As per the Maternal Mortality Estimation Inter-Agency Group, there has been steady decline in the maternal mortality ratio in Papua New Guinea, from 470 deaths per 100,000 live births in 1990 to 215 deaths per 100,000 live births in 2015. During the same period, the under-5 mortality rate decreased from 89 deaths per 1,000 live births in 1990 to 57 deaths per 1,000 live births in 2015, as per the Inter-Agency Group for Child Morality Estimation.

This slow rate of decline is attributed to severely constraining health systems, which in turn caused sustained low coverage of essential life-saving public health interventions, many of which have not yet been rolled out at district and sub-district levels.

In 2016, UNICEF Papua New Guinea continued rapid scaling up of newborn survival interventions package (Early Essential Newborn Care) from 32 health facilities in 2015 to 175 health facilities (56 per cent of total health facilities in 11 provinces), benefiting 82,000 newborns. UNICEF Papua New Guinea supported establishing a state-of-art special care unit for improving early essential newborn care at the provincial hospital in Goroka. Management of severe acute malnutrition expanded to 15 out of the 32 hospitals and to 69 health centres in 29 districts under five provinces (Enga, Madang, Morobe, National Capital District and Simbu).

Because of these interventions, the case fatality rate associated with malnutrition in implementing health facilities decreased by 50 per cent. In four UNICEF PAPUA NEW GUINEA-supported provincial hospitals, on an average, the case fatality rate of severe acute malnutrition decreased from 24 per cent in 2015 to 16 per cent in 2016.

The early childhood development (ECD) initiative leapfrogged in 2016, with a pilot being implemented in 150 ECD centres, benefiting about 7,500 children. All ECD centres in seven provinces have been using a holistic curriculum. Adequate skills have been imparted to 500 elementary and ECD teachers. To promote inclusive education for children with disabilities, 70 inclusive ECD centres have been established in four provinces through programme partnership with Cheshire Disability Services. A total of 351 ECD, elementary and primary teachers have been trained on early detection and assessment and screening of children with disabilities. To address the issue of high number of out-of-school children, in 2016, Papua New Guinea successfully navigated the Out-of-School Children Initiative.

There has been a notable advancement in water, sanitation and hygiene (WASH) in Schools addressing multiple issues, especially for girls. UNICEF Papua New Guinea supported the development of standards and guidelines on WASH in Schools, a community mobilization programme targeting parents and school boards of management, hygiene education materials for schoolchildren and institutionalization of WASH in the education management information system.

The Lukautim Pikinini Act (Child Protection Act), which was unanimously endorsed by Parliament in 2015, was certified, gazetted and came into force in May 2016. To facilitate the act’s implementation, UNICEF Papua New Guinea supported the finalization of the development of child protection regulation, operational guidelines, police protocols on child
victims and witnesses, and review of a training manual for child protection officers and volunteers. A police training manual on juvenile justice was incorporated into the curriculum of the Bomana police academy, resulting in 1,800 new police recruits trained in 2015 and 2016. A massive advocacy campaign to #ENDviolence against children continued during the year, through communities, schools and church-based campaigns, reaching a total population of 119,294. To address the bottleneck related to lack of reliable data, data collection and reporting on child justice indicators is being strengthened through ongoing piloting of SMS RapidPro innovation.

As planned in 2016, integrated community case management of common childhood illnesses in two provinces couldn't be implemented due to lack of resources. An important piece of legislation process, the review of Papua New Guinea's Baby Feed Act 1984 and transforming the act into a law, has been delayed, as the state solicitor’s office is still reviewing drafting instructions and the draft bill prepared with the assistance of UNICEF Papua New Guinea and UNICEF Headquarters in New York. The overhaul an act as a law requires approval from the National Economic Council.

To improve the availability of data and push the equity agenda towards a decentralized level, the planned training of districts monitoring officers on monitoring for equity remained incomplete due to a lack of human resources in the department of education.

UNICEF Papua New Guinea established new partnerships with the private sector, including the Oil Search Foundation, on immunization services, and Click TV to disseminate life-saving information. Partnerships were also strengthened with non-governmental organizations (NGOs) such as World Vision, FHI360, Save the Children, CARE International, MSF and Susu Mamas, and with the Church Health Services and the Paediatric Society of Papua New Guinea.

**Humanitarian Assistance**

UNICEF Papua New Guinea's humanitarian assistance in 2016 was focused on the most vulnerable communities and populations in two provinces of the highland region affected by severe drought and frost because of the El Niño weather phenomenon in 2015. The assistance spanned till the second quarter of 2016.

UNICEF Papua New Guinea supported installation of borehole in 8 schools in Jiwaka and about 5,000 schoolchildren now have access to sustainable water supply. To strengthen coordinated response to WASH in emergencies, UNICEF successfully advocated the appointment of a senior government official as National Wash in Emergencies Coordinator. The coordinator was supported with coordination skills training through the Global WASH Cluster and RedR and UNICEF Philippines. UNICEF also supported the drafting of a Strategic Response Plan on WASH in Schools with the participation of all WASH partners in the country. UNICEF has procured and pre-positioned about 20,000 jerry cans, 40,000 Aqua Tabs and 20,000 buckets in the districts prone to disaster.

UNICEF Papua New Guinea collaborated with the World Food Programme, Food and Agriculture Organization and NGOs to support the National Disaster Centre to implement a comprehensive El Niño response with integrated food and nutrition security interventions. In four local-level governments of two provinces, with the assistance of UNICEF Papua New Guinea, a total of 19,147 children 6–59 months old were screened for severe acute malnutrition. Of those children, 680 children were treated both at community health centres and hospitals with the provisions of ready-to-use therapeutic food. The remaining 18,467 children received Micro-Nutrient Powder (MNP) supplementation, irrespective of their nutritional status and including those with moderate acute malnutrition. In the process, 120 health workers were trained in Integrated Management of Acute Malnutrition in 2016.
To respond to the humanitarian situation in the country, UNICEF Papua New Guinea supported the National Department of Health with procurement and pre-positioning of essential life-saving nutrition supplies, such as 25,000 strips of mid-upper arm circumference tapes, 509,100 sachets of micronutrient powder, 79,500 sachets of Plumpy’nut, 800 sachets of Resomol, 10,800 packs of F-100, and 10,000 packs of F-75.

Emerging Areas of Importance

Accelerate integrated early childhood development (ECD). In 2016, UNICEF Papua New Guinea enhanced its focus to accelerate the programming support to integrate ECD interventions with the engagement of a high-level delegation from the National Department of Education and the Autonomous Region of in the Good Parenting Support Intervention Workshop in the Philippines and Early Childhood Care and Education (ECCE) Regional Policy Forum in Malaysia that provided an opportunity to enhance knowledge of good practices in early childhood education. As a result, the Autonomous Region of Bougainville government has created an ECD position. The Education Department of the Autonomous Region of Bougainville has initiated an ECCE programme in collaboration with Catholic churches, which has trained 120 elementary teachers and 90 ECCE educators. These trained human resources are mobilized to trail the ECCE in both elementary and community-based ECCE centres.

The National Department of Education (NDoE) and the Department of Community Development have initiated a multi-stakeholder dialogue to review the current early childhood care and development policy. The ECD multi-sector policy will be a guiding framework for all focal government departments, NGOs, faith-based organizations and other service providers to integrate ECD in their policies and plans. UNICEF is working in close partnership with Save the Children in early childhood and disaster risk reduction for safe school initiatives.

Summary Notes and Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>DHS</td>
<td>Demographic and Health Survey</td>
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<td>ECD</td>
<td>early childhood development</td>
</tr>
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<td>ECCE</td>
<td>early childhood care and education</td>
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<tr>
<td>HACT</td>
<td>Harmonized Approach to Cash Transfer</td>
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<tr>
<td>ICT</td>
<td>information and communication technology</td>
</tr>
<tr>
<td>LTAs</td>
<td>Long-Term Agreements</td>
</tr>
<tr>
<td>NGOs</td>
<td>non-governmental organizations</td>
</tr>
<tr>
<td>SUN</td>
<td>Scaling Up Nutrition</td>
</tr>
<tr>
<td>UNDSS</td>
<td>United Nations Department for Safety and Security</td>
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<td>WASH</td>
<td>water, sanitation and hygiene</td>
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Capacity Development

UNICEF Papua New Guinea continued its focus on capacity development as a key strategy to achieve results for children, specifically among vulnerable communities. In total, 568 health workers were trained on severe acute malnutrition management integrating the promotion of infant and young child feeding practices that could reach more than 2,000 children with treatment using ready-to-use therapeutic food. A total of 425 health staff from 175 health facilities were trained on early essential newborn care in 2016, which could reach 82,000 newborns with essential services. UNICEF Papua New Guinea has institutionalized capacity-building support through collaborating with universities, research institutions and
professional associations on nutrition and early essential newborn care.

Fifteen master facilitators were skilled on community/school-led total sanitation and participatory hygiene education as part of a cascade training programme for teachers in schools. In two provinces 18,000, primary students were coached by 638 primary school teachers trained on integrating ‘values education’ in classroom lessons. In the Autonomous Region of Bougainville, 50 primary schools have developed disaster response plans; and 3,500 elementary teachers from seven provinces were trained on ECD education, of which 3,000 elementary teachers are from 13 districts of the Autonomous Region of Bougainville.

In addition, 57 child protection officers were trained on the Lukautim Pikinini Act and received delegated power from the Director of Child and Family Services to fulfil their mandate. Health workers from 54 health facilities were trained by the National Department of Health in clinical management of family and sexual violence cases. A total of 268 police officers and 30 magistrates were trained to provide child-friendly and gender-sensitive services to the children who are in contact with law. An additional 1,800 new police recruits completed juvenile justice training, while a total of 22 national, provincial and district village court officers were trained and certified as trainers of village courts.

**Evidence Generation, Policy Dialogue and Advocacy**

Sustained high-level policy advocacy of UNICEF Papua New Guinea led to endorsement and approval of the multi-sectoral National Nutrition Policy 2016–2026 by the National Executive Council chaired by the Prime Minister. UNICEF Papua New Guinea will continue to provide technical assistance to the interim high-level national nutrition committee for two years as the Secretariat with the National Department of Health and the Department of National Planning and Monitoring as co-chairs to coordinate the implementation of the National Nutrition Policy.

UNICEF Papua New Guinea’s technical support to roll out RapidPro SMS has seen real-time data collected through both the Juvenile Justice Services Office and the village courts and Land Mediation Secretariat. The data captured are greatly assisting the work of the Department of Justice and the Attorney General in the areas of child protection, juvenile delinquency and justice for children.

As part of the 2016–2017 #ENDViolence campaign, UNICEF Papua New Guinea partnered with the Oceania Football Confederation and FIFA to use sport as an advocacy tool to disseminate critical information on ending violence.

For the first time, with UNICEF Papua New Guinea support, the country has data on WASH in Schools at the national level, which has helped to identify disparity in WASH services coverage between secondary schools and primary schools. Further data are being analysed at district level to leverage funding on WASH in Schools through funding from the District Services Improvement Programme.

UNICEF Papua New Guinea commissioned a study to establish the unit cost of educating a school-age student in elementary, primary, secondary and vocational schools. The study will support to further advance Tuition Fee Free funding to the Department of Education.

UNICEF Papua New Guinea supported the Department of Justice and the Attorney General to develop the Juvenile Justice Policy. Another justice sector consultation on the Lukautim Pikinini Act 2015 was held to discuss the roles of justice-sector agencies and identify priorities for action to operationalize the act, which will feed into development of protocols, policies and operational guidelines for respective agencies.
Partnerships

Partnership has been expanded with the Appropriate and Community Development Institute of the University of Technology and Bougainville Healthy Community Programme to support the initiative of Healthy Schools and Healthy Villages Programme under the Healthy Islands Initiative. To provide learning opportunities for out-of-school children, UNICEF Papua New Guinea established a partnership with Giniguada, a local NGO, which resulted in the enrolment of 400 out-of-school children. Partnership with the Conservation Resource Foundation enabled 50 schools having integrated climate change adaptation and disaster management plans.

The partnership with the American Institute of Research enabled UNICEF Papua New Guinea to initiate the development of a costed Nutrition Strategic Action Plan towards in-country roll-out of the Scaling Up Nutrition (SUN) global movement. Partnership with GAVI and the H6 partnership to promote Every Women Every Child (EWEC) movement will have far-reaching implications on maternal, newborn and child health.

