Executive Summary

Achievements

Pakistan experienced yet another turbulent year in 2011 due to critical gaps in basic social services and rights issues, increased poverty as well as insecurity, conflict and floods.

UNICEF Pakistan made achievements in respect of early recovery for some 7.8 million affected by the country-wide 2010 floods, while responding to humanitarian needs of some 5.1 million people due to floods in Sindh in 2011. Through the mother child health week health and nutrition messages reached 4.7 million mothers, 8.8 million children received anthelmintic treatment. CMAM reached 0.5 million children in 867 locations and 3.5 million children and 1.5 million women were screened for malnutrition, out of which 558,000 children and 244,000 women were treated. Intensive support to improve IYCF practices were provided to 5 million mothers and 1.2 million children received micro-nutrient supplementation. For WASH, UNICEF provided safe drinking water to 4.8 million people (including 2.4 million children), sanitation to 3.5 million people, of which 1.1 million were reached as part of the scaling up of sanitation initiative who now reside in open defecation free environments in 820 villages across Pakistan, Hygiene promotion reached 3.4 million people (including 1.7 million children).

The re-engineering of the polio eradication efforts firmly embedded in NEAP was combined with expanded social mobilisation and communication which changed the dynamics and the partnership for polio eradication.

The preparation and finalisation of the National Nutrition Survey (with disaggregated data by Province) combined with leveraging counterparts, stakeholders and donors for addressing nutrition issues through the PINS is an achievement.

Province-wide school enrolment drives resulted in an increase of nearly 3 million children in government schools out of which approximately 50% are girls and by the year end, 661 school buildings have been constructed in the areas affected by the 2005 earthquake, and over 428,000 children including 186,300 girls were re-enrolled.

Challenges

On the shortfalls, the devolution of major ministry functions and structures created a vacuum on the understanding of the roles and responsibilities which impacted effectiveness and implementation. The devolution impacted particularly the health sector, including community-based primary health care such as the Lady Health Workers Programme. The shift from the Cluster approach to Early Recovery Working Groups as well as the hesitation on launching the 2011 flood appeal for Sindh and the finalization of the early recovery efforts distracted for maintaining the momentum created by the relief response and weakened the bridge between relief to development.

Partnerships

On the most important collaborative partnerships, outside of Government, were the strategic nutrition partnerships involving WFP, WHO and FAO, World Bank, Dfid, AusAid, ECHO and other donor partners who laid the foundation for development of the nutrition integrated strategy at the federal and provincial levels which includes priority support to national stakeholders. Further key collaborations included WFP (joint implementation of the CMAM where they cover supplementary feeding) and WHO (management of stabilization centers).
### Country Situation

Besides the ratification of the Optional Protocol of the Convention of the Rights of the Child (CRC) on the sale of children, child prostitution and child pornography in June, 2011, Pakistan was characterised by 1) the implementation of devolution of power from the federal to the provincial governments (the 18th Amendment to the Constitution); 2) recurrence of floods that affected over 5 million people; and 3) heightened insecurity especially in the tribal areas bordering Afghanistan. During 2010-2011, Pakistan’s Human Development Index (HDI) ranking was 145, moving the country of 178 million [1], including 89 million children and 32 million women of reproductive age, from the medium to low developed category.

Coming into a full effect in July 2011, the new governance mechanism under the 18th Amendment shifted greater responsibility to provinces in the social sectors that directly impact the well-being of children and women. As underlined by SITAN 2011, devolution not only carries with it the prospect of improved service delivery and scope for public participation to development processes, but also the potential for capacity and resource gaps during the transition period. While the 18th Amendment affirmed new fundamental rights including rights to information and education, concerns were raised when the decision was made in June 2011 to abolish the National Commission for Human Development (NCHD) which was set up through a presidential ordinance in 2002 to support education and health care. Moreover, progress on the proposed National Child Protection Policy came to a halt in early 2011. The 1958 West Pakistan Maternity Benefit Ordinance (WPMBO), which served to protect the rights of working women, was repealed as a federal law and was to be re-enacted as a provincial law. Pending incorporation of the law in a provincial legislation, it no longer has any effect.

Monsoon flooding hit hardest in Sindh and Balochistan provinces where the highest percentages of deprived districts are found (68% and 61% respectively) [2]. It affected over 5.1 million people including some 2.55 million children and 1.27 million women. [3]. The recurrent disaster not only added to the massive destruction caused by the historic floods in 2010 (rendering over 10% of the population across the country affected), but it also seriously compromised efforts towards achieving the development goals. Educational infrastructure suffered serious damage, with reportedly 3,710 schools, mostly primary, partially or completely destroyed. However, the establishment of Temporary Learning Centres (TLCs) in Sindh allowed over 38,000 children access to education for the first time in the first 4 months of the emergency operation. To accelerate the restoration of life and economic activity, early recovery support is critically needed for those returning to damaged homes and affected villages. This encompasses the provision of safe water and adequate sanitation, basic health and nutrition services for pregnant and lactating women (PLWs) and children under 5 years of age, and access to education for school-aged children.

The crises that affected Khyber Pakhtunkhwa (KP) and the Federal Administered Tribal Areas (FATA) were persistent throughout the year with heightened insecurity inducing flash displacements in January and June in FATA, systematically denying children access to basic health, nutrition, education and protection. Government-assisted returns accelerated towards the end of the year, however according to the FATA Disaster Management Authority (FDMA), over 85,000 families were displaced in the region in late November 2011.

Pakistan continued to be one of four countries in the world where polio remained endemic and 2011 saw an alarming increase in the number of reported cases and affected districts (192 cases/58 districts in 2011 against 144 cases /42 districts in 2010). A grand stride was made towards polio eradication in 2011 when support of the immunisation campaign was attained from the tribal and religious leaders in KP and FATA.

The recently concluded National Nutrition Survey (NNS) indicates that almost one-third of the population is living in a state of moderate or severe hunger and there has been little improvement in the nutrition status of the population during the past two decades. Malnutrition contributes to 35% of under-five deaths and the economic costs are high, an estimated 2-3% of GDP equivalent to US$3.3 to US$4.9 billion lost every year on the account of vitamin and mineral deficiencies alone.

A rapidly increasing population at an annual growth rate of 2.5% remains a cause for serious concern [4]. One out of every ten Pakistani child dies before turning five, with over half of them dying before completing the first month of their life. Apart from malnutrition, the most common causes of infant and
child deaths are diarrhoea, pneumonia, and respiratory infections as well as birth asphyxia which could be greatly alleviated by an enhanced rate of skilled birth attendance, reflected as one of Pakistan’s seven ‘on track’ or ‘ahead’ indicators for the Millennium Development Goals (MDGs).

As Pakistan ranks as the third most dangerous country for women in the world in a study concluded by Trust Law in June 2011[5], the situation of women remained challenging as gender inequalities deeply rooted in societal norms denied them to exercise equal rights to men. Landmark progress was achieved by The Prevention of Anti-Women Practices Act passed by the National Assembly, aiming to strengthen the protection of women against discrimination and harmful traditional practices such as depriving women of inheritance, forcing them into marriage to settle disputes or bartering them.

List of Major Publications with links:
4. The Situation Analysis of Children and Women in Pakistan (SITAN 2011) (draft)
7. Scaling up strategy for Early Childhood Education in Punjab
8. Flood affected Nutrition Survey (FANS 2010-11)

[5] Ibid, 2

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

Children and women remain the most vulnerable segment of society, especially those marginalised by economic, geographic and ethnic disparities. Gender gaps have narrowed over the years [1], yet substantial inequality still manifests in public and private domains, sidelining girls and women in society.

Pakistan is not on track to achieve Millennium Development Goals. The country lags on all education and maternal health targets, Under 5 Mortality Rate (U5MR) and Maternal Mortality Ratio (MMR); and is off-track on Infant Mortality Rate (IMR). Newborn, IMR and U5MR are all highly correlated with mothers' education and wealth [2].

Provincial, rural-urban disparities are marked in key indicators such as nutritional status, births assisted by skilled birth attendants, immunisation rate, Net Enrolment Rate (NER) and access to safe drinking water
Ante-natal care coverage has noticeable inter-provincial variations (27.7% - 80+ %), as does birth registration (0.8% - 77%). Again, disparities are related to location, wealth quintile and education.

Children in some areas are deprived of education due to the deliberate destruction of schools. Threats against girls' schools resulted in the closure of 900 schools, depriving 120,000 girls of education. According to a UNESCO Report (2010) Attacks and threats of attacks on schools, especially girls' schools, has resulted in the closure of at least 900 schools.

Situation Analysis of Children and Women in Pakistan 2011(draft)

Ibid, 1

Ibid, 1

National Nutrition Survey (NSS) 2011, Pakistan

Ibid, 1

Education under attack 2010, Paris, UNESCO

Data/Evidence

In all its programmes, CO attempts to identify the most deprived children and communities for its interventions, through studies and surveys such as the Multiple Indicator Cluster Surveys (MICS), the National Nutrition Survey (NNS) and the Situation Analysis of Children and Women (SITAN) in Pakistan. With decades of experience in working in the country, CO invested in proven, cost-effective interventions which seek to systematically address bottlenecks and barriers to reaching unreached children and maximise the impact of available resources.

To provide solid basis for the new country programme and advocacy in Pakistan, CO conducted equity focused SITAN in 2011. The objectives of the SITAN are 1) to identify patterns of inequality and disparities in access to basic services focusing on children and women, 2) to determine the extent to which the basic rights of children and women are being denied, 3) to identify the most excluded groups disaggregated by sex, ethnicity, geographical location, income levels, etcetera., and 4) to determine the immediate, underlying and root causes of exclusion.

Comprised of a national report and seven regional reports, the SITAN made an effort to assess disparity amongst districts in each province/area by calculating Child Well-being Index (CWI), a new approach for quantifying deprivation based on a set of child-specific indicators against traditional income/consumption-based measures of poverty. It also provides detailed causality analysis of issues related to children and women in the context of four thematic areas: the living environment (health, nutrition and disease control); the nurturing environment (education and literacy); the protective environment (protection of children and women from violence, exploitation and abuse, etcetera.); and the natural environment (focusing on access to clean water and environmental sanitation).

CO also capitalises the findings of MICS which are conducted separately by each Provincial Government. During 2011, the provincial MICS report was finalised in Balochistan while field data collection was completed in Punjab.

Another landmark survey conducted in 2011 was the National Nutrition Survey that updated the one undertaken a decade ago. The survey provides strong evidence base for policy development to address the nutrition related issues of the most marginalised children and women across the country. The report will be launched shortly.
Additionally, a comprehensive survey was conducted to assess the status of conflict-affected Internally Displaced Persons (IDPs) in Khyber Pakhunkhwa (KP) and Federally Administered Tribal Areas (FATA). To better gauge the vulnerabilities in the context, the profile of vulnerable IDPs were categorised into widows, orphans, separated children, chronically ill, physical or mentally challenged and female-headed households. The data is also used by various humanitarian organisations for their programming in KP and FATA.

**Monitoring Mechanism**

The MICS reports provide baseline data at district level in each province on key social sector indicators related to children and women. The provincial MICS data are the main sources to assess the achievements of results for the most deprived children, families and groups.

Different programme components also conduct sectoral studies and Knowledge, Attitudes and Practices (KAP) surveys to track progress and assess impact of their programme interventions on the lives of children and women with focus on the most deprived children and families.

To monitor results in humanitarian action, CO has developed a detailed CCC monitoring and reporting framework using the Humanitarian Performance Monitoring Toolkit developed by NYHQ. The framework was implemented for programmatic monitoring during 2011 by the programme sections and also by third party field monitors.

The mid-year reviews and the year-end reviews are held in the field offices as well as at the national level to review the achievements of the results. These reviews further help CO to gauge the progress made against its targets.

Lastly, the periodic programme evaluations and assessments such as the recently conducted 'Children Vulnerability Assessment' and 'Impact of LHW programme in KPK', enable CO not only to streamline its efforts towards achieving the desired results but also to provide resource base on good practices and lesson learned.

**Support to National Planning**

In Pakistan, unlike other countries, provincial governments undertake Multiple Indicator Cluster Surveys (MICS). CO thus provides technical support to provincial governments to collect data at the district level. The government line departments use findings of these surveys for better planning, resource allocation, results monitoring and resource mobilisation. The entire exercise of conducting MICS is considered as capacity development process through which the capacity of provincial statistical offices is strengthened to help the government line departments in evidence-based decision making. During 2011, the provincial governments of Balochistan, Punjab and Sindh were supported to conduct MICS, with provincial report now finalised in Balochistan, field data collection completed in Punjab, and field work started in late 2011 in Sindh.

CO also supports the national and provincial government line departments in conducting other sectoral studies. During 2011, country office conducted National Nutrition Survey to assess the nutritional status of women and children which updated 2001 survey findings.

CO is an active member of the Independent Monitoring Board for polio eradication, which serves as an independent assessor. Its reports provided an important advocacy tool to steer the government to make informed decisions on polio eradication. Evaluation and monitoring data was also used to advocate for stronger integration between programmes involved in its implementation.

CO furthermore supported the Human Rights Commission of Pakistan to generate credible statistics on violations of children’s rights through a network of 1,000 volunteers in 100 districts. From 2012, periodic analytical reports will be generated, and an online database will be available for adaptable and responsive advocacy.
Any other relevant information related to data/evidence?
The Federal Bureau of Statistics (FBS), under the Statistics Division of the Ministry of Economic Affairs and Statistics of Pakistan, provides national statistical services. FBS, now called the Pakistan Bureau of Statistics (PBS), conducts household surveys called the Pakistan Social and Living Standard Measurement (PSLM), which provides data on socio-economic indicators, every alternate year at provincial and district levels, with the most recent report being for the 2010-2011 period. FBS also produces a Statistical Yearbook and Pakistan Statistics Handbook.

Another entity producing reliable, valid data is the National Institute of Population Studies (NIPS). NIPS conducts Demographic and Health Surveys (DHS). The most recent DHS report is available for 2006-07 and the next round of DHS is expected to be carried out in 2012.

The report on Human Development in South Asia, produced by the Mahbub ul Haq Human Development Centre in Lahore, also remains a reliable source of information on social indicators in Pakistan.

Country Programme Analytical Overview

Equity
UNICEF Pakistan committed to a) make necessary programmatic shifts to reach the most disadvantaged and b) monitor, and analyse periodically to determine whether the programmatic shifts are working. Three strategic areas are birth registration, malnutrition and children out of school.

Human rights based approach
The 2011 SITAN, which used a child well-being index constructed in Pakistan, applied a human rights based approach to assess and analyse the causes of multiple deprivations. Districts were ranked according to their score on the index, and this guided geographic focus for provincial programme implementation.

Advocacy
Key advocacy messages spread widely by UNICEF Pakistan are: register all births, get all children into school, wash hands and live in an open defecation free environment, two polio vaccine drops every time, exclusive breastfeeding through six months and get all children under age five fully vaccinated. Both development partners and private sector have joined in this advocacy.

Capacity Development
The devolution of federal ministries that included UNICEF’s primary counterparts to the provincial governments technically ceased national engagements to the development of policy and strategy frameworks that UNICEF had been sustained with its national counterparts. While this brought UNICEF an opportunity to reformulate policies and strategies at the provincial level with greater potential to advance UNICEF’s equity agenda, the limited institutional capacity and resources remain great challenges. This will require UNICEF to be more strategic in choices made on capacity development with provincial counterparts

Communication for Development. The staff and coordination for C4D are in the process of being strengthened, and a good partnership has been established with staff in NGOs and other UN Agencies. The approach has been modernised and broadened. There was an excellent integration and complementarities in the communication support for the 2011 flood victims, and the aim is to extend this to development work. The COmNet initiative, with hundreds of social mobilisers, was launched for polio eradication.

Service Delivery for humanitarian actions. UNICEF continues to provide basic services to camp populations where conflict continues. UNICEF also responded on a large scale to another flood disaster, affecting around 5.1 million people. Recurrent disasters divert focus from developmental targets. Yet the crises also provide opportunities to highlight the dire conditions of the poorest children, and reach them with schools, immunisation, malnutrition treatment and other interventions. Pakistan must remain always ready for emergencies, and UNICEF has become expert in emergency preparedness and response, and in streamlining relief and early recovery efforts to development work.
**Partnerships**
UNICEF Pakistan has a wide array of partners at national, provincial and district levels. These include Government, NGOs, academia, media, religious leaders and private sector. Being more strategic and selective in our use of partnerships is a goal for 2012 and the new country programme (2013-2017.)

**Gender equality**
Both boys and girls suffer when mothers are uneducated, but girls are particularly vulnerable to being out of school, exploited and abused, and given away in childhood marriages. Therefore, addressing gender based issues is strongly integrated into all UNICEF programmes.

**Effective Advocacy**

*Mostly met benchmarks*

Our development work was affected in mixed ways by the implementation of the 18th Amendment to the Constitution, which mandated devolution of Federal Ministries and programs to Provincial Governments. UNICEF and WHO successfully advocated for the retention of EPI, polio, nutrition and HIV cells at national level. At the same time, UNICEF’s long-standing presence and good relationships in the Provinces means we are very well positioned to support devolution. Having agreed on our devolution strategy in late 2010, we made a seamless strategic shift in 2011 to concentrate more on provincially-tailored research, policies, strategies, budgets, advocacy and capacity development.

Outcomes from intensified advocacy at federal-level included the ratification in July of the Optional Protocol to the Convention on the Rights of the Child, on the Sale of Children, Child Prostitution and Child Pornography resulting from decade-long advocacy work. The National Standards for Early Childhood Education, Child Friendly and Inclusive Education and Professional Development for Teachers were also approved in the course of the past year. These are now being rolled out at the provincial level.

While UNICEF and partners increased efforts to support polio eradication efforts, Pakistan registered the highest number of reported cases (198) in the last decade. UNICEF, along with our partners, have advocated with the Government at federal and provincial levels to reinforce accountability in particular at union council level. UNICEF’s scaled up advocacy and social mobilisation and the COMNet staff are deployed in high risk areas of the country for polio advocacy at the district, union council, and community levels. Meanwhile targeted advocacy is being directed at religious scholars, school teachers, local politicians, journalists and community leaders.

