Executive Summary

The UN Secretary General’s (UNSG) visits to Kiribati and Solomon Islands and participation in the Pacific Leaders’ Forum in 2011 sparked great enthusiasm and commitment in the sub-region to work more closely with UN agencies and the ‘voices of the Pacific’ were heard more strongly in 2012, through active engagement of the Small Island States in major international consultations such as: the UNSG/Pacific Leaders meeting (on the sidelines of the September 2012 UNGA), Post-2015 agenda, Public Finance for Children, climate change, ‘A Promise Renewed’, as well as more active participation of young people in development debates. The Executive Board delegation’s visit and intensive engagement of partners in the finalisation of the 2013-2017 UNDAF and UNICEF multi-country programme provided opportunities for Pacific contributions and challenges to be highlighted and recognised. The depth of these engagements was strengthened by the increased availability and use of data on children and women.

The One Talk for All and engaging communities for social change initiatives and actions to mobilize national systems to meet the needs of children brought major breakthroughs. For instance, Child Protection developed the police and community facilitation packages; WASH communication was expanded in Kiribati; and the youth Pacific climate change summit was successfully held in NZ (Power Shift). In addition a communication strategy was developed with PMO and MoE in Vanuatu for roll-out of the Minimum Quality Service Standards (MQSS) and lifesaving messages were developed with the NDMO in Fiji.

A year of strategic planning and preparation for the 2013-2017 UNDAF and UNICEF multi-country programme. UNICEF supported the development of national results matrices for all 14 Pacific Island Countries – for the first time ever – fully reflecting the rights and development needs of children.

The signing of ‘A Promise Renewed’ by all 14 Ministers of Health in the Pacific provides a strong basis for strengthened cooperation in the new multi-country programme. Major progress was made in improving Birth Registration in Kiribati and Vanuatu (from 25 per cent in 2008 to 80 per cent in 2012).

Challenges to monitoring and evaluation include low capacity, both internal and external, to ensure adequate monitoring in all countries, particularly at the sub-national level. Limited human resource and institutional capacity in most Pacific island countries continued to slow progress in several key areas. UNICEF moved to strengthen its own capacity and to creatively use partnerships and networks to help bridge some of the gaps.

Partnerships with the Secretariat of the Pacific Community (SPC), the Pacific Island Forum Secretariat (PIFS), UNDP, ADB, World Bank and other agencies continued to build advocacy on the critical role of data integrity in strategic development programming and benefited from an enhanced partnership with the National Statistics Offices (NSOs) across the Pacific. UNICEF’s membership in the Brisbane Accord Group (BAG) continued to strengthen commitment to improving vital statistics including birth and death registration.

New Partnerships were established with OHCHR, UN Women and UNFPA to strengthen human rights monitoring and reporting in RMI, through co-funding of technical support.

Country Situation as Affecting Children & Women

Political environment: During 2012, general elections were held in Vanuatu and Palau; presidential elections took place in Kiribati; while parliaments in Tonga, Vanuatu and Solomon Islands deliberated on motions of no confidence. Fiji continued preparations towards return to parliamentary democracy in 2014 with the voter registration process and the establishment of a Constitutional Commission which delivered a draft Constitution at the end of 2012.

Economic environment: All PICs are projected to record positive economic growth in 2012, ranging from one per cent in FSM to six per cent in Solomon Islands. Most economies have, largely, recovered from the global financial and economic crisis, but per capita GDP levels have barely, or not yet, returned to their pre-crisis 2007 values while growth prospects remain weak (ADB, 2012). Inflation has come down but food prices
are still high. Results from the third round of *sentinel site monitoring* carried out in 2011/12 confirm that vulnerable households continue to struggle with the high costs of living and resort to coping strategies that are increasing risks faced by children. Such coping mechanisms include, among others, shifting diets towards cheaper and low quality foods; dropping out of secondary school; selling of household assets; and migration in search of employment. Parents however continue to strive to protect the food consumption and schooling of their children (UNICEF, 2012).

**Poverty & inequality:** Poverty varies widely between, but also within, countries across the Pacific (PIFS, 2012). The proportion of the population living below the national basic needs poverty line ranges from 13 per cent in Vanuatu to 35 per cent in Fiji. Poverty is significantly higher in rural areas compared to urban centres in Fiji, Palau, Samoa and Tonga. Conversely, urban areas are disadvantaged in Solomon Islands, Kiribati, Tuvalu and Vanuatu. There is evidence that households with children, single women and persons with disabilities are more susceptible to poverty. Income inequality is especially high in Nauru with a Gini coefficient of 0.67. Various government-financed social transfer schemes operate across the region: six Pacific island countries maintain non-contributory pension schemes; two deliver disability benefits; but only Fiji and Cook Islands have grants specifically targeting children (AusAID, 2012). Recent micro-simulations for selected Pacific countries show that the introduction of small, but affordable, child benefits could achieve significant reductions in poverty (Samson, 2012).

**Progress towards Millennium Development Goals (MDGs):** According to the 2012 Pacific Regional MDGs Tracking Report, the region (excluding PNG) is on track towards reducing child mortality, with mixed progress on all the other goals. All but three countries have primary school attendance rates in the 90 per cent range and gender parity has largely been achieved. However, the quality of education, and high drop-out among young adolescents, remain a concern. The region faces a double burden of malnutrition and infectious diseases on the one hand, and over-nutrition and non-communicable diseases, on the other. The prevalence of HIV remains low, but high teenage pregnancy rates, pervasive gender-based violence and high prevalence of STDs in many of the countries suggest a real danger of a rapid increase in HIV. The 2012 visit of the UN Special Rapporteur on the right to safe drinking water and sanitation highlighted shortcomings in related legal and institutional frameworks in several countries. Overall, only Cook Islands and Niue are on track to achieve all of the MDGs. Other countries with notable progress include Fiji, Palau, Samoa and Tonga; while Solomon Islands and Kiribati are lagging behind (PIFS, 2012).

**Natural hazards & climate change:** Pacific island countries continue to be among the most vulnerable in the world due to their high exposure to natural hazards and low capacity to manage resulting risks. The 2012 UN World Risk Index identified Vanuatu and Tonga as the two countries with the largest natural disaster risk worldwide. During the period under review, Fiji declared states of emergency in January and again in April after unprecedented flooding displaced 15,000 people. Flash floods and landslides affected over 7,000 people in Solomon Islands in June. December saw a very active start of the cyclone season, with Typhoon Bopa causing extensive damage in Palau, followed by cyclone Evan which led to loss of lives and extensive damage in Samoa and Fiji, while cyclone Freda seriously affected Solomon Islands. Climate change is increasing the frequency and magnitude of extreme weather events like cyclones, droughts, and flooding. Low-lying atoll islands are particularly vulnerable to rising sea levels. Kiribati is now pursuing an agenda of ‘migration with dignity’ in response to the threats of climate change.

**Policy and legislative environment:** Social and economic policies across the region are increasingly addressing the rights of vulnerable groups. Children, youth and women feature prominently in the newest generation of national development strategies in Kiribati (KDP 2012-2015), Samoa (SDS 2012-2016), Solomon Islands (NDS 2011-2020), Tonga (TSDF 2011-2014) and Cook Islands (NSDP 2011-2015). In Fiji, Kiribati, Solomon Islands and Vanuatu, new laws and policies have given government and civil society organizations a mandate and framework to address violence, abuse, exploitation and neglect of children. Moreover, leaders of the Pacific Island Forum endorsed a landmark Gender Equality Declaration, signalling high-level political commitment to gender-responsive policies and programmes in line with CEDAW.

**Development effectiveness:** The 2012 Report on the Effectiveness of Development Efforts in the Pacific found evidence of positive change across the region, including stronger country ownership and greater attention to public financial management systems. The report calls for stronger links between countries'
development plans, their budgets and monitoring results as well as simplification of aid delivery mechanisms (PIFS, 2012). A 2012 World Bank Review of Health and Education Sector-wide Approaches identified strategic areas in which the effectiveness of SWAps could be improved. At the 2012 triennial review of the list of least-developed countries, the UN Committee for Development Policy (CDP) recommended Vanuatu and Tuvalu for graduation from the least-developed country category. Kiribati fulfilled the criteria for the first time and will be considered for graduation at the next triennial review in 2015. Samoa is currently in transition mode and preparing for its graduation in January 2014.

Country Programme Analytical Overview

The multi-country programme covers 14 diverse Pacific Island Countries (PIC) and employs a mix of strategies to ensure programme efficiency, effectiveness and equity towards achieving results for all Pacific children:

a. A prioritization approach segmenting the sub-region into three tiers identified on the basis of development indicators helps to modulate engagement from direct technical and financial inputs with physical presence, to selective support, and evidence-based upstream advocacy leveraging support from partners to close identified gaps.

b. Emphasis on data availability and integrity, combined with equity-focused analysis to identify the most disadvantaged children, i.e. knowledge generation and management, advocacy, policy analysis, modelling innovative approaches, leveraging partners and capacity development.

c. Maximising UN coherence through the UN Joint Country Presence initiative which – through UNICEF’s shared hosting with UNDP and UNFPA, and increasingly with UNWomen – has expanded UN presence. The establishment of the Tonga Joint Presence in 2012, increased coverage to 11 of the 14 PICs.

d. Using sub-regional events for strategic evidence-informed advocacy on key issues, and to encourage south-south and triangular cooperation to leverage exchange of good practices among Pacific island countries.

e. Generating evidence to accelerate progress for the most disadvantaged children is central to the current and next UNICEF Pacific multi-country programmes.

The series of ‘Children’s Equity Atlases’ initiated in 2011 with three countries (Fiji, Solomon Islands, Vanuatu), was further expanded in 2012 with analysis in progress or final stages for Marshall Islands, Micronesia, Samoa, Tuvalu and Nauru. The Atlases are used to strengthen dialogue on inequities with national and regional partners, and provide strong baselines, as well as pointers to critical bottlenecks for the new multi-country programme focus.

Following the dissemination of the Marginal Budgeting for Bottlenecks study report in Vanuatu, the completion of similar analysis in Solomon Islands and Kiribati was delayed by various factors in 2012, but is still expected to advance in 2013. Education barriers and bottlenecks were examined in the Solomon Islands ‘Barriers to Education’ study in 2011. Child Poverty Studies, analysing multiple deprivations were completed in Vanuatu and in Kiribati. Sentinel Monitoring is ongoing in six countries and has collected three rounds of data from over 400 households in 18 communities, thus providing a strong basis for rolling out MoRES.

Building on and using the above body of research and analysis, the 2013-2017 multi-country programme will focus on selected gaps and challenges that UNICEF cooperation can contribute to address in collaboration with other development partners. The planned roll-out of MORES in the three Tier-One countries provides an opportunity to strengthen monitoring of results for children with partners. Additional M&E dedicated capacity needed for this has received support from a major donor. Improved monitoring of aid effectiveness will be included as part of the enhanced programme monitoring.

The Evaluation of the Convergence Approach highlighted challenges of implementing integrated package of interventions at sub-national level. In the next multi-Country programme sub-national engagement will be maintained while anchoring within programmes and strengthening inter-programme linkages in sub-national
Humanitarian Assistance

In 2012, the most significant disasters in the Pacific region occurred in Western Fiji, affected by serious floods in January and March that affected over 250,000 people (over 29 per cent of the total population), including 15,000 internally displaced, and caused economic loss estimated at over FD$ 71 million. The 2011/12 Tropical Cyclone season in the Southwest Pacific basin experienced well below normal activity with just five named storms developing between November 2011 and April 2012. The majority of these tracked over open-ocean with the exception of Jasmine which passed over areas of southern Vanuatu and eventually Tonga causing localized damage and flooding. The 2012/2013 cyclone season started on a very active mode, with cyclone Bopha affecting Palau late November, followed by cyclone Evan which caused extensive damage and loss of lives in Samoa and Fiji late December. Cyclone Freda then hit Solomon end December, fortunately with limited damage. The UNICEF-Pacific emergency response team was activated, and the office contributed to the immediate response, as well as to damage assessment joint missions in Fiji and Samoa. A Humanitarian Action Plan is in preparation for Fiji to facilitate coordinated early recovery over the first quarter of 2013.

Effective Advocacy

Fully met benchmarks

a) In 2012, UNICEF Pacific developed a Communication and Advocacy Plan focusing on three evidence-based priorities: equity, child poverty and climate change. Advocacy was coordinated and undertaken in collaboration with other UN agencies, SPC, ADB, governments, CSOs and FBOs. All advocacy is planned at the beginning of each year to involve multiple approaches, multiple channels, platforms and audience groups. Advocacy for the World of the Child (SOWC and A Promise Renewed) was conducted and undertaken in collaboration with RO and HQ, and the Office consistently prioritised global advocacy initiatives, including the SOWC and A Promise Renewed. Rights-based advocacy, in particular focusing on equity and child poverty, is done with clear representation of the most vulnerable through sentinel site monitoring. Advocacy planning is consistently done with reference to country programme priorities and updated on an annual basis. During 2012, the Office shifted priorities to include A Promise Renewed and the MDG/Post 2015 Regional Dialogue. Advocacy initiatives are systematically monitored through the use of media and digital and social statistics monitoring. Selected advocacy initiatives are also evaluated—most recently the Advocacy Evaluation of the Human Face of the Global Economic Crisis which was recognized as one of the top 35 UNICEF evaluations in 2011.

Capacity Development

Partially met benchmarks

Most Pacific island countries face serious limitations in public and private sector performance; limitations often rooted in the inability of the public service to provide and civil society to demand quality services. Key drivers of the capacity gaps include: scant data for policy and performance management; regular outflows of the few skilled people; ongoing tensions between modern and traditional power; limited demand for quality services and good governance; poorly coordinated external assistance preventing effective use of existing capacities; and, fragile, vulnerable population bases facing severe challenges and threats. Lessons learned have underscored that success in capacity development depended on: local evidence-informed demand; ownership; and a design framework that provides a supportive environment for long-term results.

UNICEF continued its capacity building approach, through ensuring that in every sector knowledge generation and management linked to strategic messaging became the foundation for sustainable development programming. For example, UNICEF’s support of the production of Equity Atlases on Children in eight countries strengthened awareness of how stakeholders can utilize available data to define disparities and gaps and influence policy-making; the UN joint M&E programme in Kiribati assisted the Government to build indicators and a robust performance management framework for the new 2012-2015 Development Plan; the
child poverty studies in Vanuatu, Kiribati and other countries built awareness and skills how to review and analyse child-focused deprivations; and, UNICEF, UNAIDS and other partners continued to support several Pacific island countries (including Fiji, Kiribati and Solomon Islands) to develop HIV and AIDS response plans equipped with a M&E framework.

UNICEF-supported participatory, government-led data generation and analyses ensured that recommendations emanating from studies were immediately tabled for policy decision-making.

UNICEF leveraged south-south transfers of good practices in the Pacific island countries by utilizing its convening capacity to bring together key government and non-government partners in health, education, protection, etc., to share experiences, jointly plan and identify potential human, material and organizational resources to assist them to close gaps. UNICEF Pacific also stepped up its engagement with local and regional protection, etc., to share experiences, jointly plan and identify potential human, material and organizational convening capacity to bring together key government and non-government partners in health, education, cross-sector C4D initiatives in Kiribati, Solomon Islands and Vanuatu in 2013; b) Collection and use of social, focusing on disaster preparedness and response in Fiji. This is a best practice which will be used for other Pacific island countries (including Fiji, Kiribati and Solomon Islands) to develop HIV and AIDS response plans.

The main drawback for capacity development in the Pacific relates to the very high turnover of the few government and NGO staff. This means that training, advocacy and communication actions must be repeated over and over to gain a foothold.

### Communication for Development

**Mostly met benchmarks**

a) Partners for multi-sectoral C4D task forces, including representation from communities, mobilised for C4D focusing on disaster preparedness and response in Fiji. This is a best practice which will be used for other cross-sector C4D initiatives in Kiribati, Solomon Islands and Vanuatu in 2013; b) Collection and use of social, cultural, behavioural information to identify underlying causes and develop strategies using the best combination of approaches are on-going particularly in the context of the WASH, HIV/AIDS, Education and Child Protection programmes; c) Use of participatory approaches in research, analysis, planning, implementation, monitoring and evaluation of C4D through ongoing consultation with stakeholders at all levels, especially vulnerable and excluded marginalized groups through ongoing WASH, HIV/AIDS, Education and Child Protection programmes; d) Pre-testing of materials with all participant groups has become an integrated and standardised feature of all materials development; e) Integration of monitoring mechanisms in sectoral work plans has not yet been fully achieved and is under development; f) Database with information on performance, innovations, lessons learned established and maintained, but can be improved and more systematically organised and linked to MoRES.

### Service Delivery

**Mostly met benchmarks**

Fostering agreement and implementation of minimum service standards for health, nutrition, WASH, education and protection – and indeed also during emergency preparedness and response – is one of UNICEF Pacific’s core focus. Service delivery is characterised by three major defining features: access, quality and sustainability. In the Pacific context, service delivery has the following features:

- Most services are provided by the State. The role of non-state providers is minimal. Although social capital is generally high, community organization for the delivery of services is inadequate.
- Low economies of scale mean that relative costs of supplies are high. Under these circumstances, pooled sub-regional procurement offers major savings.
- Very few skilled staff and high turnover. Accordingly, the costs of in-service training and re-training are high.
- Most of the Governments’ investment in the sectors goes towards the costs of staff salaries.
- The scattered nature of the population across many small islands means the operational costs are high
and the services are subject to large disparities.

- Sustainability of delivery is dependent on political stability. When the governance is unstable and fragile, the quality and volume of service suffers.
- Disaster risk can significantly impact progress in service delivery. Disaster risk reduction can substantially mitigate the cost of disasters on services.

UNICEF supported governments and partners to define minimum service standards in various child-focused sectors. For instance, Kiribati, Solomon Islands and Vanuatu developed minimum quality standards for schools, which now provide a strong basis to guide school based management. UNICEF continued to support pooled procurement of vaccines under the Vaccine Independence Initiative (VII) which enables PICS to access them at affordable prices. The agency’s support to the MBB in the health sector placed a strategic and quality focus on MNCH. The child protection agenda among the law enforcement agencies was strengthened with new Standard Operating Procedures (SOP), and in Kiribati, birth registration increased substantially on account of the introduction of new integrated approaches. Sub-regional HIV testing standards were established and access to testing scaled up in three countries. To support strengthening of immunization services in Samoa, Solomon Islands and Vanuatu, UNICEF has placed immunization specialists in the Ministries of Health of those countries for a period of at least two years (up to 2014) to provide technical support and build capacity of counterparts towards achieving sustainable improvements in routine immunization.

### Strategic Partnerships

**Fully met benchmarks**

In 2012, UNICEF Pacific strengthened partnerships and established new strategic alliances with a number of partners in the Pacific to achieve results for children. a) A mapping and analysis of partnerships was completed as part of the preparation of the 2013-2017 Multi-Country Programme. b) The strategic identification and establishment of programme partnerships is overseen by the statutory PCA Committee and the Office welcomes current global efforts to streamline guidelines. c) UNICEF-Pacific continued to partner on programmes with many organizations, including regional agencies (CROP), donors (AusAID), UN, NGOs, and corporate organizations. Key partnerships include the Pacific Immunisation Programme Strengthening (PIPS) initiative that enables Pacific Island Countries to purchase vaccines in bulk and on a discounted rate; the Interfaith Coalition with HIV and AIDS programme and UNAIDS which drafted and launched a strategy on the prevention of HIV and AIDS for faith based leaders; and the One Talk for All initiative that brought together media specialists, young people, donors and regional organisations to use media to empower and educate children and adolescents. d) Communication with partners is being strengthened through the introduction of regular newsletters. The quarterly *Small Talk* Newsletter was introduced in 2012 to keep UNICEF partners informed of new publications, data and resources for children – and an EPI Newsletter was developed for the PIPS initiative. e) UNICEF is an active participant in SWapS and Joint Programmes for health and education in Kiribati, Solomon Islands, Vanuatu and Samoa. f) Regular tracking, monitoring and evaluation of partnerships is not yet in place and could be improved.

### Knowledge Management

**Mostly met benchmarks**

a) During 2012, local research to identify the most disadvantaged children and families was undertaken in Tuvalu, FSM and RMI as part of the *Children’s Equity Atlases*. Completed Atlases were launched in Fiji, Solomon Islands and Vanuatu. The Atlases serve as Situation Analyses, though with a greater focus on the use of statistics and detailed analysis of disparities. In addition, Child Protection Baseline Surveys were completed for three countries in the North Pacific (FSM, RMI and Palau) and sentinel monitoring of over 400 vulnerable families was undertaken in five PICS. Responsibility for knowledge management in the Multi-Country Programme has been defined to lie with each programme and to be coordinated and supported by the PAPE Programme. National capacities to support knowledge management remain limited. Most knowledge products are developed with participation of national partners and following the IMEP. All knowledge products are promoted and made available online to national partners and to relevant external knowledge sources and networks, while selected knowledge products are made available in print. A re-organization of the website
was undertaken in 2012 to enhance accessibility. The quarterly newsletter introduced this year is currently distributed to over 600 partners. An area for improvement is making external resources on children more accessible through UNICEF’s platforms. Strategic plans, systems and tools for gathering and analysing information on implementation of a knowledge management strategy, documenting innovations, and lessons learned are in place. The Study, Evaluation, Knowledge Committee (SEKC) was reinstated to manage knowledge generating activities, and assure the quality of knowledge products and the linkage with advocacy. The Committee, however, remains only partially functional and full governance practices still need to be developed.

Human Rights Based Approach to Cooperation

**Mostly met benchmarks**

UNICEF Pacific maintains a human rights-approach to programming at both the normative level and in the results focus of its directly supported initiatives. All PICs have ratified the CRC. All have also ratified CEDAW except Palau and Tonga, although Palau signed it in September 2011. Tuvalu submitted its initial CRC report in 2012 leaving just two PICs (Nauru and Tonga), which are yet to submit their reports. Using the ‘Tool Kit’, efforts were made to strengthen capacities in Nauru and Tonga for the development of their initial reports.

Work to define the 2013-2017 Multi-Country Programme (MCP) has been grounded in the human rights-based approach to programming, through reviews of gaps in legislation, policies, services and behavioural practices at the family and community levels. UNICEF also supported close reviews of the CRC and CEDAW concluding observations and their mainstreaming into related results matrices. Both the 2013-2017 UNDAF and the MCP have been formulated with strong focus on human rights, gender and equity.

The MCP formulation was informed by in-depth rights-based studies on Children and Climate Change, Children living with Disabilities, Children and Urbanization, and Children and the impact of the Global Economic Crisis. It also considered findings from baseline research carried out over the past four years of the current multi-country programme. This analysis supported the framing of results and programme interventions on building the capacity of duty bearers to respect, protect and fulfil children’s rights, and the capacities of rights holders to claim their rights. This is best expressed within the four themes that have continued to drive UNICEF’s work in the Pacific, namely data, minimum service standards, C4D to support demand for services, and a renewed focus on the unreached and vulnerable.

Ongoing Sentinel Site Monitoring, Youth Panels and the ongoing use of the MSC methodology in convergent programme areas are critical means to promote the participation of rights holders in UNICEF’s programming. Participatory mobilization of young people as subjects as well as drivers of change continued to underpin C4D programming in the Pacific, on the basis of solid data.

Finally, the equity-focus continued to strengthen the human rights-based approach by enhancing the analytical rigor and the advocacy focus. UNICEF-supported knowledge products including the production of eight Equity Atlases on Children assisted countries to have a clearer picture of deprivations and violations. To further equip countries on CRC accountability, UNICEF finalized the National Child Rights Coordination Committee (NCRCC) tool kits which national committees can refer to for advice.

Gender Equality

**Partially met benchmarks**

a) One of the key challenges in the Pacific hindering achievement of gender equality relates to high levels of gender based violence affecting especially women and children, and underpinning a general marginalization of women in politics and decision making. Therefore UNICEF-Pacific focused its work to promote gender equality by supporting and aligning programme activities with regional partners’ efforts to address violence against women and children. b) Ongoing efforts are made to ensure that all collection and use of data is disaggregated by sex. c) The Office is highly committed to, and is providing, equal opportunities for men,
women, girls, boys to participate in programme design, implementation and monitoring and in internal operations. d) In addition to internal UNICEF practices to gather and analyse information on gender equality and gender-specific results relevant to programmes, UNICEF is an active member of the UN Gender Group in the Pacific and is, through this, part of a knowledge sharing network that documents innovations and lessons learned. The documentation and lessons learned is an area that needs further strengthening.

Environmental Sustainability

*Partially met benchmarks*

a) Environmental and climate issues have been identified in the study *Climate Change Impact on Children in the Pacific* completed in 2011 and shared in 2012 with regional partners in Fiji and Samoa and with national partners in Kiribati; b & c) UNICEF Pacific’s next Multi-Country Programme 2013-2017 addresses climate change, disaster risk reduction and emergencies from an integrated perspective. The preparation for the 2013-2017 MCPD included an Initial Environmental Impact Assessment across all programmes; d) Partnerships have been built with “350.org” to promote youth involvement on climate change. For WASH and food security, UNICEF is increasingly partnering with SPC, FAO and other regional partners active in social impact of climate change, and with OCHA, ISDR and others on disaster risk reduction. In education, DRR has been built into quality standards for schools in the Solomon Islands; e) The climate change risk assessment has still not been built into monitoring and evaluation, though the 2012 evaluation of the ‘Convergence Approach’ included consideration of how well disaster risk has been addressed in convergence areas. There is scope to include DRR as part of the roll-out of MoRES in 2013.

South-South and Triangular Cooperation

The Multi-Country Office facilitates south-south cooperation in at least five ways: (1) using regular meetings of sub-regional organizations such as the Pacific Islands Forum Secretariat (PIFS), Secretariat of the Pacific Community (SPC), South Pacific Regional Environment Programme (SPREP), etc., to foster dialogue, experience-sharing, peer-reviews and decision-making among participating officials; (2) facilitating thematic coalitions such as the Pacific Immunization Programme Strengthening (PIPS), WASH Coalition, the Pacific Human Resources Association (PHRA) and the Early Childhood Education Council to expand knowledge exchange, formulate/monitor policies, offer technical/technological support and spearhead peer reviews; (3) utilizing UNICEF-convened sub-regional consultations, e.g. on child protection, PPTCT, maternal health, ECCE, etc., to share experiences and carry out tasks together, e.g. annual microplanning; (4) commissioning UNICEF-supported technical experts from one country to support another; and (5) using facilities in one country as a hub or resource for supporting other countries, e.g. use of warehouses in Fiji for supplies destined for other Pacific island countries.
Fiji (Pacific Islands) – 1430

Narrative Analysis by Programme Component Results and Intermediate Results

PC 1 - Health and sanitation

On-track

PCR 1430/A0/04/801 HS-PCR1: At all times, children survive, grow and develop to their full potential, especially those from most vulnerable islands and communities in Tier 1 countries and selected Tier 2 countries.