Reaching to unreachable with life-saving information and services such as immunization, child survival and development, UNICEF partnered with Oil Search Foundation and Click TV. Immunization, nutrition, community newborn care and child tuberculosis services further expanded in partnerships with NGOs (World Vision, FHI360, Save the Children, CARE International, MSF and Susu Mamas), Church Health Services and the Paediatric Society of Papua New Guinea.

The Partnership for Positive Parenting Initiative between the UNICEF child protection programme and the Catholic Archdiocese (of Madang, Hagen and Kundia), in collaboration with Menzies School of Health Sciences from Australia, was further strengthened to improve family relationships and reduce violence against children in 90 communities in three provinces (Madang, Simbu and Western Highlands Province).

UNICEF partnered with Reuters and the United Nations Communication Group, resulting in enhanced capacity of 15 local print, television and radio journalists in ethical reporting on children.

External Communication and Public Advocacy

Recognizing sport for development as a critical area for intervention, UNICEF Papua New Guinea has developed educational comic books with #ENDViolence and bullying messages. The soccer-themed comics have been distributed to 14 Pacific Islands and the comic book is being transformed into an animation series in the many different languages of the Pacific Islands.

UNICEF Goodwill Ambassador David Beckham reinforced the #ENDViolence advocacy message with a recorded public service announcement video. This message was displayed on digital billboards in the capital city of Port Moresby and promoted through leading social media channels.

The #ENDViolence movement culminated as an internationally recognized cultural event in the Eastern Highlands Province in September 2016. UNICEF Papua New Guinea mobilized 700 children from 12 schools in the region and trained 25 volunteers to dress up in traditional attire and deliver key advocacy messages at the Pikinini festival as part of the Goroka show.

UNICEF Papua New Guinea’s presence in social media continued to expand and engage a new generation of audiences, with Papua New Guinea’s Facebook page ‘likes’ nearly doubling from 30,000 to 57,000. UNICEF Papua New Guinea transformed its website and
social media pages to ensure they were child-friendly and reinforced its advocacy messages with regular updates, including photos and videos, which helped to generate awareness on a range of topics in areas such as disability and violence against women and children.


UNICEF engaged television, print and radio media in Papua New Guinea to advocate the many critical issues, such as nutrition, child protection, WASH, education and health, affecting women and children.

**South-South Cooperation and Triangular Cooperation**

UNICEF continued to explore South-South exchanges, supporting programme visits to several countries, including Colombia, Indonesia, Malaysia, the Philippines and Thailand. Facilitated by the UNICEF East Asia and the Pacific Regional Office, UNICEF Papua New Guinea initiated dialogues with the Ministry of Health in Viet Nam and Thailand to establish cooperation on exchange of ideas, sharing of good practices and capacity building on Early Essential Newborn Care, innovation on newborn care approaches and development of state-of-the-art facilities for early essential newborn care in a provincial hospital at Goroka.

Four-member delegates from the National Department of Education (NDoE), National Department of Health and Department of National Planning and Monitoring attended the fifth international learning exchange on WASH in Schools that resulted in a commitment to establish a WASH in Schools unit in National Department of Education and strengthen data collection through the Education Management Information System. A study visit to Thailand on education values, consisting of policymakers, curriculum writers, teacher trainers, head teachers and classroom teachers, helped to revise the national standards-based education curriculum and begin its roll-out at the elementary level. A delegation led by the Minister of Education from the Autonomous Region of Bougainville and National Department of Education participated in the high-level ECCE policy forum in Malaysia, resulting creation of an ECD multi-sectoral committee in the Autonomous Region of Bougainville.

Four delegates from Papua New Guinea representing the police, the Department of Justice and the Attorney General Juvenile Justice Services, village courts and Land Mediation Secretariat participated in a regional workshop in Bangkok on the dissemination of the study findings on ‘Diversion and Other Alternative Measures for Children in Conflict with the Law in East Asian and Pacific Island Countries’. Lessons learned were fed into planning and implementing diversion measures and alternatives to pre-trial and post-trial detention for children in conflict with the law.

Government delegates from the Department of Community Development also participated in the third high-level meeting on child rights in Asia and the Pacific, held in Kuala Lumpur, which provided an opportunity for Papua New Guinea to share work around violence prevention and social protection, and resulted in a commitment to establish a high-level multi-sectoral committee on the prevention of violence against children.

**Identification and Promotion of Innovation**

To improve community and youth participation, U-Report has been launched in second half of 2016. Using the open-source platform RapidPro alongside basic SMS, U-Report has amassed more than 1,200 registrations thus far.
RapidPro innovation is also assisting four government departments – the Department of Justice and the Attorney General, National Department of Health, National Department of Education and Department of Implementation and Rural Development – with data collection, monitoring and evaluation, along with sending key advocacy messages within their respective sectors.

Reporting on child justice indicators via RapidPro is being piloted by the Department of Justice and the Attorney General in six provinces, where key data from the police, juvenile courts, prisons, police stations and village courts are collected and reported to the Department of Justice and the Attorney General on a weekly basis by juvenile justice officers and village court clerks. The RapidPro system for Juvenile Justice will be scaled up nationally by the Department of Justice and the Attorney General, while the system for village courts will be scaled up and expanded to UNICEF focus provinces in 2017.

To involve young children and 85 school administrators from five provinces (Manus, Morobe, National Capital District, Sandaun and Western Highlands), a training plan has been developed to enable them to report on school census data for the National Department of Education.

A total of 1,355 women are currently registered across UNICEF and the National Department of Health’s m-Health messaging flows, with 231 health workers across the country receiving messages via the nutrition mentoring project. Both sets of advocacy messages have a focus on infant and young child feeding practices.

The final operational project with Department of Implementation and Rural Development is currently being reassessed, with plans in place to establish a fresh social policy project in 2017. The use of drones for service delivery to remote areas, and virtual reality to assist with education for those who cannot access the classroom, are two additional areas currently being researched by UNICEF’s innovation consultant for use in 2017.

**Support to Integration and Cross-Sectoral Linkages**

During 2016, there was more rigour in strengthening cross-sectoral linkages, capitalizing the horizontal integration at policy and strategic levels that was started in 2015.

To improve maternal and child health outcomes, delivery of integrated maternal, newborn, child health and nutrition interventions package has been introduced through developing a district micro-plan following bottleneck analysis and stakeholder consultations in five districts under three provinces. Better linkages are being promoted between nutrition and childhood tuberculosis with initiating the development of protocols and guidelines to improve treatment of malnourished children exposed to tuberculosis and other associated co-morbidities, including HIV and AIDS.

To improve enrolment and reduce dropouts as part of the child-friendly school initiative, the National Department of Education has committed to establish a WASH in Schools unit in the Department. To inculcate environment sustainability and improve resilience to disasters, 50 schools have developed school disaster management plans in the Autonomous Region of Bougainville.

**Service Delivery**

In 2016, UNICEF Papua New Guinea supported the National Department of Health in scaling up of early essential newborn care services to 175 health facilities (56 per cent of all health facilities in 11 provinces). As a result, 82,000 newborns received quality care.
services. Detection and treatment of severe acute malnutrition has been expanded to 15 out of the 32 hospitals and to 69 health centres in 29 districts under five provinces (Enga, Madang, Morobe, National Capital District and Simbu).

UNICEF’s contributions show that a total of 175,423 infants received routine immunization; approximately a quarter of a million children under 5 years old were screened for severe acute malnutrition. More than 2,000 children 6–59 months old with severe acute malnutrition received treatment, including 680 children as part of humanitarian response, and 18,467 children 6–59 months old received micronutrient powder supplements.

In Western Highlands Province, 32 survivors of family and sexual violence received emergency medical care, psychosocial first aid and referral services. UNICEF supported the National Department of Health to train 64 health workers from 52 health facilities in the Autonomous Region of Bougainville and Western Highlands Province, who will be able to provide care for survivors of family and sexual violence. UNICEF also supported the rehabilitation and re-establishment of a Police Juvenile Reception Centre in Port Moresby.

The #ENDviolence against children campaign continued during the year, reaching a total population of 119,294. Work on a parenting programme benefited an estimated 21,000 children, 3,600 parents and caretakers.

The ECD curriculum, supported by UNICEF, has been trialled in 150 ECD centres with 7,500 children in seven provinces. Some 351 ECD, elementary and primary teachers trained on early detection of children with disabilities assessed 9,889 children from ages 3 to 15 years in elementary and primary schools in 4 provinces. In total, 306 were identified with at least one type of disability.

UNICEF has supported installation of boreholes in eight schools in Jiwaka, and about 5,000 schoolchildren now have access to a sustainable water supply.

**Human Rights-Based Approach to Cooperation**

UNICEF Papua New Guinea continued to promote rights-based programming to address inequities in the country. UNICEF supported the provincial health authorities to identify the children from disadvantaged communities and ensure their right to access a basic package of health and nutrition services through organizing and conducting bottleneck analysis workshops in five districts of Jiwaka, Madang and Simbu. The workshops also aimed at developing knowledge and understanding of the health managers and workers on the concept of equity and coverage of basic health services by the disadvantaged and marginalized sections of the community. An equity-focused implementation plan for each of the five districts was developed to remove the bottlenecks towards improved coverage with equity.

UNICEF advocated for and supported the development of the Lukautim Pikinini Act (2015) and the Juvenile Justice Act (2014), both of which are in line with the principles and provisions of the Convention on the Rights of the Child. The Juvenile Justice Act was certified in 2015 and the Lukautim Pikinini Act was certified and gazetted in 2016. During the year, UNICEF supported the finalization of regulations, operational guidelines and protocols required to implement the Juvenile Justice Act and Lukautim Pikinini Act. UNICEF also continued to advocate for the Government of Papua New Guinea to meet its obligation of reporting related to the Convention on the Rights of the Child, which remains overdue, and the repeal of corporal punishment provisions in existing legislations and prohibiting corporal punishment in all settings, as called for in the 2016 Universal Periodic Review recommendations.
To identify the needs of and priorities of children with disabilities, a Situation Analysis was completed in Papua New Guinea under the Rights to Education and Protection project. A costed action plan (2016–2018), including a monitoring and evaluation framework was finalized, in collaboration with Department of Community Development and civil society stakeholders.

**Gender Equality**

In 2016, UNICEF conducted a gender programmatic review across all programmes: education, child protection, ECD, and young child survival and development. The new Country Programme 2018–2022 is being developed aligning with the review’s recommendations.

The gender programmatic review highlighted that the existing legal and policy framework for child protection is generic, meaning the word ‘children’ was used instead of girls and boys, and that male survivors, especially male child survivors, face barriers in accessing service. The programme will address these policy and service-level gaps during the development of a costed implementation plan for child protection.

The young child survival and development programme continued to support better gender parity in accessing services. For instance, 43 per cent of children screened for severe acute malnutrition were females. UNICEF also took efforts to improve the routine health management information system, introducing gender-sensitive reporting on key child survival interventions. UNICEF supported the National Department of Health to train 64 health workers from 52 health facilities in the Autonomous Region of Bougainville and Western Highlands Province to strengthen the capacity of the health sector to provide emergency medical care, psychosocial first aid and referral services for survivors of family and sexual violence, who are disproportionately women and children. Training has already been planned to enhance the capacity of health workers serving a catchment population of 374,000 to be able to provide care for survivors of family and sexual violence.

In addition, 68 primary school teachers and standard and guidance officers from 8 provinces were trained to address school-related gender-based violence, adapting the training module developed by multiple partners in East Asia and the Pacific region. Partnership has been forged with a local NGO, Equal Playing Field, to use sports as a medium to address gender-based violence in schools in the Autonomous Region of Bougainville.

**Environmental Sustainability**

Papua New Guinea, being close to the equator, falls within the moist tropical rainforest zone with high to very high rainfall. The country is prone to various natural disasters, such as inland and coastal flooding, alongside earthquakes, volcanic eruptions and the effects of climate change. The country is ranked fifty-fourth among countries most exposed to multiple hazards, according to the World Bank’s natural disaster hotspot study. The natural disasters affect community livelihoods, infrastructure and agriculture.