UNICEF Pakistan staff and partners completed a Situation Analysis of Children in Pakistan in 2011, including separate volumes for each Province or Region as well as an overall national picture. Central to the SitAn was an equity analysis of where are the most disadvantaged children, in what ways are they disadvantaged, and why, use a Child Well Being index constructed with MICS and other data. Using the SitAn gave us evidence for successfully advocating for a high profile (high profile what?) to the most vulnerable and disadvantaged in the new OP 2 and of course for designing the new UNICEF CP. While all the SRAs are relevant for Pakistan, we prioritised three: stunting, birth registration and polio, and we have identified methods and means to collect and analyse evidence for all four levels of the Cup.

Advocacy ensured that Early Recovery Working Groups (ERWGs) for Floods 2010 as well as for 2011 Floods in Sindh and Balochistan led to activation of the Nutrition and Education clusters and the Child Protection sub-cluster.

To maximise impact and pursue cost-efficiency, the CO refined its advocacy by exploring more integrated C4D in the flood emergency response. Strategic alliances with public, private and development partners led to additional resources for advocacy for the CO. In addition to traditional print stories and OpEds, the CO dramatically expanded into multi-media, including social media.
Changes in Public Policy

As provincial governments assumed increased responsibilities in the social sector, the CO shifted its advocacy focus towards laying foundations for policy change at the provincial level. Strategic advocacy underlined the potential for more inclusive development processes arising from the new political setting, and the potential gap in budget allocations especially in the Health and Education sectors.

By forming parliamentary caucuses on gender and education, teams of advocates were established in provincial legislatures, resulting in an increase in the education budget in Punjab Province from PKR 9 billion to 14.5 billion. A similar caucus advocated for the incorporation of Disaster Risk Reduction into school curricula in Azad Jammu and Kashmir (AJK), which has been hit hardest by the 2005 earthquake.

Strategic advocacy also resulted in a decision by the Government of Punjab to scale up the Child Friendly School model, originally piloted with UNICEF support, to all 36 districts of the province. It also contributed to updating the policies on the management of diarrhoea and pneumonia at the community and household levels in the province.

Moreover, the provision of technical assistance accompanied intensified advocacy to produce tangible results. The Sindh Child Protection Authority Act in May 2011 established an authority to protect the rights of the most vulnerable children in the province where the highest percentage of deprived districts is found (68%). Parallel efforts were made in other provinces, and in Punjab, the CO obtained a commitment from the Social Welfare Department (SWD) to develop a similar child protection policy.

Leveraging Resources

There were major opportunities to leverage resources to address the issues of equity. The UNICEF’s 2011 national nutrition survey was widely disseminated and discussed, bringing the issue to the forefront of public attention. Because of the complex causation chains for malnutrition, it was used as a linchpin for leveraging resources from key donors and the WB and ECHO for equitable interventions for the poorest, most disadvantaged children and women. We are using seven provincial strategies and action plans to leverage and attract development funding for malnutrition as the emergency funding will soon be fully expended. With the new SUN initiative, Pakistan would be an emblematic country to join and continue to leverage resources for the most disadvantaged and deliver action at scale.

At the same time through the Wash programme and in particular the PATS (Pakistan CATS) resources are being leveraged from major partners such as Dfid, AusAID, USAID and others for sanitation.

The CO leveraged diverse resources and expertise by strengthening its partnership with public, private and development entities. During Mother and Child Weeks in October, over 6,700 Lady Health Workers were mobilised to disseminate information on health, nutrition and sanitation to reach those who had lost access to basic services in flood affected areas. Alliances with salt producers were reinforced to help advocate for iodised salt to prevent iodine deficiency in children. Numerous private corporations joined intensified efforts to increase awareness and promote hand washing across the country through the Global Hand Washing Campaign. The CO also strengthened children’s participation in the achievement of gender equality in education by concluding a partnership with the Girl Guides and Boy Scouts Association. Further efforts were made by posting a Private Partnership Specialist to promote future alliances for cooperation, to support the CO in accelerating its efforts to maximize efficiency in achieving results for children.

Capacity Development

Fully met benchmarks

In 2011, given the increased responsibility of provincial governments and the recurrence of floods, the
limited capacity of partners posed challenges in the development and emergency contexts. The CO continued to focus on capacity development of government partners, implementing partners (IPs), the Early Recovery Working Group and Cluster members, for increased quality and sustainability of service delivery. Gaps and training needs were identified involving partners and existing coordination mechanisms. Administrative trainings were also conducted to IPs upon introduction of HACT for which the CO prepared a HACT Partner Handbook.

In Health and Nutrition, provincial consultations were completed on the local adaptation of the revised WHO curriculum for training mid-level managers (Mid-Level Managers Modules 2008). Lady Health Workers' (LHWS) training modules printed in local languages were updated and disseminated for refresher trainings. Training components were identified based on a careful needs assessment. Educational interventions included at the tertiary level where the Agriculture University of Faisalabad initiated a B.Sc course of Nutrition & Dietetics with UNICEF support and a nutrition component was integrated into the curriculum for graduate and post-graduate medical students in the Health Services Academy, Islamabad. Training and workshops on Community-Based Management of Acute Malnutrition (CMAM) and Infant and Young Child Feeding (IYCF) were conducted for Health Care Providers (HCPs) and LHWS. Likewise, training on harmonised packages for nutrition in Emergencies was conducted to health managers of Government and partners for long-term capacity building.

In WASH, a range of training covered technical aspects of programming, surveillance, monitoring and evaluation as well as emergency preparedness. In development programming, it included the introduction of policy and strategy-based discussions at provincial levels, critical technical aspects of water and sanitation programming, including water safety planning, monitoring and surveillance and emergency preparedness. In the humanitarian context, the CO continued to engage IPs in technical and administrative training, including the development of capacity improvement/mitigation plans for partners where required. To establish permanent capacity with government at the provincial levels, the CO is working to operationalise WATSAN units that will serve as multi-departmental units that bring sector work together within each province.

In Education, the capacity development of teachers, school heads and education officers continued their support to reform units such as the Policy Planning and Implementation Unit (PPIU) in Balochistan and the Reform Support Unit (RSU) in Sindh. For overall development of the education sector, the CO continued to focus on the participatory process of strategic planning. Such process often proved difficult in finalising the 'product' but did contribute to developing local capacity.

The focus of the Child Protection programme was to increase the institutional functions of public institutions (i.e. Child Protection Units at district level) to effectively provide protection for children. Attention was also given to increase the capacity of service providers including strengthening the level of professionalism of caretakers and the establishment of standards of care. Efforts were also made to initiate the institutionalisation of training for administrators/managers of Child Protection Systems. In 2011, with UNICEF support, almost 17,000 people working in the child protection field acquired knowledge and skills to improve how they performed their duties.

Communication For Development

Mostly met benchmarks

To maximise impact in promoting an enabling environment for the Country Programme, integrated C4D was further developed in 2011. Three programmes, i.e. Lady Health Workers, Nutrition, and EPI jointly implemented the communication component of Mother and Child Week (MCWK) with health and nutrition education sessions. In response to the revival of the floods emergency in Sindh Province, social mobilisers reached out to the affected communities with a package of integrated messages on health and nutrition,
WASH, education, child protection and gender. The set of messages were also broadcasted on primetime by radio stations in the affected areas over an eight week period. The focus of the project was on the off-campus affected population unlikely to be reached by life-saving information via another medium. The recurrence of the floods provided the testing ground for a new model of integrated planning and delivery for C4D, which was also extended beyond emergency contexts.

Parallel efforts were made to strengthen the capacity of IPs and technical assistance provided to the Government and civil society partners included the preparation and distribution of communication tools such as radio messages, storybooks, illustrated flip cards, animated films and community-based events and activities. In partnership with the ‘Center for Communication Programs’, a local NGO affiliated with John Hopkins University, 123 Government and NGO partners were trained as master trainers across the country on the effective use of Meena storybooks and short films. Seven cross-sectoral storybooks were used to reach out to children with a package of integrated messages.

Implementation of C4D was permeated further into communities by developing community resource persons. This was especially the case for Polio eradication wherein the CO launched the Communication Network (COMNet) to intensify technical support in communication and social mobilisation to the government and other partners in high-risk areas. Over 1,000 communication staff are deployed at the district, union council and community levels.

Partnership with mass media was enhanced in promoting a human rights-based approach in journalism and coverage on the Child Protection issue. Consultations with journalists and media entrepreneurs resulted in the creation and promotion of a Code of Conduct for ethical reporting on women and children. A national network of journalists dedicated to raising awareness on child protection issues is being established, and encouraged via a media award recognising quality reporting.

Emphasis was also given to the participatory approach with all IEC materials being developed and pre-tested with stakeholders. Schools, communities and camps were visited to meet with girls, boys and caregivers to test their understanding and acceptance of C4D activities. To promote a uniformed approach and harmonised messages, revision of IEC materials and approaches was also pursued by UNICEF-lead clusters. In on-going research to capture motivations for behaviour change, audiences are segmented to ensure that all persons including the most vulnerable or marginalised communities are properly targeted. The CO also collaborated with the National Research and Development Foundation (NRDF) to map out religious leaders in order to address refusals of immunization and to effectively communicate the PEI messages to local communities.

**Service Delivery**

*Fully met benchmarks*

Capacity building of duty bearers for strengthening service delivery systems is essential for increasing access, increasing quality, and sustaining service delivery. This strategy is integral to UNICEF’s work in all programmes and all areas of Pakistan. Examples in 2011 include work with Public Health Engineering Departments to provide capacity to operate and maintain water schemes, while developing a plan to maintain these schemes in the long-term. System strengthening for child protection included rolling out the ‘Child Protection Systems-Mapping and Assessment Toolkit’ to provincial governments, so that they can identify and map the main child protection risks within the rights framework. The toolkit also facilitates users to examine the scope and capacity of the existing child protection system, accountability mechanisms, and resource mobilisation approaches. UNICEF is making additional efforts to strengthen service delivery capacity at provincial and district levels, following decentralisation. An example in 2011 is the assessment of provincial Social Welfare Departments. The assessment aims to provide an institutional analysis of the departments’ functions to understand the major bottlenecks, the social utility of the
institution as well as the strengths and gaps. Based on the CAF findings, support to the provincial SWDs in strategy formulation is now planned for 2012 with action for institution building and improved service delivery.

During the 2010 and 2011 floods, and in the early recovery periods following those floods, UNICEF has made a very large and significant contribution to strengthening capacity of both government and NGOs to identify, understand and treat malnutrition. Thousands of staff has been trained in one or more courses using seven different sets of course materials, and facilitative, follow up supervision has given them valuable on the job training.

Some valuable lessons learned from the 2010 floods response were transformed into improved service delivery in 2011. One key lesson was the concern that multiple agencies often sent out inadequately equipped teams to assist affected population in the initial days and then withdrew, leaving the population to face residual consequences. UNICEF and UNFPA advocated jointly with the Sindh Provincial Government to attach teams to facilities in the flood affected areas, which also served as a base for mobile teams, and to convert these facilities to functional 24/7 Emergency Obstetric Care facilities. The approach resulted in continued service delivery from the emergency response through to early recovery and beyond. Another example of using the early recovery period to strengthen service delivery is the training of teachers in child friendly methods as part of a package around construction of Transitional School Structures (TSS). Finally, third party monitoring which was initially employed in the emergency response in 2010, continued in areas where insecurity limited access for UNICEF. This system increases accountability and transparency of service delivery.

Strategic Partnerships

Fully met benchmarks

UNICEF Pakistan works with the Government at national, provincial and districts levels, local and international NGOs, other UN agencies, UNICEF National Committees, bilateral and multilateral partners. Its partners also include those in the private sector, academic institutions and media. In 2011, the CO continued to invest in maintaining and strengthening existing partnerships, supporting the establishment of new collaborations and exploring new opportunities to optimise resources and increase programmatic impact through innovative approaches and strategic partnerships.

Relationship building takes time, but pays big dividends. An example in 2011 was the plan to scale up the rural sanitation programme, which translated the national strategy of Pakistan Approach to Total Sanitation (PATS) into action. This very strong partnership with government, NGOs and private sector has enabled seven million people to be reached with information, and momentum has built for open defecation free villages. Another example is the partnership with the National Database and Registration Authority (NADRA), a relationship based on technical advice and collaboration rather than significant financial exchange, which is paying dividends on the social protection and birth registration agenda, including tracking change.

Global partnerships that work well in Pakistan include:
- United Nations Girls’ Education Initiative
- Sanitation and Water for All.
- Adolescent Girls Task Force, champion country, co-led jointly with UNFPA
- After regional consultations, Pakistan was selected as a champion country for the AGTF
- Scaling Up Nutrition – with FAO, WFP, WHO, WB and others.

The CO is Co-Chair of two Joint Programmes (Education and Environment) and Convening Agency of four programme components under the One UN Programme. Leveraged successes included introduction of
article 25A on free and compulsory education and a pay-for-performance approach with non-state actors for contracting-out the delivery of health services in two of the most deprived districts in Sindh.

Partnerships with CSOs were reinforced by the GAVI-funded CSO support programme, which involved 23 CSOs in immunisation, MNCH, advocacy, social mobilisation, technical assistance, training and overall HSS.

An example of partnering with the World Bank is the Working Group for the Sindh Education Reform Programme, which influenced policy and implementation of education reforms.

Humanitarian partnerships
The CO’s MoU with WFP for school feeding and treatment of moderate malnutrition and with WHO for the treatment of severe acute malnutrition with complications has been appreciated by government and donors and helped a large scale CMAM programme operate with little friction.

The CO led the Early Recovery Working Groups in WASH and Education, as well as sub-thematic groups in Nutrition and Child Protection at national level and in four provinces. It also led Humanitarian Clusters in WASH, Education and Nutrition as well as the sub-Cluster in Child Protection.

Mobilising Partners
Fostering government ownership and commitment, supporting existing community networks, promoting community involvement and strengthening private partnership are examples of the way the CO effectively mobilised partners for more equitable results for children.

Government ownership and commitment for the Polio Eradication Initiative has been translated into establishing a Polio Monitoring Cell in the Prime Minister’s Secretariat; the adoption and use of the President’s National Eradication Action Plan; and the appointment of a strong national champion. Monitoring cells have also been established in the offices of the Chief Ministers at the provincial level.

Having demonstrated after the 2010 floods that the state run lady health worker network could be an effective emergency relief service. At the onset of the 2011 flood emergency, the Sindh Government readily agreed to this approach again. The CO supported the state-run Lady Health Worker programme with supply kits and funds. It facilitated bringing nearly 6,000 trained Lady Health Workers, many of whom were also affected by the floods, quickly back into their professional roles. The extended network of LHWs provided access to basic health services and brought health, nutrition and hygiene awareness messages to over 4.2 million affected people.

UNICEF’s leveraging of private sector engagement, including through corporate social responsibility programmes, continues to expand. Numerous private corporations joined to promote hand washing across the country through the Global Hand Washing Campaign, and telecommunications companies donated text messaging of key health, nutrition, education, protection and WASH information.

Three vertical layers of advocacy were established when the formation of parliamentarian caucuses were complemented by the establishment of the UNGEI working groups at provincial level and partnerships with the Pakistan Girls’ Guide Association and Boy Scouts at the grass loot level to build a multipronged platform for advocacy.
Knowledge Management

Fully met benchmarks

Based on the two-year Integrated Monitoring, Evaluation and Research Plan (IMEP) compiled in 2011, over 30 studies and surveys and one evaluation were conducted and contributed to expand the CO’s knowledge base in order to address situation of the most disadvantaged in Pakistan.


A survey on the status of conflict-affected Internally Displaced Persons in Khyber Pakhtunkhwa and the Federally Administered Tribal Areas informed decision making on camp reduction and return packages. UNICEF contributed strongly to rapid assessments and follow up assessments, which were used to write the Flood Appeal, Revised Appeal and early recovery plan following the 2011 floods. Lessons learned from the 2010 floods disaster were widely disseminated among humanitarian partners, and helped the CO develop new EPRPs that were used for the flood disaster in 2011.

An HIV Sero-surveillance study was conducted to assess the prevalence of HIV among pregnant women visiting antenatal clinics. The results refined the high risk population targeting approach adopted by the Government and the One UN programme.

Knowledge and best-practices from around the world were locally adapted into videos, CDs and printed materials and widely disseminated and used for evidence-based advocacy, fundraising, C4D activities and training. This resulted in increased leverage for the children in the political arena, creation of demand, behaviour change, and increased awareness among duty bearers about their responsibilities. These communication tools were developed in collaboration with stakeholders and field tested to ensure ownership for widespread application.

The CO’s support to knowledge creation and management extended to work with governmental partners. For instance, the CO supported the provincial governments of Balochistan, Punjab and Sindh in data collection for MICS. Technical support was given to the Child Rights Commission of Pakistan (HRCP) to collect quality data on child rights’ violations. The CO also supported Watsan Units within provincial governments in the establishment of the WASH MIS systems along with data collection. This support was accompanied by efforts to foster a sense of the importance of knowledge dissemination and utilisation. Data from the UNICEF supported Nutrition Information System is constantly used by partners in the CMAM programme while findings from the National Nutrition Survey have been extensively used and cited by numerous partners and stakeholders.

Local stakeholders, such as government partners, academic institutions, NGOs and communities participated in the process of knowledge creation at different levels. For instance, the SITAN was produced by mobilising technical expertise from the University of Lahore. Likewise, collaboration continued with the Universities of Punjab and Peshawar, amongst others, engaging in mappings, research and assessments of child protection issues. The global study for Out of School Children (OOSC), moreover, provided an opportunity to involve various stakeholders such as district education officers, teachers, parents and children themselves in determining and analysing factors causing children to not attend or drop out of school.
Human Rights Based Approach to Cooperation

**Partially met benchmarks**

The CO was directly involved with duty bearers to assist in the understanding of their obligation towards communities and to support these duty bearers to fulfill these obligations. The CO focused on enabling communities to access safe drinking water and sanitation in safe and dignified manners, giving due consideration to the gender dimension. Programmatic focus was also given to ensure access to education for flood affected children by providing comprehensive support through Temporary Learning Centers (TLCs). During the response, the CO managed to enroll 39,558 children who had never before been to school including 18,196 girls. The rate of first-timers reached nearly 40% for both boys and girls. Increased awareness led to a notable increase in demand for quality education by communities.

Community outreach through the Lady Health Workers (LHWs) programme addressed fundamental rights among right-holders, increasingly working to reach those most excluded and hard-to-reach.

