engagement at strategic and programmatic levels. The adoption of the National Harmful Traditional Practices Strategy, which focuses on Female Genital Mutilation / Cutting, child marriage and abduction was a key achievement. The strategy has helped in systematising and coordinating national efforts under the three pillar approaches: prevention, protection and provision. Familiarisation and operationalisation of the strategy is underway. In addition, the Ministry of Women, Children and Youth Affairs is implementing the Social Norm Communication Strategy, which was launched in 2013. Under the coordination of the Ministry of
Women, Children and Youth Affairs, all regions have embarked on the process of adapting the national strategy to fit regional contexts.

At programme level, UNICEF Ethiopia supported six districts in Afar to publicly declare total abandonment of Female Genital Mutilation / Cutting through implementation of facilitated community dialogue. Follow-up of the implementation of the declaration is underway.

OUTPUT 1 National Plans on VAWC including HTP developed, updated and implemented

Analytical Statement of Progress:
Building on results achieved at Federal level UNICEF Ethiopia has scaled up efforts towards operationalising comprehensive service provision and a coordination mechanism for the prevention of and response to violence against women and children in Ethiopia. A combination of technical and material assistance is being provided to Amhara, Southern Nations, Nationalities and Peoples' and Somali regions to put in place inter-agency coordination mechanisms. Equipment and technical assistance has been provided to a one-stop centre in Adama town, Oromia region, to strengthen delivery of legal, medical and psychosocial services to children and women who are victims of violence. Referral pathways aimed at providing comprehensive services to victims of violence have been set up and strengthened in Amhara, Somalia and Southern Nations, Nationalities and Peoples' regions. In order to provide victim-friendly services to survivors of violence, special prosecution units are operational in Afar, Amhara, Southern Nations, Nationalities and Peoples', Somali and Oromia regions. UNICEF Ethiopia's contribution was to provide office supplies and support recruitment of social workers and training of justice personnel. This initiative complements improvements in investigation and prosecution processes in cases of violence against children, and has resulted in the prosecution of perpetrators of harmful traditional practices. For example, 75 cases of Female Genital Mutilation / Cutting were reported in Afar.

UNICEF Ethiopia has also supported community dialogue, bringing together key community figures to deliberate on social norm dynamics and the consequences of Harmful Traditional Practices, leading to a collective pledge for abandonment of the practice in the target locations. UNICEF Ethiopia supported the Ministry of Women, Children and Youth Affairs to develop a National Strategy and Action Plan on Harmful Traditional Practices, focusing on Female Genital Mutilation / Cutting and Child Marriage, launched in 2013. All regions have begun adapting the national strategy to specific regional contexts.

OUTPUT 2 Social Mobilization and Communication strategy for social norm change developed and rolled out (*)

Analytical Statement of Progress:
The National Communication Strategy for Social Norm Transformation to Advance Women and Youth Participation in Development was developed and finalised by the Ministry of Women, Children and Youth Affairs. UNICEF Ethiopia partnered with local Civil Society Organisations and Regional Bureaus of Women, Children and Youth Affairs working on the prevention Pillar to organise a series of community dialogues facilitated by trained Community Dialogue Facilitators. The community dialogue facilitators are religious and clan leaders who are the 'gatekeepers' in terms of setting and enforcing norms. Legal bodies, health extension workers, circumcisers, men, women and youth of both sexes are involved in the dialogues. The district Administrators, the district Women's Affairs Offices and the district Health Offices are the main leaders and coordinators. These participatory processes contribute to an environment of shared responsibilities and commitments that leads to community ownership and sustainability on the
abandonment of Female Genital Mutilation / Cutting and child marriage. Developing the National Communication Strategy for Social Norm Transformation to Advance Women and Youth Participation in Development added value to ongoing social mobilisation efforts. A total of 20 districts have declared the abandonment of Female Genital Mutilation / Cutting (10 in the reporting period).

OUTPUT 3 Inter-ministerial national coordination mechanism further strengthened and replicated in five regions

Analytical Statement of Progress:
Technical and financial support has been provided to the coordinating bodies at federal and regional levels. The coordination structure at national level has been working to ensure integrated intervention across sectors through the provision of guidance in accordance with the strategy and action plan on Violence Against Women and Children. Following the establishment of formal coordination structures in Amhara, Somali and Southern Nations, Nationalities and Peoples’ regions support is being provided towards the adaptation of regional strategies and action plans. Furthermore, support is being provided to the remaining target regions towards the establishment of formal coordination structures.

OUTPUT 4 Comprehensive response and support services available for victims of VAWC through building the capacity of GO and NGO partners (*)

Analytical Statement of Progress:
In the reporting period, technical and financial support was provided to six regions (Afar, Somali, Amhara, Oromia, Southern Nations, Nationalities and Peoples’ and Addis Ababa) towards strengthening existing service providing centres / mechanisms and towards the establishment of new ones in places where there were none. Relevant tools have been developed for the purpose of facilitating the service provision and training has been provided to ensure the provision of quality service. However, the establishment of the hotline centre has not materialised despite the development of an action plan and persistent follow up.

OUTCOME 22 Increased access to HIV prevention services for marginalized children & adolescents achieved

Analytical Statement of Progress:
UNICEF Ethiopia is committed to directly reach marginalised children and adolescents with HIV prevention services, including HIV prevention behavioural change interventions (peer education, life skills, and youth dialogue, community conversation, Information Education and Communication / Behaviour Change Communication), HIV testing and counselling, condom promotion and care and support, income generating activities for the infected and affected children and their families in selected woredas (districts), Universities, and high schools. Services are being provided for the neediest young people in 90 woredas.

More than 283,466 (149,232 in the period July 2013 - June 2014) vulnerable and marginalised boys and girls were reached with direct HIV prevention, care and support services. The HIV prevention services increase knowledge of HIV prevention methods and safe sexual behaviour and practices which ultimately reduces the risk of getting HIV infection.

Strategies employed to reach the hard to reach populations are peer education, life skills education, school community conversation, youth dialogue and youth friendly services at youth
centres. Experience shows that peer education, youth dialogue, and youth friendly services are the best strategies and practices to reach vulnerable children with HIV prevention interventions in the selected woredas (districts) and ultimately lead to behaviour change.

UNICEF Ethiopia has been supporting the Government of Ethiopia in the development of HIV/AIDS service standards and packages for most at risk and vulnerable adolescents, in school and out of school boys and girls.

UNICEF has also used key strategic events like HIV testing campaigns, advocacy and policy dialogue events, and HIV prevention summits to complement national and regional efforts.

Despite, the commitment and achievements to date, HIV remains a problem in most urban areas and 'hotspot' areas, particularly among youth in and out of school, and in development scheme areas that attract many young people. Resource constraints limited further efforts to reach more adolescents and young people, particularly those most at risk, with HIV prevention interventions.

OUTPUT 1  Access to minimum youth friendly HIV prevention and protection packages for marginalised/most at risk adolescents/youth in secondary and tertiary education institutions ensured (*)

Analytical Statement of Progress:
The minimum prevention package includes HIV Counselling and Testing, peer education, life skills, community conversation, condom promotion and provision of Information, Education and Communication materials. The package is currently being implemented in all fifteen universities, 100 high schools and 41 youth centres. The minimum package will continue to be implemented to ensure that all new entrants to universities receive the services.

