

### Executive Summary

#### **2-4 most important achievements of the year**

In both Guyana and Suriname, a complete reorientation of UNICEF's support to focus on equity issues was achieved through preparation of a new Country Programme for the period 2012 – 2016. In Guyana, the PMTCT Programme was expanded to eight additional sites making the service accessible in all 10 regions of Guyana. This resulted in more than 90% of pregnant women being able to receive HIV testing and counseling, thus creating the potential for the reduction of number of children born with HIV. The Guyana ECD policy (available as draft at the beginning of the year) and ECD monitoring tools and strategies were finalised and submitted for approval by the cabinet.

UNICEF's advocacy in Suriname led to the ratification of the two optional CRC protocols on 24th October 2011. In the area of Water Sanitation and Hygiene (WASH), the development of 11 community action plans for safe water in the interior was undertaken with the participation of the communities. The respective communities developed the goals and strategies to achieve the set objectives. DevInfo was launched in Suriname and will function as the national human development database once data from line ministries and the fourth round of the UNICEF-supported Multiple Indicator Cluster Survey (MICS4) has been uploaded.

#### **2-4 most significant shortfalls, compared to the expected results outlined in the Country Programme and/or CPMP**

In Guyana, funding shortfalls hindered implementation of a planned Child Protection Case Management System. In Suriname, MICS4 issuance of the MICS report was planned for 2011 but this could not take place due to technical difficulties that were being reviewed by UNICEF Headquarters at the end of the year.

#### **The most important collaborative partnerships in which UNICEF is currently involved**

In the area of education in Guyana, a strategic partnership with the Ministry of Education, the World Bank, the International Labour Organisation, Voluntary Services Overseas and Peace Corps was central to the reduction of drop outs from an average of 15% to 10% for primary and secondary schools thus increasing attendance in 2011 by 5% as reported by MoE in 2011. A newly established partnership with the Indigenous People's Commission to collaborate on issues of equity (including Birth Registration) is expected to be vital to the advancement of the rights of Amerindian children.

The Inter-American Development Bank (IDB) is increasingly becoming a strong strategic partner as its Conditional Cash Transfer programme with the Surinamese government offers opportunities to improve and strengthen comprehensive programming for the benefit of young children, mothers and families. Also in Suriname, partnerships established with the Foundation for Development of the Interior (FOB), Red Cross, Ministry of Natural Resources, Ministry of Regional Development, the NGO Constellation, and Peace Corps ensured effective support for and monitoring of programme implementation and coordination in WASH. Within the Education sector, UNICEF collaborated with IDB, VVOB, and the Dutch Embassy to support the Ministry on initiatives to improve access to quality primary education within the interior.

### Country Situation

A major positive development in the country situations in Guyana and Suriname in 2011 that will affect progress towards achievement of children and women's rights was the strengthening of political will to place equity at the centre of development initiatives related to children and women. This culminated in government buy-in across both countries for a new strongly equity-focused programme of UNICEF support (2012-2016).

In Guyana, the legislative framework for children was further expanded in 2011 with the National Assembly approving the Child Custody, Contact, Guardianship and Maintenance Act. This increased, from five in 2010 to six in 2011, the number of an identified set of eight legislations needed to provide a

comprehensive legislative framework for children that have come into force. At the strategic policy level, the year saw the finalization of the Poverty Reduction Strategy Paper 3, PRSP3 (2011-2015) with a full pillar on special intervention programmes to address regional and demographic pockets of poverty which is well-aligned with UNICEF's equity agenda.

Compared to the 2009 report, the 2011 MDG Progress Report for Guyana provided a more positive outlook on achievability of the Millennium Development Goals (MDGs) by rating all eight targets as likely or potentially achievable by 2015. This was, for instance, the case with regard to MDG4 (Child mortality) and MDG5 (Maternal Health) which were both rated by the 2009 report as unlikely to be achieved. The government attributed a major decrease in under-five mortality rate from 120/1000 live births in 1991 to 17/1000 live births in 2008<sup>[1]</sup> to the successful implementation of nutrition and maternal and child care initiatives (including improved child immunization coverage), the integrated approach to child health, and stronger results in the Prevention of Mother to Child Transmission (PMTCT) of HIV. Despite this positive outlook, the report highlighted issues surrounding the quality of care, particularly around the time of birth and improved nutritional intake for both mother and child as the key areas for attention in order to achieve MDG4. Significant improvement in maternal mortality (86/100,000 live births in 2008<sup>[2]</sup> compared to 320/100,000 in 1991) was attributed by the report to an almost universal coverage for antenatal care, increased access to improved facilities, and high (96%) coverage of births by skilled birth attendants. Additional improvements in the quality of care offered by the maternal health care professionals (including nurses and obstetricians) are listed as the key to achievement of MDG5 in 2015. These initiatives need to be complemented by stronger attention to issues of equity and the use of community-based strategies.

In Suriname, Government's commitment to the realisation of children's rights was demonstrated by the establishment of the Presidential Working Group for the development of an integrated child and youth policy to combine and strengthen existing frameworks and policies to foster growth and positive development of all children and youth, with attention to equity. Suriname ratified the two optional protocols of the Convention on Rights of the Child on October 24, 2011. In addition, the government approved the National Development Plan 2012-2016 that outlines six (6) priority areas for development including one area focusing specifically on children. The National Action Plan for children was adopted by the Council of Ministers with an extended implementation period and a decision to make it mandatory for each relevant government Ministry to fulfill its responsibility in relation to child rights. Legislation on establishment of the Child Ombudsbureau and the use of alternative sanctions for children in conflict with the law was drafted within the year for submission to parliament for approval.

Also in Suriname, an inter-ministerial Committee on "Control of Child Care Institutions" was established in 2011 to prepare the introduction and implementation of quality assurance standards for over 300 residential and day care facilities. Guidance, regulatory and inspection mechanisms were being developed by end of the year.

<sup>[1]</sup> Please note that the 2009 DHS states an U5MR of 40/1000lb.

<sup>[2]</sup> The figure is based on the MoH records. UN Publications report for 2010 an 'adjusted' figure of 470/100,000 live births. The State of the World's Children report notes that the most recent 'reported' MMR (in the period 2003-2008) was 160 per 100,000 live births.

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

In Guyana, the most disadvantaged children reside in the hinterland (11% or 37,363 of the child population of 300,000) and rural areas (71% of the country's child population).<sup>[1]</sup> In Suriname, 20,000 children (about 10 % of the child population) living in the interior areas are the most disadvantaged. In terms of ethnicity, Amerindian children (in both Guyana and Suriname) and Maroon children (in Suriname) are among the most disadvantaged.

Inequities are manifested in most areas of child rights as summarised in the new Country Programme Document for Guyana and Suriname, 2012 – 2016. For example, in Guyana, primary school completion stands at only 66% in rural areas compared to 85% in urban areas (MICS 2006). In Suriname the primary net completion rate stands at 51% nationally but only 18% in the interior (MINOV 2009). In Guyana 76.5% of births in the hinterland are attended by skilled health personnel compared to the national level of 92% (MICS 2006). In Suriname these levels are even lower with 71% for the interior and 90% nationally (MICS 2006). In Guyana, 52.4% of people living in the hinterland have access to improved drinking water compared to the national average of 91.2% (MICS 2006). In Suriname, only 25% of people in the interior have such access compared to 87% nationally (MICS 2006).

[1] Calculation is based on figures from Census data 2002 (number of children per region) and Guyana DHS 2009 data on distribution of population between urban and rural areas.

### **Data/Evidence**

Between 2010 and 2011, Situation Analyses and Assessments (SitAn) of children and women conducted in both Guyana and Suriname documented the state of knowledge on children and women's rights and established areas where further knowledge is needed. In 2011, efforts were initiated to start filling the gaps. For example, in Guyana, a study on birth registration was undertaken and information gained was used to effectively advocate for birth registration as a national priority, leading to a Presidential Declaration committing the country to eliminating inequities in birth registration by 2015. A study on the vulnerability of young Guyanese to HIV commenced during the year and results, expected to be available in 2012, will enable effective planning to deliver comprehensive, culturally appropriate, and targeted programmes for HIV prevention. In Suriname, MICS4 was conducted in 2010/2011 and preliminary results and data tables were being reviewed for finalisation by UNICEF Headquarters by the end of 2012. Additional information was collected by a special SitAn on Children and HIV in Suriname within the year and this will support a stronger focus on children in the planning and implementation of HIV interventions.

Both Guyana and Suriname are now using DevInfo (GuyD\_Info in Guyana and Suri-Info in Suriname). UNICEF is supporting the Ministry of Amerindian Affairs (MoAA) in Guyana to establish a Management Information System (MIS) which will provide up to date disaggregated information on Amerindian communities. In Suriname, a similar system is currently being established for the Education Sector (EMIS) with the first set of disaggregated data expected to be available in 2012 to allow for improved evidence-based planning, particularly for the most vulnerable children.

To increase knowledge on Child Protection issues, UNICEF in Guyana worked with the Ministry of Labour, Human Services and Social Security (MoLHSSS) to initiate a Child Protection Case Management System. Although completion of a full-fledged system was delayed due to funding constraints, data collection continued and work towards a comprehensive system will continue in 2012.

In 2011, UNICEF Suriname together with Ministry of Education (MoE) conducted a primary school mapping which aimed to gather information about the infrastructural conditions of schools; increase knowledge on out of school youth; determine the performance of schools; and identify inequalities among regions as well as urban and rural areas. The gathered information will enable the MoE to develop evidence based policies and legislations for the sector. In Guyana a similar mapping exercise was done for the Child Protection services and services available for HIV positive adolescents. In both cases referral systems were established based on information gathered.

Recognising the challenges in availability of disaggregated data particularly with regard to the most deprived children, the new country programme of cooperation between UNICEF and the Governments of Guyana and Suriname starting in 2012 will help address that issue.

### **Monitoring Mechanism**

Both offices, together with their implementing partners, monitored progress towards improvements in the situation of the most deprived children by a variety of methods such as field visits, the implementation of specific status monitoring tools, assessments, and progress review meetings. In Guyana examples of these actions are found in the monitoring of Secondary School Health Clubs and the Youth Friendly Service Programme and the Health and Family Life (HFLE) programme. The "HealthQual" programme which aims at implementing quality management and quality improvement initiatives for HIV care and treatment was utilised to further monitor the quality of interventions for child and maternal health across the country and adjustments were made to implementation strategies where necessary. An Assessment of Children's Legal Aid in Guyana concluded that the provision of children's legal aid has been highly successful especially with regard to children who have been victims of a range of injustices and abuse. In Suriname, an assessment of the in-service teacher training programme ('Ik geloof in jou' and 'Krachtige leeromgeving') identified limited sustainable results and highlighted the need for further guidance and coaching for teachers. These are areas that will be addressed with UNICEF support as part of the new programme starting in 2012.

