

Mali

Executive Summary

The political process in Mali made noticeable progress in 2015. The Agreement on Peace and Reconciliation in Mali emanating from the Algiers process was signed by the Government of Mali and the Platform on 15 May 2015. The Coordination des Mouvements de l'Azawad followed on 20 June.

The implementation of the peace accord, however, remained a challenge throughout the year, and a number of security incidents jeopardized access not only in northern regions but in central parts of the country. MINUSMA was considered a party to the conflict and a target for armed groups. The lack of basic social services was a challenge due to the lack of Government personnel presence in some areas.

This complex scenario was compounded by other notable crises---such as a vaccine-related Polio case, several cases of yellow fever, and two major terrorist attacks in Bamako---and constituted the backdrop of the first year of the implementation of the UNICEF Mali Country Programme. UNICEF Mali strived to adopt a three-pronged approach focusing on strengthening community resilience, supporting capacity-building efforts of Government institutions and advocating for equity-focused policies.

The start of the 2015-2016 academic year was a highlight of 2015: UNICEF Mali intensively supported the Ministry of Education (MoE) to ensure the reopening of schools, particularly in the North, by facilitating policy dialogue at all levels. By December, 172 of the 454 schools that had been closed during the previous (2014-2015) academic year had been reopened. This included the Kidal region, where, after over three years of lack of education, 18 schools reopened, representing 29 per cent of schools in the region. To date, 3,559 children were enrolled in these schools: 44 per cent of pre-crisis enrolment figures.

The nutrition crisis was a major concern. An estimated 181,000 children (six to 59 months) in Mali were suffering from Severe Acute Malnutrition (SAM) in 2015 (90 per cent of them located in the South). UNICEF Mali gave significant support to the Government of Mali to scale-up Community Management of Acute Malnutrition (CMAM) at national level and by December, preliminary reports showed that coverage reached approximately 160,000 children nationwide.

This year, UNICEF Mali strengthened partnerships with bilateral and multilateral organisations. The CO raised US\$ 63,779,995 other regular resources against the planned US\$ 47,070,000: an out-performance of 136 per cent. While the CO consolidated relationships with traditional partners such as CIDA and USAID for funding programmes such as immunization and emergency education, US\$19 million thematic funds were raised from SIDA. New partners such as DEVCO supported innovative programmes such as WASH in health centres.

In terms of shortfalls, the Government faced serious challenges to investments, both financially and technically, in the systematic strengthening of health systems. It was difficult to address human resource challenges at national, decentralised and community levels. UNICEF Mali was

not able to secure Government commitment for the payment of Community Health Agents.

There was significant progress with access to treatment for SAM throughout the country, but greater effort is required to lower the perpetually-high chronic malnutrition rates of children under five years old with multi-sectoral activities that focus on the critical period of the first 1,000 days of life. A package of health and nutrition-specific activities was crafted, but its roll-out was not yet been possible and will be a priority for 2016.

Finally, despite upstream advances in the fight against child marriage, prospects for a national law remained elusive. There are complexities of the legal framework in a country with significant opposition from conservative religious groups, and complex social traditions that rely on marrying girls at young age. Moving into 2016, UNICEF Mali will work to implement innovative approaches that transform social norms beyond traditional knowledge-deficit or “behaviour change” models, instead emphasizing the central role of communities in defining their own realities and priorities for ending violence against children (VAC).

Humanitarian Assistance

UNICEF Mali’s humanitarian action in 2015 focused on consolidating the peace in the country by strengthening peace-building, restoring basic social services in the North and responding to critical emergency needs (notably epidemic outbreaks, floods and population displacements) as well as scaling-up the Nutrition Response.

In an effort to strengthen peace building and social cohesion, UNICEF Mali promoted inter-community dialogues at local level in the North. A total of 5,250 community members were sensitized on conflict resolution, with specific attention to reopening of schools and return of teachers. This initiative contributed to the reopening of 103 schools that had been closed during the last school year in the regions of Gao and Timbuktu. UNICEF Mali promoted peace culture among children through the launch of a peace contest with 10,000 children from these regions.

Almost 81,363 children of Kidal, Gao, Timbuktu, Mopti, and Segou went back to school. UNICEF Mali provided psychosocial support to 1,325 children and adolescents, and over 379,000 persons were reached by Mine Risk Education. Access to safe drinking water was provided to 122,100 individuals, and 74 health and nutrition centres were equipped with appropriate WASH facilities. UNICEF Mali supported routine immunization and the treatments of under five children against malaria, pneumonia and diarrhoea and provided 21 health facilities with emergency health kits including medicines and equipment. Trainings on community essential care, new born and maternal care as well as Prevention of Mother to Child Transmission of HIV were provided to 300 health centres with the aim to improve the quality of health services.

Mali was declared Ebola Virus Disease (EVD) free on 18th January 2015, but UNICEF Mali continued to implement a prevention and preparedness response against EVD to strengthen the health system and sensitize communities. Ten screening sites were set up in high-risk areas, 84 health centres were provided with electricity. Medical equipment, essentials drugs and medical consumable were distributed to more than 1,000 health centres and 56 health district hospitals, and 68 Communities Health Workers, and 194 community relays in border towns, were trained on EVD surveillance and prevention. In addition, 110 health centres received WASH minimum package. Communities were sensitized through mass communication campaigns on EVD and hygiene promotion sessions and hand-washing stations were provided in public spaces such as schools (235), bus stations (100) and at public gatherings during religious celebrations. Schools

were specifically targeted in order to reach children: 212 pedagogic advisors and 6,116 school directors and teachers were trained on EVD prevention; 8,100 pedagogic materials and 15,000 posters were distributed in 1,225 schools; and model lesson guides were produced and distributed in more than 10,000 schools.

Mali experienced the resurgence of several epidemics. In April, eight cases of Measles were declared in Kidal region and seven Yellow Fever cases were confirmed in Kayes (East) and Sikasso (South), including six deaths. A Polio vaccine-derived imported case was reported in Bamako in September, the first one since 2011. UNICEF Mali provided extensive technical and financial support to the Government for the organization of a national response campaign against Measles reaching respectively 9,312,619 children 9-59 months. Four rounds of vaccination against polio were rolled out in September and October by the Government with the active support of UNICEF Mali, benefitting 7,562,519 children under five, of which 355,429 were in high risk areas.

UNICEF Mali provided assistance to 4,671 households (32,000 people) affected by floods and droughts in Gao, Kidal, Timbuktu and Mopti regions (North). Affected people received water treatment and hygiene kits and hygiene promotion sessions, and 127 water points were rehabilitated.

UNICEF Mali continued to support treatment of SAM in all operational health structures in the North: 94 health facilities in the North were supported in diagnosis and treatment of SAM children. By the end of the year, 150,271 SAM children had received adequate and quality treatments. As part of the WASH in Nutrition approach, 10,000 SAM children and their caretakers received assistance, including hygiene kits and hygiene education.

Summary Notes and Acronyms

ALP- Accelerated Learning Programmes
APR - A Promise Renewed
BCP - Business Continuity Plan
CIDA - Canadian International Development Agency
C4D - Communication for development
CAAFAG - Children Associated with Armed Forces and Armed Groups
CCD - Care for Child Development
CEDAW - Convention on the Elimination of all Forms of Discrimination against Women
CHA - Community Health Agent
CLT - Community Led Total Sanitation
CMAM - Management of Acute Malnutrition Model
CMT- Country Management Team
CPD – Country Programme Document
CRC - Convention on the Rights of the Child
CVV - Comités Villageois de Vigilance
DCT - Direct Cash Transfer
DEVCO - European Commission's International cooperation and Development
EAC - Educate A Child
ECD - Early Child Development
ERM - Enterprise Risk Management
EVD – Ebola Virus Disease
FGM - Female Genital Mutilation
GBV - Gender-Based Violence

GS - General staff
HACT - Harmonized Approach to Cash Transfer
HIV - Human Immunodeficiency Virus
ICT - Information and Communication Technology
IP - International Professional
LTA - Long Term Agreement
MDG - Millennium Development Goal
MINUSMA - Multidimensional Integrated Stabilization Mission in Mali
MoE – Ministry of Education
MoH - Ministry of Health
MOReS - Monitoring Results for Equity System
MORSS - Minimum Operating Residential Security Standards
MOSS - Minimum Operating Security Standards
MRM - Monitoring and Reporting Mechanism
NGOs - Non Government Organizations
NO - National Staff
ORE - Other Resources Emergency
ORR - Other Regular Resources
PME - Planning and Monitoring and Evaluation
PMT - Programme Management Meeting
RR - Regular Resources
RUFT - Ready-to-use Therapeutic Food
SAM - Severe Acute Malnutrition
Sida - Swedish International Development Cooperation agency
SUN - Scaling Up Nutrition
SWA - Sanitation and Water for All
UNCT - United Nations Country Team
UNFPA - United Nations Population Fund
UNGEI - United Nations Girls Education Initiative
WASH - Water, Sanitation and Hygiene
WFP - World Food Programme
WHO - World Health Organization

Capacity Development

UNICEF Mali supported community capacity development through Communication for Development (C4D). UNICEF Mali ensured that community leaders, NGOs and civil society were fully engaged in the Infant and Young Child Feeding study, the formulation of the C4D strategies and action plans. A total of 160 community leaders were trained in community dialogues facilitation on issues of hygiene, EVD prevention, birth registration, school reopening in the North, etc., and 6,787 community leaders and school children benefitted from training on essential family practices and EVD.

To prevent and respond to Female Genital Mutilation (FGM), UNICEF Mali supported the training of 1,045 community focal points who contributed to the identification and referral of 274 cases of FGM. UNICEF Mali and its partners trained 150 Government personnel who in turned educated 379,595 people in vulnerable communities on the risk of mines and unexploded remnants of war, increasing communities' capacity to stay safe and identify local risks.

UNICEF Mali reinforced the country decentralized monitoring systems through the roll out of the Monitoring Results for Equity System (MOReS), level 3. The MOReS level 3 was implemented

for the first time in Mali in Mopti (North) and Sikasso (South). More than 60 actors from technical services, local and regional authorities and administrations took part in the data collection, data analysis and micro-planning in the districts of Bougouni (Sikasso region) and Badiagara (Mopti region).

A total of 465 government staff from all levels were sensitized and trained on multi-sectoral approach to nutrition, 21 of them received support to strengthen coordination of national nutrition action plan. Twenty five people were trained to plan nutrition-sensitive interventions at local level. UNICEF Mali supported the training of all Nutrition Focal Points (208 persons) on CMAM with the objectives of strengthening their capacity on data analysis, early detection of and response to malnutrition peaks.

Evidence Generation, Policy Dialogue and Advocacy

UNICEF Mali supported the Government and civil society to engage in significant advocacy and policy dialogue on child marriage. UNICEF Mali helped to mobilize high-level engagement for the national launch of the African Union campaign to end child marriage, which was presided by the First Lady, and for a delegation from Mali to participate in the African Union Girls' Summit in Zambia. UNICEF Mali supported the development of a National Road Map to Ending Child Marriage.

In November, UNICEF Mali hosted the annual meeting of the United Nations Girls Education Initiative (UNGEI). It was an important moment in public advocacy, with the participation of the First Lady and three Ministers. The issue of girls' education in Mali was discussed and added to the global agenda for education. Mali became an active member of the UNGEI global network.

UNICEF Mali and its partners organized several high level meetings with the Government and professional associations to advocate for the payment of the community health agents' (CHA) salaries by the Government. While the value-added of CHAs' work was acknowledged by the Government, there were no concrete measures yet. UNICEF Mali and partners are thus pursuing advocacy for CHAs' salary costs being fully supported by the Government's budget.

UNICEF Mali was involved in the preparation of national sector plans for Education and WASH. UNICEF Mali commissioned several studies on key education issues (out-of-school children, girls' education, etc.) that will inform the development of the new decennial Education sector plan. Within the WASH cluster and donor coordination group, UNICEF Mali advocated for the inclusion of key issues such as rural sanitation and sanitation and water for all (SWA) commitments, in the new governmental water and sanitation programme under development.

Partnerships

UNICEF Mali strengthened existing partnerships with the Government, the communities, UN agencies and NGOs, in view of supporting sustainability of interventions addressing national priorities.

UNICEF Mali strengthened its partnership with the Ministry of Health, civil society and communities for efficient and sustainable prevention of EVD. The partnerships led to the establishment of 330 comités villageois de vigilance (CVV), village watch committees managed by community leaders that have a pivotal role in maintaining awareness on EVD in the community.

UNICEF Mali pursued efforts to implement global initiatives. In March, the MoH nominated a Scaling Up Nutrition (SUN) Focal Point, and a Nutrition Coordination Unit was created. The SUN movement was strengthened with the creation of a network under UNICEF Mali leadership aiming at increasing stakeholder's commitment on maintaining nutrition as national priority.

Within the A Promise Renewed (APR) initiative, UNICEF Mali, UNFPA and WHO finalized the Reproductive, Maternal, New born, Child and Adolescent action plan and budget. UNICEF Mali supported the use of scorecard to monitor the progress on child mortality in Mali, and is working with its partners to add indicators of main killers at community level.

Based on the Government's NGO database, UNICEF Mali was able to draw a mapping of development partners by geographical areas and sectors nationwide.

Following the adoption of the SWA commitment by the Government in 2014, UNICEF Mali, as lead of the WASH donor coordination group, advocated for the implementation of the commitments, in particular the increased budgetary allocation for the sector and specifically for basic sanitation.

UNICEF Mali continued to support the Bioforce regional training platform in Bamako. This platform is now offering trainings to Governments, NGOs, UN agencies from across the Sahel on WASH issues.

External Communication and Public Advocacy

In support of the implementation of the Peace Accord signed in June between the Government and armed groups, UNICEF Mali launched on 18th December the campaign "Every Child Counts" to bring 100,000 children back to school in crisis-affected regions. Articles on the campaign were published in 160 media outlets around the world, contributing to the consolidation of UNICEF Mali's credibility in the eyes of the general public and financial and technical partners. Malian population was reached mainly through radio messages disseminated in all regions and in four local languages. Social media were used to multiply impact of press coverage and communications. A post shared by UNICEF Global was "liked" by more than 5,000 Facebook users. Knowledge and experiences from the field were shared with a specialized audience of Education practitioners through UNICEF Mali Education channels such as Learning for Peace and UNGEI.

UNICEF Mali supported the significant mobilization of political actors as well as religious and community leaders for the International Day of the African Child on 16 June, which was highlighted by a strong public declaration by the President of the Republic qualifying child marriage as a crime even though the law does not yet recognize it as such.

UNICEF Mali supported the first official celebration of World Toilet Day in Mali. The celebration of this day is part of UNICEF Mali's wider effort to increase awareness and political prioritization for sanitation in a country that missed the Millennium Development Goal (MDG) on improved sanitation by a wide margin (coverage in 2015 estimate at 25 per cent whereas MDG target was at 59 per cent).

South-South Cooperation and Triangular Cooperation

In the context of EVD prevention and response, UNICEF Mali organized two cross-border meetings with WHO and Government partners from Guinea on how to reach and sensitize cross

border population. Community structures such as CVV were set up on both sides of the border and harmonized community approaches implemented. These structures were used as well to promote child immunization against polio across the borders.

The CO supported the local production of Ready-to-Use Therapeutic Food (RUTF) in Niger by importing 8,255 boxes of the product into Mali for a value of US\$ 470,000, thus contributing to local economic development in Niger.