In 2016, Papua New Guinea experienced several earthquakes, volcanic eruptions, severe flooding throughout many parts of the country, and drought and frost conditions because of a continuing El Niño weather pattern. Lessons learned from the 2015 El Niño experience were incorporated into rapid assessments and the Government’s emergency response guidelines.

As the majority of the population relies on small creeks and streams for their daily drinking water needs, UNICEF Papua New Guinea, through its WASH activities, has continued to increase water storage capacity and installation of sustainable water systems, especially in rural areas. To eliminate WASH-related environmental hazards, UNICEF has supported the
installation of modern ventilated improved toilets and the building of hand-washing stations in 100 schools.

A UNICEF Papua New Guinea partnership with Conservation Resource Foundation enabled 50 schools having integrated climate change adaptation and disaster management plans.

UNICEF Papua New Guinea is gradually replacing gas refrigerators with solar-powered refrigerators – the Solar Disk Drive. UNICEF supported the National Department of Health to build capacity of all 22 provincial, cold chain focal points on installation and maintenance of the Solar Disk Drive. UNICEF continued supporting the National Department of Health to practice proper procedures and methods aligning with global standards of waste disposal of medical products, particularly immunization supplies, through establishing incineration systems and burial methods on the premises of hospitals and health centres.

**Effective Leadership**

The Office advanced four management priorities for improved performance in 2016. Office priorities included: the harmonized approach to cash transfers (HACT); results-based management and innovations for data evidence; enhanced partnership for better results for children; and improved efficiency and effectiveness in programme activities.

The country management team (CMT) met nine times to review programme and operations priorities and raised issues for action. Ten programme coordination meetings were held to discuss updates and bottlenecks in programme implementation, funds utilization, donor reporting and field monitoring. A weekly senior management team meeting was held to monitor results and raise issues for action. The Country Office was fully compliant with the corporate policy on financial disclosure.

Emergency preparedness activities were included in the annual workplans of education, nutrition and child protection.

The membership of office committees was updated as per need or when staff changed and committees continued to function well to provide oversight to procurement, contracting, asset management, staff appointments, project cooperation agreements, and staff learning and development. The joint consultative committee met five times in 2016 to discuss staff-related issues and monitor the implementation of actions relating to the global staff survey.

UNICEF Papua New Guinea actively participated in monthly United Nations Country Team meetings, Programme Coordination Committee meetings (which it co-chaired with the United Nations Development Programme), and Operations Management Committee meetings. UNICEF was engaged in a total of nine United Nations task teams to strengthen United Nations functioning, joint programme and common services as part of UN Delivering as One.

On asset management, the office conducted inventory counts and presented these in a property survey board meeting, along with proposals to dispose obsolete and broken equipment. The Asset Register was updated and all property survey board recommendations were addressed together with the annual asset count.

**Financial Resources Management**

During 2016, monthly bank reconciliations were completed within the Division of Financial and Administrative Management monthly closure timelines. A system has been put in place to review vendor accounts monthly to avoid outstanding invoices.

The Board Approved Budget for both regular resources and other resources funds for the
two years of the extended Country Programme (2016 and 2017) is US$22,106,000. This was finalized and allotted to UNICEF Papua New Guinea in 2016, bringing the total budget for the current Country Programme (2012–2017) to US$66,318,000. While the planned budget is US$11,053,000, the current available funding of both regular resources and other resources is US$16,579,369, with a current utilization rate at 86 per cent. The large number of funding available this year is attributed to the Australian Government’s Department of Foreign Affairs and Trade received early this year.

The current situation of funding allocation and utilization for UNICEF Papua New Guinea as of 12 December 2016 is: US$17,506,310 (total allocation), US$11,639,177 (total expenditure) and US$3,443,025 (total commitments). The total utilization is US$15,082,202 (86 per cent), with a balance of US$2,424,108.

For direct cash transfers, in 2016 UNICEF Papua New Guinea transferred approximately US$5 million to both government and NGO partners through partnerships and programme cooperation agreements. There was a significant decrease in outstanding direct cash transfers greater than nine months.

The 2016 HACT plan was developed and regularly reviewed. A contract to undertake micro-assessment and spot checks with the service provider was signed in December 2016. At the time of this report, 2 spot checks and 13 programmatic visits have been conducted out of 26 spot checks and 53 programmatic visits. The office established a HACT Committee, which started its functions in December to provide oversight on HACT activities and partnerships and report to the country management team.

**Fundraising and Donor Relations**

While the children of Papua New Guinea benefiting from UNICEF Papua New Guinea’s already established excellent relations with bilateral and multilateral donors, including Australia, New Zealand and the European Union, in 2016, the office went through a rigour to further expand and improve its donor relations with South Korea. The office has also mobilized resources from non-public donors including the UNICEF National Committees of United Kingdom, and France.

UNICEF Papua New Guinea has established a donor report work process that outlines the required steps to ensure timely submission of quality donor reports. The Office adopted a further mechanism to ensure that its successful record of timely submissions of quality donor reports was maintained. This was the inclusion of donor reports as a separate agenda item in weekly management meetings. Donor reports were also monitored at the monthly country management team meetings. All donor reports in 2016 were submitted on time. To ensure all donor reports met the organization’s quality benchmarks, all reports were reviewed by the communication specialist and finalized by the Deputy Representative, both using the donor report quality checklist to guide the reviews.

**Evaluation and Research**

An Independent Formative Evaluation of the Family Support Centres in Papua New Guinea was supported by UNICEF Papua New Guinea to generate findings and recommendations to improve the ongoing implementation of Family Support Centres in the country. The centres were established in health facilities starting in 2003 for provision of comprehensive medical, psychosocial first aid and referral services for legal aid, with UNICEF supporting the establishment of nine such centres. The evaluation was competed in March 2016 and its recommendations have been presented to and agreed by key stakeholders, particularly to develop a health sector strategy for violence against women and children; to train a critical mass of facility-based health workers to care for survivors; to establish an information
system; and to strengthen safe-house guidelines and services for survivors. Recommendations from the study will be carried out in 2017. A management response was prepared to track the implementation of the recommendations of this evaluation.

In 2016, UNICEF also collaborated with the World Health Organization (WHO) to support the National Department of Health in conducting the Effective Vaccine Management Assessment. The findings were used by the National Department of Health and immunization stakeholders to develop an Effective Vaccines Management Assessment Improvement Plan. In addition, UNICEF will support the National Department of Health in 2017 to conduct a nation-wide inventory of cold chain equipment for development of a cold chain expansion and rehabilitation plan.

### Efficiency Gains and Cost Savings

The high cost of doing business and delivering cost-effective technical assistance and services in Papua New Guinea remains a challenge. The Office continued to explore opportunities for cost savings and improving efficiency in its operations. The cost recovery policy for the shuttle services provided to consultants continued in 2016. The introduction of a monthly lump sum rate for daily subsistence allowance of individual consultants/contractors with contracts of more than one month was explored. This is likely to generate savings considering that daily subsistence allowance payments constitute a significant portion of the cost of hiring international consultants.

The Office conducted job interviews using Skype or the Regional Office telephone bridge. UNICEF Papua New Guinea continued to purchase international air tickets offshore, as the tickets were often cheaper than buying locally; however, the office sought multiple quotations to ensure the lowest cost for air travel.

To improve efficiency in the supply function, the office is in the process of establishing long-term agreements (LTAs) in several areas.

The Office now has all positions in finance and administration filled. Recruitment of the vacant operations manager post is in process; meanwhile, an administrative and finance specialist from UNICEF Syrian Arab Republic is on a stretch assignment as interim operations manager for three months. The office has also received a supply officer (emergency) on stretch assignment for about three months to support the understaffed supply unit. The UNICEF Regional Office finance section continued to provide support remotely to the UNICEF Papua New Guinea finance section.

### Supply Management

Procurement done through procurement services for the implementing partners, especially the National Department of Health, in 2015 amounted to US$12,274,639, but has dropped to US$3,628,466.01 to date in 2016. The huge increase in 2015 was due to the procurement of therapeutic food products and cold chain equipment. In 2016, procurement was done mainly for vaccines with additional cold chain equipment, while the therapeutic food products are still in process. The supply unit is also involved in supporting UNICEF Papua New Guinea in strengthening the capacity of implementing partners in maintaining supplies through procurement services. With support from a supply and logistics specialist from UNICEF Philippines, visits taken to implementing partners’ warehouses and health facilities have helped to identify issues and possible solutions/options for storage of supplies and distribution of cold chain equipment, especially those procured through procurement services.
As part of UN Delivering as One, UNICEF Papua New Guinea have participated in establishing an LTA for travel management services and are currently in the process of arranging LTAs for telecommunication services, vehicle maintenance, hotel and conferencing facilities, and stationeries. The supply unit has also undertaken a market survey to ensure if there is more access to qualified suppliers and contractors. UNICEF Papua New Guinea has planned to create LTAs for vehicle hire, security escorts and customs clearance, as these services are recurring and it is the best ‘strategic sourcing’ approach, which will reduce time involved in sourcing and increase effective and efficient delivery of goods and services. Also, the office continues to strategically source goods by comparing costs offered in neighbouring countries as well as procuring through DO LTA.

Security for Staff and Premises

Due to high levels of crime in Papua New Guinea and in compliance with Minimum Operating Security Standards, all staff going on field programme visits travel with unarmed security escorts and satellite phones.

All staff have been receiving the United Nations Department for Safety and Security (UNDSS) SMS-based security alerts. The weekly security situation reports were shared with all staff. The office has sufficient UHF radio digital handsets. The office has planned to improve the staff response rate to 100 per cent from the current 40–50 per cent.

UNICEF actively participated in the Security Management Team and supported the implementation of team security initiatives to ensure the safety and security of staff and protection of United Nations assets. Given the incidence of car hijackings, all office vehicles are fitted with a tracking device and an immobilizer, while staff are encouraged to have a comprehensive insurance coverage for their personal vehicles. All staff are entitled to use a vehicle escort before, during and after working hours. The office also availed of the UNDSS-managed LTA for common security to ensure staff safety during programme implementation and monitoring visits.

All UNICEF staff participated in the Safe and Secure Approaches to Field Environments training organized by UNDSS.

Human Resources

The UNICEF Papua New Guinea office managed to fill most vacant posts in a timely manner. The recruitment of the following positions was finalized and staff assumed their duties in 2016:

• Human resources officer (temporary appointment)
• Nutrition officer
• Health officer
• Senior executive assistant
• Administrative assistant
• Accounts assistant
• Driver FT
• Driver TA
• Driver TA

The current mix of international and national positions provided an enabling environment for coaching and training of national staff to build skills and competencies. The rate of 2015 Performance Evaluation Reports signed by both parties was 70 per cent. The completion rate of such reports is critically reviewed by management, as this is an important process of
not only managing staff performance, and giving and receiving feedback, but also providing an opportunity to opt to enhance the skills gaps and competencies.

A learning plan for the Office has been developed and followed up. The joint consultative committee played an important role in addressing staff issues. The Office developed and completed a workplan to address issues emerging from the global staff survey. A total of 29 consultant contracts were issued during the year to support programme delivery. The total value of the contracts excluding travel and daily subsistence allowance was US$1,492,839.40. Consultancy rates were negotiated to reduce costs.

Safe and Secure Approaches to Field Environments training was attended by six staff members, and all were certified accordingly. In addition, 16 UNICEF women staff were trained on women security awareness training and certified.

Effective Use of Information and Communication Technology

The optimal use of information and communications technology (ICT) in programme delivery and business process improvement is still emphasized by the office. Major upgrades to ICT hardware and software infrastructures include the deployment of a backup air-conditioning system in the server room, network printers and scanners, backup server UPS for power redundancy and business continuity have been completed. Aged laptops were replaced with new ones with capability to work longer hours using improved battery lifespan and an additional 11 laptops have been ordered to be delivered in 2017. The office has increased communication functions with provision of mobile phones bundled with voice and data plans for programme work and value-added initiatives contributing to improvement in productivity. Deployment of teleconference equipment has had an empowering effect on collaborative work internally and externally. These initiatives collectively contribute to the effective functioning of operational support and in delivering programme activities for the office.

The enhancement of existing Internet service by a local service provider to the highest plan available has not only improved speed of communication but also provided improved quality of communication experience. Staff can use Skype for Business without disconnection or delays. The office maintains a backup of its network database using detachable external hard drives in the custody of the operations manager.