To strengthen monitoring and evaluation, the new UNICEF-Guyana/Suriname Programme of Cooperation (2012 – 2016) established a Programme Component on Planning, Monitoring and Evaluation with an equity focus. The programme and UNICEF's support to the Governments of Guyana and Suriname in this area will be driven by the upgrading of in-house technical expertise and an increase of staffing for the monitoring and evaluation function from one person to two, one for each country.

### **Support to National Planning**

UNICEF continued to integrate capacity building for tracking and assessment of programme progress and outcomes within the agreed AWP targets with a focus on development and implementation of monitoring tools in 2011. For example in Guyana, in the area of Early Child Development (ECD) and quality basic education, participatory development of user friendly monitoring tools and the conduct of relevant training in the use of the tools and action research have been the basis for monitoring programme progress with partners. More than 50 persons from the University of Guyana as well as senior officers in child care establishments were trained and became competent trainers and assessors in use of the standardized monitoring tool for ECD programmes. Teachers in more than 100 primary schools in Guyana are now competent in the use of monitoring tools for tracking the progress of schools for certification as Child Friendly. The schools welfare department makes use of action research and quarterly programming reviews for tracking out of school children and retaining those who have returned.

In 2011, UNICEF supported the participation of Government and other partners in various national and international training programmes which focused on reaching and tracking the most disadvantaged and threatened children. Agencies from Guyana and Suriname also benefited from training carried out in Jamaica which targeted strategies for reaching and tracking the needs of adolescent boys and girls.

### **Country Programme Analytical Overview**

UNICEF's strategic contribution through the new country programme (2012 – 2016) in both countries will continue to be in capacity building for government and civil society to plan, implement, monitor, and evaluate evidence-based and equity-sensitive policies, legislation and programmes for children and women. Part of this strategic contribution will focus on stronger results-based linkage between downstream and upstream initiatives.

The new programme will be guided by the human rights based approach and strategic monitoring as part of the normative role of UNICEF in Middle-Income Countries. It will have an equity focus to increase its impact on the children living in the interior of Suriname and hinterland of Guyana. As cross-cutting strategies, the

programme will focus on strengthening national and local capacity for result-based planning, monitoring and evaluation. The strategic use of Communication for Development will be promoted for behaviour change especially in the areas of health and education. Sharing of innovative initiatives through south-south cooperation will be promoted, including through the strategic partnership with the Caribbean Community (CARICOM) Secretariat. The programme will contribute to and benefit from multi-country Caribbean initiatives in education, protection and data collection and management. Disaster risk reduction will be part of selective strategic interventions.

### Effective Advocacy

*Mostly met benchmarks*

During the reporting period, UNICEF in both countries was able to draw on the outcomes of the 2010 Situation Analyses and Assessments (SitAn) to advocate more effectively for the rights of the most deprived children. The SitAns recommended, among others, areas for additional research to strengthen knowledge to guide evidence-based advocacy. As part of efforts to fill the gaps in Guyana, UNICEF undertook an Assessment of the Legislation, Policy and Practice on Birth Registration and used the results to successfully advocate together with the Rights of the Child Commission for a Presidential Declaration committing the country to achieving universal birth registration by or before 2015. Through its established partnership with the Guyana Civil Defense Commission, the office successfully advocated for the infusion of the Core Commitments for Children into the national Disaster Risk Management policy and the participation of children in Disaster Risk Reduction activities. In the run up to the 2011 National Elections in Guyana, UNICEF together with the Rights of the Child Commission successfully advocated for all four political parties contesting the elections to sign declarations to promote and protect the rights of children with special emphasis on equity issues. This initiative was recognized as a good practice by UNICEF headquarters and has been published as a good equity case study on UNICEF's internal communication network (ICON).

UNICEF's consistent advocacy in Suriname contributed to the Government's ratification of the two Optional Protocols of the Convention on Rights of the Child. A visit of Suriname's First Lady to UNICEF's headquarters in New York and the creation of a Presidential working group for the development of an integrated child and youth policy highlighted the commitment of the current administration regarding Children's Rights. UNICEF has been requested and has committed itself to continued support to the working group. The Ministry of Natural Resources' involvement in the Water, Sanitation and Hygiene (WASH) programme in Suriname has served as an encouragement to other governmental institutions to increase their commitment and contribution to overcoming existing disparities regarding water and sanitation. UNICEF's consistent advocacy on improving access to quality primary education resulted in a child friendly schools in-service training and primary school mapping that was undertaken in collaboration with the Ministry of Education to determine areas for further support.

### Changes in Public Policy

In both Guyana and Suriname, UNICEF was involved within 2011 in supporting the finalisation of policies as well as in preparatory steps for upcoming policy initiatives. In Guyana, the draft ECD policy was finalised and was awaiting approval by cabinet at the end of the year. The costing of the National Health Sector Strategy using the Marginal Budgeting for Bottlenecks approach is providing the basis for the development of the new National Health Sector Strategy 2012-2020. In Suriname, UNICEF supported the inter-ministerial, interdisciplinary Committee on "Control of Child Care Institutions" that is preparing the introduction and implementation of the standards for over 300 residential and day care facilities amongst others by providing technical assistance for the development of guidance, regulatory and inspection mechanisms. Also in Suriname, consistent advocacy from UNICEF resulted in adoption of the National Action Plan for Children by the Council of Ministers. Under the plan, it is now mandatory for all ministries

to undertake and fulfill their roles with regard to child rights.

Although policy development is strategically integrated into Annual Work Plans, UNICEF will continue to scan the policy environment in both Guyana and Suriname and take advantage of emerging opportunities to catalyse changes in public policy to achieve stronger results for the most deprived children.

### **Leveraging Resources**

UNICEF's collaboration with the Inter-American Development Bank (IDB) and Pan-American Health Organization (PAHO) enabled the generation of the resources required to support a micronutrients survey in Guyana which commenced this year. It is aimed at providing knowledge to guide planning and programming for the prevention and control micronutrient deficiencies. To help address shortages of staff faced by the Government in Guyana, MoLHSS, volunteers at the community level were identified and trained to provide basic social interventions like psychosocial support and basic counseling. This enabled the rendering of services to disadvantaged children in the interior through dedicated children's community care points. In Suriname, UNICEF collaborated with VVOB (the Flemish Development Cooperation) to leverage resources for in-service teacher training to strengthen their knowledge and skills to build supportive learning environments to help children learn in safe and stimulating environments. The collaboration of UNICEF and the IDB with regard to the Conditional Cash Transfer programme with the Government of Suriname promises unique opportunities to contribute to decreasing disparities for vulnerable groups of children by improving and strengthening comprehensive programming in health and education. UNICEF's agreement in Suriname with Peace Corps Volunteers is helping to provide the human resources needed to monitor WASH and innovative education initiatives in the interior where most of the disadvantaged children live and is making it possible for UNICEF to utilize scarce financial and human resources in an optimal way.

### **Capacity Development**

*Partially met benchmarks*

Enhancement of the capacity of duty bearers to meet obligations and rights holders to claim their rights continued to be at the core of UNICEF's work across all programme areas in Guyana and Suriname. In Guyana, structured training programmes across all levels of the ECD learning continuum have ensured that 7% of the 0-3 and 90% of the 3-6 age groups have access to quality ECD programmes. UNICEF continued its support to the HFLE programme by training 70 secondary and 104 primary school teachers to deliver the curriculum using participatory methods that are benefitting 27,825 children and helping them to make informed decisions while improving their conflict resolution skills. The Guyana MoAA was supported in establishing data collection systems on Amerindian communities thus gathering information for evidence based programming. In addition, 52 persons including registrars and statisticians were trained in data recording for birth registration. In the area of Health, a key component of the process of costing the National Health Sector Strategy which is being supported by UNICEF is a development of the capacity of staff in the Guyana Ministries of Health and Finance to identify bottlenecks in the system and realign funds to reach the most deprived groups of society. In addition, service providers' capacity for PMTCT and Maternal and Child Health was strengthened in Guyana to help improve the quality improvement of services.

Through its leadership of the UN Emergency Technical Team (UNETT), UNICEF in Guyana was able to use the process of updating the Inter Agency Emergency Response Plan to link it with the CCCs in Emergencies guidelines and to strengthen and clarify cluster lead preparedness. The revised plan will form the basis integration of UN support within the national Disaster Risk Mitigation (DRM) work plan for 2012 and the

infusion of the CCCs within sectoral programmatic preparedness activities. UNICEF has also provided strategic and financial support to the Guyana MoLHSSS to develop and strengthen existing capacity to fulfill its mandate as sector lead for protection and shelter management through the national DRM strategy. To further build capacities of rights holders, UNICEF Guyana together with its implementing partners trained over 500 young people who are now advocating for their own rights through television programmes and magazine articles and also offering peer-to-peer training. This initiative is discussed further in the section on Communication for Development (C4D) below.

In Suriname, UNICEF's capacity-building efforts for key policy makers increased their awareness for comprehensive planning and programming benefiting the development, health and wellbeing of the most vulnerable children, especially the 0-3 age group and adolescents. At the community level, approximately 1,200 Indigenous and 1,675 Afro-descendant inhabitants of 16 villages in the interior now have the skills to identify health risks related to hygiene, water quality and proper sanitation. . In addition, 681 (85%) teachers from 69 (out of 87) schools and 16 teachers from two Youth Detention Centres in the interior benefitted from Teacher Training sessions strengthening them to apply the Child Friendly Education principles in the most deprived communities.

### Communication For Development

#### *Initiating action to meet benchmarks*

UNICEF Guyana used C4D in 2011 to empower children and young people by building their capacity to use various forms of media as platforms for building knowledge and sharing information on child's rights. Five hundred children in six of the country's ten regions (Regions 1, 6, 7, 8, 9, and 10) participated in multi-media workshops where they developed their own video clips on HIV prevention, birth registration, domestic and gender violence and EPRP. These children now have the skills to advocate for their rights at the community, regional and national level and have shared information with peers reaching over 12,000 children. Together with the Child Care and Protection Agency and the newly established Child Protection Committee, the "TELL Campaign" was launched in Guyana aiming to raise awareness of child abuse amongst children and parents and encouraging children to tell an adult or any one in authority of any type of abuse that they experience. The campaign reached over 9,000 primary school age children with information about sexual abuse and empowered them to report abuse. To raise awareness on birth registration in Guyana, the issue was infused into a radio serial drama with national reach.