Several initiatives contributing to knowledge exchange were undertaken. In October, UNICEF Mali sent representatives and government counterparts to Istanbul to participate in a workshop on Protection and Education. The aim was for Mali to strengthen measures to protect education within its own context by learning from promising practices in other countries. The immediate result was the development of two action plans for improving security for schools in Mali, and to sign the global safe schools declaration. In November, as a part of the Joint Programme on FGM, Mali joined a delegation from Burkina Faso to exchange experiences and good practices for advancing the adoption of legislation banning the practice of FGM. This exchange of experience informed Mali's on-going study on FGM. In December, a delegation of three members of the Government of Guinea Equatorial came to Mali to learn about Mali's best practice in setting up and managing the Parliament of Children.

Identification and Promotion of Innovation

One of the main innovations supported by UNICEF Mali was the temperature monitoring system PQS that improves vaccine quality by offering real time temperature monitoring at different stages of the cold chain. Installed in January, the system is now running 17 cold rooms. Personnel receive SMS and email alerts and have access via a web portal to continuous temperature history for all cold rooms.

In the field of Education in Emergency, UNICEF Mali tested an innovative modality to deliver Accelerated Learning Programmes (ALP) based on a six-month curriculum rather than the standard nine months. Assessments of learning outcomes of children who were enrolled in the short-term version of ALP demonstrated the same results as children who attended the nine month learning cycle.

The Care for Child Development (CCD) intervention was implemented in three regions (Sikasso, Mopti, and Timbuktu) and the district of Bamako, and enabled 53,764 parents to provide better quality care to the most vulnerable children (0-6 years old), especially malnourished children. The CCD is an innovative approach, parents utilize home material such as spoons, bowls or clothes to create games for children and stimulate their cognitive abilities.

UNICEF Mali set up a nutrition school "Unité de Récupération et d'Éducation Nutritionnelle Intensive in Koulikoro" to improve knowledge and skills of health staff responsible for treatment of SAM with medical complications. A total of 84 health staff attended three-week internship and were provided with post-internship coaching at their working place. This school is the first in Mali to combine theory, practical training and coaching on the treatment of SAM, increasing the effectiveness of the training.

Support to Integration and cross-sectoral linkages

In the two regions of Mopti and Sikasso, where half of the poorest children suffer from at least three deprivations, UNICEF Mali implemented a health/nutrition package focused on targeted

interventions across the continuum of care during the first 1,000 day of child life. The objective was to create evidence to develop a cost-effective model to treat stunting. In addition, micro-plans addressing offer and demand-side bottlenecks for the effective and efficient delivery of quality basic social services were developed through the decentralized monitoring system, targeting the most deprived communities where all sectoral interventions were expecting to converge. To ensure this convergence, the micro-plans were integrated in the 2016 annual work plans of UNICEF Mali sector programmes. A mid-year review is planned for June 2016 to assess the effectiveness of this initiative.

UNICEF Mali worked on strengthening the linkages between the civil registry and health sectors. Health workers are an important source of information for civil registry and vital statistics, including recording births before the information is transmitted for declaration at civil registration centres. To better understand the gap between the two sectors and identify solutions, UNICEF Mali commissioned a study to assess the possibilities for further strengthening cross-sectoral collaboration.

To foster integration and complementarity of action between C4D and sections, C4D staff took part in the annual reviews and planning of all programme sections. This involved collecting and reviewing data and priorities of all programme sections before developing C4D work plan for 2016. As a result of this inclusive process, C4D was able to provide better support to agreed-on objectives of sector programmes.

Service Delivery

Increasing equitable access to basic social services and supporting service delivery systems were included in the new UNICEF Mali Country Programme (2015-2019) as one of the main strategic objective. The CP will aim to improve the equitable coverage of essential social services as well as governance and efficiency of each sector.

Since the second half of the year, the Planning, Monitoring & Evaluation section started to support systematic data collection and analysis of the main bottlenecks that limit communities' access to and utilization of services, particularly in the most disadvantaged rural communities in Mopti and Sikasso. Actions to address these bottlenecks were identified and included in micro-plans of the targeted communities. The performance of the service delivery of all sectors will be assessed at the mid-year review planned in June 2016.

UNICEF Mali supported the quality of nutrition services at district levels through improved data collection system. The district level submitted regular weekly and monthly statistics on management of acute malnutrition with satisfactory rate of completeness (less than 90 per cent).. These data ensured timely nutrition surveillance on picks of admissions and key information on compliance with Sphere minimum standards. These data were used to identify underperforming health districts which received ad hoc support.

To improve access to basic services, UNICEF Mali focused on the demand side. During Polio campaigns, more people were better informed about immunization campaigns through C4D activities, which contributed to foster communities' acceptance and opened access to more children to immunization. The demand for latrines in certified Community Led Total Sanitation (CLTS) was stimulated with WASH marketing intervention that create income generating markets for small scale operators through the active promotion and selling of low-cost WASH equipment and materials, better adapted to the needs of the local population.

Human Rights-Based Approach to Cooperation

In line with the UNICEF Mali strategic plan 2014-2017, the formulation of the new CP Document (CPD) of Mali was guided by an equity-focussed approach. Based on deprivation analyses, the programme targeted the regions where the highest number of children suffer from at least three deprivations (Sikasso, Mopti) and where the coverage of basic social services is the lowest (Northern regions). The programme focussed on strengthening the capacity of government partners and communities, especially children and women.

After having contributed to the periodic report on the CEDAW in 2014, UNICEF Mali Child Protection Section supported the transmission of the 6th and 7th periodic reports from the National Direction for the Promotion of Women to the Ministry for the Promotion of Women, Children and the Family and onwards to the Ministry of Foreign Affairs in 2015.

Through the implementation of the Security Council mandated Monitoring and Reporting Mechanism (MRM) UNICEF Mali ensured that parties to armed conflict, including the Government of Mali, adhere to the principals laid out in the optional protocol of the CRC, as well as the African Charter on the Rights and Welfare of the Child, to which Mali is a signatory. Specifically, UNICEF Mali worked to ensure that all parties to conflict respect the minimum age of 18 years for the recruitment and use of individuals in armed conflict, and that children associated with armed groups (CAAFAG) are recognized as victims and not perpetrators. To this end, the CO continues to hold the Government accountable to this commitment, as laid out in a protocol developed and signed between the Government of Mali and the United Nations on the release and transfer of CAAFAG.

Gender Mainstreaming and Equality

Gender inequity remains a major challenge in Mali; women and girls continue to face violations of fundamental rights and remain under-represented in most spheres of influence.

UNICEF Mali's Child Protection Section had a strong focus on addressing gender-based violence (GBV), and supporting gender-mainstreaming in all areas of child protection programming in the new CPD (2015-2019). Two of the section's three priorities are female genital mutilation and child marriage. In 2015, UNICEF Mali supported 1,412 survivors of GBV to access medical, psychosocial, and legal services. Nearly 105,000 individuals were engaged in public debates on GBV, including on FGM and child marriage.

UNICEF Mali Education component supported the roll out of the UNGEI work plan in Mali, at national and decentralized levels. Some results included, among others, the establishment of coordination mechanisms at all levels, empowerment of approximately 10,000 girls through life-skills courses, as well as the implementation in 131 schools of the programme of Child Friendly School where a specific focus was given to the prevention of GBV at schools.

The CO's two Child Protection specialists, an international professional (P3) and a national professional (NOC) were the GBV focal points. In addition, the Education section had an Education Officer at NOC level dedicated to gender issues at schools. There is a Gender Expert position (P4) in the organogram of the new CPD which was vacant. The CO will start the recruitment to fill this vacancy as soon as other resources (ORR) are identified.

Environmental Sustainability

UNICEF Mali addressed environmental sustainability as a key underlying principle for the implementation of its programmes in Mali, most noticeably in the WASH and Health sectors. The scaling-up of the Community Led Total Sanitation approach, manual drilling and UNICEF Mali's implication in the recently established Mali Climate change fund were scaled up in 2015. UNICEF Mali supported the participation of the Government of Mali to the Climate Conference, COP 21, proceedings. The Health programme started to replace gas fridges for the cold chain to solar fridges. Out of the 400 fridges, a hundred were already replaced, mainly in the Northern regions and in Koulikouro, Sikasso and Segou.

In health, UNICEF Mali signed in 2015 a Long Term Agreement (LTA) with a local waste management company, one of the only two companies accredited by the Ministry of Environment. With this agreement, UNICEF Mali supported the National Immunization Department of the Ministry of Health to dispose of its waste without damages to the environment. UNICEF Mali was using this agreement when it needed to dispose of expiring/damaged stocks as per local rules and regulations.

To reduce its footprint on the environment, the CO conducted a climate vulnerability assessment and developed an action plan. Key activities include the use of economic lamp, waste sorting, measures to reduce consumption of water. The action plan will be fully rolled out in 2016.

Effective Leadership

Following the 2014 Audit and subsequent formulation of the recommendations, an audit action plan was developed and shared with all the country management team (CMT) members. The progress of the implementation of the audit recommendations was discussed at CMT sessions. Out of the 24 recommendations, 19 were closed and two recommendations were on-going.

The Mali CO conducted an enterprise risk management (ERM) exercise in which all major operational and programmatic risks were identified and mitigation measures determined. The ERM analysis and action plan were presented at the CMT of May and validated with the participation of all staff. The ERM action plan was being implemented and regularly monitored. With the adoption of the ERM, UNICEF Mali programmes were able to implement their activities in insecure areas.

The business continuity plan (BCP) was reviewed three times (January, June and November) this year due to the volatile security climate in the country. The CO reinforced its security by strengthening of control access, barriers and scan. A BCP simulation was conducted in November and an action plan was developed to address the identified issues.

UNICEF Mali fully adopted the Harmonized Approach to Cash Transfer (HACT) in April, 152 micro assessments were conducted by consultancy companies from May to December. Based on the results of the micro assessment, an insurance plan was developed. The implementation of HACT and the insurance plan were reviewed quarterly through CMT and corrective measures taken to strengthen the activities: micro assessment results were presented, partners audit reports were shared, spot-checks and programmatic visit issues were discussed.

Financial Resources Management

Since the revised payment work process realized in 2014, the delay of payments to partners reduced from five business days to three days. This performance was maintained throughout the year. As a result, partners received more quickly their financial contribution and were able to perform their activities as scheduled.

US\$ 53,624,596 were transferred in cash to implementing partners. As of 31st December 2015, US\$ 40,030,761 (75 per cent) was cleared. The outstanding balance is US\$ 13,593,835 (25 per cent). The direct cash transfer (DCT) rate for 6-9 months at the end of the first quarter was six per cent. This rate significantly improved over the following months thanks to a close monitoring of DCT performance indicators at each Programme Management meeting and CMT, as well as the implementation of HACT. As of end December, DCT rate for 6-9 months and over 9 month were respectively 1 per cent and 0 per cent.

In terms of financial contribution management, the CO performed an overall financial delivery rate of 98 per cent (US\$ 74,622,668). The financial delivery rate for RR, ORR and ORE are respectively 99 per cent (US\$ 17,806,669), 98 per cent (US\$ 40,774,369) and 96 per cent (US\$ 16,041,630). US\$ 39,701,436 will be re-phased in 2016. This amount is comprised of unutilized funds from previous years (US\$1,654,556) and multiyear contributions covering 2016 (US\$ 38,046,880).

Fund-raising and Donor Relations

UNICEF Mali actively engaged with existing and new donors. Donor field visits were organized for Japan, SIDA, Polish Natcom, and Emirates Red Crescent. Outreach efforts were done by the Representative throughout the National Committees in Europe, US and Canada. New partnerships were initiated, notably with DEVCO, Educate a Child (EAC), and Koika.

The CO ensured timely submission of quality donor reports, with strict application of the internal workflow process for reporting and the monitoring of the reporting indicator at PTMs. Out of the 58 donor reports due this year, only one was not submitted on time due to a technical issue in VISION.

Substantial financial support from existing donors was provided by Canada (US\$ 20 million), USAID (US\$ 9 million), DEVCO (US\$ 4.2 million) and Japan (US\$ 3 million). Efforts to ensure flexible funding were made with Sida which resulted in a thematic contribution of US\$19 million for WASH, Protection and Social Inclusion. A proposal on Education of US\$ 20 million was submitted to EAC, under consideration. Overall, the CO raised US\$ 63,779,995 ORR against the planned US\$ 47,070,000, a performance of 136 per cent. Despite the emergency context, the ORE funding raised was relatively low, US\$19,492,659 against the target of US \$38,050,000, a performance of only 51 per cent.

UNICEF Mali leveraged funds with support to the Government. UNICEF Mali organized a donor round-table to mobilize funds for the implementation of the National Directorate's training plan, which enabled the Government to mobilize about half of the required funds (US\$ 3.5 million). For the FGM National Action Plan, supported by UNICEF Mali, the Government ensured financing of approximately US\$ 230,000, making Mali the country with the highest allocation to support FGM activities.

Evaluation

In the first year of the new CP cycle, UNICEF Mali stepped up efforts to increase its effectiveness through the production of more evidence to support programme's implementation, and strategic decision-making. The IMEP was developed and is structured around seven evaluations, five surveys and eight studies.

Three evaluations were completed: (a) Impact Evaluation of Dubai Cares WASH in Schools initiative in Mali; (b) Sustainability Assessment of water and sanitation services supported by UNICEF Mali in Mali; (c) Evaluation of the effectiveness of the physiotherapy stimulation of children with severe acute malnutrition. All evaluations provided evidence for the improvement in the WASH in schools programming integration of physiotherapy stimulation activities to in-patient care treatment of severe acute malnutrition.

The Mali CO was awarded the prize of Best of UNICEF Research through the outstanding "Impact Evaluation on Community Led Total Sanitation Programme in Mali". In recognition of this performance, the CO closely worked with the Government and partners to increase the utilization of the evaluation, and to promote a culture of evaluation in collaboration with a leading local partner (Association for the Promotion of Evaluation in Mali).

While the rating of evaluations commissioned by the CO was satisfactory, there is a need to better the performance in developing and implementing timely management response plan to evaluations.

Efficiency Gains and Cost Savings

UNICEF Mali was sharing its offices in Kayes (West), Mopti and Gao (North) with WFP. All running costs were cost-shared, including the rent, utilities, maintenance, security, etc. The CO saved over US\$ one million per year through this arrangement. Cost sharing between HACT agencies were made for the implementation of micro assessments and spot checks.

An agreement was signed with ECHO flight that provided UNICEF Mali staff with free access to internal flights in hard to reach areas. With the arrangement the CO saved US\$ 500 per round trip, which represents a minimum saving of US\$ 5,000 per month.

Annual savings of US\$ 30,000 for storage of programme supplies were made, and estimated saving of US\$ 28,300 for the transit cost of importing UNICEF supplies was on-going. These savings were achieved through competitive bidding of services and a request for all-inclusive prices, which ensured faster processing of invoices and a better control of costs. Other savings were made through the average Purchase Order value that is now at US\$137,300 compared to US\$ 94,335 in 2014. UNICEF Mali is thus saving resources in processing procurement achieved through better grouping of programmes supplies requests.

The CO did not register any losses linked to weak management of its programmes supplies. Close follow up allowed the distribution of IEHK kits (value at US\$ 23,400) before their pre-emption date and the re-exportation of F-75 and F-100 Milk before the expiry date to COs that expressed an urgent need (value at US\$ 27,500).

Supply Management

Compared to 2014, apart from Procurement Services, all types of procurement were reduced this year, in line with the reduction of the CO total budget allocation. Regarding the programmes supplies, it must be noted that the CO focussed procurement on essential commodities.

The activity of planning procurement throughout the year was an issue; the execution rate of the 2015 Supply Plan was uneven. This situation affected the rest of the Supply Chain where UNICEF Mali was not able to optimize its warehouse space.