The deployment of office SharePoint and usage of mobile phones loaded with voice and data bundles has provided suitable platforms for easier collaboration and access to information for programme activities anywhere and anytime by 3G Internet.

In other areas, innovation has expanded, with additional programmes such as Juvenile Justice using tools like U-Report and RapidPro working in tandem with ICT.

Programme Components from RAM

ANALYSIS BY OUTCOME AND OUTPUT RESULTS

OUTCOME 1: By 2017, the capacities of the Government and relevant stakeholders are strengthened to improve quality, access and utilization of maternal, newborn, child and adolescent health services, including sexual and reproductive health.

Analytical Statement of Progress:
Although there are no updated reliable data available locally, as per the Inter-Agency Group of Child Morality Estimate 2015, the under-5 and infant mortality was estimated at 57 and 45 per 1,000 live births, respectively, which is one of the highest in the Asia-Pacific region.
Progress has been slow due to several constraints, such as shortage of trained health staff, frequent stock-outs of essential health commodities, and lack of operational funds. However, with the introduction and expansion of the management of severe acute malnutrition, the child mortality associated with malnutrition continued to drop. The case fatality rate of severe acute malnutrition in four provincial hospitals decreased, on average, from 24 per cent in 2015 to 16 per cent in 2016.

The Government has launched an ambitious policy to abolish user fees for primary health-care services to achieve universal health coverage that may improve the coverage of child survival interventions, which has been sluggish for the past few years. The availability, access and utilization of essential child survival and maternal health remained very low. As of October 2016, the immunization coverage of pentavalent and measles among infants was reported at 72 per cent and 63 per cent. A total of 1,398 children 6–59 months old with severe acute malnutrition were treated in 5 provinces, of which 1,194 were cured (cure rate is 85 per cent). A total of 82,000 newborns were reached with early essential care in 11 UNICEF Papua New Guinea focus provinces.

UNICEF Papua New Guinea extended its support to implementing partners to increase the coverage of child survival and development interventions addressing the key health systems bottlenecks. Based on the successful implementation of equity-focused immunization programming in two districts of East Sepik, the capacity of five more districts of Madang and Simbu have been built and now have been able to use bottleneck and barrier analysis to accelerate progress to deliver an integrated package of immunization, nutrition, maternal and neonatal health and HIV and AIDS interventions. The capacity of NGOs and churches has also been built along with districts and local-level governments through the process of equity-focused programming.

UNICEF Papua New Guinea’s continuous advocacy for more efficient and sustainable vaccines procurement and logistic systems with the Government’s domestic resources significantly improved the availability of essential commodities for immunization, and strengthened strategies for procuring cold chain equipment. The National Department of Health has endorsed the recommendations of the Inter-Agency Coordination Committee to procure all vaccines and cold chain equipment using the most cost-effective vendors, including UNICEF procurement services to reduce costs and improve quality. In 2016, UNICEF Papua New Guinea supported the National Department of Health to procure US$1.2 million worth of vaccines and accessories, which is almost 80 per cent of the total requirements for 2016.

UNICEF Papua New Guinea, in collaboration with WHO, supported the National Department of Health to strengthen routine immunization through institutionalizing a locally contextualized Reach Every Community approach called Strengthening Integrated Routine Expanded Programme on Immunization and the equitable delivery of vaccination services in six provinces. Following a joint assessment of maternal and Neonatal Tetanus Elimination in June 2016, momentum gained to support the maternal and neonatal tetanus elimination agenda through tetanus toxoid supplemental immunization activities in the high- and medium-risk provinces and districts. UNICEF Papua New Guinea supported the implementation of such activities integrated with measles and rubella in three high-risk provinces (Hela, Jiwaka and Madang). A preliminary report from Jiwaka, which completed the activities, showed high coverage – 86 per cent for tetanus toxoid and more than 90 per cent for measles and rubella – while Hela and Madang continue their implementation.

With UNICEF Papua New Guinea’s sustained high-level advocacy, Papua New Guinea became the fifty-seventh member of the SUN global movement in April 2016. Capitalizing on the momentum, five provincial governments expanded the integrated management of severe
acute malnutrition, promotion of infant and young child feeding practices and multiple micronutrient powder supplementation. UNICEF Papua New Guinea’s continued advocacy helped to secure an increase in budget reallocations to nutrition interventions with US$1 million for procuring the essential nutrients including therapeutic food for 2016 as well as for the next five years. UNICEF Papua New Guinea continued to strengthen capacity development in the detection and treatment of severe acute malnutrition in 15 out of the 32 hospitals in country and further expanded the services to all districts and local-level governments in five provinces (Enga, Madang, Morobe, National Capital District and Simbu). As a result of these interventions, case fatality rates in implementing health facilities has reduced by 50 per cent. With a sustained high level of advocacy and technical support, a multi-sectoral National Nutrition Policy 2016–2026 has been approved by the National Economic Council.

The year 2016 was focused on improving the quality of early essential newborn care services that expanded to 11 UNICEF Papua New Guinea focus provinces, with the establishment of mechanisms and approaches of introducing community-based newborn care. The key focus of UNICEF Papua New Guinea support was to identify and develop a core team of mentors to work with hospitals and health facilities. UNICEF Papua New Guinea supported the development of a core team of 93 trainers and a total of 425 Early Essential Newborn Care providers that enabled the expansion of the delivery of Early Essential Newborn Care services from 32 health facilities in 2015 to 175 health facilities in 2016, which is 56 per cent of the total health facilities (312) in 11 provinces.

OUTPUT 1: By 2017, health facilities and communities have the capacity to implement Integrated Management of Childhood Illness (staff trained and supervised, commodities available, Village Health Volunteers/CBDs/CBOs trained and supervised) and provide immunization services (staff trained and supervised, cold chain and vaccines management) for all children under 5.

Analytical Statement of Progress:
UNICEF Papua New Guinea provided lead technical support to achieve results in 2016. Experts from UNICEF Papua New Guinea, UNICEF New York Headquarters and the UNICEF East Asia and the Pacific Regional Office led the National Department of Health-UNICEF-WHO joint assessment on maternal and neonatal tetanus elimination in June 2016 that identified four high-risk provinces and 11 medium- to high-risk provinces. Based on the recommendations of the maternal and neonatal tetanus elimination joint assessment, UNICEF Papua New Guinea provided financial and technical support to implement tetanus toxoid supplemental immunization activities in four high-risk provinces (East Sepik, Hela, Jiwaka and Madang) integrated with measles and rubella and vitamin A. Due to a shortage of vaccinators, slow release of funds and logistical difficulties, the implementation of the activities planned to be completed in November did not happen. Only Jiwaka could complete the campaign and was able to achieve 86 per cent tetanus toxoid coverage and 90 per cent measles and rubella coverage, while Hela and Madang are continuing the campaign in a phased manner by mobilizing vaccinators from neighbouring districts.

UNICEF Papua New Guinea supported the Government through its procurement services to improve the availability of vaccines and cold chain equipment as well as leveraging of resources from development partners, including private sectors to procure immunization supplies through UNICEF’s Procurement Services support. UNICEF Papua New Guinea signed a Memorandum of Understanding with Oil Search Foundation, a private-sector charity organization that plays a significant role in the health sector, to procure cold chain equipment for improving the cold chain systems and facilities in the remotest districts of three provinces (Gulf, Hela and Western). UNICEF Papua New Guinea, in collaboration with
WHO, supported the development of a comprehensive Multi-Year Plan 2016–2020 and to conduct an Effective Vaccines Management Assessment. UNICEF Papua New Guinea also supported the development of a core team of 30 trainers on cold chain installation, repair and maintenance who will then train provincial and district cold chain focal points. A training of trainers was supported to develop a team of 28 trainers from the National Department of Health and provincial health authorities using the technical guidelines and protocol developed aligning with the updated national Expanded Programme on Immunization policy.

The plan to introduce the integrated Community Case Management of common childhood illnesses in two provinces has been rescheduled in 2017. However, integrated Community Case Management has been integrated into other similar approaches of community-based health interventions, including community-based management of severe acute malnutrition and community newborn care. UNICEF Papua New Guinea has supported the National Department of Health and collaborated with NGOs and key partners, specifically the Rural Primary Health Care Project of the National Department of Health to develop the Village Health Volunteer module. The module is a community-based human resource for health as well as an avenue to reach the family and community to provide basic essential health services, promote healthy behaviours and early identification and referral of common illnesses. UNICEF Papua New Guinea is also supporting, through the National Department of Health, Integrated Management of Childhood Illness pre-service education training for all 31 institutes (midwifery schools, nursing schools and medical and health sciences faculties of the universities), to integrate such training into the pre-service education curriculum of medical and nursing studies.

**OUTPUT 2:** By 2017, health facilities have the capacity for providing essential obstetric care (staff trained on Early Essential Newborn Care/OEC/skilled deliveries/emergency obstetric care, staff supervised and essential commodities available).

**Analytical Statement of Progress:**
The Early Essential Newborn Care programme was expanded to 2 additional provinces, reaching a total of 11 provinces. A total of 175 health facilities have been equipped with trained staff and essential newborn care supplies that reached 82,000 newborns (57 per cent) out of an estimated target of 144,000 newborns in 2016. UNICEF supported provincial health authorities to create a pool of 10–12 Provincial Trainers in each of the 7 UNICEF focus provinces for roll-out of facility-level Early Essential Newborn Care training and to facilitate supervision, monitoring, and mentoring. UNICEF Papua New Guinea, in partnership with WHO, supported training a total of 425 health workers from 175 health facilities in 11 provinces. There is now at least one trained health worker at all district and local-level health facilities and as many as four trained health workers at all provincial hospitals coached on Early Essential Newborn Care practices, covering all 175 health facilities.

UNICEF Papua New Guinea also supported post-training coaching and mentoring of nurses working in the obstetric and post-natal wards in seven UNICEF supported provincial hospitals (EHP, Western Highlands Province, Madang, Jiwaka, Kerema, Central and Simbu) and initiated the expansion of a partnership with an NGO to roll out community-based newborn care in two provinces (EHP and Madang). The equipment to conduct hands-on training and skills building on for all Early Essential Newborn Care providers procured and delivered to all 11 provinces to equip all 175 health facilities. Essential life-saving equipment (AMBU bags, mucus suckers, suction machines, cord clamps) was procured and provided to each Early Essential Newborn Care trained worker. UNICEF Papua New Guinea supported the National Department of Health to hire seven freelance mentors-cum-monitors to facilitate
training, mentoring and monitoring of Early Essential Newborn Care activities at the hospital and health centre level. Two provinces (Goroka and Madang) are now regularly reporting on Early Essential Newborn Care implementation in the prescribed template developed by the National Department of Health.

Implementation of the Maternal Death Surveillance Review has got a momentum in Papua New Guinea as an important strategic intervention to critically review and analyse the causes and predisposing factors as well the bottlenecks that could have been removed to reduce the maternal death. All 22 provincial, maternal death review committees were formed and trained. Two provinces are conducting maternal death audit and reviews, and started reporting to the National Department of Health.

Lack of adequate national-level facilitators and limited availability of training materials have been the major bottlenecks to expand and improve the quality of Early Essential Newborn Care services. UNICEF Papua New Guinea is supporting National Department of Health in pooling of human resources through expanding its partnership with academic institutions and professional societies.

**OUTPUT 3:** By 2017, hospitals and health facilities are ‘certified’ as ‘baby-friendly health facility’.

**Analytical Statement of Progress:**
The infant and young child feeding national training guidelines on counselling services has been adopted and counselling trainings have begun with national and regional-level training of trainers. A total of 33 health professionals from provincial health offices, hospitals and nursing schools were trained on infant and young child feeding counselling as trainers who will then train the community health workers from health sub-centres and community health posts to conduct counselling sessions both at health facilities and at village and community levels. One participant from each of the 29 of 89 districts received infant and young child feeding counselling for training of trainers. The national infant and young child feeding policy 2014 was disseminated to all 29 districts linked to the adaptation process of infant and young child feeding trainers’ materials that provided guidance for implementing activities, including training and counselling services.