In Suriname the "*Baby en Peuterboek*" (Baby- and Toddlerbook) and its related C4D materials reached around 10,000 parents and other care givers with information on how to establish stimulating environments for children's growth and development. In observance of the Global Hand Washing Day, two newspaper articles covering 18,000 readers nationwide in Suriname (one especially printed in the children's section) raised awareness among children and parents. In addition, UNICEF supported the distribution of child friendly instruction notes and materials on hand washing with soap to 78 schools as part of efforts to improve children's knowledge on safe hygiene practices. Child Friendly School training posters and TV-Spots were used to raise awareness among communities, especially among parents of school children, on the importance of their engagement with school activities. A national pilot of the regional LAVCOX program, that gives opportunity to young reporters to use their voices, was initiated in the interior to report on issues affecting children's lives.

### Service Delivery

*Mostly met benchmarks*

Given that Guyana and Suriname are both middle income countries UNICEF's primary focus is on upstream policy development and capacity building as opposed to direct service delivery.

### Strategic Partnerships

*Partially met benchmarks*

UNICEF was in the past year able to maintain existing partnerships and establish new ones with different partners in to accelerate results for children especially for the most disadvantaged. In the area of education in Guyana, a strategic partnership with the Ministry of Education, the World Bank, the International Labour Organisation, Voluntary Services Overseas and Peace Corps was central to the reduction of drop outs from an average of 15% to 10% for primary and secondary schools thus increasing attendance in 2011 by 5% as reported by MoE in 2011. A newly established partnership with the Indigenous People's Commission to collaborate on issues of equity (including Birth Registration) is expected to be vital to the advancement of the rights of Amerindian children.

In Suriname, UN partners continued to strive to align their programmes within the framework of the country's self-starter Delivering-as-One (DaO) initiative to leverage advocacy for child-friendly and gender sensitive legislation, policies, and budgets. The Inter-American Development Bank (IDB) is increasingly becoming a strong strategic partner, as its Conditional Cash Transfer programme with the Surinamese government offers opportunities to improve and strengthen comprehensive programming for the benefit of young children, mothers and families. Also in Suriname, partnerships established with the Foundation for Development of the Interior (FOB), Red Cross, Ministry of Natural Resources, Ministry of Regional Development, the NGO Constellation, and Peace Corps ensured effective support for and monitoring of programme implementation and coordination in WASH. Within the Education sector, UNICEF collaborated with IDB, VVOB, and the Dutch Embassy to support the Ministry on initiatives to improve access to quality primary education within the interior.

### Mobilizing Partners

Overall, partnering with community-based and informal networks is being used to reach the most remote areas where governments reach and capacity is limited in Guyana and Suriname. In this regard, UNICEF has been able to help mobilise responsible community-based partners including village chiefs and community volunteers (as social workers) in Guyana to provide structured support services at community care points for the most disadvantaged children. Through the engagement with NGOs, adolescents in the hinterland of Suriname were reached with information on HIV and on healthy lifestyles through sports and media initiatives. Peace Corps Volunteers' presence in the interior of Suriname and partnership with the Foundation for Development of the interior provided opportunities to mobilize communities in the development of community water, sanitation and hygiene development plans for improved access to safe water and the computer aided learning programme for the interior in Suriname.

### Knowledge Management

*Partially met benchmarks*

In line with UNICEF's organisational approach, Knowledge Management is being addressed in Guyana and Suriname from the angles of generation, organisation, sharing and use of data, Information, and knowledge. For example, to help create needed knowledge during the reporting year, UNICEF in Guyana supported an Assessment of Legislation, Policy and Practice on Birth Registration which filled a critical gap on that issue. In addition, a Mapping of Child Protection Services to provide the knowledge base for a more comprehensive approach to child protection services in Guyana. In Suriname, MICS4 was undertaken in 2010/2011 to provide critical information on the MDGs and other child-related indicators and will also provide information on disparities by geographical area, gender and poverty. Furthermore, the school mapping exercise and establishment of the Education Management Information System (EMIS) in Suriname are aimed at generating the evidence base for equity-focused policy development especially with regard to the Strategic Framework for the Education Sector 2012-2016.

Suri-Info (Suriname's version of DevInfo) and the new SitAn for Suriname were formally launched within the year as avenues for sharing disaggregated data and knowledge for evidence-based legislation as well as policy and budget formulation to benefit children and women. It is within this same context that UNICEF Guyana also continued to support use of GuyD\_Info in Guyana in 2011.

### Human Rights Based Approach to Cooperation

*Mostly met benchmarks*

Within 2011, a new programme of UNICEF cooperation with the Governments of Guyana and Suriname (2012 – 2016) was developed and presented to the Executive Board. The programme is grounded on human-rights principles and for the first time explicitly provides a framework for UNICEF's support to focus on the most disadvantaged children and women in both countries. By end of the year, the programme was being operationalized through actions plans for implementation. In order to support reporting on Human Rights Conventions, the UNICEF Guyana office led the preparation of the UN Country Team (UNCT) report on the state of Guyana's progress in implementing the Convention on the Elimination of all Forms of Discrimination against Women (CEDAW). In Suriname, UNICEF pursued advocacy that contributed to the country's ratification of the two optional protocols of the CRC to expand the normative framework for children in operation in the country.

All programmes continued to make investments in the enhancement of the capacity of both duty-bearers and rights holders in line with the principles of the human rights-based approach and special attention was paid within the year to rights holders' understanding of their rights and the building of their advocacy capacity. In this regard, the C4D initiative to empower young people to advocate for their rights has already been noted above. In a similar vein, a child-friendly version of the Protection of Children's Act 2009 was developed and is being utilised by children in secondary schools in Guyana to understand the nature of the protective legal framework available. Probation and social workers as well as community level volunteers were trained and equipped with child rights knowledge enabling them to better understand and present the plight of children within the human rights framework in Guyana. Suriname's WASH programme is based on the Human Results-based principle of universalism which calls for giving everyone access to safe drinking water and to a safe environment where risks of waterborne diseases are reduced to a minimum. The programme's participatory decision making process within the framework of the rights-based approach is contributing to sustainability and ownership. A notable achievement of the community partnership on WASH was the development of an image-box specifically aimed at overcoming literacy and

language barriers which in turn fostered greater participation among community members thus demonstrating the interrelatedness of human rights.

### Gender

*Mostly met benchmarks*

UNICEF Guyana's support for ECD interventions in 2011 deliberately targeted men to advocate for and promote the fact that men have equal roles in parenting and early stimulation. The inclusion of men in the accredited ECD practitioners programme at the University of Guyana, the active participation of male academics at the University to find evidence for ECD Policy issues, and the use of male mentors in the public school system were strategically deployed to help address the issue of weak presence of male role models in the society and the underperformance of boys in the school system. In addition, a major shift is being initiated by supporting girls in secondary schools to benefit from non-traditional skills training (like plumbing, masonry) in the technical and vocational programmes of both regular schools and the New Opportunity Corps (Juvenile Justice Reform Centre). This will be used as a basis for policy and systemic changes in the education system to help find a balance that caters for the strategic and practical orientation of boys and girls with regard to gender stereotypes.

In Suriname, the concept of gender equality guides the WASH programme. The programme is designed to reach the most disadvantaged families in the interior of Suriname with the active involvement of both females and males. The local female WASH facilitators outnumber males but there is still work to be done because they must report to the male village leaders who are in the majority.

The new programme of UNICEF support for Guyana and Suriname (2012 – 2016) has been designed to be gender-sensitive with indicators disaggregated by gender where relevant.

### Environmental Sustainability

*Mostly met benchmarks*

The office undertook the mandated Environmental Impact Assessment (EIA) as part of the process for development of the new Country Programme. During this exercise, the programme components within the new 2012-2016 Guyana/Suriname Country Programme Document were reviewed according to the standard procedure (as stated in the PPP Manual Cpt 6 Section 3). They were determined as not posing a risk to environmental sustainability, according to the checklist criteria.

### South-South and Triangular Cooperation

UNICEF supported the participation of staff from government agencies and NGOs (both from Guyana and Suriname) in a 5-day training course held in Jamaica on sharpening the focus on most at risk young people across the Caribbean (including HIV, Health and Social Harms). The course which, among other things, provided an opportunity for knowledge and information sharing between participants from the Caribbean built the capacity of policy makers and programme staff to design evidence-based policies, strategies and

programmes with and for young key affected populations (YKAP). French Guyanese and Guyanese Red Cross staff visited Suriname with the main focus on exchange of experiences on WASH programmes. The visit comprised several meetings with local partners, and a field trip to one of the WASH clusters in the North-East of Suriname called Cottica. This led to an increased understanding of shared challenges and allowed learning from the preliminary successes of the Suriname programme.

As reported in the section on "Capacity Development" above, a key component of the process of costing the National Health Sector Strategy in Guyana, which is being supported by UNICEF, is a development of the capacity of staff in the Guyana Ministries of Health and Finance to identify bottlenecks in the system and realign funds to reach the most deprived groups of society. Technical assistance for this exercise is being provided by consultancy services from Pakistan and the Country Office is in talks with the Regional Office to have the cadre of government staff trained under the exercise to support and train others from different countries in the Latin America and Caribbean region.