UNICEF Mali provided support to the Government by storing its 430,000 doses of vaccines (US\$1,500,000) UNICEF Mali supported the Government storage capacity by contracting a waste management company who cleared and re-organized the CNI compound.

UNICEF Mali 2015	Value in US\$
Programmes supplies	16,493,455
Operation suppliers	472,443
Services	1,598,505
Construction	2,836,870
Total	21,401,273

Supplies channelled via procurement services	Value in US\$
Via Regular Procurement services	3,990,000
Via GAVI	21,324,000
Total	25,314,000

Locally managed procurement	Value in US\$
Programme supplies	2,077,000
Operational supplies	457,500
Services	4,435,375
Total	6,969,875

Inventory of programme supplies: US\$ 4,604,150 as of 5th January 2015, of which US\$ 433,066 were supplies prepositioned for Emergencies.

Supplies managed in the MCO controlled warehouse: US\$ 14,915,300

Security for Staff and Premises

Due to the unpredictable nature of the security threats in Mali (armed conflicts, terrorism, civil unrest, criminality and hazards), the CO prioritized the implementation of all the recommended mitigating measures contained in the Minimum Operating Security Standards (MOSS) and Minimum Operating Residential Security Standards (MORSS) documents. As such, all UNICEF Mali premises in Bamako, Sikasso, Kayes, Mopti, Gao and Tombouctou reached a MOSS compliance level of 75 per cent with adequate perimeter walls, topped with razor wires, reinforced by Hesco bags where necessary, glass windows covered by Blast Resistant Film,

security guards deployed in all premises, surveillance detection cameras, backup generators, safe havens, fire detection and fighting equipment, scanners where necessary, handheld metal detectors, bomb search mirrors. 4X4 vehicles fully equipped with VHF and HF radios, geospatial vehicle tracking system, VHF handheld radios and satellite phone as a backup for field missions.

The CO had one Security Specialist for staff deployed in all the regions listed above. A national staff at NOC level was hired to enhance security capacity in Gao. Two staff at NO level were being hired for Bamako and Mopti.

A second major focus for the CO was to make sure all staff attended the security trainings including the basic and advanced online trainings, the Safe and Secure Approaches in Field Environments, and the fire security training.

UNICEF Mali three armoured vehicles in the Northern regions: one in Tombouctou, one in Gao and one in Mopti. In order to deliver more, the need for at least two armoured vehicles per duty station is highly needed and personal protection equipment as well. The on-going construction of adequate safe rooms will offer more secured space for staff accommodation in high-risk locations.

Human Resources

The Mali CO experienced a high staff turnover, partially related to the 2015 Programme and Budget Review which resulted in a number of positions being abolished, created and transferred. In addition, internal and external vacancies were shared with staff and due consideration is given to staff on abolished post. In the other hand, meeting the recruitment indicators was more challenging for a number of factors including difficulties to attract qualified candidates because of the emergency/non-family context of the country. In this regard, positions were re-advertised several times with the aim to broaden the pool of candidates.

With regard to the global indicators on performance management, the rate of completion of staff performance reviews (PER) and gender balance in the CO were always shared and discussed in CMTs and the office had a rate of 99 per cent of the PERs completed as of February. Management encourages staff to complete mandatory trainings and the CO was able to satisfactorily implement the trainings with the rate of 80 per cent for HACT online training, 90 per cent for ethics and 80 per cent harassment.

In term of staff development, three staff exchanges were approved in all categories including one GS, one NO and one IP in support to other COs in the region. In terms of talent management, one GS staff member was promoted in the same category, two GS staffs from GS to NO and two NO from NO to IP positions.

The CO had two Peer Support Volunteers who provided moral support to staff who sought the assistance.

Effective Use of Information and Communication Technology

UNICEF Mali continued its efforts this year to support broader use of cloud-based Office Automation tools in the CO. This allowed staff to fully access all corporate applications from anywhere through the web. The CO Bandwidth was increased (from 6 to 20 Mbte) to ensure effective use of corporate applications.

ICT unit worked closely with the programmes to support the innovation agenda of the CO. More specifically, the ICT team supported the utilization of RapidPro as its Real-Time Monitoring technology platform for current applications, including U-Report.

ICT assisted the external communication function through increasing availability of internet by putting in place high speed and broad bandwidth digital technology. This contributed to a strong presence of UNICEF Mali in social media.

As part of BCP, the ICT section set up telecommunications back-up (mobile phones, Satphones, BGAN for data, wireless connections) and home office equipment for essential staff in Bamako, Gao and Mopti offices to enable them to work from home in case of emergency.

ICT installed audio conference sets in Bamako and field offices, allowing decentralized office staff to participate regularly through teleconference to management meetings held in Bamako.

To reduce UNICEF Mali's environment footprint, ICT configured all printers with automatic, both sides printing option with the objective to reduce the use and waste of papers.

ICT provided hands-on training to staff to improve their capacity in the use of ICT resources. Sessions were provided on cloud-based Office Automation tools (Office 365, Outlook, Lync, OneDrive, Sharepoint), and training on Vision was provided for new staff.

Programme Components from Results Assessment Module

ANALYSIS BY OUTCOME AND OUTPUT RESULTS

OUTCOME 1 By the end of 2019, boys and girls aged 0-59 months, pregnant women and breastfeeding mothers, particularly those living in the most disadvantaged communities, access to and use an essential package of high-impact preventive, curative and promotional health interventions, including in emergency situations.

Analytical Statement of Progress:

Out of three indicators, updated information is available for two. The available data cover only the first semester of 2015 due to a delay in the data transmission from the operational level towards the central level. By end of June 2015, at national level 60 per cent of deliveries in maternity wards were assisted by qualified personal and Timbuktu: 22 per cent, Gao: 26 per cent. Pentavalent 3 doses vaccine coverage at national level were 53 per cent, Timbuktu: 56 per cent, Gao: 120 per cent (due to displaced populations from Kidal in numerator). Only 39 per cent health districts (i.e. 20) reached a coverage rate above or equal to 90 per cent (Gao: 2, Kidal: 4 didn't target the objective). The number of incidental cases of malaria, diarrhea and acute respiratory infections affecting under five children who were treated were respectively 81,650; 23,403 and 19,837. In Kidal 9,960 children under five years had access to health care (malaria, pneumonia and diarrhea) through NGO support. While Mali was declared EVD free on 18 January 2015, UNICEF Mali continued to strengthen the health system and sensitize communities to prevent new EVD outbreaks.

The main challenge during the reporting period was the weakness of the health information system with difficult to access to reliable data, as well as the rapidity in accessing this data, which is critical for the follow up of the progress. The launch of the Monitoring Results for Equity System (MoRES) will help address the issue of data. It will identify the main determinants and

bottlenecks to address, in order to improve UNICEF Mali interventions and ensure the achievements of intended results.

OUTPUT 1 By 2019, the governance, funding and accountability framework for the health of mothers, new-borns and children is strengthened, including in emergency situations

Analytical Statement of Progress:

Overall, good progress was achieved towards two indicators out of three. During 2015, UNICEF Mali efforts focused on improving the governance of the health system by ensuring availability of statistical data. The 2014 annual statistical report was finalized and printing and dissemination was in progress. The integration of birth registration in SNIS is in progress. UNICEF Mali supported the identification of the priority sites of the registry office, the capacity assessment of the health centres for birth registration and the trainings of the various actors. UNICEF Mali ensured a technical assistance to the Government of Mali through an international expert to support the process. Regarding the IT platform, it will be based on the DHIS2 which will allow decentralized levels to directly enter data in the system and the central level to access to consolidated data in real time. It is expected that the data generated by this new platform will produce constructive dialogue between the MoH and all its partners. UNICEF Mali in partnership with USAID conducted for this purpose an assessment of the current system to identify issues and propose sustainable solutions to improve the quality and the availability of sanitary data.

OUTPUT 2 By 2019, 90 per cent of children under five (boys and girls), particularly those living in the most disadvantaged communities, access to and use a minimum package of health services, including in emergency situations

Analytical Statement of Progress:

During 2015, UNICEF Mali contributed to improve access, use and quality of health services. The CO provided vaccines and commodities in the country for both routine immunizations and campaigns along with the forecast and emergencies requests for VAA and Polio (finance by State budget and GAVI). The CO developed a MOU with the NGO IEDA relief at Kidal for immunization and IMCI activities, and to elaborate and implement the riposte plan against polio virus outbreak (CVDPV).

UNICEF Mali supported technical assistance and financed key activities at operational levels; provided equipment, drugs and commodities in the regions in response to EVD outbreak; and organized SMC campaigns eight health districts. In the northern regions, only the district of Diré (Timbuctu) conducted four SMC campaigns with 16,000 children 3-59 months targeted. By end of the first semester 2015, 53 per cent of children under one year old received three doses of pentavalent vaccine (which protect against five preventable diseases) and 45 per cent of children received measles vaccine. UNICEF Mali contributed in partnership with WHO, GAVI, and Rotary to protect 7,823,241 children against the poliomyelitis during the National Vaccination Day against polio and measles, through a strong social mobilization and provision of vaccines. In the insecure areas, 111,975 under five children were vaccinated against polio and measles. These results, attained in only one semester, are very good. However issues remain in liability and availability of data on time; the good results also hide disparities between regions.

The main insufficiency in routine immunization consisted in lack of appropriate cold chain in the field, the delay in installation of new refrigerators, the poor quality of immunization data, the weakness of vaccine supply system at districts level, low maintenance of cold chain and the low indicators targeted.

Regarding these challenges UNICEF Mali in partnership with GAVI and Canada Government is implementing a wide rehabilitation programme by improving cold chain management with cold room; solar refrigerator; improved temperature monitoring system and a comprehensive plan for maintenance.

OUTPUT 3 By 2019, 90 per cent of pregnant women, including those exposed to or infected with HIV, receive care during pregnancy, childbirth and the postpartum period, including in emergency situations

Analytical Statement of Progress:

UNICEF Mali Health programme focused on the implementation of integrated package of interventions to monitor pregnancies, assist deliveries including emergencies obstetric and neonatal care as well as care for women and new born affected and/or infected by HIV. UNICEF Mali improved quality of service for pregnant women and new-borns through the supply of standard medical equipment kits in 24 district health centres (40 per cent of CSREF), provision of medicine, medical consumables, training of agents in maternal and neonatal care, supervisions and monitoring of activities on the ground. In Kidal region where the public health services were not functioning due to the political crisis and insecurity, UNICEF Mali partnered with local NGOs to strengthen capacities of health structures in the region in order to continue providing basic maternal, neonatal health and nutrition services in nine CSCOM and CSREF.

According to the available data from Health Local System Information for the first semester, 60 per cent of pregnant women completed at least three antenatal care visits, 67 per cent of pregnant women screened for HIV, and 97 per cent of new born from HIV+ pregnant women received ART.

OUTCOME 2 By 2019, communities, particularly those living in rural and disadvantaged areas, increased sustainable access to and use of safe drinking water, basic sanitation and hygiene, including in emergency situations.

Analytical Statement of Progress:

The WHO-UNICEF JMP report for 2015 was issued in August and provided insight into the current WASH coverage of Mali. According to the report, Mali made great progress in access to an improved water source with coverage having increased from 27 per cent in 1990 to 77 per cent in 2012, thus surpassing the MDG target of 65 per cent. Progress in sanitation coverage was substantially lower with access to an improved sanitation facility having increased from 14 per cent in 1990 to only 25 per cent in 2015. It is expected that Mali will miss the MDG target for sanitation of 59 per cent by a substantial margin.

The slow progress in sanitation can be explained by the low prioritization/budgeting of the sanitation sub-sector as compared to the water sub-sector. Sanitation differs from many other spheres of development in that the primary barrier to success is often not the availability of adequate facilities, but rather the level of demand for improved sanitation practices. Moreover,

the substantial progress in-the water sub-sector hides a significant disparity between urban and rural settings, as the rural coverage remains at a low 64 per cent. This means that a third of the rural population still lacks access and is a reflection of the low investments in the rural water sub-sector. These issues were further compounded by the low governmental budgetary allocation to the WASH sector (mainly used for salaries/support costs), a human resource deficit, as well as weak capacity in the key WASH governmental technical services (National Water Directorate and National Sanitation Directorate) and insufficient WASH data for institutions (schools and health centres) as well as at the decentralized level.

UNICEF Mali is contributing to solve issues as part of its 2015-2019 CP with strategies such as: focused service-delivery, advocacy and evidence-base generation.

In terms of advocacy, UNICEF Mali is using its role as coordinator of the Mali Donor Coordination Group to improve overall coordination of the WASH sector but to advocate for the rural sub-sector and in particular rural sanitation. In that respect, the donor group was involved in the monitoring of the Mali SWA Commitment, the organisation of the national Water and Sanitation forum, the organisation of a donor round table to mobilize funds for the National Water Directorate training plan and the support to the elaboration of the new Government Water and Sanitation Programme. In addition, UNICEF Mali is improving the profile of rural sanitation by conducting communication events on CLTS, disseminating the CLTS impact study and providing CLTS trainings to WASH practitioners.

In terms of an evidence base, UNICEF Mali is finalizing three studies in 2015 which will substantially contribute to the evidence base of the WASH sector. A WASH in schools impact study conducted with Emory University aims at establishing the impact of WASH in Schools on pupil's health and education outcomes. A sustainability audit was conducted on a DGIS funded project and will provide substantial insight into the current sustainability bottlenecks of rural WASH, both at the institutional and community levels. In addition, a study on water point management systems in the conflict-affected regions of the North will provide guidance on future recovery projects in these regions.

The service delivery component of the Programme continued at a large scale with 212 communities improving their water access and 572 communities reaching ODF status. In addition, 664 schools and 74 health centres reached the WASH standard through both hardware and software interventions. UNICEF Mali started implementing 'Linking relief to Reconstruction and Development' projects in the crisis-affected Northern Regions, benefitting 46,800 people through the rehabilitation/construction of water points. The WASH in Emergencies component in 2015 largely focused on EVD prevention activities in the areas that border Guinea.

OUTPUT 1 By 2019, a more favourable environment is established for the provision of water sanitation and hygiene services, with a special focus on the sub-sector rural sanitation.

Analytical Statement of Progress:

Mali made great progress in access to an improved water source with coverage having increased from 27 per cent in 1990 to 77 per cent in 2012, thus surpassing the MDG target of 65 per cent. Progress in sanitation coverage was substantially lower, with access to an improved sanitation facility having increased from 14 per cent in 1990 to only 25 per cent in 2015. It is expected that Mali will miss the MDG target of 59 per cent by a substantial margin.

The slow progress was explained by the low prioritization/budgeting of the sanitation sub-sector as compared to the water sub-sector.

UNICEF Mali aimed at building a more favourable environment for the provision of water sanitation and hygiene services, with a special focus on the sub-sector rural sanitation. In that respect, the following activities were conducted in 2015:

- Follow-up on the SWA commitments of Mali: The implementation of the commitments were monitored and regular reports sent to SWA secretariat. As part of its commitment, the Government pledged to increase its budgetary allocation to the WASH sector to 5 per cent of its budget and its allocation to the sanitation sub-sector to 0.2 per cent of its GDP;
- Launch of the first sustainability audit in Mali: This audit conducted by a Malian engineering consultancy firm on the DGIS-funded project will provide substantial insight into the current sustainability bottlenecks of rural WASH, both at the institutional and community levels;
- Increase the profile of CLTS: This is being done through the annual CLTS review workshops, the dissemination of the CLTS impact study and communication events such as the certification of an ODF village by the Minister of Environment and Sanitation;
- Capacity building of the National Water Directorate: A UNICEF Mali study identified human resource gaps and training needs for the National Water Directorate and its Regional affiliates. UNICEF Mali organized a round-table of donors to mobilize funds for the implementation of this training plans;
- Enhanced leadership of the Mali Donor Coordination Group: UNICEF Mali has led the group since 2014 and gained significant momentum in 2015 as more donors are participating in it (EU, ECHO, Denmark, Sweden, Netherlands, USAID, AFD, KfW and GIZ). This put UNICEF in a position to effectively lobby for additional investments in the rural sector and in particular, sanitation.