As part of its efforts to strengthen existing human rights mechanisms in Pakistan, the CO provided technical and financial support to the Human Rights Commission of Pakistan (HRCP) to collect data, monitor and report on violations of children’s rights. In addition, based on the analysis of the situation of the children who are socially excluded, exploited, abused and deprived, the CO has assisted policy and decision makers to design, implement and monitor policies, strategies and programmes that narrow the disparities while facilitating access to benefits, social services and participation.

Through the Human Rights Task Force (HRTF), the CO assisted the Ministry of Human Rights (MoHR) in developing a joint programmatic framework for Human Rights and in the delivery of a coherent, comprehensive and timely reporting on the Universal Periodic Review (UPR). In December 2011, the HRTF organised a multilateral workshop with relevant ministries, civil society and academia to jointly identify concrete steps in preparation of the UPR. The CO led the CRC focus group that furthered the discussion for inclusion of analysis on the Government’s commitment and relevant obligations.

Looking forward, the new Country Programme Preparation process was guided by a HRB and equity approach to programming. Focus group discussions with children and women consistently showed that the poorest people in Pakistan prioritise food security, education, including for girls, livelihoods and health services. All of these are priorities in the new UNDAF. Participants in provincial and national consultations, which included internal UNICEF staff and a wide selection of external stakeholders, were introduced or reacquainted with HRBA tools to ensure this lens was used to identify manifestations and all their possible causes and draft appropriate interventions. This has ensured interventions addressing rights holders and duty bearers are included for a holistic and sustainable approach to development programming.

Gender

**Mostly met benchmarks**

In Pakistan, where girls on average do not enjoy the same protection or access to services as boys in most areas, CO, through its policies, programmes, partnerships and advocacy, strives to mainstream gender equality for all its work for children and promotes equal outcomes for girls and boys.

The Year 2011 was a pivotal year for gender mainstreaming in CO with Draft Gender Strategic Plan for Action (SPAP) was drawn up to operationalise the UNICEF’s 2010 Gender Policy. Gender focal points were appointed in each programme section and a core group was formed to ensure gender is mainstreamed across programme. Technical support was provided by the gender focal points at CO and in the Provincial
Offices to ensure that clearly defined and measurable gender-quality development results are achieved for both boys and girls. Inputs were also provided for the humanitarian projects and gender markers were allocated to the proposals received to ensure that women’s, men’s, boys and girls concerns were proportionally addressed in the program design and implementation.

As part of developing gender sensitive knowledge base, Child Protection initiated several researches addressing gender concerns including ‘A call to action: raising the voices of girls, boys and women in Swat and Tank’ and ‘Research study on early marriage’. Education programme conducted gender review of textbooks in AJK, Punjab and Baluchistan and also compiled an annotated bibliography of gender specific research studies. High level policy forums like the Parliamentarian and Media caucuses on Gender and Education were formed by over 260 organizations in AJK, Punjab, Sindh and Baluchistan, under the Pakistan Girls Education Initiative - UNGEI Pakistan Chapter that evolved as a result of three years of intensive and constant advocacy and social mobilisation. Punjab Parliamentarian Caucus managed to increase the education budget from PKR 9 to 14 billion for 2011. Investments were also made to build the capacity of the media and staff of education department to be gender sensitive. On the health front, five mother baby care centres were established in the country to support female health care providers. Transport mechanisms were put into place to facilitate their travel to workplace as well. During Sindh flood Emergency, CO established 307 “Protective Learning and Community Emergency Services”, or PLaCES, in the first 4 months of operation aiming at creating an environment to improve the safety, health and well-being of children and women through integrated, community-organized, age- and gender-appropriate activities and services.

Aiming at capacity and knowledge building of humanitarian staff on Gender Based Violence (GBV) in humanitarian contexts, CO in partnership with UNHCR conducted a workshop to sensitise on the tools & devise strategies, to build up action plans for the adaptation and to roll-out to tackle gender based violence in humanitarian settings.

**Environmental Sustainability**

*Mostly met benchmarks*

While more efforts are required to streamline environmental considerations and Disaster Risk Reduction (DRR) into programming, the CO made determined efforts to promote environmental sustainability in operations through the implementation of programmes in both the emergency and development contexts. Capacity building in this regard was an integral part of the CO’s environmentally sustainable approach, such as through the disposal of waste and monitoring of programmes with partners.

- In health, nutrition projects are developed by embracing environmentally sound approaches and activities such as training project staff on waste management and solid waste disposal were incorporated into the results framework of Project Cooperation Agreements (PCAs). UNICEF’s vaccination programmes adhere to Pakistan’s National EPI Policy and Strategic Guidelines to ensure the proper disposal of used sharps to avoid environmental hazard.

- The education programme recognises the need for environmental sustainability through disaster affected infrastructure. Pakistan was affected by the floods in two consecutive years and this had a catastrophic impact on educational infrastructure. Low-lying areas in Sindh province are expected to continue to be vulnerable to floods in coming years. To counter the risks, the CO introduced the concept of Transitional School Structures (TSS). This concept was designed so that the structures can be dismantled and removed at the onset of flood waters and be re-erected after flood waters recede. This innovative design, coupled with increasing the height of the structure off the ground, ensures that school buildings can survive future flood disasters and help resume education in the shortest possible time after the onset of floods.
Additionally, UNICEF’s reconstruction work strives to “build back better”. The programmes assess the probable negative impact on the surrounding environment resulting from the construction of schools and basic health units and assess local hazards that may pose risks to children and communities.

Under the One UN Programme, the CO co-chaired with UNDP the Joint Programme on Environment which included the WASH component, to ensure that a cohesive and comprehensive effort was implemented to achieve maximum results. The WASH programme also ensured all temporary sanitation facilities were decommissioned upon the closure of temporary settlements following the flood disaster of 2010.

Finally, in an effort to create a paper-less working environment, the CO introduced duplex printing by default in all printers and recycling paper was encouraged.

South-South and Triangular Cooperation

Under the Pakistan Girls Education Initiative (Pakistan chapter of UNGEI), Pakistan participated in a consultation that was jointly organised by UNGEI, the Government of Nepal, UNICEF, UNESCO, the Commonwealth Secretariat and the South Asia Women’s Network (SWAN). Participants were drawn from parliamentarians, representatives of relevant ministries including education, finance and planning, selected partners of UNGEI, and adolescents and young people from South Asia who constitute the “youth bulge” that will become the next generation of leaders, workers, parents and citizens. The main purpose of the consultation was to promote regional South-South cooperation for addressing gender inequities in education, to promote UNGEI partnerships across the region, and to enhance active involvement of parliamentarians and young people for the cause.

The consultation provided a forum for the participants to share their experiences and to review existing activities of country UNGEI partnerships and young champions with a view to making initiatives more cross-sectoral, equity-focused and results oriented. It not only contributed to identifying the cohesive way forward in promoting education for marginalized children in their countries and across the region, but it also laid the foundation for the creation of the South Asian Parliamentarian caucus. The South Asian Parliamentarian caucus will be a leap forward for realization of Education for all in the region. Pakistan has volunteered to host the South Asian Parliamentarian Caucus Meeting for 2012 in Punjab.

UNICEF India, Pakistan and Afghanistan are cooperating closely on polio eradication. Afghanistan and India are ahead of Pakistan, yet one case was found in China in 2011, having come from Pakistan, and all neighboring countries are at risk. The border control points between Afghanistan and Pakistan are used for checking on children's vaccination status and administering the polio vaccine. The social mobilisation approach used successfully in India has been adopted in Pakistan; already around 800 social mobilisers have fanned out to high risk districts.
Country Programme Component: Maternal and child health care

PCRs (Programme Component Results)

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Resources Used in 2011 (USD)

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<th>Estimated Year-End Expenditure</th>
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Results Achieved

Maternal, Newborn and Child Health Assessments carried out in 2011 showed that antenatal care coverage increased from 61% to 63.5%. Use of a skilled birth increased from 38% to 41.7%, and postnatal care increased from 27% to 67%. Through the mother child health weeks, health and nutrition messages reached 4.7 million mothers, and 8.8 million children received anthelminthic treatment.

Expanded Programme of Immunization

Reported routine immunisation coverage for measles increased from 92% in 2010 to 94% in 2011, yet it was only 70% in FATA. 54 out of 136 districts were supported to strengthen routine immunisation service, including through ‘Reaching Every Union Council’ (REUC), an approach to reach the unreached in Pakistan, in 12 districts. As a part of Supplementary Immunisation, three rounds of tetanus toxoid vaccination for Maternal & Neonatal Tetanus elimination (MNTe) were conducted in one high risk district of Sindh with more than 90% coverage in each round, and one round was conducted in two high risk district of Gilgit Baltistan (GB).

Polio Eradication Initiative

Eight rounds of national and sub-national immunisation days (NID & SNID) were conducted, supplemented by "mop-ups" and case responses. Sadly, the number of reported polio cases increased from 144 in 2010 to 198 in 2011, marking the highest number in the past decade. The main reasons were inadequate implementation of strategies especially in key high risk areas and insufficient accountability at district and union council levels. In response, a critical review of the NEAP was conducted. Key actions for augmenting implementation of the NEAP were identified and endorsed for enhanced accountability and implementation. Meanwhile, partnership with religious leaders in KP and FATA resulted in a 27% decrease in refusals.

HIV/AIDS

National Prevention of Parent-to-Child-Transmission (PPTCT) Guidelines were finalised and launched, wherein Pakistan has adopted exclusive breast feeding as safest feeding option for HIV exposed infants. A PPTCT District Model was implemented in two high risk districts to identify women of child bearing age at risk for or infected with HIV.
Nutrition
A National Nutrition Survey (NNS 2011), the first survey after a decade, was completed, and the Pakistan Integrated Nutrition Strategy (PINS) was developed and operationalised jointly with key government and UN partners. National Breastfeeding Standards Ordinance was endorsed and iodine deficiency disorder legislation was finalised for approval to the federal cabinet. According to NNS, the consumption of iodised salt increased from 37% to 63% in the past decade. As a part of early recovery work to the 2010 floods, the CMAM programme was scaled up, reaching nearly 0.5 million children, in 867 locations. 62% of the targeted SAM and 84% of MAM children as well as 85% of malnourished PLWs were treated. A nutrition component was integrated into the curriculum of medical colleges and post graduate institutes. Vitamin A supplementation was administrated with Polio vaccine through the NIDs, with more than 95% coverage.

Most Critical Factors and Constraints
The decentralisation that came following 18th constitutional amendment resulted in devolution of Federal Ministry of Health and the National Programmes which had been the Programme’s key partners for advocacy, policy, programme and standards development and implementation. The planned policy, standards and programme development initiatives had to be taken up as provincial initiatives in 2012 work plans. The major challenge would be the time required to translate the policy decision into practices on the ground.

Additional challenges and constraints:
- Lack of financial and technical resources and high turnover in the government service delivery network limits quality and continuity of implementation.
- Devolution of MOH has weakened the program’s grip.
- Limited budget allocation for government programmes (MNCH, National Programme FP-PHC, HIV/AIDS, Nutrition) and limited support for deployment and retention of staff in remote area.
- Shortage of service providers, especially female service providers.
- Lack of reliable data limits a vulnerability focus, especially in emergency, lack of reliable and timely data was a challenge to assess the scope of the gaps and proper funding needs.
- Limited management capacity of EPI/PEI. Inadequate implementation of strategies especially in key high risk areas and insufficient government accountability at district and union council levels are the main reason for the failure to stop all transmission of polio by the end of 2011.
- Increased number of polio cases (192 reported cases/58 districts in 2011 against 144 reported cases/42 districts in 2010).
- Insecurity, lack of access and socio cultural barriers to immunisation and nutrition service delivery, especially in FATA, Balochistan and part of KP provinces.
- Lack of political attention and commitment to Preventative Healthcare and Nutrition results in inadequate budget allocation and limits progress. Nutrition remained low priority for policy & decision makers.
- Gaps in the inter-sectoral coordination of the Government to address cross-cutting issues such as Nutrition.
- Capacity to implement nutrition programs at the field level remained a challenge especially in Sindh province, which was affected by the floods in two consecutive years.

Key lessons learned:
- Partnership with religious leaders would decrease refusal to immunisation.
- Integrated strategy has been developed to address this challenge in collaboration with all key stakeholders for Nutrition. Coordination among donors, development partners & humanitarian partners improved through emergency operation in 2010, resulting an increase in donor assistance, particularly for nutrition, yet implementation remained weak. More targeted advocacy efforts are required to scale up and sustain the interventions.
- CMAM ‘demystified’ nutrition programme and contributed to increased attention. Mother and Child Week was an excellent strategy to reach out large number of people, particularly in emergency.
Key Strategic Partnerships and Interagency Collaboration
Main partners include the Ministry of Health (prior to devolution), Provincial Departments of Health, the government programmes such as the National Programme Family Planning and Primary Health Care and the National Maternal Newborn and Child Health Programme as well as the National Programme for LHWs. UNICEF’s partnership with these large-scale government programmes was the drive for reaching large number of population with basic MNCH services and health, nutrition and hygiene messages. UNICEF also collaborated with the National EPI programme, which was a major factor behind successful campaigns reaching a large number of children with measles and polio vaccination and vitamin A supplementation. For emergency response, UNICEF closely works with Health Cluster partners including WHO and UNFPA, and especially with WHO for Health and EPI/PEI interventions.

Other key strategic partnerships are as follows:

‘Delivering as One’ Joint Programme on Health and Population: Convening Agency for the Joint Programme Component (JPC) 1 on MNCH and JPC 3 on Nutrition and Health Promotion. JP provided a platform of partnership with the Government, other UN agencies, civil society and professional bodies. In collaboration with FAO and WFP, UNICEF started the development of the food and nutrition security project for the One Programme (OP) II to start in 2013.

Nutrition Cluster and Early Recovery Sub-Thematic Working Group (ERTWG): As a Lead Agency, UNICEF coordinated humanitarian responses to the conflict-affected IDPs, early recovery interventions continued from 2010 and in response to new flooding in Sindh and Balochistan. UNICEF continued to play vital role in advocating needs of most vulnerable and deprived with donor community and development partners alike, as a result nutrition is being prioritized by donor community for financial assistance to the nutrition projects not only in emergency but also in development projects.

Partnership with WHO and WFP on Nutrition: In 2011, by signing MOUs, UNICEF further strengthened its partnership with WHO and WFP for treatment of SAM and MAM.

Partnership with Civil Society Organizations (CSOs): A network of CSOs was established under GAVI Health System Strengthening (HSS) window in 2009-10. Over 2600 vaccinators were trained in routine immunization. Nearly 73,000 children (5-15) vaccinated against Hep B from slam and sub-urban areas of Karachi and 12 community-based MCH centres were established.

Humanitarian Situations
In 2011, UNICEF continued its response to the humanitarian needs of conflict-affected IDPs, as well as its support to early recovery Health and Nutrition interventions in areas still recovering from the 2010 floods. In addition, in 2011, the Health and Nutrition programme responded to flooding that affected the entire province of Sindh and parts of the Balochistan. During 2011, the Programme utilised a total of US$ 29.98 million of humanitarian funding that contributed to the following results.

2011 Floods Emergency Response:

- measles vaccination of 639,611 children (17% of targets)
- polio vaccination of 1,014,872 children (110 % of targets)
- vitamin A supplementation of 834,138 children (109 % of targets)
- restored 68 cold chain facilities
- reached 649,565 families with health, nutrition and hygiene messages
- 98,892 insecticide treated nets distributed
- Re-activated 6,709 LHWs
- established 24/7 emergency Obstetric care services in 19 facilities
- Established 62 OTP sites; screened 392,771 children and 166,667 women
- 21,698 severely malnourished children were enrolled in Outpatient Therapeutic Programme (OTP) and 47,545 moderately malnourished children and 25,080 PLWs in Supplementary Feeding Programme (SFP) jointly supported with WFP
- 157,166 women reached with IYCF messages through the 11,105 IYCF sessions.
Support to Sindh AIDS Control Programme to continue treatment/care and support in the flood affected districts in Sindh.

Conflict-affected IDPs:

- measles vaccination of 15,863 children (96% of target)
- polio vaccination of 3,381,825 children (89% of targets)
- vitamin A supplementation of 3,717,883 children (86% of targets)
- 190,000 families got insecticide treated nets
- restored 40 cold chain facilities
- 57,789 moderately malnourished children and 25,722 PLW registered in SFP
- 12,294 severely malnourished children enrolled in OTP/stabilisation Centres
- Awareness sessions on IYCF, CMAM, and hygiene education reached 1,182,922 mothers/caretakers of children under 5 and PLWs
- Over 700 LHWs and Lady Health Supervisors were trained on CMCM and IYCF.

Early Recovery for 2010 Floods Emergency

- measles vaccination of 10,799,397 children (96% of targets)
- polio vaccination of 12,627,539 children (106% of targets)
- vitamin A supplementation of 11,753,987 children (89% of targets)
- 939,518 families got insecticide treated nets
- restored 497 cold chain facilities
- reached 1,099,903 families with health, nutrition and hygiene messages
- re-activated 47,800 LHWs
- established 24/7 emergency Obstetric care services in 84 BHUs and 60 RHC facilities of four districts of Punjab
- Established 867 CMAM sites, reaching 50 districts out of 58 targeted districts
- Screened almost 3.5 million children for malnutrition, enrolling 128,000 children at OTP (62% of the target) with severe acute malnutrition (SAM) without complications
- SFP sites (with WFP) enrolled 430,000 moderately malnourished children (84% of the target)
- Out of the 1.5 million pregnant & lactating women (PLW) screened, 244,000 PLWs were enrolled in SFP (85% of the target).
- 18,500 LHWs and CMWs as well as over 2,000 health care workers received training on CMAM and IYCF.
- 3.5 million Mothers were counseled in Optimal IYCF practices.
- Micro-nutrient supplementation was provided to 1.2 million children 6 – 24 months of age (67% of the target).

Summary of Monitoring, Studies and Evaluations

Over the course of 2011 the following studies and evaluations were conducted by the Programme:

- **Mother and Child Week (April 2011) detailed assessment of coverage:** This documents the process, lessons learnt and coverage of April 2011 round of Mother and Child Week (MCW). The preliminary findings affirm that MCW is aligned to national priorities, is owned by the Government, is perceived beneficial by the communities and is making significant contribution in promoting key care behaviours and health services delivery.