### Country Programme Component: Child protection and public policy

#### PCRs (Programme Component Results)

PCR	EQRank	OTDetails
By 2011 rights of all children and women in Guyana are monitored and addressed by effective and efficient national policies in accordance with International and Regional Development and human rights commitments.	2	FA5OT2, FA5OT3, FA5OT4

#### Resources Used in 2011(USD)

Resource Type	Planned for 2011 (as per CPAP ceiling )	Allocated in 2011	Estimated Year-End Expenditure	%Spent (4)/(3) * 100
OR-E	0.00	0.00	0.00	0.00
OR-R	500000.00	571678.28	534451.17	93.49
RR	200000.00	305149.94	288138.85	94.43
<b>Total</b>	<b>\$700,000.00</b>	<b>\$876,828.22</b>	<b>\$822,590.02</b>	

#### Results Achieved

This PCR focused on the provision of a protective family and community environment especially for children at risk for violence, exploitation and abuse; a juvenile justice system that protects children as victims, witnesses and offenders; and national and regional information and advocacy systems to provide quality social data and help monitor evidence-based public policies adequate to achieve the Millennium Development Goals. In response to the issue of child abuse (including gender-based violence), the MoLHSSS received UNICEF's support to develop a National Plan of Action to address violence. This was complemented by the development of information, education, and communication (IEC) materials to raise awareness on child abuse. The "TELL campaign" noted above in the Section on C4D targeted all school children as a strategy to reduce child sexual abuse and to create a protective family and community environment for children. Further, child protection services were mapped nationwide and a referral system was developed to be piloted in 2012. A comprehensive approach to child protection services is now in place with elements on: (1) capacity building strategies (including for provision of community-based psychosocial support for children), (2) guidelines on care principles and (3) essential packages of social services especially for children affected by HIV/AIDS and children in institutional care.

Based on the findings of an "Assessment of Legislation, Policy and Practice" on birth registration, a number of initiatives were undertaken in 2011. UNICEF advocacy led to a Presidential Declaration committing Guyana to achieving universal birth registration by or before 2015 and an agreement was reached with the Ministry of Home Affairs on the design of an electronic national civil registration system. The drafting of Standard Operational Procedures for the notification of births was completed and the capacity of 52 persons (including registrars and statisticians) was strengthened to support the recoding of data, awareness-raising, and public education on birth registration.

An agreement on a common protocol for relevant line Ministries with respect to children in contact with the law and the institution of measures for the reform of the detention centre for juveniles were major results for juvenile justice. Although funding constraints and shifting priorities hindered achievement of planned results, linkages with other elements of the country programme resulted in the agreement to use parts of the Child Friendly Schools model in the educational component of the NOC programme and preparation of a draft Protocol on Children in Contact with the Law.

Progress towards strengthening national and regional information and advocacy systems was recorded during the reporting year with the MoAA starting work on the development of its MIS. Once fully operational, the MIS will strengthen the availability of data on Amerindian communities. Progress was also made towards strengthening budget monitoring with the initiation of a review of budget allocations in the

health sector via a costing the National Health Sector Strategy (NHSS). By the end of 2011, bottlenecks in the health system had been identified. In 2012, scenarios to overcome these bottlenecks will be developed to inform the new NHSS 2012-2020.

### **Most Critical Factors and Constraints**

Funding for this programme improved with allocation of thematic funding towards the end of the year. Due to the lateness in receiving these funds that are earmarked for use in 2012, the amount is not reflected in the funding overview. For much of the year however, funding constraints limited progress on this component. As part of efforts to overcome funding constraints with regard to the children living in remote areas, the UNICEF office strategically aligned initiatives under the PCR with those in other areas such as education to reach a greater number of children in the interior. The focus of top government and political officials in the country on the 2011 elections in Guyana restricted operational space.

The office will develop and implement a comprehensive fundraising strategy to respond to the challenges experienced in 2011. In addition, new partnerships and planning across agencies and donors is expected to maximise the use of resources and achievement of results.

### **Key Strategic Partnerships and Interagency Collaboration**

A broad partnership between the Ministry of Finance, the Ministry of Health, United Nations Development Programme (UNDP) and UNICEF was vital for the progress of the costing of the National Health Sector Strategy (NHSS) in Guyana. Although the costing could not be finalised during the year (due to challenges in data collection) the demonstrated ownership by the Ministry of Health has been instrumental to driving the process and placing it at the centre of the development of the new NHSS.

A combination of high-level advocacy and strategic partnerships (including with the President, Prime Minister, Parliament, Constitutional Commissions, and the major political parties) resulted in high level agreements to protect child rights including a declaration of commitment by all political parties to protect child rights and a presidential declaration on universal birth registration by 2015. Employing the tenets of C4D for the realization of programmatic results, and linking this initiative to programme priorities, UNICEF partnered with the Ministry of Culture, Youth and Sport, Youth Media Guyana, NGOs working in the hinterland and village leaders to empower youths through a series of capacity building workshops to use media as a platform to advocate for their rights as it pertains primarily to child protection issues, HIV prevention, birth registration, EPRP and education.

UNICEF continued its collaboration with the MoLHSSS to launch the Media Award for Journalists who displayed the highest standards of ethical journalism (based on international standards) in reporting on the situation of children and women, and the development of the consolidated Media Trends Report for 2010 as a strategy for keeping children's issues continuously visible.

### **Summary of Monitoring, Studies and Evaluations**

- A Child Protection Referral system has been developed to assist in timely and systematic referral of cases.
- Assessment of Children's Legal Aid in Guyana concluded that the provision of children's legal aid has been highly successful as evidenced by its delivery of significant aid to children who have been the victims of a range of injustices and abuse. (Guyana Legal Aid Clinic, Children's Legal Aid clinic and UNICEF).
- Towards Universal Birth Registration the Assessment of Legislation, Policy and Practice on Birth Registration for Guyana was essential in the advocacy for the Presidential Declaration on Birth

Registration and programmatic guidance in that thematic area.

### Future Work Plan

Under the new Guyana/Suriname Country Programme 2012-2016, Child Protection will be handled from both an upstream and a downstream perspective.

Key areas of upstream focus will include:

- The strengthening of administrative systems like the Information Management System for Child Protection, Birth registration and on Amerindian issues.
- Policy Gap Analysis studies in key areas relevant to Child Protection
- SitAn for children in contact with the law to inform a strategy development and action planning/implementation for preventive measures in the area of children in contact with the law.
- Advocacy for the passing of the Juvenile Justice Bill, 2008
- Institutional Reform for Children in Detention Centres.
- A strategic plan for the Constitutional Commissions (Right of the Child and Indigenous) with focus on children and equity will be developed as a prerequisite of the system of monitoring the compliance of the CRC.
- In addition, the office will support the Bureau of Statistics to update the GuyD\_Info database with disaggregated data by sex, age, ethnicity and region to inform policy formulation and analysis.
- The review of national sector strategy plans like the finalisation of the National Health Sector Costing.
- KAP Study on Child abuse in Guyana

Under the downstream component, the following aspects will be supported:

- A plan of action to fill identified gaps in the child protection system
- Conformity of legislation with the CRC (including the General Comment 11 on indigenous children) and CEDAW (Sexual Offences Act)
- Support to Child Protection service providers to render quality services for girls and boys victims/survivors of violence, exploitation, abuse and trafficking (e.g. development and management of Social Work Counseling to ensure equity in quality and access; sustained social work training through the University of Guyana).
- The aligning of child-friendly and gender-appropriate/sensitive investigative and court procedures with the CRC and promotion of access to justice of children in contact with the law.
- Ensuring that children without parental care receive appropriate alternative care that meets international standards.
- Continue the support for the multi-media campaign to reduce child sexual abuse.
- The development of programmes to prevent, treat and respond to violence, exploitation abuse and neglect and prevent the institutionalization of children
- The registration of children particularly those from the hinterland and rural areas.

## Country Programme Component: Child survival and development

### PCRs (Programme Component Results)

PCR	EQRank	OTDetails
All boys and girls in Guyana have access to essential health and educational services to ensure a best start to life and completion of basic education in a protective and child friendly environment by 2011.		2 FA2OT1, FA2OT2, FA2OT3, FA2OT4, FA1OT4

### Resources Used in 2011(USD)

Resource Type	Planned for 2011 (as per CPAP ceiling )	Allocated in 2011	Estimated Year-End Expenditure	%Spent (4)/(3) * 100
OR-E	0.00	0.00	0.00	0.00
OR-R	500000.00	684721.57	588479.88	85.94
RR	125000.00	44512.48	44512.48	100.00
<b>Total</b>	<b>\$625,000.00</b>	<b>\$729,234.05</b>	<b>\$632,992.36</b>	

### Results Achieved

Results under this PCR in 2011 related to access of pregnant women and nursing mothers in Guyana to services for prevention of mother to child transmission of HIV and for care and treatment; safe motherhood services and good nutrition practices by pregnant women and nursing mothers; quality early child development programmes and family support services; and completion of quality education in gender-sensitive, inclusive and child friendly environments.

The PMTCT Programme was expanded to eight additional sites making the service accessible in all 10 regions of Guyana. This has resulted in more than 90% of pregnant women being able to receive HIV testing and counseling thus creating the potential for the reduction of number of children born with HIV. Results from a survey on knowledge, attitudes and practices of male partners of women who attend antenatal clinics (ANC) and PMTCT clinics informed the development of a module for the PMTCT curriculum (for health practitioners) which highlights strategies for male partner participation in the ANC/PMTCT clinics. The HealthQual monitoring programme used child health indicators as the pillar for maintaining standards of maternal and child health services and UNICEF succeeded in overcoming the more than a year delay in the execution of a micronutrients study through a broad strategic partnership. With its late start in the final quarter of 2012, the results are expected to be available in 2012 and will be used to address equity issues in the health sector.

During the reporting year, the ECD policy (available as draft at the beginning of the year) and ECD monitoring tools and strategies were finalised and submitted for approval by the cabinet. The creation of nursery classes and discrete nursery schools in the most disadvantaged locations in Regions 1, 7, 8, 9 and 10 of the country and the introduction of Infant Field Officers to coach and monitor the untrained ECD practitioners attracted older siblings and mothers to the nursery programme. The unplanned result was a child-to-child transmission of readiness skills in homes in the hinterland. Capacity building across all levels of the ECD programme, the development of policy and monitoring systems; establishment and upgrading of ECD facilities to meet minimum standards were the strategies used. UNICEF's technical support helped foster child centred learning approaches in primary and secondary schools. The Ministry of Education now embraces the concept of inclusive education as being beyond children with disabilities to include all the parameters of child protection issues. The continuous involvement of parents and community members in Regions 1, 2, 6, 7 and 9 (the hinterland and rural coastal areas where many disadvantaged children live) to support the active learning of children with disabilities in the regular school system is a key achievement. A major achievement in the past two years was the reduction in drop-out rates at primary and secondary recorded by 17% and 24% respectively as reported by MoE.

### Most Critical Factors and Constraints

The programme's efforts to promote and support national assessment for tracking equity in interventions were challenged by the relatively low position of research on the list of priorities in the education sector as was the case with regard to establishment of a PMTCT Case Tracking Monitoring System. Challenges in coordination and cooperation among the broad range of partners affected the timely take off of the micronutrients study and progress in the area of child and maternal health was restricted by the inability of UNICEF to find and recruit a qualified Child Survival Officer within the year. Given the country-wide

challenges with qualified personnel in the health sector, UNICEF will need to review its recruitment strategies in order to fill the post by the end of the first quarter.