Progress:

UNICEF supported the sustained maintenance of polio-free status, measles elimination and Hepatitis B control in Pacific Island Countries (PICs). Five PICs (Cook Islands, Palau, Samoa, Solomon Islands and Vanuatu) showed positive trends in measles although vaccination coverage remained below 90 per cent. Hepatitis B elimination was covered through the integration of Expanded Program on Immunisation (EPI) and Mother Baby Friendly Hospital Initiative (MBFHI) in three focus PICs. Preparations are on-going for Kiribati with GAVI support to introduce PCV 13 in 2013. UNICEF support to cold chain expansion continued in eight PICs (including FSM, Cook Islands and RMI). Effective Vaccine Management for Fiji and Solomon Islands led to improvements in the cold chain. Fiji successfully introduced, on a nationwide scale, pneumococcal (PCV10), rotavirus and human papilloma vaccine (HPV). Vaccines were procured and distributed as part of ongoing support of the Vaccine Independence Initiative (VII) to 13 PICs. In collaboration with JICA and WHO, competence-based trainings on Vaccine Management and Mid–Level Managers trainings were conducted for supervisors in Vanuatu, Solomon Islands, Kiribati, FSM, Cook Islands and Samoa. Data management was improved significantly in Samoa. External EPI review in Solomon Islands provided the basis for strengthening immunization services, including for cold chain logistics and information systems. Due to a rubella outbreak, Solomon Islands added rubella vaccine to the Measles Supplementary Immunisation Activities with coverage of 101 per cent, Vitamin A (91 per cent) and deworming (85 per cent).

Integrated Child Health Days were conducted in Kiribati, Tuvalu, Vanuatu, Fiji and Solomon Islands when children received catch-up doses for routine immunisation. New DVDs on Child Survival Key Messages and Meena Video were produced in Vanuatu and Kiribati. The AusAID External Independent Completion Review findings on support to EPI and Integrated Child Survival Programmes provided an opportunity to analyse the gains made so far and improve on identified critical areas.

Met

IR 1430/A0/04/801/001 IR1.1: Kir - EPI Plus (HS1) By the end of 2012 boys and girls aged one year and under are immunized with potent childhood vaccinations as per national schedules, with a special focus on low-performing districts/islands in Kiribati (MTS P-OT4).

Progress:

Children of Kiribati continue to benefit from UNICEF support in assisting the Kiribati Government target to vaccinate children under one year of age. In 2012 no Polio nor Measles cases, >80 per cent coverage for DPT 1 and 3 and an increasing coverage of Hep B vaccination-90 per cent in the Maternity Ward of Tungaru Central Hospital in Tarawa and 79 per cent Outer islands (66 per cent<24hrs and 13 per cent>24hrs). Six new solar chills installed on 6 identified islands and 45 carriers provided on outer islands resulting in all (100 per cent) islands facilitated with a fridge. Two islands, Abaiang and Maiana, which were identified as Low Performing Area in 2011 with < 50 per cent coverage have progressed to 80 per cent coverage in all antigens.

Community involvement in vaccination sessions through support groups and implementation of Integrated Child Health (ICH) Weeks on Tarawa and Tab North, have assisted in identifying those who have been missed as well as empowered women who deliver outside the hospital to seek Hep B vaccination for their newborns within 24 hours of birth.

ICH weeks are only limited to two islands, Tarawa and Tab North because of limited funds and human resource. Challenges include limited resources and capacity of the Ministry of Health to reach all islands in one year. To improve coverage and sustainability, consideration should be given to training all medical
assistants and nurses based in health facilities around Kiribati on how to implement ICH and report the week results. Vaccine storage is also a problem. Currently vaccines are kept in refrigerators stored in a small and warm room inside the pharmacy. To avoid major cold chain disruption, and to accommodate an increasing number of vaccines with the introduction of pneumococcal vaccine in 2013, improvement to storage facilities should be considered.

**Met**

**IR 1430/A0/04/801/002 IR1.2:** Sol - EPI Plus (HS2) By the end of 2012 boys and girls aged one year and under are immunized with potent childhood vaccinations as per national schedules, with a special focus on low-performing districts/islands in Solomon Islands (MTSP-OT4).

**Progress:** A national campaign on integrated measles and rubella (MR) was conducted which contributed to increasing the national MR vaccine coverage to 101 per cent, vitamin A coverage to 91 per cent, and albendazole coverage to 85 per cent. Other major activities and results achieved included a national EPI review with the participation of UNICEF, WHO, GAVI and JICA. UNICEF further supported provincial micro-planning and EPI/Cold Chain reviews in five selected provinces. The reviews found that there is a need to improve the provincial outreach programme and cold chain coverage.

Cold chain national coverage reached 64 per cent, as a result of: the installation of 43 solar chills refrigerators; a new cold room for the National Medical Stores; and the delivery of 10 ice-lined refrigerators, as well as of another 15 solar chills and 34 cold boxes. Health workers gained competencies from Effective Vaccine Assessment (EVA) Programme, Cold Chain trainings, and Integrated National Child Health Days. The main challenges experienced included denominator problems on target populations; under-funding on provincial vaccine distribution and outreach; vaccine stock out; weak data management; inadequate supervision and monitoring; problem of communication and transportation with weak disease and Adverse Effect for Immunization (AEFI) surveillance system. MHMS plans to complete other provincial micro-planning workshops to support EPI in 2013.

**On-track**

**IR 1430/A0/04/801/003 IR1.3:** Van - EPI Plus (HS3) By the end of 2012 boys and girls aged one year and under are immunized with potent childhood vaccinations as per national schedules, with a special focus on low-performing districts/islands in Vanuatu (MTSP -OT4).

**Progress:**

Vanuatu has retained its Polio-free status since 1986. As of October 2012, immunization coverage for children under 1 year had improved reaching 91 per cent for Pentavalent 3 and 76 per cent for measles. A wide disparity remains between the low and high performing provinces with the lowest coverage in Torba at 41 per cent Pentavalent 3 and measles at 58 per cent. The UNV based in the EPI National Office contributed to strengthen the capacity for planning and monitoring. As part of the Mid-Year Review, six provincial EPI supervisors and 42 zonal supervisors undertook a micro-planning and data management workshop to analyse performance and plan corrective actions such as outreach services to low performing areas and supportive monitoring and supervision in the provinces. This resulted in improved performance and increased coverage. The Measles Rubella SIA was postponed to early 2013. To date, a total of 56 solar chills refrigerators were procured and installed (2010-2012), with support from UNICEF, AusAID and JCV. The cold chain inventory review showed 80 per cent of health facilities have a functioning cold chain system.

Data on immunization coverage has improved in term of completeness and timeliness. Reported coverage, however, is higher than the estimated coverage based on the 2007 MICS data, and data will need to be validated by conducting EPI coverage survey or through DHS/MICS in 2013.

Key bottlenecks in EPI included: the lack of nurses in health facilities in islands and communities; weak monitoring and supervision; weak HIS; lack of MOH regular budget allocation; frequent changes in the MOH management; and delayed DCT releases. Some future actions to improve coverage include regular supportive monitoring and supervision by both National and Provincial Supervisors, especially to the low
Performing provinces, timely release of DCTs, and recruitment of National Cold Chain Technician.

**On-track**

**IR 1430/A0/04/801/004 IR1.4: Reg - EPI Plus (HS4)** By the end of 2012, boys and girls aged one year and under are immunized with potent childhood vaccinations as per national schedules.

**Progress:**

UNICEF support was targeted towards supporting the Pacific Island Countries’ (PICs) sustained maintenance of polio-free status, measles elimination and Hepatitis B control. No outbreaks of measles were reported in 2012 and no polio cases were identified. There was steady improvement in coverage of routine immunization: of the 14 PICs, ten have achieved DPT3 >90 per cent and nine have achieved measles coverage of >90 per cent.

Through a multi-year, multi-country programme on EPI co-funded with AusAid, JICA, and New Zealand Aid, UNICEF continued support to 14 Pacific Island Countries (PICs) through the expansion of cold chain, supplies and capacity building to EPI coordinators and supervisors in managing vaccines and EPI programming. In collaboration with JICA and WHO, UNICEF supported the competency-based training on vaccine management in Samoa and FSM; micro planning in FSM; and mid-level managers training in Cook Islands. To replace outdated cold chain, RMI received 20 units of refrigerators, Cook Islands six units, and FSM two units. FSM also received a 4WD truck to enhance delivery of immunization services in Chuuk States. Financial support was also given to Tuvalu to use the Child Health Day to increase awareness on the importance of immunization and catch-up campaign. With UNICEF support, a UN Volunteer was deployed to Samoa to enhance the capacity of National EPI Coordinators and Supervisors. With intensive reviews and facilitation, data management was improved in Samoa, as a result of which coverage information for all antigens is expected to become available. In collaboration with WHO, Joint Reporting Forms were collected, reviewed and submitted on time to UNICEF and WHO HQs. Thirteen Pacific countries continued to receive routine vaccines through the Vaccine Independence Initiative. This VII arrangement will come to an end in 2015, and a transition scheme will be introduced in 2013.

**On-track**

**IR 1430/A0/04/801/005 IR1.3: Reg - IYCF (HS12)** to achieve comprehensive exclusive breastfeeding, complementary feeding, and micronutrient interventions (MTSP-OT8).

**Progress:**

The focus was for targeted hospitals to be certified as Mother Baby Friendly using the revised WHO Criteria and introduction of Breastfeeding Protection in emergencies. The other non-tier 1 Pacific Island Countries that were targeted was the Republic of Marshall Islands (RMI). Mothers’ Support Groups were formed in hospitals’ catchment areas, promoting exclusive and complementary breastfeeding, HIV testing, and the recognition of children with disabilities (CWD) and abused children, as well as the importance of early child development and education.

The first trainings for the Growth Assessment and Infant and Young Child Feeding( IYCF) Counselling Course and Mother Baby Friendly Hospital initiative were conducted as a joint initiative between UNICEF and WHO. Plans of action to move the activities forward to the implementation of regular growth monitoring and IYCF counselling, and accreditation with MBFHI status, were developed with the Ministry of Health (MOH). Communication on the progress of activities with government partners has not been very successful, partly due to the turnover of staff in RMI, and the lack of funding support to enable UNICEF to make follow-up visits and support the processes. This needs to be prioritised in 2013 seeing that: i) exclusive breastfeeding rates of 27 per cent (MICS, 2007) in RMI were the lowest in PICs; and ii) RMI did not obtain the standard anthropometric measurements for nutrition status indicators in the 2007 MICS, indicating that stunting may also be an issue in the country. There is also a need to focus on other countries in the region with medium-high stunting rates and low exclusive breastfeeding rates.
**On-track**

**IR 1430/A0/04/801/006 IR1.3-KIR:** By 2012, health teams in Abemama and South Tarawa demonstrate what it takes to achieve comprehensive exclusive breastfeeding, complementary feeding, and micronutrient interventions (MTSP-OT8).

**Progress:** Infants from 0 to 6 months are benefitting from the coordinated effort of WHO, UNICEF, the Ministry of Health and Support Groups to promote exclusive breastfeeding. The Tungaru Central Hospital on Tarawa maintained its Baby Friendly status while two hospitals were upgraded and undergoing internal assessment. Six breastfeeding support groups on Abemama continue to function since 2011, while four on both Kiritimati island and Tabnorth have been established and are functioning. For the first time, one support group on south Tarawa is serving as a model for integration of programmes in the community; supporting not just breastfeeding but working through continuum of care from pregnancy through >5 year olds to support communities with child health problems. This group is also growing gardens beside their community health centre and their homes and producing nutritious complementary food. One hundred per cent of pregnant mothers received iron and folic acid routinely through pregnancy. However, not all pregnant mothers attended antenatal care clinics as 30 per cent sought care elsewhere.

Children over 6 months old will benefit from receiving foods from a complementary recipe book consisting of recipes with photos for infant feeding using locally available food now printed.

A Meena video which includes all infant and child health problems in Kiribati is being finalized and will educate the general public on the importance of breastfeeding, good nutrition, vitamin A, understanding growth charts, and recognizing malnutrition as well as the danger signs that indicate urgent referral to health facilities. During the production, capacity on graphic art has been built in the Health Promotion Unit through combined assistance from SPC and UNICEF.

Micronutrient intake improved as > 80 per cent of children 6 to 59 months old continued to receive high dose supplementary vitamin A. Communities were made aware of iodised salts and the Government is awaiting a second hearing of the Pure Food Act including the Code of Marketing Breastmilk Substitute and regulations on food fortification.

Even though records are improving, data on complementary feeding, and the delay in passing the Pure Food Act, remain constraints.

**Constrained**

**IR 1430/A0/04/801/007 IR1.4:** Kir - H&N Emergencies (HS13) Capacity to lead and coordinate nutrition emergency preparedness and response. (MTSP-OT 1)

**Progress:**

This activity has been delayed because of lack of funding and delay in Government and development partners to initiate.

Since the training of one nutritionist from Kiribati on emergencies, through a combined effort of UNICEF and UNDP in 2011, Kiribati has managed to identify committee members but has not been able to move further except for an EPRP compilation with assistance from the UNICEF Office.

**On-track**

**IR 1430/A0/04/801/008 IR1.2:** Sol-IMCI (Pneu&Diarrhoea) (HS6) S6) Health Teams in Solomon Islands demonstrate effective diarrhoea and pneumonia interventions for girls and boys at facility and community levels (MTSP-OT6).

**Progress:**
Integrated guidelines on prevention and treatment of diarrhoea, pneumonia, malaria and other childhood illnesses have been completed. ORS (new), Septrin, and Procaine have been included in the Essential Drug List for national distribution for the treatment of diarrhoea and pneumonia. Training in Malaita was completed and training on Case Management was undertaken for course coordinators and health workers from health facilities within the northern region. With their newly acquired knowledge on case management, trained health workers are now better able to effectively and efficiently manage sick children. Information shared with mothers at the facility is expected to improve family and community IMCI practices. Planning for the national training-of-trainers has commenced to expand to the other provinces. New ORS and zinc tablets will be introduced nation-wide after the national orientation and training-of-trainers.

**On-track**

**IR 1430/A0/04/801/009 IR1.3: Sol - IYCF (HS10)** Health Teams in Solomon Islands demonstrate what it takes to achieve comprehensive exclusive breastfeeding, complementary feeding, and micronutrient interventions (MTSP-OT8).

**Progress:** The Programme provided support for scaling-up of Baby-Friendly hospital initiative to Kiliuufi Hospital and Good Samaritan Hospital in Malaita and Guadalcanal Provinces through training of nurses. Twelve members from selected women’s support groups within the catchment were also trained to manage basic conditions on breastfeeding and learned how, and when, to refer mothers and babies for medical care. Internal Assessments show about 60 per cent compliance with MBFHI at Kiliuufi, and 50 per cent for Good Samaritan Hospitals. Counselling the mothers during their ante-natal visits to the health facilities has been reinforced at the community level, with Mothers’ Support Groups take a leading role.

**On-track**

**IR 1430/A0/04/801/010 1.2.4: Sol- H&N Emergencies (HS14)** Capacity to lead and coordinate nutrition emergency preparedness and response (MTSP-OT 1).

**Progress:** With support from UNICEF, the national EPRP for Health, Nutrition and WASH clusters was updated. Nutrition and WASH are established as separate clusters within health and are led by the MHMS. Broadly, the National Disaster Management Office (NDMO) manages all humanitarian actions in emergencies. Sub-committees and working groups on Nutrition, WASH and Health have been established. The Nutrition Cluster Working Group has been re-organized as an actor, and has been strengthened under the Ministry of Health oversight. It focuses on infant and young child feeding, including continued breastfeeding and the provision of micronutrients. Limited human resource capacity is a challenge. The involvement of other government sectors, NGOs and faith-based organizations (FBOs) has proved key the achievement of goals and needs to be explored further for up-scaling the promotion.

UNICEF continued to pre-position emergency supplies for Health, Nutrition and WASH, and ensured regular inventory checks on quality and quantity of stocks.

**Constrained**

**IR 1430/A0/04/801/011 IR1.2: Van-IMCI (Pneu&Diarrhoea) (HS7)** Teams in Vanuatu demonstrate effective diarrhoea and pneumonia interventions for girls and boys at facility and community levels (MTSP-OT6).

**Progress:** TAFEA and SHEFA Provincial Health teams have an on-going programme for training of nurses on pneumonia and diarrhoea management including the introduction of use of Zinc tablets. UNICEF supported the procurement of 200,000 Zinc tablets for children under-5 with diarrhoea, to be piloted in the two provinces. According to 2007 MICs report, ORS use for diarrhoea among under-5 children is 43 per cent and antibiotic use for pneumonia is 63 per cent. Due to the weak Health Information System the Unit is unable to track progress for these indicators.

The major challenge is limited funding support. The Ministry of Health has not been able to secure enough funds for implementation of all IMCI activities for the year. Secondly there is lack of reliable data to track progress.
Progress:

IR 1430/A0/04/801/012 IR1.3: Van - IYCF (HS11) Health teams in Vanuatu demonstrate what it takes to achieve comprehensive exclusive breastfeeding, complementary feeding, and micronutrient interventions (MTSP-OT8).

Progress:

TAFEA and SHEFA Provincial Health teams were not able to implement most of the planned nutrition activities due to funding constraints. With UNICEF’s assistance they were able to mobilize AusAID funds to conduct an external assessment of the Vila Central Hospital (VCH) for Mother and Baby-Friendly Hospital certification. VCH, the prime referral hospital which services about 3,000 birth deliveries per annum (40 per cent of total national births) passed the assessment and was awarded an MBFH Plaque unveiled by the Minister of Health and the UNICEF Pacific Representative in December 2012. At Northern District Hospital, a referral hospital covering the northern provinces, over 80 per cent of staff members have been trained with only six doctors, and selected Breastfeeding Support Group members still to be trained. This hospital will be externally assessed by 2nd Quarter 2013.

Vitamin A supplementation and deworming for 6-59 month old children was conducted in health facilities and communities, while promotion and advocacy among health practitioners and the general public on micro-nutrients supplementation, and use of iodized salt, are ongoing activities. In the 2007 MICS, only 40 per cent of 0-5 month old infants were exclusively breastfed, and 62 per cent of 6-8 month old infants received complementary feeding. Progress will be tracked and validated through the combined DHS/MICS scheduled in 2013.

Major challenges for the nutrition programme’s implementation include the lack of funding support, and the lack of regular data collection and reporting on rates of exclusive breastfeeding, complementary feeding and pregnant women receiving iron and folate, due primarily to a weak Health Information System (HIS). This year a comprehensive HIS strengthening is being implemented, supported by the Health Development Partners led by WHO and AusAID.

Progress:

IR 1430/A0/04/801/013 IR1.4: Van - H&N Emergencies (HS15) Capacity to lead and coordinate nutrition emergency preparedness and response. (MTSP-OT1)

The Ministry of Health, in partnership with NDMO in the Ministry of Home Affairs, has developed an Emergency Preparedness and Response Plan for health and nutrition. The Nutrition Coordinator benefitted from the Cluster training session carried out by NDMO recently. The Health and Nutrition Cluster is one of the five clusters established by NDMO to respond to emergencies in Vanuatu. The major challenge is to get the MOH to actively exercise its leadership role, and for the members to actively participate in Health and Nutrition Cluster meetings.

Progress:

IR 1430/A0/04/801/014 IR1.2: Kir-IMCI (Pneu&Diarrhoea) (HS5) Health Teams in Tarawa in Kiribati demonstrate effective diarrhoea and pneumonia interventions for girls and boys at facility and community levels (MTSP-OT6).

Children of Kiribati are receiving better treatment during episodes of diarrhoea and pneumonia through UNICEF’s assistance to the Kiribati Ministry of Health and Medical Services (MHMS) on promoting the use of IMCI when classifying and treating childhood illnesses. This includes both diarrhoea and pneumonia. The support on IMCI has included improving capacity by updating 75 public health nurses on Tarawa, Tabnorth and Kiritimati island, as well as equipping all health facilities on the three islands with IMCI tools and equipment such as thermometer, scales, respiration counters. On south Tarawa 11 health clinics were equipped with kettles, wall clocks and measuring jugs for demonstrating ORS and antibiotics preparation and assisting mothers to administer to their sick children. MHMS has circulated a protocol and guideline to
include zinc in the treatment of diarrhoea. Integrated child health days carried out in two islands, Tarawa and Tabnorth, have shown results of reaching 1,800 under 5-children, from whom ~ 20 per cent of them received catch up doses of Pentavalent, OPV, TT and Measles vaccines, Vitamin A capsules and Deworming, and had date of birth registered. Results from Tabnorth ICH week showed that 82 per cent of all children <5 were checked. A new important finding for the two islands was that more than 50 per cent of the children checked were stunted and had scabies, diseases that have not been reported through their monthly reports (MS1). Other common diseases that children presented were ear problems, cough, pneumonia, diarrhoea, conjunctivitis, sores, fever and malnutrition which were treated accordingly. Mothers were shown handwashing techniques and how to recognize signs for urgent referrals to health facilities. Nevertheless, challenges remain regarding the availability of data on treatment. Also, Integrated Child Health Days are reaching children in only three islands, whilst the rest of the islands remain unreached due to lack of capacity, funds and trained manpower.

**IR 1430/A0/04/801/015 DELETE IR1.2: Reg - IMCI (Pneu& Diarrhoea) (HS8) (Regional EPI and IMCI combined)**

- On-track

**IR 1430/A0/04/801/016 IR1.4 Reg - H&N Emergency (HS16) capacity to lead and coordinate health and nutrition emergency preparedness and response (OT 13)**

**Progress:** UNICEF established the nutrition sub-cluster under the Health and Nutrition Cluster in Fiji and supported the emergency response to floods in January and March 2012 in Fiji. A nutrition response strategy was developed with MOH partners, including development and trialing of nutrition surveillance tools and database. A series of three 2-monthly nutrition assessments carried out in the Western Division post-floods represented a first attempt in the Pacific. The results of the assessment augured well for the resilience of the affected population, which was generally good overall for nutritional status of children under-5 and for food security status of households. It was rationalized however to respond to the pre-existing unacceptably high levels of iron deficiency anaemia (50 per cent) in children under-5 years in spite of not measuring micronutrient deficiencies in these assessments due to logistic and cost complications. Hence vitamin A, albendazole, multi-micronutrient powders (MNP) and haemoglobin test kits were procured for this response, which will be mainstreamed into the ongoing NIMS programme. Other activities undertaken included distribution of IEC materials to promote IYCF and home food production in the communities that participated in the nutrition assessment, as well as print and radio messages for health including IFE.

- On-track

**PCR 1430/A0/04/802 HS-PCR2: By 2012 more mothers and newborns have increased and equitable access to evidenced-based packages of essential services and interventions in Kiribati. (MNC).**

**Progress:** In partnership with local NGOs in Solomon Islands, 50 newborn resuscitators were distributed along with three different posters and 100 blankets to promote thermal protection for newborn and mothers in rural areas. In partnership with the United Nations Population Fund (UNFPA), Emergency Obstetric Care Assessments were conducted in Vanuatu and Solomons and, for the first time the ‘N’ (neonatal) was included in the assessment that took place in Kiribati. A questionnaire on the neonatal component was adapted, which provided an opportunity to include newborns in the UN process indicators and signal functions for EmNOC. These upstream processes provided a critical step to improve equitable access to newborn survival.

In partnership with UNFPA, the combined training on EmNOC, with Reproductive Health Commodity Security, was conducted in Solomon Islands and as a result, 65 Rural Health Workers were trained. The provincial hospitals were also equipped to provide EmNOC basic and comprehensive signal functions in nine and four facilities respectively. Facilities were upgraded to provide Level 1 and 2 Neonatal Intensive Care Unit (NICU) support.

EmNOC standard protocols and guidelines were reviewed, and algorithms prepared and distributed to all the facilities in the three focus countries.

The Community-Based Maternal and Newborn Care (CBMNC) rollout process experienced funding constraints.
Guidelines and protocols for CBMNC were developed and demonstrated in Solomon Islands and Vanuatu. The Neonatal Death Audit process has begun collecting data in 1 pilot country. Health messages with CBMNC focus have been developed and demonstrated through integrated delivery with WASH programmes in 12 communities in Kiribati.

Advocacy was developed for micro-nutrient supplementation and food fortification to include a revision of nutritional guidelines and policies, with a procurement of vitamin A and micronutrient powders. The Fiji National Information Management Systems’ Project Document, the Integrated Maternal, Child Health Booklet, DVD, and Child Growth Monitoring Charts were finalized and launched for use in all of the focus PICs.

The Promise Renewed Commitment was signed by all 14 Ministers of Health in Pacific Islands Countries and Territories after the Global Call for Action, and is aligned to the declaration on MNCH Scale up Strategic approach as PICs’ response to address targets in the Global Strategy for Women and Children’s Health.

**Progress:**

In partnership with UNFPA, EMOC Assessment in Health Facilities training was carried out to 16 retired local medical assistants for the first time in Kiribati. As a result of this training, the medical assistants are now knowledgeable and have already set a plan on the actual assessment to be carried out in early 2013. Eight principal nursing officers and seven health promotion officers (who are also members of the WASH Technical Group) have been informed of the 10 Key messages for Maternal and Child Health (MCH). As a result, these messages have reached health workers and communities in all the 16 islands which WASH has visited and engaged with in planning for the EU funded project. Twenty-six Health workers in Kiritimati and 50 community leaders have also been informed of the key messages and are now using these to inform their different communities. Translation and duplication of the key messages flipchart is needed for full utilization within the communities.

A Neonatal Death Audit has been carried out on 52 neonatal deaths which occurred in the Tungaru Central Hospital in 2011. Analysis is taking place but what is noteworthy from the collection is that documentation on the part of Health Workers, during admission and labour, is very poor and needs improvement. Even though a lot has been achieved on the target islands, data availability is still a constraint. Thirty per cent of newborns are still delivered by TBAs while those who deliver in hospital only spend a day or less before they get discharged to their homes, and even though they should be routinely visited at home, no records are available.

**On-track**

**IR 1430/A0/04/802/005 IR2.1**: Guidelines and protocols for community maternal newborn care, including post-natal care, (3, 5, 7, 14 & 28 days visit) neonatal death audits, at health and community levels developed and demonstrated in WASH targeted 16 Islands (To be fully integrated with WASH (EDF10) in every island)

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**On-track**

**IR 1430/A0/04/802/006 IR2.1**: Sol - SMNC (HS18) Mothers and newborns have increased and equitable access to evidenced-based packages of essential services and interventions in Solomon Islands (MNC).

**Progress:** Improving the quality of maternal and newborn interventions and services at all levels is being led by the MHMS with support from UNICEF and UNFPA. In Malaita and Guadalcanal provinces, sixty nurses including those from the rural areas have improved competencies in the management of Emergency Maternal Obstetric Care (EMOC), focusing on safe-motherhood and newborn care. UNICEF and UNFPA both supported this initiative to further leverage limited resources, and encourage co-operation and support from other agencies. UNICEF also provided technical support to the MHMS to produce information education communication (IEC) materials for reproductive health. To strengthen programme support, UNICEF has liaised with the MHMS and other partners such as WHO and UNFPA on improved reproductive and child health areas.