- **Pakistan National Nutrition Survey 2011 (NNS 2011; Draft):** It was conducted from February – July 2011, 10 years after the 2001/2 survey. The survey: 1) assessed the population nutritional status both anthropometric (weight, height, age) and micro-nutrients status (mainly iron Vitamin A, Zinc, Vitamin D, Iodine and calcium status) of women and children, 2) assessed infant and young child feeding and care practices, including exclusive breastfeeding and complementary feeding rate, and 3) collected data on food intake and food security. The results of the survey were widely disseminated and used to develop the provincial adaptations of the Pakistan Integrated Nutrition Strategy.

- **Nutrition Survey in Floods Affected Areas of Punjab Province, Pakistan (FANS 2010-2011):**
  It was conducted in by UNICEF in collaboration with Department of Health Punjab, KPK, Sindh & Balochistan, Department of Statistics Punjab, National program for LHWs with technical collaboration of CDC & ACF.
Objectives of the survey were to: (1) provide updated information on the nutritional situation of children 6-59 months in flood affected districts, (2) assess coverage of Vitamin A supplementation, measles and polio vaccination, (3) estimate the prevalence of acute and chronic malnutrition among children 6-59 months of age, and (4) estimate the coverage of immunization with specific data measles & Polio for children 6-59 months of age. The results revealed the magnitude of the problem in two provinces to the donor’s community, development agencies and humanitarian partners. Based on the results of the FANS Sindh & Punjab strategic nutrition response plans were developed, financial resources were mobilized for implementation of the plans in the targeted districts.

· HIV Sero Surveillance in ANC Clients: Larkana: The survey was conducted to assess prevalence of HIV among pregnant women visiting antenatal clinics in Larkana. The results showed prevalence of 0.03%. This low prevalence further reinforced the high risk population targeting approach adopted by the programme.

· Enhancing VCT and PPTCT among Female Spouses of HIV Positive Men through Conditional Cash Transfers (CCT): The study was to determine the effect of Conditional Cash Transfers to HIV Positive men for encouraging self-disclosure to spouse and bringing them to VCCT at the HIV Treatment and care centre. It found the improved disclosure of HIV status from baseline 29% to 62%. It also revealed that VCCT can significantly improve and potentially help overcome socio-structural barriers to HIV testing for female spouses and self-disclosure by HIV-infected men.

Future Work Plan
In support of devolution, UNICEF will continue efforts to ensure that policies and strategies are approved at provincial levels and translated into actionable plans. In parallel, to enable the department of health at provincial level to take up decentralised functions more efficiently, UNICEF will work to strengthen overall management structures and to develop provincial plans for integrated service delivery.

Therefore, the key priority actions for 2012 include support to provincial departments of health:

· Define provincial strategies and action plan to address high rate of newborn mortality and to enhance quality of training of community midwives.
· Implement action plan to enhance capacity and functions of the Lady Health Worker Programme with focus on CMAM and IYCF.
· Establish coordination structure (nutrition cells) at the province level.
· Emergency preparedness and response capacity enhancement.
· Enhance efficiency and accuracy of data generated by the health management information system through use of innovative technology.
· Identify and address barriers that prevent the least served groups from accessing services.
· Develop integrated strategy and response plans in line with Pakistan Integrated Nutrition Strategy (PINS).

Further key priority actions include:

- Development of a policy and operational plan for the integration of CMAM in on-going services and scale up to new areas.
- Strengthening IYCF as part of the ladies health worker and community midwife programme;
- Improve reporting & data collection system at sub district level for PEI.
- Emphasize area specific strategies for high risk groups
- Monitor pre-campaign activities for proper implementation of campaign according to protocol.
- Shift PEI communication interventions from national-level to community levels, with a specific emphasis on high-risk groups and localities.
- Deploy trained PEI COMNet staff at the provincial and district levels.
- Advocate making nutrition a priority at national and provincial level and translating policy decisions into actual implementation on the ground.
- Establish a closer coordination and information sharing for nutrition programming at federal and provincial level.
- Strengthen intra-sectoral as well as inter-sectoral coordination within and outside UNICEF, i.e. nutrition – health, WASH, education at community levels.
- Promote integration of the nutrition services into the existing health services at primary health care level;
· Develop and implement an integrated package for improved nutrition in selected focus districts (equity, one district per province) and establish a process indicator monitoring system.
· Assess the feasibility for the production of locally produced therapeutic foods, and support to start up, if evaluated as possible, this will support the cost effective & sustainable services delivery.
· Support development of National Voluntary Counselling and Testing (VCCT) and Communications Strategy for Prevention of Parents to Child Transmission.
· Resource mobilisation (increase donors support and government budget allocations).

Country Programme Component: Primary education

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Resources Used in 2011(USD)

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<th>Resource Type</th>
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<td><strong>US$34,521,013.00</strong></td>
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</table>

Results Achieved

Increasing Access

Universal Primary Education (UPE): Two key policy documents were the springboard for enrolment drives in 2011: the UNICEF-sponsored Declaration on Child Friendly, Inclusive Education signed by all provincial governments in late 2010 and the recently legislated Article 25A of the 18th Amendment that stipulates free and compulsory education for all children aged 5 to 16. The enrolment drives resulted in an increase of nearly three million children in government schools, nearly 50% of whom are girls. 4,897 schools are using the child friendly schooling approach, with increased enrolment of 5%.

UNICEF supported the development of the Provincial Early Childhood Education (ECE) Strategy to introduce ECE in 47,311 government primary schools in Punjab. A total of 750 ECE classes were further strengthened in Sindh, Balochistan, GB and PAK. This includes 200 in Sindh where 95% of enrolled children are girls.

Improving Quality

Advocacy efforts continued throughout the year for up-scaling and mainstreaming of the CFS approach across the education sector. The CFS approach was further strengthened in 4,897 government schools demonstrating best practices. In Punjab, the “CFS up-scaling and mainstreaming initiative” was launched along with the implementation of National Child Friendly School Standards. CFS were strengthened through rigorous technical support for teachers and head teachers, provision of learning materials and age specific furniture, improving school infrastructure as well as mobilising communities to create a safe, health and holistic learning environment, directly benefitting 735,000 students. Under the School Health Programme, 1.6 million children benefitted from the school health screening programme and deworming exercise.
School Management Committees (SMCs) and Mother Support Groups (MSGs) were further streamlined and augmented to sustain effective school management. Capacity building and orientation sessions were arranged for 35,000 SMC members focusing on school improvement, resource generation, parental support and elimination of corporal punishment. In Balochistan, with the active participation of the communities, 6th grade classes were initiated in 74 government girl’s primary schools (Grades 1-5) in remote areas benefitting around 3,885 girls who had completed Grade 5. In Sindh, 436 previously closed government girls’ primary schools, were made functional through the appointment of 600 temporary local female teachers, benefitting approximately 22,000 unreached children.

Strengthening Systems
Significant advancements were made with the capacity development of district education officers across the nation. The capacity of the newly established Policy and Planning Unit (PPIU) within the Provincial Education Department was strengthened to lead the development of the Balochistan Education Sector Plan.

Gender in Education: Under UNGEI/PGEI, Parliamentarian Caucuses in all provinces created a solid platform for advocacy, resulting in an increased budget for education in Punjab from PKR 9 to 14 billion for 2011. The Provincial Government of PAK, moreover, committed integrating gender and Disaster Risk Reduction (DRR) into the curriculum. Media caucuses were formed in PAK and Punjab to sensitize media about gender concerns in education and challenges faced by the girl child accessing education.

Most Critical Factors and Constraints
Challenges and constraints:
- The number of OOSC, the second highest in the world.
- MDG targets not on track.
- Uneven distribution of accessible education for boys and girls, coupled with changes in leadership, lack of ownership, inadequate infrastructure and teacher absenteeism have strong implications for the implementation of UNICEF’s education programme that supports the government’s commitments to achieving the MDGs and Education For All goals by 2015.
- **Lack of budget:** The national budget allocation to education remained only 2% of GDP limits implementation of Article 25a. The devolution of education to the provinces mandated by the 18th Amendment to the Constitution has not yet resulted in higher budget allocations. Gaps in resource mobilization in provinces and lack of coordination among donors and development partners have resulted in delayed implementation.
- **Insecurity:** Deteriorated security situation contributed to unavailability of qualified female teachers and increased teachers’ absenteeism. In Balochistan, coupled with politicisation of education, it has impeded efforts of government and partners. In KP and FATA, obtaining No Objection Certificates became growingly cumbersome and delaying implementation.
  - Geographic accessibility.
  - Shortage and frequent transfer of teachers.
  - Limited baseline data.

Key lessons learned:
- Decisions of Local Jirgas (informal courts in FATA), carry significant weight in responding to various programme issues. Ownership of the local community and religious leaders is critical for effective programme implementation. UNICEF’s partnership with religious and tribal leaders, education authorities and local communities in FATA supported the education of 37,749 children including 13,213 girls in 580 schools in areas seriously affected by the conflict.
- In KP, adopting a holistic approach, by building partnerships between communities, PTCs, teachers and education supervisors was effective in improving sustainability of education.
- Advocacy as well as sufficient resource allocation for Whole School Development under CFS approach is instrumental to provide and sustain quality education in schools.
- Field observations persistently indicate that meaningful community participation and continuous capacity building of SMCs show results in developing and implementing School Improvement Plans.
- OOSC who enrolled in TLCs established in relief camps were mainstreamed in schools upon their return in their communities of origin. Effective coordination among NGO partners and District - is required,
with NGOs mobilising communities while government provided access to education for these children.

· During the Floods Emergency Response in Sindh with 98% of the activities supported by UNICEF, the response from the Provincial Education Department was more reactive. Robust efforts are needed to strengthen emergency preparedness through DRR capacity building of provincial and local government.

**Key Strategic Partnerships and Interagency Collaboration**

The key partners of the Education Programme include the Ministry of Education (prior to devolution), Provincial Education Departments, District Education Offices, National Commission for Human Development (NCHD), local and international NGOs and CSOs as well as the private sector which includes media. Among other UN agencies, UNICEF works closely with UNESCO, UNHCR and WFP.

**Other key strategic partnerships are as follows:**

 `'Delivering as One’ UN Joint Programme on Education: Co-Chair with UNESCO and Convening Agency for the Joint Programme Component (JPC) 1 on Pre and Elementary Education. Joint planning and on-going close interaction enabled the participating agencies to work as a strong supportive force with government counterparts. This also offered opportunities for various joint initiatives with other UN agencies such as the School Food Programme (UNICEF and WFP), mainstreaming education opportunities for Afghan refugee children (UNICEF and UNHCR) and Joint Advocacy for Universal Primary Education (UNICEF and UNESCO). Additionally, through collaboration with UNESCO and partners, the National Child Friendly School Standards were developed in Punjab and the "Profiles of OOSC in Pakistan" study was conducted as part of the “Global Initiative on OOSC”.

**Education Cluster and Early Recovery Working Group (ERWG):** As the lead agency, UNICEF continued to coordinate effective and efficient humanitarian responses to conflict-affected IDPs and flooding in Sindh and alochistan as well as early recovery interventions continuing from the 2010 floods.

**United Nations Girls Education Initiative (UNGEI):** A major partnership was initiated with the national chapter of the Pakistan Girls Education Initiative (PGEI) established under UNGEI.

**Public Private Partnerships:** A project convergence model was developed in collaboration with the Provincial Government of Punjab and IKEA Foundation. Sheraton Hotels Pakistan provided support to establish one TSS where a Government primary school in Sindh had been damaged.

**Partnership with Media and Academia:** Partnership with media was strengthened through the Journalists’ Forum of Punjab established under the UNGEI media caucus. UNICEF in partnership with Oxford University Press (OUP) Pakistan, provided 306,301 story books for flood-affected primary school children enrolled in TLCs and affected Government schools all over Pakistan.

**Sindh Education Reform Programme (SERP):** In partnership with the World Bank and EU, UNICEF continued to influence policy for education reforms. As a result of joint advocacy, piloting of the Education Management Reform (EMR) was approved. UNICEF extended its support for EMR from one to five districts with the World Bank and EU providing support in nine additional districts. The EMR model will be advocated for with the Government of Sindh for up-scaling in the province.

**‘International Inspiration’ project:** In concurrence with the ‘London 2012 International Sports Legacy Programme’ the partnership of British Council, UK Sports, UK Natcom and UNICEF, in conjunction with the Ministry of Sports, Ministry of Youth and other diverse stakeholders provides an opportunity to promote sports and recreation activities for children at schools and in communities in Sindh.

**Humanitarian Situations**

In 2011, UNICEF continued its response to the humanitarian needs of conflict-affected IDPs, as well as its support to early recovery interventions in areas still recovering from the 2010 floods. UNICEF also continued to support recovery works from 2005 earthquake and 2010 Attabad lake emergency. Furthermore, the
Education programme responded to flooding that affected the entire province of Sindh and parts of the Balochistan. During 2011, the Programme utilized a total of US$19.06 million of humanitarian funding that contributed to the following results:

**2011 Floods Emergency Response:**
- Enrolment of 102,469 children (45 % girls) in 2,070 Temporary Learning Centres (TLCs) in 10 newly affected districts of Sindh where 39 % of enrolled children were first timers
- 3,099 teachers including 943 females trained on use of emergency education supplies
- 980 TLCs established for 73,394 children (40 % girls) in eight previously flood-affected districts of Sindh
- 852 teachers (44 % female) were trained on classroom management skills and effective use of TLCs.

**Conflict-affected IDPs:**
- Continuation of education for 2,991 children (36 % girls) in IDP camps in Mohmand and Kurram Agencies in FATA
- Under the “Welcome to School” initiative in FATA, supported the education of 37,749 children (35 % girls) in 580 schools with the collaboration of religious and tribal leaders, education authorities and local communities
- In KP, 257,500 children (34 % girls) re-enrolled in nine conflict-affected districts through community mobilisation, provision of supplies and rented buildings for fully damaged schools.
- 743 teachers (48 % female) in FATA trained on effective pedagogy and the use of emergency packages, and 159 ‘Taleemi Islahi Jirgas’ (School Management Committees) formed in the focus schools.

**Early Recovery for 2010 Floods Emergency:**
- Enrolment of 103,552 children (46 % girls) in 672 TLCs and 240 ECE Centres/Classrooms in Punjab. 15,666 (59 % girls) were first timers.
- Constructed 74 Transitional School Structures (TSS) using pre-fabricated materials with gender segregated WASH facilities, child friendly furniture and playground material in Sindh, Punjab and Balochistan.

**2005 Earthquake Post-crisis Recovery:**
- Since the earthquake, construction completed of 661 school buildings to date (including 138 schools established in 2011) against a target of 704 damaged schools in PAK and KP. These schools have been provided with gender segregated WASH facilities, child friendly furniture and teacher training on the CFS approach. The 661 schools would benefit 63,827 children including 28,722 girls.
- 35 master trainers and 486 teachers were trained on DRR techniques

**2010 Attabad lake emergency:**
- 30 school buildings in GB were rehabilitated
- 13,572 children (30 per cent girls) benefitted from the provision of teaching, learning and recreational material

Government education officials, NGO partners and UNICEF Education staff members were trained on DRR and emergency preparedness in PAK, Punjab, KP, Sindh, GB and Balochistan through a series of workshops.

As Education Cluster lead agency, UNICEF continued to coordinate effective and efficient Education humanitarian responses to the IDP crisis in the Northwestern region, early recovery interventions continued from 2010 and in response to new floods emergency in 2011.

**Summary of Monitoring, Studies and Evaluations**
Over the course of 2011, the following studies and evaluations were conducted by the Education Programme:
Out-of –School Children in Pakistan Country Report: As part of the Global Initiative on Out-of-School Children launched by UNICEF and the UNESCO Institute for Statistics in 2010, Pakistan has been selected to conduct a country study on out-of-school children (OOSC). The objective of the study is to improve statistical information on and analysis of the problem of OOSC, and to scrutinise factors related to exclusion from schooling as well as policies that enhance participation. Pakistan has the highest proportion of OOSC in South Asia, with an estimated eight million school-age children out of school.

Scaling up Strategy for Early Childhood Education in Punjab: was developed to bring all children between the ages of 4-5 years to 63,000 government primary schools in 36 districts.

Baseline Study of Students Learning Achievement: was conducted in collaboration with the Provincial Education Assessment Centre, Sindh. The baseline for learning achievements in language and mathematics was established for grade IV and VIII from 500 government schools in five districts.

Baseline study for the assessment of primary school teacher competencies in Punjab (Draft): The Study identifies particular areas of primary school teachers’ training and development. It provides evidence-based planning insight to policy makers with an ultimate aim of enhancing programme effectiveness by creating a credible comparator for all forthcoming interventions.

Research Study on Using Portfolio Approach to Assess Implementation of National Professional Standards (NPS) for Teachers in Pakistan (Draft): The Study determines the existing degree of compliance of teachers’ knowledge and understanding, disposition and performance to the National Professional Standards for Teachers. It also highlights the potential challenges in up-scaling the portfolios as tools of investigating and monitoring teachers’ professional development against NPS for teachers.

Education in District of Shangla (Draft): The study focused on drop-outs and the impact of UNICEF’s educational intervention in 187 beneficiary schools highlighting strengths, weaknesses and recommendations for programme improvement. Findings indicate the limited access of girls to education facilities and factors for dropout including poverty, domestic chores, early marriages, teacher irregularities and absenteeism, unqualified teachers and a lack of basic facilities.

Study on OOSC in Muzaffargarh (Draft): The study generated an instrument for data collection on OOSC nation-wide.

Future Work Plan
Mostly key priorities of 2012 will concur with the priorities of 2011, along with the preparation for the strategic shifts as envisioned for new Country Programme (2013-17) under development. It includes moving forth with upstream policy and strategy development work for the Sector at provincial levels, in support of devolution. With 18th Amendment to Constitution, the Government is now legally obliged to provide 5-16 years old with free education, advocacy efforts are now required to increase right’s holders’ awareness and create demand. Integrate programmes within UNICEF, including Polio Eradication programme, will be pursued. The key priority actions for 2012 include:

Increasing Access
- Advocacy for UPE, new schooling opportunities in hard-to-reach communities and up-scaling CFS approaches and practices.
- Advocacy with all parliamentarians for PEGI and Compulsory Right to Education Bill to be complemented by follow-up on legislation by the provincial assemblies.
- Promote access to ECE opportunities at a larger scale, with continued efforts for mainstreaming ECE in government education system.
- Support for the implementation of School Health Programme.