### **Key Strategic Partnerships and Interagency Collaboration**

Key strategic partnerships under this programme included linkages with University of Guyana and the University of the West Indies (Open Campus in Trinidad and Tobago) that ensured access to accredited Certificate programmes for ECD Practitioners and Assessors. Successful completion of the programme puts an ECD practitioner in Guyana at par with the requisite qualification within the CARICOM ECD framework as part of efforts aimed at ensuring that the nation's children across the regions receive quality early stimulation and readiness programmes in safe stimulating learning environments. UNICEF's partnership with the World Bank and the International Labour Organisation, VSO and Peace Corps accelerated assessments/disability friendly audits of schools to help mainstream children with disabilities into regular schools in Regions 1, 2, 6, 7 and 9. Key assessments were completed on types and nature of disabilities of school children to guide appropriate interventions for greater participation.

### **Humanitarian Situations**

During the flooding in Region 9 (hinterland) in June 2011, UNICEF responded to the needs of flood hit schools and communities. A rapid assessment done in collaboration with the Ministry of Education allowed UNICEF to support action to ensure that children continued school examinations in appropriate settings compliant with the CCCs.

### **Summary of Monitoring, Studies and Evaluations**

- The Ministry undertook an Ante Natal Care (ANC) Survey to assess the quality of service with results expected to be available in 2012.
- Micronutrient Study commenced with data collection and final report is expected in 2012.
- HealthQual monitoring continued with reports submitted quarterly.
- A Cost Benefit Analysis of Child Friendly Schools Programme was on-going at the end of the year with the final report expected at the end of March 2012.
- An Assessment of the Practical Instruction Centres (PIC) governed by the Ministry of Education was undertaken with results used to improve the management and instruction in technical and vocational skills centres.

### **Future Work Plan**

Under the new Country Programme 2012-2016 areas covered under Child Survival and Development will be handled from both an upstream and a downstream perspective.

Under the upstream aspect of the new programme, the following interventions will be supported:

- Policy Gap Analysis studies for the areas of child and maternal mortality as well as ECD to inform strategic policy actions.
- Knowledge development and management in ECD to ensure equity in quality and access.
- Knowledge development and management in quality basic education to ensure equity in quality and access in inclusive education (with attention to disabilities, first language education, pregnant adolescents, and teen mothers) and to facilitate universal secondary education.
- Knowledge generation and management for tracking equity and quality of health services in Guyana and for the identification of gaps in the system.
- Generation of data for assessing the quality of service provided for young children receiving appropriate perinatal care and well child care (e.g. the expansion of HealthQual to the remote areas of Regions 1 and 7).

UNICEF support under the new country programme will also focus on the following downstream elements:

- Expansion of ECD programmes that meet minimum standards to all Regions
- Expansion of ECD and CFS standards to nursery, primary and dormitory schools.
- Development of a national ECD monitoring system to ensure that children get quality ECD services.
- Monitoring and grading of ECD facilities that are in compliance with ECD minimum standards.
- Certification of ECD practitioners and teachers at each level of the education system (e.g. via the capacity building for career paths across ECD disciplines, establishment of ECD Centres of Excellence at the University of Guyana which will serve as a research, teaching and observatory facility).
- Monitoring the quality of basic education to increase: (1) the number of children scoring above 60% of total achievement at Grades 2, 4, 6, 9 national assessments; (2) children entering to write at least 5 subjects at the CSEC examination per year; and (3) children scoring above 60% on the Basic Core Competencies Proficiency Examination.
- Support of capacity building for inclusive education, including the enhancement of the schools welfare department and guidance and counseling programmes for all schools.
- Support of capacity building for access to universal secondary education.
- Upgrading of culturally and linguistically appropriate maternal health clinics in regions 1, 7, 8, 9, and 10 to meet national ECD standards.
- Support the capacity building of health providers in safe motherhood and emergency obstetric care to ensure that quality standards of maternal and child (neonatal) health facilities are met.

### Country Programme Component: Adolescent development and participation

#### PCRs (Programme Component Results)

PCR	EQRank	OTDetails
By 2011 all adolescents in Guyana have opportunities to develop to their full potential in safe and enabling environment, and participate as agents of change within their own communities.	3	FA3OT1, FA3OT2, FA3OT3, FA5OT2

#### Resources Used in 2011(USD)

Resource Type	Planned for 2011 (as per CPAP ceiling )	Allocated in 2011	Estimated Year-End Expenditure	%Spent (4)/(3) * 100
OR-E	0.00	0.00	0.00	0.00
OR-R	500000.00	218643.00	204325.00	93.45
RR	125000.00	182099.00	182099.00	100.00
<b>Total</b>	<b>\$625,000.00</b>	<b>\$400,742.00</b>	<b>\$386,424.00</b>	

#### Results Achieved

In 2011, this PCR focused on the practice of appropriate gender sensitive prevention information and skills to reduce vulnerability to HIV and STIs among young people and the use of youth friendly and gender sensitive community and health services. Within the year, a national directory of services for HIV positive persons and a referral system for all adolescents (particularly for the HIV positive) was established to support easy referral of HIV positive youth to adequate health and social services. In order to plan effectively for HIV prevention in 2012, UNICEF supported a study to assess the types and nature of vulnerabilities of adolescents in Guyana and in view of the national objective of all adolescent boys and girls in school having access to gender sensitive information and skills to reduce their vulnerability to HIV

and STIs, UNICEF continued its support for the expansion of the HFLE programme to 40 additional secondary schools, bringing the total number to 70, including 4 schools in the interior and to 104 primary schools in Regions 3 and 4. A total of 27,825 children in 9 out of 10 regions (no HFLE programme in Region 9) were benefiting from opportunities to discuss life skills and HIV prevention in a structured manner by end of the year. Periodic monitoring of the programme is undertaken by the HFLE coordinator but is challenged by limited human resources. The evaluation of the programme planned for the year was postponed to 2012 due to a reprioritisation by the government.

Secondary School Health Clubs benefitted from a comprehensive assessment of the programme which resulted in the revision of the curriculum and the development of a strategy, standards and guidelines for the establishment and implementation of Health Clubs. The programme was expanded to Regions 4 and 10, as well as to the hinterland (Region 8). In addition, adolescent boys and girls continued to be reached in 7 Regions (Regions 1, 2, 4, 6, 7, 8 and 10) though the Youth Friendly Services (YFS) with the help of selected NGOs with the overall aim of reducing vulnerability to HIV and other related issues. Teaming with the Ministry of Culture, Youth and Sport, UNICEF, employing the tenets of C4D, supported development of a multi-media capacity building programme. Twelve thousand children, including 500 from hinterland communities, were trained in the use of multi-media techniques to advocate for their rights. Although services for adolescents were expanded to all regions in Guyana, there remains a need to further expand to remote areas of the country and to provide young people with stronger opportunities to participate and become even more visible in their communities and nationally.

### **Most Critical Factors and Constraints**

Shifting priorities of partners, late submission of liquidations and the rising costs of reaching remote areas in the hinterland were some of the issues which constrained achievement of results under this programme component in 2011. In order to overcome these challenges, UNICEF will work with partners to increase planning capacities and competencies in the implementation and reporting on UNICEF's HACT process. Integrated programming and the institutionalisation of a donor theme group to review projects will be used to maximise the impact of scarce resources.

### **Key Strategic Partnerships and Interagency Collaboration**

UNICEF's collaboration with Youth Media Guyana (YMG), the Ministry of Culture, Youth and Sport and selected NGOs working in the hinterland areas, resulted in over 12,000 children in Regions 1, 7, 8 9 and 10 having increased knowledge on the interrelation of HIV prevention, domestic violence, gender issues and EPRP.

### **Summary of Monitoring, Studies and Evaluations**

- Assessment of Secondary Schools Health Clubs was undertaken during the year which led to the development of a strategy, guidelines and revised monitoring and evaluation tools to ensure their stronger performance as agents of change in health behaviour.
- A mapping of health and social services available to all adolescents especially those living with HIV led to a draft referral system for all adolescents including HIV positive adolescents.
- Phase 1 of the study of the Most At Risk Adolescents (MARA) commenced in 2011 and will be finalized in 2012.

### **Future Work Plan**

Under the new Guyana/Suriname Country Programme 2012-2016, Adolescent development and participation programming will address both upstream and downstream initiatives. Under the upstream component, there

will be a policy Gap Analysis with regard to most at risk populations via the completion of a Study on vulnerabilities of young key affected populations which will inform strategic policy actions.

Downstream initiatives under the new Country Programme will include:

- Development and implementation of policies and programmes that build the capacity of children and adolescents to engage in civic action (e.g. Adolescent Health Strategy, Youth Policy)
- Support for the establishment of institutionalised mechanisms for the sustained involvement of children and adolescents in policy development, review and programme implementation at the local level (e.g. youth parliament).
- Support for the establishment of adolescent, gender sensitive, friendly spaces at the community level in each Region to support holistic development of adolescents (with a particular focus on the hinterland)
- Support for the expansion of HFLE at primary and secondary level.

### Country Programme Component: Cross-sectoral costs

#### PCRs (Programme Component Results)

PCR	EQRank	OTDetails
The overall Country programme is in line with all UNICEF Programme Policies and best practices and lessons learned in programme implementation are recorded and put to use.		2 FA5OT1, FA5OT2, FA5OT3, FA5OT4

#### Resources Used in 2011(USD)

Resource Type	Planned for 2011 (as per CPAP ceiling )	Allocated in 2011	Estimated Year-End Expenditure	%Spent (4)/(3) * 100
OR-E	0.00	0.00	0.00	0.00
OR-R	200000.00	120692.04	97271.92	80.60
RR	350000.00	127597.01	127034.12	99.56
<b>Total</b>	<b>\$550,000.00</b>	<b>\$248,289.05</b>	<b>\$224,306.04</b>	

#### Results Achieved

Through this cross-sectoral PCR, UNICEF used global policy guidelines on the Early Warning Early Action System and the revised Core Commitments for Children (CCCs) in Emergencies as well as the creation and filling of the Emergency Specialist Post to support the inclusion of EPRP activities into all Annual Work Plans. In the area of EPRP, capacity building of the National Disaster Risk Management (DRM) and policy development through UNDP/IDB funded programmes effectively drove national preparedness and response. In addition, the UN Emergency Technical Team (UNETT), which is led by UNICEF, revised and updated the Interagency Emergency Response Plan. The CCCs in Emergencies were used as the basis for the Education and WASH cluster plans and were infused into other clusters. During 2011, Guyana experienced a flooding in Region 9 and UNICEF's support provided an effective test of its response plans. It was found that the existing practice of not pre-positioning supplies challenged capacity to meet the CCCs. Thus, by mid-year, especially with WASH and education cluster partners, UNICEF addressed this risk by pre-positioning overseas procured supplies that are anticipated to be what will be required in the first 72 hours of the onset of a flooding emergency.