**On-track**
IR 1430/A0/04/802/007 IR2.1: Van SMNC (HS19) By 2012 more mothers and newborns have increased and equitable access to evidenced-based packages of essential services and interventions in Vanuatu (MNC).

**Progress:**

Approximately 80 per cent of health staff (nurses, midwives and doctors) has been trained in basic emergency obstetrics and newborn care in TAFEA and SHEFA provinces jointly supported by UNFPA, UNICEF and WHO. Application of learned practices and skills are however hampered by the systemic weakness in the health sector including weak supervision and performance monitoring, inadequate basic health supplies and equipment, and weak information management. The 2007 MICS Report showed that 74 per cent of births were delivered by a skilled health worker. However, due to a weak HIS, there is no reliable data available to show that targets are on track. A combined DHS-MICS will be conducted in 2013 that will later validate if targets have been achieved.

Major implementation bottlenecks include the lack of nurses and midwives in the health facilities in the rural communities in most provinces, the lack of reliable data, and inadequate MOH budget and other funds from other sources. The next country programme cycle plans for a more strategic advocacy and resource mobilization to support maternal and newborn care as part of the integrated package of mother and child continuum of care.

**Constrained**

IR 1430/A0/04/802/008 IR2.1 Reg - SMNC (HS20) By 2012 more mothers and newborns have increased and equitable access to evidenced-based packages of essential services and interventions in selected Tier 2 countries (MNC).

**Progress:**

Discussions were held with UNFPA and as a result, joint assessments and trainings were conducted in the focus Tier 1 Countries. Most activities for Tier 2 Countries have been deferred to 2013.

**On-track**

IR 1430/A0/04/802/009 IR2.1- Kir - Maternal Nutrition (HS21) By 2012, adolescent girls, pre-pregnant, pregnant and lactating women in Abemama and Tarawa Islands have reduced micronutrient deficiencies .(MTSP-OT8)

**Progress:**

UNICEF, through its Nutrition and Safe-Motherhood Programme, and leveraging through the WASH Programme, has engaged with the Government of Kiribati’s Ministry of Health in upgrading eight principal nursing officers, 30 public health nurses on south Tarawa, 26 health workers on Kiritimati island, including health workers and communities of the 16 islands visited by a WASH initial engagement. The Team has been informed of the 10 Maternal and Child Health Key Messages, have gained knowledge, and are now spreading the messages to others in the communities.

One hundred per cent of pregnant women attending antenatal care (ANC) clinics receive iron and folic acid throughout their pregnancy and are advised of the importance of eating a balance diet, choosing iodized salt, exercise, good personal hygiene practices, as well as danger signs that requires emergency referral to health facilities.

Twenty adolescent girls and boys have been informed of the importance of good balanced diet and iron rich foods and good healthy practices during an Adolescent Girls Initiative workshop. Through these adolescents, more will be informed.

A Meena video is now being finalized and will improve awareness among child bearing aged women and the general public. It includes information on importance of good nutrition, attending antenatal care clinics early
in pregnancy, receiving iron and folic acid, TT vaccine, as well as showing danger signs that indicates the need for urgent referral to health facilities for treatment. The video is complemented by a Maternal and Child Health booklet that carries all information including antenatal care records and child health.

Although much information is disseminated and 100 per cent of pregnant women who attend ANC clinics receive micronutrients and are immunized, around 30 per cent of women who are managed by traditional birth attendants (TBAs) do not get these essential micronutrients and miss out on important essential information.

**Progress:**

UNICEF has engaged in discussions with the Ministry of Health and Medical Services (MHMS) regarding undertaking the analysis of bottlenecks to high coverage of cost-effective maternal, newborn and child health interventions and services in Kiribati. Results of the discussion were that, in order to avoid duplication and to maximize utilization of funding and technical assistance from development partners, the MHMS wished UNICEF to concentrate its funds on Maternal and Child Care activities as WHO has already engaged with the Ministry on developing a National Strategic Plan for 2012-2015. Therefore, in partnership with WHO, New Zealand and the Australian High Commission make-up the Multi-Sector Coordinating Committee that is now working on the 2012-2015 Health Strategic Plan which is in its final draft. This Plan is delayed because of competing commitments, both on the part of lead development partner and the Ministry of Health. Another contributing factor is the delay of the Government of Kiribati in finalizing its National Development Plan, which is needed to guide development of all individual Ministries. Even though the Plan in its final form, bottlenecks have not been well defined, nor have the budget lines.

**On-track**

IR 1430/A0/04/802/011 IR2.2 - Sol- Maternal Nutrition (HS22) By 2012, mothers and newborns have increased access to quality maternal and newborn interventions and services in Western and Choiseul Provincial provinces in Solomon Islands. (MTSP-OT7)

**Progress:** The MHMS has a policy to support pregnant mothers, which includes provision of de-worming and iron folate tablets. UNICEF support and advocacy on micro-nutrient supplementation for pregnant women continued through the National Referral Hospital and National Reproductive and Child Health Department, as the first entry points, and as a result, some decisions from the Ministry are anticipated towards including micro-nutrient powder in the 'Essential Drug List', which would ensure their availability at health facilities. UNICEF together with WHO continued to advocate for and support food fortification. It is planned that UNICEF will work with the MHMS to ensure that the nutrition guidelines include vitamin A and iodised salt, so that the nutrition package available to pregnant mothers is more complete.

**Discontinued**

IR 1430/A0/04/802/012 ACTIVITIES DROPPED- IR2.3:Sol-ABCE Analysis (HS26) Pregnant and lactating women in Western and Choiseul Provinicial provinces reduced micronutrient deficiencies. (MTSP-OT8)

Indicator: 2.2.1: per cent of pregnant women who have receive iron-folate tablets Ba 64 per cent (2007 MICS). Target: 1 00 per cent. MoV: ANC records

**Progress:**
Progress: TAFEA and SHEFA Provincial Health teams have carried out a number of awareness sessions on micronutrients to most health staff members and communities in TAFEA and SHEFA provinces during the year. However implementation fell short due to funding constraints. The data on the number of pregnant mothers receiving iron and folic acid this year is not available, and although staff in antenatal clinics in SHEFA and TAFEA provinces claim around 80 per cent coverage, this is yet to be confirmed. The key bottlenecks are limited funding both from the Ministry of Health, UNFPA and UNICEF and also, most critical, is lack of qualified health personnel in the provinces to implement the activities. An ongoing human resource assessment and planning in the MOH is aimed to respond to this systemic problem but solutions need to be comprehensive and may take some time. Meanwhile there is a need for more strategic advocacy, planning and resource mobilization among all stakeholders to support pre-pregnant and maternal nutrition as part of the integrated package of mother and child continuum of care.

Met

IR 1430/A0/04/802/015 IR2.3: Van- ABCE Analysis (HS27) By 2012, senior members of staff of the MoH and Finance and health development partners under take analysis of bottlenecks to high coverage of cost-effective maternal, newborn and child health interventions and services in Vanuatu.

Progress: The Ministry of Health, Finance and UNICEF completed a costing exercise on the Maternal, Newborn, and Child Health interventions and services in Vanuatu and findings were presented to the Ministry of Health and development partners in September 2012. The Ministry of Health has taken note of some of the recommendations particularly on how to raise funds to meet the costs of running these interventions in the light of budget cuts, and secondly, to take up the challenge of the shortage of human resources in the country. UNICEF is a member of the Joint Health Partners Group, established in the beginning of 2011, and has actively participated in most of the meetings to address some of these issues this year. The important task now is to communicate the findings of the analysis to the authorities of Health and Finance, both at the national and provincial levels, so that they can come up with adequate/appropriate budgets, and seek financial assistance, where necessary, to meet the costs of implementing the MNCH Programme interventions.

IR 1430/A0/04/802/016 IR2.3: Reg ABCE Analysis (HS28) By 2012, senior members of staff of the MOH and Finance and key health development partners under analysis of bottlenecks to high coverage of cost-effective maternal, newborn and child health interventions and services.

On-track

IR 1430/A0/04/802/017 IR2.2 Reg- Maternal Nutrition (HS24)

Progress: Advocacy for micronutrient supplementation, especially food fortification and iodized salt has been on-going in all 14 Pacific Island (PICs) through UNICEF’s partnership under the Food Security Framework for Action. UNICEF has been traditionally supporting vitamin A supplementation in the Republic of the Marshall Islands (RMI) and Federated States of Micronesia (FSM). Both RMI and FSM have not been able to submit coverage reports, and this year both countries were severely constrained to implement vitamin A distribution because the supplies did not arrive due to VISION system management. The systems issue with UNICEF and the coverage reporting issues of these countries.

UNICEF recently supported Fiji’s National Iron and Micronutrient Supplementation (NIMS) Programme as coverage has consistently remained below 30 per cent in the last 3 years (including 2012). The support from UNICEF to review NIMS administrative processes and communication strategies in early 2013 is expected to improve uptake of interventions by the target group thereafter.

Constrained

PCR 1430/A0/04/803 PCR3: WASH/CC & DRRM: Selected communities have improved health, economic and human development outcomes related to water, sanitation, hygiene (WASH).

Progress: Critical pre-implementation activities have been conducted since the EU-funded Project Inception
Phase, including the recruitment of core programme staff at the multi-country and field offices. Two-thirds of project staff members have been hired, with the remaining positions to be filled by January 2013. A Project Cooperation Agreement (PCA) was prepared with the Secretariat of the Pacific Community/SOPAC for conducting the hydro-geological assessment in Kiribati. In Solomon Islands, a detailed plan of action for project support has been developed with the NGO Live and Learn, which is also jointly supporting the WASH in Schools Programme in Fiji. Vanuatu and Solomon Islands together with UNDP, UNICEF and ILO signed project agreements focused on a multi-sectoral human security approach and Project Management Units (PMU) were established within the relevant ministries. Project implementation has begun with a process to select the beneficiary communities in the target Provinces. Stakeholder workshops have been conducted and joint field missions have provided information on the current situation in target communities, including employment opportunities and water, sanitation, and hygiene needs. In Solomon Islands, a capacity assessment of MNURP was conducted, and actions identified for capacity-strengthening. Plans are underway to develop a new Information, Communication and Technology tool to provide information to the beneficiary communities on water, sanitation, and hygiene behaviours and technologies.

With additional expertise now on board in the multi-country and field offices, it is expected that progress will accelerate towards results in 2013.

Constrained

IR 1430/A0/04/803/009 IR3.1 Kir - WASH (HS29) :By 2012, more schools and communities have improved health, economic and human development outcomes related to water, sanitation, hygiene in Kiribati. (WASH)

**Progress:**

UNICEF Pacific signed a contribution agreement with the EU in June 2011 to provide technical assistance for the implementation of the Water and Sanitation Project in the Outer Islands of the Republic of Kiribati. The purpose of the project is to increase access to safe and sustainable water and sanitation and reduce WASH-related diseases in at least 70 villages in 16 islands of the Gilbert group.

To scale-up in-country community engagement and mobilization capacity and to facilitate community consultation processes, a Core Technical Group comprising 20 staff member of ministries and NGOs, was established. To instigate the community engagement, an initial visit has been carried out to the 16 target islands and it initiated several key actions in communities and in island councils. Communities identified potential WASH care takers, natural leaders and activated their village welfare groups. Similarly island councils have agreed and signed support plans, which covers list of selected target villages and commitments of the island councils for successful WASH interventions in their islands.

In partnership with SPC/SOPAC, water resources assessment in the 16 islands is being undertaken. The assessment in three islands shows the vulnerability of outer island groundwater conditions and provides guidance on the design of culturally acceptable, cost effective and environmental friendly sanitation infrastructure. As part of the initial visit a preliminary assessment of the existing communal and private rainwater harvesting systems in all target villages, and rehabilitation needs in the selected villages, has been carried out. The findings have revealed a need for a strong operations and maintenance mechanism, monitoring framework, and clearly defined support roles of Water Technicians in outer islands.

Due to delays on commencement of the project, and other bottlenecks, the intended target could not be met in 2012. Corrective measures are being undertaken following the EU Result Oriented Monitoring recommendation.
Constrained

IR 1430/A0/04/803/010 3.1 - Solomon Island - WASH (HS30) 2012, more schools and communities have improved health, economic and human development outcomes related to water, sanitation, hygiene in Solomon.(WASH)

**Progress:** UNICEF Pacific signed a contribution agreement with the EU on 25 September 2011 to provide technical assistance for the implementation of the Water and Sanitation Project in 50 villages and 20 schools in five provinces. In addition, the Government of Solomon Islands and three UN Agencies (UNDP, UNICEF, and ILO) have partnered to undertake a broad initiative focused on ensuring human security using a multi-sectoral approach with funding from the Human Security Trust Fund, in which UNICEF support focuses on WASH in three provinces. The selection process for 50 communities in five provinces has been completed. The programme implementation modality has been agreed in the inception workshop held in November 2012 with RWSS and MHMS on community engagement, access to water sources, sites survey, design schemes and construction of water schemes. In addition, a PCA was prepared with a local NGO to support a KAP study and social mobilization including capacity building of communities. Under the joint UN project, community selection in three provinces is in its final stages and UNICEF has supported the design of a digital ICT platform in partnership with experienced institutions and local communities on how to manage and use water and sanitation facilities. Implementation was constrained by the limited institutional capacity within RWSS and MHMS for project planning, design, and implementation and access difficulties to the target communities, as well as absence of credible data for planning and delays in recruiting the WASH team. UNICEF is working with MHMS and other partners to strengthen capacities to establish a more effective M&E structure and revised plans have been agreed with all partners to expedite implementation in 2013.

On-track

IR 1430/A0/04/803/011 IR3.1: Vanuatu - WASH (HS31): By 2012, more schools and communities have improved health, economic and human development outcomes related to water, sanitation, hygiene in Vanuatu (WASH)

**Progress:** The WASH component supports and aligns with the Government National Water Strategy and partners with the Department of Geology, Mines and Water Resources, Ministry of Health and Department of Local Authority.

The UNTFHS-funded Joint UN Project on Climate Resilient Communities focused on the initiation of activities, through orientations and community sensitization conducted at national, provincial and area/community levels; identification and formation of implementation structures at national and provincial levels; recruitment of 12 community mobilizers, one from each of the twelve selected sites at the area level. The National Orientation Workshop included all implementing partners, at national and provincial levels, and the 12 community mobilizers and helped clarify understanding of all components, including water security and the role of each of the partners. Detailed assessment of the status of existing water systems and water needs was completed in all of the twelve selected communities. The report identifies gaps and needs in water facilities to guide installation of water systems. In addition, a local technical consultant reviewed and updated current community water management training manuals to be used in trainings to be conducted in all the 12 communities.

Organization of the management structures and preparation of detailed implementation work plans were delayed due to lack of technical human resources and competing work commitments experienced by partners. This resulted in delayed cash requests and funds released to support implementation of activities.

WASH in schools is included in the Education sector plan, which UNICEF contributes to fund together with Pool Partners, and the Ministry of Education oversees, manages and monitors the availability of appropriate water supply facilities in schools. Resources were mobilized and a new WASH proposal was developed for the New Zealand Partnerships for International Development Fund, focusing on expanding Ramp pump water system, an appropriate and affordable technology developed and tested by a local organisation in Tafea province.

Constrained
IR 1430/A0/04/803/012 IR3.1- Regional - WASH (HS32) By 2012, more schools and communities have improved health, economic and human development outcomes related to water, sanitation, hygiene in selected Tier 2 countries.

Progress: Progress in selected Tier 2 countries was constrained by limited funding and staff capacities. In Fiji, UNICEF continued to support improvements to school WatSan with funding from AusAid, as reported under the Education component. Selective support to School WatSan was also discussed with the Ministry of Education in Tuvalu, in the context of the new sector funding agreement approved mid-2012.

Constrained

IR 1430/A0/04/803/013 IR3.2 Kir- Climate Change & DRRM (HS33) (No UNICEF support projects for CC/DRRM in Kiribati)

Progress: UNICEF Pacific signed a contribution agreement with the EU in June 2011 to provide technical assistance for the implementation of the Water and Sanitation Project in the Outer Islands of the Republic of Kiribati. The purpose of the Project is to increase access to safe and sustainable water and sanitation and reduce WASH-related diseases in at least 70 villages in 16 islands of the Gilbert group.

Previously implemented similar projects revealed that one of the bottlenecks for the sustainability of outer island water and sanitation systems is weak community engagement and mobilization. To address this bottleneck and to diminish open defecation and weak handwashing with soap practices, implementation of Community-Led Total Sanitation (CLTS) approach is under way. Since CLTS approach is being introduced to Kiribati, preparation of a training of facilitators on CLTS for the Core Technical Group, a community engagement support group, which includes government and NGOs’ staff members, is on-going.

An initial visit, which involved members of Core Technical Group, has been carried out to the 70 target villages to engage and consult island councils and communities. Island councils have agreed and signed support plans, which cover a list of selected target villages and commitments of the island councils for sustainable WASH interventions in their Islands. During the village consultations, communities were informed on CLTS approach, hence identified natural leaders, WASH Care Takers and village committees who will support the CLTS roll-out at the village level.

Following the EU Result Oriented Monitoring recommendation to facilitate the recruitment of a CLTS facilitator, terms of reference have been developed. However, due to delayed commencement of the Project and other bottlenecks the intended target could not be met in 2012. Most of the bottlenecks have been identified and measures are being undertaken.

On-track

IR 1430/A0/04/803/015 IR3.2 Van- Climate Change & DRRM (HS35): Component 6: Programme support costs.

Progress: This result supports Government policies on water and sanitation. Progress was made on the establishment of management structures at national, provincial and community levels, in partnership with the Ministry of Health, Department of Geology, Mines and Water Resources. The National Project Coordinating Committee which oversees and guides the implementation of the UNTFHS-funded Joint UN Project was activated, and a sub-group of this national team was also established that met on a more regular basis. This resulted in improved coordination and engagement of implementing partners particularly in planning and participation in the detailed project assessment on sanitation in target communities. Collaborative linkages were established with World Vision, ADRA and Live and Learn that are involved in WASH activities in Vanuatu so they could share their experiences in WASH. These linkages will also help to avoid duplications of efforts in the communities.

Twelve Community Mobilizers, Area Council Secretaries and national partners were oriented on sanitation during the national orientation training workshop. Community consultations and orientations were completed in all 12 communities. A detailed sanitation assessment data collection was completed in the twelve sites, with support from the National Statistics Office. Data analysis is in progress.
WASH in schools is included in the Education sector plan, which UNICEF contributes to fund together with Pool Partners, and the Ministry of Education oversees, manages and monitors the availability of appropriate sanitation facilities in schools.

**Constrained**

**IR 1430/A0/04/803/016 3.2 Reg - Climate Change & DRRM (HS36)**

**Progress:** Progress in selected Tier 2 countries was constrained by limited funding and staff capacities. In Fiji, UNICEF continued to support improvements to school WatSan with funding from AusAid, as reported under the Education component. Selective support to School WatSan was also discussed with the Ministry of Education in Tuvalu, in the context of the new sector funding agreement approved in mid-2012.

**Constrained**

**IR 1430/A0/04/803/017 IR3.3 Kir WASH Emergency (HS37)**

**Progress:**

In partnership with regional and UN agencies, UNICEF is supporting an emergency preparedness plan in Kiribati. During the Pacific Humanitarian Team Meeting held in October 2012, it was agreed that a further Emergency Preparedness Planning Regional Meeting will be held in Kiribati to strengthen government capacity for emergency response.

As Kiribati is a drought prone country, clearly defined arrangements of an emergency response plan need to be in place. Both the National Disaster Risk Management Arrangement and Drought Response Action Plan for South Tarawa are not endorsed. The high level emergency coordinating body, the Disaster Council, continued to be inactive. UNICEF conducted a workshop in risk communication for the media and government partners. EWEA exercise has also revealed the weakness in emergency approaches and is geared to address some of those. The preposition of strategic emergency supplies for Kiribati continued to be in Fiji.

**On-track**

**IR 1430/A0/04/803/018 IR3.3- Solomon Islands WASH Emergency (HS38)**

**Progress:** The Government has adopted the National Disaster Risk Management Plan (NDRM Plan), which provides a comprehensive institutional framework to address hazards, risk reduction (including climate change), disaster management, and recovery and rehabilitation at the national, provincial and village levels. At the national level, the National Disaster Management Office (NDMO) oversees the overall coordination of operations in emergencies. For health, MHMS has established a National Emergency Committee including Health, Nutrition and WASH Clusters, which can be activated during emergencies. The RWSS Programme within Environmental Health Department of MHMS is the lead agency for WASH. UNICEF, together with other donors and partners, supports capacity development efforts through the on-going WASH projects. Due to a weak institutional capacity of RWSS/EHD, WASH emergency coordination activities have been limited and sector partner and donor participation has been inconsistent. An Inter-Agency Coordination Workshop for Disaster Management/Humanitarian Assistance in Solomon Islands was held 28-30 November 2012, and redefined the WASH cluster coordination mechanism and roles within the Government and development partners. The roles, linkages and coordination within the different disaster response related agencies within Government need to be further strengthened through clear roles and responsibilities, procedures for information sharing, and coordinated provincial-level activities. In 2013, UNICEF plans to further support RWSS and MHMS in fully operationalizing this mechanism through a complete sector mapping for WASH emergency preparedness and response including adaptation to climate change. As designated WASH Cluster lead, UNICEF is also assuming a greater role in sector coordination, including prepositioning of WASH supplies.

**On-track**

**IR 1430/A0/04/803/019 IR3.3- Van WASH Emergency (HS39)**

**Progress:** Progress was made towards strengthening the national coordination of WASH in emergency, in line with the National Adaptation Plan and the National Disaster Office (NDMO)/Vanuatu Humanitarian Team
The WASH Cluster was established drawing membership from Department of Geology, Mines and Water Resources (Lead agency), UNICEF (Co-Lead), with membership from WASH partners from both the Government and NGOs. A draft WASH TOR was developed by the Cluster team and is awaiting formal approval by the NDMO. The WASH Cluster, along with other cluster teams, tested their skills in responding to emergency situations, during a whole day Tsunami simulation exercise organized by the NDMO/VHT. All clusters including the WASH Cluster were able to experience and understand how to get organized and team up with other cluster teams to respond to a major event.

At the provincial and area council levels, NDMO has agreed to coordinate the establishment and strengthening of Provincial Disaster Committees and Community Disaster Committees.

**IR 1430/A0/04/803/020 IR3.3 Reg- WASH Emergency (HS40)**

**Progress:** During 2012, UNICEF continued to serve as the designated cluster-(co) lead agency in the Pacific for Water, Sanitation and Hygiene; Nutrition (sub-cluster within Health and Nutrition Cluster); Education (co-lead with Save the Children Fiji), and Child Protection (as part of the Pacific Humanitarian Protection Cluster). As a result of support provided by various partners of the Pacific Humanitarian Team, including OCHA and UNICEF, progress was noted in the capacities of NDMOs and various ministries to lead and coordinate emergency preparedness and response, particularly in Fiji, Solomon Islands and Vanuatu. In Fiji, NDMO strongly led the response to the emergency situations created by two serious floods in January/February and March/April 2012 mostly in the Western Division of Fiji. At least 250,000 people were affected by those events, and 15,000 people were displaced to evacuation centres. To support national response efforts, and due to reduced capacity in WASH in the multi-country office at the time, UNICEF requested the deployment of a RedR WASH specialist (January), and of a UNICEF colleague (April). The Fiji WASH cluster finalised its Terms of Reference, and leadership of the MoH was increasingly noted, as demonstrated in the response to Cyclone Evan late December 2012. WASH Cluster coordination activities continued including through active engagement in the Pacific Humanitarian Team annual review and planning meeting, and support to various training events. The office Emergency Response Team was strengthened through a three-day training co-facilitated by the Regional Emergency Advisor. WASH supplies were prepositioned and released in support of communities affected by the floods experienced in Fiji twice in early 2012, as well as by Cyclone Evan which affected Fiji late December. A key bottleneck is the regional focus of the PHT which sometimes lead to weak linkages between national and regional humanitarian coordination structures. While the prepositioning of emergency supplies in Fiji, Vanuatu and Solomon Islands, supported by AusAid and other partners, continued to prove useful to ensure rapid response, further strategic analysis is needed to strengthen the planning and management of emergency stocks.

**PC 2 - Education**

**PCR 1430/A0/04/805 Children aged 3 to 5, especially those most disadvantaged, benefit from improved access to quality early learning and development opportunities.**

**Progress:**

UNICEF brought renewed attention to Early Childhood Education (ECE) sector in the Pacific through the Forum Education Ministers’ Meeting (FEdMM) and was invited by FEdMM to take on the Secretariat during the initial years of the Council.

The Pacific Regional Council met three times in 2012, achieving the following: (i) finalization of terms of reference for the Council; (ii) election of the Executive Board; (iii) determining short-term (2013) and medium-term (2015) goals for the Council; and (iv) reaching an agreement on what comprises quality ECE in the Pacific. A total of nine out of 14 Ministry of Education representatives responsible for ECE attended the full Council meeting demonstrating their commitment in further developing ECE.

UNICEF Pacific. In partnership with the World Bank, initiated an ECE situation analysis project in which the
World Bank’s SABER-ECD tool and UNICEF’s ECE-National Situation Assessment were combined to analyse the ECE situation in Pacific Island Countries. This analysis will support the development of national ECE frameworks. The WB-UNICEF tool has been piloted in Solomon Islands and Vanuatu, with promising results. It is expected that the partnership will expand to other PICs, starting with Tuvalu.

UNICEF Pacific also supported Pacific Island Countries directly. In the Solomon Islands, UNICEF worked in close collaboration with the Ministry of Education and Human Resources Development for the development of an ECE Teacher Handbook. UNICEF also supported the ECE unit of the Ministry of Education in Vanuatu to review their EMIS system for improved ECE data collection, establishing an ECE Teacher Code of Ethics and developing an ECE parenting engagement tool.

Some barriers and bottlenecks continue to impact ECE development in the Pacific. Even though international research shows the importance of the early years in development and investment, Ministries of Education generally do not prioritize ECE in their work plans. In addition, there is limited number of ECE Officials and their capacity to implement and monitor ECE programmes is limited.

Based on the experiences in 2012, future ECE activities will focus on: (i) strengthening the capacity of the Regional Council and ECE Officials; (ii) increased support for communications focusing on ECE advocacy and increased investments in ECE; (iii) developing national ECE situation analysis and frameworks; (iv) strengthening ECE EMIS data; and (v) strengthening access to quality ECE in the most disadvantaged areas through the development of Minimum Quality Service Standards for ECE and the establishment of model ECE centres.

Constrained

**IR 1430/A0/04/805/001** Children aged 3 to 5, especially those most disadvantaged, benefit from improved access to quality early learning and development opportunities in Kiribati.

