

Executive Summary

Achievements

In 2011, UNICEF's Sudan Country Office (SCO) complemented its project-based service-delivery programme approach, with reinforced public policy and advocacy interventions in all its areas of action, which was acknowledged by the Government of Sudan in the Mid-Term Review of the 2009-2012 Country Programme. These interventions included:

- Generation and dissemination of data relating to mothers and children, showing disparities and need for equity, including the preparation of the State of the Sudanese Child report in collaboration with Government authorities.
- Meetings with 13 out of 15 Governors to promote the introduction of work plans for 2012, to establish a floor of child rights, equity and MDGs in Sudan.
- Federal Child Rights Act of 2010-11 signed and ratified in seven out of 15 States.
- The development of the Five-Year Education Strategy supported.
- In Health, dramatic reduction in malaria, measles and diarrhoea, along with Sudan's polio free status (since 2009) sustained.
- In Nutrition, getting its importance recognized by government partners, resulting in the establishing of guidelines, and expansion of community management of acute malnutrition to nine out of 15 States.
- Engagement with youth and peace building initiated in spite of conflict and other constraints.

In addition, UNICEF played a central role in the Darfur Water for Sustainable Peace initiative with UNAMID, for greater equity in access to water for all.

The SCO was a lead advocate on HIV issues in Sudan, and on the need for prevention through communication for development; care with promotion of pediatric treatment; and scaling up of voluntary testing for pregnant mothers.

UNICEF's voice on humanitarian principles and advocacy, as well as delivery in conflict areas, was sustained during 2011. Its human rights based approach at Federal as well as State level was vigorously advocated and promoted, laying the foundation for a strengthened nationwide decentralized action aimed at identifying and highlighting disparities, exclusion, inequities, and establishing of a "floor of rights" or basic set of interventions and results for children for the promotion of equity and for the achievement of Millennium Development Goals (MDGs).

The transition of UNICEF SCO work from one country office to two i.e., Sudan and South Sudan was accomplished. The Juba office was empowered and supported to soon act as a separate country office. Border issues were managed jointly with the Juba office.

Despite keen donor interest in supporting South Sudan and a noticeable increased focus on bilateral contributions, UNICEF Sudan was able to reach the CPAP funding target.

Shortfalls in achievements

Renewed conflict in Abiye, South Kordofan and Southern Blue Nile along with continued conflict in Darfur were key constraints on achieving progress in tackling grave violations against children.

The nutritional status of children throughout Sudan remained precarious due to a multiplicity of environmental and man-made factors including the lack of investments in livelihood leading to reduced consumption levels, and the deleterious impacts of disease, feeding practices and conflict on nutritional intake and urgent nutritional care of children.

The continued departure of international NGOs from Sudan reduced implementation capacity in nutrition, health, education, HIV and water.

While some progress was made, Governmental investment in social sectors is insufficient and will need to be enhanced. **Collaborative partnerships**

New partnerships were initiated with some key sectors of governance and included training of police, prosecutors, lawyers, judiciary and social workers.

Other partners with, and areas in, which the SCO collaborated include:

- Federal Ministry of Education (on Education Sector Strategy).
- Inter-ministerial collaboration (on State of the Sudanese Child report).
- Collaboration with UNEP and UNAMID (on Water for Sustainable Peace in Darfur).

Country Situation

The Comprehensive Peace Agreement (CPA) for Sudan signed in 2005 was concluded as South Sudan, on 9 July 2011 became an independent country following a referendum early 2011. The separation was expected to lay the foundations for long-term peace and stability in new Sudan. However, armed conflict in the three Darfur States, which account for 18% of Sudan's total population as well as newly emerging conflicts in South Kordofan and Blue Nile States posed a huge challenge to peace and stability. An estimated 440,000 people were newly displaced in South Kordofan and Blue Nile States, of which over 70,000 fled to neighbouring countries. Access to populations in need of humanitarian assistance was hindered due to security and administrative impediments, as well as diminishing number of actors on the ground and restrictions on the movements of international staff of humanitarian agencies.

Despite situational instability, Sudan's Gross National Product grew fivefold – from USD 10 billion in 1999 to USD 55 billion in 2010, much of which was attributable to an increased export of oil. However, the pattern of growth has been unbalanced as most of the investment and development has been urban-based. The significant development disparities between urban and rural areas and between regions contributed to growing inequalities and an increasing rural-urban migration along with sharp rise of the informal sector accounting for more than 60 percent of Gross Domestic Product. The overall rate of poverty in Sudan is estimated at 46.5%. The separation of South Sudan threatened to seriously reduce the income of the Government of Sudan and may lead to further social and economic challenges.

Under-five Mortality Rate (U5MR) in Sudan improved in the last two decades declining from 123/1000 live births (LB) in mid-1990s to 78/1000 LB in 2010 (Sudan Household Survey- SHHS, 2010). Pneumonia, diarrhoea, malaria, measles complications and malnutrition are still the major causes of under-five illness and deaths. Neonatal mortality rate (NNMR) declined from 44/1,000 LB in 1990 to 33/1000 LB but constitutes almost 42% of the U5MR (SHHS, 2010). There is an observed instability in maternal mortality levels evident in the data of the 1990 (DHS), the 1999 (SMS) and the 2006 (SHHS) which showed MMR values of 537, 509 and 638 per 100,000 LB respectively. National figures on U5MR and MMR do mask huge disparities between the states and within the states.

The acute malnutrition levels in Sudan, at 16.4%, are above the internationally accepted emergency threshold, with 5.3% of these children suffering from severe acute malnourishment. Some 515,380 children per year are likely to be severely acutely malnourished and 1,492,430 children will suffer from moderate acute malnutrition (according to weight for height z-score). One in three children (a total of 1,942,424 children) is stunted. The 26 localised nutritional surveys carried out in Darfur in 2011 show that the levels of malnutrition ranges from 8.7% (GAM, post-harvest, South Darfur) to 35.5% (GAM, hunger gap, North Darfur^[1]) with wide seasonal variations. Exclusive breast feeding rates are 41% and only half of the children begin solids at the appropriate time.

The conflict in South Kordofan and Blue Nile States led to about 290,000 school-aged children not accessing education. The large-scale migration of people to White Nile, North Kordofan and Khartoum States and inflows of Sudanese people returning from the South are putting severe pressure on existing educational facilities. In Sudan, 1.9 million children of school age do not attend school with 44% of these students located in conflict-affected Darfur States. Across Sudan, gross enrolment in basic education remains at 72%, and behind schedule to meet the MDG of universal primary education.^[2] A poor rural girl's chances to access quality education are 25 percentage points lower than of an urban boy.^[3]

Based on SHHS 2010, access to improved water sources reaches 81% (urban: 94.3%, rural: 75.0%) which translates to about six million people using unimproved water sources. Great inequalities exist between the States, with Gezira State having a 98% coverage compared to West Darfur State with 33% coverage. Similarly, access to improved sanitation stands at 27% (urban: 46.9%, rural: 17.9%) which leaves some 23 million people using unimproved sanitation facilities. As per WASH Strategic Plan (2011-2016) figures, around 50% of the existing schools do not have access to water and sanitation facilities.

HIV epidemic in Sudan is low concentrated with prevalence of 0.67% in the general population and up to 7.7% in Most at Risk Populations. Some 122,216 people are living with HIV/AIDS including 67,661 women (ages 15+) and 5,107 children (ages 0-14). The number of HIV positive pregnant women in need of PMTCT services is estimated at 7,766 a year. According to SHHS 2010, only 5.3% of women 15-24 have a comprehensive knowledge of HIV/AIDS. The draft KAP survey on HIV/AIDS (2011) revealed a high frequency of sexual relationships among unmarried young girls, ranging from 58% in rural to 68% in urban areas. Condom use among women 15-49 with multiple partners is very rare: 0.6%.

The Family and Child Protection Units (FCPUs) in Khartoum reported 2,734 victims of violence, 32% more than in 2010. There has been a significant increase in the use of the FCPUs for children in conflict with the law: from 956 reported cases in 2010 to 2,418 reported cases in 2011. While there has been a 5% reduction in FGM/C prevalence rates since 2006, more remains to be done to accelerate progress towards achieving its elimination. About 1,200 children are reportedly separated or unaccompanied and at least 100 reported missing in South Kordofan conflicts.

Sudan has a very young population - two thirds of its population is under 25 years of age a majority of whom are out of school and without a job. The Government has put in place a plan for youth employment in recent months. This includes hiring of 25,000 fresh graduates in 2012 in addition to setting up a Student Support Fund. The nationwide direct cash transfer for the poor is being scaled up through the Zakat Fund.

[1] Both prevalence's are weight for height z-scores <-2 and / or oedema, WHO Growth Standards.

[2] Ibid, p. 23

[3] World Bank Group (2011). Education Sector Report 2011, p. 72

Who are the deprived children in your country context?

Children and women living below the poverty line are the most deprived and vulnerable not only in economic terms but also in many other respects. Despite rising per capita income in recent years, poverty is high in Sudan, with 46.5 percent of the population below the poverty line. The incidence of poverty varies between urban and rural areas as well as between States (ranging from 26.0 percent in Khartoum State to 69.4 percent in North Darfur State). The probability of being poor highly correlates with the level of education of the main provider in the family. The proportion of the population below the minimum level of dietary consumption in Sudan is estimated at 31.5 percent. The number of unemployed persons increased considerably from 0.7 million (11.1 percent) in 1993 to 1.4 million (16.8 percent) in 2008 and the employment situation likely worsened in the past two years.

An increasing number of people in Sudan face lack of access to basic social services due to armed conflicts, which have now spread to five States. There are over 2 million IDPs and refugees in the camps. Families, including pregnant women and children in the armed conflict affected areas in Darfur, South Kordofan and Blue Nile, and those in the underprivileged areas in East Sudan (10 out of 17 States), continue to have a limited access to primary health care services. Over half of maternal deaths and two-thirds of the under five deaths in Sudan take place in these areas.

Data/Evidence

The Sudan Household Survey- SHHS, 2010 provides data on key child-related indicators covering a wide range of topics, including the most recent and detailed information on the situation of children and women in Sudan by each of the 15 States. This survey provides valuable disaggregated data that will help in the formulation of the Government's development plans and programmes, poverty reduction strategy, and the United Nations Development Assistance Framework (UNDAF). The surveys and studies carried out under different UNICEF programmes also throw light on the vulnerable groups and their priority needs. The country office is close to publishing the State of Sudanese Children (SOSC) report, which would provide State-by-State analysis of the situation of children using the latest social indicators made available by the SHHS, 2010, Education Statistics, National Poverty Survey, and the latest Census (2008). The report highlights issues in the social sectors that require advocating with both the state governments and federal government towards increased allocations from government budgets to those sectors. As part of its dissemination, federal and State level workshops will be arranged to promote the issues among the government officials, parliamentarians, and civil society.

The WASH programme is using multi-level prioritization criteria to address equity issues. The 2010 SHHS results are used to prioritize states for WASH interventions. Within each state, WASH programme uses indicators such as access to WASH services, population density, conflict areas, etcetera as criteria to prioritize localities and communities. Once a community is selected, the Community Action Plan is developed using participatory process so that the less privileged and left out families have a say in deciding the needs and interventions. In 2011, the SCO supported development of WASH policy and strategic plans that fully endorse equity issues related to WASH services.

A situation analysis on the rights of children living with disability is under preparation. Awareness raising and advocacy are essential complements to programmatic support to marginalised and excluded children. Information on HIV-related knowledge among the vulnerable groups (children in IDP camps, orphans and street children) and women in rural areas has been collected and data processed. In addition, adolescents in the age group 15 to 19 years are included in the national on-going Integrated Bio-Behavioural survey targeting men who have sex with men and commercial sex workers.

Monitoring Mechanism

The annual Integrated Monitoring and Evaluation Plan (IMEP) for 2011 was closely monitored and updated regularly. Out of 18 IMEP activities, 8 have been completed and 10 ongoing 5 of which were almost finished. The field visit recommendations were regularly compiled and the recommendations implemented. The recommendations from 20 major studies, surveys and evaluations are being implemented.

UNICEF and the Government established jointly a feeding centre database and nutrition information system in all 15 states. The feeding centre database allows monitoring of the quality of the Community management of Acute Malnutrition (CMAM) programme. UNICEF has supported the establishment of local area monitoring system for Maternal and Child Health (MCH) services in two States to improve the locality management system prior to expansion to other States. UNICEF is part of the disease surveillance technical group at the state and national levels.

The reporting tools have been recently revised to capture gender and age groups of young people in the assessment of HIV knowledge and skills. The Government M&E system through which most data are collected so far has not captured separately the most vulnerable population. UNICEF will continue advocating for studies and surveys, establishment of baselines and routine data collection that include data on vulnerable populations. The WES administrative structure at the national and state levels include dedicated monitoring officers and an active database to monitor and track the programme's progress and identify and report gaps and duplications.

As part of the Country Task Force on Monitoring and Reporting, UNICEF contributed to three Global

Horizontal Notes and the 2009-2010 Secretary General's report on Children and Armed Conflict. These have formed the foundation of UNICEF's advocacy with armed groups and forces, and well as its programmatic response.

With the limited access due to insecurity, on-going conflict as well as restrictions on international humanitarian agencies and its staff movements, monitoring of the situation of children and women in conflict affected areas and direct and independent verification of information concerning the situation of children and women in such areas is practically impossible in many parts of Sudan. UNICEF collects some limited information and verifies it whenever possible.

Support to National Planning

UNICEF and the Government work in partnership in programme planning and implementation as well as in monitoring, reviewing and evaluating the programmes. The studies, surveys and evaluations included in the annual Integrated Monitoring and Evaluation Plan (2011) were agreed upon between the Government and UNICEF early in the year. The terms of references are shared and inputs received and throughout the process, close interaction is maintained on the M&E activities. The study reports are jointly launched. The Government also undertakes field visits to monitor progress of implementation of jointly signed Annual Workplans either together with UNICEF or independently. Joint mid-year and annual programme reviews are held, with sectoral reviews occurring more frequently, at both the federal and State levels. In 2011, a number of formal reviews were held in connection with the Mid-Term Review of CPAP.

In the second half of 2011, the Ministry of International Cooperation established a new Division of Monitoring and Evaluation. UNICEF immediately offered support and technical assistance and will be developing a set of capacity building interventions towards the new country programme starting in 2013.

Any other relevant information related to data/evidence?

Country Programme Analytical Overview

The Sudan Country Office, in coordination with other humanitarian actors, employs different strategies including advocacy at global, country and field levels, diversification of NGO partners, capacity building of national partners, "remote" control monitoring and interventions to increase outreach during emergency situations.

UNICEF Sudan will support the development of education data management tools and an education strategy that emphasises access to quality education for marginalized and out-of-school children and children with special needs. Sudan Country Office will coordinate education emergency services through its state offices and its education partner agencies in conflict-affected States. UNICEF will also advocate for education programming support in Darfur, where donor fatigue threatens to result in a financial abandonment of fragile communities without durable education systems.