OUTPUT 2 By 2019, at least 1 million additional people living in at least 1,500 rural communities, particularly the most disadvantaged, gained access to safe water and adopted good hygiene and sanitation practices

Analytical Statement of Progress:

The WASH in the community component of the programme aimed at increasing access to water and sanitation in the rural communities of Mali, thus contributing to the achievements of the MDG goals. In that respect, UNICEF Mali contributed to the reduction of Open Defecation in rural areas from 20 per cent in 2010 to 15 per cent in 2015. This substantial reduction was achieved through a massive CLTS campaign that declared 1,700 villages as ODF during that time period. In 2015, UNICEF Mali partnered with 11 NGOs to implement CLTS in 600 villages, of which 572 already been declared ODF, thus benefitting 60,688 people. UNICEF Mali considerably strengthened its post-ODF monitoring in 2015 as it is currently supporting the National Sanitation Directorate in the roll-out of the National Post-ODF strategy that was devised the year before. In addition, the WASH marketing pilot project with PSI ended and plans were currently underway to scale it up to 1,000 communities that had already reached ODF status. As CLTS reduces open defecation rates, the WASH marketing approach will enable ODF communities to purchase latrine slabs and access to improved sanitation in a cost-effective and sustainable way. Other products that are part of the approach include hand-washing facilities, soap and household water treatment products.

UNICEF Mali improved water access in the CLTS communities that lack or have insufficient access to an improved water source. UNICEF Mali built water points in 212 communities, thus benefitting 140,000 people, and scaled up successful manual drilling project that was implemented in 2014, to cover 108 communities in 2015. This low-cost technology will allow UNICEF Mali to reach more communities with less funding in the coming years. In addition, 58 manual drilling were realized.

OUTPUT 3 By 2019, at least 1,100 institutions (schools and health centres) meet recommended WASH standards in terms of equipment, promotion of hygiene and local governance

Analytical Statement of Progress:

Despite the political, military and humanitarian crisis that Mali has been confronted with since 2012, the National Strategic Plan for the Promotion of Hygiene Education in Schools (NSPPHES) was implemented at a fast pace as an additional 664 schools reached the WASH standard in 2015 thus benefitting 159,427 children. UNICEF Mali supported the MoE in the follow-up of schools that had reached the standard in previous years, as 437 of these schools were monitored in 2015.

Taking into account the lessons learned from previous years, the WASH in Schools package and intervention strategy were periodically updated and improved. In addition, the incorporation of menstrual hygiene management in the school training package in 2014 is being rolled out to all intervention schools in 2015. The 2014 integration of hygiene education in the National teacher's training curriculum was operationalized as the training of trainers of the National Teacher's school was conducted.

The Local NGO federation for WASH in schools that was created in 2014 with UNICEF Mali support is now fully operational. This federation is currently elaborating an advocacy strategy and an investment case for WASH in schools. This initiative will hopefully raise the profile of WASH in schools and stimulate an increased interest in that field at both the Governmental and donor levels.

The final report of the Emory University "WASH in schools" impact study was being finalized to be available in 2016. Preliminary results of this study indicated: i) there was a reduction of 23 per cent in self-reported diarrhea; ii) there was a reduction of 21 per cent in self-reported respiratory infection symptoms and ii) there was an improvement in in all behavioural outcomes (hand-washing, reduction of open defecation, functionality of school management committees).

In terms of WASH in Health centres, UNICEF Mali supported 74 health centres in reaching the WASH standard. UNICEF Mali received a substantial contribution from the European Union to implement the standard in 213 health centres of Sikasso and Koulikoro regions as well as to support the MoH improve of the enabling environment of that sub-sector.

OUTPUT 4 Communities affected by crises or conflict increased access to clean water, basic sanitation, measures to promote prevention of water and sanitation -related diseases.

Analytical Statement of Progress:

In support of the Government of Mali, UNICEF Mali humanitarian response in the area of water and sanitation helped provide improved water access to 50,800 people through the

construction/rehabilitation of water points in the Northern Regions. The Regional “Wash in Nut” strategy continued to be implemented as 12,300 severely malnourished children and their caretakers benefitted from this approach in 2015.

UNICEF Mali supported punctual humanitarian interventions following man-made or natural crisis. UNICEF Mali conducted emergency distribution of household water treatment products to 24,000 people in Gouram-Rharous and Goundam (Timbuktu Region) following a recent population displacement in those areas; supported the emergency rehabilitation of 50 water points on the Timbuktu-Gourma Rharous axis; and supported partners to provide a full WASH package in 74 health centres. The WASH Programme contributed to the multi-sectorial EVD Prevention by providing hygiene supplies (sand-washing stations, soap, cleaning products) and hygiene education to 129 health centres, 648 schools, and four transit/treatment centres and in all major Bamako bus stations. In addition, the cluster coordination mechanism which was setup in 2012 was operational with the lead of UNICEF Mali. Substantial progress was made in the setup of decentralized coordination mechanisms in both Mopti and Gao Regions and plans are currently under way to transition this coordination role to a WASH Sector Platform under the lead of the Government.

The liberation of the Northern Regions in 2013 and the redeployment, albeit at a reduced scale, of government technical services enabled UNICEF Mali to start implementing ‘Linking Relief, Recovery and Development (LRRD)’ interventions in 2015. UNICEF Mali received a grant from the EU to implement an LRRD project and lead an LRRD consortium of five NGOs that received EU funding (Oxfam, Solidarites, ACF, LVIA and Handicap International). In addition to additional rehabilitation works of 150 water points, the project finalized a study on the operation and maintenance of water systems, developed a capacity building plan for the governmental technical services, and conducted a technical assessment of 40 small-town water distribution systems. As the situation in the North improves, these studies will feed into the design of future large-scale development programmes that are expected to resume over the next years.

OUTCOME 3 By the end of 2019, the nutritional status of children aged 0-59 months and women of childbearing age improved, especially those living in areas with high prevalence of malnutrition, particularly Mopti and Sikasso.

Analytical Statement of Progress:

Malnutrition rates in Mali were consistently high over the past five years. Data from the 2015 nutritional survey using SMART methodology showed little improvement in the nutritional situation in the country. In the last five years, national MAG rates remained between 10-15 per cent, with Northern Regions often exceeding 15 per cent. In 2015, Timbuktu and Sikasso, emerged as particularly worrisome regarding acute malnutrition, with Timbuktu recording 17.5 per cent of MAG, considered “critical” as per the thresholds determined by the WHO. Sikasso on the other hand has seen a steady rise in acute malnutrition rates: whereas MAG rates were 7.5 per cent in 2011, they rose to 12.5 per cent in 2015, considered “serious” by the WHO.

Low government capacities to collect and analyse information and respond to nutritional emergencies exacerbates the situation. Health districts seldom had enough resources, both human and technological, to collect and transfer data regularly.

Chronic malnutrition (stunting) remained a significant problem in Mali. Chronic malnutrition rates in the country remained high (31.1 per cent in 2015) and Sikasso recorded a chronic

malnutrition rate of 36.7 per cent in 2015, which is above WHO's threshold of "acceptable". One in four children had a low weight for age (24.2 per cent), out of which seven per cent suffered from severely low weight for age. Chronic malnutrition in Mali is linked to multidimensional causes, including chronic food insecurity, lack of access to quality health care, inadequate Infant and Young Child Feeding (IYCF) practices, poor maternal nutrition, high prevalence of childhood illnesses, poor hygiene and lack of sanitation.

In 2014, a Multiple Overlapping Deprivation Analysis (MODA) was conducted, and found that among children 0-23 months of age, an estimated 82 per cent were deprived in nutrition, the highest deprivation of all sectors analysed (health, child protection, water, sanitation, housing, etc.). Based on the MODA analysis, the region of Mopti and Sikasso were targeted for a multi-sectoral support package linking key nutrition specific activities (IMAM, IYCF, micronutrient deficiency prevention activities) with the most essential nutrition sensitive activities in the sectors of WASH, health and education. In the other regions, UNICEF Mali is focused on IMAM, micronutrient deficiency prevention, key maternal and child health activities and Wash-in-Nut.

The main areas of priority were to raise the profile of nutrition in government priorities and to strengthen nutritional information systems; to reduce chronic malnutrition through intensified efforts to improve Infant and Young Child Practices and prevent micronutrient deficiencies; and to continue to fight against SAM by providing quality care as per the national protocol and international standards.

At institutional level, UNICEF Mali supported the REACH and SUN movement's efforts for a multi-sectoral response to nutrition in Mali. The nutrition multi-sectoral plan was reproduced and sent to the various regions for its local application. UNICEF Mali together with its UN partners provided on-going support to the Government to set up the coordination cell which will be in charge of monitoring the implementation of the multi-sectoral nutrition plan. The preface of the national IYCF strategy was signed by the MoH as well with continuous monitoring and lobbying on UNICEF Mali's part. The strategy will now be sent to all regions for application.

UNICEF Mali continued strengthening the national framework for coordination by leading the Nutrition Cluster and by further strengthening the Nutrition Division on coordination at all levels.

UNICEF Mali worked towards attaining its aim of reducing chronic malnutrition and preventing micronutrient deficiencies through supplementation campaigns for children, training of health workers and agents from various departments, supporting IYCF support groups, and advocating for increased use of iodized salt. A total of 5,817,176 children between 6-59 months (89 per cent) received vitamin A supplements and 5,157,018 children between 6-59 months (88 per cent) were dewormed through the first round of supplementation campaigns in the country. Moreover, 41,301 children received micronutrient supplements in 2015. These activities were carried out in collaboration with governmental and non-governmental partners.

As was the case in previous years, fighting SAM was a priority in 2015. Through UNICEF Mali's support, from January to November 2015, 149,652 children between the ages of 6 and 59 months were admitted for treatment in health centres all over the country. Through continued and uninterrupted supply of Ready to Use Therapeutic Foods (RUTF) and training of health staff and health district teams, UNICEF Mali pursued its aim of resolving supply related bottlenecks. In order to increase access to health centres, which constitutes a bottleneck in Mali, particularly in remote rural areas. A qualitative study was carried out in collaboration with INRSP in five areas with low CMAM coverage (Bafoulabe, Sikasso, Mopti, Tombouctou, Bamako) aimed at

understanding determinants that boost and hinder access to care. Based on the research information, a national community mobilization strategy will be outlined and discussed at the beginning of 2016, together with a community mobilization plan for each of the five investigated health districts.

Resource mobilisation remained a challenge causing delays that impacted the nutrition department's capacity to deliver innovative programming as planned in the Annual Work Plan for 2015. Deteriorating security conditions in the country were a main concern for delivery. While conditions in the north remain volatile with new incidents reported in Timbuktu, Gao, Mopti and Bamako, the southern country had terrorist incidents and police action dismantling terrorist camps. As a result, projects' implementation was delayed and quality of nutrition services were perhaps negatively impacted.

OUTPUT 1 By 2019, the institutional and strategic repositioning of the nutrition sector taken effect and facilitates integration across sectors, and the improvement of the sector's funding framework

Analytical Statement of Progress:

In 2015, UNICEF Mali ensured strategic and institutional support to the nutrition sector in the country, raising its profile amongst the Malian Government priorities. A newly appointed dedicated cluster lead came on board to ensure that nutritional coordination activities took place unhindered. Thirty three coordination meetings were organized, of which eight were in Bamako and 25 at regional level. Nevertheless, little headway was made in terms of developing an advocacy plan for nutrition and of evaluating the Nutrition Division.

In March 2015, a SUN Government Focal Point was nominated at the MoH and a Nutrition Coordination Unit was created by decree of the Prime Minister. In order to strengthen the SUN movement, the UN agencies promoted the creation of a network aimed at increasing stakeholders' commitment and going beyond the simple technical coordination of partners. The private sector was not organized within SUN-Mali, but contacts were established with the National Council of Employers for improved private sector involvement.

With the financial and technical support of the ANSP/UNICEF Mali project, and in collaboration with Cornell University, Mali operationalized its multi-sectoral approach to nutrition and established local platforms in the Yorosso Circle. The ANSP/UNICEF Mali project supported the creation of a Master Degree in Nutrition and Public Health, now available at the national Faculty of Medicine.

The Renewed Efforts Against Child Hunger (REACH) Partnership coordinated four UN Agencies that signed a memorandum of understanding; the civil society collaborated within a national alliance and three regional alliances that were established.

A national nutrition survey with SMART methodology was carried out during the lean season (May-June 2015) in collaboration with the National Institute for Statistics (INSTAT) and other UN agencies. Despite security issues, the survey covered eight of nine regions, providing evidence on under five nutritional status and progress made towards eradicating poverty and hunger. The results were used to estimate the number of under five children expected to suffer from acute malnutrition in 2016 (180,000) and the related humanitarian needs.

In a bid to improve nutritional surveillance in the country, a pilot rapid SMS system was put in place in all health districts of Mopti. The system ensured better surveillance of nutritional indicators in the region, including monitoring of nutritional stocks and it will lead to improved nutrition services in the regions.

UNICEF Mali carried out a qualitative study to better understand the barriers to SAM treatment. The results will allow UNICEF Mali to elaborate a national strategy for the improvement of treatment coverage and for community mobilisation.

In 2015, UNICEF Mali collaborated closely with the “System d’Alerte Précoce (SAP)” to include nutritional indicators in the quarterly bulletin. It funded the SAP to carry out an Urban Vulnerability Assessment in the town of Sikasso.

OUTPUT 2 By 2019, at least 70 per cent of pregnant women and children aged 0-23 months access to a package of interventions to reduce chronic malnutrition in the target areas of Mopti and Sikasso

Analytical Statement of Progress:

In 2015 UNICEF Mali continued to work in partnership with the Government and other allies to improve access to nutrition services for children and women, in order to reduce chronic malnutrition rates in the regions of Mopti and Sikasso where a package of multi-sectoral specific and sensitive interventions will be implemented.

During this period, UNICEF Mali continued to support the Government on its IYCF strategy. The strategy was based on the 1,000 days approach, thus targeting the window of opportunity to provide adequate support to pregnant and lactating mothers as well as infants and children up to 24 months of age. Since 2013, UNICEF Mali was working closely with the national Government to finalize the strategy. The strategy was adopted in 2014 thanks to UNICEF Mali's technical and financial support. In 2015, UNICEF Mali ensured that the Government signed the preface to the strategy. The strategy allows for IYCF approaches to be coherent across the country, ensuring better care for pregnant and lactating mothers.

UNICEF Mali lobbied with the Government to define a guideline to implement and scale up the IYCF strategy. In 2015, UNICEF Mali worked alongside the Government to propose the integration of community IYCF activities in existing guidelines to ensure harmonization throughout the country. Efforts targeted the revision of nutrition indicators in the health information system, with the intent to include IYCF indicators.

In 2015, UNICEF Mali organized and funded the revision of counselling cards, which make up the primary communication support for actors that promote IYCF, both in communities and in health centres. In parallel, a document review was carried out to capture the determinants and bottlenecks for an appropriate communication strategy for IYCF which is tailored to the country's culture and context.