**Progress:**

The progress of ECE in Kiribati has been constrained over the past few years. While there is now an existing ECE Policy and Curriculum, questions remain with both UNICEF and MOE as to their quality and implementation. According to the Education Digest (2011), GER for ECCE showed an increase from 29 per cent in 2009 to 34 per cent in 2011 for females and from 29 per cent in 2009 to 33 per cent in 2011 for males, with a Gender Parity Index of 1.04; MOE does not currently collect data on NER. Limited financial resources and staff capacity for ECE within the MOE have created barriers to improved/increased teacher training, and a monitoring and evaluation of ECE centres is severely limited. MOE is firmly committed for ownership of ECE centres to remain in communities’ hands; however, as of now there remains a significant gap from MOE in providing appropriate training, guidance and oversight to support teachers and communities in ECE quality improvement.

On-track

**IR 1430/A0/04/805/002** Children aged 3 to 5, especially those most disadvantaged, benefit from improved access to quality early learning and development opportunities in Solomon Islands

**Progress:** MEHRD participated in a pilot partnership of World Bank-UNICEF in which the World Bank SABER (System Assessment and Benchmarking for Education) is used to analyse policy, legislation, and governance. UNICEF’s supplemental tool was used to analyse Workforce, Curriculum, Management, and Community Partnerships in order to provide evidence-based recommendations on the current status of ECE. This Situation Analysis was successfully completed in the 3rd quarter. A Technical Working Group (TWG) with officers from MEHRD, SICHE and Curriculum Development Division and selected ECE teachers in Honiara was established with financial and technical support from UNICEF to draft a locally appropriate ECE Teachers Handbook.

On-track

**IR 1430/A0/04/805/003** Children aged 3 to 5, especially those most disadvantaged, benefit from improved access to quality early learning and development opportunities in Vanuatu.
Progress: UNICEF has been a long-standing supporter of ECE in Vanuatu, in the form of technical assistance and capacity development for the National ECE Coordinator and supporting the development of ECE Programme. The development of an ECE Policy and of the Early Learning Development Standards has placed Vanuatu as the first Pacific country with a finalized, government-approved set of standards for early childhood development.

Other Education stakeholders increasingly recognize the importance of investing in ECE as the key driver to improving learning outcomes. Consequently in 2012, activities aimed at ensuring equitable access for all children to quality preschool were included in Vanuatu Education Road Map (VERM), supported by AusAID, NZAID and UNICEF in a sector-wide approach.

Despite available data on ECE’s net enrolment, there is lack of adequate evidence-based data. SCA was contracted by MOE, through VERM funding, to conduct a baseline study, which will analyse quantitative and qualitative data on the situation of ECE in Vanuatu. UNICEF also provided technical assistance to MOE, through an experienced ECE consultant, to develop an ECE framework. Both the study and framework will be completed by March, 2013. Findings from the study will be used in addressing issues and barriers to ECE enrolment, costing of the framework, and establishing M&E systems to monitor access, quality and management.

Data from the 2010-2011 Education Digest on ECE net enrolment rate at year end of 2011 showed an increase at 40.6 per cent, while net enrolment ratio for 2011 showed male NER increased to 40.3 per cent, with females showing an increase to 40.8 per cent. The gender parity index of 1.01 indicated gender balance enrolment in ECE.

Current challenges to the programme include lack of quality data and inadequate staff at the national and provincial levels.

On-track

IR 1430/A0/04/805/004 Children aged 3 to 5, especially those most disadvantaged, benefit from improved access to quality early learning and development opportunities in the Pacific Region.

Progress:

UNICEF brought renewed attention to the Early Childhood Education (ECE) sector in the Pacific through the Forum Education Ministers’ Meeting (FEdMM) and was invited by FEdMM to take on the Secretariat during the initial years of the Council.

The Pacific Regional Council met three times in 2012, achieving the following: (i) finalization of terms of reference for the Council; (ii) election of the Executive Board; (iii) determining short-term (2013) and medium-term (2015) goals for the Council; and (iv) reaching an agreement on what comprises quality ECE in the Pacific. A total of nine out of 14 Ministry of Education representatives responsible for ECE attended the full Council meeting demonstrating their full commitment in further developing the ECE sector in their respective countries.

There are few ECE Officials in the Pacific and their capacity to implement and monitor ECE programmes is limited, therefore there is need to advocate with Ministries of Education to expand ECE divisions and to strengthen the capacity of ECE Officials.

Constrained

IR 1430/A0/04/805/020 Children aged 3 to 5, especially those most disadvantaged, benefit from improved access to quality early learning and development opportunities in Fiji.

Progress:

UNICEF’s engagement in the Fiji ECE sector has been limited because of funding constraints. However, UNICEF did play a significant role in ECE advocacy during the Hibiscus Festival by organising a ‘Kindy at the
On-track

PCR 1430/A0/04/806 Primary school aged children have access to schools which uphold minimum national quality standards, and which support student enrolment and retention to the end of the primary cycle in four Pacific Island Countries.

Progress:

Whilst the net enrolment rate has slightly increased in the Solomon Islands and Vanuatu, Kiribati has seen a significant decrease in enrolments. Especially boys tend to drop out and further research is required to identify the main barriers for boys to attend daily classes. The net intake rate shows a similar trend, however the gains made by the Solomon Islands are more significant than the other two countries. The survival rate to Year 6 is still under pressure in all three countries, confirming that the focus of the next MCPD should be on improving the quality of education.

The National Minimum Quality Service Standards for Schools, which were adopted in 2011, by the Ministries of Education in the Solomon Islands and Vanuatu, have been used to inform their School Grants Scheme and School-based Management (SBM) programme. UNICEF Pacific has been instrumental in this process and as a result, both Governments now have a clear direction towards improving access to quality education and schools increasingly diversify the use their school grants to achieve the national Minimum Quality Service Standards that are based on the Child Friendly School principles. The completion of the Minimum Quality Service Standards in Kiribati has been postponed on several occasions because of competing demands on Ministry of Education officials.

The Minimum Quality Service Standards in the Solomon Islands and Vanuatu include at least one standard on promoting students’ safety and protection. In 2012, schools gradually started to implement these safety and protection standards and it is expected that the implementation and monitoring of these standards will gain momentum in the next MCPD.

Based on the experiences in 2012, UNICEF Pacific will continue to support Kiribati in finalising and adopting the Minimum Quality Service Standards for primary and junior secondary schools. In addition, UNICEF will work closely with the Ministries of Education in Kiribati, Solomon Islands and Vanuatu to support the implementation and monitoring of these standards. Other Pacific Island Countries such as Tuvalu will also receive support in the development, implementation and monitoring of National Minimum Quality Service Standards for Schools.

On-track

IR 1430/A0/04/806/005 Primary school aged children have access to schools which uphold minimum national quality standards and which support student enrolment and retention to the end of the primary cycle in Kiribati.

Progress: In partnership with the MOE and KEIP, UNICEF provided technical and financial assistance to the development of the Minimum Quality School Standards (MQSS) with a purpose to address mainly quality schools/education. The School Improvement Plan workshops were held in September, 2012 in S.Tarawa to revise, prioritize and finalize the MQSS. The outcomes of the workshop included Means of Verification, indicator showing descriptive instead of progressive measurements and a true & false column was added. The second SIP workshop on Abemama island has been agreed by the MOE and is scheduled for January, 2013. The result of Abemama and S. Tarawa workshops will be compiled to finalize MQSS for approval and endorsement by February 2013.

To comply with WASH standards, including separate facilities for girls & boys, with funding assistance from AusAID, rehabilitation of four selected Primary schools in S. Tarawa commenced in October. In collaboration with the MOE and MPWU, UNICEF provided technical assistance in joint monitoring of rehabilitation of WASH facilities to ensure BoQ and National Infrastructure Standards are followed for quality.
IR 1430/A0/04/806/006 Primary school aged children have access to schools which uphold minimum national quality standards, and which support student enrolment and retention to the end of the primary cycle in the Solomon Islands.

Progress: With the technical and financial support from UNICEF, MEHRD developed a handbook to strengthen the capacity of school management committees on school development planning, and financial management of school grants, as a means of achieving their Whole School Development Standards (WSDS). The WSDS Handbook was officially approved by Permanent Secretary of MEHRD in March 2012. The capacity of MEHRD senior officers and trainers from all education authorities throughout the country was built during a one national week workshop held in Honiara in June 2012. The WSDS Handbook has been introduced to 30 schools in Choiseul and 18 schools in Western provinces and, as a result, School Committees are now able to develop Whole School Development Plans. The MEHRD will roll out the Whole School planning and standards training to the rest of the Solomon Islands in 2013.

Support under the ‘School Betterment’ Project in Western and Choiseul provinces contributed to improve school infrastructure, teacher houses, sanitation and water facilities as well as classroom furniture, completing a further 40 schools in 2012. The MEHRD and the Provincial Education Authorities together with the respective communities will complete the remaining 46 schools by the end of January 2013. In March, a delegation of the UNICEF Executive Board visited two schools supported by UNICEF through the Tsunami Rehabilitation Project in the Western Province, and in July, key donors of the New Zealand National Committee were able to participate in the opening ceremony and visit three schools supported as part of the Betterment Project in Marovo, Western province. The NZ National Committee were pleased to see the good progress made, and have pledged continued support for education in the Solomon Islands. In particular, the New Zealand National Committee has committed to provide solar power to 10 primary schools in 2013.

IR 1430/A0/04/806/007 Primary school aged children have access to schools which uphold minimum national quality standards, and which support student enrolment and retention to the end of the primary cycle in Vanuatu.

Progress: The Ministry of Education in Vanuatu introduced the school grants programme in 2010 with support from the SWAP Pool partners: AusAID, NZAID and UNICEF, and immediately positive results were seen in areas such as net enrolment, retention and survival rate at primary school level. Although showing an increasing trend, these results are still below expectations, suggesting there may be other issues and factors that are preventing the education system to reach the desired outcome.

While the enrolment rate in primary schools has increased, there is concern about the quality of learning, reflected in the declining trends of learning achievements. To address this concern, the Ministry of Education, with technical support of the School Improvement Specialist in UNICEF, developed 15 Minimum Quality Service Standards aimed at addressing the issues affecting quality of education at schools, including safety of students, based on the pillars promoted by the Child-Friendly Schools approach.

In order to roll out the standards, the School-Based Management (SBM) Unit was established in 2012 and the team trained schools and community members how to self-assess and develop school improvement plans to achieve the minimum standards. The SBM programme aims to mobilise teachers, students, head teachers and community members to improve school standards and conditions in order to improve and maximize learning achievements of students. The roll out of the programme is now scheduled for January 2013, starting with Shefa Province.

Data from 2011 Education Digest showed increase in the following areas: NER 1-6: 87.9 per cent, survival rate to year 6: 82.5 per cent, and gender parity index (GPI): .01, moving towards gender balanced participation in primary school.

Among the challenges identified for achieving quality education, some issues of concern include the fact that 60 per cent of teachers are uncertified, untrained and unqualified and education programmes lack proper monitoring mechanism.
On-track

IR 1430/A0/04/806/008 Primary school aged children have access to schools which uphold minimum national quality standards, and which support student enrolment and retention to the end of the primary cycle in the Pacific Region.

Progress:

The Council of Pacific Education (COPE) has supported teacher organizations in Tonga to implement and monitor the South Pacific Teachers’ Code of Ethics together with MOE officials. The Code encourages and inspires teachers to achieve and maintain high standards of ethical and professional behaviour in all their work. In Fiji, COPE has successfully initiated similar activities in Navua District. As a result, schools now integrate the Code of Ethics into their teacher development sessions with the aim to enhance their respective school environments. In addition, COPE has initiated activities with the University of the South Pacific and the Fiji National University to integrate the Code of Ethics in their university curricula for sustainability reasons.

Even though the Monitoring and Evaluation tools of the Code of Ethics were completed in early 2012, COPE monitoring visits have been delayed because of the late release of funds by UNICEF.

An inter-disciplinary team of officials from Vanuatu attended the School Grants Scheme workshop in Jakarta, Indonesia. They have meanwhile returned to Vanuatu and they will do a country analysis of the School Grants Scheme equitability in Vanuatu in the first quarter of 2013.

On-track

IR 1430/A0/04/806/021 Primary school aged children have access to schools which uphold minimum national quality standards, and which support student enrolment and retention to the end of the primary cycle in Fiji.

Progress:

The Fiji WASH in Schools Minimum Infrastructure Standards was approved by the Ministry of Education in December 2012. Meanwhile steps have also been taken to include the standards in the School Information Management System of the MOE.

The NGO Live and Learn Environmental Education (LLEE) Research of Perceptions and Aspirations and the technical assessment by Erasito Consultants have been completed in 21 schools. However, the progress in rehabilitating schools has been slow because of the limited capacity of the NGO to oversee the rehabilitation works. To avoid these issues in the future, it is advised to implement rehabilitation works through the Assets Management Unit of the Ministry of Education in Fiji.

Constrained

PCR 1430/A0/04/807 National numeracy, literacy and life-skills learning outcomes by the end of the primary education cycle

Progress:

There is no data available for Vanuatu, but literacy and numeracy rates have slightly improved in the Solomon Islands. Kiribati on the contrary has seen a sharp decline in English and Kiribati literacy as well as numeracy rates. Together with the Ministries of Education from the Solomon Islands and Kiribati, UNICEF Pacific had planned different interventions such as library development and curriculum development to strengthen students’ literacy and numeracy outcomes. However, due to limited qualified human resources, these initiatives had to be deferred. Further research will have to determine how to best turn the tide in Kiribati and strengthen students’ literacy and numeracy outcomes in the other two Tier 1 countries.

In 2012, UNICEF started to develop a teacher training module on creating and managing a learning environment which is conducive to teaching and learning. The draft module was shared with the Vanuatu
Institute of Teacher Education and the institute successfully used this module to build the capacity of uncertified teachers to improve their classroom environment and to promote alternative teaching methods with the understanding that students have different learning styles.

Future collaboration with the Pacific Association of Teacher Education on the implementation and monitoring of the teacher training module on creating and managing a learning environment which is conducive to teaching and learning is a preferred option and will also promote South-South collaboration in the Pacific.

**On-track**

**IR 1430/A0/04/807/009 National numeracy, literacy and life-skills learning outcomes are achieved by the end of the primary education cycle in Kiribati**

**Progress:** Curriculum Development and Resource Centre developed new Year 1 & 2 syllabuses, Teachers' Guides, Pupils Books and other teaching resources during a two week workshop, with participants including Head Teachers, principals, CDRC officers, KTC Lecturers and MOE officers with financial assistance from UNICEF. As a result, 170 reading books, posters, charts and Big Books were printed and produced for the first time in colour. The production and dissemination of the new Year 1 & 2 syllabuses have now been completed and will be used by Year 1 & 2 in 2013. Technical Assistance from a Year 1 & 2 Literacy Technical Adviser was initially planned to support the development of the above resources, however, due to lack of suitable and available TA, the funds will now be utilized for scoping and sequencing of Year 1 & 2 syllabuses.

**Constrained**

**IR 1430/A0/04/807/010 National numeracy, literacy and life-skills learning outcomes by the end of the primary education cycle in Solomon Islands.**

**Progress:**

Implementation was constrained due to the postponement of the piloting of the language policy by MERHD to 2013, largely due to insufficient capacities of the National Library Services. Activities for 2013 will still focus on improving literacy and numeracy for early grades with improving capacity of the library services and the primary division within MEHRD.

**On-track**

**IR 1430/A0/04/807/011 National numeracy, literacy and life-skills learning outcomes achieved by the end of the primary education cycle in Vanuatu**

**Progress:**

Both the Vanuatu Standardized Test of Achievement (VANSTA), which assesses against curriculum learning outcomes, and the Early Grade Reading Assessment (ERGA), which assesses reading and comprehension, document low levels of students’ literacy and numeracy outcomes. Some of the challenges contributing to this situation are inadequate trained and certified teachers, the influence of mother-tongue, unavailability of books, insufficient parental/community involvement, and sub-optimal instructional time provided by teachers.

A teacher study conducted in 2010 indicated that only 40 per cent of teachers are certified and trained. Hence, in 2012 a mass teacher training was conducted by the In-service Unit of Vanuatu Teacher Institute of Education for teachers in the field. UNICEF supported this training through a module on ‘Creating and managing a Conducive Learning Environment for Teaching and Learning’, which is used in conjunction with the module on Learner-Centred Instruction that showed teachers alternative teaching methods that move away from rote learning, as well as making classrooms safe and secure places for children to learn. These trainings are aimed to make teachers more effective in schools so that the flow-on effect will be evident on the learning outcomes and achievement of students.

UNICEF (as part of the Pool Partners) strategically contributed to the roll out of the Minimum Standards by the School-Based Management Programme in Shefa Province. The programme enabled the team to work...
closely with school teachers, students, head teachers and community members to improve school standards and conditions in order to improve and maximize learning achievements of students.

The next VANSTA will be conducted at the end of 2013 and will provide an opportunity to assess progress towards 2015 targets. It is still not clear when the next EGRA survey will take place.

**Constrained**

**IR 1430/A0/04/807/012** National numeracy, literacy and life-skills learning outcomes by the end of the primary education cycle in the Pacific Region

**Progress:**

Literacy and numeracy rates have slightly improved in the Solomon Islands, but Kiribati has seen a sharp decline in English and Kiribati literacy as well as numeracy rates. Together with the Ministries of Education from the Solomon Islands and Kiribati, UNICEF Pacific had planned different interventions such as library development and curriculum development to strengthen students’ literacy and numeracy outcomes. Due to limited qualified human resources, these initiatives had to be deferred. Further research will have to determine how to best turn the tide in Kiribati and strengthen students’ literacy and numeracy outcomes in the other two Tier 1 countries.

**Met**

**IR 1430/A0/04/807/022** National numeracy, literacy and life-skills learning outcomes achieved by the end of the primary education cycle in Fiji

**Progress:**

The Internal Assessment (IA) training manual for Class 1, 2 & 3 has been completed and has meanwhile been integrated in the Fiji National University (FNU) teacher training curriculum to ensure sustainability. The MoE in Fiji and FNU built the capacity of around 70 per cent of the Class 1, 2 and 3 teachers on Class Based Assessment and as a result, these teachers now feel confident in developing and implementing CBAs.

Because of the decentralization policy of the Government of Fiji, the MOE through their District Education Offices is now well positioned to implement and monitor large scale teacher training activities. Therefore it is advised that the MOEin Fiji will implement and monitor teacher training workshops without FNU support.

**On-track**

**PCR 1430/A0/04/808** ED PCR5: Governance & Systems Programme Section

**IR 1430/A0/04/808/015** IR 20: Governance and Systems

**Ministries of Education in five disaster prone Pacific Island Countries equip children and schools with the knowledge and skills to cope when disasters strike and lead the provision of education services in post disaster settings.**

**Progress:**

UNICEF was instrumental in building the capacity of Education Officials in the Solomon Islands and Vanuatu to prepare an Education in Emergencies (EiE) plan and to address the impact of disasters. In both countries UNICEF provided technical support to support EiE Officer through short-term visits from experts. As a result, policies and strategic plans have been officially endorsed and an EiE Cluster has been activated in both countries with the respective Ministries of Education as Cluster leader and UNICEF/Save the Children as co-lead. In 2012, UNICEF initiated a similar arrangement in Fiji. The initial target of five disaster prone countries was not met, because providing on-the-job support to EiE Officers is highly time-consuming and this was underestimated from the beginning.
Both the Solomon Islands and Vanuatu have a Minimum Quality Service Standard of Schools on disaster risk reduction and response at school level. The EiE clusters in both countries have built the capacity of students, teachers and school community members to increase their knowledge and skills of emergency response procedures through school safety plans and conducting regular drills. UNICEF also provided technical support to the Ministry of Education and Human Resources Development in drafting an EiE handbook: “Guidelines to School Disaster Management Plan” with specific activities to reduce risk and vulnerability at school level.

UNICEF also responded to the floods in Fiji and distributed ECE in Emergency Kits and tarps to 50 ECE centres and playgroups which were damaged by the floods in April 2012. In addition, UNICEF distributed 41 Recreational Kits and 55 School-in-a-Box Kits to schools affected by the floods.

**Progress:**

Education in Emergency (EiE) Policy and Strategic Plan were formally approved by the Cabinet in March 2012. The overarching goals of EiE Policy are to improve disaster risk-reduction and mitigation measures in order to reduce the adverse effect of natural disasters, and to ensure the continuity of accessing quality basic education during and after an emergency. At MEHRD’s request, UNICEF provided technical support in drafting a handbook “Guidelines to School Disaster Management Plan” with specific activities to reduce risk and vulnerability at school level. The Guidelines Handbook was introduced in Makira and Guadalcanal provinces. A total of 34 head teachers, deputy head teachers and provincial education officers were trained on the use and practise of the Handbook in Makira Province. For Guadalcanal 31 head teachers, school principals and education officers have participated. Participants have already filled in the School Disaster Preparedness Templates for their respective schools and have carried out drills at schools. Provincial leaders of both provinces have highlighted the importance of such training as it contributed immensely to the DRR efforts.

**On-track**

**IR 1430/A0/04/823/016 MEHRD equips children and schools with the knowledge and skills to cope when disasters strike and lead the provision of education services in post disaster settings in the Solomon Islands.**

**Progress:**

UNICEF has been instrumental in bringing Education in Emergency (EiE) to the forefront through a Pacific capacity-building workshop in Port Vila in 2009 for selected vulnerable Pacific countries: Fiji, Kiribati, Solomon Islands, and Vanuatu. This resulted in the development of the draft EiE Policy and Plan for Vanuatu. To ensure the implementation of this Plan, MOE requested UNICEF to initially support a dedicated staff designated as the EiE National Coordinator. In 2011, continued capacity-building was supported through participation in the Pacific regional EiE training workshops for Coordinators and Cluster leadership training in Fiji, to further enhance their knowledge and capacity in these areas. Moreover, UNICEF provided technical support and advice to the MOE EiE Officer through short-term visits from EiE experts.

In 2012, with UNICEF’s advocacy, MOE has agreed to formalise the position of the EiE Officer into its new structure which will come into effect in 2014. Furthermore an EiE Cluster has been activated, with MOE as Cluster lead and co-lead by UNICEF and Save the Children. The Cluster’s working document is the ‘EiE Plan’ which is also aligned with the three goals of Vanuatu Education Road Map. The EiE Cluster uses the ‘preparation phase’ of the Plan as a guide for their activities when they go out to the provinces and train students, teachers and school community members so they have an increased knowledge and skills of emergency response procedures, and importance of having school safety plans and drills.

To date, the Cluster Team has conducted contingency training for six provincial offices and school safety training/drill with head teachers in four out of six provinces. Based on this experience, the Cluster has developed a more systematic process for the province-level trainings, which will be implemented from
January 2013, starting with Torba province.

IR 1430/A0/04/823/018 Ministries of Education in five disaster prone Pacific Island Countries equip children and schools with the knowledge and skills cope when disasters strike and lead the provision of education services in post disaster settings in the Pacific Region.

Progress:

UNICEF has been instrumental in building the capacity of Education Officials in the Solomon Islands and Vanuatu to prepare an EiE plan and to address the impact of disasters. In both countries UNICEF provided technical support for Education in Emergencies (EiE) Officers through short-term visits from EiE experts. As a result, EiE policies and strategic plans have been officially endorsed and an EiE Cluster has been activated in both countries with the respective Ministries of Education as Cluster lead and UNICEF/Save the Children as co-lead. In 2012, UNICEF initiated a similar arrangement in Fiji, which proved efficient particularly during the two flood related emergencies which affected the country early in the year. This strengthened Education Cluster also demonstrated capacities for rapid assessment and response in the wake of cyclone Evan later December, and is generally considered as one of the most performing clusters in Fiji.

IR 1430/A0/04/823/019 The MOE equips children and schools with the knowledge and skills to cope when disasters strike and lead the provision of education services in post disaster settings in Fiji.

Progress:

UNICEF has been instrumental in building the capacity of Education Officials in the Fiji to prepare for and address the impact of disasters. As a result, the Fiji Education Cluster has been activated with the respective Ministries of Education as Cluster lead and UNICEF/Save the Children as co-lead. This arrangement proved highly efficient particularly during the two flood related emergencies which affected the country in early 2012. This strengthened Education Cluster also demonstrated capacities for rapid assessment and response in the wake of cyclone Evan later in December and is generally considered as one of the most performing clusters in Fiji.

PC 3 - HIV and AIDS

On-track

PCR 1430/A0/04/813 By 2012, Governments of five focus countries in Fiji, Solomon Islands, Kiribati, Vanuatu and Tuvalu have and use sound strategic information for effective HIV programming, to reduce vulnerability to and impact of HIV and AIDS among the most at risk population and most vulnerable populations, (with a special focus on children and women).

Progress:

UNICEF Programme continued to champion discussions on the need to have recent HIV relevant data to inform both regional and national response for PICs. Ten countries were supported to compile data, and submit their national report for Global AIDS reporting on time, with nationally validated STI and HIV data, and relevant information about their national response.

Since most of surveillance data is more than four years old, consensus was reached that at least five countries urgently need to conduct Second Generation Sentinel Surveillance and behaviour surveillance studies. UNICEF is a key partner in the task force established to coordinate, provide strategic guidance, and assist countries with resource mobilisation, design and quality assurance of surveillance studies. These studies will contribute towards a better understanding of key affected populations, and barriers limiting their optimum access to HIV services. Partners agreed to continue mobilizing resources from the five countries (Vanuatu, Kiribati, Fiji, Samoa, and Solomon Islands), drawing from their allocations from Global Fund, this will allow SGSS to be conducted in the first six months of 2013. Partners will contribute to support Solomon
Islands, which is not included in this tranche of the Global Fund resources.

Through UNICEF support, and in collaboration with other UN and regional agencies, Fiji developed a costed National Strategic Plan, which was endorsed by the National AIDS Board in July 2012. The Plan articulates key priority areas, targets and effective strategies in Fiji’s context, including scaling-up HIV testing and counselling, and PPTCT (prevention of parent-to-child transmission of HIV) and HIV prevention for adolescents and youth, including YKAP. Similarly, in November 2012, Solomon Islands finalized its National Strategic Plan (NSP) for 2012-2016, which provides strategic directions (with M&E framework) for HIV programming. Kiribati and Vanuatu were also supported to review their current National Strategic Plans. Findings from these reviews are facilitating the current development of their next 5 years National Strategic Plans.

UNICEF continued to advocate the need for countries to understand the contribution of high-risk populations to the HIV epidemic. Solomon Islands, Vanuatu and Kiribati have conducted mapping of these groups in prior years, and Fiji expressed interest for a similar study. Consensus on the scope of the study was reached, and the Ministry of Health made commitment to make funds available to undertake this activity in 2013. The good performance of the programme component is a result of the sound working relationship among regional partners, with clear divisions of responsibilities.