Following the minimum HIV/AIDS prevention intervention package a strategic planning, management and communication strategy for Higher Education Institutions was developed for 2013-2015 and distributed to public and private universities. The documents enable effective coordination, resource mobilisation and monitoring the implementation of HIV prevention as per the standards set for the minimum package.

In 90 selected woredas (districts), a total of 283,466 adolescents and youth (228,000 at end December 2013) and 30,198 daily labourers, Orphans and Vulnerable Children, and domestic workers have been reached with direct HIV/AIDS youth friendly services, including HIV prevention behavioural change interventions such as life skills HIV/AIDS education, HIV testing and counselling services, condom promotion and care and support services.

A total of 224 focal persons selected from Bureau of Education and schools and the Regional HIV/AIDS Prevention and Control Office have been trained on the HIV minimum intervention packages and management of school HIV prevention programmes to support youth-friendly HIV prevention services for young people in and out of school and to coordinate and manage the school HIV programme.

Over US$8.5 million has been mobilised for adolescent and HIV programmes for the next four years from RNE

OUTPUT 2  Support demand creation and social mobilization for scale-up of PMTCT
Analytical Statement of Progress:

In line with the Ministry of Health Accelerated Prevention of Mother-To-Child Transmission of HIV plan for 2012, UNICEF Ethiopia continued to support demand creation activities in 2014. Training of trainers was provided for 8,746 health extension workers, community and women leaders, ensuring they have relevant information on prevention of mother to child transmission. Through the trained health extension workers and women leaders more than 49,200 community leaders and mothers and 35,796 in and out of school youth have been reached. This ultimately improves access to information and improves the uptake of HIV Counselling and Testing.

UNICEF Ethiopia, in collaboration with FHAPCO organized advocacy and social mobilization activities for igniting public movements against HIV/AIDS in Gambella region. These activities involved the first lady, Minister of Federal Ministry of Health and regional government bodies and as a result, a strategy document for igniting public movement against HIV/AIDS in Gambella region has been developed.

OUTPUT 3  Child/adolescent/youth focused strategic information system on HIV prevention in place

Analytical Statement of Progress:
UNICEF Ethiopia, in collaboration with Federal HIV/AIDS Prevention and Control Office initiated a multi sectoral response information system, including new reporting tools and a reference guideline, which aims to simplify and standardise the procedures for reporting on the community, non-health response to HIV/AIDS in 2013. The HIV/AIDS non-clinical response programmes include social mobilisation, community empowerment, school HIV/AIDS interventions, life skills, peer education, youth dialogue, and care and support services. Currently, the Multi sectoral Response Information System is implemented in all regions, zones and woredas (districts) and the Federal HIV/AIDS Prevention and Control Office is receiving data.

As part of routine monitoring, the Federal HIV/AIDS Prevention and Control Office conducts joint supportive supervision and convenes joint review meetings twice a year. In the first 6 months of 2014, UNICEF Ethiopia supported the Federal HIV/AIDS Prevention and Control Office to hold the quarterly and annual review meetings and undertake Joint integrated supportive supervision, and a midterm review meeting. Key outputs of the meeting were: 1) Institutionalise HIV/AIDS prevention services in the education institutions 2) Provide targeted testing among high risk population 3) establish a support system by federal and regional HIV/AIDS Prevention and Control Offices for higher educational institutes; 4) strengthen access to peer education in higher education facilities; and 5) build the capacity of the health development army to engage in the implementation of Prevention of Mother-To-Child Transmission of HIV plan.

As part of the monitoring and evaluation framework of the UNICEF-UN Population Fund joint programme, a final evaluation of the ‘Rights based approach to adolescent and youth development and HIV’ programme (2007-2013) was conducted.

OUTCOME 23  Full Implementation of National Youth Development Package ensured

Analytical Statement of Progress:
UNICEF Ethiopia, with the Ministry of Women, Children and Youth Affairs, contributed to the development of a Youth Management Information System database. Guidelines and manuals were also prepared to provide youth and youth serving organisations nationally with appropriate
standards for youth programme implementation and for sustaining youth participation and empowerment. Guidelines prepared to date include: youth centres’ service standard guideline, adolescent girls empowerment manual and youth livelihood implementation guidelines. The capacity of the Ministry and Regional Bureaus of Women, Children and Youth Affairs at youth centre and woreda (district) level was found to be a bottleneck to effective planning and implementation of adolescent-youth focused interventions. To address this, UNICEF Ethiopia supported training of 638 (31 per cent female) youth centre coordinators, youth federation and woreda focal persons in planning, monitoring and reporting, and demand creation. Adolescent and youth involvement in clubs, committees, youth federations, livelihood schemes, life skills, youth centres, HIV prevention, sport and play has provided opportunities for young people to strengthen their skills in contributing to community development, as well as protecting themselves from the risks of HIV, unprotected sex, drug use, and violence.

During 2014, access to and use of youth services in 106 youth centres in nine regions increased from an average of 60 visits per day to 125. UNICEF Ethiopia supports 106 youth centres in nine regions and more than 650,000 young people regularly benefit from skills development, Sexual and Reproductive Health training, library, mini-medias and sport and plays. Over 2,378 (44 per cent female) vulnerable young people received entrepreneurship training and livelihood support in six regions. UNICEF supported youth voluntary service planning and 388,432 (27 per cent female) young people were deployed to 86 woredas in five regions, where they provided tutorial classes for Orphans and Vulnerable Children, planted trees, and created awareness on HIV/AIDS and child rights issues in their respective kebeles (sub-districts). In addition, 20,743 (33 per cent female) young persons benefited from life skills and peer education which boosted self-esteem and enabled them to communicate effectively and resist negative peer pressures. 21,892 adolescents participated in sport and play activities, promoting adolescent participation and increasing inclusion of young people with disabilities, particularly girls.

Overall, the total number of woredas implementing the key package of adolescent/youth development components expanded from 72 to 86 and the number of youth centres expanded from 68 to 106, with a total 1.27 million young people benefiting from youth empowerment and participation activities in 2013/2014.

OUTPUT 1 Youth livelihood promotion framework developed and vulnerable young people received start-up capital (*)

Analytical Statement of Progress:
In 2014, a youth livelihood promotion guideline was prepared, finalised and made ready for printing and distribution. The guide is set within the overall context of youth development programming to help youth and youth serving organisations to design youth livelihood development programmes. Regional Bureaus of Women, Children and Youth Affairs and BOYS collaborated with woredas (districts), youth associations, and kebeles (sub-districts) to provide start-up capital and entrepreneurship training combined with life skills and Sexual and Reproductive Health services to 2,378 (44 per cent female) vulnerable young people in Oromia, Amhara, Southern Nations, Nationalities and Peoples’, Tigray, Addis Ababa and Benishangul Gumuz regions. The proportion of adolescent girls benefiting from start-up capital and entrepreneurship training increased from 26 per cent to 44 per cent compared with 2013. These interventions enabled youth to access start-up capital or interest-free revolving loans, contributing to reduced vulnerability to school dropout, HIV/AIDS, illegal migration, sexual exploitation and violence. In 2014/2015, it is planned to work with Government partners and Civil Society Organisations to implement the guideline to scale-up and reach more vulnerable adolescent girls at risk of HIV/AIDS, violence and sexual exploitation.
The threat of irregular migration and trafficking of adolescents from rural to urban and to Gulf States and neighbouring countries has increased significantly. This has led UNICEF and other development partners to support the Ministry of Women, Children and Youth Affairs and other sectors to convene a national conference attended by about 4,250 young people, regional administrators, sector bureau heads, senior officials and youth federation members. As a result, a task force will be established to follow-up on the conference decisions, and to support deployment of unemployed youth to economic activities in their respective communities.