Improving Quality
- Optimise innovative and advanced learning technologies for accelerated learning.
- Strengthen Teacher Resource Centres at district and community levels.
- Integrate sports, play and joyful learning activities in school curriculum and practices.
- Support for introducing effective student assessment practices and implementation of Provincial ECE Strategy and teachers’ training on ECE and CFS.
- Demonstrate effective ECE practices to provide evidence for up-scaling and mainstreaming ECE.
- Support for improving physical and learning environment in schools.
- Research and documentation to highlight the best practices and disseminate them widely.
• Taking the polio eradication down to the villages through teacher’s capacity building.

**Strengthening Systems**
• Build more synergies with relevant line departments in achieving education priority issues, focusing on CFS approaches and greater community ownership.
• Play a convening role in provincial education sector wide analysis, planning and reforms.
• Strengthen merit-based teacher recruitment, training and accreditation systems.
• Support education sector reforms with incentive-based systems for disadvantaged children.
• Support policy promotion and advocacy for strengthening school level funding mechanisms.
• Continue support to the Provincial Education Departments in data collection and capacity building for data utilisation for evidence-based planning and management.

Transforming the Early Recovery into development of Education in flood and crises affected areas and further strengthening the education system in Disaster Risk Reduction.

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**Country Programme Component: Water, environment and sanitation**

**PCRs (Programme Component Results)**

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<tr>
<th>PCR</th>
<th>EQRank</th>
<th>OTDetails</th>
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**Resources Used in 2011(USD)**

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<tr>
<th>Resource Type</th>
<th>Planned for 2011 (as per CPAP ceiling )</th>
<th>Allocated in 2011</th>
<th>Estimated Year-End Expenditure</th>
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**Results Achieved**
UNICEF provided safe drinking water to 4.8 million people (including 2.4 million children), sanitation to 3.5 million people (including 1.7 children), of which 1.1 million were reached as part of the Pakistan Approach to Total Sanitation (PATS) is an evidence based approach that aims to sustainably eliminate open defecation, accelerate the use of improved sanitation facilities and improve hygiene practices.

These children now reside in open defecation free environments in 820 villages across Pakistan. UNICEF also reached 3.4 million people (including 1.7 million children) with hygiene promotion messages.

Under the **School WASH Programme**, 1,069 schools have been provided with WASH facilities, benefitting over 150,000 children. Nearly 3,800 School Management Committees were established and nearly 2,000 teachers were trained in School Sanitation and Hygiene Education.

UNICEF continued to engage with government partners and other stakeholders on strengthening policy, regulatory, institutional and coordination framework and governance for WASH. UNICEF supported all
provincial governments in the formulation of provincial policies and strategies. In Punjab, the Drinking Water Policy was approved by the Cabinet and Drinking Water Strategy and Sanitation Policy prepared and under process of finalisation. In the provinces of KP and GB, and Pakistan Administered Kashmir both Drinking Water and Sanitation Policies are in the process of finalisation. Provincial level behavior change communication strategies have also been drafted. A national level draft Strategy for Water Quality Monitoring, Surveillance and Safety was developed. An Advisory Plan to Implement the National Drinking Water Quality Standards was developed. The National Action Plan for Arsenic Mitigation was also updated with UNICEF support.

UNICEF supported the celebration of World Water and Global Handwashing Days (GHD) and led the development and signing of the Global Handwashing Day Declaration, where government officials and partners committed to making a deliberate effort to promote hand washing with soap. GHD 2011 also saw the launch of ‘Sabu’, a UNICEF supported cartoon character developed to advocate for handwashing with soap amongst children in schools.

**Most Critical Factors and Constraints**

**Challenges and constraints:**
- Federal WASH programme was deferred in June 2011 following the Devolution of the Ministry of Environment. Unclear institutional roles and sector mandates posed a challenge, especially in emergency response.
- MDG targets are not on track. More vigorous advocacy is required on sanitation programming based on PATS and to ensure allocation of appropriate budget provision.
- The security situation posed a challenge for access to implement and monitor projects especially in KP, FATA, and Balochistan.
- Limited resources were available in development and humanitarian programmes. The diversion of development funds to humanitarian actions further hampers UNICEF’s ability to advocate for strategic investment in the WASH Sector. Donor coordination was largely limited to the Humanitarian Cluster coordination.
- Sector activities focus on disaster response, limited capacities to increase disaster preparedness and contingency planning.
- Limited capacities of partners hampered UNICEF’s ability to scale-up programming.
- Limited equity focus especially in emergency response.

**Key lessons learned:**
- Provincial governments need support to translate policy principles and norms into need-based, sustainable and tangible pro-poor interventions is required.
- Resources and support need to be focused in fewer areas to deliver real results based on realistic and integrated programming for the most disadvantaged children and women.
- Introducing sector reforms is critical to sector-wide gains and requires advocacy.
- Seeking broader and strategic partnerships that maximise on comparative advantages of partners will enable UNICEF to expand its role in the WASH Sector. This includes partnerships with government, local institutions and public-private partnerships.
- Evidence-based, equity approaches towards programming need be promoted. Scaling up of tested and proven programmatic approaches should be a driver for bringing about the change (PATS, household water treatment, Water Safety Planning).
- Capacity building of partners needs be supported to streamline UNICEF’s programme.
- Scale up of School WASH programme in line-with global priorities requires greater attention in coordination with Education.

**Key Strategic Partnerships and Interagency Collaboration**

Key partners of the WASH Programme include the Ministry of Environment, Rural Development Departments, Public Health Engineering and Local Government Departments at provincial and district levels, Tehsil Municipal Administrations, local and international NGOs and CSOs and the private sector. Among other UN agencies, UNICEF works closely with WHO and UNHABITAT.
Other key strategic partnerships are as follows:

'Delivering as One' Joint Programme on Environment: UNICEF is the Co-Chair with UNDP and Convening Agency for the Joint Programme Component (JPC) on Water and Sanitation. The JPC helped streamline UN Agency support to the environment through a focus on upstream policy work and key project implementation.

WASH Cluster and Early Recovery Working Group (ERWG): UNICEF was the Lead Agency continuing to coordinate effective and efficient humanitarian responses to conflict-affected IDPs and early recovery interventions continued from the 2010 floods and in response to new flooding in Sindh and Balochistan.

Public Private Partnerships: The WASH Programme was able to initiate relationships with the private sector, in particular regarding the promotion of handwashing with soap.

Scaling-up of Rural Sanitation: UNICEF continued to engage with government partners and other stakeholders for the development and implementation of its scaling up of the rural sanitation programme, translating PATS into action.

Sanitation and Water for All: UNICEF is part of this global and national framework. UNICEF supported the Government for active involvement in this partnership. Pakistan will participate in the upcoming High Level meeting in 2012.

Additionally in sanitation, UNICEF supported Government preparation for and participation in the South Asian Conference on Sanitation (SACOSAN) IV.

Humanitarian Situations

In 2011, UNICEF continued its response to the humanitarian needs of conflict-affected IDPs, as well as its support to early recovery WASH interventions in areas still recovering from the 2010 floods. In addition, the WASH programme responded to flooding that affected the entire province of Sindh and parts of Balochistan. During 2011, the Programme utilised a total of US$37.19 million of humanitarian funding that contributed to the following results:

2011 Floods Emergency Response:
In emergency response, the 2011 floods response saw 837,700 people, including 427,220 children, reached with safe drinking water through various interventions including water tankering, household water treatment and the installation / restoration of water points and schemes. Approximately 477,500 people, including nearly 243,500 children, have been reached with access to sanitation facilities provided with due consideration to the particular needs of women and children, and 1.5 million people have been reached with basic hygiene messages.

Conflict-affected IDPs:
The Sector’s work for conflict-affected populations has seen 193,135 IDPs reached with safe drinking water, access to sanitation and basic hygiene awareness in IDP camps or areas of transit. An additional 28,500 conflict affected people, in hosting areas were reached with access to WASH services.

Early Recovery for 2010 Floods Emergency:
UNICEF also continued to focus resources on early recovery programming. These efforts in response to the 2010 flood recovery have provided safe drinking water to nearly 3.8 million people, sanitation to nearly 3.0 million people, and hygiene promotion to 3.4 million people.

UNICEF also has the largest WASH response to both humanitarian crises in Pakistan and remained the only WASH agency active in IDP camps in KP/FATA. UNICEF’s in-depth sector knowledge and expertise in emergency programming and as Cluster Lead Agency has been instrumental in determining the necessary interventions at various phases of the response.
Summary of Monitoring, Studies and Evaluations
Over the course of 2011 the following studies and evaluations were conducted by the WASH Programme:

- **Knowledge, Attitude and Practice Survey on Water, Sanitation and Hygiene in Pakistan:** The survey comprised of 14 districts across four provinces of Pakistan and was conducted to review and strengthen UNICEF and its partners’ WASH programmes and identify gaps that need to be addressed to better guide future initiatives in this area. The results of this study, recently completed, will form the baseline for and guide future WASH programme interventions, along with already available material on WASH in Pakistan.

- **WASH KAP Baseline Survey 2011: Rural Sanitation in Flood Affected Districts (RUSFAD)-Phase II and III Scaling up of Rural Sanitation Project:** Pre and Post Knowledge, Attitudes and Practices (KAP) Survey on hygiene and sanitation practices in project areas were conducted to present a baseline for Hygiene and Sanitation practices and another survey after project interventions have been implemented. In addition, an Impact Evaluation of the WASH Early Recovery Sanitation Programme, including the scaling-up sanitation initiative in response to the 2010 floods was done in 2011 as an End Project Evaluation of PATS (Pakistan Approach to Total Sanitation), Phase-I (Mid-Term Review), Phase-II (Action Plan). This information is currently being used to revise project interventions to improve effectiveness of implementation, review any gaps in progress and understand best practices related to the projects.

- **Mid Term Evaluation Report:** Early Recovery Programme on Rural Sanitation in Nineteen Flood Affected Districts of Pakistan (Phase II): The Report is a result of a Mid-term Evaluation Survey of the Early Recovery Programme on RUSFAD.

Future Work Plan
Mostly key priorities of 2012 are to carry forward initiatives from 2011 and earlier. A new priority will be in preparation for the strategic shifts as envisioned for new Country Programme (2013-17) under development. It includes moving forth with upstream policy and strategy development work for the Sector at provincial levels, in support of devolution. It also includes renewed focus on development activities sidelinined in the wake of recurring humanitarian emergencies, and will particularly focus on equity based programming to reach the most disadvantaged groups, and work closely with other programmes in UNICEF, including Polio, Health and Nutrition and Education. In 2012, UNICEF will work to further align relief and early recovery programmes with development work, with due consideration to aspects related to disaster risk reduction (DRR). Main priority actions are:

- Renew and strengthen programme at the federal level with the newly established Ministry of Disaster Management,
- Support for the establishment of mechanisms for leveraging partnership, data and disparity analysis, policy review and alignment between provinces and programmatic approaches for effective implementation.
- Continue efforts to ensure that upstream policies and strategies are approved at provincial levels and translated into actionable plans.
- Support capacity building of WATSAN Cells within government, with operationalisation of a Management Information System in all provinces.
- Strengthen partner capacity technically and administratively as required to ensure adequate capacities to support programme implementation including in emergencies.
- Continue implementation of scaling up rural sanitation programme to ensure “Total Sanitation” strategies: in particular expanding into areas as part of UNICEF’s integrated approach to programming reaching over 7.0 million over the next year.
- Strengthen water quality monitoring and surveillance systems, in-line with national guidelines and standards and provincial strategies, including the scaling up of household water treatment.
- Continue to address the life-saving needs of flood and conflict affected populations in the south and northwest of the country and support key early recovery activities.
- Support Emergency Preparedness within UNICEF, the WASH Cluster and Government partners.
- Support for the establishment of mechanisms for leveraging partnerships, data and disparity analysis, policy review and alignment between provinces and programmatic approaches for effective implementation.
- Advocacy and promotion of School WASH standards, and scaling up of school WASH facilities, in conjunction with Education.
Country Programme Component: Child protection and empowerment of adolescents

PCR (Programme Component Results)

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<tr>
<th>PCR</th>
<th>EQRank</th>
<th>OTDetails</th>
</tr>
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<td>Children's rights to protection and welfare, development and participation to decision making processes affecting their life as well as the ability of the families to nurture and care are addressed and fulfilled.</td>
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Resources Used in 2011(USD)

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<th>Resource Type</th>
<th>Planned for 2011 (as per CPAP ceiling)</th>
<th>Allocated in 2011</th>
<th>Estimated Year-End Expenditure</th>
<th>%Spent (4)/(3) *</th>
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Results Achieved

Through advocacy, technical and financial support, capacity building and C4D activities, UNICEF continued to contribute to strengthening child and social protection systems in Pakistan. In 2011, a series of key legislative reforms were concluded and nearly 725,000 extremely vulnerable boys and girls were reached through a range of social services. UNICEF also worked closely with Disaster Management Authorities and other partners to update and consolidate emergency preparedness and response plans while elements of children in emergencies were integrated into national, provincial and district emergency response plans.

Legislative Reforms

- Sindh Child Protection Authority Act approved by Provincial Assembly.
- Punjab Destitute and Neglected Children Act (2004) revised to make it compliant with international standards, including the CRC.
- Balochistan Child Protection Policy approved by Balochistan’s Chief Minister.
- FATA Child Protection Policy submitted to the Governor of KP province for approval.
- Juvenile Justice System Ordinance (JJSO) 2000, reviewed and amended (Bill Draft), and pending vetting by the Executive and approval by Parliament.

Strengthening Child Protection Systems

- 136,000 children received services through 16 Child Protection Units, nine help-lines, four child sexual abuse units, 22 child protection desks in police stations, 38 non-formal literacy centres for street children and working children (Balochistan, Punjab and KP).
- 96 community-based Child Protection Centres (CPCs) were established in KP and FATA for IDPs and 1,600 community-based Child Protection Committees were formed in flood-affected areas.
- Training provided to over 17,000 people of different professional categories related to child protection, including five Child Complaints Offices under the federal and provincial ombudsmen.

Strengthening Birth Registration

- A communication strategy developed and a nationwide campaign was designed and ready to launch in 2012.
- Normative and regulatory provisions for the Local Governments and NADRA cooperation for birth
registration were reviewed and an action plan is being applied in 22 districts.

**Strengthening Emergency Preparedness and Response**
- Rapid Protection Assessment methodology was developed and more than 100 Child Protection actors from the Government and NGOs were trained.
- A Standard Operating Protocol on preventing and responding to gender based violence in emergencies, with a detailed section on child survivors, was developed.
- 832,000 children and women affected by the floods received child protection services in 974 sites established following the 2010 floods.
- 307 Protective Learning and Community Emergency Services (PLaCES) established following the 2011 floods. More than 30 cases of gender based violence were identified and supported through trained PLaCES facilitators.
- 10 key radio messages for child protection were broadcast to an estimated seven million listeners.
- Child protection discussion cards for use in interpersonal communication sessions reached more than 80,000 community members.

**Most Critical Factors and Constraints**

**Challenges and constraints:**
- After the devolution of the National Commission on Child Welfare and Development, no coordinating and monitoring child’s rights body existed at the national level.
- The transition from policy to practice at the provincial level was not as systematic as required.
- The government ownership, budgetary constraints, capacity and capability were being redefined.
- Coordination among multiple government counterparts was time consuming. In addition, the lack of clarity of mandates, responsibilities, functions impact on the institutional effectiveness.
- Low demands from the rights holders who have little knowledge on how to claim their rights.
- Lack of systematic data collection and standardized information system about the children in need of protection.
- Deteriorating security in KP, FATA and Balochistan forced UNICEF to adopt a low profile, including restricting field movements.
- Limited availability and capacity of NGO partners and turnover of partners and government counterparts, especially in the area affected by conflict.

**Key lessons learned:**
- Government institutional capacity, coordination among different level of stakeholders, communication and continuity of leadership were key factors constraining achievement of objectives, and require constant and persistent attention.
- Flood emergencies provided opportunities to strengthen national systems, including through the expansion of and support to Social Welfare Department’s Child Protection Units.
- PLaCES (Protective Learning and Community Emergency Services) were introduced in response to lessons learned from 2010 floods, including the need to provide separate spaces for women and adolescent girls, maximising the use of mobile services to access remote areas and ensure an equity approach, and co-locating education, Gender Based Violence, health and nutrition services as a holistic, mutually reinforcing approach to child protection. The PLaCES model proved successful in reaching a larger and less accessible target population, in a more cost-effective manner.

**Key Strategic Partnerships and Interagency Collaboration**

Key government partners included the Ministry/Provincial Departments of Social Welfare, Pakistan Bait-ul-Maal, National/Provincial Commission for Child Welfare and Development, Provincial Education Departments, the Law and Justice Commission, Judiciary, Probation and Parole Departments, Police, Federal Investigation Agency, NADRA, Planning Commission, Ombudsman’s Office, Child Complaints Offices and the National/Provincial Disaster Management Authorities. Amongst other linkages, UNICEF’s partnership with NADRA continues to grow and strengthen as the spotlight on identifying and removing the barriers to
universal birth registration intensifies.

- **Child Protection sub-Cluster and Early Recovery Sub-Thematic Working Group**: UNICEF continued to coordinate effective and efficient humanitarian responses to the conflict-affected IDPs, early recovery interventions continued from 2010 and in response to new flooding in Sindh and Balochistan. Key collaborative outputs include support to NDMA on the development of national Guidelines and Framework of Action on Separated, Unaccompanied and Missing Children in Emergencies and to PDMAs for provincially contextualised operational Action Charts. In delivering on UNICEF’s CCCs in Humanitarian Action, UNICEF monitored and reported on grave rights violations and other protection concerns affecting children and women and provided leadership to the more than 100 members of the CP Sub Cluster and ERWG. UNICEF also actively participated in Protection Cluster and the Protection Strategic Advisory Group, and supported the development of a Rapid Protection Assessment (including Child Protection) which was endorsed by NDMA, rolled out in all provinces, and utilised by government and humanitarian agencies during the emergency response in Sindh and Balochistan.