C4D initiatives discussed above also apply here.

More realistic planning and regular reviews of the IMEP helped ensure a significant improvement in the implementation rate from 40% in 2010 to about 70% in 2011. However, the office can further improve its performance in that regard using the recommendations of the SitAn as the main guide to focus research topics.

### Most Critical Factors and Constraints

The full implementation of the IMEP was hindered by funding constraints, reprioritisation by government, and the dearth of researchers within the country.

### Key Strategic Partnerships and Interagency Collaboration

UNICEFs collaboration with the UNETT and the Civil Defence Commission in the area of emergency preparedness and response was found to be very useful in the response to the Region 9 flood of 2011.

### Summary of Monitoring, Studies and Evaluations

Monitoring undertaken during mid-2011 by Regional Office TACRO on EWEA Key Action Tab provided comments and guidance for strengthening of the EPRP components of AWP.

### Future Work Plan

The cross sectoral component of the new Guyana/Suriname Country Programme 2012-2016 will focus on the following issues:

- Further improvement of the IMEP implementation by realistic planning and timely execution of plan
- Maintenance of high-level Emergency Planning and Preparedness in a cross-sectoral way to ensure compliance with the CCCs in Emergencies.
- Review and adjustment of C4D framework for effective implementation particularly in rural and hinterland communities and development of a C4D component in each programme area.
- Development and implementation of an External Communication and Advocacy Strategy.
- Development of an integrated fund-raising strategy to leverage funding for the two country Guyana/Suriname country Programme Document within the context of the Caribbean sub-regional fund-raising strategy.
- Expansion of availability of C4D materials for in-school children to know about their rights (My rights and responsibilities).

## Country Programme Component: Social policy, monitoring, evaluation for child rights - Suriname

### PCRs (Programme Component Results)

PCR	EQRank	OTDetails
Social Policies, Child Protection systems, and Monitoring and Evaluation in Suriname are implemented for the realization of Child Rights by 2011.		2 FA5OT1, FA5OT2, FA5OT3

### Resources Used in 2011(USD)

Resource Type	Planned for 2011 (as per CPAP ceiling )	Allocated in 2011	Estimated Year-End Expenditure	%Spent (4)/(3) * 100
OR-E	0.00	0.00	0.00	0.00
OR-R	320000.00	264581.88	63480.35	23.99
RR	100000.00	45932.43	45932.43	100.00
<b>Total</b>	<b>\$420,000.00</b>	<b>\$310,514.31</b>	<b>\$109,412.78</b>	

### Results Achieved

UNICEF's advocacy for the ratification of the CRC's Optional Protocols resulted in the parliamentary approval of the two protocols during the reporting year and a commitment by the Government of Suriname to finalise the combined third and fourth CRC report in 2012. In 2011, UNICEF supported a number of data and policy initiatives which will allow access to disaggregated data for evidence-based legislation, policy and budget formulation benefit children. MICS4 data tables became available and were being reviewed by UNICEF Headquarters by end of the year. The new SitAn of Children and Women in Suriname was formally launched by the country's First Lady during 2011 and Suri-Info (Suriname's version of DevInfo) was launched by the General Bureau of Statistics and UNICEF. A Situation Analysis on Children and HIV was conducted to guide the development of policies and legislation for this vulnerable group

Implementation framework of the National Action Plan (NAP) for Children, initially agreed for 2009-2013, was extended until 2014 to allow key ministries to meet the needs of the most disadvantaged children and groups. In addition, UNICEF provided technical support for the development of a Monitoring and Evaluation Plan for the NAP which became ready for implementation starting in 2012. Although the legal framework for child care (Raamwet Kinder Opvang) including ECD, was still awaiting approval by Cabinet at the close of the year, UNICEF continued its support to an Inter-Ministerial Regulation and Inspection Committee in the preparation of protocols and manuals to enable systematic monitoring of the quality of more than 60 residential and 240 day care facilities to benefit approximately 1,260 children.

UNICEF partnership with the Institute of Graduate Studies and Research (IGSR) of the University of Suriname, the Medical Pedagogic Bureau of the Ministry of Health, and the Division of Women and Child Policy of the Ministry of Justice and Police helped ensure the establishment of measures for prevention of child abuse, and the development of standards and protocols for the management of child abuse. Cooperation between key ministries on parenting education was established to develop a structured parenting education programme for parents with children 0-18. Through a joint UN (UNICEF and PAHO) support to the Ministry of Health, a framework for the elimination of vertical transmission of HIV and Syphilis was implemented, aiming to specifically include NGOs and Civil Society Organisations to support service provision in various spaces accessible to women. Capacities development in human rights programming of key stakeholders (including various ministries) ensured the development of the strategic framework for addressing the rights and needs of adolescents, especially those most at risk for contracting HIV.

### Most Critical Factors and Constraints

Programme implementation was challenged by movement of UNICEF staff between assignments and the consequent reduced human resource available for programme planning and implementation. The non-signing of the joint UN Annual Workplan (in which UNICEF's activities and planned results are embedded) meant that individual planned results and activities had to be negotiated independently leading to delays in programme implementation.

### Key Strategic Partnerships and Interagency Collaboration

Ministry of Social Affairs and Housing continued to be a key partner in advocating for and the implementation of the standards to protect children in over 300 child care institutions including those for children in the ECD age group. The Institute of Graduate Studies and Research (IGSR) of the University of Suriname, the Medical Pedagogic Bureau of the Ministry of Health, and the Division of Women and Child Policy of the Ministry of Justice and Police were critical partners in preparation and establishment of measures for preventing child abuse and developing standards and protocols for the management of child abuse. UN partners, including PAHO/WHO, UNFPA, UNDP and UNICEF collaborated in the UN Theme group on HIV.

### Summary of Monitoring, Studies and Evaluations

- The Situation Analysis of Children and HIV was drafted and will be finalised once MICS4 data is approved by UNICEF Headquarters in 2012.
- As part of the UN theme group, UNICEF supported the government of Suriname in the completion of UNGASS indicator 1: NASA (National AIDS Spending Assessment) to support better advocacy for adequate resources for HIV related matters.
- Together with the Ministry of Education and Community Development, UNICEF supported assessment of the Basic Life Skills Programme. The results of the assessment will feed into a revision of the education curriculum at all levels.

### Future Work Plan

Under the new Guyana/Suriname Country programme activities that were currently covered under this PCR will be mainly dealt with under the upstream programme component (PCR1) on Strategic Planning, Monitoring, and evaluation. Areas of further work will include:

- Completion and publication of MICS4
- Support to the General Bureau of Statistics to populate Suri Info with updated disaggregated data.
- Support for the assessment of a stronger Child Protection system
- Finalisation and development of key policies in line with the CRC (e.g. the child and youth policy, most at risk adolescents)
- Support for the monitoring and evaluation of the implementation of the National Action Plan for Children.

The following activities will be covered under the downstream PCR2 on evidence-based and equity sensitive programmes:

- Support to the implementation of the ECD standards (as a follow up on Raamwet Kinderopvang) in community and centre-based ECD programmes in the interior.
- Continuation of support for the development of comprehensive child development support linked to the Parenting Education Programme development.
- Support for capacity building for the new youth correction facility.

## Country Programme Component: Integrated area based programme - Suriname

### PCRs (Programme Component Results)

PCR	EQRank	OTDetails
Equity is increased between coastal and interior populations through Integrated Area based Programming for improved quality of health and education services in 2011.		2 FA2OT2, FA2OT3

### Resources Used in 2011(USD)

Resource Type	Planned for 2011 (as per CPAP ceiling )	Allocated in 2011	Estimated Year-End Expenditure	%Spent (4)/(3) * 100
OR-E	0.00	0.00	0.00	0.00
OR-R	1430000.00	935733.62	563751.55	60.25
RR	500000.00	29275.12	29275.12	100.00
<b>Total</b>	<b>\$1,930,000.00</b>	<b>\$965,008.74</b>	<b>\$593,026.67</b>	

### Results Achieved

UNICEF continued to support the government of Suriname to improve the access to quality health care. Five thousand parents, (3,000 in the interior) were supported to improve their knowledge with regard to growth, development and upbringing of their children 0-5 years of age through information in the current Baby- and Toddlerbook (Baby- en Peuterboek). The booklet was revised and updated in 2011 to reflect latest knowledge on child development. The Bureau of Public Health was strengthened with equipment enabling the institution to store vaccine according to WHO requirements and to provide the vaccines on a continuous basis to all institutions that immunize children and mothers in the coastal as well as in the interior. In the area of WASH, UNICEF partnered with local facilitators and the Foundation for the Development of the Interior to develop 11 community water development plans for improved access to safe water. The initiative increased awareness on adequate sanitation and hygiene, and used a participatory approach to galvanise community ownership of the development plans.

UNICEF's advocacy for increased attention to adolescents' rights resulted in the Ministry of Health's agreement to conduct a situation analysis for this group in 2012. Results of this SitAn will provide a basis for the development of evidence based policies targeting the most at risk adolescents. UNICEF together with the VVOB (Flemish Association for Development Cooperation and Technical assistance) trained 681 teachers in 69 of the 87 primary schools in the Child Friendly School methods. The increased capacity of teachers to apply the approach is benefiting approximately 12,325 primary school children who reside in the interior (85% of all interior primary school children) and an even greater number of children along the coast. (MoE 2011). To increase the knowledge on schools particularly in the interior, UNICEF supported the Ministry of Education in a school mapping exercise. Through this initiative, data on the infrastructure and performance, parent involvement, education curriculum, and teaching materials were gathered. In addition, UNICEF provided technical assistance to the Ministry of Education in establishing an Education Management Information System (EMIS). The first set of data under the system became available at the end of 2011. This increased knowledge on the education sector will provide the basis for the formulation of the Strategic Framework for the Education Sector Education Sector Strategic Framework 2012-2016 for which the Ministry of Education has requested UNICEF's support. This framework will replace the Education Sector Plan for Suriname and will include policies and legislation for all children (including indigenous, migrant, and disabled children).