OUTPUT 2  Adolescent/youth participation and volunteerism mainstreamed into national and regional plans and implemented (*)

Analytical Statement of Progress:
In 2013/2014, UNICEF Ethiopia supported nine regions to enhance participation of adolescents and youth in issues of concern to them, such as HIV prevention, Orphans and Vulnerable Children support and in providing life skills and peer education. Adolescent and youth interventions have contributed to building the capacities of woredas (districts), and regional and federal level implementing partners to deliver services and meet their responsibilities. Many young people participated in consultations, voluntary service and training and this helped them to claim their rights to information, skills and services. During the current reporting period, participation of adolescents focussed on youth voluntary service (380,432), life skills, peer education, youth dialogue (20,473) and sport and play training (21,800), where female participation is slightly improved (32 per cent). Life skills are being practically applied and utilised in many content areas: e.g. prevention of sexual violence, teenage pregnancy, HIV/AIDS and drug use prevention among young people. Performance varies widely among regions with Gambella, Afar, and Somali and Addis Ababa having the lowest coverage of adolescent participation. Low participation rate was reported since youth voluntary services and life skills trainings were not adequately incorporated in the Annual Work Plan in these four regions during the reporting period.

To increase participation of adolescents, UNICEF continued to support sports and play activities as a tool in Amhara, Benishangul Gumuz, Oromia and Addis Ababa in 18 youth centres and 17 community playgrounds. A total of 669 (218 females) coaches, teachers and peer leaders were trained as sports for development trainers, benefiting a total of 21,800 adolescents (669 females) of whom 217 had disabilities. Involvement of adolescents in sport and play has improved physical fitness, self-esteem, interpersonal skills, and academic achievements. It has also created safe environments for free expression of opinions on HIV prevention, sexual reproductive health and other issues.

OUTPUT 3 Access to standardised youth services package and system ensured (*)

Analytical Statement of Progress:
Regional Bureaus of Women, Children and Youth Affairs / BOYSA and municipalities, in collaboration with other sectors, are expanding youth centres in rural and urban areas of the country to respond to the demand for youth development, edutainment, and recreational facilities. The revised standard service provision guideline for youth centres is being used by Regional states to improve provision of services. The guidelines advocate for the incorporation of sport and play in the package of youth centre services, and creation of spaces for participation of girls and children with disabilities.

During the reporting period, over 650,000 boys and girls (27 per cent girls) regularly accessed
and benefited from 106 youth centres and community playgrounds providing mini-media, library, computer skills training, HIV/Sexual and Reproductive Health peer education, film shows, and sport and play activities. More than 38 youth centres were provided with equipment and electronic materials to build the capacity of the centres to provide quality services for young people. Even though youth centres are providing a range of services for young people, most of them lack proper coordination, youth-friendliness, quality, affordability and flexibility. To avoid such challenges, UNICEF Ethiopia, in collaboration with the Ministry of Women, Children and Youth Affairs has provided training for coordinators and youth association members on customer service and demand creation strategies.

**OUTPUT 4** Evidence based adolescent/youth MIS/data base established and functional

**Analytical Statement of Progress:**
Given the lack of data for adolescent/youth development in Ethiopia, UNICEF supported the Ministry of Women, Children and Youth Affairs to develop a National Youth Database / Management Information System. The Ministry recruited a consultancy firm in 2013 and appropriate software has now been developed. The consultancy firm has presented the overall functions and features of the software to UNICEF Ethiopia and the Ministry of Women, Children and Youth Affairs technical team members. UNICEF team members have provided recommendations for further improvements to the database, which should be implemented in the second half of 2014.

**OUTCOME 24** Government, communities & civil societies in Disaster Risk Reduction (including timely life saving interventions during emergencies) respond to emergencies in Ethiopia by 2015, with particular focus on issues affecting women & children in the most vulnerable regions/districts.

**Analytical Statement of Progress:**
UNICEF Ethiopia continues to work with the Government and humanitarian partners to ensure that children have access to health, nutrition, education, water, and sanitation and that they are protected during emergencies. UNICEF is the cluster lead for WASH, child protection, and nutrition. UNICEF also co-leads the education cluster with Save the Children UK and leads the child protection/gender based violence sub-cluster at national level. UNICEF provided technical support on a new format of regional emergency preparedness and response plans for 2014 to the regional government Disaster Prevention and Preparedness Bureaus in Oromia, Amhara, Tigray, Southern Nations, Nationalities and Peoples’, Afar, Somali and Gambella regions. During these planning sessions, UNICEF also provided training on disaster risk reduction for Government, UN agencies and non-governmental partners.

Working closely with UN High Commissioner for Refugees and the Government, through the Administration for Refugees and Returnees Affairs, UNICEF provided a multi-sectoral response to nearly 200,000 South Sudanese refugees in Gambella region of Ethiopia. This was in accordance with the UNICEF response plan for 350,000 new arrivals in 2014, as well as Somali refugees in Dollo Ado, Eritrean refugees in Tigray and Sudanese refugees in Benishangul Gumuz regions.

During January to March 2014, out of the total 65 hotspot priority 1 woredas in six regions, 97 per cent of them were covered with Out-patient Therapeutic Programme, 86 per cent of them with Therapeutic Feeding Unit, and 25 per cent of them with Targeted Supplementary Feeding programmes. Similarly, between April and June 2014, out of the total of 73 priority 1 hotspot woredas (districts) in six regions, 99 per cent were covered with Out-patient Therapeutic
Programme, 85 per cent with Therapeutic Feeding Unit and 38 per cent with Targeted Supplementary Feeding Programmes. 21 bi-annual nutrition surveys were conducted in six regions (three in Afar, four in Amhara, four in Oromia, four in Southern Nations, Nationalities and Peoples', three in Somali and three in Tigray).

Engagement on Disaster Risk Reduction capacity development at a systemic level has been constrained. However, Disaster Risk Management / Reduction training has been undertaken for 93 government staff members at all levels in Southern Nations, Nationalities and Peoples; Nutrition Cluster Coordination for 50 Government staff members in Southern Nations, Nationalities and Peoples' Region; Early Warning data collection, analysis and reporting for 166 government experts in Amhara (128), Oromia (28) and Benishangul Gumuz (10) regions.

**OUTPUT 1** Strengthen disaster response through emergency preparedness

**Analytical Statement of Progress:**
UNICEF Ethiopia provided technical support to eight regional governments (Afar, Amhara, Benishangul Gumuz, Gambella, Oromia, Southern Nations, Nationalities and Peoples', Somali, and Tigray) in developing regional Emergency Preparedness and Response Plans. UNICEF supported the Administration for Refugees and Returnees Affairs and UN High Commissioner for Refugees in responding to the influx of South Sudanese refugees into the Gambella Region; nearly 200,000 refugees have arrived into the country since December 2013. UNICEF seconded WASH, Nutrition, Health, Education and Child Protection Specialists to UNHCR in Gambella to support sector coordination, to provide leadership in the respective sectoral responses and to provide technical support. In 2014, UNICEF, with the support of OFDA, procured 5,150 Non-Food Items kits to further strengthen the partnership between UNICEF and ERCS and build capacity for emergency preparedness and response. UNICEF Ethiopia maintains a pre-positioning stock of emergency supplies in four pre-positioning hubs in the country sufficient to respond to the emergency needs of 125,000 people (Ethiopians and refugees) that could be affected by various emergencies.