To strengthen the legislation and improve its regulation on the International Code of Marketing of Breastmilk Substitutes, review and overhauling of the existing Papua New Guinea Baby Feed and Supplies Act 1984 started in May 2016 with UNICEF Papua New Guinea and New York headquarters support. To transform the act into a law, the drafting instructions and the draft bill for the State Solicitor’s office have not yet been finalized for their review and endorsement for authorizing the submission of the overhauled act as a law to the National Economic Council for approval. To contribute to the eradication of micronutrient deficiencies, UNICEF Papua New Guinea supported a national-level training on collecting data on fortification of the imported rice and salt into Papua New Guinea, including collection of samples for testing on fortification. Urine and salt samples collection in schoolchildren is ongoing in the near cut-off Karamui district (Simbu Province), where there is suspected cretinism. A national policy to address anaemia in women of reproductive age (15–49 years) is integrated into the multi-sectoral national nutrition policy 2016–2026.

With limited administrative nutrition information, core and other infant and young child feeding indicators, including those on food fortification, were tirelessly advocated for and successfully included in Papua New Guinea’s Demographic and Health Survey (DHS) 2016, for which data collection is expected to complete in January 2017. For both adaptation of infant and young child feeding technical materials and the capacity building on DHS to include critical infant and young child feeding indicators, UNICEF Papua New Guinea provided financial and technical support, including equipment for DHS data collection, to
ensure that standards are maintained. Accurately collected nutrition data through the DHS shall be a benchmark and should allow informed policy advocacy and leveraging resources from the Government and donors to increase funding for nutrition-specific and nutrition-sensitive interventions.

UNICEF Papua New Guinea has also begun to institutionalize its capacity-building support in nutrition through collaborating with universities, academic and research institutions, and professional associations. Both pre-service and in-service capacity building will happen concurrently to increase chances of gaining results on the intended output. UNICEF Papua New Guinea is also supporting the Government to develop a coasted multi-sectoral Nutrition Strategic Action Plan 2017–2021 aligning with the National Nutrition Policy 2016–2026 as part of its commitment to support the country to roll out the SUN global movement.

**OUTPUT 4:** By 2017, provincial hospitals, district health centres and communities have the capacity to detect and treat malnutrition cases among children under-five (staff trained and supervised, commodities and supplies for therapeutic feeding available, Village Health Volunteers/CBDs/CBOs trained and supervised).

**Analytical Statement of Progress:**
Severe acute malnutrition management capacity building was expanded to district and sub-district (local-level government) level hospitals and health centres (total 84 health facilities) in 29 districts under 5 provinces (Enga, Madang, Morobe, National Capital District and Simbu) that have now 568 trained health workers for early detection, treatment and referral of children with severe acute malnutrition. As a result of these efforts, there has been a significant reduction of Case Fatality Rate among four provincial-level general hospitals (Kimbe, Kundiawa, Wabag and Port Moresby) implementing severe acute malnutrition management. For three years in a row, these four hospitals have reduced the average Case Fatality Rate of severe acute malnutrition from 25 per cent in 2014 to 24 per cent in 2015 and further to 16 per cent in 2016.

UNICEF Papua New Guinea assisted with needs assessment for management of severe acute malnutrition, and conducted training of trainers to develop a team of 71 trainers and the subsequent health worker trainings. The training was followed by on-the-job coaching and mentorships backed up by text mentorship messages through the RapidPro project. In 2016, UNICEF Papua New Guinea supported the procurement and delivery of 100 per cent of the country’s requirements of therapeutic food bought using government funds (US$1 million), leveraged through the office’s advocacy. This resulted in improved availability of therapeutic foods without any stock-outs. UNICEF Papua New Guinea’s continued advocacy has gained the country’s allocation to purchase the supplies for 2017. The office supported the National Department of Health to update and standardize the severe acute malnutrition management protocol, nutrition equipment, and capacity building and mentorships for both routine programme and humanitarian response.

UNICEF Papua New Guinea responded to humanitarian situation in 2016 following El Niño with support from the United Nations Central Emergency Response Fund. In this response, a total of 680 children 6–59 months old, against a target of 530 children, received severe acute malnutrition treatment in four local-level governments under three districts of Enga and Hela provinces severely affected by the weather phenomenon. This is nearly 4 per cent of all 19,147 children screened for severe acute malnutrition in four local-level governments. Of the total 680 children admitted into the programme, 510 were discharged and the remaining 170 children were still undergoing treatment. Among the discharged, 431 were cured (84.5 per cent), 78 defaulted (15.3 per cent) and 1 died (0.2 per cent).

UNICEF Papua New Guinea will continue to support the national and provincial government to advocate for promoting the multi-sectoral approach of nutrition programming using the
Nutrition Strategic Action Plan to allocate resources by the concerned sectors. Partnerships with NGOs, faith-based organizations and community-based groups and organizations will be explored and expanded to have community platforms and avenues to reach the families and communities with early identification and referral of children for severe acute malnutrition treatment. UNICEF Papua New Guinea also plans to facilitate the provincial government in getting access to NGO facilities for improving supply chain management of nutrients.

OUTCOME 2: By 2017, policies and programmes to achieve inclusive universal basic education, holistic early childhood care and development and alternative pathways to learning are in place and effectively implemented by the Department of Education and Department of Community Development.

Analytical Statement of Progress:
The Universal Basic Education Plan (2010–2019) and the National Department of Education of Papua New Guinea set the basis for guaranteeing basic education for all the children in the country. The Tuition Fee Free education policy started to be implemented in 2012, and in 2016 covered all schools from elementary to Grade 12, including students in Technical Vocational Education and Training, Flexible Open and Distance Education and inclusive education services provided through Special Education Recourse Centres.

To realize the rights of children with disabilities and to achieve equity for every child everywhere, a Situation Analysis of children with disabilities was completed in 2016. Based on Situation Analysis a log frame, with proposed activities, is ready to implement under the Rights to Education and Protection initiative. To address the issue of high number/percentage (44 per cent) of out-of-school children, in 2016 Papua New Guinea successfully navigated the Out-of-School Children initiative, a global programme supported by UNICEF. Under the initiative, a draft profile of out-of-school and excluded children in the country was prepared. Using data from the Education Management Information System (2015) and Census/Household Income Survey (2011), a technical team including officers from the National Department of Education and National Statistics Office trained by the Institute of Statistics of the United Nations Educational, Scientific and Cultural Organization is working to finalize the draft profile. The report will provide strong evidence as to the number and nature of out-of-school children in Papua New Guinea.

UNICEF Papua New Guinea's advocacy resulted in including a questionnaire on out-of-school children in the DHS being initiated by the National Statistics Office in 2016. Findings will assist policymakers to focus on and address the issue of out-of-school children.

The gender programme review of Papua New Guinea conducted in 2016 revealed notable barriers including child marriage and other forms of violations. With UNICEF Papua New Guinea's support, the national curriculum has incorporated aspects of values in education to support quality education and reduce school-related, gender-based violence at the primary level. The gender review also highlighted a lack of appropriate school facilities for girls, including sanitation facilities suitable for menstrual hygiene.

To improve learning outcomes, UNICEF Papua New Guinea supported teachers' training, WASH in schools, installing gender-sensitive facilities and training to school board and community members in the Autonomous Region of Bougainville, Enga and Jiwaka. UNICEF Papua New Guinea’s systematic advocacy led to elevating the importance of WASH in Schools. For the first time ever in the country, a Multi-Sector Technical Advisory Committee on WASH was formed. The high-level national committee is co-chaired by the Departments of Education and Health.
Support of UNICEF has strengthened the WASH Programme Management Unit to improve programme implementation and provide guidance in the areas of sector leadership and coordination, sector strategy and plan, capacity development, sector mapping and monitoring, and piloting of service delivery arrangements, including WASH in Emergencies. A foundation to expand early childhood education in Papua New Guinea has been built. The National Department of Education has drafted an early childhood education curriculum. Subsequently, a teachers’ training framework has been developed and aligned with the Elementary Teacher Training Programme.

UNICEF continued to support South-South exchanges, supporting programme visits and participation in international conferences. Engagement of a high-level delegation from the National Department of Education and the Autonomous Region of Bougainville in the Good Parenting Support Intervention Workshop in the Philippines and ECCE Regional Policy Forum in Malaysia provided an opportunity to enhance knowledge of good practices in early childhood education. As a result, the Autonomous Region of Bougainville government has created an ECD position. The Education Department of the Autonomous Region of Bougainville has initiated the ECCE programme in collaboration with Catholic churches. The ECCE programme in the Autonomous Region of Bougainville has trained 120 elementary teachers and 90 ECCE educators. These trained human resources are mobilized to trail the ECCE in both elementary and community-based ECCE centres.

The National Department of Education and the Department of Community Development have initiated a multi-stakeholder and multi-sectoral dialogue to review the current ECCD policy. The ECD multi-sector policy will be a guiding framework for all focal government departments, as well as NGOs, faith-based organizations and service providers to integrate ECD in their policies and plans. UNICEF is working in close partnership with Save the Children in early childhood and disaster risk reduction for a safe school initiative.

The 2015 EFA document (Papua New Guinea Department of Education, Oct 2014) mentions that the country survival rate for Grade 5 in 2012/2013 was 66%, i.e., from 100 children that would enter the educational system, 44 would drop out of school before reaching grade 5. It is estimated that 6 out of 10 students who start secondary school will leave before starting Grade 12 (Papua New Guinea Department of Education, Oct 2014). It is expected that due to a snowball effect, more and more students will dropout from the system. As a matter of fact, in looking at the absolute number of students enrolled in each grade from preparatory to Grade 12 (Papua New Guinea, Department of Education, Oct, 2012), the tendency is to have less students in the more advanced grades, showing that dropouts are a reality both basic and secondary educations (UNICEF Situation Analysis 2015).

OUTPUT 1: Key Education Officers at the national and sub-national levels have increased skills, knowledge and strategy to fast-track the implementation of the Universal Basic Education Plan by 2017.

Analytical Statement of Progress:
The National Education Plan (2015–2019) provides a holistic framework for an inclusive and integrated approach. Community engagement through school Boards of Management provides an excellent opportunity to improve access and quality of education at the local level. With UNICEF Papua New Guinea support, a total of 16 out of 22 provinces have prepared Provincial Education Plans. These include, among others, Central, East New Britain, Eastern Highlands, Enga, Hela, Jiwaka, Manus, New Ireland, Oro, Simbu, Southern Highlands and Western Highlands provinces. From these provincial plans the national
priorities are implemented at the sub-national level. The planning exercises conducted under the leadership of the National Department of Education have significantly enhanced the capacity of local education authorities, subsequently supporting school boards for inclusive School Learning Improving Plans.

To generate evidence for investment in the education sector, the National Department of Education, with the support of UNICEF Papua New Guinea, has initiated a study to establish the unit cost to educate a child from elementary to secondary (including vocational stream) education in Papua New Guinea. The study will establish expenditure areas in operating schools using Tuition Fee Free funding based on the basket of goods and services in different school locations. The findings of the study will suggest how much it would cost for one student to be educated considering the following five domains: teacher salaries and allowances; teacher training; infrastructure; school operations; and administration. Once established, the unit cost measure can be used to develop a strategy to recover costs by charging fees, for estimation of future costs, and for comparisons across different levels of education and across countries. So far, a total of eight provinces have undergone the completion of the first and second domains.

Recommendations from a Gender Programme Review conducted in 2016 will be integrated in to 2017 workplans to strengthen gender programming with country priorities.

**OUTPUT 2:** Out-of-school children accessing non-formal education are integrated into formal education at the national level and in select provinces by 2017.

**Analytical Statement of Progress:**

A draft profile of out-of-school children who have never attended school or have dropped out of school before finishing their formal education has been generated by the National Department of Education

Initial findings suggest that a total of 533,688 children 6–17 years old (23 per cent) are not enrolled in school. The Technical Team on out-of-school children is engaged to develop comprehensive profiles of children, including drop-outs, by using innovative statistical methods. Information is produced through analysing the Education Management Information System (2015) and latest data from the national census (2011) on household income survey and pre-primary and primary children out of school, primary students at risk of dropping out, and children in lower secondary out of school and at risk of dropping out.

A national workshop on out-of-school children (supported by UNICEF), involving 45 government and civil society representatives, has identified barriers related to social, cultural, school, government, politics and finance to address the exclusion and policy barriers. The analysis will feed into the development of a national report on out-of-school children in Papua New Guinea and recommendations to mainstream the children. Further to this, the National Department of Education has established a cross-sectoral national Steering Committee on out-of-school children, which will be tasked with suggesting essential policy reforms and applying targeted interventions based on the information used from data profiling.