**On-track**

**IR 1430/A0/04/813/001** by 2012, Government of Kiribati uses sound strategic information for effective HIV programming, to reduce vulnerability of girls and boys, women and men to and impact of HIV and AIDS

**Progress:** UNICEF in collaboration with MHMS, other stakeholders and regional partners reviewed the HIV National Strategic Plan. A final draft was produced. The NSP focuses on five priority areas:
1. Prevention of HIV and STIs, safe blood supply, and occupational health and safety.
2. Community leadership and an enabling environment to reduce stigma and discrimination.
3. Diagnosis, treatment and support for people living with HIV.
4. Quality diagnosis, management and control of STIs.
5. Strengthening, management and control of STIs.

With UNICEF support, counterparts built their capacity through a study tour to Mongolia. The participants learned about programme management, counselling and testing systems which they are interested to implement in Kiribati especially the Rapid Test. A TA to support implementation will be recruited by UNICEF in 2013.

The Global AIDS Response Progress Report highlighting gaps and opportunities was produced with the support UNICEF and other stakeholders. Its recommendations focus upon strengthening of policies and programming, technical support and capacity building, advocacy, monitoring and evaluation. SGSS was not undertaken due to funding constraints.

**Constrained**

**IR 1430/A0/04/813/002** By 2012, Government of Solomon Islands has and uses sound strategic information for effective HIV programming, to reduce the vulnerability of girls, boys, women and men to the impact of HIV and AIDS

**Progress:**

In partnership with other UN agencies and SPC, the Programme continued to support Solomon Islands in collecting and analysing strategic data for effective HIV programming. The Country Report for the Global AIDS response reporting was developed through a series of validation workshops and provides essential data on STI and the HIV situation, and information about the national response in the last two years. UNICEF provided technical support to finalize the National Strategic Plan for 2012-2016, which reflects principles of gender equity and includes an M&E framework identifying gender disaggregated data and indicators. Recognizing that the last round of surveillance studies in Pacific Island countries was conducted in 2008, consensus was reached at the regional level to support six countries in the Pacific, including Solomon Islands, in conducting Second Generation Sentinel Surveillance (SGSS) studies in 2013. A concept note for
conducting the studies was developed and endorsed by relevant stakeholders and UNICEF is a key member in a task force established for coordinating and providing strategic guidance. While pre-study preparations commenced in the 4th quarter, partners have agreed to mobilize resources for the SGSS studies from the funds allocated to the respective countries under the Global Fund supported projects.

IR 1430/A0/04/813/003 By 2012, Government of Vanuatu has and uses sound strategic information for effective HIV programming, to reduce vulnerability of girls, boys, women and men and to reduce the impact of HIV and AIDS

Progress: In 2012 UNICEF continued to advocate for the need to use recent HIV data to inform the Vanuatu HIV national response. Noting that the last surveillance data for Vanuatu was generated four years ago, UNICEF successfully advocated to other UN and regional agencies for Vanuatu to conduct a Second Generation Surveillance Study (SGSS). UN agencies and other regional agencies agreed to jointly support SGSS in 2013.

Through UNICEF support, Vanuatu successfully completed and submitted nationally validated STI and HIV data for the Global AIDS Progress Report. The technical assistance provided facilitated the HIV Unit to articulate key issues constraining the national STI and HIV response, and to compile, analyse, and report health utilization data in relation to PPTCT services, Youth-friendly health services, and HIV prevention amongst adolescents and youth.

UNICEF supported the review of the current National Strategic Plan, and findings will contribute to the development of the next five year National Strategic Plan, which will be harmonized with the current Reproductive Health Plan. The good working relationship among regional partners, with clear division of responsibilities, has allowed achievement of this IR.

IR 1430/A0/04/813/004 By 2012, Government of Fiji has and uses sound strategic information for effective HIV programming, to reduce vulnerability of girls, boys, women and men and to reduce the impact of HIV and AIDS

Progress: In 2012, the Programme continued to collaborate with other UN agencies and SPC to support generation, analysis and use of data to support HIV national response in Fiji, which completed and submitted the Global AIDS Progress Report with nationally validated STI and HIV data and national response. Support was provided to develop a National Strategic Plan, which has been finalized, costed and endorsed by the National AIDS Board. The Plan articulates key priority areas, targets and strategies for scaling up HIV testing and counselling, PPTCT and HIV prevention for adolescents and youth including YKAP.

While Fiji has expressed interest in further studies to understand the key high risk populations (including adolescents and youth), the Ministry of Health has yet to make the necessary financial resources available. Agreement on the scope of study was reached, and a representative from Ministry was sponsored to attend the experts meeting in Bangkok, where experiences from six other countries were shared.

UNICEF continued to champion discussions on the need to have recent HIV relevant data to inform both regional and national response. Since most of surveillance data is four or more years old, consensus was reached that the region needs to support a new set of Second Generation Sentinel Surveillance and behaviour surveillance studies. A concept note for conducting the Second Generation Sentinel Surveillance was developed and endorsed by relevant stakeholders, and a task force for providing strategic guidance was established, with UNICEF being one of the members. Although initially there had been an indication that Response Fund will support conducting SGSS, this was overturned during the June Response Fund Committee Meeting. Partners agreed to continue mobilizing resources from the seven countries (including Fiji), drawing from their allocations from Global Fund as this would allow conducting SGSS in the first six months of 2013.
IR 1430/A0/04/813/005 By 2012, use of sound strategic information for effective HIV programming, to reduce vulnerability of girls, boys, women and impact of HIV and AIDS is increased in the Pacific region in partnership with UNAIDS and SPC.

On-track

IR 1430/A0/04/813/006 By 2012, Government of selected Pacific Island countries use sound strategic information for effective HIV programming, to reduce vulnerability of girls, boys, women and men to and impact of HIV and AIDS.

Progress: UNICEF Programme has championed discussions on the need to have recent HIV relevant data to inform both regional and national response. Ten countries were supported to compile data, and submit their national reports for Global AIDS reporting on time.

Since most of surveillance data is four or more years old, consensus was reached that the region needs to support a new set of Second Generation Sentinel Surveillance and behaviour surveillance studies. A concept note for conducting the Second Generation Sentinel Surveillance was developed and endorsed by relevant stakeholders and a Task Force for coordinating and providing strategic guidance was established, with UNICEF being one of the key players. Although initially there had been an indication that Response Fund will support conducting SGSS, this was overturned during the Response Fund Committee meeting in June. Attempts to mobilize resources from Response Fund were unsuccessful. Partners agreed to continue mobilizing resources from the seven countries (Vanuatu, Kiribati, Fiji, Palau, Samoa, FSM and Tonga), drawing from their allocations from Global Fund, which will allow conducting SGSS in the first six months of 2013.

To better understand the epidemic, a comparative analysis of HIV epidemic trends in Papua New Guinea and some selected countries in Pacific had been planned for 2012. While consensus has been reached and TORs developed, this study was postponed to 2013.

On-track

PCR 1430/A0/04/814 HIV PCR 2: HIV Related Health Services men, women and children in Fiji, Solomon Islands, Kiribati, Vanuatu and Tuvalu have access to HIV prevention, treatment, care and support services.

Progress: UNICEF continued to focus its support in strengthening and scaling-up HIV testing and PPTCT services in the Pacific region. Noteworthy, all four focus countries (Solomon Islands, Kiribati, Fiji, and Vanuatu) have embraced the use of rapid HIV tests, with confirmation within the country. Two countries have commenced point-of-care HIV testing, limited to a few selected health facilities. Shared lessons facilitated countries to plan better for a faster scale-up of services in 2013.

Scale-up of HIV testing and PPTCT varies in the different counties, with Fiji leading the way with the adoption of point-of-care HIV testing in selected health centres, decentralization of HIV testing and counselling to reach subdivision hospitals, and adoption of Option B+ treatment protocol for PPTCT.

Through capacity building, provision of supplies, and strengthening data management with the integrated ANC/PPTCT reporting forms, Fiji and Kiribati have been supported to conduct their national assessments of barriers to accessing PMTCT services. Determinants have been explored, and results of these assessments have been used to develop operational plans (Fiji and Kiribati) to eliminate congenital syphilis and paediatric AIDS. Activities to address these barriers have been articulated, and will start in 2013. UNICEF facilitated knowledge sharing between three countries through a regional meeting.

While the programme supported the development of national guidelines for the provision of youth-friendly health services in Fiji, competing priorities and human resource constrained achieving planned results for youth-friendly health services in the region.

On-track

IR 1430/A0/04/814/007 HIV IR8: Sol- HIV Related Health Services men, women and children in Solomon Islands have access to HIV prevention, treatment, care and support services.
**Progress:** UNICEF worked with the MHMS and conducted the assessment on elimination of paediatric AIDS and congenital syphilis. An operational plan was developed after the assessment, which was reviewed by MHMS and partners, amended based on recommendations, and is now ready for endorsement by Senior Management Committee in their next meeting, by end of 2012. The plan targets: Elimination of new paediatric infections by 2015, Virtual elimination of parent to child transmission of HIV and Reduction of the incidence of congenital syphilis to <0.5 cases/1000 live births. The plan will be included in the next programme cycle.

UNICEF has successfully supported the development and printing of YFHS Guidelines for holistic guidance for YFHS in Kiribati. This document is now ready to be launched during World AIDS Week.

**Constrained**

**IR 1430/A0/04/814/008 HIV IR8:Sol- HIV Related Health Services for men, women and children in Solomon Islands have access to HIV prevention, treatment, care and support services.**

**Progress:**

Through UNICEF support, progress has been made in scaling-up HIV testing and counselling and PPTCT services. The National HIV Testing and Counselling Operational Guidelines were developed and finalized in consultation with members of the HIV Testing and Counselling Technical Working Group, emphasizing on provider-initiated HIV testing and counselling, and shifting from the laboratory-based HIV testing services to point-of-care HIV testing. To scale-up quality of HIV testing and counselling services in the selected pilot sites, capacity of 38 service providers from Honiara city, Western and Choiseul provinces on HIV testing and counselling, point-of-care HIV testing, PPTCT, and data management was strengthened. Also supplies (rapid HIV test kits, cold boxes, gloves, thermometers, hand sanitizers) were provided to the Ministry of Health and the National reference Laboratory. As result of the above mentioned activities, the use of rapid HIV test screening has begun in 7 clinics (2 clinics in Honiara, 1 in Choiseul Province and 4 in Western Province). Further scale-up was constrained due to competing priorities facing the staff of MHMS. Also, the National HIV Testing and Counselling Operational Guidelines and the revised PPTCT Policy are yet to be endorsed by the National Health Executives Committee. Introduction of HIV Testing and Counselling Operational Guidelines and pilot testing contributed to empower girls and women to demand health services. MHMS was supported to use revised HIV data collection tools and framework for more quality monitoring. While data collection started in March, collection of data for the period between July-September is constrained. Planned work on Communication for Development to promote services could not be undertaken due to human resource constraints. Consensus reached with MHMS to postpone this activity to 2013.

**On-track**

**IR 1430/A0/04/814/009 HIV IR9:Van- HIV Related Health Services for men, women and children in Vanuatu have access to HIV prevention, treatment, care and support services.**

**Progress:** Through UNICEF support, Vanuatu has scaled-up HIV testing and PPTCT services and an additional nine facilities now provide HIV testing and counselling and PPTCT services. The increased demand for services led to challenges, as the laboratory personnel was unable to cope with the increased numbers, while attending to their normal routine work. However, this has been rectified. Scaling-up of services faced operational challenges, including reluctance to accept global HIV counselling protocols and confidentiality issues, which were addressed through training for service providers, and supervision. The programme has collaborated with SPC to ensure that the demand of HIV test kits and other supplies are met.

Achieving results relating to adolescents and youth continues to be a challenge since the post of National Adolescent Health Coordinator has been vacant for a long period, and the HIV Coordinator has other competing priorities, often resulting in non-implementation of youth-related activities. The Ministry of Health has given assurance that the post of Adolescent Health Coordinator will be filled in 2013.

**On-track**

**IR 1430/A0/04/814/010 HIV IR10:Fij- HIV Related Health Services men, women and children in Fiji have...**
access to HIV prevention, treatment, care and support services.

**Progress:**

The Programme continued to provide support to the MOH in strengthening PPTCT and HIV testing counselling services. Following the revision of National PPTCT guidelines and adoption of the WHO recommended Option B+ treatment protocol, and simplification of ART regimen, UNICEF supported a national assessment of barriers to accessing PPTCT services. Results of the assessment are being reviewed and discussed by stakeholders, and will be used to develop an operational plan to eliminate congenital syphilis and paediatric AIDS. In order to scale up services, Fiji has decentralized HIV testing and counselling services beyond the divisional hospitals and STI hub centres, to reach sub-divisional level. UNICEF also supported Fiji to commence HIV screening at health centre level using rapid tests, with confirmation at sub-divisional hospital. (Keyasi Health Centre and Sigatoka Sub-Division Hospital). Experience from Keyasi will support the establishment of point-of-care HIV testing in remote and rural health clinics where laboratory services are not available. To improve the quality of ANC and PPTCT collection and analysis, the programme has supported Fiji to adopt new data collection registers for use for integrated ANC/PPTCT services, starting with CWM hospital.

A technical working group of key stakeholders (UNFPA, IPPF, MOH, UNICEF, Reproductive and Family Health, Fiji Red Cross, Fiji Nursing Association) was established to provide overall guidance and technical support for the development of national guidelines for the provision of youth friendly health services. An assessment was conducted in seven randomly selected youth-friendly health service facilities to obtain comprehensive information regarding youth-friendly health services (YFHS) provision strengths, weaknesses, and gaps. Findings of the assessment informed the development of national minimum standards and guidelines for service provision as well as M&E. Competing priorities of the Adolescent Health Coordinator has constrained conducting key training session to orient service providers to these guidelines.

**On-track**

IR 1430/A0/04/814/012 HIV IR12: Regional- HIV Rltd Health Srvcs Island countries most at risk and most vulnerable men, women and children have access to HIV prevention, treatment, care and support services.

**Progress:** UNICEF provided support in strengthening and scaling up HIV testing and counselling services in the Pacific region, with UNICEF providing technical support in reviewing HIV testing algorithm(s) for different countries, and facilitating sharing of knowledge. UNICEF facilitated a regional workshop where participants from Fiji, Solomon Islands and Kiribati, the three countries which have been more focused on scale-up of HIV testing and PMTCT, shared their experiences. All these countries have commenced point-of-care HIV testing, although limited to few selected health facilities, and have embraced the use of rapid HIV tests, with confirmation in the country. The lessons shared in the meeting allowed countries to develop better and more realistic plans, to be implemented in the next two years. Countries agreed to use the increased service utilization data resulting from use of same day HIV test results, to advocate for more allocation of domestic resources to HIV testing at antenatal health services, STI clinics and TB wards.

**On-track**

PCR 1430/A0/04/815 By 2012, most at-risk and most vulnerable boys and girls, men, women and their partners in Fiji, Solomon Islands, Kiribati, Vanuatu and Tuvalu engage in HIV-risk reduction behaviours at all times (including during emergencies).

**Progress:** UNICEF continued to provide support to the country-specific adolescent health development programmes to ensure that most-at-risk adolescents and youth in PICs benefit from quality information and services to reduce their HIV risks and vulnerabilities. Ministries of Health in Kiribati and Fiji were supported to develop key communication messages that support adolescent and youth to access services. Messages were developed based on an analysis of determinants of barriers to adolescents’ access to services. Further analysis of determinants will conducted in 2013.

UNICEF has forged strong partnerships with UNFPA, UNESCO, SPC and CSOs to strengthen youth-related interventions, for both in-school and out-of-school youth, including national peer education programmes. Through these partnerships, a need for re-examining the gaps (and success) of inclusion of sexual
reproductive health related information and education materials in both formal, and informal, education sector in the PICs was identified. UNESCO, UNFPA, UNICEF agreed to develop a joint UN programme on ‘Education for Life’, for selected Pacific island countries, and a concept note has been prepared. UNICEF continued to support strengthening of national monitoring systems in order to facilitate tracking progress in making information and services accessible to adolescents and youth. The Programme’s ambitious plans to support North Pacific countries on youth related activities were not achieved. Plans were impacted by the closure of the Pacific-wide joint programme on adolescent health (‘Regional Adolescent Health and Development Programme’), since no CSOs could be identified to undertake these activities in Northern Pacific Countries. Alternative ways of future support for the North Pacific are being explored. While the region had selected indicators with clear means of verification, conducting SGSS depend on availability of funds. All countries have had at least one SGSS conducted which provided a baseline for key indicators. Countries had planned to conduct SGSS during the second half of 2012 to document progress. However, due to financial constraints. All postponed this activity to 2013. Thus, latest data for selected indicators is unavailable.

**IR 1430/A0/04/815/013 HIV IR13: Kir -Most at-Risk Boys & Girls, boys and girls, men, women and their partners in Kiribati engage in HIV-risk reduce behaviours at all times including during emergencies.**

**Progress:** Point-of-care testing is ongoing in two clinics in Tarawa in collaboration with MHMS. In addition, a plan and initial preparation work has been completed for development of Counselling and Testing Policy Guideline. The draft will be ready by end of 2012.

UNICEF is supporting PPTCT as part of ANC in 10 clinics and electronic and paper based data recording tools in those locations by involving MHMS Statistics unit. Currently they are in the process of formulating a database specific for HIV and STI information. Data for pregnant mothers who were tested for HIV and received results so far (2012): pre testing (595), post testing (503) services; 14 were teenagers, of which 5 tested positive for chlamydia. Refreshers’ training for 10 health workers and three peer educators was conducted together with the Medical Assistant in Abemama. YFHS has been piloted in two clinics in South Tarawa and one in Abemama.

**ASRH Information coverage for 3 primary schools and 1 JSS (10-19 years)**

<table>
<thead>
<tr>
<th>Females</th>
<th>Males</th>
<th>Services</th>
</tr>
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<tbody>
<tr>
<td>231</td>
<td>182</td>
<td>NIL</td>
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</tbody>
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**Evening outreach: (10-24 years)**

<table>
<thead>
<tr>
<th>Females</th>
<th>Males</th>
<th>Services</th>
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</thead>
<tbody>
<tr>
<td>482</td>
<td>313</td>
<td>NIL</td>
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</table>

**IR 1430/A0/04/815/014 By 2012, most at-risk and most vulnerable boys and girls, men, women and their partners in Solomon Islands engage in HIV-risk reduction behaviours at all times including during emergencies.**

**Progress:** As result of two consultative meetings supported by UNICEF, the National Peer Education Manual for peer educators was finalized by the National Technical Working Group. The development of the National Manual took longer than expected due to competing priorities of the TWG members. Therefore, the national training of peer educators was postponed to the 1st quarter of 2013. Activities to establish quality YFHS in Solomon Islands continued to be supported by the Programme. Following the revision and endorsement of YFHS guidelines, 14 service providers have been trained and have capacity to provide quality youth-friendly services. Activities to establish Vonunu Clinic in Western Province as a model Youth-Friendly Health Service took place including a seven day attachment training of the Vonunu YFHS focal person at SIPPA YFHS Honiara. In addition, in order to monitor and improve the quality of services, M&E tools have been introduced. However, data collection remains a challenge due to human resource issues. Solomon Islands have struggled for a while having no focal person for adolescent health within MHMS. This issue of data has been followed-up and necessary support is being provided to MOH to address the gaps in monitoring and reporting. Planned work on Communication for Development (C4D) to promote services could not be
undertaken due to recruitment constraints. The consultant recruited for this activity subsequently declined the consultancy, leaving insufficient time to hire another consultant. Agreement has been sought from MHMS to undertake this activity in 2013.

**On-track**

**IR 1430/A0/04/815/015** By 2012, most at-risk and most vulnerable boys and girls, men, women and their partners in Vanuatu engage in HIV-risk reduction behaviours at all times including during emergencies.

**Progress:** UNICEF continued to collaborate with Vanuatu Family Health Association, a local NGO that provides innovative SRH and HIV services to adolescents and youth through the use of a hotline. Through UNICEF support, three staff members managing the hotline benefitted from a study tour to New Zealand to learn from hotline services operating there. To create demand for services, three radio spots were broadcast daily for two months through the national radio station. This led to increased number of calls requesting information. From the month of January to September, a total of 2092 clients were served (1298 males and 794 females). Most calls made to the hotline request information on reproductive health issues and counselling support on relationships. There was no significant increase in referral to health services. A final evaluation on the effectiveness of services is planned to be conducted in 2013.

The Ministry of Health was supported to establish a nationwide monitoring system, tracking progress in making information and education accessible to adolescents and youth. Data collected from stakeholders engaged in peer education outreach activities indicate that during the year, trained peer educators disseminated information and provided education to their peers in Efate Island - Port Vila area, Malekula Island - Lakatoro and Lamap, Ambae Island - West Ambae Nduindui, and East Longanna and Bank Island – Sola area. A total of 1150 young people were reached.

Overall, the achievement of this IR is on track, although insufficient human resources at national level continue to be a challenge.

**On-track**

**IR 1430/A0/04/815/016** By 2012, most at-risk and most vulnerable boys and girls, men, women and their partners in Fiji engage in HIV-risk reduction behaviours at all times including during emergencies.

**Progress:**

UNICEF continued to support the Adolescent Health Development Programme to ensure that adolescents and youth in Fiji benefit from quality information and services to reduce HIV risks and vulnerabilities.

The programme supported the Ministry of Health to develop key communication for development messages to encourage adolescent and youth to access services. A desk review and assessment at health facilities and communities was conducted and findings revealed that there is a need to develop targeted messages and strengthen the inter-personal communication skills of service providers and community members so that they effectively support youth to access services. Two service providers’ locations, (Our Place in Suva and Korovisilou Medical Centre) were selected to model implementation of communication for development messages.

Strong community systems and structures, and willingness by community members to support HIV prevention programs for youth, including YKAP, provide an opportunity to scale up HIV prevention interventions. In addition, UNICEF forged stronger partnerships with UNFPA and other national stakeholders to strengthen current peer education programmes through supporting a national peer education forum to review and strengthen planning, monitoring and reporting of programme activities and specifically, programmes for young key affected populations. Strong partnerships at national level ensured a collaborative effort in reducing HIV risks and vulnerabilities for adolescents and youth.
Constrained

IR 1430/AO/04/815/018 By 2012, most at-risk and most vulnerable boys and girls, men, women and their partners engage in HIV-risk reduction behaviours at all times including during emergencies.

Progress:

According to the original agreement of the Response Fund, the programme had ambitious plans to support North Pacific countries on youth related activities. However, since the closure of the AHD Programme it became difficult to transfer funds. This was discussed with the donor providing support to achieve these results, and the funds have since been reprogrammed to support Kiribati and Solomon Islands. Discussions in mid-year and end of programme reviews have indicated the need for inclusion of sexual reproductive health related information and education materials in both formal and informal education sector. Discussion with UNFPA, UNESCO and UNAIDS led to an emerging joint programme on 'Education for Life' within schools in selected countries. While UNESCO shared an assessment report on five countries (Nauru, Niue and northern countries), UNICEF plans to conduct a study to review the education sector’s response to HIV and AIDS over the past five years for the three focus countries, and Tuvalu and Samoa. Terms of reference were developed, and this study will be conducted in 2013. A joint UN concept note on ‘Education for Life’ initiative is being finalised and will be presented to the UNCT for endorsement.

PC 4 - Child protection

On-track

PCR 1430/AO/04/809 Children are increasingly protected by legislation and are better served by justice systems that protect them as victims, offenders and witnesses.

Progress:

Good progress was made in compliance of relevant laws with CRC/Optional Protocols. Consultative processes for amending/drafting laws were undertaken in Fiji, Kiribati, Vanuatu and Solomon Islands with a wide range of stakeholders including government and civil society participating. In Fiji four decrees have been drafted: Child Care and Protection, Adoption, Community Based Corrections, Child Justice, and submitted to the Solicitor General for finalization, endorsement and promulgation. In addition Fiji signed the Hague Adoption Convention 1st June. Kiribati has drafted the new Child Young People and Family Welfare Bill which was submitted to the Cabinet for discussion and approval. Community consultations on the Juvenile Justice Law were undertaken. Kiribati’s Ministry of Education in collaboration with the Ministry of Social Affairs and Attorney General’s office has drafted a new law on Non-Violent Discipline in School and this law is expected to be enforced in all schools to eradicate corporal punishment. In Vanuatu the process of law reform was delayed due to the need to establish a law reform framework. This process is now completed and discussions underway on reform of identified laws. Solomon Islands made significant progress with the Child and Family Welfare Bill endorsed by the National Advisory Committee on Children and finalized for submission to Cabinet. Policy development is underway in Kiribati, Vanuatu and Solomon Islands with draft policy to support implementation of the Bills once enacted. Draft laws comply with international standards but are yet to be promulgated.

Progress was also achieved in strengthening the justice system’s ability to protect children as victims, offenders and witnesses. New Standard Operating Procedures (SOPs) have been finalized for police in Kiribati, Vanuatu and Fiji and Police trained on handling cases involving children. Better monitoring and reporting of children’s cases along with improved collaboration between police and other stakeholders (social welfare and NGOs) has been noted in particular in Kiribati and greater engagement of police in crime prevention, diversion and community policing has been observed in Fiji, Vanuatu and Kiribati. Recording and strengthening of data on children in contact in the law was strengthened in Kiribati through expansion of E-data for all Police stations of South Tarawa. In Vanuatu Family Protection Units were established in four provinces up from one unit in Port Vila. In Solomon Islands limited progress was made due to a shift in the
priority and focus of the implementing partner.

On-track

IR 1430/A0/04/809/001 Children are increasingly protected by legislation and are better served by Justice system that protects them as victims, offenders and witnesses

Progress: Good Progress has been made in relation to strengthening compliance of the legal and policy framework with international norms and standards. In particular the Child and Youth Family Welfare Bill (CYPFW) has been endorsed by cabinet and submitted to Parliament in December for its first reading. It is expected to be passed in the first session on Parliament in 2013. A policy document on CYPFW has been endorsed and Child Protection Standard Operating Procedures (SOP) and training manual for community police have been drafted and submitted to the Commissioner of Police for further discussion and endorsement.

As a result of actions to strengthen child sensitive justice, more than 70 per cent of young persons in conflict with the law have been diverted from the formal justice system and a new diversion policy has been drafted.

Capacity strengthening of partners continues with the target of 50 per cent of stakeholders able to apply and implement Child Welfare and Protection Laws and 50 per cent of stakeholders to receive training in 2012 met.

Review of progress against the baseline study of 2008 was postponed to 2013 and therefore only estimates against targets can be made. The CYPFW Bill, policies and SOPs developed are fully compliant with international standards and norms but the Bill is not yet enacted. In addition child protection has been incorporated into the Kiribati Development Plan 2012-2015. With these results it is estimated that targets of 70 per cent full compliance have been met, however, results will be verified by the child protection progress review in 2013. The SOPs in the justice sector are greatly enhancing diversion and protection of children in the justice system although progress towards targets is an estimate.