The Humanitarian Requirement Document released at the beginning of 2014 has been reviewed based on a multi-agency national humanitarian needs assessment, conducted in June. UNICEF provided technical and logistics support to the assessment and review.

In 2014, UNICEF Ethiopia participated in key humanitarian coordination forums, including the Humanitarian Country Team meeting, Disaster Risk Management Technical Working Group and cluster coordination meetings, during which the Agency advocated for the rights of women and children affected by humanitarian crisis.

**OUTPUT 2** Populations build resilience and receive life & livelihood saving relief and recovery response to WASH emergencies in accordance with CCCs

**Analytical Statement of Progress:**
In the first six months of 2014, a failure of seasonal rains led to critical water shortages in the lowlands of Oromia, pockets of Somali and Amhara, and parts of Afar and Tigray regions. More than 30,000 people were internally displaced. In 2014, the WASH response has been constrained by low funding levels (20 per cent) received against the Humanitarian Requirement Document, the joint Government and partners’ humanitarian appeal.

UNICEF Ethiopia implemented a wide range of life-saving interventions and provided safe water to people affected by clan conflict between Guji and Borena ethnic groups. UNICEF supported
the provision of emergency water supplies, distribution of household water treatment chemicals, and the upgrade/maintenance of non-functional water schemes. UNICEF supported water trucking and provided water to 129,961 people (out of 234,112 people reached by the WASH cluster), for an average period of two months. Additionally, 279,861 (out of 298,581) people are being provided with access to safe water through rehabilitation, expansion of existing water sources and the construction of new schemes. Household water treatment chemicals were distributed to 39,250 people (out of 42,250) for a minimum of two months.

OUTPUT 3 Populations build resilience and receive life & livelihood saving relief and recovery response to health emergencies in accordance with CCCs

Analytical Statement of Progress:

UNICEF Ethiopia works with Government to address the needs of the most inaccessible communities in emergency situations in Somali and Afar regions through support to Mobile Health and Nutrition Teams. In the first half of 2014, UNICEF Ethiopia provided supplies to 24 Government teams and one international non-governmental organisation mobile team. More than 143,700 consultations were provided; two-thirds for women and children. Teams also provided immunisation, antenatal care, health promotion services and emergency referral. A measles outbreak occurred in 2014, with the highest number of cases reported from Southern Nations, Nationalities and Peoples' Region followed by Oromia, Amhara, Gambella and Somali. UNICEF procured 3.5 million doses of measles vaccine and assisted in the vaccination of three million (>96 per cent) children age 6 months to 14 years in Southern Nations, Nationalities and Peoples’ and Gambella regions (177,393 children). High numbers of cases of yellow fever and rubella were also reported. To address the dengue fever cases in Somali and Afar, UNICEF procured 25 dengue fever test kits, assisted in the printing and distribution of Information, Education and Communication materials to strengthen community social mobilisation, and provided four essential drug kits for internally displaced people in Oromia. Following a wild polio virus outbreak, eight rounds of polio campaign have been conducted in high risk zones. During the ninth round, a total of 3,949,806 (>94 per cent) children under five years were vaccinated. UNICEF provided vaccines, cold chain equipment and social mobilisation support.

With the current influx of refugees from South Sudan to Gambella, measles vaccination on entry has been provided for 94,940 (>98 per cent) children aged six months to 15 years. As part of the malaria control efforts, more than 54,220 Long-Lasting Insecticidal Nets were distributed

OUTPUT 4 Populations build resilience and receive life & livelihood saving relief and recovery response to education emergencies in accordance with CCCs

Analytical Statement of Progress:

Over 300,000 school aged children were affected by emergencies during the first six months of 2014. Of these 50,000 are refugee children. In response and to build resilience, Education in Emergencies supplies were provided; teachers were trained on psychosocial support, peace education and basic pedagogy and Child Friendly Spaces were constructed, benefiting 32,388 children. 14,276 conflict-affected primary school children of Guji, Borena and East Harerget were also provided with Education in Emergency supplies, enabling them to continue their education. In 2014, Emergency Preparedness and Response Plans were developed and updated in the eight regional states. The revised 2013 Emergency Preparedness and Response Plans were used to prepare projections of the number of affected children for inclusion in the 2014 Humanitarian Request Document and vulnerability mapping exercises.
UNICEF as co-lead agency supported and coordinated the monthly education cluster meetings. The cluster conducted rapid education assessments in Moyale (both Somali and Oromia regional states) to assess the impact of the influx of Kenyan refugees on host communities. Assessment results showed that 4,138 children (47 per cent girls) and six schools required Education in Emergences support and prior to this assessment none had been provided.

In Afar 20 international and national non-governmental organisations and UN Agencies working in education development and their activities were mapped. Education in Emergencies taskforce meetings were held regularly and Regional Education Bureaus actively participated in regional monthly coordination meetings. In Addis Ababa a workshop was organised for 84 (33 Female) education officials on the implementation of the outcomes of a Rapid Assessment of Learning Spaces. Also in Addis Ababa, 950 (333 female) education personnel and 86 (39 female) students from 700 schools were equipped with knowledge on Disaster Risk Reduction and safe and child friendly school environments.

OUTPUT 5 Institutional capacity of child protection actors and resilience of communities strengthened to prepare for and respond to all emergencies in accordance with CCCs

Analytical Statement of Progress:
From a Policy perspective, Child Protection in Emergencies programming supported development of draft Standard Operating Procedures with the Ministry of Women, Children and Youth Affairs and Regional Bureaus of Women, Children and Youth Affairs. From a programmatic perspective, areas of collaboration with UN High Commissioner for Refugees were defined and reunifications of 1,300 unaccompanied migrant children were supported. UNICEF supported implementing partners to reach 15,737 children with Child Friendly Spaces in Gambella and provided support and supplies to reach 6,740 unaccompanied and separated children in Gambella. In Dollo Ado, 4,436 children accessed Child Friendly Spaces and 52 unaccompanied and separated children were assisted through UNICEF’s partnership with Save the Children International. In Shire UNICEF supported UNHCR to reach 1,348 unaccompanied and separated children. In terms of knowledge management, UNICEF supported documentation of the International Organization for Migration-UNICEF collaboration and reunification of

OUTPUT 6 Populations build resilience and receive life & livelihood saving relief and recovery response to Nutrition emergencies in accordance with CCCs- Nutrition Information, Early Warning System and Nutrition Cluster Coordination

Analytical Statement of Progress:
From January through June 2014, early warning and nutrition information system technical capacity has been strengthened. Training was given on a) SMART methodology for 12 regional experts in Afar; b) Disaster Risk Management / Reduction for 93 government staff at all levels in Southern Nations, Nationalities and Peoples’ Region; c) Nutrition Cluster Coordination for 50 Government staff in Southern Nations, Nationalities and Peoples’ Region; d) Early Warning data collection, analysis and reporting for 166 government experts in Amhara (128), Oromia (28) and Benishangul Gumuz (10).

21 bi-annual nutrition surveys were conducted in six regions (three in Afar, four in Amhara, four in Oromia, four in Southern Nations, Nationalities and Peoples', three in Somali and three in Tigray). The nutrition situation was classified as normal in eight, poor in seven, serious in five and critical in one survey. Monthly updates on federal and regional level multi-sectoral early
warning and nutrition information was provided: six bulletins in Afar, Benishangul Gumuz, Southern Nations, Nationalities and Peoples’ and Somali regions; five in Oromia; four in Amhara; and two in Tigray and Gambella. Based on this information, emergency responses were implemented as required.