- **Adolescent Girls Task Force (AGTF)**: UNICEF played a key role in the global task force which it co-leads with UNFPA. After regional consultations Pakistan was selected as a champion country for the AGTF rollout and a joint concept note submitted to the UN Fund has been approved. Collaborative work also continued with academic institutions in Pakistan, with the Universities of Punjab and Peshawar, amongst others, engaged in mappings, research and assessments of child protection issues.

- **Risk Education Working Group**: UNICEF continued its role as chair and convener of a collective of INGOs and NGOs working in Pakistan to reduce the growing impacts of landmines, IEDs and UXOs. Standardised IEC materials were developed for common use by all agencies.

- **Public Private Partnerships**: The Child Protection Programme was able to initiate relationships with the private sector. A children’s forum was held with key private sector representatives, leading to ongoing dialogue that may lead corporate support for birth registration efforts.

- **Partnership with UNHCR and UNFPA on Gender Based Violence (GBV)**: In partnership with UNHCR and UNFPA, UNICEF undertook an initiative with a focus on building the capacity of humanitarian actors to address GBV in emergency context. Training focusing on the child protection approach to gender-based violence in humanitarian settings contributed to substantive shifts in knowledge, attitudes and capacities. UNICEF also contributed to the development of SoPs on Gender Based Violence, in particular the section on Child Survivors.

**Humanitarian Situations**

In 2011, UNICEF continued its response to the humanitarian needs of conflict-affected IDPs, as well as its support to early recovery Child Protection interventions in areas still recovering from the 2010 floods. In addition, in 2011, the Child Protection programme responded to flooding that affected the entire province of Sindh and parts of the Balochistan. During 2011, the Programme utilized a total of US$ 7.70 million of humanitarian funding that contributed to the following results.

**2011 Floods Emergency Response:**

- Introduced a new model of PLaCES to address need for more interaction and complementarity of services between child protection, education, health and nutrition; a private space for women and adolescent girls, and more attention to prevent and respond to GBV.
- 126,533 (48 per cent girls) and 51,399 women participated in 307 PLaCES with non-formal learning, life skills, recreation, psychosocial support, discussion sessions on various issues and referrals to specialized services.
- 187 new Child Protection Committees established and 1,453 female and 696 male Committee volunteers received orientation in monitoring and referring protection issues.
- Jointly with the Social Welfare Department of Sindh, established three Child Protection Units and mobilised 21 trained social workers to identify, monitor and respond to child rights’ violations.
Conflict-affected IDPs:

- 97,935 vulnerable children (42 per cent girls) participated in activities through community-based Child Protection Centres (CPC) and CFSs in KP.
- 322 Child Protection Committees established with a total of 6,700 members (2,770 women) who reached out to 78,433 vulnerable children (including 23,160 girls) and 10,000 women.
- Psychosocial support to 11,600 children (including 3,480 girls) and 6,870 women.
- Catch-up classes and vocational skills training to 6,700 children (including 2,680 girls) and 4,560 adolescents (including 3,192 girls) respectively.
- In FATA, established 85 community-based Child Protection Committees. A total of 2,425 community representatives of the committees and 51 Child Protection Monitors were trained on monitoring and referral systems.
- Established 50 CPCs and CFSs and delivered psychosocial services for 13,821 conflict-affected children (including 4,875 girls) and 4,439 women.
- Trained 100 Child Protection Facilitators who delivered life-skills based education to 4,679 children (including 1359 girls).
- During 2011, there were 79 child casualties from mine related incidents in KP and FATA. UNICEF to supported monitoring, reporting, awareness raising, education and social mobilisation to address and reduce the growing impact of landmines, IEDs and UXOs. In 2011, 50,000 children and women as well as nearly 5,600 individuals received MRE training and sessions.

Early Recovery for 2010 Floods Emergency:

- Provided support to affected children through 974 static and mobile Child Friendly Spaces providing education, recreation and psychosocial support services to 189,000 children.
- Around 173 safe spaces specifically for women benefited 11,100 women in four provinces.
- 280,000 units of nonfood items - such as blankets and utensils - distributed to vulnerable children and families.
- Emergency protective spaces transitioned to 361 community-based Child Protection Centres (CPCs) set-up in return communities and increasingly managed by community volunteers. The CPCs provided services to 178,000 children and women.

Summary of Monitoring, Studies and Evaluations

The Child Protection section invested considerable resources in substantive research in 2011, as part of continued efforts to establish reliable baselines for evidence-based planning, programming, evaluation and advocacy.

Study on Social Exclusion and Children in Pakistan (draft): was meant to measure and better understand the main determinants or drivers of child social exclusion. Using a complex methodology, the findings of the study will inform the national and provincial child and social protection policies, strategies and programmes aiming at increased social inclusion.

Birth registration was a key focus for studies and assessments, commencing with an in-depth review of legislation and administration of birth registration in Pakistan (*In-depth Review of Legislation and administration of Birth Registration system in Pakistan*). In parallel with this the first phase of a significant nationwide multilevel gap analysis was completed in Balochistan on the registration of births (*A multilevel gap analysis on the registration of births in two cotton-farming districts of Baluchistan province.*). This study, which will be expanded to encompass all provinces in 2012, included a 'supply side' capacity audit and 'demand side' community assessment. The results of both studies will be used to inform the development of a birth registration framework that will support the achievement of universal birth registration in Pakistan.

Comprehensive Vulnerability Assessment of Children and Families Affected by Conflict in Malakand Division: To understand the impact of conflict, entrenched poverty and natural disasters on girls, boys and women, a vulnerability assessment was conducted in Khyber Paktunkhwa. By assessing child vulnerability at three levels: family, community, broader environment, the findings confirmed the critical
vulnerabilities faced by children living in conflict-affected regions and the ways in which conflict impacts on their wellbeing. The outcomes of this report are being used for advocacy on child protection with government stakeholders, and to refine ongoing programming in these regions.

Pakistan’s Juvenile Justice was examined from a number of angles with studies including Access to the Informal Justice System and Institutional Assessment of the Probation Department. Both studies contributed to the development of Diversion Guidelines in the Pakistani Context.

UNICEF’s commitment to strengthening Pakistan’s Child Protection systems was also evident in 2011. Assessment of Standards of Child Care Institutions in Pakistan and Institutional Assessment of Social Welfare Departments in all four provinces were completed. Other studies are as follows: Building of Social Protection Floor in Pakistan-Child Cash Grants; International Study of Best Practices in Monitoring Children’s Rights; In- depth review of Legislation and administration of Child Labour System in Pakistan; and Baseline study on the status of compliance for Child Protection with the UNCRC in Pakistan.

**Future Work Plan**

UNICEF will continue to take a System Approach to Child Protection, support establishment and strengthening of systems, services and institutional capacity, and pursue comprehensive child protection legislative framework that complies with international standards. Promotion of birth registration and emergency preparedness for disasters will also remain key areas for increasing equity. By promoting behaviour change through scaled-up C4D, UNICEF will intensify its efforts to increase the knowledge, awareness and capacities of both duty bearers and rights holders on child protection issues. To demonstrating a commitment to the equity agenda, UNICEF will introduce mobile outreach programmes. The specific key priority actions for 2012 include:

**Legislative Reforms**

- Evidence-based advocacy, policy advice and technical assistance to federal and provincial governments to strengthen the policy, legislative frameworks so that they are rights based and in compliance with international standards.

**Strengthening Child Protection Systems**

- Provide technical support to provincial Social Welfare Departments for prioritisation of actions and institutional capacity development.
- Advocacy and technical assistance with Social Welfare Departments for the notification and enforcement of Minimum Care Standards for Childcare Institutions.
- Continue ongoing mapping and assessment of the child protection systems.
- Support expansion and strengthening of Child Protection Units in all provinces and territories.
- Support the nationwide roll-out of the new Child Protection Management Information System for systematic quality data collection.

**Strengthening Birth Registration Systems**

- Support federal and provincial authorities to approve and implement the evidence-based revisions of the policy, legislative and administrative provisions that will simplify and registration process, increase its effectiveness.
- Launch and carry on a year-long National Communication Campaign “MAKE EVERY CHILD COUNT” aiming at attitude and opinion change (increase demand).
- Strengthen the capacity of the Local Governments to supply birth registration services.
- Evidence-based advocacy with lawmakers and decision makers to promote universalisation of BR in Pakistan.

**Strengthening Emergency Preparedness and Response**

- Assist PDMAs in all provinces, and FDMA in FATA, in strengthening child protection capacity as part of provincial level Gender and Child Cells (to be established), including through Child Protection Coordinators and technical support to ensure child protection is included in response, preparedness and disaster risk reduction measures.
- Strengthen community based protection in return communities recovering from 2011 floods through transition to community-based PlaCES, including child-centred DRR, livelihood support for women, and
accelerating social mobilisation of and mentoring to community volunteers, including adolescents, to take over role of child protection facilitation, monitoring and referrals.

Streamline the PLaCES model throughout Pakistan’s Child Protection Emergency Preparedness and Response Planning. Strengthen the capacity to monitor and report grave violations against children in armed conflict situations and support community-based approaches to prevent and respond to risks affecting children affected by armed conflict.

### Country Programme Component: Planning, monitoring and evaluation

#### PCRs (Programme Component Results)

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<tr>
<th>PCR</th>
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<th>OTDetails</th>
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#### Resources Used in 2011(USD)

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<tr>
<th>Resource Type</th>
<th>Planned for 2011 (as per CPAP ceiling)</th>
<th>Allocated in 2011</th>
<th>Estimated Year-End Expenditure</th>
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#### Results Achieved

In 2011, much time was devoted by SPME staff to the preparation of the new UNDAF and the new UNICEF Country Programme (2013-17). The SPME section facilitated and provided technical support to conducting a comprehensive Situation Analysis (SitAn) at national and provincial levels. The process was steered by the Planning Commission of the Government of Pakistan. National and provincial SitAn draft reports were produced and are currently under final review. The SitAn provides detailed causality analysis of key issues pertaining to women and children and disparities among different groups and geographical locations. The SitAn also provides district ranking by Child Well-being Index. The draft results of the SitAn were used in the preparation of UNICEF’s new country programme and the UN’s One Programme. The section organised training workshops on HRBA and RBM and facilitated a series of consultations in all the provinces in order to prioritise strategic areas of cooperation for the next country programme.

UNICEF provided financial support to conduct a Common Country Assessment (CCA) and facilitated the preparation of the UN’s One Programme-II (2013-17) by holding consultative workshops, reviewing the documents and supporting the UN RC office in organizing technical workshops to finalize the results framework for One Programme-II (OP II).

UNICEF provided technical support to the provincial governments of Balochistan, Punjab and Sindh to conduct Multiple Indicator Cluster Surveys (MICS). Balochistan’s MICS started in 2010 and was completed. Data was reviewed and the report finalized. It will be formally launched and widely disseminated in 2012. Punjab’s MICS started in early 2011, data collection was completed in December 2011 and the report will be finalized in 2012. In Sindh, MICS process began in 2010 but the survey was delayed due to the flood emergency in the province. Data collection restarted in November 2011 and is currently in progress. These surveys are the main source of sex and age disaggregated data which the provincial governments use for
planning, monitoring and decision making on resource allocation.

The section assisted the planning and development department of the newly declared province of Gilgit-Baltistan in undertaking a needs assessment and developing a comprehensive operational plan for establishing a statistical unit. This exercise was conducted with technical support from GIZ in Pakistan.

The section completed an inter-agency assessment of conflict affected Internally Displaced Persons (IDPs) in Khyber Pakhtunkhwa and the Federally Administered Tribal Areas (FATA) through the International Rescue Committee (IRC) Pakistan with funding support from USAID-OFDA. The assessment provides sex and age-disaggregated data on IDPs. The assessment is being used by different UN agencies and other humanitarian organisations as an important data source for programme planning and strategy development.

The section also supported the PRSP secretariat in the Ministry of Finance to conduct a study on the effectiveness of the Extended Programme on Routine Immunisation (EPI) in Pakistan.

In addition to the above, the section provided its routine technical support to the other programme components in planning, programme reviews, monthly management meetings and donor reporting.

**Most Critical Factors and Constraints**

In 2011, the section remained understaffed due to the high turnover of staff, particularly at a time when the CO began a comprehensive Situation Analysis, two provincial MICS exercises, engaged in the preparation process of UNICEF’s new Country Programme as well as the UN’s One Programme. The flood emergency in Sindh put extra pressure on the team to prepare regular situation reports, assist in CCC monitoring and undertake third party field monitoring. Data collection for the Sindh MICS was also delayed due to the emergency in the province. The section, however, was successful in meeting the deadlines using its existing human resources in the CO as well as field offices and utilizing short-term consultants and temporary contract staff.

**Key Strategic Partnerships and Interagency Collaboration**

Strategic partnerships were developed with the Planning Commission of Pakistan and Lahore University of Management Sciences to undertake a Situation Analysis (SITAN) and the Ministry of Finance (PRSP Secretariat) to conduct a study on the Extended Programme on Immunisation (EPI).

Existing partnerships with Planning and Development Departments and the Bureau of Statistics in all the five provinces and the Federally Administered Tribal Areas (FATA) were strengthened through the collaboration of MICS and other related activities to support capacity development. The Federal Bureau of Statistics (FBS) also remained a strong partner with regard to sample designing for provincial MICS initiatives.

Partnerships were also developed with NDMA, PDMA, UNOCHA, UNHCR and International Rescue Committee (IRC) through the collaboration on emergency rapid assessments.

**Humanitarian Situations**

During 2011, the Programme utilised a total of US$ 2.67 million of humanitarian funding that contributed to the following results:

Using the revised Core Commitments for Children (CCCs) and Humanitarian Action and the Humanitarian Performance Monitoring Toolkit, UNICEF developed CCC monitoring and reporting templates for systematically monitoring its performance in the 2011 flood response.

UNICEF continued its support to third party field monitoring in all four provinces with a strong emphasis and focus on Sindh province which was the most severely affected by the 2011 floods.

UNICEF provided technical support to OCHA and the Provincial Disaster Management Authority (PDMA) of Sindh in conducting inter-agency rapid assessments for emergency response planning. The findings were fed into the Pakistan Floods Rapid Response Plan (PFRRP) through which UNICEF appealed US$50.3 million.
Summary of Monitoring, Studies and Evaluations

'Multiple Indicator Cluster Survey 2010 Balochistan': This Survey was completed during 2011. The survey was conducted by the Planning and Development Department in the Government of Balochistan with technical support from UNICEF. This is the second round of MICS in the province after a previous one was conducted in 2003. The survey provides reliable data on focused social sector indicators for children and women from all 30 districts of the province. The survey reports will be formally launched in January-February 2012, however, the Provincial Government has started using the survey results for planning and strategy development. In the UN system, the survey results were used in the Common Country Assessment, Situation Analysis (SitAn) and preparation of the UNICEF country programme and the UN's One Programme. The MICS reports provide district based sex, age disaggregated data for planning, monitoring and decision making on resource allocation by the provincial governments.

'Internally Displaced Persons Vulnerability Assessment and Profiling' – IVAP: A joint study was completed in collaboration with WFP, IOM and UNOCHA. The IVAP was the first of its kind providing clear evidence of both the numbers and needs of conflict IDPs in northern Pakistan. This assessment is being used by UN agencies and international NGOs to identify needs and gaps for informed planning to reach the most vulnerable conflict affected populations. IVAP is the first comprehensive assessment providing detailed information on the status and vulnerabilities of IDPs.

'Situation Analysis of Children and Women in Pakistan (SitAn 2011)': The study was led by the Planning Commission of the Government of Pakistan. The findings of the study were extensively used to identify and prioritise key areas for interventions in the next country programme. The study also substantiated the Common Country Assessment and preparation of the UN’s One Programme. The SitAn provides detailed information on deprivation and disparities among children and women belonging to different groups and geographical locations.

The section also provided funds to the UN RC Office to undertake the Common Country Assessment. The study was used in preparation of the UN’s One Programme (2013-17).

Future Work Plan

The key priority actions for 2012 include:

- Recruit key staff leaders and ensure that evaluation and research are more strategic and contribute directly to the equity agenda.
- Provide technical support to the provincial governments in finalizing, printing, launching and disseminating provincial Situation Analysis Reports, MICS Balochistan, District Development Profiles of Balochistan and MICS Punjab.
- Complete and submit the Common Country Programme Document (2013-17);
- Contribute to the preparation of the One Programme Action Plan and preparation of subsequent rolling work plans for UNICEF.
- Complete the MICS in Sindh and initiate the MICS in Gilgit-Baltistan and Khyber Pakhtunkhwa.
- Support programme sections in conducting studies, assessments and evaluations.
- Routine support to programme sections in planning process, programme implementation monitoring, reviews and donor reporting.
- Continue supporting the monitoring of CCCs through field monitors in emergency affected areas.
Country Programme Component: Cross-sectoral costs

PCRs (Programme Component Results)

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Resources Used in 2011(USD)

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Results Achieved

The cross-sectoral programme includes Administration, Finance, HR, ICT, Supply and Logistics, but these results are covered in other sections of this report. Cross Sectoral also includes Advocacy and External Relations, which had the following results:

- Supported the CO to engage with media and donors both in development and in the emergency context.
- Various resource materials (i.e. news updates, key messages, press releases, fast facts, media spokespersons’ briefing kit) were produced and disseminated on a timely basis.
- Provided technical support to the programme sections to maximize advocacy efforts on global advocacy days and weeks (i.e. Mother and Child Health Week, Global Action Week on Education, Universal Children’s Day, etc.).
- Support to various events led by the Government including to mark Pakistan’s signing of the Optional Protocol to the CRC and the launching of the State of the World’s Children Report.
- Numerous donor and media visits were facilitated to emergency hit areas throughout the year.
- 56 human interest stories covering all programmatic areas were produced, including 40 stories focusing on the 2010 and 2011 floods and 33 video packages.
- More than 30 press releases were issued and over 4,500 high resolution images were captured.
- Numerous live and recorded interviews given to international and national media added to the coverage in 750 news articles and three opinion editorials.
- The CO Annual Report 2010 (external version), Floods 2010 – Six months on progress report and support to the Floods 2010 – One year on progress report are among those produced in 2011.
- Social Media introduced in December 2010 made remarkable achievements over the year: Facebook (5,500 fans, 1 million post views), Twitter (1,100 followers), YouTube (54,000 views), Flickr (43,000); PCO website (200,000 visitors).