On-track

IR 1430/A0/04/809/002 Children are increasingly protected by legislation and are better served by Justice system that protects them as victims, offenders and witnesses

Progress: Significant progress has been made with the Child and Family Welfare Bill endorsed by the National Advisory Committee on Children (NACC). The Bill increases alignment of national laws with relevant CRC provisions. Multi-sectoral technical input and sector reviews led to finalization of the Bill that will go to Cabinet in early 2013. An Advocacy Plan for high level engagement with Cabinet members was rolled out resulting in in-principle support for the Bill. The cabinet paper is drafted and it is anticipated that the Bill will be tabled in Parliament in 2013.

UNICEF provided technical support to the Family Protection Bill Legislative Task Force to ensure inclusion of child protection concerns, now reflected in the current drafting instructions.

The Ministry of Justice is currently progressing with the review of the Juvenile Offenders Act, and has requested further UNICEF technical assistance for 2013.

Constraints include:
- Transition to UNICEF Vision system affected the implementation progress in the first half of 2012.
- Delay in submission of Child and Family Welfare Paper to Cabinet due to competing priorities of Government.

On-track

IR 1430/A0/04/809/003 Children are increasingly protected by legislation and are better served by justice systems that protect them as victims, offenders and witnesses.

Progress: Considerable progress has been made in the area of policy reform. A total of three policies on child protection have been developed: Child Protection Policy for the education sector, churches and the
Police. In particular through a very interactive and collaborative process Vanuatu Police developed Guidelines and Policies for Handling Young People in Contact with the Law (offenders, victims and witnesses). Further emphasis is on measures to be put in place for child victims as there is a general lack of specialized services and guidelines for victims of abuse and violence.

Specific progress made in 2012 includes:

- Police guidelines and policies for handling young people developed and finalized.
- Training conducted for Police and other judiciary staff on the Police guidelines.
- Family Protection Units (FPUs) expanded from one in Port Vila, to one FPU in each of the four other provinces.
- The Judiciary is currently developing practice directives for handling young people in contact with the law and also reviewing the Island Court Manual.
- Initial work with Law Reform Commission is on-going with several presentations already made on some laws and penal codes for review.
- A local Legal Officer has been recruited by MOJCS with UNICEF’s support to specifically provide guidance on child protection related legislations.

While good progress has been made in establishing procedures for handling children in the formal justice system, 70 per cent of cases involving children and young people are reported and handled by traditional chief system. The programme is addressing this challenge by exploring mechanisms to work with traditional and other systems, including churches, on programmes of diversion and inclusion of traditional conflict resolution into the formal system, with appropriate safe guards and checks.

**IR 1430/A0/04/809/004** Children are increasingly protected by legislation and are better served by justice systems that protect them as victims, offenders and witnesses.

**Progress:** Considerable progress has been made in legislative reform in the Pacific Island Countries with new Child and Family Welfare fill drafted in Solomon Islands; Child, Youth and Family Welfare Bill passed first reading in parliament in Kiribati; several child protection related Bills drafted and reviewed for Fiji and significant policy reform undertaken in Vanuatu. Collectively these developments are strengthening CRC implementation in the Pacific and influencing other nations to review legal standards with Samoa engaging in law review in late 2012.

In the North Pacific, Palau passed a new Family Protection Act, and with the endorsement of the Child Protection study (baseline) for Palau progress on implementing this new law will be informed by quality baseline data.

The Republic of the Marshall Islands formally endorsed and launched its Child Protection study with the Federated States of Micronesia currently reviewing their study for finalization.

**IR 1430/A0/04/809/005** Children are increasingly protected by legislation and are better served by justice systems that protect them as victims, offenders and witnesses.

**Progress:** There has been a positive demonstration of ownership by each key ministry in Fiji with regards to the review of legislation and development of policies that better protect children. These legislation and policies are as follows:

- Department of Social Welfare: Child Care & Protection Decree; Child Justice Decree; Adoption Decree; Community Based Corrections Decree,
- Ministry of Education: Child Protection Policy; Behavioural Management Policy and review of the Education Act,
- Fiji Police Force: Standard Operational Procedures for: Diversion of Young Offenders; Investigation of Sexual Offences; Handling Children and a Register for children who come in contact with the Law,
- Ministry of I Taukei or Indigenous Affairs: Draft village by laws that have incorporated the better
progress of children at village and community level.

- Department of Immigration: Draft policy on child trafficking under the Immigration Act.
- Ministry of Health: Child Protection Guidelines for Health Workers.

The Department of Social Welfare will be submitting the mentioned Decrees to cabinet in early 2013 with a view to their enactment. The Ministry of Education Child Protection Policy is reviewable every November on an annual basis as endorsed by the Minister. Efforts are ongoing with the other ministries to formalize policies and to conduct appropriate training with the key stakeholders.

The regular updates from the sub-committees of the National Coordinating Committee of Children (NCCC) during its periodical meetings throughout 2012 have strengthened synergies within and between key ministries with regards to improved protection of children in Fiji. These efforts of collaboration should continue in 2013 and beyond.

**Constrained**

**IR 1430/A0/04/809/006** Children are increasingly legislation and are better served by justice systems that protect them as victims, offenders and witnesses.

**Progress:**

Progress towards the development of a Child Protection Bill has been slow due to competing priorities of the Government but at year end was on track. The Child Protection Bill will outline roles and responsibilities of formal and informal stakeholders and standards of services in relation to prevention, protection and response to child protection abuses. The Bill will take into account existing informal structures and traditions in Samoa. Tasks will involve the development of necessary issue papers; conduct of public and stakeholder consultations; drafting of Bill; and advocacy for ensuring smooth passing in Parliament.

The Samoan Law Reform Commission has agreed to take on the drafting of the bill with technical assistance from UNICEF and at year end had drafted the necessary terms of reference to move forward with the drafting in early 2013.

**On-track**

**PCR 1430/A0/04/810** Children are better served by well informed and coordinated child protection social services which ensure greater protection against and respond to violence, abuse and exploitation.

**Progress:**

In Kiribati, Solomon Islands and Vanuatu, new policies for the Child and Family Social Services Systems have been articulated through consultative processes. For the first time in the Pacific, these policies outline roles and responsibilities of Government stakeholders (i.e. social welfare, police) and ‘informal’ stakeholders (i.e. church and traditional leaders) in relation to children’s protection from violence, abuse and exploitation. The policy frameworks recognize international standards for child protection as well as traditional and local cultures and resources, making the emerging systems economically sustainable as well as culturally acceptable. Through the process of defining the new policies, child protection has received enhanced recognition and several Governments have increased budget allocations for children’s protection through, among others, establishment of new child protection civil servant posts (Solomon Islands, Kiribati).

Birth registration of children continued to increase over the period with Kiribati reaching close to 90 per cent of children registered (from 2008 baseline indicating 35 per cent) and in Vanuatu, 80 per cent of children were registered (from MICS 2008 data indicating 26 per cent) in some provinces. In Solomon Islands, where birth registration has been the lowest in the Pacific with 0.01 per cent of children being officially registered in 2007, steady progress was made in two provinces registering about 50 children per month throughout 2011-2012.
**IR 1430/A0/04/810/007** Children are better served by well informed and coordinated child protection social services which ensure greater protection against and respond to violence, abuse and exploitation.

**Progress:**

With the CYPFW Bill and the Policy drafted the conceptualization of the social welfare system has been strengthened to respond to violence, abuse and exploitation against children. Both the Bill and Policy acknowledge the strengths of community based systems and traditions that promote protection of children and establish and/or strengthen the role of statutory authorities in prevention and response in coordination with community and traditional structures. The Bill and Policy have been developed through participatory engagement with key stakeholders at both national and sub-national level and endorsement and subsequent implementation is expected to be positively received. A costing and implementation plan for the Policy is under development and will be completed in early 2013.

Multi-sectorial services have been strengthened through partnership between child protection and health programs including implementation of an integrated health care child day in collaboration with child protection for mothers and caregivers in October 2012. The health child care package includes birth registration and key messages on positive parenting practices. The Civil Registration unit continued strengthening routine birth registration services in collaboration with Ministry of Health with 90 per cent of children 0-18 registered by year end. Central civil registration officers travelled to Maiana, Marakei, Kuria and Abaiang Island and conducted training sessions to enhance their knowledge on birth notification process.

Community outreach to children and youth with key child protection messages (HIV prevention, substance abuse) took place through joint awareness campaign lead by Community Police, Social Welfare and the Catholic Church in Butaritari Island which demonstrated the of benefits of working jointly at community level. Results against targets will be verified by the child protection progress review in 2013 which was postponed from 2012 due to competing commitments. Estimates are provided based on progress outlined and presented during the Child Protection Pacific Planning and Review meeting held in December 2012.

![On-track]

**IR 1430/A0/04/810/008** Children are better served by well informed and coordinated child protection social services which ensure greater protection against and respond to violence, abuse and exploitation.

**Progress:** Significant progress was made by the NACC CP Taskforce in development of a draft Child and Family Welfare System Policy. The Policy provides the Social Welfare Department with a framework for development of child and family welfare services in partnership with stakeholders, in line with positive traditional beliefs and international commitments. Extensive nationwide consultations were conducted with Government stakeholders, CSOs, NGOs and FBOs. The draft Policy is awaiting review and endorsement by the NACC by Quarter I 2013.

A strategic partnership was established between the Civil Registry and the MHMS to strengthen the provision of birth registration (BR) services in the country. The pilot initiative implemented in six health facilities in targeted areas led to approximately 5,300 births registered since 2011. Unfortunately, the current lack of reliable data from the health system on the total number of births makes it impossible to quantify the percentage of births registered. 2013 roll-out plans and budgets were developed by the six testing sites, confirming health partners’ support to BR efforts. A computerized database system in the process of being established in the Civil Registration Department to strengthen government’s capacity to collect, monitor and analyse key civil registration data. Strong advocacy efforts led to likely allocation of Government recurrent budget to Civil Registration for the first time in 2013. Competing priorities led to the rescheduling of the birth registration legal review process to 2013.

Due to NDMO and clusters competing priorities, finalization of the CPIE toolkit is rescheduled to 2013.
On-track

IR 1430/A0/04/810/009 Children are better served by well informed and coordinated child protection social services which ensure greater protection against and respond to violence, abuse and exploitation.

**Progress:** A mapping exercise of available services, their providers and intended target groups in child protection was conducted by Ministry of Justice and Community Services (MOJCS). The mapping report recommends a services framework for the duty bearers and actors at the different levels of government, civil society, community and family. As a follow up to this recommendation, a services framework has been included in the MOJCS sector strategy.

During 2012 the following progress has also been noted:

- Stakeholders, both in government and civil society, have established guidelines and policies for handling child protection issues i.e. child protection policies developed for schools, churches, and police, with the policy for health currently being finalized.
- Ongoing training for stakeholders, both government and civil society, on the new child protection policies.
- Birth registration system expanded and strengthened to provide free birth registration services to all children which resulted in increased births registered from 25 per cent in 2008 to over 80 per cent by end 2012. A challenge remains in ensuring that all those births registered will be issued the official birth certificates and will be collected by, or delivered to, the applicant or parent/caretaker. The birth registration system is now computerized so births when registered are recorded in the official Civil Registry and birth information can then be retrieved/reissued (for a fee) in case of loss.

A key lesson learnt has been the need to standardize services provided by civil society organizations and communities including the traditional system of dispute resolution. Community based systems are strongest in rural and remote areas and are more accessible to children and families than statutory services. Community based systems will be strengthened to ensure birth certificates once issued, reach families. There is also a need to strengthen service providers, both statutory and community based, to be able to respond during emergencies.

On-track

IR 1430/A0/04/810/010 Children are better served by well informed and coordinated child protection social services which ensure greater protection against and respond to violence, abuse and exploitation.

**Progress:** Strengthening the framework and coordination of child protection services has been undertaken in all Tier 1 countries and Fiji. Policy reform to strengthen social welfare service delivery is underway in Kiribati and Solomon Islands where draft policies have been developed and initial costings undertaken. Both are yet to be endorsed by relevant authorities at cabinet levels. In Vanuatu policies have been finalized and roll out in the education and police sectors, and for churches.

Notable progress has been made in the delivery of birth registration services in Kiribati which had 90 per cent coverage in 2012 up from 20 per cent in 2008, and Vanuatu with 80 per cent coverage by year end, up from 25 per cent in 2008. Lessons learned from progress in these two countries has been shared during the Child Protection Pacific Review and Planning meeting with civil registers from these countries exchanging experiences with those countries such as Solomon Islands that are still working to improve coverage.

In Fiji support has been provided to strengthen capacity of the National Children’s Coordinating Committee to provide oversight and coordination of child protection related services and activities of both government ministries and NGOs. A key event was the national campaign for 19 Days of Activism Against Child Abuse and Neglect.

On-track

IR 1430/A0/04/810/011 Children are better served by well informed and coordinated child protection social services which ensure greater protection against and respond to violence, abuse and exploitation.

**Progress:**
The Department of Social Welfare in Fiji has, with technical and financial support from UNICEF, implemented activities to get the seven residential homes certified and compliant to the minimum standards of care for children in institutional care.

This approach to children in need of protection in Fiji has remained fundamentally the same since the Juvenile Act (Cap 56) (now reviewed) was first introduced in 1974, drawing heavily from the UK system-grounded in a ‘rescue and removal’ approach to child protection.

Whilst the Department has come to rely heavily on the Juvenile Act to support children who have been abused, neglected and abandoned, the attempt has been to put much more emphasis on the involvement of the whole of the community including parents, extended family, community elders, church and faith based groups in helping families and children who are going through difficulties.

The proposed foster and kinship care scheme to strengthen this whole of community approach to child protection has not been fully established and is an area earmarked to be further explored and strengthened in the next cycle, recognizing the importance of integrating formal government welfare services with more informal community caring practices.

**Constrained**

**IR 1430/A0/04/810/012** Children are better served by well informed and coordinated child protection social services which ensure greater protection against and respond to violence, abuse and exploitation.

**Progress:** The main result was to finalize the Samoa Child Protection survey (baseline). Progress was made with all data collected and analysed, but due to delays in finalization of the report, as of year-end the survey had not yet been endorsed by government. Delays were due to the need for a wide range of partners to review and comment on the draft report and subsequent delays in finalization of the draft by the consultant. The draft has been provided to the Government for final review and anticipated approval in first quarter of 2013. The results of the Samoa Child Protection survey will be used to influence national development and sector plans, and provide a baseline for the next multi-country programme.

**On-track**

**PCR 1430/A0/04/811** Children in selected geographical areas grow up in home and community environments that are increasingly free from violence and exploitation.

**Progress:**

New partnerships were formed during the period with church-based organizations, corporate sector and Pacific events groups like the “Hibiscus” festival in Fiji, and traditional and provincial/divisional leaders in Vanuatu, Kiribati and Solomon Islands. This resulted in significant changes being reported in relation to increased awareness of child protection, attitudinal and behavioural changes amongst parents, communities and traditional leaders. In Fiji, several village leaders took lead in announcing their village was adopting a ‘zero tolerance’ against violence against women and children. The Programme produced a series of new resources for engagement at different levels, including ‘One Minute Junior” videos, new community-facilitation resources (Fiji produced *Children are a Precious Gift from God*), key messages and training resources including for child protection in emergencies.

As a result of the concerted communication for social change activities, media coverage of child protection issues at regional and national level increased steadily over the period. In addition to family and community based social changes being reported through MSC, child protection issues started to emerge more clearly in
the National Development Plan of Kiribati and sectoral plans.

In Kiribati, unimanes have been successfully playing the role of the fit person in the community by providing guidance and support needed to better protect children from violence and abuse. Also in Kiribati radio awareness campaign on child protection related issues have been implemented by community police in collaboration with media for children and social welfare. In Solomon Islands through a partnership with Save the Children the Early Intervention Caregivers Program (EICP) a curriculum has been developed and is ready for implementation in 14 communities. In Vanuatu child protection policies have been developed for churches and schools.

**On-track**

**IR 1430/A0/04/811/013** Children in selected geographical areas grow up in home and community environments that are increasingly free from violence and exploitation.

**Progress:** The target of reaching 50 per cent of Island Councils/Village Committees in three outer islands and Tarawa with a written child protection plan has not been fully reached although several communities were strengthened to develop child protection plans, in particular Abemama Island Council, Tarawa Urban Council and Betio Town Council. In addition the incorporation of child protection indicators into the new Kiribati Development Plan 2012-2015 presents opportunity to roll out child protection plans to all communities in 2013.

Increasing role of the community in preventing and responding to cases of violence is evident. Unimanes have been successfully fulfilling the role of ‘fit person’ or child protection advocates by providing guidance and support to better protect children from violence and abuse. Social Welfare unit in collaboration other child protection partners conducted refreshing training for Unimanes which covered topics on the role of ‘fit person’ to support diversion for young offenders in line with existing legal provisions. This training has been conducted in Abaign, Maiana and Village of Abeto in South Tarawa.

Radio awareness campaign on child protection related issues have been implemented by community police in collaboration with media for children and social welfare. Social welfare visited all school in South Tarawa, Mania and Butaritari informing children about role of social welfare and types of service available to support communities as well prevention of violence and abuse in schools.

Stories of significant change have been collected and analysed with more than 20 stories collected.

**On-track**

**IR 1430/A0/04/811/014** Children in selected geographical areas grow up in home and community environments that are increasingly free from violence and exploitation.

**Progress:** After over a year of discussions and planning the first ever national workshop was successfully conducted late November with representatives from the seven main Christian churches in Solomon Islands (SICA). As a result: child protection was acknowledged by SICA as a crucial area to be addressed by churches; MSC stories collected highlight that there was a significant increase in knowledge of child protection by religious leaders; a Child Protection technical working group was established to develop plans, materials and key messages for Churches' work in communities; and SICA committed to incorporate child protection within provincial reference networks initiatives.

Promotion of positive discipline amongst parents and caregivers preventing abuse, violence and exploitation of children progressed in 2012 through the Project Agreement with Save the Children. Fourteen pilot communities in Western Province were selected based on available reports of high levels of violence. A total of 470 participants were sensitized on child rights and child protection issues, and available reports document change in knowledge and understanding and intention to change their past behaviour.
environments that are increasingly free from violence, abuse and exploitation.

**Progress:** The 2008 Child Protection Baseline Study established the situation of children and families including the bad and good practices in homes, communities and schools and also highlighted the services required for children and families to identify, report and respond to cases of violence and abuse.

Through the Communication for Social Change approach, several organisations (Vanuatu Council of Churches, Save the Children, local NGOs) have partnered with Government to create awareness and enable communities and schools to report and respond to issues of abuse and violence against children. In partnership with UNICEF, a local NGO, Wan Smol Bag, has developed drama series, comic booklets, and DVDs on child protection issues at home, community and school settings, and its implications on children and guidance on different levels of intervention to respond to child protection cases. There were anecdotal reports on increased awareness and behaviour changes but no systematic monitoring and documenting these changes was conducted. After the mid-year review, monitoring initiatives were agreed and findings will be analysed regularly.

UNICEF partnered with Save the Children to develop IEC materials on positive discipline in schools and support for teachers to implement Standard #11: Protection Policy for Schools, which is included in the Vanuatu Minimum Quality Standards.

To monitor and document changes in behaviour and practices, implementers were trained on the Most Significant Change methodology and some attempts to apply the process and gather MSC stories were initiated. Review of this approach revealed that without adequate and consistent technical and logistics support, implementers found the MSC process too complex to practice, and difficult to integrate into existing monitoring and evaluation initiatives. Lessons learnt include that MSC is an intensive systematic process requiring training and continuous support and should be used with other qualitative and quantitative methodologies to fulfil quality monitoring requirements.

**IR 1430/A0/04/811/016** Children in selected geographical areas grow up in home and community environments that are increasingly free from violence, abuse and exploitation.

**Progress:** In Tier One countries of Kiribati, Vanuatu and Solomon Islands good progress was made on collection of Most Significant Change Stories (MSC) as a tool to document changes in social norms. The regional target was exceeded with more than 95 MSC stories from a total of four countries collected throughout the year. Usage of these stories as an analytical monitoring tool has been limited due to limited capacity and training of partners on how to use MSC as a qualitative monitoring tool for planning. MSC have been useful in reporting to donors but was not an effective monitoring tool.

Progress has been made on addressing harmful traditional practices through development of partnerships with community based groups. In particular in Vanuatu and Solomon Islands partnerships through church networks have been established, as have partnership in Solomon Islands with Save the Children for parent education on positive discipline and child rearing. These partnerships are in their infancy but are demonstrating regional possibilities for partnership development. Fiji has made significant progress in its roll-out of the community facilitation package with several countries in the region expressing interest in using the tool as a model for local adaptation. Sharing of lessons was conducted with other countries in the region during the Child Protection Annual Review and Planning meeting which were attended by eight countries covering south and north Pacific.

**IR 1430/A0/04/811/017** Children in selected geographical areas grow up in home and community environments that are increasingly free from violence, abuse and exploitation

**Progress:** The Community Based Facilitation Package ‘Children are a Precious Gift from God’ is the main tool for the primary prevention of child abuse and neglect targeting the whole community. These activities have strengthened the capacity of communities to care and protect their children. The facilitation activities in the package include awareness and advocacy, promotion of alternative forms of discipline rather than physical punishment and the initiatives are aimed at reinforcing positive values and practices while challenging those
that are harmful to children.

To date, there are 60 trained community facilitators across the country who continue to use the package in their respective communities and assisting the Department of Social Welfare with the necessary referrals of abuse cases if warranted.

To evaluate the impact of such community based activities, more than 50 Most Significant Change stories have been collected from the five divisions in Fiji. The stories have reflected positive changes within communities leading to the incorporation of child protection in village development plans. The stories also highlighted certain challenges including the need to strengthen the links between Social Welfare and community facilitators.

The package has also strengthened linkages across sectors including the Police, Ministry of I Taukei Affairs, Ministry of Health with Social Welfare and NGOs who have a strong focus on child protection. Since its review and launch early this year, there is a need for refresher training for the old facilitators, including a training of trainers between the mentioned sectors including community based leaders. The community based child protection officers in the Department of Social Welfare plan to strengthen inter-agency collaboration maximizing the package and pooling resources between the concerned ministries and partners to enhance coverage on primary prevention activities in the next year.

**PC 5 - Policy, advocacy, planning and evaluation**

**On-track**

**PCR 1430/A0/04/817** By 2012, social and economic policies are evidence-based and progressively address the rights of children, youth and women, particularly those most vulnerable and at-risk.

**Progress:** In 2012, UNICEF continued its strategic analysis and advocacy to influence public policies in favour of vulnerable children, youth and women. In Vanuatu, the Ministry of Finance and VNSO launched the *Child Poverty and Disparities Study* with support from UNICEF. The first of its kind in the Pacific, this multi-year study has attracted much attention, generating unique evidence on hardships faced by children and options for enhancing public policies. A similar study in Kiribati is nearing completion. UNICEF also supported the third round of *Sentinel Site Monitoring* in Fiji, Kiribati, Tonga, Tuvalu and Vanuatu. Created in response to the food, fuel and financial crisis, the sentinel system tracks vulnerability and resilience in over 400 households and stimulated national policy dialogues on child-sensitive social protection. Finally, UNICEF facilitated the participation of senior government officials from Fiji, Solomon Islands and Vanuatu in the East Asia and Pacific Conference on Public Finance, Social Policy and Children.

While all PICs have ratified the UN Convention on the Rights of the Child (CRC), government machineries to coordinate remain weak and only half are considered on track with their reporting obligations. In 2012, UNICEF strengthened the *National Advisory Committees on Children* across the Pacific using the new NACC Toolkit. Support was also provided to CRC reporting in Cook Islands, Fiji, Nauru, Samoa, Solomon Islands and Vanuatu. Moreover, 2012 offered opportunities to advocate for child rights and equity in prominent regional forums. UNICEF was an active participant at the Post-2015 Pacific Consultation and facilitated participation of Pacific youth in the Rio+20 UN Conference and the regional youth in climate summit Power Shift. UNICEF remains an active contributor to the Pacific Youth Development Framework and the Pacific Young Women’s Leadership Alliance.

Overall, social and economic policies across the region are increasingly addressing the rights of vulnerable groups. Children, youth and women feature prominently in the newest generation of national development strategies in Kiribati (KDS 2012-2015), Samoa (SDS 2012-2016), Solomon Islands (NDS 2011-2020), Tonga (TSDL 2011-2014) and Cook Islands (NSDP 2011-2015). New policies for youth have been developed with UNICEF support in Kiribati, Vanuatu and Solomon Islands. Additionally, leaders of the Pacific Island Forum endorsed a landmark Gender Equality Declaration in 2012, signalling high-level political commitment to gender-responsive policies and programmes in line with CEDAW. It is acknowledged though, that the links between policies, budgets and results remain very weak in most Pacific countries – an area UNICEF will be seeking to improve in years ahead.
By 2012, social and economic policies are evidence-based and progressively address the rights of children, youth and women, particularly those most vulnerable and at-risk in Kiribati.

**Progress:**

Social and economic policies in Kiribati increasingly address the rights of vulnerable groups. Children, youth and women feature prominently in the new Kiribati Development Plan 2012-2016. The Government also adopted a new National Youth Policy in 2012, developed with support from UNICEF. Evidence and analysis on the disparities experienced by children and families has been made increasingly available through the third round of Sentinel Monitoring. Developed in response to the food, fuel and financial crisis, the system tracks vulnerability and resilience in over 90 households in Kiribati. The *Child Poverty and Disparities Study*, the second of its kind in the Pacific, is nearing completion. Part of a global initiative, study generates unique evidence on hardships faced by children and options for enhancing public policies. Over the year, checkered progress was made in preparing the combined, second, third and fourth periodic CRC reports. The KNACC has been convened by the Ministry of Internal and Social Affairs (MISA) and working groups established, however, due to delays in transfer of funds (related to VISION roll-out) planned activities did not occur and the report remains in draft form.

By 2012, social and economic policies are evidence-based and progressively address the rights of children, youth and women, particularly those most vulnerable and at-risk in Solomon Is.

**Progress:** Progress has been made for improving the capacity of SI-NACC. Through a technical consultancy, a capacity building strategy has been developed including revised terms of reference (TOR), new structure, improved roles of NACC, secretariat, national coordinator and three key sub-committees (health, education, and social protection). The TOR for SI-NACC has been revised and endorsed by NACC members. Draft paper on the revised TOR and the proposed NACC structure was submitted to the Cabinet for approval by the end of 2012. With technical support from UNICEF, a draft CRC periodic report was developed and will be reviewed by a Technical Task Force before submission to the Cabinet later in the year. The Technical Task Force will review both drafts of CEDAW and CRC and this delays the submission to the Cabinet. Solomon Islands (SI) was among the first countries in the Pacific to be involved in the early-warning Sentinel Monitoring system, helping to develop an evidence base on the impact of the food, fuel and financial crisis on children. Due to competing household surveys and transitions in NSO it was agreed that Solomon Islands would wait until 2013 before re-engaging. In the meantime, UNICEF, MDPAC and MWYCFA used 2012 to strengthen dialogue and engagement around social policies for women and children, a highlight of which was the participation by the Permanent Secretary of MWYCFA in the East Asia and Pacific Conference on Public Finance for Children.