During January to March 2014, out of the total 65 hotspot priority 1 woredas (districts) in six regions, 97 per cent were covered with Outpatient Therapeutic Programme, 86 per cent with Therapeutic Feeding Unit, and 25 per cent with Therapeutic Supplementary Feeding programmes. Similarly, between April and June 2014, out of the total of 73 priority 1 hotspot woredas in six regions, 99 per cent were covered with Out-Patient Therapeutic Programme, 85 per cent with Therapeutic Feeding Unit, and 38 per cent with Therapeutic Supplementary Feeding Programmes.

OUTPUT 7  Populations build resilience and receive life & livelihood saving relief and recovery response to Nutrition emergencies in accordance with CCCs - Community Management of Acute Malnutrition

**Analytical Statement of Progress:**
From January to June 2014 127,591 severely malnourished children received effective care through the Community Management of Acute Malnutrition programme (88 per cent cure, 0.3 per cent mortality and 3 per cent defaulter rates). These performance indicators are within the national protocol benchmarks as well as international SPHERE standards. In addition, access to treatment for cases of severe acute malnutrition have improved with 66 per cent of health posts (9,614) and 63 per cent of health centres (1,224) running Outpatient Therapeutic Programmes and 29 per cent of health centres (662) and 96 per cent of hospitals (85) running stabilisation centres as of June 2014.

OUTPUT 8 Nutrition project support (CMAM & NCIS)

**Analytical Statement of Progress:**
Project staff costs for the first semester of 2014 was US$25,829, which represents 0.3 per cent of the total allocated budget under lRs 308/006 (NCIS), 308/007 (CMAM) and 308/008 (Project Support).

Nutrition staff provided support for Nutrition Coordination and Information Systems (NCIS, 308/006) and Community Management of Acute Malnutrition (CMAM, 308/007), including resource mobilisation, strengthening government partnerships and building capacity of government counterparts. More specifically, staff support under Nutrition Coordination and Information Systems provided technical assistance for nutrition situation monitoring, capacity strengthening of nutrition information systems for early warning, such as data collection, data analysis, report writing, field monitoring and supportive supervision. Likewise, support was provided for emergency nutrition cluster coordination. Support for Community Management of Acute Malnutrition was for situation and supply monitoring, technical assistance for capacity strengthening on the management of child acute malnutrition and quality assurance. The 0.3 per cent of programmable funds was spent on staff salary, travel, education and other staff related costs.

OUTPUT 9 Strengthened Communication Capacity for Disaster Risk Reduction and Emergency Preparedness and Response in disaster affected populations in accordance with CCCs
Analytical Statement of Progress:
UNICEF supported emergency preparedness in five regions through pre-positioning of behaviour change communication materials, including; 21 Megaphones, 2,800 Acute Watery Diarrhoea (AWD) posters, 86,500 AWD brochures, 81,500 AWD flyers in three different languages. In collaboration with the Federal Ministry of Health, Audio Visual vans equipped with multimedia materials aimed at preventing an AWD outbreak were deployed during seven targeted religious festivals identified as high risk.

During the recent South Sudan refugee situation in Gambella, UNICEF supported development of a communication strategy for the promotion of positive behaviours among host communities and in refugee camps. Multi-media Behaviour Change Communication materials covering key messages in Health, WASH and Nutrition were disseminated, including 60,000 posters and brochures. Training was provided for 270 community health workers/hygiene promoters to strengthen capacity to prevent AWD in the camps. Moreover, UNICEF strengthened the coordination of emergency communication interventions through establishment of a communication working group among organisations engaged in Behaviour.

OUTCOME 25 Human capacity support to Government of Ethiopia partners to effectively deliver protection programmes enhanced

Analytical Statement of Progress:
The total programmable amount allocated is US$14,185,088, of which US$796,911 was spent on salary in the period January to June 2014 (6 per cent).

US$136,945 was spent on travel and miscellaneous (1 per cent). A total of 7 per cent was spent on project support.

OUTPUT 1 Increased demand and utilization of services and improved social norms related to protection

Analytical Statement of Progress:
This supports the Programme by facilitating the travel of Implementing Partners for various study tours and trainings as per the Annual Work Plan. It also covers salary of Staff Members of the Child Protection section.

OUTPUT 2 Protective environment project support

Analytical Statement of Progress:
The total programmable amount allocated was US$14,185,088.54, of which US$796,911.91 was spent on salary in the period January to June 2014 (6 per cent).

US$136,945.30 was spent on travel and miscellaneous (1 per cent). A total of 7 per cent was spent on project support.

OUTCOME 26 GOE supports policy dialogue, analysis, develops and implements national and sub-national programmes which articulate the claims and duties of boys, girls and women reflecting articles of the CRC and CEDAW by 2015 and updates these periodically based on evidence generated from programme evaluations and assessments providing the latest available socio-economic data and evaluations.

Analytical Statement of Progress:
To contribute towards an increase in the influence of evidence-based policy making on the realisation of children’s and women rights, several analyses and evaluations were developed and disseminated, including: a Situation analysis in the national language, further analysis of the Ethiopia Demographic and Health Survey in the areas of child poverty, mortality and women, and a fact book on women and children. Implementation of action points arising from evaluations was encouraged through sharing of published reports, policy briefs and journals, and holding of consultation workshops and forums. Establishing and strengthening strategic partnerships with government (NPC and Central Statistical Agency) and international research institutions will strengthen quality research and maximise influence on evidence based decision making and national capacity building. Key research and national level surveys that are expected to contribute to the next Growth and Transformation Plan and strategies include: a service provision assessment, NHA, WMS and LFIS) and analyses on child marriage, child mortality, child poverty, child labour, health equity and regional situation analyses.

To continue improving the commitment to CEDAW, capacity building activities on gender mainstreaming were provided with support from UNICEF to 166 sector heads and experts and two forums were convened to review gender equality progress at regional and Federal level as inputs to the Growth and Transformation Plan annual report. A Child rights mainstreaming guideline is awaiting final approval. On the basis of UNCRC recommendations, sector indicators in the Growth and Transformation Plan have been revised. A Draft action plan on children was developed by the Ministry of Women, Children and Youth Affairs in coordination with other Ministries.

Monitoring and planning capacity of government partners and the UN was strengthened through support to Implementing Partners in the areas of establishing/improving the database system using DevInfo software (Afar region, Oromia, Amhara, Somali, SNNPR and CSA), Di-Monitoring for the UNDAF, and Results-Based Management training in Tigray. Amhara and SNNP Regions published a booklet on progress against the Growth and Transformation Plan and Oromia region published a socio-economic profile on women and children for 80 woredas (districts). A guide for integrated woreda development plan preparation was drafted and capacity building for community participation in planning was expanded to 130 woredas. Of the 234 Integrated Community-Based Participatory Planning implementing woredas, 178 have produced three-year strategic and annual operational plans.