Community-based interventions, including community IMCI, outreach immunization activities, and community-based maternal and neonatal care will continue to be supported and expanded to assist the hard-to-reach communities. Community management of acute malnutrition will continue to be expanded and the quality of interventions will be improved to reach the most vulnerable children with severe acute malnutrition. This will allow a reduction in the treatment costs for families in rural areas with otherwise little or no access to medical care.

WASH interventions at community level will use school as an entry point. The water supply facility that is

designed for the community can also serve the school, contribute to social stability and mitigate suffering, especially amongst the most vulnerable children. School children can be agents of change especially in achieving open defecation free (ODF) status.

The Child Friendly Community Initiative (CFCI) operates in 65 new vulnerable communities where community development committees (CDCs) were established, registered, and trained. All planned 455 CDC members were trained on basic skills to facilitate participatory planning, implementation, monitoring and management of services. This initiative, after over 13 years of UNICEF support will be handed over to Government at the end of 2012 at which point financial support from UNICEF will cease.

Regarding the prevention of HIV/AIDS, the office will focus on capacity building for integration of PMTCT services into the reproductive health sector, linking as much as possible with health, nutrition, C4D, education and child protection programmes, with a focus on vulnerable youth. Facilitation of a supportive environment will take place through continuous engagement with public information channels. Participation will be ensured through the People Living with Aids (PLWA) association and youth clubs.

A public policy approach will be increasingly employed that focuses on upstream engagement with State governments. Key elements of this approach include evidence generation and knowledge management; policy and budget advocacy; technical assistance for policy implementation; and catalysing alliances and partnerships for children's rights. The renewed push will be to establish the minimum components of a child protection system in all of Sudan's 15 states. UNICEF will also promote open dialogue on social norms that are in contradiction with child rights. Children's protection rights will also be promoted and sustained in situations of armed conflict.

Effective Advocacy

Mostly met benchmarks

With protection partners, UNICEF led the development of a policy-advocacy paper on the protection of separated and unaccompanied children in the post-referendum and post-secession period. This document, approved by the HCT and accompanied by lobbying efforts with the Government, contributed to the signing of a MoU between the two Governments, with provisions to avoid the deportation of foreign separated/unaccompanied children.

Additionally, and by working with key partners, UNICEF has succeeded to put the issue of financing the health system on top of the agenda of the FMoH. UNICEF is advocating with the Government to ensure that the five-year strategy plan will address the equity issue and focus on the hard-to-reach communities. The SCO has supported a study on the availability of services to children with special needs. It has also contributed to peace promotion in the health sector through orientation of health workers as part of the in-service training and through linking peace promotion messages to health events, such as the launching of national polio vaccination campaigns.

During the adoption and scale up of the community management of acute malnutrition programme, special attention has been paid to ensure that multi-disciplinary government partners, civil society and the community have been orientated on the programme. This has led to increased understanding and funding provided by the Government for the scale up of the treatment of severe acute malnutrition.

The UNICEF Education Section has ensured that the next five-year Education Sector Plan will be child rights-based, and that it will address education needs of nomadic children, children and youth-out-school as well as children with disabilities. Zonal Education Offices have advocated for equity-based education and education financing. UNICEF Education Section has commissioned (a) studies on out-of-school children and

youth which are shared with FMoGE and SMOEs; (b) the development of an alternative learning strategy, as well as out-of-school learning materials as a result of these studies; (c) studies on the feasibility of using IT for e-learning; on school health; and on Early Childhood Development; (d) assessments on provisions for Special Needs children.

In 2011 the HIV/AIDS programme launched an advocacy campaign in collaboration with UNAIDS, WHO, UNDP and UNFPA for HIV counselling and testing to be part of the basic package of antenatal care services. The first advocacy meeting was led by the First Lady of Sudan and subsequently was replicated at state level involving Governors, Ministries of Health, hospital directors and Sudan OBGY Society. In addition, National AIDS staff members have been supported by UNICEF's Regional Office to attend PMTCT meetings at regional level to further discuss the issue in the context of MENA. As a result, HIV services providers are implementing Routine Providers initiating HIV counselling and testing in facilities where staff is trained and PMTCT services established.

Also, and as part of the decentralization process, the State Representatives have been empowered to engage in mainstreaming equity approach and child rights in planning and programming with the State Governments.

Changes in Public Policy

For economic and fiscal policy to better address disparity and the needs of the most vulnerable, there is urgency for the development community to support the Government in its endeavour to provide basic services for the realization of children's rights.

The secession of South Sudan, which accounted for roughly 75 per cent of Sudan's oil revenues, has put significant strain on Sudan's economic strength with possibly a significant negative impact on fiscal space and the country's balance of payments (official figures are not available yet).

Some of the fiscal measures that the government is planning to implement may have negative impacts on the poor and vulnerable, especially those affecting fuel and food prices (cut in subsidies). With an inflation rate that is close to 17% (January 2011), higher prices are likely to reduce the purchasing power of the poor drastically. In this context, protection measures, which target equity beyond poverty reduction, become an imperative. The SCO has been advocating for the above and for ensuring adequate financing for service delivery at the state level. UNICEF's on-the-ground presence at state levels - mirroring Sudan's decentralized governance system - provides a strong institutional base for sustained access to information and decision makers and effective advocacy towards improved budgets and services for children.

The year 2011 was of critical importance to Sudan's children not only due to the country's significantly altered political and economic context, but also due to the positioning of its planning process. Throughout this year, the Government has been formulating its National Strategic Plan for 2012-2016 wherein the development community has been advocating for an increased investment in social sectors. The Government is also striving to obtain HIPC (Highly Indebted Poor Country, which is related to debt relief) status by finalizing its Poverty Reduction Strategy Paper with the World Bank.

Leveraging Resources

The Comprehensive Peace Agreement (CPA) was signed in January 2005 and concluded after the secession of South Sudan in July 2011. The CPA period has been characterized by committed donors and generous support to children and women to address the issues of inequity in Sudan.

Throughout the CPA period, Sudan has faced on-going insecurity and outbreaks of conflict. This continued during 2011 - Darfur remains a humanitarian crisis, with about 2 million people displaced and an estimated 200,000 new displacements annually. The outbreak of fighting in the Abyei Area and Southern Kordofan in

June, and in Blue Nile in September 2011 has so far displaced over 200,000 people. At the same time, the country continues to cope with multiple humanitarian emergencies such as floods, droughts, malnutrition and recurrent epidemics including acute watery diarrhoea and measles. A majority of the population most exposed to those threats are women and children.

The multiple needs and complexity of Sudan make great demands on the donors and the country office. Due to the generous support of donors, SCO was able to preposition supplies to partially meet immediate needs. Most of the received funding is related to humanitarian interventions on a six-month to one-year basis. This makes it possible to meet the urgent needs but very difficult for the office to plan ahead and find sustainable solutions for the vulnerable groups.

The lack of certainty and insufficient Government investment in social sectors remain major impediments to achieving the targets. Due to the economic challenges ahead, the SCO does not foresee any change in commitment from the Government in the coming year.

Even so, the WASH sector has continued to engage with the Government to mobilize funds for its activities. In 2011, WASH was able to successfully leverage Government funds for its activities and additional resources as well at State level. The Government also fully funded the warehousing and transportation of supplies from Khartoum to most States, procurement of locally available supplies such as cement, iron rods and corrugated galvanized iron sheets, and the running costs of Water Environmental Sanitation project offices at state and locality levels.

Support from donors enabled the SCO to raise almost 100 per cent of the CPAP target during the CPA period. The secession of South Sudan will most likely change this trend and the office already experienced a USD 20 million decrease of funding in 2011. Sudan is facing a very challenging year ahead with continued fighting in the Three Areas and Darfur, humanitarian emergencies, lack of access and economic instability. This raises concern and questions about the ability of SCO to reach all women and children in need and to address the issues of inequity. The substantial funding needs in the Three Areas, which have resulted in a decrease of funding in Darfur is a case in point. In 2011, the country office was only able to mobilize 40 per cent of the funding target for the three Darfur States.

Capacity Development

Mostly met benchmarks

The Ministry of Youth and Sports, in spite of their willingness and commitment to serve the youth, is relatively new and has not received enough support from the development community and from within the Government so far to revitalize the youth sector and provide leadership. Against this backdrop, UNICEF has established a youth programme in 2011 through a consultative process of over one year involving partners from the Government, NGOs, donors, youth and other UN agencies. The formulation of this multi-sectoral youth programme is based on the Youth LEAD project, a large-scale multi-year project funded by CIDA. Two of the five main components of the youth programme are based on the capacity development of the Government and CSOs.

To prevent harsh treatment of the 4,500 registered children found on the streets, including round-ups and unwilling admittance to unfriendly care institutions, UNICEF, in collaboration with the Safety and Access to Justice Programme (UK supported), has developed a cascade training programme including an outreach component for police officers and social workers. This project intends to help police officers and social workers to interact with children on the streets in an entirely novel manner, finding long-term solutions and reunifying them with their families.

UNICEF has been able to build the capacity of the Federal and State Ministries of Education, as well as of other key partners such as civil society organizations (CSOs), through the Education Sector Policy and

Planning workshops.

Capacity development has been a core component of the scale up of community management of acute malnutrition. Pilots have been carried out for training traditional healers and religious leaders to make them aware of the benefits of the programme and to get them to collaborate in ensuring all children requiring treatment are referred. Capacity development is an integral part also of the health programme. Special attention is paid to the in-service training on different PHC programme components.

The WASH programme supported the training of about 200 sector partners at national and state levels in the areas of CATS approach, computerized inventory database, use of GIS tools, emergency planning and response, water quality monitoring and WASH MIS. Six sector partners attended Africasan-3 conference in Rwanda for exchange of experiences and to learn from other participants for scaling up sanitation.

UNICEF and the National AIDS programme identified training of service providers as a key capacity-building component. In 2011, training activities reached a total of 998 health services providers, 1,402 youth peer educator and social workers, 2,424 teachers and 30 NGOs working for HIV prevention and care for children and women. Capacity on SudanInfo database was increased by providing training on 'DevInfo User and Administration' to staff of Central Bureau of Statistics in all 15 States. In addition, 50 staff members from sectoral ministries were trained on DevInfo. Also, 70 staff members from CFCI were trained on DevInfo and 25 on data analysis using SPSS software. Two sectoral MIS (WASH and CFCI) have started work towards linking to SudanInfo.

Communication For Development

Partially met benchmarks

In 2011, Sudan country programme made steady progress in the transition from a stand-alone C4D programme focused mainly on ad hoc messaging to the development of strategic longer-term communication initiatives directly linked to programme sector results in the areas of infant and young child survival and female genital cutting.

Child Protection's Saleema communication initiative to protect girls from genital cutting continued to use a mix of mass media, high level advocacy, and community-based activities and was advanced through the development of a plan and partnership to achieve significantly expanded coverage through new social marketing campaigns (Born Saleema and Saleema Colours), formative work for which was begun in the final quarter of the year. In the area of evidence development, planning for what will be a multi-year activity developing and testing new impact measurement tools for Saleema communication was undertaken in collaboration with Swiss National Committee for UNICEF.

To strengthen infant and young child survival, work begun on essential family care practices in 2010 was continued through development and testing of a core toolkit of multimedia materials and community-level activities for the inter-sectoral Shuffa'a Alsoghar communication initiative to reduce infant and U5 mortality (Nutrition, Health, WASH), with a sharpened focus on young infant feeding. An important characteristic of both Saleema and Shuffa'a communication has been the development of a culturally compelling conceptual frame rooted in local perception rather than translated directly from technocratic expertise.

C4D guidance for community-based activities and communication materials are developed in consultation with communities/intended participants and all materials undergo thorough pre-testing before finalization. The programme has designed tools for radio programme content development and systems for monitoring radio broadcasts and listener responses.

While the overall C4D programme direction is toward a small number of larger-scale multi-pronged, evidence-based interventions using established best practice approaches, a large number of small-scale C4D activities are at the same time carried out directly by the sectoral programmes. Some sector C4D activities, such as WASH programme's Community Action Plan are strategically planned and formulated. Others tend to be ad hoc and less strategically structured. Discussions on re-designing the programme management structure for C4D are advanced in the country office and expected to result in improved practice.

Five types of posters - one each for water use, latrine use, hand washing, food hygiene and household hygiene based on Islamic teachings were prepared, pretested and finalized, which will be used for WASH promotion activities. The WASH programme in 2011 focused more on a community-based approach to promote sanitation and hygiene. Some 115 communities in nine States have participated effectively in identifying problems and their underlying causes, and developed community action plan to address them. Around 6 million emergency affected and other vulnerable populations were outreached with key WASH messages using mass media and inter-personal communication.

Service Delivery

Mostly met benchmarks

A cascade training programme was implemented for the police departments, including an outreach component for police officers and social workers, on how to treat children living in the streets. Police officers and social workers now interact with these children in an entirely novel manner, and the number of street children in institutions has decreased markedly.

Additionally, a policy-advocacy paper on the protection of separated and unaccompanied children in the post-referendum and post-secession period was disseminated. This led to the signing of a Memorandum of Understanding between Governments in Khartoum and Juba.

In 2011, UNICEF worked with partners to expand CMAM services in nine states. Prior to the establishment of programmes in all States, orientation workshops were carried out ensuring that a multi-disciplinary team of Government and civil society representatives were involved in the planning. This has led to greater commitment on the part of the Government leading to provision of resources for additional staff, and delivery of supplies and supervision costs in some states. Regular planning and consultative meetings took place between the UNICEF Health & Nutrition Section and representatives from the Health authorities at national and state levels regarding progress of the implementation of the planned services as per the signed AWP.

The WASH programme in Sudan introduced the Community Action Plan (CAP) development process using participatory methods derived from the Community Action for Total Sanitation (CATS) since 2009, and taking into consideration the issues of sustainability and equity, and thereby contributing substantially to peace building in the most vulnerable communities. Under this approach, physical interventions become an essential part of the broader social mobilization aspects for promoting total sanitation. Development of CAP has now become a prerequisite to the implementation of physical activities such as drilling and other construction activities.

UNICEF supported the FMoGE's five-year Education Strategy development, and has been appointed to serve as the coordinating body of the Global Partnership for Education (formally known as the Education Fast-Track Initiative) in Sudan. Along with its partners, the SCO was able to support 381,037 children (44% girls) to enroll in Grade 1 (23% above target). Additionally, 277,862 children from states affected by conflict (South Kordofan, Blue Nile, and Darfur States) received emergency education support (45% above

target). Some 41,000 out-of-school students were enrolled in Alternative Learning Programmes. In order to boost the quality of education services 4,680 teachers (51% women) were trained through UNICEF support (18% more than originally targeted). Additionally, 4,780 nomadic children attending Grade 8 received support for transitioning into Secondary Education (18% more than originally targeted).