By 2012, social and economic policies are evidence-based and progressively address the rights of children, youth and women, particularly those most vulnerable and at-risk in Vanuatu.

**Progress:** The Child Poverty and Disparity Study, a first ever for the Pacific, was launched in Vanuatu by the Minister of Finance and UNICEF. The findings have been referenced in policy documents/ discussions by Government and donor agencies highlighting the need to address the shortcomings in Vanuatu. Sentinel Site Monitoring was implemented for a 3rd year in a row to monitor the effects of the Global Economic Crises. The system is now incorporated into the National Statistics Office official yearly survey studies as part of the government effort to improve data collection at the provincial level and to support social welfare decisions.


NACC capacity was strengthened through use of the CRC Tool Kit to support the review of the CRC periodic
2nd, 3rd and 4th reporting, (including optional protocols) and the National Children's Policy Review. The Ministry of Justice and Community Services (MJCS) highlighted the need to finalize the CRC endorsement process to ensure that government and partners are accountable in delivering child-focused services in line with the National Children's Policy.

With the support of UNICEF, the MJCS endorsed an agreed upon a process to assist in the formulation of the National Children’s Policy Review. The Review is a critical process in identifying and addressing where proactive action must happen in government development plans and ensure that these actions are reflected in annual work plans. With the above process, the main constraint was in engaging key stakeholders in the verification and support process in CRC and NCP review and in the reporting process.

**IR 1430/A0/04/817/004** By 2012, social and economic policies are evidence-based and progressively address the rights of children, youth and women, particularly those most vulnerable and at-risk.

**On-track**

**PCR 1430/A0/04/818** By 2012, quality disaggregated children’s, young people’s and women’s social data are available and integrated into monitoring and evaluation systems.

**Progress:** National statistical systems in Pacific Island Countries (PICs) are among the weakest in the world. Although the average score of PICs on the World Bank’s statistical capacity indicator improved from 31 in 2008 to 42 in 2012 (on a scale of 1 to 100), the Pacific ranks lower than any other region. Specific challenges include: restricted resources for National Statistical Offices (especially qualified staff); limited statistical outputs with data often published late or not at all; and weak coordination between NSO’s and line ministries (PIFS, 2012). The *Ten Year Pacific Statistics Strategy* (2011-2020) seeks to address these challenges and is spearheaded by the Secretariat of the Pacific Community (SPC) with support from the UN and other partners. The *Pacific Vital Statistics Action Plan* (2011-2014) developed by the Brisbane Accord Group (of which UNICEF is a member) aims to improve civil registration and vital statistics.

In 2012, UNICEF’s PAPE Programme substantially enhanced the collection, analysis and dissemination of data on children and women. Together with national governments, *Children’s Atlases of Social Indicators* were launched in Fiji, Vanuatu and Solomon Islands while atlases for Federated States of Micronesia, Marshall Islands and Tuvalu are nearing completion. These statistical publications identify disparities by location, gender, age and wealth and are helping to inform policies and practice related to children. In Kiribati, UNICEF disaggregated national survey data to generate estimates of multidimensional child poverty and identify the most marginalized children and communities. Moreover, UNICEF together with UNFPA supported Vanuatu’s *Youth Monograph* based on a detailed analysis of the 2009 Census. Finally, UNICEF continued its support to PM&E systems in 2012. Technical support was provided for DevInfo in Vanuatu and the mainstreaming of children in provincial and local plans in Solomon Islands and Kiribati.

Preparations for the roll-out of enhanced programme monitoring, *Monitoring of Results for Equity Systems MoRES)*, in 2013, were undertaken by programmes with partners in health child protection, education and planning. An office-wide plan was developed and financial support for improved monitoring of outputs and impacts secured from AusAID. The realization of results at the sub-national level was an area of focus, with UNICEF Pacific providing technical assistance to provincial governments in the Solomon Islands and Betio Town Council in Kiribati to integrate child rights into their decentralized planning. An *Evaluation of the Convergence Approach to Programming in Kiribati, Solomon Islands and Vanuatu* was carried out to identify ways to strengthen UNICEF’s sub-national programming for the next Multi-Country Programme 2013-2017.

Overall, availability of data on children, youth and women is gradually increasing as more countries are undertaking national surveys (DHS/HIES) and strengthening administrative systems. As of 2012, PICs have, on average, data against one third of the global indicators collected through UNICEF’s annual CRING exercise (55 per cent for Tier 1 countries; 35 per cent for Tier 2; and 10 per cent for Tier 3). Average availability of disaggregated data by sex, rural/urban or wealth status remains low (16 per cent). There are also signs of increasing integration into M&E systems. Vanuatu, in particular, is making notable progress in government-wide monitoring and its annual series of development reports includes disaggregated data on children’s education, health and disability.
IR 1430/A0/04/818/005 By 2012, quality disaggregated children’s, young people’s and women’s social data are available and integrated into monitoring and evaluation systems.

Progress: As of 2012, Kiribati has data against 59 per cent of the global indicators on children, youth and women collected through UNICEF’s annual CRING exercise. Availability of disaggregated data by sex, rural/urban or wealth status is lower (35 per cent). Analysis of the disaggregated data by UNICEF is being done through the Kiribati Child Poverty and Disparity Study, which will serve in lieu of a Situation Analysis for the current programme cycle.

UNICEF continued its support to national PM&E system strengthening during the year. Through a joint UN initiative, UNICEF has provided technical support to a draft Action Plan on improving national M&E systems and capacity building KNSO and line ministry staff. Over 48 government staff members have been trained and over 90 per cent of national Ministry databases have been collated. In addition, UNICEF supported a child-focused review of the Betio Island Council Strategic Plan.

UNICEF led the joint planning process for the next UNDAF 2013-2017, including completion of a Common Country Assessment and national Results Matrix. Through UNICEF’s leadership a strong focus on child rights, youth, gender equality and climate change/DRR were highlighted in the joint UN and GoV plan. As UNICEF completed the current programme cycle in Kiribati, a normative evaluation of the current Country Programme’s Convergence Approach was conducted to inform future programme directions and strategies. Regular and qualitative monitoring was supported throughout the year, including the use of Most Significant Change for the WASH and Child Protection programmes.

IR 1430/A0/04/818/006 2.1PAPE IR6:Sol-Data, Monitoring & Eval., young people’s and women’s social data are available and integrated into monitoring and evaluation systems.

Progress: ‘Children in Solomon Islands 2011’ was launched in July 2012, providing snapshots of the situation of Solomon Islands children in such areas as poverty, health, education and child protection, with a particular emphasis on the most vulnerable children and sub-national patterns of equity. The report provides information for effective policy responses in mapping areas of deprivation and disparity for children and women in the country, and as such, will be used in lieu of a Situation Analysis for the current programme cycle. Strengthening national planning and monitoring for children was focused on decentralized structures in 2012. At the invitation of the government, UNICEF supported to two provinces (Mailaita and Central Province) to develop outcome for children which will be integrated into the Provincial Development Plans. Planning process supported by PGSP in both provinces started in mid-September and both provinces plan to incorporate outcome for children in their development plans. Support to national PME system strengthening was dropped in 2012 due to the government preference to focus on MDG monitoring and tracking, and due to UNICEF’s limited resources for this area. UNICEF played an active role in the development of the new UNDAF, including the Common Country Assessment and the country-specific Results Matrix.

Participatory planning, monitoring and evaluation of UNICEF’s and GoSI’s programmes of cooperation were improved in 2012. An assessment of Most Significant Change was carried out, identifying constraints in use of the system and recommending a shift towards less complex monitoring systems and story gathering. Training on qualitative monitoring was provided to UNICEF staff and partners. An evaluation of the Convergence Approach was carried out and provided partners with an opportunity to assess and guide UNICEF’s future sub-national programmes.

IR 1430/A0/04/818/007 By 2012, quality disaggregated children’s, young people’s and women’s social data are available and integrated into monitoring and evaluation systems.

Progress: The ‘Children in Vanuatu, An Atlas of Social Indicators’ was developed and published. The report was presented during the launch of the Global Study on Child Poverty and Disparities; National report for Vanuatu, 27th August, 2012. The Atlas highlights disparities experienced by children and serves as a
Situation Analysis for the current programme cycle.

UNICEF advocated with the Monitoring and Evaluation Unit in the Prime Minister’s Office on the use of DevInfo system in the Government’s simplified Aid Management Platform to track progress of development indicators. To illustrate how this can be achieved, Research and Innovations, a DevInfo Support Group, submitted a framework proposal. There is, however, a need for the UN Pacific M&E Working Group (UNICEF, UNDP, UNFPA, UNESCAP) to come to a common agreement to jointly support the use of the DevInfo system and its implementation.

In the area of planning, monitoring and evaluation, UNICEF led the joint planning process for the next UNDAF 2013-2017, including completion of a Common Country Assessment and the country-specific Results Matrix. Through UNICEF’s leadership a strong focus on child rights, youth, gender equality and climate change/DRR were highlighted in the joint UN and Government plan.

As UNICEF completed the current programme cycle in Vanuatu, an evaluation of the current Country Programme’s Convergence Approach was conducted to inform future programme directions and strategies. In response to Tropical Cyclone Vania/Atu in 2011, the management response to the evaluation report on UNICEF’s interventions was implemented during the year. Regular and qualitative monitoring was supported throughout the year, including the use of Most Significant Change methodology.

**IR 1430/A0/04/818/008** By 2012, quality disaggregated children’s, young people’s and women’s social data are available and integrated into monitoring and evaluation systems.

**On-track**

**PCR 1430/A0/04/819** By 2012, Government and communities engage in long-term integrated, strategic communication fostering and sustaining behavioural and social changes to address the rights of children, youth and women in selected areas of Kiribati.

**Progress:**

Throughout 2012, UNICEF Pacific invested in strengthening government and community capacity to engage in long-term integrated, strategic communication. Technical support was provided to promote early childhood care and education in the region, as well as quality standards for primary education. Working with the Ministry of Education, Prime Minister’s Office and SWAP partners in Vanuatu, a Strategic Communication Plan was developed to support the roll-out of new Minimum Quality Standards for Schools. In the area of health, support was provided to the Ministry of Health in Fiji to plan, develop and implement a national campaign to promote routine immunization.

Intensive emergency communication in response to floods in Fiji in March and April helped to protect children’s survival and health. Working with the Ministry of Health, the emergency communication package was expanded later in the year with new messaging on protection and nutrition, and new products including video, introduced. The comprehensive multimedia package was launched a few days prior to the arrival of Cyclone Evan at the end of December.

A significant investment in regional capacity was made through the *One Talk for All* initiative. In collaboration with SPC and Pacific Media Assistance Scheme, UNICEF facilitated a regional workshop to strengthen the capacity of 25 youth and children’s media producers from RMI, Kiribati, Vanuatu, Solomon Islands and Fiji. The capacity developed through the workshop will be put to use in 2013 in support of intensive communication for, with, and about children and adolescents.

Investment was also made in strengthening UNICEF Pacific’s own communication capacity. Inter-personal and community-based activities in support of programmes have been hampered by a lack of dedicated Communication Officers on the ground in Tier One countries. In response, planning and resource mobilization successfully carried out for the new Multi-Country Programme 2013-2017, means that this human resource gap will be addressed as of 2013.
To strengthen the reach of UNICEF Pacific’s knowledge for children and social mobilization, the team oversaw the development of a strategic plan for improving digital engagement. By the end of 2012 this had resulted in a 70 per cent increase in the social media fan-base and website users, and a documented and improved uptake of knowledge products by key partners. The improved digital capacity was used to generate outreach and engagement to address climate change, violence against women and children, disabilities and equity.

The disparities experienced by children in the Pacific were highlighted in national and regional media throughout the year. Beginning with the launch of the SOWC, focusing on children and urbanization, by Neroni Slade, the Secretary General for the Pacific Island Forum Secretariat, public advocacy and awareness-raising continued throughout the year with the launch of Equity Atlases in Fiji and Solomon Islands and the Child Poverty Study in Vanuatu.

**Progress:**

C4D approaches have been integrated in various programmes which are contributing to sustained behaviour development among children and behaviour change among the adults. Proper hygiene practices in selected schools are continuing in the convergent island of Abemama testimony to the influence of C4D activities. Teachers are vigilant in maintenance of WASH facilities and also constantly practicing and promoting handwashing in school premises. The WASH facilities in these schools were built from the UN Trust/One Fund. In South Tarawa, hand washing and proper sanitation methods are being introduced in schools and promoted with assistance of MOE and MOHMS staff.

In South Tarawa, awareness is being raised on promotion of life skills issues (abstinence, saying no to unprotected sex, substance abuse, preventing sexual abuse of children, etc.) by using multi-media channels—radio, street theatre, bill boards, print materials, IPC/counselling by faith-based organizations and peer support youth groups.

Screening of the Meena animated films have been found to be effective. The films are on nutrition, care of pregnant mothers, infant feeding, diarrhoea management at home as well as hand washing. These are screened regularly at clinics in South Tarawa and community environments by the Child Protection and Health and Nutrition programmes. In many instances, there are discussions and dialogues after viewing the films..

The Adolescent Girls’ Initiative has been launched in Kiribati and the First Lady is the patron. Under the umbrella of this project diverse multi-media materials and channels will be used to empower young people towards positive and healthy behaviour change. The project has begun with a multi-stakeholder participation and is led by MISA.

**IR 1430/A0/04/819/010 By 2012, Government and communities engage in long-term integrated, strategic communication fostering and sustaining behavioural and social changes to address the rights of children, youth and women.**

**Progress:** Three strategic communication processes to promote WASH, protection against STI’s/HIV/AIDS, and protection of children have been ongoing since 2009 in partnership with the Government of Solomon Islands. An innovative multimedia package for promotion of key family practices is under preparation in the context of two major projects (UNHSTF and EU IWAS). Delays to implementation of corresponding WASH project activities/services have resulted in a delay to contracting appropriate partners to manage this cross-cutting initiative, and the development and implementation of the multimedia package, has therefore been deferred to 2013. Four young media producers were trained in strengthening media for, with, and about youth and children on the radio. Advocacy in support of equity in development was undertaken with the launch of the Solomon Island Equity Atlas. Due to limited resources available for this IR, including absence of
Communication Officers in country, there has been no documentation of significant social change resulting from this. The launch of ‘Children in Solomon Islands 2011’ and visits by UNICEF’s Executive Board, the NZ National Committee and donors provided an opportunity to increase awareness of key inequities experienced by children in Solomon Islands. Media coverage and engagement with key decision-makers in government continued with the East Asia and Pacific Conference on Public Finance for Children. Evaluation of strategic communication was included in the ‘Convergence Approach’ evaluation – though it is noted that specific impact evaluation of communication was not carried out as initially planned.

**On-track**

**IR 1430/A0/04/819/011** By 2012, Government and communities engage in long-term integrated, strategic communication fostering and sustaining behavioural and social changes to address the rights of children, youth and women.

**Progress:** Technical assistance was provided to the Government of Vanuatu for the planning of strategic communication for the roll-out of Minimum Quality Standards for Schools. Discussion with the Prime Minister’s Office led to high-level ownership of the initiative and recommendations on the hiring of an expert to support implementation of the National Communication Plan, a first for Vanuatu.

Strengthening of media for, with, and about children was undertaken in partnership with PACMAS (Pacific Media Assistance Scheme) and Vanuatu Broadcasting & Television Corporation (VBTC). Building on the One Minute Junior workshop held in 2011, activities using Facebook to promote the views of youth in social issues and current affairs continued this year. In addition, staff from the VBTC participated in the regional One Talk for All workshop which focused on training young people in the design and production of youth driven media for development.

The launch of ‘Children in Vanuatu 2011’ and the ‘Vanuatu Child Poverty and Disparity Study’ provided an opportunity to increase awareness of key inequities experienced by children. Media coverage and engagement with key decision-makers in government continued with the East Asia and Pacific Conference on Public Finance for Children.

Evaluation of strategic communication was included in the ‘Convergence Approach’ evaluation – though it is noted that specific impact evaluation of communication was not carried out as initially planned.

**IR 1430/A0/04/819/012** By 2012, Government and communities engage in long-term integrated, strategic communication fostering and sustaining behavioural and social changes to address the rights of children, youth and women.

**PC 6 - Cross-sectoral costs**

**Met**

**PCR 1430/A0/04/800** Support Budget: Effective & Efficient Programme Management and Operations Support

**Progress:**

A total of US$1.3m for management of Institutional Budget (IB) in 2012 and an average of 99 per cent of the Institutional Budget was efficiently utilized. The overall financial accountability lies with the Representative and the day to day management of the Institutional Budget delegated to the Chief Operations. Financial controls such as segregation of authority, approved and risk-informed processes on payments and receipts were reviewed on monthly basis and submitted to CMT (Country Management Team). These reports assisted the CMT in its decision making. Within the period no major equipment was acquired throughout the year. IB was mostly on staff salaries and management travels. Other programmes supplement the IB to achieve the desired results.

**IR 1430/A0/04/800/001** TO BE DELETED Kir - Governance & Systems

**IR 1430/A0/04/800/002** TO BE DELETED: Stewardship of Finance financial Resources
IR 1430/A0/04/800/003 TO BE DELETED: - Human Capacity

Met

IR 1430/A0/04/800/010 Effective & Efficient Governance & Systems

Progress:

The CMT functions very effectively provided strategic guidance, programme and operational inputs in advising the Representative in taking informed decisions. Within the country programme, the office initiated a number of changes and programme shifts such as equipping the field offices with both international and national professionals which policy engagement capacities to support respective governments. Resources were raised beyond the initial approved OR funding level hence the office had to seek approval to raise the OR funding to US$44 million for the country programme. The CMT approved the revised office committees and their Terms of References in addition to the seven key committees, it established ten more to ensure key components of the country programme were managed through those committees. Overall, all the committees performed satisfactorily in their areas of mandate. Segregation of duties and risk-informed and cost efficient work processes were put in place and staff made to sign the Table of Authority, making them accountable to the delegated authority assigned to them.

Met

IR 1430/A0/04/800/011 Effective & Efficient Management & Stewardship of Financial Resources

Progress:

Risk informed and cost efficient work processes were reviewed and staff trained, making it simpler for efficient programme implementation within the year. Bi-annual budget reviews were carried out across all sources of funding, making it possible for monitoring and reallocation of resources where necessary to achieve results for the children of the Pacific. Payments were made to partners and staff efficiently, with few bottlenecks during the implementation of Vision. Throughout the year, monthly financial reports were shared with management and between August and October, two of the key Admin and Finance staff resigned which was a set-back to prompt submission of the bank reconciliation however, this was resolved by end October and since then regular submissions were made.

Met

IR 1430/A0/04/800/012 Effective & Efficient Management of Human Capacity

Progress:

The Country Office encountered a number of staff changes and shifts especially with the Section Chiefs. Eleven new posts were created while Ten posts were abolished during the May 2012 PBR for the new country programme (2013-2017). Recruitment to the new positions commenced with posts with confirmed funding.

The office ensured that an efficient and effective process was implemented for consultants and Temporary Assistants (TA) based on deliverables and in line with the HR guidelines. Timely submission of section work plans initiated at the beginning of the year to enhance the efficient recruitment processes. Fifty staff were trained in CBI to ensure quality recruitment process of staff into the positions. Staff was trained in key HR policies especially on staff benefits and performance management and coaching. The office learning and development plan was implemented, and monthly reports submitted to the CMT.

IR 1430/A0/04/800/888 TO BE DELETED: HR

PCR 1430/A0/04/824 INACTIVE: Emergency Preparedness and Response

IR 1430/A0/04/824/004 CS Prog IR13: Emergency Preparedness and Response
PCR 1430/A0/04/825 Enhanced capacity for planning, monitoring, budgeting and evaluation within a rights-based, gender and equity focussed programme environment.

Progress: Management of Cross Sectoral budget in 2012 including budget planning, monitoring and reviews were efficiently carried out resulting in about 99 per cent utilization. Staff such as Chief of Field Offices and some Operational staff on cross sectoral budget coordinated programme implementation in the Field Offices and performed presentational duties. Prepared budget analysis for the office and follow-up actions were carried out efficiently throughout the year. Supplies and resources to partners were monitored and follow-up action undertaken by the CS team. Office management expenses were supplemented by the CS budget which was efficiently utilized for the intended purpose.
Effective Governance Structure

The 2012 Annual Management Plan (AMP) established clear accountabilities of team outcomes including management indicators, delegation of authority, resource mobilization strategies and management. Oversight structures include country and programme management teams, and an operations team, as well as statutory committees. Senior management met weekly and ensured issues affecting programme and operations were prioritized and managed. The CMT focused on key strategic issues like simplification of work-processes, aid effectiveness, efficient use of resources, monitoring and evaluation, implementation of the Strategic Learning Plan, HACT implementation, incorporation of risk management in all programmes, emergency preparedness, revised Office Committees and TORs and staff safety and welfare.

The Representative uses the CMT to brief the team on global and regional UN, UNCT, UNICEF issues and partnership priorities from the Pacific sub-region. Minutes of the CMT are posted on the intranet so that all staff can have access to the decisions made. The CMT took a decision to centralize SAP transactions at the Suva Office thereby reducing the user licenses from 72 to 30 which brought substantial cost savings to UNICEF; field-based teams can therefore focus on programme implementation. Key decisions made in the period under review included: approval of simplified and risk-informed work processes; systematic use of the global management dash-board and selective office-specific indicators, which assisted tracking implantation of programme and operational results; budgets reviews; improving internal communication including ICT connectivity with Field Offices; VISION cross learning; new office structure and funding levels.

The enhanced oversight of the CMT led to improved performance by programme and operations teams, timely completion of e-PAS, and greater involvement of Field Office staff in decision-making.

Through regular informal consultations between management and UNICEF Pacific Staff Association (UPSA) a number of staff issues were prevented/resolved resulting in only two joint consultative meetings requiring to be held within the year. Every effort was made to maintain the standard leading to the satisfactory audit ratings in Governance by the Internal Audit in 2009. The Office facilitated a number of official visits such as the Regional Office strategic planning mission on MCPMP (Jan-Feb), the UNICEF Executive Board delegation's visit to Fiji and Solomon Islands (March), and the Regional Director's visit to Fiji and Kiribati (April).

Within the context of UN coherence, UNICEF actively participated in both the Fiji- and Samoa-based UNCTs; chaired UNDAF Outcome 3 Group; led UNDAF country consultations for Kiribati and Vanuatu, and actively engaged in the UNiTE campaign. Within the Pacific Humanitarian Team, UNICEF is the cluster lead for WASH and nutrition and co-lead for education (with Save the Children) and protection (with OHCHR).

A results-oriented Multi-Country Programme Management Plan 2013-2017 was developed taking into consideration inputs from donors, governments and NGO partners and was approved by the Regional PBR in May 2012. Key annexes completed the document, further elaborating on accountabilities, the Tier approach, resource mobilisation, and the partnership approach among others.

Strategic Risk Management

Risk management will continue to be the priority of UNICEF Pacific in view of the natural hazards and environmental challenges it faces, such as the limited capacities of the national systems. The office reviewed the Risk Profile and RCSA twice and the following are the high and medium risks identified:

- Natural Disasters and Epidemics are the only identified High Risks that have remained since the 2010 review, on account of the peculiar environmental challenges of the Pacific. The office has, however, provided sufficient mitigating remedies such as an efficient and well-trained Pacific Emergency Response Team (PERT), stockpiling of emergency supplies, revised Emergency and Response Plan, Standard Operations Procedure in Emergencies, BCP (business continuity plan) and a well-equipped BCP site. The PERT Team was trained in October 2012 on Emergency preparedness and response with the Regional Emergency Advisor as the resource person. The Office now has full time Emergency Specialist at P3 level.
- The Supply and Logistics Management risk remain at Medium Low since the last review in 2011. The
office continues to enforce the proactive steps taken to address the challenges of supplies in the warehouses including direct supplies to partners.

- Country Environment and Programme Strategy and Technical Quality remain MH which would require an on-going management attention over the medium-term for significant impact and change to be realized.

The office has taken steps to better integrate risk management and preparedness into all programmes, and fully reviewed and updated the online Early Warning and Early Action for Fiji, Kiribati, Solomon and Vanuatu. The BCP was successfully tested for the MCO and Field Offices.

The office saw an improvement of risk awareness within staff and incorporating risk and mitigation strategies into programme work plans and discussions with key partners during programme review meetings.

Peer-reviews of each programme’s work-plan will be organised to ensure that relevant risks are identified and mitigating strategies put in place. The Deputy Representative has an oversight responsibility of ensuring that risk measures are adequately addressed in all programmes and adequate funding provided where necessary and possible.

The limited donor landscape remained a challenge for the office which depends on a single donor for a number of key programme posts. A transition funding strategy was successfully negotiated, and the resource mobilisation strategy designed as part of the preparation of the new country programme is expected to further mitigate this risk.

### Evaluation

During 2012, UNICEF Pacific continued to invest in strengthening the quality of evaluations and their use for strategic decision-making by programmes and management. An annual IMEP was prepared and reviewed by the Programme Management Team and the newly formed Studies, Evaluation and Knowledge Committee (SEKC) to check that all evaluations fit with strategic priorities. New procedures for evaluations were instituted, with the Planning and Evaluation Unit within PAPE now responsible, with support from the Senior Regional Evaluation Advisor and SEKC, for managing quality and independence of evaluation.

The office was involved in two evaluations in 2012, an external Evaluation of the Convergence Approach to Programming led by UNICEF, and the Independent Completion Review of the Expanded Programme on Immunization (EPI), and Child Protection Programme managed by AusAid. Both evaluations are still in draft. Senior independent evaluators were hired, noting that both were from outside the Pacific region where capacity and human resources for evaluation remain weak. To build capacity, UNICEF supported and participated in a joint UN Training on Evaluation in the UN Context organized by UNEDAP.

Management response to findings and recommendations from three evaluations completed in 2011 were completed in the first half of the year. This included a joint UN management response to the Advocacy Evaluation of the Human Face of the Global Economic Crisis (rated as one of the top 35 evaluations in UNICEF in 2011). The difficulty of developing a sound management response to weaker evaluations was noted, providing a lesson to the office on the need to selectively pursue evaluations, invest in their quality, and keep recommendations few and focused.

### Effective Use of Information and Communication Technology

**ICT Support**: Despite the initial challenges of Vision implementation the ICT Unit was able to support staff for account setup and configuration using Approva. The office is working on official Share Point pending global release, and meanwhile the programme team is using a free version of Huddle to facilitate collaboration and exchanges across teams and locations.

**E-mail System**: Preventive maintenance practices led to smooth system functioning. In late September 2012, the upgrade to the Domino Server system was completed successfully, and the Inter-Notes application for remote access was implemented.
**ICT Software/Hardware Standards & Policies:** The office continues to enforce Hardware and Software Standards and ICT policies and procedures. The replacement five-year rolling plan for ICT equipment was updated and shared with all section heads and field office chiefs for effective planning.