Further to its up-stream efforts, UNICEF Mali continued to support national and international partners, to implement IYCF at community levels in order to create a more enabling environment for good nutritional practices. It is thus that 1,410 community IYCF support groups were created throughout the country, covering seven regions and 14 health districts. Out of

these, 1,131 (80 per cent) were created in the two focus regions, Mopti and Sikasso. In addition, 466 health workers were trained on IYCF.

In support to IYCF, UNICEF Mali celebrated World Breastfeeding Week by supporting government-led activities in seven regions of Mali. Communities, local actors, and other stakeholders were encouraged to promote and protect good breastfeeding practices, particularly within women's occupational context.

Certain activities planned for 2015 were not carried out due to delays in acquiring funds. This is particularly true for the integration of households in social protection programmes and the evaluation of baby-friendly hospitals.

OUTPUT 3 By 2019, at least 80 per cent of children aged 0-59 months (boys and girls) and women of childbearing age access to a service for the prevention of micronutrient deficiencies

Analytical Statement of Progress:

As a country prone to climate change-related shocks and resulting food security, as well as inadequate hygiene and nutritional practices, Malian children were particularly prone to micronutrient deficiencies. UNICEF Mali's key actions in its Annual Work Plan 2015 was to ensure that by 2019, 80 per cent of children between the ages of 0-59 months and women access to services that help prevent micronutrient deficiencies, which are causes for malnutrition. This includes access to micronutrients, to vitamin A, and to folic acid and iron for women of reproductive age.

In 2015, two rounds of Vitamin A campaign (SIAN) were realized. Through the first campaign carried out in February 2015, 5,817,176 children between the ages of 6 and 59 months received vitamin A supplements and 5,157,018 were dewormed in all the regions. The second round of Vitamin A supplementation campaign was realized in October 2015: 6,042,831 children aged 6-59 months received Vitamin A supplementation and 5,546,260 children 12-59 months aged were dewormed.

As constraints, the country worked with on UNICEF Mali and other partners to provide needed supplies (Vit A and deworming tablets) to all children and to support the operational cost of the campaign. In addition, there was an over-estimation of the denominator that conduct to more than 100 per cent of coverage. The denominator issue is due to the integration of deworming and Vitamin A supplementation in Polio campaign.

Through partnerships with NGOs such as Yag-Tu, ASDAP and Belgian Red Cross, UNICEF Mali ensured that 41,301 children aged 6-23 months received micronutrients in Kayes, Mopti and Sikasso regions.

Another focus was to promote the use of iodized salt in Mali. Aside from the rock salt produced and consumed in the north of the country, all salt in Mali is imported. UNICEF Mali was carrying out sensitization and training sessions on quality control of salt. It is thus that 258 agents from the Health, Customs, Commerce, and Competition departments in Mopti were trained. UNICEF Mali carried out an advocacy workshop, and exchange visit with salt wholesalers and retailers. A situational analysis was carried out to get a better understanding on the availability and consumption of iodized salt in the region of Gao. Strategy to ensure the availability of iodized salt will be addressed through REACH.

OUTPUT 4 By 2019, at least 80 per cent of children aged 6-59 months (boys and girls) access to good quality services for managing severe acute malnutrition (including in emergencies)

Analytical Statement of Progress:

With the technical and financial support of UNICEF Mali, the Division of Nutrition/National Direction of Health (DN/DNS) continued implementing interventions to improve access and quality of care for the management of SAM. A total of 149,652 children between the ages of 6 and 59 months received treatment for SAM from January 2015 to end of November 2015 (data available up to this date).

In terms of access to treatment and following the result of the national SLEAC survey carried out in 2014 which showed a low coverage of treatment in a certain number of health districts, a qualitative research was carried out to gather further qualitative information regarding the community and attitudes towards malnutrition in five areas with low coverage (Bafoulabe, Sikasso, Mopti, Tombouctou, Bamako). Based on the research information, a national community mobilization strategy will be outlined and discussed at the beginning of 2016, together with a community mobilization plan for each of the five investigated health district.

Access to treatment was supported by mass screening campaigns funded by UNICEF Mali in health districts not supported by NGOs. During the mass screening campaigns, 11,601 community health workers (“relais communautaires”) were trained and 841,856 children 6-59 months were screened in the five southern regions and the District of Bamako.

Simultaneously, efforts were undertaken to improve the quality of treatment in inpatient care and a three-stage strategy was elaborated between DN/DNS, UNICEF Mali and ALIMA (international NGO), whereby 199 health personnel from the stabilisation centres (URENI) received a theoretical training on the management of SAM and its complications. This health staff started then to follow a three-week practical internship at the “Ureni School” at the Referral health centre of Dioila. By the end of Dec 2015, 84 health staff completed their practical internship at the School Ureni. Following the practical training, a post-internship follow up is being carried out to support the health staff in implementing the adequate care practices in their stabilization centre upon their return.

Regarding the quality of treatment in the outpatient centres, a total of 34 joint supervision between UNICEF Mali and DN/DRS were carried out.

The capacities of the regional and district nutrition focal points in the management of the CMAM programme (data management, supply chain management and formative supervision) was strengthened. A training was carried out in the eight regions of the country. This should improve the reliability and adequate analysis of nutritional data as well as improve the management of supplies at health district level.

OUTCOME 4 By the end of 2019, the barriers to school attendance for children aged 3-15, particularly girls and the most disadvantaged children, were lifted and children are able to access quality basic education and succeed at school.

Analytical Statement of Progress:

While the Government of Mali allocated a considerable amount of its resources to Education (on average 25 per cent of the national budget, 2005 – 2010), the performance of the sector remains weak and indicators started to decrease before the recent crisis (2011). Inefficiency in the Malian education system was attributed to (1) weak coordination mechanisms and information systems, (2) the absence of an accountability framework, and (3) poor management of human, material and financial resources, particularly at the decentralized levels. In addition, the education sector is situated within a context of high demographic growth rates (3.6 per cent), with a significant population under 24 years old (> 60 per cent). The National Strategic Education Sector Plan reached its end of cycle in a post-crisis context, leaving the sector with transitional policy dialogue instruments (Transitional Education Sector Plan, 2014 – 2016). The preparation process for a new Education Sector Plan (“*Programme Décennal de l’Education*”, PRODEC II, 2017 - 2026), including the evaluation of the PRODEC I, is underway. Analytical studies on different thematic areas are being finalized within 2015, while the development of contents will embark from early 2016. UNICEF Mali played an instrumental role in such a preparation being the agency who is carrying on the highest number of studies: ECD cost effectiveness, institutional and political bottlenecks to girls’ education, out of school children, conflict and disaster risk analysis and Teacher’s professionalization. The above studies are all done and will be integrated in the sectoral diagnostic analysis for the next ten-year sector plan.

As a result of UNICEF Mali advocacy, education was prioritized on the humanitarian agenda facilitating access to education for 3,300 students in Kidal where schools had not been formally opened since 2012 and the reopening of 172 schools in Mopti, Gao and Tombouctou. Such activities are part of a broader campaign “Every Child Counts” launched through global media in December 2015.

In 2015, UNICEF Mali’s work in quality education primarily focused on strengthening decentralized capacity of key actors. UNICEF Mali in partnership with key INGO’s and local government actors facilitated training to members from 550 School Management Committees in order to strengthen school level monitoring, planning and management of funds with aims to improve access to quality school environments. UNICEF Mali initiated work to reinforce accountability of the Pedagogical Centres (*Centres d’ Animation Pedagogue*) of targeted school districts (*Académies d’enseignements*) CAP in the monitoring of key education indicators (such as school enrolment, attendance, WASH structures, etc.) in order to improve decentralized education planning as an aims to increase access to quality education environments. UNICEF Mali’s advocacy provided strategic direction for addressing the quality education component of the RAWP with the initiation of preparatory activities for the development of national quality education standards for Mali in 2016. UNICEF Mali focused on quality education for early grades started a work on the Early Learning Development standards were formulated thanks to a consultative process jointly lead with the MOE.

The main achievement concerning education access was the finalization and validation of the out of school children study. The study report provides recommendations that will be utilized to strengthen the national strategy to address school exclusion and will provide evidence to shape the next ten-year education plan under preparation. Such a study triggered the establishment of regional coordination mechanism to tackle the OOSC phenomenon. UNICEF Mali continuous advocacy work for girls’ education was finally recognized by international stakeholders that held the annual meeting of the global advisory committee of the United National Girls Education Initiative in Bamako in November 2015. The meeting allowed UNICEF Mali and its partners to advocate and ask for fund mobilization to 40 international participants representing donors and cooperation agencies.

The peace building education intervention represented an important domain within the education emergency programme. The intervention complemented the emergency response especially in the North where enhanced inter-community dialogues for conflict resolution strongly contributed to re-open schools and engage the participation of more than 10,000 children in peace building activities. In order to prevent schools against EVD, UNICEF Mali's intersectoral programming (WASH and C4D), provided technical support to the MoE in the elaboration and implementation of its national preparedness and response strategy linked to EVD.

OUTPUT 1 By the end of 2019, the education system has an operational sector program based on equity, inclusion, analysis and risk management.

Analytical Statement of Progress:

During 2015, UNICEF Mali's upstream work contributed to strengthening the MoE capacity in sectoral planning, coordination, policy development, as well as improving decentralized monitoring mechanisms, both at national and decentralized levels.

UNICEF Mali, in collaboration with Technical and Financial Partners, continued supporting the MoE in the implementation of its Transitional Sector Plan (2014-016), focusing on reducing bottlenecks and improving access to quality education, including in humanitarian situations. In addition, UNICEF Mali played a key role in assisting the MoE in its preparation for the upcoming Education Sector Plan (PRODEC II). UNICEF Mali provided technical support to the MoE to prepare the application requesting the Global Partnership of Education (GPE) funds for sector planning, for which UNICEF Mali was identified as the managing entity. UNICEF Mali's contribution was instrumental in the generation of knowledge and data on key issues, aiming to feed into the PRODEC II. UNICEF Mali led, co-led or technically contributed to the finalization of the following thematic studies on (1) Institutional and political bottlenecks to Girls' Education (UNICEF Mali) and (2) Teacher's professionalization (UNESCO and UNICEF Mali), and (3) a cost-benefit analysis of the preschool system (UNICEF Mali). The studies (4) Out of School Children (UNICEF Mali) and (5) Conflict and Disaster Risk analysis (USAID and UNICEF Mali) were finalized and will be published in 2016.

UNICEF Mali was instrumental in regular coordination mechanisms such as the MoE-led Partnership Development Group (*cadre partenarial*) and the Local Education Group. UNICEF Mali played a key role in advocating for the re-vitalization of the following thematic working groups: (1) Quality Education (2) Professional Education, and (3) Governance. Strengthened technical support led to enhanced capacity of Government counterparts in the coordination of Girls' Education (UNGEI) and ECD platforms, both at national and decentralized levels.

High level institutional advocacy dialogue resulted in the inclusion of Mali in the global UNGEI network that was reached during the annual meeting of the UNGEI global advisory committee that was held in Bamako in November 2015. UNICEF Mali jointly developed a strategic guidance note on the situation of Out of School Children and initiated dialogues for elaborating national Early Learning Development Standards. Both initiatives will be key for policy development and preparation for PRODEC II in 2016.

UNICEF Mali, jointly with local counterparts, elaborated orientation documents and harmonized data collection, analysis tools and micro plans for the Monitoring for Equity Results (MoRES) approach, aiming at enhanced cross-sectoral monitoring based on equity results at local levels.

OUTPUT 2 By the end of 2019, non - out of school children benefit from integration opportunities in formal education or literacy opportunities / training.

Analytical Statement of Progress:

In 2015, UNICEF Mali technical and financial assistance contributed to the MoE Out of School Children (OOSC) strategy by promoting the value of education, addressing inequalities in access to education as well as endorsing strategies that improve retention and offer alternative pathways to education. UNICEF Mali conducted a study on the overall OOSC situation in Mali that was validated in December 2015. The study provides contextualized strategies for addressing regional bottlenecks preventing access to education. This study will be the basis of will complement the MoE national OOSC strategy to address the needs of about 1,500,000 OOSC (7-15 year olds).

In order to enhance the perception of the value of Education among children, families and communities, UNICEF Mali's Communication for Development approach raised awareness through advocacy campaigns carried out via media and community level debates, aiming at changing attitudes and behaviour. UNICEF Mali's contribution to the roll-out of the United Nations' Girls' Education Initiative (UNGEI) action plan was pivotal in addressing the considerable disadvantage of girls' access to education. In collaboration with the MoE, UNICEF Mali, produced a study on the "institutional and political bottlenecks negatively impacting girls' education", where UNGEI's coordination mechanism was highlighted to be able to fill some important gaps by carrying out joint reflections on the challenges of girls' education, in particular through the sharing of promising experiences. 9,585 young girls in Sikasso, Ségou and Mopti benefitted from life skills based education empowering them with increased competencies. UNICEF Mali continued to work on the establishment of referral and prevention mechanisms in 104 schools in order to better detect and respond to GBV.

UNICEF Mali's strategy focused on supply side strengthening at school-level in order to ensure that OOSC who were enrolled in school were encouraged to remain in school. As a result, 131 villages in Sikasso Ségou and Mopti put in place strategic plans to promote the integration of OOSC into the education systems. As a result of UNICEF Mali's technical and financial support, 131 schools in Sikasso, Ségou and Mopti adopted Child and Girl Friendly School Standards. UNICEF Mali financed the establishment of region coordination mechanisms for planning ad hoc operational plans to address specific OOSC issues.

UNICEF Mali contributed to evidence-building on the situation of OOSC. UNICEF Mali jointly carried out an evaluation of the MoE's emergency accelerated and alternative education programme. This evaluation highlighted that the accelerated learning programme made important contributions to increasing access to education. However, children completing the programme still demonstrated low literacy and math skills (although not much lower than children attending formal education system).

Fund mobilization represented an important constraint specifically for the southern and central regions. So far the interest of donors was focused on the crisis-affected region, though the highest number of OOSC do not reside there.

OUTPUT 3.By the end of 2019, children - especially in the regions of Mopti and Sikasso - completing a quality basic education

Analytical Statement of Progress:

In order to address the challenges of quality education service delivery, UNICEF Mali provided support to the MoE by revitalizing the Quality Education thematic group in the national coordination platform, initiating preparations for developing national quality standards and reinforcing the competencies of stakeholders' at decentralized levels in order to promote quality environments in priority regions.

UNICEF Mali jointly with the MoE recruited a team of consultants to take stock of experiences and projects to improve quality of education (in 2016) to support the MoE in defining common harmonized education quality standards in Mali.

In order to address school management committees (SMC) on the quality of learning environment in schools, in close collaboration with the MoE (CADDE-the decentralization support unit of the MoE), UNICEF Mali supported the capacity development of 550 SMC in the regions of Mopti, Sikasso and Kayes to improve mobilization and budget management of school resources, as well as increase access to quality learning environments.

UNICEF Mali in close collaboration with UNESCO, contributed to documenting the status of quality educational delivery. The results of a joint study on the situation of teachers (UNESCO and UNICEF Mali, 2015) indicated the urgency to address issues related to the low teacher quality.

Nonetheless, UNICEF Mali recognized the importance of school readiness as precursor to retention and learning achievement in the primary education system. UNICEF Mali established ECD coordination mechanisms in each region to ensure entry into primary school at the correct age. UNICEF Mali continued to support the MoE's roll-out of a holistic Care for Child Development (CCD) package in the regions of Timbuktu, Mopti, Segou, Sikasso and the District of Bamako. This included cognitive and social development activities for malnourished children, parental education and support to existing community-based pre-school and nutritional rehabilitation centres on basic early learning pedagogy. As a result of these combined efforts, 30 stimulation centres are functional, 53,764 parents increased awareness on improved early childhood care and development and 986 (three to four year olds) children accessed new pre-school centres created by UNICEF Mali and partners. Access to early learning was strengthened for 20,250 younger children through the provision of ECD kits and activity books. Furthermore, UNICEF Mali completed the Early Learning Development Standards study and a cost-effectiveness analysis related to preschool services which will contribute to the development the next education sector plan and specifically to a better positioning of the ECD sector.