Strategic Partnerships

Mostly met benchmarks

The partnership with UNHCR as protection cluster lead has revealed to be increasingly essential, in particular in terms of joint advocacy (statelessness and separated-unaccompanied children), joint planning (Humanitarian Work Plan and Protection of Civilians WG) and protection tools development (protection monitoring tool and quarterly analysis). Further programmatic synergies are sought on cross-border protection services and expanding protection monitoring to remote areas.

In the area of Health and Nutrition, in 2011, special importance was given to strategic partnerships with some UN Agencies (WHO, UNFPA, UNDP, WFP), National and International NGOs, CSOs, and the Federal and the States Ministries of Health. Through these partnerships, the health programme component of UNICEF assistance was able to contribute effectively to the expansion of maternal and child health services in Sudan.

UNICEF also worked with partners to expand CMAM services in nine states. Prior to the establishment of the programmes, orientation workshops have been carried out in all states ensuring that a multi-disciplinary team of government and civil society is involved in the planning of the programme.

UNICEF, in collaboration with UNAMID, supported MoIWR in organizing the Darfur Conference on "Water for sustainable peace" held in June 2011 in which more than 500 water experts and high level officials (Government, Donors, UN and other international organizations) participated. The conference resulted in pledging of over USD one billion to support 65 projects for stable and equitable water service systems for all Darfur states.

UNICEF, together with the FMoGE, the World Bank, as well as Donor Agencies such as DfID, EU, CIDA and Swedish SIDA, has developed a strategic alliance for the production of an education sector plan that will meet the requirements for the successful solicitation of funding from the Global Partnership for Education in 2012-2013.

In 2011, the HIV/AIDS programme continued and expanded its partnership with the National AIDS programme at Federal and State level and with civil society organisations. The program reviewed its partner selection process and issued a call for proposals from all civil society organisations working in HIV/AIDS to offer equal opportunities and ensure geographical distribution.

UNICEF actively contributed to humanitarian coordination as a member of the Humanitarian Country Team as well as Sector (Cluster) Coordinators in WASH, Education, Nutrition and the Child Protection Sub-sector at national and sub-national level. UNICEF is also, along with implementing partners, procuring all the supplies for NFI Core Common Pipeline that serves over 1.5 million conflict and disaster affected people in Sudan.

The youth programme is heavily dependent on successful partnerships. For example, in the area of youth employment, UNICEF will address the bottleneck through partnership with stakeholders from both demand and supply sides - equipping young people with education and skills and linking them with existing opportunities for employment, microcredit, and entrepreneurship skills trainings. Partnership will be the

key strategy in this programme component in order to respect the mandates and comparative advantages of different actors, including of UNICEF. The identified partners are JICA (Japan International Cooperation Agency), USAID, UNIDO, ILO, Central Bank of Sudan, etc.

Mobilizing Partners

The Youth programme has established partnerships with youth organizations (formal and informal) to ensure youth participation in the entire cycle of the programme starting with the youth strategy and situation analysis. UNICEF has been promoting conscious involvement of youth from IDP camps, rural areas, nomadic tribes, and the disabled in the youth consultations so that their voices are heard. Likewise, civil society such as religious leaders, sports associations, and influential figures has been mobilized to support the positive behaviour change among youth, particularly in peace education.

For Education, UNICEF has accompanied the State Minister of Education to Washington and New York to develop a strategy for applying for Global Partnership for Education (GPE) support on behalf of the Government of Sudan. UNICEF and donor agencies have established a strategic alliance for the development of an Education Sector Plan that will fulfill the requirements for GPE funding. National and international Civil Society Organizations have participated in a 2-day workshop sponsored by the Federal Ministry of Education and UNICEF to consult about Education-For-All needs in the new Sudan.

UNICEF as sector co-lead has strengthened WASH sector coordination with full-fledged coordination among 44 WASH partners resulting in improvement in joint assessment and monitoring, better data collection, analysis and sharing, and development of strategic humanitarian work plans. Working with national and international partners, and ensuring cooperation with the Government of Sudan, UNICEF was able to respond to the humanitarian needs of over 350,000 new IDPs, returnees and other conflict affected people in Darfur, South Kordofan, Abyei, Blue Nile, White Nile, and Khartoum states with lifesaving improved water supply, sanitation and hygiene facilities.

In 2011, the programme prepared 65 Child Friendly Communities under CFCI project for the implementation of integrated packages of services including immunization, safe water, primary education and primary health care interventions. In these communities, UNICEF works with WFP, UNDP, UNAMID, WHO, USAID, and NGOs and communities themselves to plan and implement programmes in the spirit of partnership. In seven States, several NGOs are also mobilized around basic infrastructure, building awareness and motivation among people.

Knowledge Management

Fully met benchmarks

UNICEF contributes to the development and completion of the Education Management Information System [EMIS], which is crucial to develop an information base for planning and for financial advocacy. UNICEF has commissioned a secondary education survey to be completed in December 2011 and it has published reports on the feasibility of e-learning technologies in Sudan. It coordinates and visualizes NGO education activities in States affected by conflict. UNICEF Education Section contributes to knowledge sharing for improved emergency education through its leadership role in the education cluster.

Best practices for optimal PMTCT services uptake are shared across states and within the same state. In addition, programme staff members from other States were invited to learn from North Kordofan's model of state level coordination of social protection for families affected by HIV/AIDS. UNICEF's HIV/AIDS programme contributes to knowledge sharing for improved HIV/AIDS programming through its participation

in various national knowledge exchange forums, particularly the UN HIV/AIDS theme group, the UN Joint Team on HIV/AIDS, and the HIV sub-committee CCM and PMTCT technical working groups. The HIV/AIDS programme staff members have also been active in the HIV & AIDS community page on intranet.

As a comprehensive youth programme in Sudan has been lacking so far, knowledge development and sharing in youth programming is one of the key components of the Youth LEAD project. The donor (CIDA), UNICEF, and the MoYS are all interested in establishing a youth programme model that can be scaled up nation-wide (from the project's 3 focus states) and applied in other post conflict settings. Four salient features of this programme model would be youth participation, equity, gender, and environment under the overarching goal of conflict prevention. A significant amount of funding has been set aside to document, analyse, publish, and share the details of processes of youth participation and different methodologies such as Appreciative Inquiry and Innovation Labs.

The Sudan Household Health Survey (SHHS-2) has provided new State-level data on children and women. The CFCI-Info database was officially launched in nine States in 2011. This system helps the communities and their partners with necessary data. The Higher Council for Decentralized Governance, coordinating body for CFCI activities is getting government clearance to have one single CFCI web-based database for the whole country. DevInfo User and Administration training was conducted for staff of the Central Bureau of Statistics in all 15 States. Work is ongoing on linking SudanInfo with WASH and CFCI databases.

The WASH programme organizes mid-year and annual review meetings with one day dedicated for sharing information and lessons learnt from within the country and abroad on emerging issues. The website www.WES-sudan.org has been established which provides a wide range of information on WASH including technical guidelines and policy and strategic planning documents. Additionally, the WES database management system is operational with different functionality stages at National level and 14 states. It is anticipated that reporting for progress on implementation could be fully extracted from this database by end of 2012.

Human Rights Based Approach to Cooperation

Mostly met benchmarks

Even as Female Genital Mutilation was outlawed in two States this year, there is recognition that legislation to protect children has only a limited impact if social acceptance of violence against children and women continues. The "Saleema" campaign has shown promise not only on influencing the social norms relating to practice of female genital mutilation/cutting, but also in engaging dialogue to help bridge the gap between child rights discourse and the socio-cultural perceptions and imaging of girls in communities.

For improved Government spending in education, the Education Section advocates for an increase in allocations, and investment into child-friendly school infrastructure and services. In 2011, the Education Section supported construction of child-friendly school facilities, and services that meet the basic needs of children. It conducts surveys on secondary education quality, in order to support Government efforts for strengthening secondary education, and is also assisting the Government to integrate a children's rights approach into the upcoming five-year Education Sector Plan. In addition, it advocates for the rights of children with special needs and supports activities and projects aiming at ensuring their access to education. UNICEF has launched a youth empowerment programme to provide health-related life skills. The same programme also contains a vocational training component. The Education Section facilitates INEE training, and psychosocially conducive training for children affected by conflict and war. To promote access to education for out-of-school children and youth, the Section is implementing an Alternative Learning Programme strategy. Suited to youth needs and level of academic development, this programme provided literacy, numeracy and life skills for over 1.9 million out-of-school children and youth (60% female).

The HIV/AIDS programme promotes human rights in relation to the HIV epidemic. The programme targets those who are most vulnerable to HIV/AIDS with a comprehensive package of prevention and support services whereas the general population is targeted through mass media. In addition, while most HIV interventions in Sudan focus on the States with a high prevalence rate, UNICEF programme targets the most vulnerable in every State. However, the rights-based approach to HIV programming is limited by donor conditions that require targeting specific geographical locations and a lack of funding for UNICEF core programming areas in HIV/AIDS, particularly in regards to the protection of children affected by HIV/AIDS.

The UNICEF WASH section advocates a prioritization process for selection of localities within States and communities within localities using access to WASH services, population density, conflict areas etcetera as indicators thereby enabling the project to realize its aim of providing WASH services to unserved vulnerable population. Furthermore, the participatory approach adopted in preparing the Community Action Plan helps to identify less privileged and left out families who need to be supported with WASH interventions on an equal share basis. The newly developed WASH policy and National and State level strategic plans have been developed using human right-based principles.

Gender

Mostly met benchmarks

UNICEF encourages gender equality based education programming and policy. UNICEF has introduced UNGEI to the Federal Ministry of Education, which now leads efforts to ensure gender equity is achieved especially in rural and inaccessible areas such as Nomadic communities and IDP camps. UNICEF advocates for more girls to be enrolled in grade 1 and for them to have access to safe learner-friendly classrooms. Due in part to UNICEF's advocacy and project support, the school completion rate for girls in school increased to 30% by 2011. There has also been an increase in the transition of girls in nomadic and other special population groups from primary to secondary schools. More girls participate in extra-curricular student club activities, including community education on child rights, health, and hygiene education.

As part of the Humanitarian Work Plan preparation, gender equity-based rating of project sheets for CHF allocation was introduced among all partners. The WASH programme, for example, has a built in mechanism to address gender equity which includes (1) Segregation of WASH facilities especially for schools and health centres for boys and girls, men and women; (2) Proper siting of WASH facilities in IDP locations to avoid the possibility of violence against women and girls during water collection or when using latrines; (3) The inclusion of gender issues as built-in package at community level training activities; (4) An emphasis on equal membership and participation in VHCs for planning, implementation and management of WASH facilities; and (5) Encouraging women to take roles of WASH technicians such as pump operators, hand-pump mechanics, masons etc., which may provide additional income as well as break gender occupational stereotypes.

The HIV/AIDS programme promoted male involvement in PMTCT through advocacy and invitation for men to test for HIV during their spouse's pregnancy and provide support in case of a positive test, and more importantly, in case of discordancy of test result. In addition, UNICEF's HIV/AIDS programme component supported the National AIDS programme to assess women aged 15-49 for HIV knowledge as a complement to SHHS 2010. This additional data shed more light on HIV awareness, risk and vulnerability of women, and will guide future programme design and implementation.

Environmental Sustainability

Mostly met benchmarks

UNICEF aims to integrate environmental education and awareness components into its education programmes and school curricula. Components for inclusion include deforestation and sustainable use of natural resources; improved animal husbandry practices; water conservation management; and improved general environmental awareness. UNICEF ensures environmentally sustainable construction and procurement for the construction of schools and education facilities. Tree planting is a common feature carried out in schools and garden spaces. School gardening projects have the additional advantage of becoming a school feeding resource, income generation opportunity and environmental awareness-raising instrument.

Proper waste disposal is very well observed in the PHC interventions especially EPI programme. Solar panels and solar refrigerators were provided to partially replace old electricity refrigerators for storing vaccines and essential drugs.

In designing WASH facilities, the following environmental protection measures are taken into consideration: (1) groundwater depletion due to over pumping, (2) limited aquifer recharging capacity especially during below average rainfall periods; (3) overuse of scarce materials such as wood in arid areas for construction of WASH facilities leading to deforestation; and (4) pollution of water sources due to open defecation and close proximity of sanitation facilities such as latrines, improper garbage and waste water disposals.

South-South and Triangular Cooperation

The UNICEF Education Section is currently negotiating a new funding agreement with the Government of South Africa. The project's objective will be to contribute to the achievement of the Millennium Development Goals 2 and 3 and towards gender equality and empowerment of girls in the Eastern part of Sudan. The Government of South Africa has committed itself to contribute to agreements reached as part of the Eastern Conference held in Kuwait in 2011 where many non-traditional donors committed to supporting the people of Sudan. The Education Section will play a critical role in implementing this project and will support efforts to foster South-South cooperation.

UNICEF, in collaboration with UNAIDS, also facilitated the participation of one youth HIV prevention peer educator from South Darfur to the UNAIDS led youth leadership summit on HIV/AIDS in Mali in April 2011. This participation aimed at giving this youth volunteer and leader in her community on HIV prevention an opportunity to learn from other peers from African countries and apply the knowledge in Sudan.

Country Programme Component: Health and nutrition

PCRs (Programme Component Results)

PCR	EQRank	OTDetails
By 2012, U5 Mortality rate reduced from 112/1000 live births in 2006 to 60/1000 live births and Maternal Mortality Ratio reduced from 638 per 100,000 live births in 2006 to 201 per 100,000 live births	3	FA1OT4
National and sub-national policies, systems and human resource capacity strengthened to ensure access of children and women to essential health services and in the case of emergencies to life-saving interventions	3	FA1OT10

Resources Used in 2011(USD)

Resource Type	Planned for 2011 (as per CPAP ceiling)	Allocated in 2011	Estimated Year-End Expenditure	%Spent (4)/(3) * 100
OR-E	17400000.00	24499041.00	21039097.00	85.88
OR-R	8900000.00	11533338.00	9852876.00	85.43
RR	755000.00	446001.00	512215.00	114.85
Total	\$27,055,000.00	\$36,478,380.00	\$31,404,188.00	

Results Achieved

A Polio-free status has been maintained in Sudan since March 2009. Some 90% of children under-one year of age received 3 doses of penta, and Sudan introduced Rota Virus vaccine in its routine immunization programme. Coverage of Integrated Management of Childhood Illness (IMCI) has also increased from 42% to 53% and localities implementing community IMCI has doubled giving a national coverage of 57%. Access to skilled assistance at delivery increased to 73%. Measles and Diphtheria outbreaks were timely and effectively addressed. About 95% of U5 children totalling 6 million were provided with Vitamin A supplementation through twice a year child health days. Community management of acute malnutrition has been rolled out to nine States and a further 66 care centres were opened during 2011 treating 66,373 children with Severe Acute Malnutrition (SAM). In 2011, a further three States have passed universal salt iodisation laws and the breast milk substitute code is awaiting signature by the President. Additionally the national five-year strategy plan (2012 – 2016) has been developed.