A gender programmatic report commissioned by UNICEF Papua New Guinea in 2016 suggests student issues, such as abuse, bullying and lack of facilities specifically for girls are seldom discussed in school assembly or board meetings. To strengthen and empower the demand side and mainstreaming of out-of-school children, two partnership programmes were developed in 2016: (1) partnership with a literary centre based in Jiwaka (a remote province) has resulted in the enrolment of 50 out-of-school children in the flexible learning
centre; and (2) partnership with Ginigoada Foundation to mainstream the primary age of out-of-school children in Central Province. These children are supported through learning materials and teachers' training. Learning from the initiatives will be valuable to scale up the Out-of-School initiative in Papua New Guinea.

At the national level, UNICEF is co-chair of the local development partners advocating for more resources for equitable access and quality education. The European Union is planning to support the technical and vocational education programme in Papua New Guinea, which will help to create opportunity for vocational education for out-of-school children, especially those who are too old to enrol in primary or early secondary education.

**OUTPUT 3**: The Department of Education has the strategies and skilled staff to integrate child-friendly schools and disaster risk reduction in a gender-responsive and inclusive national education system by 2017.

**Analytical Statement of Progress:**
A professional mixed team consisting of 24 policymakers, curriculum writers, teachers and provincial education directors enhanced the capacity of value education through a study visit to Thailand. As a result, the national curriculum has integrated the content of value education. The study visit convinced education authorities to promote values in education and provide support to improve the quality of education. At the local level, 638 school teachers have undergone in-service training. Trained school teachers and provincial education directors have worked together to revisit lesson plans and school programmes for 638 schools, benefiting 18,000 primary school students in 3 provinces. In addition, 68 primary school teachers and standard and guidance officers from 8 provinces received training to address school-related gender-based violence, adapting the training modules developed by multiple partners in the East Asia and Pacific region. Because of a partnership with a local NGO, sports are being used as a medium to address gender-based violence in schools in the Autonomous Region of Bougainville.

Non-stereo typical gender roles are being promoted through engagement of girls and boys in different activities in school clubs. Together with gender, disaster risk reduction and management, climate change adaptation, inclusive education and WASH in Schools, the values in education component is integrated as part of Child-Friendly Schools. As a pilot initiative to assess the impact of improved menstrual hygiene facilities at school vis-à-vis adolescent girls’ attendance and drop-outs, changing rooms for menstrual management for older girls has been constructed in 25 schools in 3 provinces, before the scaling up. Partnership is also being forged with Conservation Resource Foundation to integrate climate change adaptation in schools. As part of this initiative, 50 primary school teachers have been trained on climate change adaptation, with disaster response plans developed. As a result, disaster management plans for 50 school have been prepared, securing the lives of more than 8,800 primary school children in the Autonomous Region of Bougainville.

As part of a larger strategy for Child-Friendly Schools, 68 teachers from 8 provinces have been trained to address issues of gender-based violence. In addition, 15 master facilitators have improved skills on Community/School-Led Total Sanitation and 60 teachers on participatory hygiene education training. About 300 school Boards of Management, parents and influential community members were mobilized, using Community-Led Total Sanitation and Participatory Hygiene and Sanitation Transmission. In Bougainville, 50 local artisans, carpenters and builders (trained through UNICEF support), could build low-cost improved toilets in the surrounding schools. This has resulted in creating demand from school boards, teachers and parents to improve WASH in Schools.
At the upstream level, for the first time ever in Papua New Guinea, a Multi-Sector Technical Advisory Committee on WASH in Schools co-chairs by the Deputy Secretaries of Education and Health was instituted. The WASH Committee's guidance to partners on WASH in Schools programme implementation aligned with the strategies outlined in the national WASH policy. A national WASH coordinator in emergency situations was appointed as a result of UNICEF's advocacy with the government sector.

OUTCOME 3: By 2017, prevention of parent-to-child transmission (PPTCT) of HIV and paediatric HIV services are integrated within mainstream maternal and child health programmes, with an emphasis on five high HIV-burden provinces.

Analytical Statement of Progress:
According to a 2016 report from the Joint United Nations Programme on HIV/AIDS, the HIV prevalence in 2015 among the adult population in Papua New Guinea was estimated at 0.8 per cent, an increase from 0.7 per cent in 2014. The National Department of Health, based on hospital antenatal care data, reported that the prevalence of HIV among pregnant women decreased from 1.57 per cent in 2014 to 1.0 per cent in 2015. However, Papua New Guinea is still suffering from one of the highest rates of HIV infection in the region, ranking third-highest among countries in East Asia. About 70 per cent of people with HIV live in 8 of the 22 provinces and the epidemic is mostly concentrated in the provinces of Highlands (1.07 per cent) and in National Capital District (1.29 per cent). Four out of 22 provinces have HIV prevalence greater than 1 per cent: Enga (1.75 per cent), Jiwaka (1.51 per cent), Western Highlands Province (1.3 per cent) and Eastern Highlands Province (1.0 per cent). The epidemic is concentrated in key population groups, especially among sex workers and men who have sex with men.

There has been significant expansion of evidence-based HIV care and treatment interventions, including PPTCT and paediatric HIV care and treatment with use of antiretroviral. About 67 per cent (450 out of 672) of health facilities providing antenatal care services have integrated HIV and syphilis testing for pregnant women and their spouses. This is an increase from 250 health facilities in 2011. However, little progress was made in increasing access to services for PPTCT, infant HIV testing and antiretroviral treatment. As of now, only 84 (12.5 per cent) out of total 672 health facilities providing antenatal care services have the provisions of PPTCT services with antiretroviral treatment, 53 health facilities provide early infant HIV testing and only 34 health facilities provide antiretroviral treatment for children.

The majority of health facilities provide point-of-care HIV testing. With the availability of rapid syphilis test kits, a majority of the health facilities, including the remote underserved facilities, provide syphilis testing. There are challenges, however, in coordination and distribution of the testing kits to ensure they reach the most remote health facilities. Papua New Guinea adopted Option B+ for HIV-positive pregnant women earlier than many countries in Asia and the Pacific, and has completely phased out less efficacious antiretroviral regimens for PPTCT. In 2015, 33 per cent of HIV-positive pregnant women received antiretroviral drugs for PPTCT, a decline from 46 per cent reported in 2014. Many children are lost to follow-up and are not linked to HIV treatment services partly due to long turnaround times for sending results from the referral laboratory to the requesting health facilities. The majority of children living with HIV do not receive antiretroviral treatment. Only 36 per cent children living with HIV received antiretroviral treatment in 2015, showing no increase from 2014. This is partly due to limited access to paediatric antiretroviral treatment, limited number of people trained and low confidence of health workers in treating children. Because of mentoring, many health facilities have started providing HIV testing among children.
The quality of HIV service delivery was improved through mentoring and support supervision of health facilities. Fourteen out of 22 provinces were supervised at least once with support from UNICEF Papua New Guinea. Health-related HIV strategic information has been strengthened. With UNICEF Papua New Guinea and WHO support, HIV monitoring and reporting was strengthened in 16 provinces through training of health workers and provincial monitoring and evaluation focal points. These provinces have started using the updated HIV monitoring tools. Papua New Guinea is now able to report on a majority of the key indicators recommended for global and national HIV programme monitoring.

While there is a recognized need to improve utilization of HIV prevention and treatment services targeting key populations, lack of disaggregated data for key populations limits the robustness of interventions. The Papua New Guinea Integrated Bio Behavioural Survey targeting key populations was begun in early 2016 and the results are expected to available early next year. The survey will provide information on size estimation, HIV prevalence and behaviours that increase HIV risk, which is valuable evidence for planning and implementing HIV programmes targeted to key populations.

Low retention of clients on treatment remains a challenge. Data collection for the study on retention of clients on Option B+ is ongoing. The research will provide lessons on improving retention of clients on lifelong HIV treatment and in-depth knowledge on how to address challenges faced by adolescents living with HIV. Funding remains a critical barrier limiting efforts to maintain the momentum in scaling up HIV prevention and treatment services to universal coverage. The Government has reduced funding to the health sector, with significant reductions in 2015 and 2016.

Cultural norms and gender roles are critical determinants of access to HIV services. Inherent cultural and traditional practices limit males to seek sexual and reproductive health services with their partners. The Men Taking Action project, implemented in eight provinces in partnership with the Catholic church, the Government of Australia and UNICEF Papua New Guinea to increase male involvement in PPTCT and antenatal care, has shown that it is feasible to increase male partner participation by addressing social norms, sensitizing health workers on how to make services friendly to male partners and promoting couples' counselling. Based on lessons learned, stakeholders have integrated couples' counselling in the training curriculum and a few provinces have undertaken infrastructure developments in the maternal and child health clinics to create male-friendly spaces.

OUTPUT 1: By 2017, PPTCT and pediatric HIV services are integrated within mainstream maternal and child health programmes, with an emphasis on five high HIV-burden provinces.

Analytical Statement of Progress:
Integration of PPTCT and paediatric HIV care in maternity and child health has been strengthened and the capacity has been built to strengthen the monitoring system. In 2016, priority was given to strengthening the quality of service delivery through on-the-job mentoring and support supervision. UNICEF Papua New Guinea supported the National Department of Health and provincial health authorities to conduct mentoring visits by the regional mentoring team. Mentoring was conducted in 34 of 40 health facilities providing PPTCT and pediatric antiretroviral therapy services in five UNICEF Papua New Guinea focus provinces (i.e., Eastern Highlands, Jiwaka, National Capital District, Simbu and Western Highlands) to improve the quality of service delivery. As of October 2016, a total of 32,795 pregnant women were tested for HIV, which is 47 per cent of all pregnant women (estimated 70,000) presenting for antenatal care check-ups in the five UNICEF focus provinces. Although much progress remains to be achieved towards universal coverage, these results indicate a trend in comparison, with a baseline of 34 per cent of pregnant
All 84 PPTCT sites are providing lifelong antiretroviral therapy. However, programme scale-up has slowed due to limited funding to support the roll-out of PPTCT to additional health facilities. During 2016, UNICEF provided technical and financial support for four PPTCT trainings and two Integrated Management of Adult Illness for PPTCT officers. Now 162 health workers from 34 health facilities have the knowledge and skills to implement Provider-Initiated Testing and Counselling for pregnant women and children. UNICEF Papua New Guinea, in partnership with the Papua New Guinea Institute of Medical Research and the National Department of Health, supported operational research on factors affecting retention of clients enrolled on lifelong antiretroviral therapy. The research was completed and analysis is ongoing, which will provide the inputs for the national PPTCT programme in scaling up Option B+.

UNICEF Papua New Guinea has continued to support the Government of Papua New Guinea to access quality and affordable HIV diagnostics and medicines. Fixed drug combinations of antiretroviral drugs were introduced to simplify capacity building and facilitate client adherence to treatment. To increase demand for PPTCT and maternal and child health services, a pilot project for SMS messaging to create awareness and increase health-seeking behaviour is under way in five provinces. More than 1,800 subscribers are receiving the health education messages by November 2016. Assessment of the first phase of the project to document lessons learned and improve further scale-up will be done in the first quarter of 2017. Capacity was built to strengthen programme monitoring and availability of quality strategic information through training and conducting joint monitoring to health facilities. To address factors affecting scale-up of PMTCT services, UNICEF Papua New Guinea continued to support barriers and bottleneck analysis in Jiwaka and Eastern Highlands provinces. This will inform government planning and scaling up PPTCT and paediatric HIV care services. Significant improvement was observed in Eastern Highlands Province, with ART coverage of 70 per cent, compared with 33 per cent at the national level.

**OUTCOME 4:** By 2017, children at risk of violence, exploitation and abuse have increased access to prevention and intervention services for protection and justice.

**Analytical Statement of Progress:**
The legal and protective framework to progressively protect and fulfil the rights of children continued to improve significantly with UNICEF contribution in 2016. UNICEF continued playing a critical role in narrowing down inequities and barriers through improving normative and policy frameworks, and institutional and human resource strengthening at national and provincial levels. Communication for development created a pool of catalysts to protect children from all forms of violence.