**Data Backup/BCP Site:** The BCP office site is located approximately 10 kms from the main office in Suva. A server was installed at the site with a 256 kbps link to the main office via leased line which will be upgraded to 1 Mbp for direct replication. Backups are done via external hard drive, taken to the BCP site and restored onto the server. Regular tests of the backup system were done.

**ICT Systems Security:** All offices have the Automatic Patch Downloader (APD) both on the client and server ends, and a SEPM server dedicated to anti-virus services – for automatic updating of virus definitions, firewall protection and scanning of emails for potential threats. In November 2012, the Microsoft© Windows Server Update Service (MS WSUS) was installed.

**LAN/WAN Connectivity:** As part of UN Common Services costs-saving strategy, UNICEF continued as the lead agency managing 10 Mbp bandwidth joint ICT contract on behalf of UNFPA, UNDP, UNDSS, OCHA OHCHR and UNWOMEN. In 2013, the link will increase to 24 Mbp. With the inclusion of other UN agencies, negotiations led to a favourable rate with the service provider. UNICEF uses 3 Mbps of the total bandwidth and will increase to 4 Mbps. In 2013, the Field Offices' bandwidth is at a 384/384 kbps (CIR 1:1) link. Monitoring tools have been implemented in all sites. In Fiji UNICEF uses Websense© and for the Field Offices, the service provider submits a weekly report on bandwidth usage and traffic analysis.

**ICT improvement Committee:** In 2012 the Committee facilitated the standardisation of conference room equipment for all offices, setup of Skype dedicated PCs in all Field Offices, and the successful implementation of the Notes Traveller system for smart phones.

**Remote Connectivity:** UNICEF Pacific has completed the migration to the Open Systems firewall management services. All offices are now using the same firewall hardware, software platform, and remote access is more stable. The Office is now able to remotely maintain and administer servers and staff computers in the field offices.

### Fund-raisining and Donor Relations

a) Last year, the CMT noted diminished performance in the submission of donor reports. The office put emphasis on timely submission through an internal tracking and reminder system, which has led to improvements, with only three out of the 23 reports due not submitted on time. Quality is strictly monitored through application of an internal checklist, with generally positive feedback received from donors.

b) On the basis of UNICEF’s track record in achieving results, the office continued to receive strong support from donors. In 2011, UNICEF Pacific secured Board approval to raise the OR ceiling for the 2008-2012 MCPD from US$ 33 million to US$ 45 million. Compared with the annual OR ceiling of US$6.6 million, requisition for 2012 was US$11,358,136 or 172 per cent of the ceiling.

c) The high disaster risk in the Pacific calls for UNICEF’s readiness to meet the CCCs. In recognition of UNICEF’s comparative advantage, AusAID continued to support UNICEF to maintain pre-positioned stockpiles of supplies in several locations in the sub-region so that they can be rapidly deployed to disaster-affected populations. In the period under review, AusAID continued with its positive practice of immediately replenishing utilized supplies.

d) Particular attention was devoted in this last year of the cycle to ensure optimal utilisation of PBAs expiring in 2012, with a resulting 88 per cent utilization rate. Performance was somewhat constrained by the introduction of VISION, which made it difficult for staff to ascertain the actual utilisation. Lessons learnt from this should help programme staff to be more conversant with financial monitoring systems and reports in 2013.

e) Grant utilisation is monitored monthly through the programme management team meeting and reported to the CMT. In addition, focused budget utilisation reviews are held as part of quarterly programme reviews, and dedicated sessions were held from September onwards to ensure optimal utilisation of funds. PBA extensions were only exceptionally requested based on agreement with donors.

f) UNICEF continued to ‘stretch its dollars’ by joining with other development partners to add value and
leverage resources for development initiatives. For instance, by joining the ‘pooled fund’ (with Australia and New Zealand) under the Vanuatu Education Road Map, UNICEF’s contribution of US$ 500,000 into a total annual pool budget of about US$18 million creates positive externalities whereby technical capacity can be utilized to operationalize the pooled funds to achieve sustainable results for children. A new resource mobilisation strategy was developed and activated in support of the new multi-country programme, seeking to further expand funding sources which currently include: AusAID, NZAP, Japan (Human Security Trust Fund), EU, UN-MDTF, UNICEF Australia, UNICEF New Zealand, UNICEF Japan (JVC) and UNICEF Korea. A ‘transition funding proposal’ was negotiated with AusAid for the first 18 months of the new cycle, extending to further expand funding sources which currently include: AusAID, NZAP, Japan (Human Security Trust Fund), EU, UN-MDTF, UNICEF Australia, UNICEF New Zealand, UNICEF Japan (JVC) and UNICEF Korea. A ‘transition funding proposal’ was negotiated with AusAid for the first 18 months of the new cycle, extending to further expand funding sources which currently include: AusAID, NZAP, Japan (Human Security Trust Fund), EU, UN-MDTF, UNICEF Australia, UNICEF New Zealand, UNICEF Japan (JVC) and UNICEF Korea. 

Management of Financial and Other Assets

The Office work processes were revised to be risk informed, IPSAS compliant, simplified and easy to apply with the aim of speedy programme implementation. Some areas of the work processes were tested during operational oversight visits and were found to be effective and innovative especially as a training manual for new staff.

Training on new financial policies was one of the greatest achievements, in the period under review, where key staff was made aware of the policy changes and the impact on their work and their partners. There was a HACT (harmonized approach to cash transfers) refresher training for all partners in the three field offices (Kiribati, Vanuatu, and Solomon Islands) with practical exercises on the preparation of FACE form. There was an improvement in the submission and completion of DCT (direct cash transfers) requests to the FACE form as a result of the training.

UNICEF is a key member of the UN Joint Banking Committee and provides professional and technical advice throughout the solicitation process for new bankers.

Initial challenges with VISION implementation significantly affected UNICEF’s credibility, which reflected negatively in the EPI and Child Protection Independent Completion Reviews (ICRs). However, by May 2012, most of the activities had returned to a reasonable momentum, allowing smooth processing of documents and implementation of activities. The Office took initiative to train key staff on cross learning within sectors (Finance, Programme, HR, and Supply). Submission of prompt Bank Reconciliation suffered a setback between August to October 2012 as a result of the resignation of two key staffs trained in VISION and the preparation of Bank Reconciliation. The office was able to overcome this from November 2012 onwards.

The operational satisfactory risk rating with the internal audit was sustained through regular RCSA review and other budgetary controls. Within the year, the office conducted three major budget review processes with management leading and requesting each programme to justify their resource utilization and their forecast for the remaining part of the year.

The bank signatory panels were updated. The new format of the Tables of Authority (ToA) was prepared and letters delegating responsibilities to staff were issued. The ViSA and Approva Administrator roles were properly managed and monitored. Segregation of Duties (SoD) clean up exercise was completed and mitigating measures were put in place for those staff that has conflicting roles.

Significant progress was made towards becoming IPSAS compliant in Asset Management of the Office.

Over 95 per cent travel claims/certifications were submitted within 15 days of completion of travel.

Despite, the streamlined process of DCT liquidation between Field Offices and Suva office, there still remain challenges of prompt payment of DCTs to partners.

The CRC (Contract Review Committee) met regularly to review 36 contractual proposals. Six PCAs (Programme Cooperation Agreements) were approved by the Representative after review by the statutory
PCA Review Committee.

As of 31 December 2012, estimated RR (Regular Resources) utilization was 99 per cent, Institutional Budget 99 per cent, OR (Other Resources) 88 per cent and ORE (Other Resources-Emergencies) 100 per cent.

**Supply Management**

The office prepared and submitted 2012 Supply Plans earlier than any other year to Supply Division and EAPRO. Based on the approved Supply Plans, the total amount estimated for procurement of the supplies was approximately US$2,600,000, but due to funding constraints, we only managed to procure supplies at the approximate value of US$821,100 representing 32 per cent.

Although VISION implementation challenge affected the timely procurement of goods and services to the implementing partners, 86 per cent of supplies procured by the UNICEF Pacific Office were delivered to the partners within 12 weeks of order.

A market survey started last year was completed in February 2012 resulting in the establishment of Long Term Agreements (LTA) with local vendors in printing, stationary, ICT, hotels, freight forwarders, and HR services/companies. The suppliers list has been updated from 32 to 90 representing an increase of 181 per cent.


The office distributed Emergency Health Kits, Oral Rehydration Salts, WASH Kits (that contained collapsible containers, hand washing soaps, water purification tablets (WPT), Water Bladders, School-in-a-Box and Recreational Kits, and the IEC materials for an amount of F$90,133 from pre-positioned stocks to families affected by floods in Fiji (February and April 2012).

Compared to last year, the stock levels of the supplies in the Fiji and Field Office (Kiribati, Solomon Islands and Vanuatu) warehouses decreased by 45 per cent, from US$1 million to US$447,000. The regular monitoring and implementation of internal control measures in the management of warehouses and especially access to the warehouse has improved.

The Vaccine Independence Initiative (VII) is the main procurement service undertaken on behalf of the 14 Pacific Island Countries (PICs). Vaccines, syringes, cold boxes and safety boxes worth at approximately US$783,380 were procured under the VII agreement signed with the 14 PICs. The main constraints faced were the direct freight shipment of the vaccines from Nadi to the Northern Pacific (FSM and RMI) as there are no direct flights, and no freight forwarder in Australia accepts to handle the shipment of vaccines to those countries. The other constraints faced include the high freight cost for the shipment of supplies to the PICs. The Office is looking into ways of addressing those challenges by direct shipment to PICs, with the support of Joint Presence Offices for follow up actions.

**Human Resources**

**Human Resource Capacities:** The office prepared and submitted its new CPMP (2013 – 2017) to the PBR on 3 May 2012. Adequate consultation with partners, Staff Association and staff involvement from the initial stage resulted in a smooth process. The Office put strong value on its staff as the greatest asset for the Country Programme. With the slogan ‘Our Staff is the Programme’, management laid emphasis on competent, professional staff engaging in policy discussions, contributing to leveraging resources for children,
while supporting concrete actions at the community level. The new structure includes 105 staff compared to 104 in the current Country Programme. Eleven new posts were established, ten posts abolished and 24 posts changed reporting lines.

Within the year there was quite a high turnover due to reassignment of IP staff, resignations, and filling up of new positions. The Programme team saw the transfer of three section Chiefs (Child Protection, Health and Education) and other key programme staff, at a critical time of finalisation of the new multi-country programme. A total of 14 positions were filled, but some key positions, including Chief of Education remain vacant.

The HRDT developed a Strategic Learning Plan for 2012 which was approved by CMT. The Learning Plan was implemented in collaboration with the VISION training. The Senior HR Assistant provided HR support to the DPRK Office for three months. Managing Performance for Results training were completed in Suva Country Office and Field Offices (Solomon Islands, Vanuatu and Kiribati) with 81 per cent of UNICEF Pacific staff trained. The coaching rollout was jointly organized with the Managing Performance for Results Training.

There were other international trainings in which staff participated such as Leadership and Management of Humanitarian Action Training, Communication for Development, and Advances in Social Norms. Additionally local training such as PERT, VISION and UN Cares trainings was delivered. With this learning and coaching, staff capacity has improved.

Staff Morale: The office lost one of its longest serving colleagues of 22 years, Ms Dorothy McGoon, through a sudden death. This impacted staff and the Office for a considerable period. However, Staff morale continues to be high as a result of the cordial relationship between management and Staff Association, an open door policy, a suggestion box jointly opened by the Representative and Staff Association Chair, and issues addressed through JCC and/or CMT. Annual Award Night organized jointly by management and staff association also assists in improving the staff morale.

Performance Appraisal: The office continues to see improvements in the timely and quality performance appraisals of staff -99 per cent and 91 per cent of PAS completion for phase 1 and 2 respectively. With the delivery of training for all staff on Managing Performance for Results we hope to build a culture of feedback, conversation and coaching for supervisors and supervisees.

Staff Wellbeing: A number of initiatives by Caring-for-Us to create an environment on work-life balance and promote healthy programmes were organized. These included sports, exercise and group walk, health checks, cancer awareness talks, and movies for staff.

Efficiency Gains and Cost Savings

A number of cost saving initiatives were taken jointly with other UN Agencies especially UNDP, UNFPA and UN Women. These activities included joint/coordinated internet and travel agency contacts with service providers, where discounts and better rates were negotiated with resulting in savings as stated in table below.

The other source of saving was through economic use of electricity. Through the Green Office initiative, staff members were encouraged to save energy through efficient use of electricity, reduced use of paper and printing, recycling of plastics and use of telephone and video conferences to reduce travel within the Pacific. Another area is the use of Skype to communicate with colleagues/Partners in Field Offices and Regional Office.
2012 Summary of Cost Savings

<table>
<thead>
<tr>
<th>Cost Savings Area</th>
<th>Cost Savings in FJ$</th>
<th>Cost Savings in US$</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>UN Joint Internet Contract with Service Providers.</td>
<td>44,620</td>
<td>24,927</td>
<td>With increased bandwidth and more reliable service.</td>
</tr>
<tr>
<td>UN Joint Local Travel Agents with Discounts negotiated.</td>
<td>19,198</td>
<td>10,725</td>
<td>Due to timely payment of airfares.</td>
</tr>
<tr>
<td>Virtual May 2012 PBR - three Management staff not travelling to Bangkok.</td>
<td>33,025</td>
<td>18,450</td>
<td>More savings anticipated with the use VSAT and teleconferences.</td>
</tr>
<tr>
<td>Energy - Electricity Bills</td>
<td>5,641</td>
<td>3,169</td>
<td>Green Office cost saving initiative to be continued.</td>
</tr>
<tr>
<td>Toner Usage</td>
<td>984</td>
<td>557</td>
<td>Green Office cost saving initiative to be continued.</td>
</tr>
<tr>
<td>Paper</td>
<td>4,913</td>
<td>2,780</td>
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</tbody>
</table>

TOTAL | 120,535 | 67,486 | Cost saving occurred due to increased usage of Skype by staff in the Fiji Office.

Changes in AMP & CPMP

The 2013 AMP will be developed following the key principles defined in the 2013-2017 CPMP. The full activation of the revised office structure should be completed over the first quarter, but in order to ensure a better balance between support and programme funded positions, the office is considering some adjustments to the office structure to be presented to the 2013 PBR (Programme and Budget Review).

Acronyms

<table>
<thead>
<tr>
<th>Acronyms</th>
<th>Description</th>
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<tbody>
<tr>
<td>ADB</td>
<td>Asian Development Bank</td>
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<tr>
<td>AMP</td>
<td>Annual Management Plan</td>
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<tr>
<td>AusAID</td>
<td>Australian Agency for International Development</td>
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<td>BAG</td>
<td>Brisbane Accord Group</td>
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<td>BC</td>
<td>Business Continuity</td>
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<tr>
<td>BCP</td>
<td>Business Continuity Plan</td>
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<tr>
<td>BFHI</td>
<td>Baby Friendly Hospital Initiative</td>
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<tr>
<td>CBOs</td>
<td>Community-Based Organizations</td>
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<tr>
<td>CCCs</td>
<td>Core Commitments for Children</td>
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<tr>
<td>CEDAW</td>
<td>Convention on the Elimination of all Forms of Discrimination Against Women</td>
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<tr>
<td>C4D</td>
<td>Communication for Development</td>
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<td>CMT</td>
<td>Country Management Team</td>
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<td>CDP</td>
<td>Committee for Development Policy</td>
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<td>COs</td>
<td>Country Offices</td>
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<tr>
<td>CRC</td>
<td>Convention on the Rights of the Child/Contracts Review Committee</td>
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<tr>
<td>CROP</td>
<td>Council of Regional Organisations in the Pacific</td>
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<td>CSOs</td>
<td>Civil Society Organisations</td>
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<tr>
<td>DCT</td>
<td>Direct Cash Transfer</td>
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<tr>
<td>DPRK</td>
<td>Democratic People’s Republic of Korea</td>
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<td>DRR</td>
<td>Disaster Risk Reduction</td>
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<tr>
<td>EAPRO</td>
<td>East Asia and Pacific Regional Office</td>
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<td>ECCE</td>
<td>Early Childhood Care and Education</td>
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<td>EPI</td>
<td>Expanded Programme on Immunization</td>
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<td>ERM</td>
<td>Enterprise Risk Management</td>
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<tr>
<td>FBOs</td>
<td>Faith Based Organisations</td>
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<td>FSM</td>
<td>Federated States of Micronesia</td>
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<tr>
<td>Acronym</td>
<td>Full Form</td>
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<tr>
<td>GDP</td>
<td>Gross Domestic Product</td>
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<tr>
<td>HACT</td>
<td>Harmonized Approach to Cash Transfer</td>
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<tr>
<td>HRDT</td>
<td>Human Resources Development Team</td>
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<tr>
<td>ICR</td>
<td>Independent Completion Reviews</td>
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<td>IMEP</td>
<td>Integrated Monitoring and Evaluation Plan</td>
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<tr>
<td>IPSAS</td>
<td>International Public Sector Accounting Standards</td>
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<td>IT</td>
<td>Information technology</td>
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<tr>
<td>JCC</td>
<td>Joint Consultative Committee</td>
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<td>JCV</td>
<td>Japan Committee - Vaccines for the World's Children</td>
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<td>KDP</td>
<td>Kiribati Development Plan</td>
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<td>KM</td>
<td>Knowledge Management</td>
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<td>Long Term Agreements</td>
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<td>Monitoring and Evaluation</td>
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<td>MBB</td>
<td>Marginal Budgeting for Bottlenecks</td>
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<td>Multi-Country Office</td>
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<td>Multi-Country Programme Document</td>
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<td>Multi-Country Programme Management Plan</td>
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<td>MDGs</td>
<td>Millennium Development Goals</td>
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<td>MH</td>
<td>Medium High</td>
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<tr>
<td>MNCH</td>
<td>Maternal Newborn and Child Health</td>
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<tr>
<td>MOE</td>
<td>Ministry of Education</td>
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<td>MOH</td>
<td>Ministry of Health</td>
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<td>MoRES</td>
<td>Monitoring Results for Equity System</td>
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<td>MOSS</td>
<td>Minimum Operating Security Standard</td>
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<td>MoSW</td>
<td>Ministry of Social Welfare</td>
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<td>MoU</td>
<td>Memorandum of Understanding</td>
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<td>MQSS</td>
<td>Minimum Quality Service Standard</td>
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<td>MSC</td>
<td>Most Significant Change</td>
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<td>Mid-Term Review</td>
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<td>NACC</td>
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<td>NCD</td>
<td>Non Communicable Disease</td>
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<td>NCRCC</td>
<td>National Child Rights Coordination Committee</td>
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<td>NDMO</td>
<td>National Disaster Management Office</td>
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<td>National Development Strategy</td>
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<td>National Sustainable Development Plan</td>
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<td>NZAID</td>
<td>New Zealand Agency for International Development</td>
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<td>NZAP</td>
<td>New Zealand Aid Programme</td>
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<td>PAPE</td>
<td>Policy, Advocacy, Planning and Evaluation</td>
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<td>PBR</td>
<td>Programme Budget Review</td>
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<td>PCR</td>
<td>Programme Component Result</td>
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<td>Pacific Island Countries</td>
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<td>PPTCT</td>
<td>Prevention of Parent-to-Child Transmission</td>
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<td>RCSA</td>
<td>Risk and Control Self-Assessment</td>
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<td>RMI</td>
<td>Republic of the Marshall Islands</td>
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<td>Regional Office</td>
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<td>Save the Children Australia</td>
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<td>SM&amp;NC</td>
<td>Safe Motherhood and New-born Care</td>
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<td>SoD</td>
<td>Segregation of Duties</td>
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<tr>
<td>Acronym</td>
<td>Description</td>
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<td>SOPs</td>
<td>Standard Operating Procedures</td>
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<td>SOPAC</td>
<td>South Pacific Applied Geoscience Commission</td>
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<td>SOWC</td>
<td>State of the World’s Children</td>
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<td>SPC</td>
<td>Secretariat of the Pacific Community</td>
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<td>SWAp</td>
<td>Sector Wide Approach</td>
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<td>ToA</td>
<td>Table of Authority</td>
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<td>TSDF</td>
<td>Tonga Strategic Development Framework</td>
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<tr>
<td>UNCT</td>
<td>United Nations Country Team</td>
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<tr>
<td>UNDAF</td>
<td>United Nations Development Assistance Framework</td>
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<tr>
<td>UNISDR</td>
<td>United Nations International Strategy for Disaster Reduction</td>
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<td>UN-MDTF</td>
<td>United Nations Multi-Donor Trust Fund</td>
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<td>UNTFHS</td>
<td>United Nations Trust Fund for Human Security</td>
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<td>UPSA</td>
<td>UNICEF Pacific Staff Association</td>
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<td>VII</td>
<td>Vaccine Independence Initiative</td>
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<td>VMAT</td>
<td>Vaccine Management Assessment Tool</td>
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<tr>
<td>WASH</td>
<td>Water Sanitation and Hygiene</td>
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<tr>
<td>VAW</td>
<td>Violence Against Women</td>
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Through the use of different communication channels (TV, radio, social networks and IEC materials) you can engage national and regional media houses to produce and broadcast productions with, for, and about children, education, health and nutrition and STIs and HIV and AIDS. UNICEF Pacific hosted the media people were able to take forward an issue of concern, such as climate change, violence against women and One Talk for All (OT4A) was a week-long workshop aimed at demonstrating the importance and potential of youth-led media in building the capacity and skills of local Pacific producers to use media to empower and educate children and adolescents in realizing the articles on the Convention on the Rights of the Child. Through the use of different communication channels (TV, radio, social networks and IEC materials) young people were able to take forward an issue of concern, such as climate change, violence against women and children, education, health and nutrition and STIs and HIV and AIDS. UNICEF Pacific hosted the media training in Fiji in partnership with SPC and Pacific Media Assistance Scheme (PACMAS). With careful collaboration and planning between partners and young people, Country offices can use this initiative to engage national and regional media houses to produce and broadcast productions with, for, and about children and youth.
Innovation or Lesson Learned

Lessons Learned

Potential Application

Issue

The objective was to train media producers, mainly from radio and TV, to establish: 1) A common national social media platform for knowledge sharing and engagement and; 2) A weekly 30 minute youth-led talk-back show in their respective media outlet, through which the social media engagement and knowledge sharing can be extended to youth in remote communities without access to the internet.

Strategy and Implementation

Participants were selected from major media outlets, NGOs and government departments. As such, partnerships were further strengthened with these respective organizations and departments to ensure sustainability of programmes via regular broadcasts (radio or TV) as well as print media and digital engagement within each country using media products that were developed from the OT4A. Furthermore, using skills learnt from the workshop, participants can also develop engaging media products in-country. UNICEF, SPC and PACMAS will continue to support this initiative and will continue to strengthen existing partnerships and others to continue to develop media that is for, with, and about children and young people.

Progress and Results

During the workshop 28 producers from five Pacific Island Countries (Fiji, Solomon Islands, Vanuatu, Republic of Marshall Islands and Kiribati) produced a total of 20 quality media materials that were screened in Suva. This demonstrated that there is potential for youth-led media in the Pacific. The productions have all been packaged and made available online on One Talk 4 All country pages. These country pages engage on a multitude of topics, and have a stronger visual national branding.

Next Steps

Child Protection Baseline Research for the North Pacific Island Countries: Federated States of Micronesia, Republic of Marshall Islands and Palau

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Abstract

Protection information and analysis is the foundation of sound protection strategies. Without baseline data it is difficult to design interventions, measure progress in building systems and gauge the extent to which children are better protected from violence, abuse and exploitation. Globally, UNICEF’s Child Protection programmes and partners face the challenge of inadequate information on threats to children’s welfare and the strengths and weaknesses of national and community protective systems and practices. The Child Protection Baseline Research Studies for the Federated States of Micronesia (FSM) Republic of Marshall Islands (RMI) and Palau provide for the first time a comprehensive national and subnational set of data and information in three very geographically challenging North Pacific Island Countries.

Innovation or Lesson Learned

With the support of the DevInfo team, the use of PDAs in this research was innovative in that the types of...
questionnaires being used were much more comprehensive and complex than those which were being used internationally with this technology and software. The research exercises were deliberately testing the appropriateness of this technology for qualitative as well as quantitative collection of child protection data. From an equity perspective, the baseline research studies have captured child protection data in a manner that can be further disaggregated to unmask disparities. The research studies are not yet published but have already been endorsed at the highest level by Government Cabinet in RMI and Palau. It is expected that FSM Government will do likewise.

The Child Protection Baseline Research reports provide for the first time a comprehensive set of data, information, analysis and recommendations on child protection in three North Pacific Island Countries.

### Potential Application

The Child Protection Baseline Research provides a model that other countries and regions can use to strengthen the evidence base for Child protection strategies. The three-pronged analysis of 1) legal and policy frameworks, 2) social welfare systems and 3) attitudes and practices and broad sampling provide a comprehensive overview of the state of Child Protection. The inclusion of structured recommendations provides a shared agenda of action to guide forward planning. And the wealth of data generated can be used for baselines and disaggregated analysis of disparities.

### Issue

Despite their relatively small population, North Pacific Island Countries have unique challenges arising from their wide spread geographical location, wide cultural diversity and the lack of child protection documentation (Federated States of Micronesia for example is spread over the ocean in distances similar to those of the United States of America...). There are different levels of vulnerability and economic and social development both within and between countries.

### Strategy and Implementation

The Child Protection Baseline research methodology followed the protective environment approach for children and was divided into three major components: legal and regulatory frameworks; social welfare systems; and practices and attitudes in relation to child protection. The research exercise included Focus Group Discussions, Key Informants Interviews, Children Household Questionnaires, Adult Household Questionnaires and a comprehensive desk review. Acknowledging that geography, gender and natural disasters are some of the major inequity drivers in the Pacific, conscientious efforts were made in reaching children and communities in urban, peri-urban, rural and outer island communities - often in hard to reach locations in the North Pacific region. An important feature of the research in the three countries was the continuing pioneering use of PDAs for electronic data capture.

The research was undertaken in close partnership with Government partners and generated significant levels of national ownership and commitment. The National Researchers and Field Research teams were composed by nationals, many of them seconded from Government. The research studies were overviewed and guided by National Steering Committees made up by representatives of government and civil society in each of the countries.

### Progress and Results

Findings illustrate institutional capacity and maturity to be at different stages in these three North Pacific Island Countries. However, findings concur in showing very high levels of violence against children in their homes, communities and schools. While in some instances countries have been quite effective in educating their children and achieving increasingly higher standards of living, countries find themselves at cross roads. Communities look to traditional methods to protect children from abuse and neglect although very often traditional structures are no longer present, particularly in urban areas. The Child Protection Baseline Research studies make structured recommendations for all stakeholders and pave the road for the achievement of a protective environment for all children in consideration of communities cultural values and traditions.

### Next Steps

UNICEF Pacific will work with government and partners in the North Pacific Countries to strengthen the
legislative and regulatory frameworks for Child Protection – as part of an overall systems-building approach.