Most Critical Factors and Constraints

The high level of Government's political commitment towards child survival and development is not yet translated adequately to government allocated budget. Moreover, there is a high turnover of staff. Management of health information system is deficient making programme management a real challenge. Nutrition remains a low priority for Government and the capacity of FMoH to plan and implement nutrition interventions remains limited. There is insufficient communication for development support. Access to some populations affected by conflicts remains poor and the phasing out of some INGOs especially those providing CMAM and basic child health services has further worsened the situation.

Key Strategic Partnerships and Interagency Collaboration

In 2011, special importance was given to strategic partnerships with some UN Agencies (WHO, UNFPA,

UNDP, WFP), National and International NGOs, Civil Society Organizations, and the Federal as well as States' Ministries of Health. UNICEF health programme has contributed effectively to the expansion of maternal and child health services in Sudan. The SCO participates in all higher level and technical meetings for health related issues. In addition, it has continued to actively participate in all the activities of the health cluster, which includes more than 35 NGOs, CSOs and UN agencies. In Darfur and other conflict affected areas, the health programme is mainly implemented through partnerships with national and international NGOs. A joint UNICEF - UNDP malaria project is currently being implemented in IDPs camps in Darfur and Khartoum State as part of the Global Fund Round 7. On the other hand, UNICEF complements the international contribution of GAVI and WHO in the area of vaccine preventable diseases through an exceptional contribution to the National Programme on Immunization (EPI). Partnerships with key donors and bilateral development partners have been strengthened to secure more funds for the programme and to prevent overlapping of interventions on the ground.

Humanitarian Situations

In Greater Darfur, there are still more than 1.8 million IDPs who are in need of continuous health services. In addition, the access to those services has been further reduced by the departure of many international NGOs during 2010 and 2011. The recent wave of violence in South Kordofan and Blue Nile complicated the situation further resulting in the displacement of over 200,000 people, most of whom still need humanitarian assistance. UNICEF has worked closely with partners in the conflict-affected areas to improve access to primary health care services through provision of essential drugs, other related supplies and equipment as well as technical and logistic support. Timely and effective response was also made to two disease outbreaks, measles and diphtheria. Lack of or limited access to health services continues to have adverse impact on all beneficiaries (men, women, boys and girls). In particular, pregnant women and under-five children (both boys and girls) including newborns will be at a higher risk of morbidity and mortality than other groups.

Summary of Monitoring, Studies and Evaluations

A team of 15 nutrition specialists and workers were trained, including representatives from Federal and State Ministries of Health, UNICEF, FANTA II and various NGOs. Training was carried out in September 2011, with support from Kassala State Nutrition Directorate. Additionally, a method for investigating the causes of malnutrition was trialed. This was the first time such a method had been used, and the aim was to develop a simple rapid method for giving reliable quantitative as well as qualitative information as to location-specific causes of malnutrition. Results from the assessment showed that coverage of current and recovering SAM cases in the locality surveyed population was below the Sphere minimum standards for rural areas (of 50%) at 30.3%, largely due to the poor geographical coverage of CMAM services (just 20% of health facilities in the locality were found to be offering CMAM) and poor community participation. Key results from the malnutrition causal analysis showed that the risk of malnutrition was higher for those children who had suffered from fever and diarrhoea in the 2 weeks prior to the assessment, and that delaying the introduction of fluids other than breast milk to infants less than 6 months had a clear protective effect against malnutrition. The results are being used to improve CMAM services across the country, including strengthening community participation and fund-raising for a greater rollout of CMAM services.

A knowledge, attitude and practice survey on infant and young child feeding was conducted in four selected States (Khartoum, South Darfur, South Kordofan and Gedaref) in early 2011. The study aimed to identify locally appropriate feeding recommendations and solutions to barriers, and to develop a set of recommendations to promote doable actions. Key results found that grandmothers are major influencers of breast feeding practices, and the 4 most common reasons as reported by mothers in all selected States, for discontinuing any breastfeeding early are (in order of frequency of reporting) new pregnancy, poor health of the babies, sickness of the mothers and not enough breast milk. This information has been used to tailor training and support given to mothers in the increased IYCF activities carried out in 2011.

An assessment of breastfeeding knowledge of health professionals was carried out in South Darfur in order to identify if skilled support exists for common breastfeeding difficulties in South Darfur as required under SPHERE and IFE operational guidance. The study found that while knowledge on key breastfeeding recommendations was moderate, knowledge on the dangers of infant formula, infant feeding recommendations in an HIV context, and knowledge on the benefits of skin-to-skin contact were poor. The promotion of breast-milk substitutes through the health care system further undermines the confidence of women in their ability to produce sufficient breast milk and discourages them from exclusive breastfeeding further undermining other interventions to improve exclusive breastfeeding rates. More attention should be given to the provision of appropriate support to breastfeeding mothers in emergency situations in South Darfur including appropriate support in health facilities as required under SPHERE and IFE operational guidance.

Future Work Plan

Through variety of community and facility-based interventions, priority support will be directed to reduce under-five child mortality with special emphasis on reduction of neonatal mortality. Contributing to this will be the scaling-up at national level of community based treatment for severe acute malnutrition, as increased funding allows. Special emphasis will be placed on on-job training, monitoring and supportive supervision to improve quality of services delivered. Reduction of maternal mortality will be on top of UNICEF's agenda. Emphasis will be directed towards expanding and improving quality service delivery, increasing provision of integrated basic health service package from the current estimated 19% to 50%; improve the quality and equity in health service coverage in particular through reducing geographic, urban/rural, gender and socioeconomic inequalities; and remove barriers to access health services.

Country Programme Component: Water and environmental sanitation

PCRs (Programme Component Results)

PCR	EQRank	OTDetails
Access to adequate sanitation facilities increased in rural and most vulnerable areas by 1.0% resulting in providing new access to 0.34 additional people; and sustained access to safe means of excreta disposal for 0.3 million people; and knowledge on adequate sanitation, hygienic practices and household water safety reached and sustained for 5.0 million rural and emergency affected population.	3	FA1OT12
Access to improved drinking water sources increased by 3.0% between 2011 and 2012 in rural and most vulnerable areas by providing new access to additional 0.70 million people; re-establishing access to 0.38 million people; and sustained access to improved water sources for 2.0 million people affected by conflict emergency, natural disasters and epidemics outbreak.	3	FA1OT12
Development, approval and implementation of WASH policies, strategies and technical standard guidelines and manuals to support emergence of a comprehensive and coherent water and sanitation programme, and building of human and institutional capacities and strengthening of MIS at the different levels for coordination, planning and implementation of sustainable WASH interventions in 2011 and 2012.	2	FA1OT10

Resources Used in 2011(USD)

Resource Type	Planned for 2011 (as per CPAP ceiling)	Allocated in 2011	Estimated Year-End Expenditure	%Spent (4)/(3) * 100
OR-E	10731000.00	14607438.57	11259273.90	77.08
OR-R	7191000.00	3716116.69	2029044.62	54.60
RR	392000.00	358846.74	358846.74	100.00
Total	\$18,314,000.00	\$18,682,402.00	\$13,647,165.26	

Results Achieved

The WASH programme in 2011 focused on the Equity Approach. For improving access to WASH services to underserved, the programme had to reach insecure areas and provide crucial WASH services for conflict-affected populations in the Darfur region and the 3 transitional areas targeting IDPs, returnees, host communities and the nomadic population. For the third successive year, there was no cholera case reported in 2011, as a result of good EPR plans and timely prevention interventions undertaken before, during and after the rainy season in all high-risk areas. This was done in close collaboration with Health, Nutrition, and Communication sectors.

Additionally, the WASH programme achieved the following:

- 115 vulnerable rural and emergency affected communities for WASH interventions were identified, their needs assessed and Community Action Plan (CAP) prepared.
- 717,000 vulnerable people have access to improved drinking water from new and rehabilitated water sources.
- 11,600 additional school children and staff in 29 schools, and 27,200 additional school children and staff in 68 schools have increased access to water supply and sanitation respectively. In addition, school hygiene clubs were established and trained in 59 basic schools.
- Staff and visitors in 4 health facilities have increased access to improved drinking water supply, and in 22 health facilities to improved sanitation.
- 21 communities in the rural areas were declared open defecation free (ODF) wherein at least 80% of the families residing in these communities have built household latrines and are using them.
- WASH programme organized World Water Day and a special Global Hand-Washing Day celebration in cooperation with private sector for the first time that generated a new visibility and endorsement for the celebration in terms of increased level of participation and financial support for the sector.
- Capacity of 3,879 community members from the targeted communities was strengthened in planning, implementation, hygiene education, management and operation and maintenance of water and sanitation services.
- WES database is regularly updated in 7 focus States and two GIS/database training courses were conducted to enable the users to use considerable important customized user-friendly GIS analysis and mapping tools.
- Capacity of around 930 sector partners at National and State levels was strengthened on hygiene promotion, CATS approach, KAP studies, computerized inventory database, use of GIS tools, emergency planning and response, water quality monitoring, and WASH MIS. Besides, six sector partners attended African-3 Conference in Rwanda for exchange of experience and to learn from other participants for scaling up sanitation.

Most Critical Factors and Constraints

- WES structure is perceived as a project based instead of programme based structure and therefore there is no regular funding from Government. As a result, the WASH programme is heavily dependent on funds mobilized by UNICEF, which is a major challenge. During 2011, Government funding further dropped to 15% level of UNICEF funding.

- UNICEF funding in 2011 decreased substantially in comparison to previous years resulting in limited funding for Gedarif and North Kordofan states, which has affected the overall programme achievements.
- Although the community action plan approach derived from CATS has made very good progress for scaling up sanitation in many States, capacity and willingness to adopt the approach nationwide has been limited and could not be fully operationalized.
- Insecurity and limited access in Darfur and transitional areas (South Kordofan, Blue Nile and Abyei) continued to be a major issue during the year, which had important implications for programme delivery.

Key Strategic Partnerships and Interagency Collaboration

UNICEF in collaboration with UNAMID supported MoIWR in organizing the Darfur conference on “Water for sustainable peace” held in June 2011 in which more than 500 water experts and high level officials (Government, Donors, UN and other international organizations) participated pledging over USD one billion for 65 projects promoting stable and equitable water service systems for all Darfur states. The WASH projects represent about 75% of the total projects. Among those making the pledge are: Government of Sudan (\$216 million over six years), the Arab League (over \$100 million for six years), UNICEF (\$23 million annual expenditure on WASH projects), The Islamic Development Bank and African Development Bank, as well as representatives of Turkey and Japan, indicated their interest in supporting the endeavour as did United Kingdom and the United States.

An IWRM project is jointly implemented with UNEP in Darfur since 2009 based on a 2-year MoU, and it will be further extended for another 2 years.

Humanitarian Situations

- UNICEF as sector co-lead has strengthened WASH sector coordination with full-fledged coordination of humanitarian response (HR) structure at Khartoum and three Darfur states, resulting in improvement in joint assessment and monitoring; better data collection, analysis and sharing; and development of strategic humanitarian work plans.
- Contingency preparedness and referendum related plans were prepared in 2011 and UNICEF as WASH sector lead prepositioned and managed WASH core pipeline supplies, which were instrumental in responding to immediate WASH needs when conflict broke out in the transitional states and also for immediate WASH needs for returnees (To and from South – North) in White Nile and Khartoum states.
- As part of preparedness 70 participants from WASH sector partners and government officials from Sennar, Red Sea, White Nile, Blue Nile and Khartoum states were trained in emergency preparedness and response and some of the trained participants were involved in planning and responding to the crisis in Blue Nile states.
- UNICEF supported and sustained water supply for about 2.0 million IDPs, returnees and host communities by supporting chlorination of water supply and providing spare parts and fuel for operation and maintenance of water systems.
- Access to means of excreta disposal was increased, re-established or sustained for about 300,000 IDPs, returnees and host communities including school children.
- Over 4.0 million rural and emergency affected people were outreached with WASH messages and these also included schools and health centres.
- About 400,000 flood affected people in White Nile, Sennar, River Nile and Red Sea states were assisted with lifesaving water supply and about 60,000 benefitted from improved sanitation services.
- Over 3,000 community, Government and sector partners’ staff were trained on various aspects of water supply, sanitation and hygiene and in management of WASH systems.
- UNICEF has assisted a total of 32,000 people of South Sudan origin awaiting at 7 transit points in Khartoum and Kosti to return to South Sudan by providing adequate water and sanitation services consisting of water trucking, installation of water tanks, treatment units, distribution points, emergency latrines and rehabilitation of existing toilets and bathing facilities and hygiene promotion.

- Owing to the nature of new displacements, returns, flood and/or drought recovery in northern Sudan, UNICEF worked closely with all partners to ensure contingency planning and early recovery initiatives were well integrated into the planning cycle.

Summary of Monitoring, Studies and Evaluations

- WASH programme has undergone in 2011 a major evaluation exercise that covers the period from 2002-2010. Preliminary results were received from the consultancy firm. Final evaluation report is expected by January 2012. The results of the evaluation will guide WASH on how to improve its policies, approaches and performance.
- Around 450 monitoring visits were carried out by UNICEF and WES counterparts at federal and state level to assess the programme's progress and performance.
- The 2011-2016 WASH Strategic Plans for fourteen states were finalized and the draft for National level plan prepared, which is under finalization. These plans will be used to guide the WASH interventions in the coming 5 years.
- WASH State 2011. fact sheets were prepared and are being used to reflect the status of water and sanitation services' coverage of children in the different states of Sudan.
- WASH has completed a study to survey El Fasher existing water supply system and to survey and prepare a feasibility study for extending El Fasher water system to Abu Shouk and El Salam IDP camps.

A report analysing the WASH component of 2010 SHHS was prepared and shared with the National Committee SPECIFY COMMITTEE FOR WHAT. IF A NATCOM, INDICATE OF WHICH COUNTRY. The analysed SHHS results will help WASH sector partners in identifying the real situation with regard to water and sanitation services and in taking informed decisions for the future WASH interventions.

Future Work Plan

With the Government of Sudan (GoS) and UNICEF posited to enter into a new programme of cooperation for the period 2013-2016, the coming year (2012) will be a transition year to make a programmatic shift that could be applied for the new cooperation as follows:

- Translating newly developed WASH Policy into action and using the Strategic plan prepared by each state as basis for 2012 AWP targets developed with Government backed planning and budgeting
- UNICEF support to be used more for advocacy, capacity building and setting examples (models) for scaling up to cover all states
- Promoting packaged approach of WASH interventions (with school as entry point and community action plan as prerequisite for WASH interventions) for better ownership and sustainability.
- Redefining emergency components and approaches as stepping stones towards sustainable development. For 2012, key areas where humanitarian support in WASH would be needed can be categorized as (1) Darfur - Chronic Emergency (2) Emergency due to conflict in transitional areas (3) Support for returnees North to South and South to North in White Nile/Sinnar/Khartoum and (4) Support for the Drought and Flood affected Eastern and Northern states.
- The cluster/sector coordination should be focused to issue based rather than Sudan based It is proposed to work out a formula on severity of the problem translated into percentage among issue based areas for example Darfur chronic emergency (50%), Transitional areas (25%), Returnees (15%) and Drought/Flood (10%). Once severity percentage is determined, the coordination to be decentralized at the problem level, which will reduce the number of partners that needs to be dealt as only those partners who have potential for supporting, will participate instead of 44 partners that we have to deal with it.