Continuing advocacy and support to Department for Community Development by UNICEF resulted in certification and gazettal of the Lukautim Pikinini Act in 2016, providing a stronger foundation for child protection in Papua New Guinea. To align with the act, UNICEF supported the reviews of the Civil Registration Act, Adoption Act, and Wills and Probates Act, which will further improve the protective environment for children in need of care and protection.

UNICEF supported the development of child protection regulations, operational guidelines and police protocols, and the finalization of the Child Protection Policy, to expedite the effective implementation of the Lukautim Pikinini Act. The Child Protection Policy is ready to be submitted to the National Executive Council for endorsement.
The National Information, Communication and Technology Authority and Censorship Board facilitated a round-table discussion on online child protection with UNICEF support, which saw the Government undertake major legal reforms to protect children against online exploitation and abuse.

To build sustainable institutional capacity, UNICEF support ensured that operational and training manuals for child protection officers are in line with the new Lukautim Pikinini Act, Child Protection Regulation and Child Protection Policy. With UNICEF training support, 83 Child Protection Officers from 16 provinces gained knowledge and skills in implementing the Lukautim Pikinini Act Operational Guidelines. UNICEF policy advocacy also led to delegated power to child protection officers to fulfil their mandate under the act.

The justice system for children was strengthened with the adoption of the Juvenile Justice Act in 2014. Following wide consultations with stakeholders in 2016, new Juvenile Justice Regulations and Juvenile Justice Policy were developed in 2016 to implement the act, and are under final review. To strengthen the first line of justice recourse for children, a module on child rights, child protection and juvenile justice for village courts was developed in 2016 in partnership with the village court and Land Mediation Secretariat.

Improving access to justice for children remains a key priority for the programme. Police capacity to deliver child-friendly and gender-sensitive services was improved in 2016, with an additional 900 new police recruits equipped with knowledge and skills in dealing with juveniles in conflict with the law. Moreover, 35 national and provincial police trainers and 22 National Capital District police station commanders and officers in charge were trained on police roles under the new Juvenile Justice Act and Lukautim Pikinini Act. A total of 22 national, provincial and district Village Court Officers were trained and certified as trainers of village courts in 2016, while 23 Village Court Officials from two districts in Simbu Province completed a pilot training on child protection.

Lack of reliable administrative information and nationally representative information remains a challenge for child protection in Papua New Guinea. To address this bottleneck, UNICEF advocated for incorporation of key gender-based violence indicators in DHS, which is under way. Support is also being provided to the Department of Community Development for establishment of a child protection information system, and an implementation readiness assessment has been completed.

Data collection and reporting on child justice indicators is being strengthened through ongoing piloting of SMS RapidPro innovation for village courts and the Office of Juvenile Justice Services under the Department of Justice and Attorney General, in collaboration with police, courts and prison officials.

In 2016, UNICEF’s technical support and recommendations to the Health and Family Welfare Parliamentary Committee enriched the parliamentary inquiry report on violence against women and children.

Communication for development to address social norms that contribute to violence against children is progressing slowly. In 2016, the #Endviolence against children campaign mobilized and created widespread awareness on the ills of violence in an estimated 2,500 adults and children through a walk-for-life event in Port Moresby; 8,000 adults and children in Eastern Highlands through road shows and a full-day children’s programme during Goroka Festival; and 81,000 children and adults in Jiwaka through community, church and school-based campaigns, and 27,794 in Simbu in collaboration with the Catholic Archdiocese of Hagen and Kundiawa.
The design and implementation of a parenting programme is on course to benefit an estimated 3,600 parents and caretakers and 21,000 children. During the year, a total of 189 family life educators, child protection officers, child protection volunteers and catechists from the Catholic Archdiocese of Mt. Hagen, Kundiawa and Madang, who will be parenting facilitators, have attained foundational knowledge on child protection and child development. A total of 59 child protection officers and family life educators have also completed community engagement training to be able to mobilize parents to participate in parenting sessions. Assessment of parenting challenges and strategies, and implementation readiness was completed and informed the development of parenting resources kit and implementation strategies. Rigorous monitoring and evaluation framework and systems have been developed to test the effectiveness of the programme for scale up and institutionalization.

**OUTPUT 1:** National Office of Lukautim Pikinini and Provincial Department of Community Development has the capacity to lead, roll out and monitor implementation of the Lukautim Pikinini Act at national and sub-national levels by 2017.

**Analytical Statement of Progress:**
The child protection system continues to face an acute shortage of a trained child protection workforce. Financial resources remain insufficient to support the Office of Lukautim Pikinini (Office of Child Protection) as well as other government agencies tasked with implementing the Lukautim Pikinini Act. As a result, the Department of Community Development, the lead agency for child protection, remains constrained in its ability to lead, roll out and monitor the delivery of child protection services. Child protection services continue to be mainly delivered by faith-based and civil society organizations.

The unanimous endorsement by parliament of the Lukautim Pikinini Act on 9 June 2015 provides greater legal protection for children and creates a strong foundation for strengthening national- and community-level child protection systems. During the year, UNICEF supported the development of a Child Protection Policy and Child Protection Regulation to facilitate the implementation of the act. Both the Child Protection Policy and Child Protection Regulation are ready for submission to the National Executive Council's endorsement.

To facilitate the implementation of the Lukautim Pikinini Act (2015) and the Child Protection Policy, the Department of Community Development has recruited new staff at the national level. UNICEF has seconded an international child protection systems adviser to support the Office of Child and Family Service to lead and coordinate the implementation of the Lukautim Pikinini Act and the Child Protection Policy. The consultant has been working with the stakeholders in development of whole of government costed implementation plan for child protection. During the year, the Lukautim Pikinini Act (2015) was certified and gazetted. Development of implementation regulation and the review of operational guidelines and training manuals to train child protection officers and volunteers have been completed. Furthermore, a total of 57 child protection officers from 15 provinces have been trained and given delegated authority by the Director of Child and Family Services to fulfil child protection officers’ duties as provided by the Lukautim Pikinini Act (2015). Furthermore, support has been provided for the consequential review of three pieces of legislation (Civil Registration; Adoption; and Wills and Probates Acts) related to the Lukautim Pikinini Act.

**OUTPUT 2:** Government, Family Support Centres and faith-based organizations in six focus provinces have increased capacity to deliver core preventive and responsive protection services, including case management and referral services by 2017.
Analytical Statement of Progress:
Violence in Papua New Guinea is disproportionately experienced by women and children. More than 75 per cent of women in the country have experienced some form of violence in their lifetime. All interventions relating to family and sexual violence address the underlying causes of violence, with particular focus on providing support to women and children as primary victims of violence.

In 2016, with UNICEF support to the National Department of Health, 52 health facilities in Western Highlands Province and the Autonomous Region of Bougainville have at least one health worker trained to provide emergency medical care, psychosocial first aid and referral services for survivors of family and sexual violence. An additional gender sensitization training will be conducted for Arawa Family Support Centre and two facilities in Central Bougainville, which will expect to see additional health workers trained. Further training on clinical and operational guidelines will be continued for additional 36 health managers/officers in charge and gender-based violence focal persons in 18 health facilities in North and Central Bougainville. This has enhanced the capacity of health workers serving a population of 374,000 to provide care for survivors of family and sexual violence.

UNICEF supported the establishment of nine Family Support Centres in health facilities for provision of comprehensive medical and psychosocial first aid and referral services for legal aid. This initiative has been evaluated by independent consultant. Recommendations of the evaluation have been presented to and agreed by key stakeholders, particularly to develop a health sector strategy for violence against women and children; to train a critical mass of facility-based health workers to care for survivors; to establish an information system; and to strengthen safe-house guidelines and services for survivors. Recommendations from the study will be carried out in 2017.

As a strategy to change social norms and mobilize community towards elimination of all forms of violence against women and children, partnerships with the Catholic dioceses, schools and communities have been created in four focus provinces. This has led to sensitization of 101,794 children and adults in Jiwaka, Mt. Hagen and Simbu, regarding awareness on the impact of violence on children, non-violent discipline and respectful relationships. Port Moresby will see a sustained campaign on #ENDviolence against children in 20 highly vulnerable settlements, and 1,000 youth have already been trained and will be mobilized as part of this campaign.

Through the partnerships with the Catholic dioceses of Kundiawa, Madang and Mt. Hagen, a positive parenting programme was launched in 2016. A total of 189 family life educators, catechists and child protection volunteers have obtained foundation knowledge in child development and child protection, and 59 child protection officers and family life educators have completed community engagement training to adequately mobilize parents to participate in parenting sessions. An assessment of parenting practices, challenges and strategies helped inform the development of parenting resource kits for 10 pilot sites in 3 provinces.

The National Information, Communication and Technology Authority and Censorship Board facilitated a round-table discussion on online child protection with UNICEF support, which saw the Government already undertaking major legal reforms to protect children against online exploitation and abuse.

OUTPUT 3: Law and justice sector agencies have the capacity to improve children’s access to justice, as survivors, witnesses and offenders, by 2017.
Analytical Statement of Progress: UNICEF continued to build the capacity of law and justice sector agencies to advance access to legal remedies for children in contact with the law. In 2016, UNICEF supported regional consultations on the draft juvenile justice regulations and policy with relevant stakeholders, including children in prison and schools. The revised regulations and policy will be submitted for endorsement by the National Executive Council. Another justice sector consultation on the Lukautim Pikinini Act was held to discuss the roles of justice sector agencies and priorities for action to operationalize the Lukautim Pikinini Act.

Recommendations from the consultation will feed into development of protocols and operational guidelines of respective agencies. Following this consultation, UNICEF supported the Papua New Guinea Constabulary in developing a draft Police Protocol on Child Victims and Children in Need of Protection, in consultation with government and NGO partners. In 2016, UNICEF Papua New Guinea and the UNICEF East Asia and the Pacific Regional Office conducted an assessment of legislation and practice on diversion and alternative measures for juveniles in the country. UNICEF supported representatives of Police, the Department of Justice and the Attorney General and Village Court Secretariat to participate in a regional workshop on diversion to build their capacities. Recommendations from the assessment and workshop will be used to improve and model diversion services and programs for juveniles in Papua New Guinea. Key law enforcement officials participated in a regional training of trainers on treatment of child victims and witnesses in 2015, with UNICEF support. The training was replicated in four provinces in 2015–2016, with 114 police officers obtaining skills on child-friendly investigations.

In 2016, further trainings on the new Juvenile Justice Act and Lukautim Pikinini Act were delivered by UNICEF in cooperation with Office of the United Nations High Commissioner for Human Rights, Bomana Police Training College and National Capital District Police, resulting to improved knowledge and skills of 35 national/provincial police trainers and 22 National Capital District police station commanders/officers in charge. The National Capital District Police Juvenile Justice Reception Centre was also rehabilitated with UNICEF support.

In 2016, 22 officers from village courts and the Land Mediation Secretariat and provincial/district village court offices of Western Highlands, Eastern Highlands and Simbu completed a training of trainers course for village court training, with UNICEF support. A module on child rights, child protection and juvenile justice was developed with UNICEF technical assistance for integration into the national Training Manual for Village Court Officials. In addition, 23 village court officials in Simbu Province were trained to pilot-test the module. Training on the full manual will be rolled out in 2017 for all village courts in the three provinces.

To address the critical data gaps on justice for children, a RapidPro-based SMS data-reporting mechanism on justice for children indicators has been developed and is being piloted in six provinces in partnership with the Department of Justice and the Attorney General Juvenile Justice Services, and Village Court and Land Mediation Secretariat. Using RapidPro innovation, key data from the police, juvenile courts, prisons, police stations and village courts are being collected and reported on a weekly basis by juvenile justice officers and village court clerks in the pilot provinces. The RapidPro system for juvenile justice will be scaled up nationally in 2016, while the system for village courts will be scaled up and expanded to UNICEF focus provinces.

OUTPUT 4: Institutional capacity for birth registration systems strengthened and demand for birth registration increased by 2017.
Analytical Statement of Progress:
Papua New Guinea does not have an accurate number of how many children have their births registered. It is estimated that about 97 per cent of children do not have a birth certificate, and 90 per cent are not registered at all (UNICEF Papua New Guinea, April 2016). A key challenge to civil registration in Papua New Guinea is the Government’s lack of investment in birth registration, and continued focus on adult registration. These barriers in the enabling environment are compounded by supply-related bottlenecks such as lack of human resources, lack of registration facilities and hospital and community-based services.