Most Critical Factors and Constraints

Externally, heightened insecurity in some parts of the country and the devolution process posed challenges for the CO’s operation. Especially for logistics, the shift from a federal partnership to provincial partnerships had a significant impact on overall operations. Internally, the demand for operational support increased due to the recurrence of emergency operations, however operational resources remained limited. The number of staff for the unit remained constant throughout the last decade despite a large increase in the number of UNICEF staff in the CO overall. The female ratio of 36 % is remarkable in a country where women constitute...
only 11% of the workforce in formal sector. However this factor still poses a significant challenge to continue improving this figure. A determined approach is still required if the CO is to achieve gender balance. For Advocacy and Communications, frequent emergencies, the critical stance of media towards humanitarian and development work, a lack of focal points and resources in the field and a lack of quality among local vendors were among those critical constraints identified.

**Key Strategic Partnerships and Interagency Collaboration**
Facilitated through the Advocacy and Communications unit, the CO sustained strategic partnerships with various stakeholders including the Government, media, CSOs, donors, humanitarian agencies and other UN agencies. The CO also remained engaged with other UN agencies through the One-UN’s Working Groups (Administration, Communication, Finance, HR, ICT, Procurement) and worked closely with WFP, UNHCR, UNDSS and NGOs through the Emergency Telecommunication Cluster as a part of the emergency response.

**Humanitarian Situations**
During 2011, the Programme utilised a total of US$6.97 million of humanitarian funding to support the Programme components of UNICEF in humanitarian operations.

The demand for operational support significantly increased at the onset of the floods emergency and support was extended to two provincial offices in Sindh and Balochistan as well as to a total of 90 surge staff (of which 42 staff members had concluded their mission by year-end). In the first four months of the operation, life-saving supplies worth nearly US$10 million were delivered to the implementing partners. ICT ensured the optimal utilisation of internet remote access and remote collaboration tools (video/audio conference, WebEx, Skype) to enhance operational coordination.

To facilitate and increase the pace of resource mobilisation, donor engagements were accelerated and expanded. The CO produced 40 human interest stories on the 2010 and 2011 floods, including 20 video packages, shot over 4,500 flood-related photos, and produced resource materials ranging from news updates, key messages, press releases and fast facts for media and Natcoms. Field visits were facilitated for media, donors and goodwill ambassadors. Support was extended for the visit of the Special Envoy to the Secretary-General for Assistance to Pakistan. The CO fielded interviews in all major languages resulting in over 150 articles on the floods in 2011. Live television and radio interviews were made on leading international and national media networks including BBC world, BBC NEWS UK, BBC RADIO, VOA, Al-Jazeera and ABD. The CO also supported the “Pakistan Appeal” fundraiser in March 2011 in Dubai, with video messages, talking points, photographs and speeches. A UN joint six month exhibition at the National Art and a joint press conference were made. For the one year anniversary of the 2010 floods, a short film was produced by twice Oscar-nominated filmmaker, James Longley. UNICEF also produced and disseminated the “Floods 2010 – Six months on progress report” in January and supported the production of the Floods 2010 One year on progress report in July.

**Summary of Monitoring, Studies and Evaluations**
UNICEF engaged an audit firm to conduct micro assessments of NGO implementing partners. The assessment results for over 100 partners have been very enlightening for both partners and UNICEF. Partners have a better understanding of where their management and financial capacity needs to be strengthened, and in most cases are pursuing this. UNICEF has better insight into the level of risks involved in engaging with these IPs, and can make decisions on modalities accordingly.

**Future Work Plan**
In 2011, UNICEF will update the AMP and write a new Country Programme Management Plan for the five year period which supports the new Country Programme (2013-2017) currently under development. All units under cross-sectoral recognise the need to set more clearly defined benchmarks and targets annually.

HR:
Staff training continues to be a priority, including programme development, results based planning, budgeting and management, harassment in the work place and security training. Working to improve the gender ratio will also be a priority, finding innovative ways to attract female recruits.
ICT:
Communication between the Unit and the CO is a priority for 2012. User feedback surveys and training plans will be integrated into the Unit’s work. The acquisition and installation of video conferencing equipment is also necessary in the response to the needs and demands of the CO.

Finance:
Recommendations of the 2011 audit is the guiding principle of 2012 for the Finance Department. Providing IBCS support on PBR preparation for the new country programme (2013-2017) will also take place. A stocktake is necessary to see what shifts are needed for implementation of the new country programme. Changes and training that needs to occur in light of VISION and to ensure general capacity building for PO/PAs in accounting will also need to be identified and implemented. Finally, electronic banking for Karachi Offices will be put in place.

Supply and Logistics:
In local procurement, offshore procurement and contracts, supply and logistics section will work to integrate more with Programme Sections and Provincial Offices. Improvement within the supply chain monitoring system to enhance quality and delivery time is a priority, as is the reduction of programme supplies in stock to zero. Capacity building for SCM at the provincial level to enhance procurement services will also take place. In logistics, close coordination with MOFA and Custom authorities for the timely clearance of shipments to avoid demurrages is required as well as increased coordination with programmes to ensure they are involved in the process, in Islamabad and in provincial offices.

Administration:
Considering the time-consuming processes involved with obtaining visas for staff, a new post has been created to deal solely with this. Drivers and transport issues are also a priority for the administration unit and the unit is working with the Representative and Chief of Operations to improve in this area.

Advocacy and Communications:
The Advocacy and Communications Unit is developing a strategic communications plan for 2012 which will include linkages with other UN agencies as part of the UN ‘Delivering as One’ initiative. Additionally, a refocus on communicating about regular programming will be emphasised. Considering the significant progress made in utilisation of social media, this will continue to be a focus to ensure momentum can be capitalised.
**Effective Governance Structure**

a) Office objectives and priorities were defined at the 2010 annual review meetings, and through a Strategy Paper for transition from emergency and decentralisation in a federal system. In addition, with the arrival of a new Representative in April 2011, a strong equity vision and focus was articulated to all staff. A communication and learning for change plan was implemented by the VISION coordinators and the learning officer, to prepare the staff for VISION and IPSAS in 2012. The EPRP was prepared in early 2011 and used in August 2011 for quick response to the 2011 floods. Contracts were bid and issued for third party monitoring and additional supply quality monitoring; feedback reports from these complemented reports from UNICEF staff's field visits and both were used for corrective actions.

b) The annual ERM exercise was conducted in February 2011, and updated in November. Five assurance specialists were hired and embedded in each Programme section. They had a significant positive effect on improving business practices, and were cited by Office of Internal Audit as a best practice.

c) HACT was introduced for all NGO partners in all offices. The office prepared a PCA and HACT handbook and conducted training of over 200 staff, who in turn oriented NGO partners. Over 100 partners underwent financial, supply and programme capacity assessment and mitigation and assurance plans were prepared.

d) The CMT met every month of the year, reviewed management indicators, and identified corrective actions where necessary. Field office videoconferencing was conducted almost every week; during the emergency period there were additional meetings and support for affected areas.

e) Peshawar office audit recommendations from 2010 were all closed. Three more offices were audited; the report was received in December and an action plan was immediately prepared and submitted to OIA. While awaiting the final report, many actions were already taken, so that most recommendations will likely be closed by June 2012.

**Strategic Risk Management**

The Enterprise Risk Assessment and Risk Assessment Action Plan were useful for bringing together staff from different provincial offices and the Islamabad office to jointly identify risks and devise mitigating strategies for each risk. Based on its first time use, the Action Plan was re-visited and updated in November to make it a more pragmatic and realistic plan. It has been used to guide the Country Management Team and relevant staff on specific actions that have been undertaken to reduce risk.

The Business Continuity Plan was updated and was assessed as adequate by the auditors. The Business Continuity Plan includes ICT measures under the One UN programme to provide critical ICT services under a disaster contingency.

Building up on the experience in past emergencies and especially on 2010 floods, CO response to the 2011 floods Emergency was faster, leaner and better in terms of coordination. This was partially due to having the EPRPs systematically updated in CO and Provincial Offices. The 2011 update was done well before the floods Emergency and proved to be a practical tool in organizing emergency response.

CO has been in a constant state of readiness for emergencies from the human resource aspect as well, and has two full time emergency officers and an assistant to organize and coordinate the responses required.

Security risks were assessed on a near-daily basis and actions taken as required to keep staff, premises and equipment safe, while assuring programme continuity. One emergency hub office was closed based on an assessed credible security risk, but emergency response continued from another office. Based on security needs assessments, additional security enhancements were made to all offices, and actions began to move two offices (Islamabad and Lahore) to safer locations.
Evaluation

a) UNICEF Pakistan prepared a two year Integrated Monitoring, Evaluation and Research Plan (IMEP) for 2011-2012, corresponding to the two year One UN work plans and the two year UNICEF work plans. The IMEP was reviewed by the CMT at the start, mid-point and end of the year. The IMEP includes 20 planned studies, of which five are evaluations. Twelve out of the total 20 studies were planned for 2011. Due to the Floods Emergency in Sindh and Balochistan and the closing of all Federal counterpart ministries, only one study was completed during the year. However, eight are on-going and the remaining three were deferred to the next year. The IMEP, along with the two year work plans, will be reviewed and revised during January 2012 to assess whether plans need to change. The flagship project for 2011 was the Situation Analysis of Children and Women.

b) Two major evaluations and several real time reviews or lessons learned exercises were conducted in 2011. Pakistan participated in a seven country evaluation of Community Management of Acute Malnutrition. Because of security access problems, field work was delayed and then the final draft was disseminated by the global team in December 2011 for a 2012 distribution. The findings are expected to be very helpful in moving forward with the large CMAM partnership and programme in Pakistan. UNICEF led a Nutrition Cluster evaluation, and participated in the Health and Protection Cluster lessons learnt exercises, as well as in a lessons learned exercise led by OCHA for the 2010 flood emergency response.

c) To build in house capacity, the office created three new posts: Social Policy, Research and Evaluation, Evaluation, and a support post for a new SPRE unit in the office. To build in-country capacity, international experts were brought in to work with staff and partners in Pakistan on the lessons learnt and evaluation studies. The Nutrition Cluster evaluation in particular was jointly comprised of internationals and nationals.

d) The humanitarian real time evaluation and lessons learned exercises provided practical information that was used immediately by both UNICEF and other cluster members, for improving contingency planning, staff deployment, and coordination.

Effective Use of Information and Communication Technology

a) UNICEF Pakistan's Information and Communication Technology (ICT) Unit provided the necessary information technology and telecommunications infrastructure and support to more than 500 staff members, including nearly 100 flood emergency surge staff during the year, in four emergency hubs and five regular offices. Apart from facilitating the internal users, the ICT unit worked along with program sections to procure and implement various development projects (ICT4D) including:
   i) Video conference facilities for government counterparts in Education and Planning Ministries at the Federal and Provincial levels for remote monitoring and coordination worth US$25,500;
   ii) Set up of computer labs in 97 primary schools in remote locations worth US$945,000;
   iii) Assisted in writing terms of reference and selection of vendors for website development for PEI worth US$9,000;
   iv) Assisted in development of a country-wide Management Information System (MIS) for WASH and Child Protection worth US$8,000 & US$165,000 respectively.
   v) The ICT Unit remained engaged throughout the year, with program and supply colleagues for outlining technical specifications and evaluation of respective bids for the procurement of ICT hardware, software and services.

b) As a member of Emergency Telecommunication Cluster (ETC), CO worked closely with WFP, UNHCR, UNDSS, other UN Agencies and INGOs to provide security communications and internet access in the flood affected areas. ETC along with UNDSS liaised with government agencies to resolve license-related matters. As a pilot project, CO is exploring the use of Motorola Digital Radio (Mototrbo), with ICT-WG and Motorola, to establish a digital VHF network.
c) We frequently use remote collaboration tools like video conferencing, audio conferencing, WebEx, Skype for normal business. Due to frequent emergencies, almost all users have knowledge and access to remote-access facilities including Citrix and Cisco VPN. All Critical Staff are provided with laptop, UPS, multifunction printer and internet access at home. With the use of portable EVO, EDGE sticks, staff members travelling to remote flooded areas were able to access internet.

d) Building on the lessons learnt from the 2010 Flood Emergency, and to strengthen its preparedness for sudden onset of emergency, the IT unit worked with Supply Unit to establish Long Term Agreement (LTA) with local suppliers for the procurement of Lenovo laptops, HP servers and their accessories.

e) In order to be environment friendly, duplex printing has been enforced by default in all printers to save paper.

f) ICT infrastructure and applications are built and configured as per the global hardware, software and security policies. In order to build resilience against man-made or natural disasters, Karachi, Peshawar and Quetta Provincial Offices were outfitted with off-site Emergency Operations/Data Centers (EOC) where we have located secondary mail server, Active Directory domain controller and data back-up facilities. Apart from existing BGAN and Thuraya satellite communication equipment, we added two units of iDirect VSATs and two units of Emergency Telecom Responder Kit in order to be prepared for emergencies. We continue to maintain an EOC in Dubai in case of emergency evacuation from Pakistan.

Fund Raising and Donor Relations

a) A Reports Unit was established in a re-organised Planning, Monitoring and Reporting Section, to improve coordination and quality of reports to donors, government and other partners. In 2011, 95% of donor reports were submitted on or before the deadline.

b) UNICEF Pakistan mobilised 71% of the OR Ceiling for the Country Programme. Document.

c) We hired an international specialist and a consultant who greatly improved outreach and communication. Section Chiefs along with the Representative and Deputy participated in numerous OCHA and donor invitational meetings, and made various presentations, including Nutrition, Protection and the ongoing insecurity in the northwest. They also initiated numerous meetings, visits and field trips, particularly for inaugurations of schools and assessments of needs after the floods. A visit by a German goodwill ambassador in tandem with an EU delegation was particularly successful, in calling attention to children's needs and raising funds. A staff member seconded to the Tokyo office was very valuable in raising funds in Japan. In addition to resource mobilisation for the regular Country Programme, UNICEF Pakistan raised funds and leveraged supplies for the 2011 Sindh Floods Emergency, continuing camps for displaced persons in Khyber Pakhtunkhwa, and three new displaced persons camps in Federally Administered Tribal Areas. Funds were also raised for early recovery activities following the 2010 floods. Only 38.5% of the 2011 Floods Flash Appeal was met in 2011, and 23% of the overall HAC appeal was met, which included humanitarian and early recovery activities for children and women affected by the 2010 floods and persistent crisis in KP and FATA.

d) In 2011, US$189.5 million were allocated to the Country Programme of which 98% were obligated. (Please see financial asset management section for more details).

e) Each programme section weekly monitors the use of funds and ensures that donor conditions are being met as per agreement. The Reports team does a verification exercise before sending donor reports. In addition, senior management exercises oversight and follow up on any problematic areas, and CMT jointly reviews funding status every month.

f) We expanded our partnerships with new government, National Committee and private sector
partners. UNICEF Pakistan has a large private sector partnership portfolio, including IKEA, Procter & Gamble, Lever and Starwood as well as other relationships through National Committees... A corporate relationship consultant was hired who established partnerships with telecommunications, hotel and broadcasting companies in addition to strengthening partnerships with water purification and soap companies, and with Rotary. These partnerships were very beneficial to the children affected by floods. Private corporations participated in Global Hand Washing Day and signed a declaration committing to raising awareness. The biannual Mother and Child Weeks, and alliances with the private sector led to provision of soap to schools. Alliances with salt producers were also strengthened to help advocate for iodised salt for prevention of iodine deficiency among children. With the Girl Guides and Boy Scouts Association, CO strengthened children’s participation in the achievement of gender equality in education.

Management of Financial and Other Assets

a) Three of five UNICEF Pakistan offices underwent an operations audit in 2011 (Finance, Admin, IT and Supply). The final report was only received the last week in December. But based on the draft, we immediately took action. Within two weeks of receiving the report an action plan was sent to the Office of Internal Audit. We are confident that all recommendations will be closed in 2012.

b) The table below shows that income fell below planned amounts in 2011, but strong steps were taken to improve resource mobilisation. These are detailed in the Fundraising section of this report.