Based on the above strategic shift, WASH programme will have three components and five intermediate results as follows:

[table converted to list]

- Component| Intermediate result
- C1: Access to WASH services to vulnerable population based on equity and commitment for MDGs| IR-1: 600,000 additional rural vulnerable people from 450 communities including school and health facilities have increased/re-established access to safe drinking water supply and improved means of excreta disposal (UNDAF output # 4.3.1).
- C2: Humanitarian support for sustained access to WASH services and outreach on key WASH messages | IR-2: One million and 400,000 emergency affected population especially in IDP locations have access to improved drinking water supply and improved sanitation facilities respectively (UNDAF output # 4.3.1). IR-3: 6 million rural and emergency affected population outreached with key WASH messages (UNDAF output # 4.3.1).
- C3: Advocacy and capacity development on WASH related floor of rights | IR-4: WASH sector policy, strategic plans and technical and training guidelines and manuals are prepared/operationalized, and capacity of sector partners in planning, monitoring, evaluation, and reporting of WASH programme strengthened at National/state levels (UNDAF output # 4.4.1, 4.3.5) IR-5: WASH sector coordination for humanitarian assistance at Federal, Area and State levels strengthened to enhance coherence, predictability, effectiveness, national capacity and impact of WASH programme. (UNDAF output # 4.4.3)

Country Programme Component: Basic education

PCRs (Programme Component Results)

PCR	EQRank	OTDetails
Access and quality of basic education in child friendly learning environments, enrolment and retention improved for 2.7 million vulnerable children and youth (50% girls) among whom one million are out of school children and youth.		2 FA2OT3, FA2OT4, FA2OT5, FA2OT6, FA2OT7, FA2OT9
Education system, policies, human resources and institutions are developed; effectively facilitating enrolment, participation, learning and completion of basic and secondary education for children and youth - girls & boys		3 FA2OT3, FA2OT7, FA2OT9

Resources Used in 2011(USD)

Resource Type	Planned for 2011 (as per CPAP ceiling)	Allocated in 2011	Estimated Year-End Expenditure	%Spent (4)/(3) * 100
OR-E	4938000.00	3670427.66	2654106.26	72.31
OR-R	5705000.00	15178603.02	6605649.87	43.52
RR	330000.00	227373.54	227373.54	100.00
Total	\$10,973,000.00	\$19,076,404.22	\$9,487,129.67	

Results Achieved

Policy and Planning

UNICEF has supported and strengthened capacity of the Federal Ministry of General Education (FMOGE) and the 15 State Ministries of Education in policy development, planning, monitoring and evaluation. Some 170

GoS planners have been trained through joint IIEP and World Bank training workshops. UNICEF has taken on the responsibility to enhance Education Management Information System (EMIS) capacity in the States, which will strengthen education sector planning and education advocacy. Nine out of 15 States have completed their EMIS data collection processes.

The use of the State of Sudanese Children (SOSC) report and its ensuing advocacy workshops at the state level to highlight disparities among and within states will support such decentralized advocacy. At the federal level, the SOSC will be used as an advocacy tool by the National Council for Child Welfare vis-à-vis the President's cabinet and the parliamentarians to bring light to the disparities based on the analyses of a wide range of information made available by different government bodies. In the area of human rights, SCO is introducing the Floor of Rights programme component which is based on the concept of the Social Protection Floor Initiative, to advocate for the reduction of disparities with the following objectives:

- Reduction of U5MR
- Reduction of maternal and neonatal mortality by focusing interventions during the 9 months before and after the delivery (18 critical months)
- Reduction of the number of children and youth out of school
- Provision of enabling and protective environment for children such as ban on FGM/C and child act enactment

Access to Basic Education:

Among the key achievements, 381,037 children (44% girls) (including Nomads and IDPs) were supported and enrolled in Grade 1. A total of 485,624 children (44% girls) will have benefited from education supplies provided by UNICEF. The UNICEF/FMoGE intervention to support Nomadic Communities has also contributed to 45,287 nomadic children (39.8% girls) accessing basic education. Some 5036 nomadic children (32% girls) transited from primary to secondary schools in 2011. By the end of 2011, 74 classrooms will have been constructed, 152 will be close to completion, and 257 classrooms will be rehabilitated.

Education Quality:

UNICEF advocates for child-friendly schools and learning environments, and has provided funding to make 780 schools child-friendly, to train 50 government staff on how to monitor for child-friendliness of government schools, and to train 4680 teachers (51% women) as well as 230 teachers on child-friendly pedagogies and national curriculum. These efforts pale, however, in consideration of thousands of additional teachers and untrained volunteer teachers that must be trained to cover the current teacher gap.

Out-of-School Education:

UNICEF has assisted the GoS in completing the out-of-school education assessments, has finalized the out-of-school education strategy, and has developed and printed an alternative learning curriculum as well as textbooks. It has also assisted the GoS in reaching out to 91,000 out-of-school children and youth.

Most Critical Factors and Constraints

- **Policy and Planning** In 2011, 9 out of 15 States completed their EMIS data collection processes. These achievements notwithstanding, more efforts are necessary to empower State Ministries to produce education plans that meet international standards and thus persuade donors to contribute to investments in Basic Education in Sudan. This requires a more thorough coaching, mentoring and monitoring system to ensure timely delivery of planning outcomes.

- **Access to Basic Education**

UNICEF completed only 50% classroom construction and rehabilitation assignments on time, and experiences difficulties in ensuring quality control and speedy procurement of works. Efforts are required to persuade State Governments to shoulder more responsibility for non-salary related education expenditures, and in particular textbook printing as well as distribution. The SCO intends to help the government to find

cost-effective pre-school and early child hood solutions, by elevating access to solid basic education systems.

- **Education Quality:**

Quality of education is hampered by chronic lack of textbooks. Neither UNICEF nor the GoS have the means to address this challenge. The national curriculum needs to be made more suitable to enhance Sudanese children's employability, given the emerging needs of Sudanese children in a world of rapid scientific and technological advancement. The SCO and other UN agencies need to engage in this area and assist the GoS in developing an effective and efficient secondary education system. Secondary school curricula must be revised in order to build skills needed by modernized Sudanese economy sectors.

- **Out-of-School Education**

Despite successful completion of out-of-school education assessments, the finalization of an out-of-school education strategy, and the development and printing of an alternative learning curriculum as well as textbooks, UNICEF has fallen short in reaching out to 140,000 out-of-school. Increasing access for vulnerable children such as children with disabilities, nomads, street children, working children, and children in the under-served rural and conflict areas such as Darfur continues to be difficult. UNICEF will have to attract funding for bringing a total of 1.9 Million children and youth back into school.

Key Strategic Partnerships and Interagency Collaboration

The UNICEF Education Section is currently negotiating a new funding agreement with the Government of South Africa. The project's objective will be to contribute to the achievement of the Millennium Development Goals 2 and 3 and towards gender equality and empowerment of girls in Eastern part of Sudan. The Government of South Africa has committed itself to contribute to agreements reached as part of the Eastern Conference held in Kuwait in 2011 where many non-traditional donors committed to supporting the people of Sudan. The Education Section will play a critical role in implementing this project and will support efforts to foster South-South cooperation.

Additionally, together with the Federal Ministry of Education, the World Bank, as well as Donor Agencies such as DfID, EU, CIDA and Swedish SIDA, UNICEF has developed a strategic alliance for the production of an education sector plan that will meet the requirements for successful solicitation to Global Partnership for Education funding in 2013. UNICEF receives funding from the following donors; European Union, and the Governments of Japan, Netherlands, Australia, Denmark, Italy, Norway and Sweden for education interventions. The UNICEF-led education cluster facilitates the distribution of emergency education funds. It consists of 25 national and international NGOs dedicated to education programming and implementation.

Humanitarian Situations

In 2011, 277,862 children from eight States affected by emergency received UNICEF education support (45% more than originally targeted). Accordingly, preparedness plans were updated and EPRP supplies prepositioned. Also, the programme led the education sector in developing Interagency Referendum Contingency Plan targeting 340,000 school age children in South Kordofan, Abyei, Blue Nile, Khartoum, North Kordofan, Sennar, White Nile and South Darfur. Materials worth USD 732,000 were procured with CHF funding support. UNICEF manages the Education Cluster, which coordinates emergency education interventions (worth USD 8.0 million in 2011) in consultation with 30 national and international education partners.

Emergency Response and Preparedness: Despite emergency interventions, it was not possible to fund durable community-owned education systems for competing IDP, Returnee, Nomadic and Host Community groups. With newly erupted conflicts in the Three Protocol Areas, and Darfur suffering from Donor Fatigue UNICEF will need to develop emergency strategies and attract emergency education funding that can be used to build durable systems while strengthening re-integration and community ownership

Summary of Monitoring, Studies and Evaluations

[table converted to list]

- **Title: Khalwa Survey (Informal pre-schools- education)**

Future Work Plan

UNICEF Education Section is committed to contribute to equitable access to and increased utilization of strengthened and quality basic social services within an enabling environment, with special emphasis on women, youth, children and vulnerable groups (UNDAF Outcome #4, Basic Services). UNICEF will increase and facilitate equitable access to, and completion of, quality education in learner-friendly environments, and support Federal and State Education Ministries' efforts to strengthen policy analysis, educational planning, sector coordination, budgeting, monitoring and reporting.

By the end of 2012, the development of the Education 5-year strategic plan will have been developed and co-funded through increased government investment and coordination with donors. Sudan's application process for the Global Partnership for Education (GPE) will have been finalized. Education for children with special needs, ECD and teacher training strategies will have been developed, and the girls and nomadic education plan will have been reviewed. The Minimum Standards for CFS will have been revised for schools in Sudan, the status on child-friendly schools will have been assessed, and CFS materials will have been distributed. Additional 157,000 emergency-affected children will gain access to quality life-saving education opportunities and basic formal education (especially girls, children affected by conflict, returnees, nomads, former child soldiers, children with special needs, OVC etc.). A total of 361,000 children will enroll in grade 1. Some 7,700 nomadic children (30% girls) will receive assistance to transit from primary to secondary education; 88,000 children (50% girls) will have increased access to improved learning environments in 1,231 established and rehabilitated learning spaces/classrooms with seating arrangements and sanitation facilities; 208,000 out-of-school children enrolled in alternative learning will gain improved education opportunities through the distribution of educational materials; 2,051 ALP facilitators will be trained and shall have increased their skills and knowledge on alternative education and management in ALP centres; 400 schools will have been transformed into child-friendly schools meeting CFS curriculum standards, benefitting approximately 100,000 children; 3,535 qualified and unqualified teachers will have been trained on child-centred learning methods, core-subjects, CFS concepts and standards, gender-sensitive life-skills, special needs education and peace building. UNICEF will lead the education cluster and train partner agencies in INEE minimum standards for education in emergencies.

Country Programme Component: Child protection

PCRs (Programme Component Results)

PCR	EQRank	OTDetails
Families and communities are better informed and empowered to protect children and youth from abuse, violence, exploitation, harmful practices and the effects of conflict.	3	FA4OT3, FA4OT5, FA6OT1
Increased access to services and systems to protect children from violence, abuse, exploitation, neglect and the effects of conflict	2	FA4OT8, FA4OT2, FA4OT4
National legislation, policies and procedures are in place to prevent and respond to violence, exploitation and abuse of children	3	FA4OT3, FA4OT5, FA4OT7

Resources Used in 2011(USD)

Resource Type	Planned for 2011 (as per CPAP ceiling)	Allocated in 2011	Estimated Year-End Expenditure	%Spent (4)/(3) * 100
OR-E	5570000.00	3738148.46	3654792.88	97.77
OR-R	2838000.00	8013947.27	5602547.58	69.91
RR	410000.00	351619.79	351619.79	100.00
Total	\$8,818,000.00	\$12,103,715.52	\$9,608,960.25	

Results Achieved

In order to protect separated and unaccompanied children in the post-secession period, UNICEF supported the establishment of the Family Tracing and Reunification system between Khartoum and Juba and the related signing between the two Governments of Sudan and South Sudan of a Memorandum of Understanding. A national network has been established with a central database and State Focal Points.

UNICEF advocacy contributed to the passing of State Child Acts in Red Sea and South Darfur, which include a ban on Female Genital Mutilation. In view of the lack of consistency in practice related to criminal cases involving children, UNICEF successfully advocated for a Circular instructing courts to use the Child Act (2010). In order to provide better care to some 110 babies that are abandoned every month in Khartoum alone, a national policy on children without primary caregivers was adopted and disseminated in five States.

Birth registration campaigns were organised in five States. In Gedarif, UNICEF trained 416 midwives and 430 community volunteers to cover birth registrations in all villages within the 12 localities. Also, 93 health cadres were trained to manage 125 registration centers resulting in the identification of more than 180,000 unregistered children below the age of 15 years as well as completion of birth registrations for about 168,000 children in Gedarif. In South Darfur, UNICEF helped to establish a multi-stakeholders forum to scale-up universal birth registration (UBR). This year over 500,000 people were reached with messages urging them to register children at birth through advocacy, social mobilization and multi media campaigns. Also, 350 midwives, health workers and statisticians benefited from capacity building activities. As result of these efforts, 750,000 newborn babies were registered at birth in different localities of South Darfur including IDPs camps and nomadic areas. In North Darfur, 1,338 children were registered as a direct result of UNICEF supported interventions.

UNICEF and the Safety and Access to Justice Programme trained more than 270 police officers and social workers to interact with children found in the streets and in contact with the law. This resulted in a sharp decline in the number of children in institutional care (from 400 to 20 just in one institution), and an increase in reunifications.

UNICEF support to on the job training and outreach activities for the Family and Child Protection Units in 11 States contributed to a significant increase in access to these specialised child friendly police services. In Khartoum State the number of cases increased from 3,026 in 2010 to 5,152 in 2011.

In order to combat female genital mutilation, UNICEF continued the replication of its "Saleema" campaign, resulting in additional 136 communities publicly declaring collective FGM/C abandonment. A reduction in FGM/C prevalence by 5% was noted in the Sudan Household Survey launched in 2011.

Some 358 teachers were trained to provide mine risk education in schools, and over 57,400 persons benefited from mine risk education.

Notably, 601 children associated with armed forces and groups were officially released. In total, 1,198 conflict-affected children benefited from inclusive reintegration activities over the course of the year.

Most Critical Factors and Constraints

Renewed conflict in Darfur and Three Protocol Areas, and unclear lines of command had major impact on the ability to monitor and respond to grave child rights violations, and support Child Protection interventions in conflict areas. All assistance that was pre-positioned prior to the conflict in non-government controlled areas has been exhausted. Another major concern is the use of landmines and unexploded ordinance by Parties to the conflict in the Three Protocol Areas, which continue to pose a serious threat to women and children, especially considering that some schools have been reported contaminated in South Kordofan and Blue Nile.