OUTPUT 4 In emergency situations , girls and boys have access to safe quality education and benefit from policies and practices in education for peace to accelerate the transition to development .

Analytical Statement of Progress:

UNICEF Mali continued supporting the MoE in its effort to provide access to quality education for 35,638 crisis-affected boys and girls, particularly in the North (Gao, Kidal, Timbuktu) and Centres (Mopti, Segou) by strengthening the education coordination of the humanitarian response and through direct interventions to ensure access to quality education in safe and protective learning environments. The strategic partnership between UNICEF Mali and UNESCO resulted in evidence generation from the completed study on Conflict and Disaster Risk Reduction that will inform PRODEC II.

As a result of strengthened cluster coordination, sectorial strategy elaborated for all hard to reach communities affected by the security crisis provided the foundation for UNICEF Mali's "Every Child Counts Strategy" targeting 100,000 conflict affected children between 2015- 2017. Education in emergencies was successfully integrated in subnational coordination mechanisms in Mopti and Ségou replacing existing sub-clusters.

The number of closed schools reduced from 454 to 282. UNICEF Mali's well-targeted communication and advocacy campaign and community dialogue sessions allowed communities to directly support the re-opening of schools. As a result of UNICEF Mali advocacy, education was prioritized on the humanitarian agenda facilitating access to education for 3,300 students in Kidal, where schools not been formally opened since 2012. A total of 11,453 students and 235 teacher kits were distributed to strengthen education access and provide basic learning conditions. The peace building education programme thus far included 3,639 out-of-school children (1,681 girls and 1,958 boys) in the accelerated learning programme in Gao and Timbuktu. The project enhanced inter-community dialogues for conflict resolution with the aim to reopen schools, and engage the participation of more than 10,000 children in peace building activities.

During the first half of 2015, UNICEF Mali's intersectoral programming (WASH and C4D), provided technical support to the MoE in the elaboration and implementation of its national preparedness and response strategy linked to EVD. A total of 212 pedagogic advisors and 6,116 school directors and teachers in the affected zones of Bamako, Kayes, Koulikoro and Sikasso were trained on EVD prevention, and more than 10,000 schools received the teaching materials such as model lesson guides, posters and pictorial booklets. An innovative mobile data collection survey conducted by UNICEF Mali (2015) with a sampling of 2,341 people in the most vulnerable areas, revealed the strengths and challenges in terms of acquired knowledge of children on the key prevention messages, allowing to adjust the implementation strategy in the mid-term.

OUTCOME 5 By 2019, children, especially girls, are better protected against violence, abuse and exploitation.

Analytical Statement of Progress:

UNICEF Mali and the Government of Mali engaged in joint efforts to improve national legislation to meet international standards in line with the provisions of the CRC. UNICEF Mali supported the finalization of the Child Protection code, which was submitted for adoption by the Government of Mali. Once adopted, this code will support advocacy for the revision of other existing legal documents such as the Code of persons and the family that are not in conformity with the Convention on the Rights of the Child (CRC) on issues such as the age of child marriage.

With UNICEF Mali support, Child Protection actors and the GoM finalized and adopted a national case management manual that will serve as reference for field staff and organization working with vulnerable children.

The review of the 2010-2014 Plan of Action to Prevent FGM/C and the elaboration and adoption of the new national action plan 2015-2019 to discourage the practice of FGM/C is a key achievement on the sector.

Community discussions to prevent FGM/C and child marriage continued in 80 localities of Mopti, GAO (Bourem) regions and in Bamako District (Commune I) by UNICEF Mali supported NGOs

and resulted in the signature of the "PACTE" (Commitment to advocate and support FGM/C abandonment) by 470 persons amongst who community leaders, health actors, religious leaders, youth and women leaders. UNICEF Mali and partners used the celebration of the African child day (16 June 2015) in presence of the President of Republic of Mali to reinforce advocacy which resulted in the public commitment of the President to actively support effort to end child marriage and improve birth registration in Mali.

UNICEF Mali worked with the GoM through the Child Protection Sub Cluster to increase capacity to prepare and respond to emergencies affecting children. Regional coordination was improved through support of regional Child Protection Sub Cluster in Miopti, Gao, and Timbuktu and extensive training of child protection response teams on Child Protection in emergencies covering priority concerns in Mali such as mine risk education, children associated by armed forces and groups, psychosocial support to affected children, MRM and information management. A total of 205 persons (26 Child Protection teams including five regional and 21 local) are now able to support the responses to and Child protection emergency, Through partner's interventions 1,306 children including 11 children formally associated with armed forces and group and 402 survivors of GBV were provided direct support including temporary care, psychosocial support, reintegration opportunities and appropriate reference. Thirty-seven CAAFAG who had been arrested for their alleged association benefited from advocacy or direct case management, resulting in the release of 33 CAAFAG from detention.

OUTPUT 1 By 2019, the policy and legislative framework for the child protection sector is harmonized and its institutional and budgetary components are reformed

Analytical Statement of Progress:

UNICEF Mali took a lead role in advocating for and supporting the Government of Mali in the harmonization of national laws with the provisions of the CRC. After adoption of the National Policy on Child Protection last year, UNICEF Mali supported the finalization of the Child Protection code which was submitted for adoption by the Government of Mali. UNICEF Mali and other child protection stakeholders are mobilized to push for the adoption of this strategic document which will open the path to the harmonization with other national legal document namely the Code of persons and the family of which some provision like the age of marriage is still not in conformity with the Convention on the Rights of the Child (CRC).

With support from UNICEF Mali and UNFPA, the Government of Mali reviewed the 2010-2014 Plan of Action to Prevent FGM/C and elaborated and adopted a new national action plan for 2015-2019 to discourage the practice of FGM/C. While advocating for consistent budget allocation to the Ministry in charge of children and women affairs, UNICEF Mali made important technical and financial contributions to ensure effective implementation of this action plan.

UNICEF Mali was a partner in working towards ending child marriage in Mali. In 2015, UNICEF Mali supported the Government of Mali in generating critical national level dialogue on the issue and taking key steps to creating a conducive policy and strategy environment. In October, UNICEF Mali accompanied the Government of Mali in launching the national African Union campaign to End Child Marriage, which was followed by the development of a national roadmap for ending child marriage and supporting a delegation from Mali to the African Union Girls' Summit in Lusaka, Zambia.

The Government of Mali in partnership with UNICEF Mali conducted a comprehensive assessment of the national system of civil registration and collection of vital statistics. The final products of this assessment are a report and budgeted national strategy. These documents

address the deficiencies in the current system and provide recommendation to improve the current legislation and its application. The official launch of the final report is expected in January of 2016.

OUTPUT 2 By 2019, the capacity of institutional and informal actors at the national, regional and local level is strengthened in terms of planning, implementing and monitoring interventions for the prevention and response to children's vulnerabilities

Analytical Statement of Progress:

UNICEF Mali and IRC supported the DNPEF to harmonize and finalize a National Case management manual, which will moreover serve as reference for field staff and organization working with vulnerable children.

UNICEF Mali, in partnership with the National Directorate for Civil Registry (DNEC) and the National Department of Health (DNS), trained 1478 civil registrars and birth informants in 2015. These trainings aimed at ensuring that the birth registration and other civil registry information are collected in accordance with existing laws and procedures. Lack of knowledge of these procedures previously been identified as major impediments for a universal birth registration in Mali.

In Mopti and Sikasso Regions, UNICEF Mali supported training for those responsible for technical services at regional and local levels through training on basic concepts and tools regarding the monitoring results equity system (MoRES). This capacity development will allow better planning and monitoring of interventions of birth registration in priority areas in 2016.

OUTPUT 3 By 2019, communities in priority intervention areas adopt behaviours and practices that promote positive social norms against violence, abuse and exploitation towards children

Analytical Statement of Progress:

Efforts to prevent FGM/C and child marriage continued in 80 localities of Mopti, GAO (Bourem) regions and in Bamako District (Commune I). From January to April 2015, 60,861 persons (25,695 women; 19,243 men; 8,194 girls; 5,932 boys) participated in community discussions conducted by UNICEF Mali supported NGOs in 80 localities (59 in Mopti, 12 in Bourem and nine in Bamako District) on the abandonment of FGM/C, child marriage and other gender based violence issues. This resulted in the signature of the "PACTE" (Commitment to advocate and support FGM/C abandonment) by 470 persons amongst who community leaders, health actors, religious leaders, young and women leaders.

UNICEF Mali supported the Government of Mali to celebrate the African child day (16 June 2015), which was presided by the President of Republic of Mali who committed to actively support efforts to end child marriage and improve birth registration in Mali. UNICEF Mali supported the production of two related TV magazines and several press releases to better inform and raise awareness on child marriage and birth registration.

Critical infrastructure was destroyed or looted during the conflict in Northern Mali and the service delivery was interrupted in many areas, which prevented children from having access to birth registration services. UNICEF Mali worked to restore this crucial service by repairing centres and providing kits to birth registration centres in the regions of Timbuktu, Gao and

Ansongo. In Timbuktu UNICEF Mali's contribution for example enabled the 37 birth registration centres to reopen.

OUTPUT 4 At least 50 per cent of children affected by humanitarian emergencies benefit from protection and reintegration measures

Analytical Statement of Progress:

UNICEF Mali reinforced capacity and strategic partnership in preparedness and response to emergencies affecting children while at the same time increasing direct support to children affected by the crisis in Mali specifically the northern regions. In collaboration with the Malian Government and other child protection stakeholders, UNICEF Mali reinforced the Child Protection Sub-Cluster at regional level and improved functioning and capacity of both coordination mechanisms and sub-cluster members. Through the Child Sub-Cluster, members benefited from intensive training sessions on Child Protection in emergencies covering priority concerns in Mali, such as Mine risk education, Children associated with armed forces and groups, Psychosocial support, MRM and Information management. The national capacity to prevent and respond to emergencies affecting children is now increased through 26 Child Protection teams (five at regional level and 21 at local for a total of 205 persons) ready to be deployed in case of any emergency.

The improvement in security conditions allowed UNICEF Mali and partners to intensify awareness on Mine Risk Education and reach 379,595 persons at risk including returnees and displaced and nomadic populations and to provide support to 42 victims in Gao and Timbuktu.

Through partnership with SwissContact and the Norwegian Refugee Council, UNICEF Mali supported access to education, economic reintegration opportunities and psychosocial support to 1306 vulnerable children at risk of recruitment including eight released from armed groups already reunified with their families

OUTCOME 6 By 2019, national and sub-national social policies are more inclusive and equitable, promoting the resilience of families and vulnerable communities.

Analytical Statement of Progress:

During 2015, the ministry in charge of social protection, with the support of UNICEF Mali and other partners, made an important step for the validation of the social protection policy document. The social protection policy document, validated by the technical committee during the second semester of 2015, was submitted to the Government for final endorsement. The implementation of the social protection strategies defined in this policy document will be materialized through the action plan document that was being updated by a team of national consultants.

The validation of the updated social protection action plan is scheduled for the first quarter of 2016. The implementation of this social protection action plan will reinforce the effectiveness of the social protection coordination mechanism from the national up to regional level. It will improve the resource mobilization capacity of the ministry for the implementation of social protection actions.

UNICEF Mali supported the organization of social protection training sessions at the regional and local level. These trainings sessions planned by the ministry in charge of social protection

targeted the governmental and civil society staff involved in the implementation of social protection activities. The training in Kayes targeted the staff from the 3 regions of Koulikoro, Sikasso and Kayes while the training in SIKASSO targeted staff from Bamako district and Sikasso region. This is intended to strengthen the implementation of the national safety net and cash transfer programme which should benefit the vulnerable and poor families to strengthen their resilience capacity.

The implementation process of the social protection single registry progressed this year, with the establishment of the social protection single registry piloting committee. The harmonization of partners and Government's views regarding the scope of the social protection's single register is a key recommendation of the National Social Protection Conference, organized in October 2015 by the Government of Mali, with the support of the World Bank, UNICEF, ECHO, WFP, Swedish Cooperation and other partners.

As part of the implementation of the national safety nets programme, UNICEF Mali provided technical support for the implementation of the education package which is complementary package for the cash transfer project financed by the World Bank. The C4D department played key role in training the regional and local trainers who are in charge of disseminating this cash transfer's education package.

UNICEF Mali provided technical support for reinforcing the National Agency for Medical Assistance (ANAM) for the identification and enrolment of vulnerable persons to be considered for the national free health care scheme. UNICEF Mali provided support to the ODHD (sustainable human development and poverty Observatory) to undertake refined analysis related to the identification of the complementary basic needs in the 166 poorest municipalities of Mali.

The University of Tulane, in partnership with the University of Mali, was conducting a study on the Resilient Malian Child. The final report and results dissemination are expected for the first quarter of 2016.

OUTPUT 1 By 2019, the poorest families and children are regularly identified and monitored at the national, regional and local level, and the causes of their deprivation identified and analysed.

Analytical Statement of Progress:

Under the leadership of the Social Protection department (DNPSES), with the support of UNICEF Mali, the World Bank, the Swedish Cooperation and other partners, efforts were made to develop a harmonized targeting approach of beneficiaries. This will be an important as a step to supporting the establishment of a national single registry for social protection beneficiaries. The final report was validated, but still needs some analytical improvements.

The operationalization of the single registry will have a positive impact in improving the monitoring of social protection programmes.

The capacity of the Government in social protection structures facilitated a better understand the challenges faced by vulnerable households and properly conduct studies and ongoing child poverty analyses.

UNICEF Mali contributed financially and technically to the capacity building in social protection of the regional actors, and the analysis related to the estimation of the additional basic needs in the 166 poorest communes. UNICEF Mali provided technical support for reinforcing the National

Agency for Medical Assistance (ANAM) for the identification and enrolment of vulnerable persons to be considered for the national free health care scheme.

OUTPUT 2 By 2019, a larger number of vulnerable families benefit from social protection programmes

Analytical Statement of Progress:

Following political and security events, the Government implemented a national social safety programme net to support vulnerable and poor households, with the financial support from the World Bank. The project will be implemented during five years, and each targeted household will receive 30,000 CFA each quarter for three years. UNICEF Mali and other partners are playing key roles in the implementation of the education package accompanying the cash transfer component.

UNICEF Mali funded a pilot cash transfer project in Mopti, implemented by the regional department in charge of social protection, 1200 households of the communities of Bandiagara and Djenné. Each household received a monetary transfer to a maximum of 60,000 CFA FRANCS. This money allowed beneficiaries to be enhance their resilience and respond to basic needs such as food and health care.

It reached 30,000 households by the end of December 2015, and the remaining 40,000 reached during the first quarter of 2016. This valuable Governmental initiative allowed households to access to free of charge medical healthcare, including their dependent family members for up to three years. They are registered in the national single register for possible other supports from other partners.

OUTPUT 3 By 2019, policymakers and public and private actors increased the percentage of resources allocated to social sectors and social protection programmes

Analytical Statement of Progress:

To better alleviate the consequences of crisis, the Government of Mali strengthened its decentralization policy, with emphasis on regionalization that will allow more involvement of communities in decision making. This will facilitate the implementation and the transfer of resources from the national to the decentralized level.