OUTPUT 1 GoE and stakeholders have strengthened capacity to report, implement and follow-up recommendations from international and regional treaty bodies, councils and processes

Analytical Statement of Progress:
A draft national action plan for Convention on the Rights of the Child (CRC) implementation was developed by the Ministry of Women, Children and Youth Affairs in coordination with other sector Ministries and with UNICEF support. UNICEF strongly advocated for the implementation and adoption of the recommendations of the UNCRC report of 2012 through sector review forums and consultation meetings. Based on a UNCRC recommendation sector indicators in the Growth and Transformation Plan have been revised and training was provided to sector ministries on the revised indicators and monitoring progress. The Federal Inter Ministerial CRC Committee conducted its monthly meeting and consultative meeting in Jimma for 42 participants (16 female) from Gambella, Benishangul and Southern Nations, Nationalities and Peoples’ regions. An additional consultative meeting was also conducted in Hariri for 48 participants (13 female) from Dire Dawa, Somali and Hariri. The draft child policy was submitted to the council of ministers in 2013 and is still awaiting review. The lack of progress on the adoption of the child bill indicates the need for even greater advocacy. The child rights mainstreaming guideline is
revised and ready for publication and dissemination but final approval is awaiting management decision. Monthly CRPF meetings were conducted at MOWCYA for about 25 participants in each meeting drawn from different stakeholders. The 2013 CRPF summary report was prepared, published and disseminated.

OUTPUT 2 Support research and policy dialogue on the efficiency, effectiveness, impact and sustainability of sector actions working towards accelerated realization of children's and women's rights

Analytical Statement of Progress:
Data collection for the Service Provision Assessment, which covers 1200 health facilities in the country is being supported by UNICEF alongside DFID, USAID and the World Bank. UNICEF is providing financial and technical support (covering about 8 per cent of the total budget). 80 per cent of the data has now been collected. The fifth round of the National Health Accounts report was published, primarily with USAID support. UNICEF, along with other partners, including WHO, has contributed technical support. Additional analysis papers on aspects of the 2011 Ethiopia Demographic and Health Survey, an Amharic language version of the Situation analysis and a fact book on children and women were all disseminated. Five regional Situation Analysis reports have been endorsed by regional authorities, but don't yet meet the minimum quality for publication. Work to improve and standardise the quality of all regional reports is underway. Preparations are on-going for research on child well-being, preparation of a socio economic atlas and further analysis of the Labour Force Survey.

OUTPUT 3 National and sub national result based monitoring and evaluation capacity and system to track GTP strengthened.

Analytical Statement of Progress:
Building government and partner capacity to strengthen monitoring and results-based management of UNICEF assisted programmes was implemented. An audit has commenced in nine regions, Results-Based Management training was provided to 160 participants in Tigray, 12 joint field monitoring visits were conducted in all regions, including federal, a database system was established in five regions (federal, Amhara, SNNPR, Afar and Somali) to track regional Growth and Transformation Plan indicators and 11 regional midyear reviews in the areas of planning, training and supply provision (laptops) for data collection, analysis, planning, monitoring and reporting were conducted in 134 woredas. Printing and distribution of 17,950 copies of Integrated Community-Based Participatory Planning manuals to SNNPR (9,500), Benishangul Gumuz (950) and Amhara (7,500) regions was supported and 100 woredas (districts) from Oromia, 13 from Somali, 7 from Benishangul Gumuz and 10 from Afar have commenced implementation. Oromia Bureau of finance and Economic Development allocated ETB4 million for the training of the above mentioned woredas. 178 woredas prepared three-year strategic and one-year operational plans based on the Participatory Planning tool through community consultation. Efforts to make the Integrated Community-Based Participatory Planning manual child friendly so that the voices of children and their priorities are incorporated into the strategic plan have commenced. A Result Based Planning and Management guideline for woreda development was prepared, but support is currently targeted only to UN assisted programmes.

OUTPUT 4 Capacity for Gender Mainstreaming city for gender mainstreaming

Analytical Statement of Progress:
Two Developing Regional States (Afar and Benishangul) and two sectors at federal level (Ministry of Culture and Tourism and Ministry of Information) were supported by the Ministry of Women, Children and Youth Affairs to adapt gender mainstreaming tools. With support from UNICEF 166 sector heads and experts at Federal level and in 2 regions were trained on gender mainstreaming. Two forums were held in January and May 2014 with contributions from UNICEF and other partners. The forums brought together gender focal points from all sectors and government agencies at federal level to review gender equality progress against the commitments of the Growth and Transformation Plan and the Convention on the Elimination of all Forms of discrimination Against Women

OUTPUT 5  Provide high quality managerial and technical assistance through the provision of UNICEF staff and TA for implementation of programming.

Analytical Statement of Progress:
UNICEF supported the implementation of Integrated Community-Based Participatory Planning in additional woredas (districts) in the Developing Regional States (13 woredas from Somali, seven from Benishangul Gumuz and 10 from Afar). In addition, establishing a database system using DevInfo software has been supported and was officially launched in Afar and Somali. To assist UNICEF programmes technical assistance was provided through the recruitment and deployment of finance and programme officers to build local implementation capacity. Efforts to institutionalise the participation of the community in monitoring of local development activities on the basis of the plans prepared through community participation have commenced

OUTPUT 6  Provide high quality managerial and technical assistance through the provision of UNICEF staff and TA for implementation of programming.

Analytical Statement of Progress:
The total project support budget for 2014 is US$605,500 (US$495,500 RR and US$110,000 OR); Total expenditure in the period January to June 2014 is US$442,000. This is 73 per cent of the planned project support budget for six months and amounts to just under 10 per cent of total REPOM annual planned budget. These resources are used to cover the costs of staff salaries and travel costs as the staff interact with counterparts to develop strategies, prepare plans and review progress

OUTCOME 27  By 2015, national and sub-national institutions, mass media, community networks, families, women and children participate more effectively in communication for development processes addressing behaviours, norms and actions to protect, promote and fulfil girls' and boys' and women's rights.

Analytical Statement of Progress:
Following the restructuring of Communication for Development (C4D) from a standalone section into a cross-cutting strategy embedded in programme sections, efforts in the first half of 2014 focused on ensuring a smooth transition of on-going initiatives while establishing the mainstreaming process. The results framework review exercise during the Mid Term Review also allowed the mainstreaming of C4D results within sector outputs. In line with the agreed sector priorities, multilevel strategic C4D interventions were identified and initiated.

Establishing core partnership with religious institutions was among the key strategic opportunities explored both as part of the UN Country Team initiative as well as UNICEF led consultations. In previous years UNICEF worked with a national interfaith network based on Project Collaboration Agreement. However, in 2014 UNICEF led a strategic shift from such
project based approaches to initiating long term, core partnership addressing priority agendas on maternal and child well-being and protection. To this end, UNICEF convened a consultation in June, 2014 comprising high level religious leaders invited from the major denominations, interfaith forums and councils. Common grounds for core partnership were agreed, followed by establishment of a taskforce to develop the framework of partnership.

UNICEF has strengthened its ongoing support to engaging religious leaders in advocacy and social norm change on Female Genital Mutilation/Cutting (FGM/C). In August 2014, UNICEF in collaboration with Ministry of Women, Children and Youth Affairs and the Islamic Supreme Council convened a national consensus building workshop among Muslim religious leaders invited from all regions. The meeting produced a joint declaration against all forms of Female Genital Mutilation / Cutting and plans are underway to ensure that the declaration is communicated and adopted at the lowest levels.