In 2011, humanitarian access deteriorated compared to 2010. Access has been restricted on several occasions, not only in areas of military operations but also, in areas of displacement or where stranded returnees are located. As a result, there are serious gaps in service provisions as Government counterparts or other NGOs did not have the resources and technical capacities to take over these activities. Child protection capacities and interventions in conflict and rural areas have been significantly affected, particular in terms of delivery of basic services such as health or education supplies as well as in terms of protection of children.

Traditional views related to gender and sexuality have tended to prevent open dialogue on protection issues related to girls. UNICEF engagement with progressive religious leaders has proved to be critical in breaking the ice and encouraging partners to address sensitive issues such as early marriage and stigmatization of unwed mothers. Following extensive advocacy, the Government has committed to develop and action plan on combatting child marriage in 2012.

The separation of South Sudan on 9 July 2011 and related returns have resulted in an increased number of separated and unaccompanied children. The amendments of the citizenship law and uncertainty about residency rights have increased vulnerability of children of Southern origin, particularly children deprived of parental care and members of mixed families.

Key Strategic Partnerships and Interagency Collaboration

In 2011, the Child Protection Sub-Sector had strategic partnership with key Government institutions and local non-governmental organisations to enforce the sustainability of projects for children affected by armed conflict and for children in contact with the law. Partners included the National and State Councils for Child Welfare, State Ministries of Social Welfare, National and State DDR Commissions, National Police, Judiciary, Security Arrangement within Transitional Darfur Regional Authority, Sudan Armed Forces. UNICEF also entered into partnership with a range of international and UN partners to implement its Child Protection programme, including UNHCR, UNDP, UNAMID, OCHA, and UNFPA.

Partnership with UNHCR as protection cluster lead has been increasingly valuable and essential, in particular in terms of joint advocacy (statelessness and separated-unaccompanied children), joint planning (Humanitarian Work Plan and Protection of Civilians WG) and protection tools development (protection monitoring tool, quarterly analysis). Further programmatic synergies are sought on cross border protection services and expanding protection monitoring to remote areas. The renewed partnership with UNHCR and Plan Sudan on enhancing birth registration is promising for further joint and coordinated interventions in 2012.

The collaborative partnership with UNFPA on FGM/C abandonment has proven its importance through a joint common programme framework, including joint funding, tools and advocacy incorporating all FGM/C partners of the two agencies.

The partnership with UNHCHR with regards to advocacy against death penalty proved effective as the sentence was rejected and the case has been reopened.

UNICEF along with UNAMID and UNMIS co-chairs the Task Force on grave child rights violations.

The Safety and Access to Justice Programme and UNICEF joint partnership on developing a Justice for children system, which encompasses the police, prosecutors, lawyers, judiciary and social welfare sector, in addition to community leaders, has increased the quality of interventions and ensured common capacity building of government partners.

Humanitarian Situations

The Child Protection Sub-Sector led the working group at the federal level and nine Child Protection Working Groups at the State level resulting in the development of common Child Protection tools (Child Protection State Work Plans, Child Protection assessment tool, CFSs Mapping and Minimum Standards, Child Protection 3Ws mapping and analysis).

About 50 inter-agency Child Protection needs assessments have been supported in critical areas (Kadugli, Abyei-Agok, Jebel Moon, West Jebel Marra among others).

MRM system is in place and four MRM Working Groups are active in Darfur States. Some 601 children associated with armed forces and groups were officially released. In total, about 1,200 conflict-affected children benefited from inclusive reintegration activities over the course of the year.

About 100 community-based Child Protection Networks were supported in conflict and displacement areas and common TORs developed.

In order to protect separated and unaccompanied children in the post-secession period, UNICEF supported the establishment of the Family Tracing and Reunification System between Khartoum and Juba and the related signing between the two Governments of Sudan and South Sudan of a Memorandum of Understanding. A national network has been established with a central database, standard operating procedures and forms, as well as State Focal Points. UNICEF has also signed an MoU with IOM for the transportation by air to the South of unaccompanied children for reunification purposes. As of December 2011, 165 children have been reunified out of 1,050 registered.

About 21,200 children are benefiting from Child Friendly Spaces (Minimum Standards endorsed by sector).

Mine Risk Education (MRE) campaigns have been carried out in most affected areas: 358 teachers were trained to provide mine risk education in schools, and over 57,400 persons benefited from MRE. Interagency Child Protection contingency plans were drafted at Federal level and by all 9 Child Protection Working Groups at the State level and activated in crisis situations.

The Child Protection Sub-Sector has trained about 200 UN-INGOs and Government partners from federal level and all States' Child Protection Working Groups on Child Protection in Emergencies (CPIE) in particular focusing on providing tools on data collection and information management (mapping, monitoring, analysis, reporting); Family Tracing and Reunifications; needs assessments; joint planning (including contingency planning).

Child safety in North-South movements was promoted through awareness-raising campaign reaching 90,000 households.

In 2011, the Child Protection programme component received USD 346,643 through CERF and USD 700,000 from the Common Humanitarian Fund.

Summary of Monitoring, Studies and Evaluations

As part of the Task Force on Monitoring and Reporting, UNICEF contributed to five Global Horizontal Notes; the 2009-2010 Secretary General's report on Children and Armed Conflict in Sudan; and his Annual Report. These have formed the foundation of our advocacy with armed groups and forces, and well as our programmatic response.

Future Work Plan

- Uniform implementation of five key components of Justice for Children systems: State legislative frameworks; birth registration; Family and Child Protection Units, Child Courts, and case management systems;

- Inclusive reintegration of children released from armed groups and forces;
- Strengthening the Monitoring and Reporting Mechanism for grave child rights violations;
- Implementing a social marketing and community mobilization campaign on Saleema;
- Awareness raising on early marriage and child sexual abuse;
- Child protection coordination in conflict affected States;
- Complete situation analysis on children with disability.

Country Programme Component: HIV/AIDS

PCRs (Programme Component Results)

PCR	EQRank	OTDetails
By 2012, 20% reduced HIV infections among children born to HIV positive mothers, reduced HIV risky behaviours among young people and 80% of women and children affected by HIV/AIDS have increased access to social protection services		3 FA3OT6, FA3OT1, FA3OT2, FA3OT4, FA3OT8

Resources Used in 2011(USD)

Resource Type	Planned for 2011 (as per CPAP ceiling)	Allocated in 2011	Estimated Year-End Expenditure	%Spent (4)/(3) * 100
OR-E	1339000.00	0.00	0.00	0.00
OR-R	658000.00	3728692.00	1596244.00	42.81
RR	450000.00	254887.00	253753.00	99.56
Total	\$2,447,000.00	\$3,983,579.00	\$1,849,997.00	

Results Achieved

The HIV/AIDS programme's goal is to reduce new HIV infections among children and young people through prevention of mother to child transmission (PMTCT) of HIV, young people's access to comprehensive knowledge on HIV/AIDS and social protection of children affected by HIV/AIDS.

Three main results were planned for 2011:

IR1: Increased capacity of Federal, States AIDS coordination and line ministries for planning, implementation and monitoring of National AIDS programme.

IR2: HIV transmission from mother to children is reduced through provision of a comprehensive package of HIV counselling to 450,000 and testing to 225,000 pregnant women, ART and follow-up care to 2,000 HIV positive women and social protection for their children and families.

IR3: 585,000 young people in-school and 1,455,000 out-of-school in 15 States of Northern Sudan have access to correct information attitudes and relevant skills and access to HIV services in order to reduce their vulnerability to HIV infection.

In 2011 the HIV/AIDS programme achieved the following results in relation to the results planned:

IR1: Capacity-building of national partners

In collaboration with WHO the new PMTCT guidelines have been finalised to enable quality PMTCT services provision. A KAP survey for women in reproductive age has been finalised and a survey on HIV risks was conducted among street children, orphans and displaced children. All these data will guide HIV prevention

activities. National AIDS programme staff have been trained at state level to conduct training of trainers on youth peer education. Some 30 NGOs were trained in HIV programming and 2,310 teachers were trained on HIV life skills curriculum. One international NGO and 5 national NGOs received financial support from UNICEF to implement HIV prevention activities.

IR2: Reducing paediatric HIV infections through mother to child transmission of HIV
PMTCT uptake is still low and this year a combination of advocacy workshops at federal and state level were conducted to raise awareness among health services providers. In addition a cascade of trainings was conducted to reach 998 doctors and midwives at 92 health facilities. As a result, the number of pregnant women counselled and tested for HIV rose from and 20,790 in 2010 to approximately 40,000 this year, and 216 positives received follow-up care. Extension of PMTCT services in rural areas enabled access for women in those areas.

IR3: HIV awareness raising among youth

Increased young people's access to HIV life skills training in school setting: an additional 2,310 teachers have been trained in 2,200 schools taking the total of trained teachers to 9,106, and 7,081 schools are implementing HIV life skills curriculum training.

Increased access for out of school young people to comprehensive HIV knowledge to prevent them from HIV infection: Approximately 753,000 young people in and out of school settings participated in education sessions on HIV.

To maintain a supportive parental and community environment that facilitates young people's behaviour change towards HIV prevention, the general population was targeted with continuous public information messaging through 130 radio and TV spots.

Most Critical Factors and Constraints

While the HIV/AIDS programme outreach covers a significant number of young people in schools and out of school, achievements in PMTCT and in support to children affected by HIV/AIDS are still inadequate. Approximately 7,766 HIV positive pregnant women are in need of PMTCT services every year in Sudan but 117 in 2010 and 216 in 2011 were reached. The main constraints are the availability of the PMTCT services at only selected health facilities predominantly in urban areas because of limited donor funding. Moreover, even at facilities where the services are established, staff turnover, high level of stigma and discrimination and frequent shortage of HIV test kits prevent optimal detection of HIV positive pregnant women at antenatal care HIV prevalence settings. Similarly, the lack of funding hinders the achievements in protection of children and families affected by HIV/AIDS through the associations of People Living with HIV and AIDS. While people living with AIDS are organising themselves in associations in urban areas and are getting livelihood, and financial support to go to health facilities, those in rural areas have not yet mobilized or been able to access these services including diagnostic services which are concentrated in urban areas. Emergency situations in certain States have also limited people's access to testing and treatment facilities.

Key Strategic Partnerships and Interagency Collaboration

The programme established and maintained strong partnerships with Health Alliance International with expertise in training and organisation of services at health facility for optimal uptake of PMTCT services. Five local NGOs and their affiliated youth peer educators' networks, State radio and TV companies collaborated with the programme for enhanced public information on HIV/AIDS and interpersonal communication for increased comprehensive knowledge on HIV/AIDS. A partnership with the Ministry of Education enabled scaling up of HIV education in schools but this is not yet part of the regular curriculum and some teachers consider it as an additional work. UNICEF contributes to the UN joint work plan on HIV/AIDS in line with international and in-Country UN agreement on division of labour on HIV/AIDS. This partnership within UN team has been valuable in ensuring complementarities. The UN joint team on HIV/AIDS has been useful in harmonising positions and advocating jointly to raise issues in the best interest of the National AIDS programme. The UNAIDS initiative of supporting Governments for ownership of national AIDS programmes

is an opportunity to improve the complementarity among UN partner agencies including UNICEF, and vis-à-vis the Government. In addition to partnerships with Government and national NGOs, the HIV/AIDS programme is seeking to improve its collaboration with media professionals and owners of TV and radio stations to sustain public information on HIV prevention. The programme also contributes to Sudan's Country Coordination Mechanism (CCM) for Global Funds in partnership with other UN agencies, Governments, and civil society organisations including the PLWA Association. The CCM has been successful in providing oversight, ensuring complementarities and addressing issues raised by UNICEF in relation to access for women and children to HIV services supported by Global Funds. UNICEF also extended its partnership with WHO on guidelines and training, and with Sudan OBGY Society for advocacy for improved HIV care to pregnant women.

Humanitarian Situations

HIV prevention skills and knowledge were provided to an estimated 30,000 young people in Darfur States. In addition, 5,000 young people were reached in Kosti with HIV prevention skills and knowledge. UNICEF coordinated an initiative to enable 257 women's and young people's access to HIV services including HIV testing, continuum of care, and provision of condoms to high risk young people. These results were achieved within programme funds and not with CAP or HAR funds.

Summary of Monitoring, Studies and Evaluations

The programme improved its M&E system by designing tools for data collection on peer education sessions, and giving support to the National AIDS Programme for establishing uniform registers for PMTCT services at facility level to record data for reporting to UNICEF and National AIDS programme.

The following surveys have been finalized and awaiting endorsement and validation by National AIDS Programme and line Ministries:

- KAP survey on HIV/AIDS for women aged 15-49, which reveals high frequency of sexual relationship among unmarried young girls ranging from 58% in rural areas to 68% in urban areas. Condoms use among women 15-49 with multiple partners is very rare: 0.6%
- A Qualitative Study of HIV related risky behaviours reveals that there is a strong social and family network that meets the needs of orphans in contrast to street children seen as rebellious. However, orphans have lower knowledge on HIV risk compared to displaced children and street children and may carry increased risk of HIV infection within families.
- Partial data from IBBS survey led by the National AIDS Programme indicates that in Kassala State, HIV prevalence among MSM is 6.3%, and 80% of MSM surveyed had sex recently with women and 14.5% used condom during their recent anal sex. In the Red Sea State, HIV prevalence among Commercial sex workers is 7.7%, and 18.7% of those surveyed used condom during their last sexual intercourse. These findings indicate that the 'most at risk' populations are connected to the general population through unprotected sexual relationship, and HIV prevention therefore, should focus not only on them but also on their clients in the general population.

The above surveys have not yet been endorsed by the Government. However, the HIV/AIDS programme is adapting its programming and future fundraising strategy in accordance with the surveys' findings.

Future Work Plan

- Dissemination of completed surveys' results and drafting of action plans based on the surveys' findings.
- Continue integration of PMTCT services into Reproductive health through inter-section collaboration within UNICEF's HIV/AIDS and Health Section, and providing technical assistance to Ministry of Health's two Departments that are associated with the National AIDS programme namely, the Reproductive Health Unit and the PMTCT Units.

- Support coordination and capacity building of partners to provide social protection to children affected by HIV/AIDS.
- Increase young people's access to comprehensive HIV/AIDS knowledge through reinforcement of youth peer educators networks, national NGOs, public and private media companies. The shift will be in the strategy of peer education, which will be directed not to all youth but the perceived or known vulnerable groups according to on-going surveys. Women in reproductive age will also be targeted. General population will be targeted through mass media.
- Increase young people's access to HIV information for reduced risky behaviours in emergency situations.