<table>
<thead>
<tr>
<th>Type of Fund</th>
<th>Planned for 2011</th>
<th>Allocated in 2011</th>
<th>Estimated Year-End Expenditure</th>
</tr>
</thead>
<tbody>
<tr>
<td>ORE</td>
<td>295,951,000</td>
<td>116,475,613</td>
<td>104,942,756</td>
</tr>
<tr>
<td>ORR</td>
<td>67,379,000</td>
<td>44,577,278</td>
<td>37,180,896</td>
</tr>
<tr>
<td>RR</td>
<td>18,148,000</td>
<td>22,776,238</td>
<td>19,396,695</td>
</tr>
<tr>
<td>Total</td>
<td>381,478,000</td>
<td>183,829,129</td>
<td>161,520,347</td>
</tr>
</tbody>
</table>

c) Contribution management is described in the fundraising section of this report: in addition to responsible grant managers being assigned, the Country Management Team dedicates time on a monthly basis for contributions management and reviews in detail the status of fund allocation, obligation, and expenditure. The CMT also pays special attention to the status of expiring PBAs and outstanding DCTs. The office prepared bank reconciliations on time and successfully maintained ‘nil’ vouchers in VCU throughout the year. PAR accounts for IP and local staff have also been reconciled in a timely manner. The office established 5 guest house, 4 special cash and 7 petty cash accounts that were all been successfully cleared. The office submitted the bank optimization report on time and all external expenditures were processed in a timely manner. The office also organized training on HACT to all staff members and NGO partners and successfully shifted DCT disbursement to NGOs to the HACT modality. Government partners are schedule for HACT training in 2012. UNICEF Pakistan also engaged an audit firm to conduct micro assessments of NGO implementing partners to better understand the financial and management risks in working with those NGOs and to address capacity constraints.

d) The office has disbursed DCT of US$59.2 million in 2011 and the total outstanding DCT balance is $36.7 million. The CMT took note of the DCTs in every meeting and constituted special committees to ensure that all DCTs are efficiently liquidated to maintain UNICEF high levels of programme delivery. The current outstanding balance for more than 9 months DCT is at 10%, most of which has been recommended for write-off.

e) International and domestic travel to and from UNICEF meetings and events were reduced through increased use of videoconferencing and webinars. Monitoring visits to the field and to partners' offices were rationalised through carpooling. Elimination of DSA to international staff on R&R was a large cost saving measure.
Supply Management

a) The supply plan was prepared at the beginning of the year with all programmes, sections and offices, and it was revised based on emergency preparedness planning. The total value of supply for 2011 against 935 supply orders was about US$ 54,785,216, including local and off shore procurement and direct ordering.

b) The CO has over 554 long term agreements, including 101 new ones in 2011. Procurement was timely for most goods, but quality of local products did not sufficiently improve, so stronger assurance measures were initiated near the end of the year. A market survey was begun, to be completed in 2012.

c) Timely delivery is challenging because of flooding, demonstrations, gas and electric shortages, and requirements for security clearances for certain areas. Delay in endorsement of Exemption Certificates contributed to slow clearance of offshore shipments, which creates demurrage charges. However, following discussions with MOFA, the process got faster. In addition to the small government supplied warehouse in Karachi, a third party’s warehouse facility near Port Qasim facilitated immediate storage of all offshore supplies upon clearance.

d) The volume of Procurement Services worth US$ 88 million, an increase of 10.5% from 2010. The CO, in close collaboration with UNICEF Supply Division and the Government EPI cell, managed to ensure no vaccine shortage for scheduled campaigns. CO also provided services for customs clearance and delivery of high volume and value vaccines as an interim support to the Government/EPI, and extended vaccine procurement services to one provincial government.

e) Several private sector partners were leveraged for in kind assistance directly to beneficiaries (without going through UNICEF services): provision of soap and water sachets, radio spots, text messaging to cell phones.

f) The One UN Procurement Group planned to establish a common vendor database and a common set of procurement rules as well as to finalize of the list of supply components to be procured by all UN Agencies with uniform rates.

g) Capacity of government warehousing remained variable, so the CO outsourced to a private company, while closing all UNICEF warehouses.

h&i) Supply management capacity assessments were done for NGO partners handling supplies, particularly large volume emergency supplies. Capacity gaps were identified and measures taken to rectify them. The CO remained involved in the custom clearance, logistics and in-land transportation of supplies to end-users and in end-user monitoring and weekly reporting.

j&k) An innovation specialist and a logistics specialist visited from UNICEF Supply Division. The innovation specialist recommended several areas for immediate gains through use of technology, including polio eradication. The logistician supported the emergency response to the Sindh floods.

l) Joint training with Afghanistan staff was done in Pakistan, on supply management. All supply staff were trained in IPSAS and VISION.

m) Lessons learned from both the 2010 and 2011 floods is that partner capacity remains weak, and substantial oversight and capacity building is needed from UNICEF staff.
Human Resources

Another flood emergency in 2011 necessitated the continuance or creation of many TA positions. The total positions filled during the year 2011 was 222. During the peak emergency in 2011 the total staff strength was around 512.

In 2011, CO went through changes in programme management and, human resource shifts as a result of strategic analysis of new needs and situations. This included a new polio section, an enlarged nutrition section, and higher staff levels and new staff in provinces to respond to the evolving federal government structure. New posts were added for policy and evaluation, for reporting and for resource mobilisation. On a pilot basis, a separate team was created for FATA in the Peshawar office.

At the end of the year, four emergencies hubs (Hyderabad, Multan, Sukkur, and Muzaffarabad) were closed and 82 staff was separated in December 2011. All these staff members were given timely notices, proper counselling was done, efforts were made to build their capacities in interviewing skills and writing resumes.

Staff Statistics

<table>
<thead>
<tr>
<th>Category</th>
<th>IP Staff</th>
<th>NO Staff</th>
<th>GS Staff</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
<td>Female</td>
<td>Male</td>
</tr>
<tr>
<td>TA</td>
<td>15</td>
<td>6</td>
<td>60</td>
</tr>
<tr>
<td>FT</td>
<td>19</td>
<td>19</td>
<td>67</td>
</tr>
<tr>
<td>Total</td>
<td>34</td>
<td>25</td>
<td>127</td>
</tr>
<tr>
<td>Grand Total</td>
<td>59</td>
<td>-</td>
<td>193</td>
</tr>
<tr>
<td>Total Staff</td>
<td>456</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

Measures were taken to increase applications from qualified female candidates, including sharing advertisements with women's organisations. Efforts were also made to keep a conducive environment for the female colleagues by raising awareness in the offices on the harassment policy and facilitating a women's professional group for female staff to share concerns and raise them with staff association and management. Zero tolerance was shown on gender discrimination and harassment. The gender ratio improved over 2009 and 2010, but there is still work to be done, especially in TA recruitment.

Gender Ratio

<table>
<thead>
<tr>
<th>Category</th>
<th>IP Staff</th>
<th>NO Staff</th>
<th>GS Staff</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
<td>Female</td>
<td>Male</td>
</tr>
<tr>
<td>TA</td>
<td>71%</td>
<td>29%</td>
<td>70%</td>
</tr>
<tr>
<td>FT</td>
<td>50%</td>
<td>50%</td>
<td>63%</td>
</tr>
<tr>
<td>Average</td>
<td>58%</td>
<td>42%</td>
<td>66%</td>
</tr>
<tr>
<td>Grand Avg.</td>
<td>Male: 67% Female: 33%</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

CO fully utilised its budget for staff training in 2011. Regular LLTC meetings held to ensure training opportunities were equitably distributed. Group learning events were arranged in the area of security, supply, P2D, communication, stress counseling, technical areas, performance management, career counseling, and VISION. In total more than 1300 participants were provided training and learning opportunities. An average of 39% internal candidates were hired for new positions.

The JCC met three times in 2011. In addition there has been a regular informal dialogue between Staff
Association and Management. The Staff Association was constantly represented in all CMT meetings and related activities. Relationships between staff and management, individually and collectively remained cordial.

UNICEF continued to lead One-UN’s HR Working Group. The One UN recruitment web portal has become an important tool to attract quality staff to the UN, particularly during emergencies. The HRWG is also being used as a platform to share the learning and development opportunities among UN agencies.

Efficiency Gains and Cost Savings

Significant efficiency gains were made by closing multiple UNICEF warehouses and outsourcing to a private company for two warehouses, located at road and transportation hubs for service to all provinces. Large cost reductions were made by closing the emergency hub in Hyderabad in May 2011 (staff went to the Karachi office) and closing the emergency offices in Sukkur, Multan and Muzaffarabad at the end of 2011. The closure of these offices and separation of their 82 staff resulted in a cost reduction of US $275,000 per year. The office in Dubai was closed, since the ceiling on international staff had been lifted in 2010 (however an emergency operations centre with server was retained.)

High costs were incurred due to a government requirement that the Lahore office be moved to new premises; a company was also hired to oversee the 2012 move of the Islamabad office for security reasons.

As mentioned in the ICT section of the report, cost savings were realised through increased use of webinars and videoconferencing, replacing international and national travel.

Non family duty status applied throughout the country and the corresponding entitlements paid to both international and national staff resulted in increased cost and offset the saving. Throughout the year all international staff were entitled an R & R on 6 week cycle and both national and international staff received hazard pay to compensate them for working in a challenging environment: (US$25,000 per annum to each international staff member’s salary and US$3,000 to each national staff member’s salary.) However, the elimination of DSA payment during R&R did result in some cost savings.

On-going improvement in security enhancements added extra costs to the Country Programme. All the offices were made to MOSS compliant in 2011 and the achievement of MOSS compliancy greatly increased overall costs. At the end of 2012, the office began a MORSS compliance campaign.

CO has been quite active in the One UN programme, which is time consuming, yet no savings have arisen from this involvement.

Changes in AMP and CPMP

Annual Management Plans are prepared for all five offices in Pakistan. The Peshawar 2011 plan included piloting of a separate FATA team and increased international staff posts. The Karachi and Lahore 2011 plans outlined management of emergency hubs. The Islamabad plan included creation of a greatly enlarged polio team, and recruitment of more international posts, including at senior level. All of these were accomplished.

The significant changes in the 2012 Annual Management Plans will be a lighter structure, absent four emergency hubs that were closed; and piloting of service centers for business processing, following introduction of the new real time global management software, called VISION. The 2012 AMP for
Islamabad will include plans to move to new premises by the middle of the year, and roll out of HACT to government partners.

In early 2012, a new CPMP will be prepared and submitted for the new country programme that will run from 2013 to 2017.

At present, the structure of the programme has not been decided. Possible changes in staff profiles resulting from the introduction of VISION are yet to be felt, as the office is on a learning curve for this change.

Summary Notes and Acronyms

Acronyms
AMP
Annual Management Plan
ANC
Antenatal Care
AWP
Annual Work Plan
BC
Business Continuity
BGAN
Broadband Global Area Network
BHU
Basic Health Unit
CCCs
Core Commitments for Children in Humanitarian Action
CCT
Conditional cash transfers
CFS
Child Friendly Schooling
CHW
Community Health Worker
CMAM
Community based management of acute malnutrition
CMT
Country Management Team
CMW
Community Mid-wife
ComNet
Communication Network
CPC
Child Protection Centres
CRC
Convention on the Rights of the Child
CSOs
Civil Society Organizations
CWI
Child Wellbeing Index
C4D
Communication for Development
DaO
Delivering as One UN
DCT
Direct Cash Transfers
DRM
Disaster Risk Management
DRR
Disaster Risk Reduction
ECE
Early Childhood Education
EFA
Education for All
EPI
Expanded Programme on Immunization
EPRP
Emergency Preparedness and Response Plan
ERWG
Early Recovery Working Group
FATA
Federally Administered Tribal Areas
FDMA
FATA Disaster Management Authority
GAVI
Global Alliance for Vaccines and Immunisation
GB
Gilgit-Baltistan
GBV
Gender Based Violence
GHD
Global Handwashing Day
GPE
Global Partnership for Education
HACT
Harmonized Approach to Cash Transfer
HR
Human Resources
HRCP
Human Rights Commission of Pakistan
HRTF
Human Rights Task Force
ICT
Information Communications Technology
IDP
Internally Displaced Person
IEC
Information/Education/Communication
<table>
<thead>
<tr>
<th>Acronym</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>IED</td>
<td>Improvised Explosive Device</td>
</tr>
<tr>
<td>IMEP</td>
<td>Integrated Monitoring, Evolution and Research Plan</td>
</tr>
<tr>
<td>IP</td>
<td>Implementing Partner</td>
</tr>
<tr>
<td>IYCF</td>
<td>Infant and Young Child Feeding</td>
</tr>
<tr>
<td>JJSO</td>
<td>Juvenile Justice System Ordinance</td>
</tr>
<tr>
<td>JP</td>
<td>Joint Programme</td>
</tr>
<tr>
<td>JPC</td>
<td>Joint Programme Component</td>
</tr>
<tr>
<td>KAP</td>
<td>Knowledge, Attitude and Practice</td>
</tr>
<tr>
<td>KP</td>
<td>Khyber Pakhtunkhwa</td>
</tr>
<tr>
<td>LHW</td>
<td>Lady Health Worker</td>
</tr>
<tr>
<td>LTA</td>
<td>Long Term Agreement</td>
</tr>
<tr>
<td>MAM</td>
<td>Moderate Acute Malnutrition</td>
</tr>
<tr>
<td>MCW</td>
<td>Mother and Child Week</td>
</tr>
<tr>
<td>MDTF</td>
<td>Multi-Donor Trust Fund</td>
</tr>
<tr>
<td>MICS</td>
<td>Multiple Indicator Cluster Survey</td>
</tr>
<tr>
<td>MNTe</td>
<td>Maternal and Neonatal Tetanus elimination</td>
</tr>
<tr>
<td>MOH</td>
<td>Ministry of Health</td>
</tr>
<tr>
<td>MORSS</td>
<td>Minimum Operating Residential security standards</td>
</tr>
<tr>
<td>MOSS</td>
<td>Minimum operating security standards</td>
</tr>
<tr>
<td>MOU</td>
<td>Memorandum of Understanding</td>
</tr>
<tr>
<td>NADRA</td>
<td>National Database and Registration Authority</td>
</tr>
<tr>
<td>NCHD</td>
<td>National Commission for Human Development</td>
</tr>
<tr>
<td>NDMA</td>
<td>National Disaster Management Authority</td>
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<tr>
<td>NEAP</td>
<td>National Emergency Action Plan</td>
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<tr>
<td>NID</td>
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</table>
National Immunization Day
NNS
National Nutrition Survey
OOSC
Out of School Children
OR
Other Resources
ORE
Other Resources for Emergency
OTP
Outpatient Therapeutic Programme
PAK
Pakistan Administered Kashmir
PATS
Pakistan Approach to Total Sanitation
PBS
Pakistan Bureau of Statistics
PEI
Polio Eradication Initiative
PGEI
Pakistan Girls' Education Initiative
PHC
Primary Health Care
PHED
Public Health Engineering Department
PINS
Pakistan Integrated Nutrition Strategy
PKR
Pakistan Rupee
PLaCES
Protective Learning and Community Emergency Services
PLW
Pregnant and Lactating Women
PNC
Postnatal care
PPIU
Policy and Planning Implementation Unit
PPTCT
Prevention of Parent-to-Child Transmission
PSLM
Pakistan Social and Living Standards Measurement Survey
RED
Reaching Every District
REUC
Reaching Every Union Council
RR
Regular Resources
SAM
Severe Acute Malnutrition
SFP
Supplementary Feeding Programme
SitAn
Situation Analysis
SMC
School Management Committee
SNID
Sub-national Immunization Day
SOP
Standard Operating Procedure
SWD
Social Welfare Department
TLC
Temporary Learning Centre
TORs
Terms of Reference
TSS
Transitional School Structure
UNDAF
Unite Nations Development Assistance Framework
UNDSS
United Nations Department of Safety and Security
UNGEI
United Nations Girls' Education Initiative
UPE
Universal Primary Education
UPR
Universal Periodic Review
USI
Universal Salt Iodization
UXO
Unexploded Ordinance
VCCT
Voluntary Counseling and Confidential Testing
VCU
Voucher Correction Utility
WB
World Bank
## Evaluation

<table>
<thead>
<tr>
<th>Title</th>
<th>Sequence Number</th>
<th>Type of Report</th>
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<tr>
<td>Knowledge, Attitude and Practice Survey on Water, Sanitation and Hygiene in Pakistan</td>
<td>2011/001</td>
<td>Survey</td>
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<tr>
<td>Multiple Indicator Cluster Survey (MICS) Balochistan, 2010-11</td>
<td>2011/002</td>
<td>Survey</td>
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<tr>
<td>Internally Displaced Persons Vulnerability Assessment and Profiling (IVAP)</td>
<td>2011/003</td>
<td>Survey</td>
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<td>WASH KAP Baseline Survey 2011: Rural Sanitation in Flood Affected Districts (RUSFAD)-Phase II &amp; III</td>
<td>2011/004</td>
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<td>Learning Achievement Report Language and Mathematics Grade 4 &amp; 8</td>
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<td>Experiences and Motivations of Polio Eradication’s Frontline Workers in Pakistan</td>
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<td>Household Polio Tracking Study – Phase VII</td>
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<td>Mother and Child Week (April 2011) detailed assessment of coverage</td>
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<td>Flood Affected Nutrition Surveys Sindh Pakistan</td>
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<td>Flood Affected Nutrition Survey of KP Province, Pakistan</td>
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<td>Nutrition Survey in Floods Affected Areas of Punjab Province, Pakistan (FANS)</td>
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<td>HIV Sero Surveillance in ANC Clients: Larkana</td>
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<td>Enhancing VCT and PPTCT among Female Spouses of HIV Positive Men through Conditional Cash Transfers (CCT)</td>
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<td>Comprehensive Vulnerability Assessment of Children and Families Affected by Conflict in Malakand Division</td>
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<td>In-depth Review of Legislation and administration of Birth Registration system in Pakistan</td>
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<td>In-depth Review of Legislation and administration of Child Labor system in Pakistan</td>
<td>2011/018</td>
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<tr>
<td>In-depth study of Child Labor in cotton farming areas of Pakistan</td>
<td>2011/019</td>
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<td>Assessment of Standards of Child Care Institutions in Pakistan.</td>
<td>2011/020</td>
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<td>A multilevel gap analysis on the registration of births in two cotton-farming districts of Baluchistan province. Included 'supply side' capacity audit and 'demand side' community assessment.</td>
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<td>Access to Informal Justice System</td>
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<td>Institutional Assessment of the Probation Department</td>
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<td>Juvenile Justice System Ordinance (JJSO) 2000 proposed amendments (Bill Draft)</td>
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<td>Diversion Guidelines in the Pakistani context</td>
<td>2011/025</td>
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<td>Institutional Assessment Report Social Welfare and Women Development Department, KP</td>
<td>2011/026</td>
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<td>International Study of Best Practices in Monitoring Children's Rights</td>
<td>2011/027</td>
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<td>Decentralization and Equity for Child Rights in South Asia-Pakistan Case Study</td>
<td>2011/029</td>
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<td>Building of Social Protection Floor in Pakistan-Child Cash Grants</td>
<td>2011/030</td>
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<tr>
<td>Mid Term Evaluation Report: Early Recovery Programme on Rural Sanitation in Nineteen Flood Affected Districts of Pakistan (Phase II)</td>
<td>2011/005</td>
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Other Publications

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<tr>
<td>1 UNICEF Pakistan Desk Calendar 2011</td>
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<td>2 UNICEF Pakistan Annual Report 2010</td>
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<tr>
<td>3 Sabuho Hygiene Promotion Campaign : Cartoon Jingle for TV and radio</td>
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<tr>
<td>4 Hand washing Champion Booklet (50 pages per booklet)</td>
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<tr>
<td>5 My Country, My Identity</td>
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<tr>
<td>6 AID: All In Diary : A practical Tool for Field Based Humanitarian Workers - Pakistan Edition 2011</td>
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<tr>
<td>7 Meena Storybook Kits (14 stories per kit in Urdu)</td>
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<td>8 Meena Films (13 short films per DVD, in Urdu)</td>
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<td>9 Polio Leaflets</td>
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<td>10 Polio Leaflets</td>
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<td>11 Desk Calendars 2011</td>
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<td>12 Media Advocacy Kit</td>
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Lessons Learned

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<tr>
<th>Title</th>
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<tr>
<td>1 PLaCES (Protective Learning and Community Emergency Services): An Integrated Model for Child Protection in Emergencies</td>
<td>Innovation</td>
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<tr>
<td>2 Analysis for Equity: Development and use of a Child Well-being Index in Pakistan</td>
<td>Innovation</td>
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Programme Documents