### Most Critical Factors and Constraints

Programme implementation was challenged by movement of UNICEF staff between assignments and the consequent reduced human resource available for programme planning and implementation. The non-signing of the UN Common Annual Workplan (in which UNICEF's activities and planned results are embedded) meant that individual planned results and activities had to be negotiated independently leading to delays in programme implementation.

### **Key Strategic Partnerships and Interagency Collaboration**

The partnership with the Foundation for the Development in the Interior, Ministry of Natural Resources, Ministry of Regional Development, and Peace Corps was instrumental to successful implementation of the participatory approach in the development of the community water development plans. UNICEF's collaboration with VVOB facilitated a successful completion of the 3rd in-service teacher training on Child Friendly School Methods.

### **Summary of Monitoring, Studies and Evaluations**

- A school mapping exercise of primary schools in Suriname (Wanica, Para, Brokopondo, Saramacca, Commewijne) to support monitoring of school children participation and performance particularly for children in the interior as well as policy development with regard to out of school youth.
- The mid-term teacher in-service training assessment highlighted challenges for sustainability of the programme and the need for on-going coaching and support of primary school teachers' teams in the interior.
- The analysis of the KAP and the community based WASH activities conducted in each of the 16 targeted villages provided the basis for a detailed implementation plan (including a monitoring and evaluation plan) for the roll out of integrated community based WASH activities in each of the targeted communities.

### **Future Work Plan**

Under the new Guyana/Suriname Country Programme 2012-2016, elements of this PCR will be handled from both an upstream and a downstream perspective. Future upstream work will include:

- A SitAn of adolescent boys and girls and one on Indigenous children.
  - Development of a Child and Youth Health policy as part of the integrated Child and Youth development policy of the Presidential commission,
  - Research on budgeting for the education sector in relation to accessibility to education especially by disadvantaged children.
  - Development of evidence based sector plans (e.g. the Education Sector Plan)
  - Qualitative data collection on Breastfeeding and child feeding practices
- Continuation of support for the Education Sector Management Information System of the Ministry of Education

Downstream work will include:

- Finalisation and implementation of a communication strategy for the utilization of the "Baby en Peuterboek" for parents of children 0-5 years, with emphasis on new mothers in coastal rural and interior areas where the most disadvantaged children live.
- Support for implementation of community plans of action for water and sanitation in the interior to increase the access to safe drinking water and sanitary disposal of excreta.
- Support for Computer Aided Learning at the primary schools to enhance performance and reduce repetition and drop-outs in the interior.
- Continuation of in-service teacher training to improve student performance and decrease repetition and drop-out rates.
- Development of a Parenting Education programme in collaboration with the Ministry of Education and Community Development, Social Affairs and Housing and the Inter-ministerial ECD Commission.
- Development of a strategy to attract qualified teachers to serve in the interior.

### Effective Governance Structure

The new operating structure that provides for a joint/single management structure for Guyana and Suriname which commenced towards the end of 2010 was consolidated in 2011 with a joint Annual Management Plan. Under this plan, membership of the Country Office Management Team (CMT) was revised to support stronger cross-country oversight through enhanced participation by staff members (including representatives of the Staff Association) located in both offices. The team successfully held monthly meetings using telephone and video conference linkage between both offices with meetings focusing on monitoring of programme and operations performance. Though this process, bottlenecks were identified and addressed and meetings also provided a forum for feedback to management and the clarification and discussion of critical issues. CMT minutes were made available to all staff members including those who do not sit on the CMT.

Membership of office committees was drawn from staff in both Guyana and Suriname though the small staff complement available in both offices meant that many staff members had to serve on multiple committees among the several that are statutorily required by UNICEF. In this situation and given other work responsibilities, it was sometimes a challenge to get quorums for meetings. The office therefore employed various technologies (including video conferencing, teleconferencing, and emails or mail polls) to assist with decision making and to facilitate meetings. It is expected that as staff members become more accustomed to virtual meetings and the mail-poll approach, the speed of committee decision making will improve.

Work relationships and collaboration between the two countries were further enhanced by increased on-site presence by the Representative which allowed for high-level representation in critical meetings with government. More video conference discussions and staff exchanges resulted in the ownership of common strategies.

Following completion of a single new 2012 – 2016 UNICEF programme of cooperation to support the Governments of both Guyana and Suriname and the 2011 PBR, a Change Management Plan (CMP) was developed by staff in both offices, along with staff association to help guide transition to the new programme. Implementation of the CMP was generally on track though at the end of the year there was the challenge of getting robust pools of qualified candidates from which to fill especially locally recruited positions

### Strategic Risk Management

The offices' strategic approach to risk management was referenced to the risk areas identified in the Guyana and Suriname Risk and Control Self-Assessment (RCSA) Reports and monthly CMT reviews of UNICEF's Country Office Management indicators during 2011 enabled a systematic approach to risk mitigation. This CMT-linked risk management system was complemented by a similar one for programmes (the system for operations being already fully integrated in the CMT process). The Enterprise Risk Management (ERM) profiles and libraries for Guyana and Suriname were updated and modified within the year based on the Global Change Management Office's instructions and were monitored based on the corresponding progress reports produced through the CO instituted Change Management Plan and monthly reports on the Regional Management Team (RMT) Indicators. Progress has been made through implementation of the mitigation strategies in reducing the likelihood of residual risk for some existing risk areas and no new risk areas for inclusion in 2012 emerged in 2011.

The Early Warning Early Action (EWEA) system was maintained and updated with both offices meeting all global and regional deadlines. TACRO's mid-year review of the Key Action tabs for both Guyana and Suriname identified action points that need to be addressed in 2012 and will guide cross-sectoral EPRP strategies for each PCR. The infusion of the Business Continuity Plan (BCP) process within the EWEA system has enabled a more coordinated approach to Emergency Preparedness and Response Planning

(EPRP) reflecting the direct symbiotic nature of the partnership between operations and programmes.

MOSS compliance continued to be regularly monitored for both offices in close collaboration with the UNDSS and inter-agency partners through proactive participation in the Security Management Team (SMT) meetings and trainings. Monitoring of ICT compliance with MOSS and the CCCs in Emergencies was prioritised during 2011 and monitored through the Annual Management Plan.

### Evaluation

The office worked with an up-to-date IMEP that was monitored by the CMT and the Programme Management meeting. The monitoring was instrumental to improving IMEP implementation rate from 40% in 2010 to about 70% in 2011 in spite of resource constraints. During the reporting year, no evaluations were undertaken by the office. It should be noted, that the local capacity to undertake evaluations are constrained. Recognising these challenges the office has designed the new Country Programme with one specific programme component focusing on data, monitoring and evaluation. It has further made provision to recruit one Monitoring and Evaluations Officer at the NO-C level for each office.

### Effective Use of Information and Communication Technology

ICT Policies developed by the IT Solutions and Services Division (ITSS) were implemented in the Guyana and Suriname offices for desktops, laptops and servers. The offices continued to meet hardware and software standards as well as emergency telecommunication standards. With the implementation of Windows7, incidences of virus and malware attacks were reduced though Spam email continued to be a problem for some users and increased incidents of phishing emails were noticed with action being continually taken to address them.

The Domino Server and Lotus Notes 8.5 were stable for both docked and mobile users. The implementation of Cisco VPN client in the Windows7 OS was stable and user friendly thus supporting the increasing number of staff working remotely. Both offices upgraded their connectivity in the year from 256 Kbps to 512 Kbps. This new bandwidth was required by ITSS for implementation of VISION starting in 2012. Both countries are currently migrating towards the UNICEF Managed IPsec connection.

The offices have equipment which will provide data connectivity in emergencies and a regular schedule for testing of the emergency equipment was maintained with all emergency equipment remaining operational during the year. Communication improvements were experienced in the Suriname office; the UHF UN radio system is fully operational and all staff members were assigned UHF radios. In Guyana, all staff members have been assigned UHF radios and new call signs through the centralised UNDSS mechanisms.

The introduction of VISION required both offices to purchase new model servers with the specified capacity. All broken and obsolete IT equipment was discarded in accordance with Local Property Survey Board decisions during the year.

For the Suriname office, the PROMS Database remained embedded into the structure of the Barbados office and the access constraints experienced in 2010 continued with a resolution expected to come through implementation of VISION in 2012. Both offices have now installed the Polycom VSX700 video conference equipment and are using this tool for virtual meetings (as a standard) resulting in a better use of resources by avoiding expensive international phone call rates.

### Fund Raising and Donor Relations

The main donors in 2011 for Guyana were USAID PEPFAR, the Government of Norway, and the UK National Committee for UNICEF as well as Thematic Funds. Suriname's main donors in 2011 were the UNICEF Dutch and French National Committees as well as UNICEF Thematic Funds. The National Committees have been invaluable for supporting results for children, especially with regard to addressing disparities between the coastal and interior areas.

The office has monitoring mechanisms in place to ensure full utilisation of donor funds before expiry dates. Timely submission of quality donor reports was maintained in 2011 through a quality assurance mechanism that includes checklists, standardized formats (depending on donor requirements) and a review by the Monitoring and Evaluation Officer as well as the Deputy Representative. Although a resource mobilization strategy has been developed in 2010 and was under implementation in 2011 results so far are limited. Areas of collaboration with the IDB were scoped during 2011 and are expected to lead to funding for Suriname, particularly through the agency's Cash Transfer Initiative (particularly with regards to health and education) which is planned to commence in 2012. In a continued effort to raise funds, the Guyana office submitted funding proposals to the Japanese Embassy and potential partnerships with the German National Committee for UNICEF and Venezuelan Embassy were explored.

The Guyana office in 2011 supported Government response to a flooding emergency in Region 9 (interior) without any additional emergency fundraising.

### Management of Financial and Other Assets

Tracking and quality assurance for the management of funds ensured that there were no outstanding Direct Cash Transfers over the 9 months period. 100% of Regular Resources were spent during the reporting year and 100% of Other Resources which expired during the reporting period were spent within the original duration of the PBA. The planned audit for 2011 was again postponed by HQ.