OUTPUT 1 Partnerships 4 integrated C4D strategies: Expanded partnerships and capacity development of Civil Society organizations for implementation of integrated C4D strategies

Analytical Statement of Progress:
In repositioning C4D as a cross-cutting strategy, cross-sectoral strategies, synergies and partnerships were identified and criteria for prioritising them were agreed upon internally. The agreed criteria include; potential for large scale impact and innovation, potential to utilise existing structures for sustainability, suitability for integrated / multi-sectoral messaging, and ability to reach the most vulnerable groups. The key partnerships identified were; strengthening C4D capacity of Health Extension Workers and Health Development Army members, strengthening school based platforms, use of edutainment media (child and adult-focused programmes), and working with major religious leaders.

Including C4D in Integrated Refresher Training for Health Extension Workers and in Health Development Army training was identified as a key capacity building intervention. School-based interventions by various programme sectors are being mapped out for possible future C4D collaborations in schools.

Three UNICEF Ethiopia C4D specialists and seven focal persons in programme sections and field offices were enrolled in the 2014 UNICEF learning course delivered jointly by Ohio University (USA) and Wits University (South Africa) in order to further strengthen capacity for the delivery of C4D interventions.

OUTPUT 2 Project Support for C4D

Analytical Statement of Progress:
Capacity building for media houses, youth centres and school mini-medias in programming around key sector priorities was identified as one of four office-wide cross-sectoral strategies and partnerships during the Mid-Term Review. Through Programme Cooperation Agreements with Population Media Centre, three interventions related to capacity building and behaviour change communication are underway: enhancing knowledge and skills of youth in multi-media production, production and dissemination of a two-year edutainment serial drama on cross-sectoral issues, and training of media producers and journalists working with children and youth.

The multimedia training packages were reviewed and finalised under the leadership of the Ministries of Education, and Women, Children and Youth Affairs. Seventy-two media producers
from Education Media Centres and Regional Media Stations were trained in creative production to enable them to better communicate priority thematic messages. Moreover, 169 youths from 56 youth centres in six regions were trained on multi-media production, while linkages with local media houses were created in four regions to support dissemination of youth produced materials.

With the main objective of increasing communities’ knowledge of the value of sending their children, particularly girls, to school, three months of radio programmes were distributed on national radio. A serial drama called ‘Yberhan Atsnafat’ (Rays of Light in Amharic) will run for the next 18 months. The drama interweaves priority themes, including education, into the realities of rural and urban family life. A previous evaluation of similar radio programmes showed them to be effective vehicles for stimulating discussions among listeners and adoption of positive behaviours.

OUTPUT 3 Project Support for Communication for Development (C4D)

Analytical Statement of Progress:

Not applicable as the C4D section has been restructured.

OUTCOME 28 Management and support to the country programme are effective and efficient

Analytical Statement of Progress:
The Budget Committee established in 2013 with a mandate to develop and implement a budget system for operations and programme support and to further strengthen fund management and accountability continued to monitor expenditures on a quarterly basis. These reviews revealed that the ECO was on target as regards programme support and cross sectoral expenditures throughout 2014. As a result, the processes is replicated for the 2015 budget.

UNICEF Ethiopia managed a total of 119 individual grants/funding sources during 2014. In addition to its regular contribution management activities, the Country Office instituted a new Grant Opening Meeting process whereby all sections involved in a new grant meet to review the purpose, specific conditions and monitoring frequencies as per the Contribution Agreement before funds are allocated for activity implementation. This has helped the office strengthen its contribution management systems.

The capacity building training of field office staff in Finance, Supply, HR, ICT and Administration conducted between March and July 2014 greatly contributed to improvement of the quality of financial documentation and adherence to IPSAS and financial procedures. HACT training for programme sections in Addis Ababa and field offices was conducted, and spot check training of programme and operations staff was conducted.

Operations section worked at addressing 2013 external audit recommendations. The operations management indicators were reviewed during the bi-monthly monitoring meetings. The risk management and audit committee met weekly to address the recommendations of the 2013 external audit recommendations, all recommendations were closed by July 2014.

The recommendations of the peer review reports have been addressed on a monthly basis and implemented.
The Finance, Administration and Supply sections worked closely to implement the mid-year and year-end accounts closure activities. Issues such as payroll, VAT and budget utilization were closely monitored and followed up.

**OUTPUT 1 Internal Planning and Monitoring**

**Analytical Statement of Progress:**
Participation of a wide range of staff members in governance and decision making within the office continue to be a priority. Various issues and standing topics were discussed in the management team meetings and the decisions disseminated to staff. Common staff related issues were also discussed at the JCC with the participation of the staff association representative.

ECO reviewed the operational activities of all regional offices and action plans developed to address the issues that were identified; the office focused on implementing the action plans in 2014.

ICT continued to contribute to the overall office business environment by providing support to VISION related issues and escalation of problems to the Regional SME and HQ. A close monitoring mechanism has been established to follow up on resolution of VISION pending issues.

The office conducted an annual review of the Business continuity plan. The majority of the elements related to ICT disaster preparedness have been revised to follow new UNICEF standard in data backup together with the other UN agencies.

UNICEF continues to play a leadership role in order to accelerate progress of implementing HACT at the UN level. UNICEF is the co-chair of the Operations Management Team; co-chair of the UN Field Offices working group and a member of the ICT working group. UNICEF also led some of the activities agreed upon by the OMT such as contracting the companies for micro-assessment exercise, training of procurement officers on printing & design.

**OUTPUT 2 Internal Planning and Monitoring**

**Analytical Statement of Progress:**
UNICEF Ethiopia's move to new Minimum Operating Security Standards-compliant premises on the Economic Commission for Africa compound in August 2014 contributed to efficiency gains and cost reduction in terms of shared costs for security, rent, ICT, cleaning and maintenance services. Close proximity of the office to the Economic Commission for Africa's conference, banking, medical and travel facilities enabled UNICEF staff to receive the relevant services on time.

AWP activities identified based on audit recommendations and DFAM instructions are being undertaken and monitored at regular Finance and Administration units meetings. Issues such as payroll, VAT and budget utilization are being closely monitored and followed up. Administration section has completed mid-year review in June 2014 and reported to DFAM.

**OUTPUT 3 Internal Planning and Monitoring**

**Analytical Statement of Progress:**
Following approval of the Programme Budget Review (PBR) submission, 78 new positions were created and 68 positions abolished (48 with incumbents, 20 vacant). As of end of November 2014, 32 positions comprising two International Professionals, 19 National Officers and 11 General Service, had been filled. To ensure smooth implementation of the Programme Budget Review recommendations with minimum disruption, the Country Office prepared a phased, prioritised recruitment plan that fully considered the abolished posts with incumbents. The Country Office implemented a support plan for staff on abolished posts, which included organising careers workshops, counselling, and providing support to those applying for vacant posts.

There is gender parity among International Professional staff (51 per cent male, 49 per cent female), and General Service staff (38 per cent male, 62 per cent female), although this excludes drivers, who in Ethiopia are predominantly male. The Country Office continued to face challenges in recruiting National Officers, particularly for sub-offices, due to high demand for female professionals from what is a small pool of qualified candidates. To attract Ethiopians living in the diaspora, especially female professionals, all vacant National Officer Positions were shared with the Eastern and Southern Africa Regional Office for wider circulation. This was in addition to placing advertisements in local media and internally within the UN System. Four National Officer-D vacancies (two Chief of Field Office positions and two Child Protection Specialists) were shared with Human Resources at headquarters for advertisement through the e-Recruitment system. Although the exercise did not attract strong external female candidates for the D-level positions, good candidates were identified for National Officer C and lower level positions and this led to a modest increase in gender parity among National Officers (now 35 per cent female, 65 per cent male).