In order to reinforce the involvement of all stakeholders, the social inclusion section supported the revitalization of regional and local coordination mechanisms and advocate for the allocation of resources. This included the capacity building of local leaders in term of planning and activities prioritization.

OUTCOME 7 Policymakers access to and use regularly updated data and analyses, and vulnerable populations access to quality information and adopt behaviours favourable to the rights of the child.

Analytical Statement of Progress:

This component consisted of four sub-components that will maximize the impact of interventions for children and women by reinforcing the synergy and linkages between the programme's various components.

In the first year of the new CP cycle, UNICEF Mali emphasized its community-based programming approach in the regions of Mopti and Sikasso, where the MoRES approach is

planned in eight health districts with the support of both central Government and local authorities. In the two districts where the MoRES approach was implemented, all components of the CP offered integrated service packages in communities and institutions (e.g. schools and health centres). These interventions were guided by a participatory approach to strengthen the capacity of rights holders and duty bearers while working for social change, local ownership and equity-based programming.

The C4D programme component concentrated its programming and interventions on selected key priorities areas: the prevention of chronic malnutrition and the promotion of IYCF, the promotion of essential family practices and the use of health services; the promotion of favourable social norms on FGM, child marriage, child labour, education in nomadic communities.

A series of analyses of behavioural determinants and circle of influence was made in the areas of nutrition and birth registration. These analyses made it possible to produce messages and to identify appropriate channels for dissemination. The C4D Programme triggered community engagement in order to better tackle socio-cultural practices based on social norms analysis. At the upstream level, and with other UN agencies, UNICEF Mali supported the Ministry of Communication to adopt and operationalize the national policy.

The Emergency programme component continued its support and coordination in the response to on-going humanitarian crisis in the North, to the EVD epidemics. The Programme component contributed to the integration of emergency into programme proposals and interventions as well. In addition, the programme sections and clusters contributed to the assessment of national capacity of the disaster risk reduction (CADRI). In an effort to sustain Government capacity to plan and respond to crisis, the programme component launched the rapid alert system for flood, piloted in Mopti with collaboration of the Social Policy section.

With support from the Planning, Monitoring and Evaluation Programme, UNICEF Mali stepped up efforts to increase its effectiveness through the production of more evidence to support programme's implementation, and strategic decision making as well. A MICS survey and a SMART survey were successfully conducted, and will help to improve the evidence basis for programming in most UNICEF Mali priority sector.

The 2015 IMEP was developed and is structured around seven evaluations, five surveys and eight studies. Three evaluations are completed: (a) Impact Evaluation of Dubai Cares WASH in Schools initiative in Mali; (b) Sustainability Assessment of water and sanitation services supported by UNICEF Mali in Mali; (c) Evaluation of the effectiveness of the physiotherapy stimulation of children with severe acute malnutrition. Both evaluations provided evidence for the improvement in the WASH in schools programming, and to in-patient care treatment of severe acute malnutrition.

In 2015, the UNICEF Mali office was awarded the prize of Best of UNICEF Research (BOUR 2015) through the outstanding "Impact evaluation on Community Led Total Sanitation Programme in Mali". In recognition of this performance, the CO is closely working with the Government and partners to increase the utilization of evaluation, and to promote a vivid culture of evaluation in collaboration with a leading local partner (Association for the Promotion of Evaluation in Mali).

While the rating of evaluations commissioned by the Mali CO was satisfactory so far, there is a need to increase the performance in timely developing and implementing management

response plan to evaluations. In addition, the CO understands well the need to improve the governance, the timing and costing of future evaluations.

Despite these results, many constraints were faced during the reporting period, leading to delay in activities' implementation. They can be summarized in highly competing priorities in the CO (new HACT and PCA processes, MoRES operationalization, launching of the new CP, etc.), delays in the signature of 2015 AWP, and limited national counterparts involvement due mainly to CT/CSLP staff turnover.

OUTPUT 1 Communities living in disadvantaged areas of Mali adopt priority behaviours for the survival, protection and development of children, utilize basic social services and equitably promote inter-community tolerance and social change

Analytical Statement of Progress:

The sector consultation sessions identified priority areas with strong implications for C4D: the prevention of chronic malnutrition and the promotion of IYCF, promotion of essential family practices and the use of health services; female circumcision, early marriage, the school's negative image perceived as a risk, child labour, and the schooling of children in nomadic groups. Malian Government, NGOs and UNICEF Mali worked together launched a campaign to provide quality education to 100,000 boys and girls in Kidal, Gao, Timbuktu, Mopti and Segou, following successful efforts to re-open 166 schools. 330 Community watch committees (CVV) were set up in Mali to monitor socio-cultural practices for the prevention of EVD disease in villages bordering Guinea. The CVV is composed of local residents, credible and ready to serve their community. They had between 10 and 12 members: the village chief (as chair), two councillors, one youth leader, one women's leader, two community relays, two religious leaders (Muslim and/or Christian), one traditional healer and one griot (a community member whose function is to keep an oral history of the tribe or village and to entertain with stories, poems, songs, dances).

The CVV is built around the village chief, which is a token of acceptance of and support to the promotion of positive practices in the field of health. It conducts home visits to households in order to convey preventive EVD messages in public places such as churches and mosques, ensures hand-washing stations are available in houses, watches over the good hygiene practices as well as behaviours and attitudes of communities in terms of prevention and protection EVD. Such approach helped strengthen EVD prevention in villages bordering Guinea.

A series of analyses of behavioural determinants and circle of influence was made in the areas of nutrition and birth registration. These analyses made it possible to produce messages and to identify appropriate channels for dissemination. Thus, 5187 Community Leaders of 24 districts of Sikasso, Mopti, Kayes, Gao, Timbuktu, Kidal, Koulikoro and Bamako promoted the six EFP through dialogue for social change. In 59 districts except Kidal child immunization was promoted. Dialogue with partners of C4D confirmed the analysis and observations of annual reviews of 2012 and 2013 of the C4D component of the Mali-UNICEF Mali cooperation programme: the lack of qualified resources or expertise in C4D, including at the frontline providers working with the most vulnerable or marginalized groups, remains the main bottleneck. In response to this, UNICEF Mali supported the capacity building of 50 national and regional level managers in planning, monitoring and evaluation and participatory approach. The absence of a national communication for development policy (PNCD) which is a reference framework for C4D is a bottleneck to the coordination of interventions. With UN agencies

technical and UNICEF Mali technical and financial supports, the Ministry of Communication makes efforts to adopt and operationalize the national policy.

OUTPUT 2 By 2019, policymakers and actors involved in advocacy, programme planning and management, and policy access to and use disaggregated data (by gender, geography and equity) and findings from studies and evaluations

Analytical Statement of Progress:

As part of the CPD 2015-2019, the Planning, Monitoring and Evaluation programme component aims to promote evaluation and to support the implementation of Mali Statistics Master Plan (SDS) through regular production and dissemination of disaggregated statistics for the development of equitable public policies. In addition, the programme component aims to strengthen the CO's programming and performance management.

In the first year of the new CP cycle, UNICEF Mali stepped up efforts to increase its effectiveness through the production of more evidence to support programme's implementation, and strategic decision making as well.

With support from UNICEF Mali, Mali conducted a MICS survey that was the first post-crisis nation-wide household survey. In addition, the CO partnered with John Hopkins University to conduct the Verbal and Social Autopsy (VASA) study on the causes of deaths of children under five; the VASA study will provide the Government of Mali and partners with direct estimates of the causes and determinants of neonatal and child deaths to better guide effective policies and interventions for reducing child mortality in Mali (SDG Target 3.2). In addition, support from UNICEF Mali sustained the nutrition surveillance system through the conduct of the 2015 SMART survey.

As a response to weakness in the national statistical capacity, UNICEF Mali supported the Malikunafoni (DevInfo) which reached a maturity point with existing and functional regional databases and technical capacity in place; and supported the production of statistical yearbooks in child protection, WASH and Education sectors.

The 2015 IMEP was developed and structured around seven evaluations, five surveys and eight studies. As of December 2015, two activities were considered for future plan and one study was discontinued. A total of 70 per cent of evaluations were completed or on track; 60 per cent of surveys completed and 40 per cent on track; 50 per cent of studies completed or on track. Three evaluations are completed: (a) Impact Evaluation of Dubai Cares WASH in Schools initiative in Mali; (b) Sustainability Assessment of water and sanitation services supported by UNICEF Mali in Mali; (c) Evaluation of the effectiveness of the physiotherapy stimulation of children with severe acute malnutrition. Both evaluations provided evidence for the improvement in the WASH in schools programming, and to in-patient care treatment of SAM.

In 2015, the Mali UNICEF office was awarded the prize of Best of UNICEF Research (BOUR 2015) through the outstanding "Impact evaluation on Community Led Total Sanitation Programme in Mali".

From Geros Assessment 100 per cent of completed evaluations were rated satisfactory.

In order to improve the risk informed decision making and programming, the CO conducted

ERM/RCSA exercises. In addition, the programme component guided the CO in meeting key targets in the implementation of HACT policy, including a macro-assessment of public finance, a micro-assessment of more than 70 implementing partners, and a roll out of HACT assurance plan.

The major constraints affecting the evaluation function within the CO ranged from Governance, Costing and Timing, Management Response Plan to Utilization of findings.

OUTPUT 3 The Government sets up systems to prevent and respond to risk- sensitive crises and communities strengthen their resilience to humanitarian crises

Analytical Statement of Progress:

The internal and external coordination for the emergency response was ensured for the two emergency cases in the reporting period. In May, following the fighting in the north, the Emergency section ensured that appropriate WASH and NFI were distributed to the displaced populations. To accompany the distribution, hygiene promotion was conducted. The Emergency section supported the coordination and ensured that education activities are integrated in the emergency response. The emergency response was coordinated and appropriate action was delivered for the flood cases in August. As the lessons learned, the team recognized a need of putting Stand-by PCA in place, which would allow rapid response, especially in the northern regions.

The EVD prevention activities were conducted. The activities include the procurement of solar energy systems for 84 health centres, as well as the capacity building of 68 community health agents and 194 community relays for surveillance and prevention of EVD, at the borders with Guinea. The sensitization was done at school on the sustainable hygiene measures, reaching approximately 20,000 children and 100 school directors from 100 schools. The activities resulted in strengthening School Management Committees (SMC) in 319 schools in Sikasso and 50 schools in Kayes, with fourteen members by each SMC. In addition, 40 health centres received a full WASH minimum package, and hygiene promotion sessions held there reached approximately 5,200 beneficiaries; 180 medical staff from these centres were trained in hygiene promotion techniques, as well as Infection Prevention and Control protocols.

The Emergency section led the programme sections and clusters, and contributed to the CADRI mission, specifically the assessment of national capacity of the disaster risk reduction.

To support the Government in developing the rapid alert system for flood, the Emergency section, in collaboration with the Social Policy section, launched a pilot project in Mopti region. The project was carried out by the General Directorate of Civil Protection with involvement of all the other stakeholders at regional and national level. The project entails the innovative approach of using the SMS, allowing the decision-makers at regional level to instantly receive the essential information reported by the communities. All the tools related to this innovation were finalized and users were trained on the system; however tools could not be tested in real conditions because of the end of the contract after the rainy season.

To strengthen the coordination capacity of the Ministry of Humanitarian Action, UNICEF Mali provided HR support. While this support was since 2013, there was a challenge in guiding the ministry to optimize this resource and expected results, due to the conflict of priorities within the ministry. As a consequence, a mechanism of inter-sectoral emergency coordination not yet established.

OUTPUT 4 By the end of 2019, innovative mechanisms for communication, advocacy and partnerships in favour of children's rights are established - with the participation of national actors, institutions, the private sector, donors and National Committees (Natcoms) - to support the implementation of programming priorities.

Analytical Statement of Progress:

The cross-cutting External Communication and Partnerships Programme managed to be right on track relating to its goals, despite delays in the signature and implementation of the Annual Work Plan. A Communication Strategy and a Resource and Partnerships Strategies were fully developed and are currently in the operationalization phase. These two strategies will allow the Mali CO to mobilize key stake holders, media and public opinion in order to contribute to the mobilisation of the financial resources needed, leverage strategic partnerships; however the actual implementation of operational plans are still a major bottleneck that necessitates immediate attention, in order to achieve projected results.

In regard to the National Plan to mobilize partners and financial resources, there's work to be done in terms of identifying and mobilizing potential partners and/or donors to engage in favour of women and children. Major steps took place in terms of Communication, with the development of a Communication Bi-Annual work plan in partnership with Ministry of Communication and in line with Global, Regional and CO Priorities and the Humanitarian Response. The Programme was able to quickly set itself in track by bringing together the necessary financial and Human resources needed, resulting in a substantial increase in terms of visibility, media relations and advocacy for children's rights.

OUTCOME 8 Effective support to the Management Programme areas, Operations, Field Office and Security

Analytical Statement of Progress:

Compared to 2014, apart from Procurement Services, all types of procurement reduced in line with the reduction of the CO total budget allocation.

The activity of planning procurement throughout the year remains an issue where the execution rate of the 2015 Supply Plan was uneven (eight per cent end of March, 19 per cent end of June, 61 per cent end of September).

In 2015, UNICEF Mali provided "last resort" support to the Government by storing on its behalf 430,000 doses of vaccines (valued at US\$ 1,500,000) following the arrival of a large quantity that the partner cold chain capacity could not handle.

Decentralisation: First year of implementation of a fully decentralized CO. Several internal SOPs, tools and mechanisms were developed to ensure efficiency, effectiveness and coherence of programmatic results at field level. Major financial and technical investments were made by the CO to equip field offices to better deliver programmes, in terms of identification of appropriate staff, trainings, maintenance of offices and enhancement of security measures.

OUTPUT 1 Effective Management of supply

Analytical Statement of Progress:

The Supply and Logistics primary achievement was to consolidate the processes started in 2014 to ensure the sustainability of the ways of working between Supply and Programmes and increase level of efficiency and effectiveness. Achievements included:

- Closing all recommendations from Audit 2014
- Finalizing Supply Plan and monitoring its execution rate. Supply prepared Monthly Dashboards, presented to CMT and PMT to support the sections planning their procurement and their stock throughout the year
- Improve VISION utilization to reduce Open Items with a training to Programmes Assistants
- Reduce the time between SO creation and final delivery to UNICEF Warehouse or to Implementing partner. Delays to complete local procurement process were reduced on average by 12 days compared to 2014 and by 23 days compared to 2013. This was achieved through a better utilization of VISION but with the signature of new LTA.

Major achievements were realized at Logistics and Warehouse level. Financial savings can be reported as well as efficient results in programmes supplies storage:

- Two full physical inventories were done as planned and the December inventory showed a financial difference of 0 per cent (the target difference set for 2015 was three per cent).
- In terms of operating savings: storage costs were reduced by \$ 30,000 and transit costs reduced by \$ 28 300. Both savings were achieved by competitive bidding.
- MCO reported 0 per cent of Good in Transit superior to 90 days (UNICEF benchmark is 100 days)
- No items expired on stock with advance warning to the relevant section. An economy of US\$ 50,900 for UNICEF (IEHK kits and Therapeutic Milk) was achieved. The IEHK was distributed nationally and the milk was re-exported to other COs in urgent need of this commodity.

The final achievement to report was the strengthening of partners' (private and governmental) supply chain:

- UNICEF Mali contracted a waste management company to clean the partner's infrastructure and increase their storage capacity.
- Supply and Logistics provided a last resort support to the MoH by storing vaccines on their behalf, saving US\$ 1,500,000 of vaccines
- Capacity building of private transport and warehousing contracts ensure programmes supplies are stored, distributed and managed adequately with focus on accountability

The main internal constraint was the Supply Plan execution rate: it remained low until September where offshore supplies were requested and are planned to arrive in 2016. This execution rate as a direct incidence on the storage capacity that can't be reduced without a better visibility of future procurement. To overcome this constraint, further emphasis will be needed on this activity.