Management continued to take the necessary steps to improve the management of cash resources. For example, cash is projected on a quarterly basis with detailed bi-weekly projections for which programme officers are held accountable. Additionally, monitoring for timely reconciliation of accounts continued with the minimum amounts of adjusting entries. Monitoring of global and regional indicators to ensure good financial management practices was facilitated through the programme management and CMT meetings and accelerated through the weekly monitoring in preparation for VISION.

### Supply Management

Supplies accounted for 4% and 6% of total programme funds utilized in 2011 for Guyana and Suriname respectively and supplies were generally delivered in a timely manner to end users. The non-signing of the joint UN workplan (in which UNICEF's workplan is embedded) in Suriname however made the supply planning process more challenging than normal because each element had to be negotiated on its own. For Guyana, purchases facilitated by the Supply Division were done in an efficient and effective manner while there was no need to use the services of the Supply Division for Suriname.

Since neither country has a warehouse, the Suriname office continued to utilise rented space for large quantities of supplies. In response to a lesson learnt from past emergencies, the Guyana office procured

offshore supplies in the form of tents, water containers, and water testing kits, water purification tablets and plastic mats for immediate deployment during the first 72 hours of an emergency and prepositioned same through the Civil Defence Commission.

### Human Resources

Management and Staff Association worked together to create opportunities for discussion of issues of interest and concern to staff. Joint monthly staff meetings were held with the Guyana and Suriname team, using video and teleconferencing to link them. The meetings have been very effective for information sharing and have improved staff relations. Staff in both offices received training in personal and professional development to help them strike better work-life balance and staff development days were used to strengthen capacity for both programme and operations work. Emphasis on flexi-time and the use of annual leave were major strategies to effect a more conducive work environment. Following conclusion of the PBR process, a Change Management Plan was developed and implemented in a highly participatory manner to steer transition to the new country programme starting in 2012 with due attention to staff welfare.

In January 2011, locally recruited staff members in both offices commenced use of the new Performance Appraisal System (PAS) to measure performance. This tool replaced the Performance Evaluation Report (PER). International Professionals continued to use e-PAS to measure performance.

In June 2011, one staff member from each office participated in peer support training in Panama bringing the total Peer Support Volunteers (PSVs) in the two offices to three. Since being trained, the PSVs have been supporting staff members at their own request for both work and family related matters. Staff members voted to keep use of PSVs private and as such data on use of the service is not available.

In 2011, the Guyana and Suriname Learning and Development Plan was incorporated into job related learning and training needs from the staff members' individual 2011 PASs with priority given to the mandatory VISION training.

### Efficiency Gains and Cost Savings

Cost savings for the office were achieved through installation of video conferencing equipment which reduced international calling costs and improved the interaction between the Guyana and Suriname offices. Cost savings in the Suriname office continued as a result of participation in joint agreements with the other UN agencies for rental of the common premises (UN House), security guard services, cleaning services, and an IT consultant for the UN House. Guyana also undertook joint initiatives with other UN agencies, such as a joint database of consultants which assisted helped to reduce time required for contracting consultancy services and promote greater efficiency in the selection process.

### Changes in AMP and CPMP

The new Country Programme Cycle 2012-2016 brings UNICEF's work in Guyana and Suriname together for the first time under a single/unified programme structure. The day-to-day coordination of programmes currently being executed in a dual manner by the Deputy Representative (for Guyana) and Chief, Suriname Field Office (for Suriname) will be simplified and replaced with a single coordination point vested in the Deputy Representative based in Guyana. Day-to-day coordination of Suriname component will be undertaken by an L-4 Programme Manager who will supervise Programme Officers based in Suriname and

report to the Deputy Representative who will also supervise Programme Officers based in Guyana.

UNICEF Guyana/Suriname will be linked to the sub-regional coordinated approach to Monitoring and Evaluation with the creation of two new NO-C level Monitoring and Evaluation Specialist posts (one each for Guyana and Suriname). Thus, the NO-B Monitoring and Evaluation Officer post in Guyana was abolished with effect from 31 December 2011. A new NO-B Communications Officer post to support advocacy and external relations has been created in Suriname to work with the one already in existence in Guyana to cover both countries. A new GS-6 Communications Assistant post (reporting to the NO-B Communications Officer in Guyana) has been created to provide support for the external communications and advocacy function of the office.

The L-4 Sub-regional HIV/AIDS Advisor post was abolished with effect 31 December 2011 and support previously provided by the post mainstreamed into the Adolescent Development Officer post in Guyana with the post re-profiled to reflect this change. To promote cost effectiveness and efficiencies, Guyana and Suriname will implement a shared operations approach under the leadership of the existing NO-C Operations Manager in Guyana. The Operations Manager will supervise shared operations posts which include one GS-6 Human Resources Assistant and one GS-7 Senior Information and Communication. To streamline the new shared operations system, the NO-A Operations Officer post and the GS-5 Administrative and Finance Assistant post in Suriname were abolished with effect from 31 December 2011. A GS-6 Operations Assistant post was created in Suriname to work in liaison with the operations team based in Guyana to provide operations coverage for Suriname.

### Summary Notes and Acronyms

AIDS	Acquired Immune Deficiency Syndrome
ANC	Antenatal Care
AWP	Annual Work Plan
BCP	Business Continuity Plan (BCP)
C4D	Communication for Development
CARICOM	Caribbean Community Secretariat
CCC	Core Commitments for Children
CCPA	Child Care and Protection Agency
CEDAW	Convention on the Elimination of All Forms of Discrimination Against Women
CFS	Child Friendly School
CMP	Country Management Plan
CMT	Country Management Team
CRC	Convention on the Rights of the Child
CSEC	Caribbean Examination Council
DaO	Delivering as One
DRM	Disaster Risk Management
ECD	Early Childhood Development
EIA	Environment Impact Assessment
EMIS	Education Management Information System
EPRP	Emergency Preparedness and Response Planning
ERM	Enterprise Risk Management
EWEA	Early Warning Early Action
FBO	Faith Based Organisations
FOB	Foundation for Development of the Interior
GS	General Staff
GuyD_Info	Guyana's version of DevInfo
HACT	Harmonised Approach to Cash Transactions
HFLE	Health and Family Life Education
HIV	Human Immune Deficiency Virus
HQ	Headquarters
ICON	UNICEF's internal communication network
ICT	Information and Communication Technology
IDB	Inter-American Development Bank
IEC	Information, Education & Communication
IGSR	Institute of Graduate Studies and Research
IMEP	Integrated Monitoring and Evaluation Plan
IP	International Professional
IT	Information Technology
ITSS	IT Solutions and Services Division (ITSS)
KAP	Knowledge, Attitudes and Practices
M&E	Monitoring and Evaluation
MARA	Most at Risk Adolescents
MDG	Millennium Development Goal
MICS	Multiple Indicator Cluster Survey
MINOV	Ministry of Education and Community Development ( <i>Ministerie van Onderwijs en Volksontwikkeling</i> )
MIS	Management Information System
MMR	Maternal Mortality Rate
MoAA	Ministry of Amerindian Affairs
MoE	Ministry of Education
MoH	Ministry of Health
MoLHSSS	Ministry of Labour, Human Services, and Social Security
MOSS	Minimum operating Security Standards
NAP	National Action Plan

# Country Office Portal

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NASA	National AIDS Spending Assessment
NatCom	UNICEF National Committee
NGO	Non-Governmental Organization
NHSS	National Health Sector Strategy
NO	National Officer
NOC	New Opportunity Corps
NPA	National Plan of Action
OR	Other Resources
PAHO	Pan-American Health Organisation
PAS/e-PAS	Performance Appraisal System ( )
PBR	Programme and Budget Review
PCR	Programme Component Result
PEPFAR	President's Emergency Programme for AIDS Relief
PER	Performance Evaluation Report
PIC	Practical Instruction Centres
PMTCT	Prevention of Mother to Child Transmission
PPP	Programme Policy and Procedure
PROMS	Programme Manager System
PRSP	Poverty Reduction Strategy Paper
PSV	Peer Support Volunteer
RCSA	Risk and Control Self-Assessment
RMT	Regional Management Team
RR	Regular Resources
SitAn	Situation Analysis and Assessment
SMT	Security Management Team (SMT)
STI	Sexually Transmitted Infections
Suri-Info	Suriname's version of DevInfo
TACRO	The Regional Office of Latin America and the Caribbean
UHF	Ultra High Frequency
UK	United Kingdom
UN	United Nations
UNCT	United Nations Country Team
UNDP	United Nations Development Programme
UNDSS	United Nations Department for Safety and Security
UNETT	United National Emergency Technical Team
UNFPA	United Nations Population Fund
UNGASS	United Nations General Assembly Special Session
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
VISION	Virtual Integrated System of Information
VSO	Voluntary Services Overseas
VVOB	Flemish Association for Development Cooperation and Technical Assistance
WASH	Water, Sanitation and Hygiene
WHO	World Health Organisation
YFS	Youth Friendly Spaces
YKAP	Young Key Affected Populations
YMG	Youth Media Guyana

### Document Centre

#### Evaluation

	<b>Title</b>	<b>Sequence Number</b>	<b>Type of Report</b>
1	Situation Analysis of Children and Women in Guyana	2011/001	Situation Analysis
2	Towards Universal Birth Registration: Assessment of Legislation, Policy and Practice on Birth Registration for Guyana.	2011/002	Study
3	Assessment of children's Legal Aid in Guyana	2011/003	Study
4	An Assessment of the Practical Instruction Centres (PIC) (technical and vocational skills centres)	2011/004	Study

#### Other Publications

	<b>Title</b>
1	Contributions of Guyanese Women of African Decent to the Guyana Society
2	Mapping of Child Protection Service Providers and Referral System
3	The TELL Scheme: Training of Trainers Manual
4	The TELL Scheme: Teachers Manual
5	The TELL Scheme: Posters
6	The TELL Scheme: Flash cards for teachers
7	Situation Assessment and Analysis of Children's Rights in Suriname
8	Samenvatting Situatiebeoordeling en Analyse van Kinderrechten in Suriname 2010 (Dutch version Executive Summary)
9	Baby en Peuterboek " (Baby- and Toddlerbook)
10	Folders Baby en Peuterboek " (Baby- and Toddlerbook)
11	Posters Baby en Peuterboek " (Baby- and Toddlerbook)
12	Protection of Children in Guyana- A guide to the Protection of Children Act, 2009

#### Lessons Learned

	<b>Title</b>	<b>Document Type/Category</b>
1	SALT Life Competence Process	Lesson Learned

#### Programme Documents