More rigorous monitoring of performance assessments led to an improved completion rate. By the end of February 2014, 96 per cent of staff had submitted their 2013 assessments and 59 per cent of 2014 work plans had been submitted (85 per cent by end March). By September, 92 per cent of mid-year reports had been submitted. The Country Office is analysing rating trends to ensure more consistent performance ratings.

The 2014 training plan was informed by Global and Regional office priorities as well as staff/supervisor discussions which identified skill gaps and areas for development. Five cross-cutting and 15 section-specific group trainings and 53 individual trainings were approved. By the end of November 2014, 11 (73 per cent) of the group trainings had been implemented benefiting 287 staff, plus 29 (55 per cent) of the individual trainings. Priority group trainings conducted in 2014 included Programme Procedures and Policy, Managing People for Results (MP4R), Harmonised Approach to Cash Transfers and Communication for Development. Implementation of the approved training plan was regularly tracked through assigned focal persons who reported to the Country Management Team on a monthly basis, under a standing agenda item. As part of the Peer Review Recommendations, Human Resources delivered training to field office staff in several areas, such as Ethics, Managing Performance, Entitlements, among others.

**OUTPUT 4 Internal Planning and Monitoring**

**Analytical Statement of Progress:**
ECO has been pro-active and strategic in seeking advocacy opportunities by ensuring that communication, advocacy and partnership are linked. Ethiopia’s national ambassador Hannah Godefa was instrumental in global and national advocacy through the following high level events: Davos (Jan), Partnership for Change – Oslo, (June), MNCH meeting, Toronto (May).
The visit by one of FAO’s goodwill ambassadors has provided excellent visibility for nutrition.

Major national advocacy events supported include the launch of the rota virus vaccine, the global micro nutrient forum and the 2nd annual APR meeting in Washington DC. In addition, a grant signing events with the MoH and EU for the EU-ESDE and the NORAD grant signing with UNFPA and MoWCYA.

In terms of capacity development, in line with the EU-ANSP, UNICEF coordinated a media training on nutrition for 70 journalist from the major media houses in every region with special focus of promoting positive nutrition practices and the need for multi sectoral responsibility for better nutrition.

During the reporting period, UNICEF was involved in 13 key events; disseminated 7 press releases, 9 key speeches and two exhibition - used for advocacy and visibility.

20 visits were coordinated, of 11 which by donor or development partners including the Deputy Secretary General, ELMA, JICA EU, Global Good, A World at School, Danish Government and Natcoms from Germany. Luxembourg and the Netherlands; 9 missions with a strong media / AV/Photography focus.

The events and visits enabled UNICEF Ethiopia to advocate for women and children through: public and silent advocacy, partnership mobilisation and by using both mainstream and social/digital media. The activities supported partnership strengthening and frequently resulted in additional funding.

The social/digital media strategy proves to be fit for purpose. We observe a significant increase in web and social media presence: 415 per cent increase in web views and 79 per cent increase of Facebook fans.

**OUTPUT 5 Internal Planning and Monitoring**

**Analytical Statement of Progress:**
The ECO Midterm Review (MTR) process was completed during the reporting period. ECO’s program result structure was revised following the MTR to incorporate the key findings and align with the new UNICEF Strategic Plan 2014-2017. The number of outcomes and outputs has been reduced from 20 outcomes and 93 outputs to 9 outcomes and 56 outputs to improve efficiency and effectiveness in planning and programming. UNDAF MTR was conducted shortly after UNICEF’s MTR was completed. UNICEF has actively participated and ensured that its programmatic priorities are considered in the revised UNDAF results.

The preparation of EFY 2007 and 2008 AWPs was completed during the reporting period. The signing ceremony of the regional EFY 2007 AWPs was held on June 30 before the new fiscal year started in July. However, Federal AWPs were delayed until September due to the busy schedule of the Ministers.

Budget utilization and HACT assurance activities were closely monitored by the management at the weekly MMM and monthly CMT meetings. The Trip Report Monitoring System (TRMS) has enabled staff to systematically document and share findings of the HACT assurance activities and to track outstanding actions and recommendations for further follow up and closing.

All 64 donor reports due from January to June 2014 were submitted on time and to a high
standard of quality. In line with ECO’s Resource Mobilization Strategy, 43 proposals (total of around US$ 125 million) were finalized and submitted during the indicated time frame. Of these, 13 proposals have been funded (around US$ 29 million); 6 were rejected (around 16 million) and 25 are in the pipeline (potential income of around US$ 80 million).

**Document Center**

**Evaluation**

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**Other Publication**

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<td>Joint Programme on Rights-Based Approach to Adolescent &amp; Youth Development in Ethiopia: Phase II (2014 –2017), project flyer</td>
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<td>Improved Nutrition through Integrated Basic Social Services with Social Cash Transfer in SNNP Region (Irish Aid project roll up banner)</td>
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<td>Improved Nutrition through Integrated Basic Social Services with Social Cash Transfer in SNNP Region (Irish Aid project flyer)</td>
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**Improved Nutrition through Integrated Basic Social Services with Social Cash Transfer in SNNP Region (Irish Aid project flyer)**

- Greeting card
- Year planner
- Desk calendar
- Umbrella
- CRC 25 photo (exhibition)
- CRC 25 roll up banner
- Enhancing Skilled Delivery in Ethiopia (EU –ESDE) photos (exhibition)
- Enhancing Skilled delivery in Ethiopia (EU –ESDE) roll up banner
- Enhancing Skilled Delivery in Ethiopia (EU –ESDE) folder
- Maternal Heath Brief (For EU-ESDE project)
- Enhancing Skilled Delivery in Ethiopia (EU –ESDE) project brochure
- Briefing note - Integrated Community Case Management
- Briefing note - WASH in schools
- Briefing note - Health Extension Programme (HEP)
- Briefing note - School Clubs
- Briefing note - Child to Child (CTC)
- Briefing note - Community Led Total Sanitation and Hygiene (CLTSH)
- Briefing note - Community Management of Acute Malnutrition
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- Video: CRC25: Day in the life of the girl child, Afar
- Video: Abelone Melesse, on her national GWA appointment
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- Video: GWA’s Hanna and Abelon on empowering girls
- Video: My life, my decision – (PSA by Tommy T)
- Video: Samuel Godfrey reflects on Sanitation and Water for All (SWA’s) High Level Meet
- Video: Missing Mothers
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- Video: Participants reflect after a media training on nutrition
- Video: UNICEF’s river water intake project results in people having water year-round
- Video: Thank you ING
- Video: Curbing the Polio Spread through Nation Wide Immunization Campaign

**Stunting Reduction Analysis**

**UNICEF WASH in Ethiopia – A Programme Overview July 2014**
Wet Nutrition – Multiple Use Systems for Water, Sanitation and Hygiene (WASH)
ONE WASH National Programme
Wild Polio Virus Outbreak in the Horn of Africa Response Activities: ETHIOPIA - Weekly Situation Report
Immunization for Child Health! – A speaking book to support health education on immunization in Ethiopia. (in Amharic and Oromiffa)
Men A (Meningitis A) Guide
Improving Children’s Lives through Research – Summaries from presentations at the monthly seminar series of the Child Research and Practice Forum in 2012
Evaluation of Integrated Community Based Participatory Planning (ICBPP) in Tigray Region, Ethiopia
Evaluation of Community Management of Acute Malnutrition in Ethiopia
Out of School Children Study in Ethiopia

Lessons Learned

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