During the year, UNICEF continued and successfully advocated a decentralised registration system linked to health, education and faith-based organization services. In June 2016, the Civil Registrar gave the go ahead to model a decentralized, health, education and church-based birth registration system in one district. Following the clearance, UNICEF and the Civil Registration Office initiated modelling of de-centralized registrations in Kairuku District in Central Province, resulting in 144 teachers, 24 health workers having necessary skills for birth registration. In addition, 36 wards from 108 schools and 8 health facilities have been designated and equipped with the registration process. The number of civil registration system facilities in the country have increased to 14 in 2016 from 1 in 2015.

OUTCOME 5: Relevant government bodies undertake participatory evidence-based and equity-sensitive policymaking, planning and budgeting to achieve national goals by 2017.

Analytical Statement of Progress:
In 2016, Papua New Guinea continued to face the challenges of the ongoing economic downturn resulting from decreases in oil and gas prices, and the continued El Niño consequences of droughts and frosts that caused mine closures and reduced agricultural output. This had a significant impact on government revenues, leading to budget cuts of K395 million for health and education in 2017. Provincial expenditure continued to increase as a per cent of overall expenditure, in line with the Government of Papua New Guinea’s move to strengthen provincial and district capacity. In addition to infrastructure, resources were used to recruit teachers and health workers to meet increased demand at sub-national level. While sub-national expenditure has increased, the capacity to effectively administer and monitor the use of funds remains very weak.

Together with partners, UNICEF continued to support the Government at national and sub-national levels to develop the systems, governance structures and capacity needed to monitor, evaluate and report credible data to inform planning and budgeting processes. UNICEF technical support was instrumental in launching a special initiative jointly with the Governor of National Capital District) and Department of Community Development to establish a biannual National Children’s Forum. UNICEF also supported the development of the 2016–2017 National Monitoring and Evaluation framework, and 2016–2017 National Strategy for the Development of Statistics and 2015–2019 National Education Plan. These frameworks will promote better results monitoring and data coordination across sectors.

UNICEF advanced strategic partnerships with the Department of Implementation and Rural Development, National Economic and Fiscal Commission, Department of National Planning and Monitoring to collect and analyse data using DevInfo. Through direct mentoring and technical support, the departments can assess, analyse and validate national and sub-national social and economic sector data – including expenditure reports – which are critical for planning and budgeting. These efforts are
critical to facilitate more responsive planning and programming, allowing for more effective investment of resources to maximize results for children.

Innovative methods using RapidPro SMS were launched with three departments (Health, Department of Implementation and Rural Development, and Department of Community Development) to support real-time data collection and monitoring, strengthen accountability and information sharing, and improve demand for services. These activities directly support priorities to strengthen sub-national monitoring.

Persistent advocacy with the Department of Community Development led to the inclusion of a life cycle approach in a draft Social Protection Policy, which previously had prioritized only an old-age pension. This year, UNICEF also supported the Department of Community Development to develop capacity in child-centred social protection. UNICEF has also started to support five departments coordinated by the National Department of Health and Department of National Planning and Monitoring to develop a costed strategic plan that will enable the mobilization of resources for promoting nutrition security towards addressing the poverty.

Greater attention will be given to strengthening public finance and local governance to ensure that resources are adequately invested in children and that agreed laws and public policies are supported with the necessary allocations. In 2017, UNICEF will support the National Economic Fiscal Commission and Department of Finance to incorporate a child lens in the implementation of district expenditure reviews, particularly on the effectiveness of funding to support service delivery at the provincial and district level based on government priorities. Based on this information, UNICEF will support line ministries and local governments using bottleneck and barrier analysis to develop plans, budgets and arguments to secure resources for children, with focus on the most vulnerable children.

OUTPUT 1: Relevant government institutions have the capacity to coordinate, collect and analyse disaggregated and equity-sensitive data for use in planning, budgeting and policy formulation at national and sub-national levels by 2017.

Analytical Statement of Progress:
Limited progress was observed in 2016 due to circumstances beyond UNICEF Papua New Guinea’s control.

OUTCOME 6: The Country Programme is using appropriate mechanisms to measure, report and advocate progress on the situation of children and women, with a specific emphasis on equity by 2017.

Analytical Statement of Progress:
The office reported improvement in meeting benchmarks for applying both normative principles and cross-cutting strategies – a gender analysis was conducted in May 2016 to inform the development of the 2018–2022 Country Programme. The cross sectoral linkages were monitored as an agenda item for monthly Programme Coordination meetings to provide a platform to discuss coordination and progress in promoting programmatic synergies and linkages. The office strengthened the performance management system to measure UNICEF contributions to results and identify entry points for improvement. Quality assurance processes were developed to strengthen the results focus of workplans and reporting processes. All annual workplans were reviewed and signed before the end of January 2016. While the quality of annual workplans improved, with specific indicators addressing the removal of barriers and bottlenecks included in all workplans, reporting on.
indicators remains a challenge. Data quality remains a critical barrier. The capacity of partners at central and local levels to collect, interpret and use data is limited. Reporting disaggregated data (girls/boys, rural/urban) is especially limited.

In the context of UN Delivering as One in Papua New Guinea, UNICEF continued to play an active role in 9 out of 11 task teams, assuming leadership of the Millennium Development Goal, Population and Aid Effectiveness Task Team, while continuing leadership of the education and child protection task teams.

UNICEF continued to train national partners and sectoral focal points in results-based management, statistics, and monitoring and evaluation. A DevInfo Admin training workshop in April helped to strengthen capacities in database customization and management. Because of the training, national departments (National Statistics Office, Education) and provincial staff (East New Britain) have internalized the knowledge and have held Papua New Guinea Info trainings for department staff. Support was also provided to partners on strengthening real-time monitoring of results, with focus on removing barriers and bottlenecks faced by the most disadvantaged.

Considerable efforts were undertaken to strengthen the evaluation function within the office and with partners. The importance of the evaluation function was communicated to all staff and partners during annual review and workplan processes. Through a competitive process with a call for proposals, the office hired a qualified institution to undertake an evaluation of Family Support Centres in Papua New Guinea, which was completed in 2016.

UNICEF Papua New Guinea’s presence continued to expand across the country. More than 40 per cent of the population in the country under the age of 25 use social media. The office saw an increase of 525 per cent in registrations for the youth reporting tool, U-Report, over a two-and-a-half month period, where registrations increased from 191 in September to 1,224 in November. The number of ‘likes’ on the country office’s Facebook page increased from 22,611 in January 2016 to 57,627 in December 2016. A television spot promoting child rights produced by the Government and UNICEF was viewed 11,633 times on the local station’s Facebook page. UNICEF Papua New Guinea’s Sport for Development initiative was central to its strategy, harnessing the power of sports to campaign on a global scale, generate public dialogue and information exchange across stakeholders.

UNICEF Papua New Guinea transformed its website and social media pages to ensure they were child friendly and reinforced its advocacy messages with regular updates, including photos and videos, helping to generate awareness on a range of topics in areas such as disability and violence against women and children.

Strong and continuous advocacy helped to position children’s issues in the Government’s agenda. On 20 November – International Children’s Day, UNICEF Papua New Guinea nationally broadcast a public service announcement video in support of children’s rights. Due to advocacy by UNICEF Papua New Guinea and partners, the Government legislated to ensure an annual children’s forum would be held to allow children to talk about issues affecting them, with the first to be held in 2017.

**OUTPUT 1:** The Country Programme has appropriate mechanisms in place for measuring progress on the situation of children and women, with a specific emphasis on equity to inform planning and implementation and enhance learning by 2017.
n 2016, coordination and facilitation of the development of a new Country Programme process is one of the key office priorities stipulated in the Annual Management Plan. The office developed a road map for UNICEF Country Programme (2018–2022) processes to be aligned with the development of the United Nations Development Assistance Framework in the UN Delivering as One context in Papua New Guinea. The Situation Analysis of Children and Women in Papua New Guinea has been completed in consultation with partners and stakeholders. The analysis is used to identify key deprivations facing children and for causality analysis, to construct the Theory of Changes and to develop the Strategy Notes for new Country Programme. A Strategic Moment of Reflection workshop and results-based management training were conducted in October 2016. The United Nations Development Assistance Framework 2018–2022 preparation was completed, with UNICEF leading in several areas, including development of a results framework, and in technical areas of Nutrition, Education, Child Protection and WASH under the theme of ‘people’. UNICEF also provided lead technical assistance with organizing a results-based management training for all United Nations agencies.

Support to sections on end-of-year processes (annual report and reporting in Results Assessment Module; workplans) helped to ensure that office reports were submitted on time and per global guidelines. Special attention was given to strengthening the implementation of programme principles and strategic approaches across all sectors, and to identifying entry points for greater efficiency and effectiveness. An enterprise risk management workshop for both programme and operations staff was conducted in the first week of August to redefine the risk profiles and identify the mitigation actions for those high and significant risks. This will help enhance risk and assumption in the design of the new Country Programme.

**Analytical Statement of Progress:**
Considerable efforts were undertaken to strengthen the evaluation function within the office and with partners. Discussions were initiated with the Papua New Guinea Association of Professional Evaluators Inc., a volunteer network of professionals involved in monitoring and evaluation, as an entry point to enhance in-country capacity. The evaluation of Family Support Centres was conducted in 2016.

The office regularly reviewed and updated the annual Integrated Monitoring and Evaluation Plan as part of the annual management plan process. Country Management Team meetings were used to monitor progress against the plan and to identify areas for attention. UNICEF provided technical support to United Nations annual workplans and reporting through the United Nations Programme Coordination Committee.

**OUTPUT 2:** Key stakeholders at the national and provincial levels have the skills and knowledge to advocate for women’s and children’s issues with an equity lens by 2017.

**Analytical Statement of Progress:**
UNICEF Papua New Guinea partnered with the Oceania Football Confederation and the Just Play programme for the FIFA U-20 Women’s World Cup to engage Papua New Guineans in UNICEF’s #ENDViolence campaign and leveraged the power of sport at an international level. The Sport for Development initiative provided enormous opportunities for UNICEF to disseminate messaging on ending violence and supporting survivors.

The FIFA U-20 Women’s World Cup semi-final was dedicated to the #ENDViolence campaign, capturing a television audience of 5 million people worldwide. The local television station broadcasting the semi-final game live has a footprint of 80 per cent of the population. Photographs of the players participating from countries with national committees holding the red card with the #ENDviolence theme were shared with all the national committees for fundraising services. UNICEF Goodwill Ambassador David Beckham reinforced the #ENDViolence advocacy message with a recorded public service announcement video that
was shown on digital billboards in key locations around the capital city. The announcement was viewed 341 times on the country office’s Facebook page and shared 11 times. In addition, an #ENDViolence parade in Port Moresby attracted 500 children, teachers and volunteers, and an educational comic book highlighting bullying was developed and distributed during the event and more broadly to 14 countries in the Pacific. The comic is now being made into an animation. UNICEF Papua New Guinea engaged television, print and radio media to advocate the many different issues affecting women and children in the country, highlighting critical issues including nutrition, child protection, WASH, education and health. UNICEF Papua New Guinea also built the capacity of 15 local print, television and radio journalists in September to engage in ethical reporting on children and raised awareness on child protection issues in partnership with Reuters and the United Nations Communication Group.

UNICEF Papua New Guinea’s presence in social media continued to expand and engage a new generation of audiences, with Papua New Guinea’s Facebook page ‘likes’ nearly doubling from 30,000 to 57,000. UNICEF Papua New Guinea transformed its website and social media pages to ensure they were child friendly and reinforced its advocacy messages with regular updates including photos and videos, helping to generate awareness on a range of topics in areas such as disability and violence against women and children.

**OUTPUT 3: Capacity development.**

**Analytical Statement of Progress:**
This output complements results captured in the Programme Support output and reflect operating costs that contribute to, and cut across, a number of results. Funds were fully and effectively utilized towards staff salaries, rental costs, and support to common services as part of Delivery as One, including security.

**Document Centre**

**Evaluation and research**

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**Lessons learned**

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<th>Title</th>
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<tbody>
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<td>Innovation</td>
<td>Real-time data and evidence for advocacy using Rapid-Pro</td>
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