Country Programme Component: Communication and advocacy

PCRs (Programme Component Results)

PCR	EQRank	OTDetails
Children's rights are protected by families and communities that are aware, knowledgeable, motivated, and empowered to keep children (especially girls) safe from violence, exploitation, discrimination, harmful traditional practices, and abuse; children and youth themselves have effective understanding of their rights and are able and empowered to express their needs and participate in public discourses		2 FA6OT1, FA1OT13 (b), FA2OT9, FA4OT3
Infants and young children thrive in health and develop optimally in the care of families and communities that are knowledgeable, motivated, and empowered to provide effective care and protect children from preventable diseases		1 FA2OT9, FA1OT8, FA1OT9

Resources Used in 2011(USD)

Resource Type	Planned for 2011 (as per CPAP ceiling)	Allocated in 2011	Estimated Year-End Expenditure	%Spent (4)/(3) * 100
OR-E	1735000.00	798333.60	482161.84	60.40
OR-R	503000.00	0.00	0.00	0.00
RR	233000.00	239189.13	239189.13	100.00
Total	\$2,471,000.00	\$1,037,522.73	\$721,350.97	

Results Achieved

The CPAP mid-term review (MTR, 2011) resulted in significant modifications to the Communication for Development (C4D) programme. Both key results and major programme strategies and activities were reformulated to accelerate a shift in programme emphasis from the CPAP's original emphasis on reaching huge masses of people (85% of population) with large numbers of sectoral messages to more targeted toolkit-based interventions focusing primarily on two areas of behavioural and social change (essential family care practices for young infants and children under five, and female genital cutting). 2011 can thus be characterized as a year of transition for the C4D programme. Re-orientation of the programme is ongoing and involved considerable formative work in 2011, including developing, producing, and pretesting/piloting multimedia communication materials and community-based activities within two strategic communication frameworks: the *Shuffa'a Alsoghar (ACSD)* communication initiative promoting essential family care practices, with a sharpened focus on young infant feeding, as well as continued provision of technical support to Child Protection sector for the *Saleema* Initiative to protect girls from genital

cutting. A new model mother support group to promote improved breast-feeding of young infants in emergency settings was designed, developed, and piloted in both emergency and non-emergency settings (White Nile and Khartoum states). Some 30,000 southern Sudanese returnees encamped at the Kosti Wharf way station in White Nile state were reached with information through direct community engagement activities focused on child health, hygiene, safety, and protection along the return routes, while parallel public information approaches reached an estimated 250,000 southerners residing in different areas of Khartoum state.

In 2011, Media and External Relations efforts focused on ensuring media visibility of children's issues in the context of the secession of South Sudan and the conflicts that broke out before and afterwards. This was achieved through the regular production of press releases, statements and opinion pieces carried in national newspapers. Relations with key media outlets were strengthened, promoting UNICEF positions on issues such as humanitarian access as well as ensuring a rapid response to potentially detrimental coverage. Direct media support was provided to the Juba office during the independence period: two video reports with accompanying text stories were produced for UNICEF websites and other outlets, helping ensure prominent UNICEF visibility in national and international media. During the year, the office website was regularly updated and an office Facebook page was created.

Most Critical Factors and Constraints

Among critical constraints, those internal to the country office included the changed office vision of the role of C4D in the country programme entailing a shift away from a stand-alone, vertical to a crosscutting lateral role supporting sector programmes to achieve planned results; and the challenge of harmonizing C4D as an area of technical expertise, with C4D as a set of activities planned, funded, and managed by sectoral programmes. In addition, low funding levels remained a significant constraint. Above all, operating without a section chief or programme staff since mid-2009 made it extremely hard for the C4D component to generate the desired momentum towards CPAP goals, at least in the short term.

Externally, in respect of Media and External Relations, the political and security situation of 2011 proved a highly challenging environment in which to raise the profile of children and their issues. Media and government preoccupation with other priority issues narrowed the opportunities for substantive interaction.

Key Strategic Partnerships and Interagency Collaboration

An important outcome of the 2011 MTR, as noted above, was the agreement to shift the direction of C4D away from a vertical stand-alone approach with one key partner in order to better fulfill its crosscutting role in supporting sectoral programmes to achieve their key results, and therefore engaging multiple partners.

Partnerships with media outlets were established, which are still at an early phase of development. However, they offer considerable potential for ensuring a higher profile for children's issues. Following discussions with Government and with leading journalists who were involved previously, the revival of the 2009 Journalists for Children Network is a promising option to explore in 2012.

In order to build interagency collaboration, discussions were held with UNIC and other agencies and focused on linking the Network's forum to technical training for young journalists to strengthen reporting skills. UNICEF actively supported preparations for the inter-agency Darfur Water Conference in July, including undertaking a briefing of international media in Geneva. This helped ensure wide strong donor interest as well as prominent national and international media coverage for the event. An active role was undertaken within the OCHA-led Inter-agency Working Group on communication as well as in discussions (as yet inconclusive) on the creation of a UN Communication Group. Technical support on C4D was also provided to Child Protection Section in the joint programme on FGM with UNFPA.

Humanitarian Situations

A number of text and video stories were written describing the situation of children and UNICEF's response to the outbreak of hostilities in Abyei and elsewhere. Regular sitreps were compiled on the situation on the borders with South Sudan.

Summary of Monitoring, Studies and Evaluations

Activity monitoring reports by implementing partners.

Future Work Plan

Continue and strengthen focus on two strategic communication initiatives: 1) Improve infant and U5 survival through promotion of essential family care practices, with emphasis on Nutrition; 2) Protect children (especially girls) from violence through Saleema Communication Initiative (FGC), and awareness campaign to prevent sexual abuse and violence and increase demand for services by families of child victims. In 2012, the work plan will focus on the revival of the Journalists for Children forum and training on child rights. A higher profile for UNICEF programmes in support of visibility and fundraising will also feature strongly.

Country Programme Component: Social policy, planning, monitoring and evaluation

PCRs (Programme Component Results)

PCR	EQRank	OTDetails
The SPPME contributes to the overall goal of supporting the consolidation of peace, and emergency preparedness to promote the progressive realization of the rights of children and youth to survival, development, protection and participation and to facilitate the country's progress towards achieving the Millennium Development Goals. The SPPME programme will collaborate with UN agencies and other partners in development of social policies, improving processes/outcome, and building a strong community-based, self-sustaining and inter-sectoral approach to ensure the Country Programme is effectively supporting the implementation of the Government's National Strategic Plan (2012-2016). The programme will contribute directly to the UNDAF Outcome 1 on Peace Building, Outcome 2 on Governance and Rule of Law, and indirectly to Outcome 3 – Livelihood, and Outcome 4 - Basic Services.		3 FA5OT1, FA5OT2, FA5OT6, FA5OT8, FA5OT9, FA2OT9

Resources Used in 2011(USD)

Resource Type	Planned for 2011 (as per CPAP ceiling)	Allocated in 2011	Estimated Year-End Expenditure	%Spent (4)/(3) * 100
OR-E	8553000.00	8744872.00	7055083.00	80.68
OR-R	564000.00	3933627.00	1655256.00	42.08
RR	538000.00	1130462.00	1130462.00	100.00
Total	\$9,655,000.00	\$13,808,961.00	\$9,840,801.00	

Results Achieved

The PME programme successfully completed the Second round of SHHS, which directly contributes to the monitoring of MDGs and MTSP through the provision of disaggregated data by gender and geographical areas. The annual Integrated Monitoring and Evaluation Plan (IMEP) was closely monitored and updated regularly. Out of 18 IMEP activities, 8 are completed and 10 are ongoing 5 of which are almost finished. The field visit recommendations were regularly compiled, updated and followed up. The recommendations from 20 major studies, surveys and evaluations are being implemented. The PME implements a community based programme through the Child Friendly Community Initiative (CFCI). There were a total of 14 Annual Work Plan (AWPs) - five at the federal and nine at focus state levels. Of the 249 planned activities in the 2011 AWP of PME, 192 have either been fully or partially implemented (77%). A total of 31 activities were dropped or postponed to the next year due to funding constraints and inaccessibility owing to insecurity.

In 2011, the NFI Common Pipeline served over 290,000 newly displaced and disaster affected people in Darfur and South Kordofan states, in addition to 510,000 already displaced people in Darfur. As a core partner for NFI Common Pipeline, UNICEF procures all NFIs for the Pipelines that serve over 90% of NFI needs in Sudan. The pipeline maintains contingency stock for 300,000 people in Darfur and 552,000 people in non-Darfur states.

UNICEF established a youth programme in 2011 through a consultative process of over one year involving partners from the Government, NGOs, donors, youth and other UN agencies. The formulation of this multi-sectoral youth programme is based on the Youth LEAD project, a large-scale multi-year project funded by CIDA. As this was the first year of the project, the focus was on the establishment of the project team, partnership mapping, situation analysis, and youth consultations. State level youth consultations were conducted in South Darfur and Blue Nile with the participation of the government line Ministries (Ministry of Youth and Sport, Ministry of Social welfare, Ministry of Health, Ministry of Education, and State Council for Child Welfare), UN agencies, NGOs and youth representatives. From South Kordofan, which is one of the three focus states of the Youth LEAD project, the youth representatives were brought to Khartoum to participate in the national youth consultation (as the state level consultation was not feasible due to the ongoing conflict).

Social policy efforts have been strengthened in the areas of equity advocacy, social protection, and social budgeting. Particularly notable is the publication of the "State of the Sudanese Children" which illustrates the disparities among and within the States calling for specific actions by States for equity. In addition, researches were done on the budget allocation processes and Zakat fund in order to provide internal references. In the area of social protection, UNICEF has been requested to be the lead agency in supporting the Ministry of Social Welfare in developing a Social Protection Strategy and Coordination mechanisms.

Most Critical Factors and Constraints

The PME regularly monitors the implementation of studies, surveys and evaluation included in the IMEP several of which were delayed due to unavailability of appropriate in-country research agencies and researchers. The education programme evaluation was not undertaken due to exorbitant price quoted by the international research companies. Often getting feedback to draft reports and finalization takes additional time. Eight reports from IMEP 2011 were at draft stages at the end of the year.

Access remains a major challenge in the conflict areas of South Kordofan and Blue Nile, but many areas in Darfur also remain inaccessible. NFI Common Pipeline was not able to serve large part of Blue Nile, and non-government controlled areas in South Kordofan.

In social policy, it was difficult to engage the Government in any significant dialogue for policy changes in 2011 due to the secession of South Sudan, which took place in July. Furthermore, after the secession, the Government announced it would appoint the new cabinet but the pending appointment happened only in December, which created uncertainty and further delay in programming. With limited capacity in the Government with respect to social protection and social budgeting it is clear that the SCO should use the first years to create platform and space for the policy dialogue and support the Government to test and

evaluate targeted social protection interventions. Such a dialogue should flow from grass roots up and be promoted in partnership with and engagement of religious leaders, youth, and media. Another challenge is in the human resources in UNICEF. Although an international staff member has been appointed for social policy, a seasoned national staff fully dedicated for social policy is required to access the key decision makers, to map out the information, and to bridge the language barrier in advocacy.

In youth programme, the sudden conflicts in South Kordofan and Blue Nile hampered the programme planning and implementation due to limited access and insecurity. Since these are two out of the three focus states of the Youth LEAD project, the donor has been concerned about this situation and is not willing to go ahead if the access is not granted to the internationals for proper monitoring and evaluation. Given the developmental nature of this project, this uncertainty creates a lot of anxiety and delay in planning for 2012.

Key Strategic Partnerships and Interagency Collaboration

Under a UN Joint Programme, in South Kordofan State, UNICEF and seven other UN agencies are strengthening water systems, and have built the capacity of the communities by developing and training of the village development committees, and trained the communities on how to monitor and manage their project. In addition, they trained Primary Teachers Associations to build the capacity of community on co-management of schools (child friendly school). However, a massive conflict in the whole State since the middle of 2011 hindered the implementation of planned activities.

The Youth programme is heavily dependent on successful partnerships. For example, in the area of youth employment, UNICEF will address the bottleneck through partnership with stakeholders from both demand and supply sides - equipping young people with education and skills and linking them with existing opportunities for employment, microcredit, and entrepreneurship skills trainings. Partnership will be the key strategy in this programme component in order to respect the mandates and comparative advantages of different actors, including UNICEF. The identified partners are JICA (Japan International Cooperation Agency), USAID, UNIDO, ILO, Central Bank of Sudan, etcetera.

In establishing the Youth Friendly Spaces, UNICEF will utilize the existing youth centers built by other partners (AECOM – USAID contractor, MoYS, JICA, Joint Programme for Youth Employment) as much as possible in order to capitalize on UNICEF's expertise in the soft component and programmes. According to UNICEF's mapping exercise, most of the existing youth centers are lacking activities that attract youth.

In peace education, religious leaders, sports associations, influential social figures have been mobilized to support positive behaviour change among youth.

Humanitarian Situations

Along with WFP and IOM, UNICEF is the key partner for NFI Common Pipeline, which serves over 900,000 conflict- and disaster- affected people in Sudan. The Common Pipeline is accessed by all humanitarian actors in Sudan, with distribution mostly conducted by NGO partners.

The link between the post-crisis recovery and youth LEAD (Leadership, Empowerment, Advocacy, and Development) is in the area of peace building. The objective is to mobilize communities and youth associations to promote peace building and social development and address the issue of the violence at its root causes. Sport and culture together form a fundamental part of UNICEF's strategy for conflict prevention. Sports tournaments and other recreational activities such as theatre will promote messages of peace, development and life skills. UNICEF will ensure equity in youth participation by engaging youth from IDP camps, marginalized tribes and those with differentiated abilities.

Summary of Monitoring, Studies and Evaluations

The annual Integrated Monitoring and Evaluation Plan (IMEP) was closely monitored and updated regularly. Out of 18 IMEP activities, 8 are completed and 10 are ongoing 5 of which are almost finished. The field visit recommendations were regularly compiled, updated and followed-up every month and 85% of the

recommendations were implemented. The recommendations from 20 major studies, surveys and evaluations are being implemented.

Future Work Plan

In 2012, SudanInfo database will be updated with data from SHHS-2, 2008 Census and National Household Budget Survey. The SHHS-2 report will be published in early 2011. Also, A State of the Sudanese Children Report will be brought out based on the SHHS-2 and other data. Community capacity building and peace building efforts will be continued with emphasis given to convergence of sectoral interventions including in the conflict prone, post conflict and border communities. The community-based initiative will have a full package of interventions implemented in 890 communities in 9 focus States. Additional grassroots peace building efforts will include West Darfur where Darfur Peace and Stability Funded project will be implemented, and South Kordofan, where the Joint UN Programme on Peace Building will be implemented if security situation improves.

In collaboration with the Federal Ministry of Youth and Sports (MoYS), UNICEF will support State Governments and civil society in building their capacity to translate the National Youth Strategy into a concrete plan of action for youth empowerment and development. This includes strengthening the youth network and participation.

The Youth programme will reinforce the equity approach by providing alternative learning in numeracy and literacy to the out of school youth and vocational training to the youth who seek job opportunities. UNICEF will go a step further in the area of vocational training by strengthening the entrepreneurship skills and access to microcredits, which has been the missing link so far in most of the vocational training services. Partnership will be the key strategy for this component as UNICEF's main role will be to address the bottleneck by connecting different partners. By providing youth friendly spaces with a referral system to the basic services that address the pressing needs of disadvantaged youth, UNICEF will contribute to the reduction of disparities among youth.