The main external constraint is the Government's lack of autonomy to undertake its own storage and distribution. This issue would need a long term strategy to overcome.

OUTPUT 2 Effective support to the management of Programme, Field Office, Operations and Security

Analytical Statement of Progress:

Throughout 2015, Operational support to programme delivery (i.e. Supply procurement and logistics, zone office-related operating costs) and Operations functions (administration, asset and financial management, information technology activities and human resource management) supported efficiently the CP implementation. Further investments in establishment and functionalization of Zonal Offices were made including definition of financial mechanisms and how OR resources will be used for the new structures. Activities were allocated on priority to fully-funded core functions in Zonal Offices on Operational with specific attention of security management roles for the North.

OUTCOME 9 Special Purpose

Analytical Statement of Progress:

MOSS for Mali keeps changing depending on the existing security situation. UNICEF needs to continuously keep upgrading the security of staff and assets in keeping with the changing MOSS Recommendations.

OUTPUT 1 Premises and Security

Analytical Statement of Progress:

The CO premise was guarded by a renowned security company. The day guards directed UNICEF guests, and controlled of exit and entry of vehicles into the basement. The premise was controlled through electronic access control, augmented by a personal identification system. The premise was monitored by HD video camera, supported by an access management system.

Fire extinguishers were strategically placed within the building for ease of application. Every room was equipped with smoke detector to trigger alarm in the event of fire. The building was equipped with two emergency exits, if bridged the alarm system goes off. There was 24/7 power backup. There was a staircase in case the lift fails due to power outage or mechanical failure. There were first Aid and PEP kits for emergency purpose.

Activation of warden system, where staff were zoned with chief and deputy warden, were reviewed and updated. The staff list and the communication tree was regularly shared with UNDSS.

The CO regularly shared security updates received from the country security advisors with staff, to enhance their security awareness and take informed action.

All mission travel were cleared by UNDSS. With UNICEF Mali all staff completing basic and advanced security e-learning, as well as Safe and Secure Approach to Field Environment (SSAFE) training, to obtain certification for travel.

OUTCOME 10 The identity, direction and well-being of UNICEF Mali and staff are managed efficiently and effectively to enable the achievement of results for children in the country.

Analytical Statement of Progress:

Following the 2014 Audit and subsequent formulation of the recommendations, an audit action plan was developed and shared with all the CMT members. The progress of the implementation of the audit recommendations was discussed at each CMT sessions. Out of the 24 recommendations, nineteen were closed, two recommendations are on-going, and three need to be addressed by the regional office.

The Mali CO conducted an enterprise risk management (ERM) exercise in which all major operational and programmatic risks were identified and mitigation measures determined. The ERM analysis and action plan were presented at the CMT of May and validated with the participation of all staff. The ERM action plan is being implemented and regularly monitored. With the adoption of the ERM, UNICEF Mali programmes were able to implement their activities in insecure areas.

BCP was reviewed three times (January, June and November) this year due to the volatile security climate in the country. The CO reinforced its security through strengthening of control access, barriers and scan. A BCP simulation test been conducted in November and an action plan was developed to address the identified issues.

UNICEF Mali fully adopted HACT in April; 152 micro assessments were conducted by consultancy companies from May to December. Based on the results of the micro assessment, an insurance plan was developed. The implementation of HACT and the insurance plan were reviewed quarterly through CMT and corrective measures taken to strengthen the activities: micro assessment results were presented, partners audit reports were shared, spot-checks and programmatic visit issues were discussed.

OUTPUT 1 Actions related to setting the direction and governance of CP operations and office structures, including business continuity and risk management.

Analytical Statement of Progress:

In 2015, UNICEF Mali put in place an efficient ICT help desk support, providing user support to CO staff by handling requests and achieving high quality support and solution (troubleshooting user problems with ICT systems, hands on training to users to improve user capacity and enable them in efficient use of ICT resources). The ICT section provided technical assistance on cloud-based Office Automation tools (Office 365, Outlook, Lync, OneDrive, Sharepoint), and introduction to Vision training during induction of new staff, observed anomalies during operation of the ICT infrastructure and assist with suggestions for solutions.

In 2015, the ICT Section reviewed requests for user account creation, maintenance and expiration and grant user access to UNICEF systems during contract duration. The Section established a system of protection of UNICEF essential equipment, vital records and assets facilities; eliminated or mitigated the impact of disruptions on UNICEF operations. Other key achievements can be mentioned: a system of Antivirus monitoring was put in place; access restriction was applied on all MCO servers to protect data and a backup policy was put in place, an offsite backup was applied. VSAT links are monitored on a regular basis.

The ICT section created redundancy for critical core systems by introducing telecommunications back-up (mobile phone, satphone [BGAN] for data, wireless connections) and home office equipment – multi-function device and laptop equipped with local applications installed for designated staff. Staff receiving this equipment were trained on its set-up and usage.

In 2015, all 4X4 vehicles used on official missions by CO staff were MOSS-compliant. As

planned in the administration 2015 work plan, the policy to comply with the economy standard indicators of fuel consumption depending on the vehicle class, allowed throughout the year to remain within acceptable limits and therefore to save on the costs of the fuel consumed. Furthermore, the continuation and acceleration of the efforts to get the CO rid of the used and abandoned equipment and materials in the offices and in the yard seen the implementation of over 89 per cent of recommendations of the four PSB meetings organized during 2015.

OUTPUT 2 Office administration, asset and financial management activities. Stewardship of Financial Resources creates the conditions to pursue country operations.

Analytical Statement of Progress:

Tasks were fairly distributed among Finance Staff, consideration skills and capacities, to speed payment/deposit process. This allowed Finance Unit to process payment and deposit within three business days.

Bank Reconciliation and Cash Management Report were posted on a monthly basis by the Finance Assistant.

Opens Items (Travel, Deposit, DCT, GR/IR, Account Payable) were cleared throughout the year with the assistance of all Units in the CO, as well as Regional Office and DFAM.

This was made possible with the support of Senior Management by sending mails to remind or signing memos to support our daily work.

OUTPUT 3 Human resources the capacities, skills, morale and motivation to support country operations.

Analytical Statement of Progress:

In 2015, Mali CO provided mainly three key achievements in the area of human resources (HR). HR Unit fully and actively participated in new CPMP development, in support to the 2015-2019 CPD. This CPMP resulted in 194 positions for the Mali CO, among which 33 new positions were created, with 16 positions in the Bamako Office, and 17 for Zonal Offices. With regard to the global indicators on performance management, the CO came out with the rate of 99 per cent of 2014 PAS/e-PAS completed as of February 2015. Phase 1 and phase 2 of the 2015 PAS/e-PAS were completed at 70 per cent as of November 2015. The management encouraged staff to complete the mandatory trainings and the CO was able to satisfactorily implement the trainings with the rate of 80 per cent for HACT online training, 90 per cent for Ethics training and 80 per cent for Harassment training.

Following the 2014 Global Staff Survey, the Mali CO developed an action plan in response to the findings related to: Career and personal development, work – life balance and the CO working environment. This plan was developed with contribution from all staff and under the joint guidance of the local Staff Association (APUM) and the Senior Management. The plan was approved through the LSA general assembly and it is regularly followed up by the CMT. As of date most of the action points are either completed or are on-going. Of particular importance is the inclusive approach adopted by Senior Management during the development and validation of the 2015 CPMP where all staff including those in Zonal Offices were consulted and or had participated in all the steps.

The major bottleneck faced in the Human Resources area in 2015 was the difficulty to fill all staff positions agreed upon in the new CPMP. While the HR Unit was understaffed with the departure of the HR Specialist and difficulties to fill in the post, the CO faced a high staff turnover, with many staff leaving for retirement and others promoted from GS to NO positions in Zonal Offices, and from NO to IP positions in other offices. In the other hand, meeting the recruitment indicators was more challenging with factors such as difficulties to qualified candidates with emergency/non-family context of the country. In this regard, positions were re-advertised several time with the aim to attract more qualified candidates and broaden the pool of candidates.

For 2016, priority will be given to staff recruitment, in order to fill out all positions created for the new CP, and listed in the 2015 CPMP. Moreover, HR unit will ensure that right skills are identified and available in support of the achievement of programme and management results. A briefing kit is being finalized and will be used to give useful information on the CP to new staff.

OUTPUT 4 Regional HACT action plan

Analytical Statement of Progress:

UNICEF Mali fully adopted HACT in April 2015; 152 micro assessments were conducted by consultancy companies from May to December. Based on the results of the micro assessment, an insurance plan was developed. The implementation of HACT and the insurance plan were reviewed quarterly through CMT and corrective measures taken to strengthen the activities: micro assessment results were presented, partners audit reports were shared, spot-checks and programmatic visit issues were discussed. The major gains of HACT include more efficient use of resources and more effective programme management.

As lead of UNCT HACT committee, UNICEF Mali had put in place 12 LTAs for micro assessment and spot checks for all UN implementing partners. The LTAs are simplifying the tasks of agencies for HACT implementation. They contributed to significant savings as costs for spot checks and micro-assessments were shared between all agencies.

OUTCOME 11 CPs are efficiently designed, coordinated, managed and supported to meet quality programming standards in achieving results for children.

Analytical Statement of Progress:

The new 2015-2019 CPD was approved by the Board in February 2015: programme implementation started immediately afterwards, contributing to the objectives of the UNDAF Plus framework for the same period and to those of the UNICEF Mali Strategic Plan. Three main elements were taking into account since the onset of the Programme. Firstly, the transition from humanitarian action to broader developments goals to ensure a strong emergency-transition-development continuum through support to the restoration of Government authority in Northern regions and the implementation of portions of the Peace Accord (May and June 2015) related to service delivery systems. Secondly, a push towards the decentralisation of activities with the strengthening of three Zonal Offices in Gao, Mopti and Sikasso and three "antennae" in Timbuktu and Kayes: this helped us enhance the planning, the implementation and the monitoring of decentralised interventions as well as the oversight of local resources to improve the programme efficiency and effectiveness. Finally, a focus on local ownership and equity-based programming, taking into account the deprivation analysis that show that half of the poor children who suffer from at least three deprivations live in Mopti and Sikasso regions: an integrated packages of services - initially linking mainly nutrition and health - was crafted and will be rolled-out in 2016. The kick-off of MoRES in those two regions helped better

understanding the bottlenecks impeding programme integration and make programmatic adjustments through innovative solutions and more inter-sectoral work.

These efforts were challenged by a complex relationship with MINUSMA, a security situation that was deteriorating significantly despite the Peace Accord and the continued absence of Government personnel in some critical areas for programme implementation. In this regard, UNICEF Mali nomination as co-leader of the inter-agency PMT offered the Deputy Representative the arena and the gravitas to present major programmatic issues and strategic decision and helped strike an appropriate balance in terms of maintaining collaboration but keeping programmatic and operational independence so that UNICEF Mali could continue to be seen as a neutral actor. Additionally, a Programme Criticality exercise and an Enterprise Risk Management effort offered the opportunity to prioritise critical activities, while managing related risks. Finally, all programmatic sectors started to engage with community-based organisations in a more structural way: helping programme achieve difficult to reach areas, and create the basis for more sustainable interventions. The strengthening of peace-building and social cohesion at community level is resulting a key strategy to ensure programme effectiveness and efficiency in areas affected by the conflict.

To increase programme's effectiveness in producing better and more equitable results for the most disadvantaged women and children in Mali, UNICEF strengthened strategic partnerships with UN sister agencies e.g. UNDP and UNHCR with common programmes and WFP with a common framework on education; cooperation agencies such as CIDA and USAID to avoid duplication of activities in the field and create fora for discussions especially at regional level (namely in Sikasso and Mopti) and bilateral and multilaterals with thematic and non-thematic other resources for a total of 136 per cent of the overall ORR ceiling of the first year of the CPD.

OUTPUT 1 UNICEF Mali staff and partners are provided guidance, tools and resources to effectively design and manage programmes

Analytical Statement of Progress:

Programmes were coordinated this year through PMTs that were - when possible - held twice a month. "Thematic" PMTs were held several times over the course of the year, with the purpose of improving strategic coordination amongst sections: they represented an opportunity to better guide the development of work plans; share information amongst sections and facilitate cross-fertilization and avoid static programmatic silos. "Regular" PMTs were held once a month with the main objective to strengthen office governance systems through regular monitoring of key programme indicators: this ensured accountability of Deputy Representative, chief of sections and head of units and minimized risks due to inappropriate and untimely use of funds. "Regular" PMT facilitated timely and quality planning and implementation of CP and created a forum where regular updates on emerging national, regional, global corporate priorities were made. Chief of Zonal Offices were requested to participate through Skype to PMT, and a specific standing item on the agenda on relationships between Bamako and Zonal Offices was added so that the Chief of Emergency and Field Operations could highlight challenges and opportunities to facilitate the decentralisation process.

Additionally, based on 2014 SMART results and conwith the CO commitment to lower perpetually-high chronic malnutrition rates among U5 children in Mopti and Sikasso, the programme chose four districts each in Sikasso and Mopti regions where all programmes were requested to converge and implement nutrition-sensitive activities. Moreover, a consolidated package of interventions linking nutrition and health was crafted and will be rolled-

out in 2016. Finally, the launch of the implementation of the MoRES in selected districts of the Sikasso and Mopti regions created opportunity to enhance coordination between programmes and between partners usually working in silos for different sectors. In this regard, the personal engagement of the regions' governors helped with inter-sectoral discussions and collaboration.

OUTPUT 2 UNICEF Mali staff and partners are provided tools, guidance and resources for effective communication on child rights issues with stakeholders (Action related to external relations, management of partnerships with donors, and public advocacy)

Analytical Statement of Progress:

In 2015, the CO took a powerful approach to fundraising and leveraging towards partners and used the introduction of the new CPD 2015-2019 to renew commitments with donors. Through mobilizing efforts, funds for regular resources exceeded the planned amount for 2015. The CO received visits from current and new donors to visit programmes in the field and meet with staff. The CO made great efforts to advocate for the agenda of children in the framework of education for children affected by the crisis, fighting against severe and chronic malnutrition and leveraging partners for social protection.

Programmes such as Child Protection took advantage of the World Summit for Girls in London 2014 to approach donors on child protection in Mali and take the opportunity to talk about funding needs and how partners can contribute. Through this strategy and relationship building with the Resource Mobilisation Specialist, funding was negotiated through Sida and Belgium. The Education programme had interest from numerous donors to contribute in the long term, including donors such as USAID and Qatar Foundation (Educate a Child). The CO saw partnership renewals with donors who were pleased with the results from programmes such as WASH and Education (Spain, USAID, JICA, and Sida). Great efforts to ensure flexible and long term funding were made with partners which resulted in thematic contributions from Sida.

In addition to the public sector, UNICEF Mali reached out to National Committees to help fund programmes. The Country Representative and staff members visited and met with seven National Committees in Europe, Canada and the United States. Through this effort, funding was secured by the private sector in Spain for the WASH programme. In addition, the CO facilitated the field mission by the Polish National Committee with their Goodwill Ambassador, to gather material on health and education for their end of the year fundraising campaign.

As for Emergency funding, the CO mobilised 48 per cent of the planned humanitarian need for 2015. Funding for emergency was challenging for the CO and most funding went to nutrition interventions. A determined focus at the beginning of the year was placed on EVD prevention activities and donors were keen on providing this funding to ensure that Mali remains EVD free.