Additionally, the Youth programme will mainstream gender analyses into each of its activities in order to provide the services that address particular needs of girls and boys. Similarly, environment is another cross cutting theme whereby youth will become the agents of advocacy and innovative ways of preserving the environment. Where applicable, the SCO will introduce the latest innovations in youth programmes from other parts of the world such as innovation lab run by youth in Kosovo, digital oil drum computers in Uganda, and enhancing outreach via social networks and SMS messages.

In Social Policy, the programme will focus on supporting the Government in the development of the Social Protection Strategy and its Coordination and M&E system.

Country Programme Component: Cross-sectoral costs

PCRs (Programme Component Results)

PCR	EQRank	OTDetails
Effective and efficient programme management and operations support to the Sudan Country Office and dependent zonal offices through operations, administration, finance, human resources, information technology, telecommunications, security, supplies, logistics and transportation and overall coordination and oversight		0 FA6OT9

Resources Used in 2011(USD)

Resource Type	Planned for 2011 (as per CPAP ceiling)	Allocated in 2011	Estimated Year-End Expenditure	%Spent (4)/(3) * 100
OR-E	7570000.00	0.00	0.00	0.00
OR-R	5047000.00	0.00	0.00	0.00
RR	833000.00	0.00	0.00	0.00
Total	\$13,450,000.00	\$0.00	\$0.00	

Results Achieved

Support provided to SCO and all its Zonal offices.

Most Critical Factors and Constraints

- 1) New emergencies and conflict areas seriously disrupted work in three zonal offices of UNICEF forcing the relocation of a large number of staff.
- 2) Difficulties in obtaining visa for new international professionals considerably delayed recruitment and assignment processes. At times, newly hired staff could not be deployed to Sudan and SCO had to facilitate their reassignment to another duty station or discontinuation of contracts.
- 3) Increasing running costs due to inflation, and increased logistical difficulties combined with decreasing donor base is leading to increasing financial constraints. Unpredictability of funding of DCO, which is essentially comprised of emergency funding, further complicates the situation.
- 4) A total of 9 zonal and liaison offices imply high logistical and transportation costs

Key Strategic Partnerships and Interagency Collaboration

There is substantial inter-agency coordination with other UN agencies in terms of common services through the work of the Operations Management Team under the aegis of the UNCT.

Humanitarian Situations

See implications of emergency operations on cross-sectoral costs.

Summary of Monitoring, Studies and Evaluations

N/A

Future Work Plan

The 2012 AMP will take into consideration lessons learnt from 2011 and focus in particular on the budgeting of staff costs and of other cross-sectoral costs.

Effective Governance Structure

The year 2011 marked the effective separation of North and South Sudan. The last CMT, which governed the two UNICEF offices took place in April 2011.

The new Sudan CMT met in September 2011 to analyse and resolve office management and programmatic issues. A novelty introduced is that office indicators are no longer systematically discussed during CMT but are left to the responsible staff to manage. Only indicators that fall outside the accepted norms are brought to the attention of the CMT for adequate follow up and resolution.

This year marked an important transition period as it saw the end of the Organization ERP system ProMS and prepared for the introduction of a new one - VISION starting January 2012 as well as the introduction of IPSAS (International Public Sector Accounting Standards). To respond to this important shift, the office devoted a lot of time, effort and resources to adapt its infrastructure and train all the staff in their areas of specialty.

In addition, in collaboration with HQ, the SCO spent time to revisit existing responsibilities and determine the future user roles in the new system, minimize access, and maintain proper segregation of duties. This resulted in a role mapping exercise whereby staff members were given the necessary authorities in the new system. The role mapping will replace the existing ToA and will be tested and updated as necessary in the first quarter of 2012.

The last audit took place from November 2010 to February 2011 and rated office governance as 'unsatisfactory' due, among others, to recruitment delays, inadequate staffing structure, and other operational and financial management limitations. These are beginning to be addressed and will form the priority tasks for the new Representative expected to be appointed in 2012.

Strategic Risk Management

The SCO continues to respond to a number of protracted, recurrent and acute emergencies, maintains standing capacity of personnel, strategic rolling stock, and overall operational support structure. Inter-agency coordination mechanism is also in place and operational with the Humanitarian Country Team, sector/cluster and inter-sectoral coordination, all closely coordinating with national authorities. In 2011, an inter-agency contingency plan was put in place to prepare for secession of the South Sudan in July and related eventualities, which enabled immediate response at the onset of fighting in South Kordofan and Blue Nile. Frequent changes in operating environment and challenges (various administrative impediments, access, security, restrictions on staff deployment, shortage of partners etc.) are addressed with different strategies, often in coordination with other UN and humanitarian agencies, such as in-country redeployment, advocacy and negotiations at different levels, "remote control" service delivery, partnership and capacity building of smaller national NGOs, and joint oversight/operation in humanitarian action in "disputed area" by two country offices..

Evaluation

The Office maintained an up-to-date annual Integrated Management and Evaluation Plan (IMEP), which is used to plan and implement evaluations in key programme areas. IMEP 2011 was closely monitored and updated regularly. Out of 18 IMEP activities, 8 have been completed and 10 are ongoing 5 of which are almost finished. The WASH Section has conducted a programme component evaluation in 2011, which is

part of the IMEP. The recommendations from 20 major studies, surveys and evaluations conducted since 2009 are being implemented. The Office is making increased efforts to further develop in-country capacity for quality evaluations.

Effective Use of Information and Communication Technology

For increased operational effectiveness, and in preparation for the upcoming corporate ERP system-VISION to be introduced in January 2012, the office has throughout the year undertaken major changes and upgrades. These changes included, but were not limited to, improved firewalls, signing a contract with new service provider for internet bandwidth upgrades, and the installation and update of uPerform server. In addition, more than 280 staff members were provided with necessary support and advice as well as training for the effective use of VISION.

The office has successfully completed within the scheduled timeframe the organizational required systems upgrades and projects including Windows 7 and Office 2010. At the same time, a server upgrade is well under way. In line with the office SLA and BCP, the office has efficiently responded to three consecutive emergency operations in the conflict areas of Abyie, Kadugli and Damazine.

Adequate measures were also taken to mitigate potential threats and internal weaknesses by the continuous development of existing capabilities and creating new opportunities for knowledge including VSAT professional training, certification programmes and other initiatives to better support end-users in a challenging environment characterized by multiple hurdles including securing telecommunication operating licenses and clearing telecommunication equipment from customs.

Finally, and despite a busy schedule, the office managed to provide support to the Algeria Country Office to complete their installation of Windows 7 and office 2010 software.

Fund Raising and Donor Relations

In 2011, Sudan had limited regular resources funding (US\$ 3.7 million) and support budget (US\$ 2.8 million) and the office heavily relied on other resources (OR) (US\$ 82 million). The country office was able to raise US\$ 93.3 million (94%) of its planned US\$ 99.5 million annual budget. The outbreak of conflict in the border areas due to the separation of South Sudan required a humanitarian action update and increase of the HAC requirements to US\$ 131 million. By the beginning of December 2011, 41% of the humanitarian funding needs had been met.

The total funding, however, went down 20% from the previous year as a result of changes in the donor climate in Sudan after the secession of South Sudan. Many donors began to reduce their commitments, with some donors planning to phase out from Sudan in the coming years. However, the country office has initiated cooperation with new donors like South Africa and is exploring the possibility of South-South Cooperation. UNICEF has also increased its efforts to engage old and new donors locally and through visits to capitals. The cooperation with UNICEF offices in Brussels, Tokyo and PARMO colleagues have been very helpful. The National committees continue to play an important role.

Most of the funding in 2011 was related to humanitarian interventions (approximately 60%) and was allocated by donors on a six-month to one-year basis. Some donors have expressed interest to focus more on recovery interventions and the office is making an effort to get donor support over a longer period. Funding from the Common Humanitarian Fund and the Central Emergency Response Fund was obtained.

As of end-December 2011, 95% of the total 81 reports due were sent on time. The office received an

internal audit report at the end of May, which highlighted the need for improvements e.g. the importance of good analysis to discuss constraints, next steps, and the importance of financial accuracy. The reporting has improved during the second half of the year. The office has introduced regular housekeeping meetings to improve the monitoring of implementation of funds to avoid unnecessary extensions of PBAs.

Management of Financial and Other Assets

An internal audit was conducted in November 2010 and covered the areas of Governance, Programme management and Operations support. The office's functioning overall was rated 'partially satisfactory' and the audit found that basic financial controls over payment processing and recording were satisfactory but identified a few areas for improvement.

Funding remains a real challenge for the office. While Other Resources are constantly reducing as predicted, the RR funds have also been drastically reduced by DFAM as part of their accounts cleaning exercise prior to the transition to VISION and IPSAS. They have thus unilaterally decided to deduct all the office outstanding VAT receivables from the RR funds. While the VAT issue is internally resolved by the office, which now considers it a business cost, it has not so far succeeded in being treated at par with other UN Agencies in Sudan who have been able to get the Government to comply with its commitment to reimburse its VAT debt.

The office seizes every opportunity to reduce costs and secure savings. For instance, the office has introduced reduced DSA rates for staff local travel for training purposes. In addition, staff are encouraged to travel economy class even when they are entitled to business class.

The office has also taken advantage of the liquidation of the UN Peace keeping force in Sudan to acquire assets such as vehicles at a bargain price.

One of the largest expenditure categories for the office operating costs is security including guard services. The office is seeking to drastically reduce these expenses currently amounting to USD 1.5 million a year by outsourcing this service.

Supply Management

In 2011, the office processed USD 21 million worth of supplies of which offshore procurement represented 66%. The bulk of local supplies were sourced from Khartoum and some orders such as printing were procured from other States.

The local market remains limited and characterized by high costs, unreliable quality and untimely deliveries. Furthermore, its instability due largely to exchange rate fluctuations and exacerbated by the economic embargo has represented major challenges throughout the year.

Even so, in response to the crisis in south Kurdufan, Blue Nile and Damazine, the Supply section delivered necessary emergency supplies and the required logistical support.

As part of the UN interagency collaboration, the Supply section through Procurement Services supported UNDP to acquire bed nets. It also managed, on behalf of the international humanitarian organizations the procurement of Non Food Items (NFIs) for USD 5.7 million. In both instances, UNICEF responsibilities included ordering, organizing shipments, clearing customs and delivering items from Port Sudan to final beneficiary States in the case of the bed nets and to the El Obeid warehouse for onward distribution to final recipients in the case of NFIs.

In addition to the main warehouse in Khartoum, UNICEF manages warehouses in 5 states. Most of the items transit through the USD 4.0 million capacity Khartoum warehouse. However, maintaining stocks levels at or below such capacity continues to be problematic. Government systems are not fully established, largely placing UNICEF as the custodian of programme supplies except for WASH supplies most of which are directly delivered to the Government counterpart warehouse.

The office has given particular attention to the preparation for VISION/IPSAS implementation and inventory readiness. The entire Supply and Logistics staff, with the support of Supply Division, was trained on Field Warehouse & Inventory Management by the Chartered Institute of Logistics and Transport (CILT) UK and the same staff were trained on the VISION supply and warehouse modules. With the collaboration of OIA and DFAM, the office conducted an inventory practice run. To optimize space utilization and improve inventory management two Supply Division experts supported the office in re-organizing the layout of its Khartoum warehouse.

Human Resources

Despite difficult operating conditions including visa delays/rejections, restricted access for international staff, and the country's split into two entities in 2011, the SCO completed the recruitment of 85 positions, 68% of which were national staff, thereby reducing its vacancy rate to below 5%. The SCO has started proactively addressing the recruitment of positions foreseen to be vacant in 2012. The office migration to SAP HR was successfully completed and preparation is underway to ensure full migration to VISION.

As part of staff capacity development, the CO supported seven country offices through surge missions by deploying 6 national and 1 international staff. Conversely, the CO made use of staff from other offices to support its emergency response.

The first Country Office 2011-2012 Learning and Development Plan was drafted based on global, regional, country, sections and individual learning needs. Funding mechanisms included CO support and cost-sharing schemes with staff. A structured orientation and induction programme was piloted; it included orientation on emergency preparedness using DHR kits. The CO strongly advocated for more cost effective learning approaches such as on-the-job training, group training and e-learning.

Performance management was improved through management reports, regular circulars to staff and orientation sessions conducted countrywide.

The SCO experiences high stress levels due to protracted conflicts and recurrent crises. In response, the HR section conducted field support missions to the Darfur offices and identified counselling support for critical trauma for staff in South Kordofan and Blue Nile. In addition to the WFP counselling services, a list of local counsellors is available to needy staff. Given its size and nature of crises, the CO is considering recruiting a full time national counsellor who unlike internationals will enjoy wider access. The CO participated in the UN Agencies HR network in which it has been instrumental in advocating for and achieving improved staff wellbeing. A medical MOU was signed with UNAMID to enable UNICEF staff in the three Darfur states to access their services.

The CO PSVs working with the UN Cares Committee and the HIV/AIDS section to implement the 10 minimum standards was increased from 2 to 5.

Efficiency Gains and Cost Savings

Unfortunately setbacks have been experienced as the harmonized DSA rates were revised upward to address multiple complaints by some sister agencies and counterparts; furthermore, the office rent was increased by 10 per cent in compliance with the contract provisions according to which the rent is raised every two years. While the current market rates for rent have drastically decreased this year as a result of the termination of the UN Peace keeping force mission, the office has not been able to take advantage of this situation so far because it is tied up in a yearly contract; it is difficult to move the entire office and its built-in infrastructure including underground fiber optic cables; and because of the unavailability of a suitable building that would meet the office staff needs and security requirements.

Changes in AMP and CPMP

The 2012 AMP will focus on results and impact for both management and programme priorities. The exercise will be led by the Deputy Representative and the Operations Officer and will involve other key office decision makers including the Section Chiefs and State Representatives. This AMP will be particularly important as it will redefine the office key management and programme objectives on the eve of VISION/IPSAS implementation, taking into consideration the available resources and relevant geographical areas while addressing the last audit findings and recommendations for a more effective working document, which will represent a guide for the entire office and feed into the staff evaluation reports.

Summary Notes and Acronyms

CATS : Community Action for Total Sanitation
FMoE / FMoGE: Federal Ministry of Education / Federal Ministry of General Education
FMoH : Federal Ministry of Health
GoS : Government of Sudan
SCO : Sudan Country Office
SMoE : State Ministry of Education

Document Centre

Evaluation

	Title	Sequence Number	Type of Report
1	Rural Kassala CMAM Programme Coverage Survey and Training Using SQUEAC	2011/05	Survey
2	Assessment of Infant and Young Child Feeding (IYCF) in Selected States	2011/06	Study
3	State of Sudanese Children	2011/07	Study
4	Khalwa Survey (Informal pre-school education)	2011/011	Survey
5	Water, Sanitation and Hygiene (WASH) Evaluation	2011/017	Evaluation

Other Publications

Lessons Learned

Programme Documents