Executive Summary

Achievements
On the 25th anniversary of the Convention on the Rights of the Child (CRC), UNICEF and the Ministry of Health and Social Protection launched a new Mother and Child Health booklet. The booklet provides parents with information regarding child care, including advice on infant and young child feeding. This is critical in a country where a quarter of under-fives are chronically malnourished and one in ten acutely malnourished. The booklet also allows parents and health staff to record information such as growth measurements or immunizations received. From 2015 onwards, each pregnant woman (approximately 250,000 per year) will receive the booklet. A manual and training for health workers will also be rolled out.

In 2014, UNICEF supported the Ministry of Education and Science to organise the first ever Joint Sector Review (JSR). The JSR gathered a wide range of stakeholders to take stock of achievements in education reform and to set future priorities. Based on the outcome of the JSR, a new version of the Education Action Plan was developed, which serves as implementation plan for the National Strategy for Education Development up to 2020. The JSR was a major achievement for aid alignment and harmonisation.

UNICEF Tajikistan boosted its emergency preparedness and response capacity in 2014. This is of great importance in a country with a high risk of natural and man-made hazards. UNICEF now has a more strategic approach to prepositioning emergency supplies. Contingency plans were developed for education, WASH and child protection in emergencies. Assessment tools were designed for education and WASH. A humanitarian performance monitoring system was established. The Business Continuity Plan was updated and tested. A cross-border simulation exercise helped to test and improve readiness for all humanitarian actors.

Shortfalls
Data on children is still often of poor quality or unavailable at the desired level of disaggregation in Tajikistan. Despite UNICEF’s work on this issue, many weaknesses remain. In addition, evidence plays a relatively limited role in decision-making processes in Government. At present, Tajikistan is not ready to unlock the promise of a data revolution for children. A strong coalition needs to be built within the UN, amongst donors and with the Government to boost the quality of data and promote the role of evidence in decision-making.

Many donor-supported reforms that benefit children still lack sustainability in Tajikistan. For example, after a decade of support from Japan, the Government is not ready yet to take over responsibility for the full cost of vaccines. UNICEF will seek to position itself more strategically in discussions on the management of public finance in the health sector, working with the Ministry of Health and Social Protection to develop stronger budget submissions and supporting the required financing reforms in the sector.

A shortfall for Government and development partners has been the lack of programmes for adolescents. Adolescents have huge potential to contribute to the country’s development, but
face constraints that prevent many from realising this potential. The next UNICEF Country Programme will include an explicit focus on this age group.

The governance and accountability structures for child rights in Tajikistan remain weak. The Child Rights Commission at the national level lacks dedicated secretarial capacity. At the district level, Child Rights Commissions and Child Rights Units are also capacity-constrained. UNICEF will continue to explore how to best to strengthen the oversight of child rights.

**Partnerships:**
UNICEF established a new local partnership with the European Union (EU), building on the global EU/UNICEF Child Rights Toolkit. In the context of the CRC@25 celebrations, the toolkit was launched at a gala dinner hosted by the EU and UNICEF - the first of its kind, pulling together a wide range of partners. Funds mobilised benefited the Associations of Parents of Children with Disabilities. The event successfully raised awareness of child rights in general and the rights of children with disabilities in particular.

The partnership UNICEF enjoys with the Ministry of Health was expanded when the social protection portfolio was transferred to this Ministry at the end of 2013. The Ministry requested UNICEF to support the development of a new national social protection strategy. The process was initiated with a two-day roundtable meeting, to build a common understanding of social protection concepts and to establish a common vision for social protection reform.

The Scaling Up Nutrition (SUN) movement gained further momentum in Tajikistan with a well-attended kick-off meeting, with participation of Nepal and Kyrgyzstan. The SUN movement brings together key Government stakeholders with development partners and civil society. It is facilitating a growing awareness of the scale of the nutritional problems in Tajikistan and the interventions that are required to rectify the situation.

**Humanitarian Assistance**
On 12-13 April 2014, flash floods and mudslides hit several districts of Kulyab zone in south-eastern Tajikistan, affecting 494 households, killing eight elderly people and eight children, and damaging two schools and health facilities. In response to the April flash floods and mudslides, UNICEF in collaboration with the Tajik National University built the capacity of local service providers (schoolteachers) in provision of psychosocial support to children with post-traumatic stress disorder in Shurabad district. A two-day training on delivery of psychosocial support to children and adolescents in emergencies was offered to 18 schoolteachers from eight schools and one representative of the local education department. As a result, 300 children underwent a psychosocial assessment and 45 received intense consultations. In addition, 16 parents were supported to help them cope with the psychosocial consequences of the floods and mudslides.

UNICEF Tajikistan also significantly boosted its humanitarian preparedness capacity in the course of the year. In 2014, UNICEF Tajikistan received US$200,000 from the global initiative on Strengthening Humanitarian Preparedness in High Risk Countries, funded by the United Kingdom’s Department for International Development (DFID) and jointly implemented with the World Food Programme (WFP). This project provided a unique opportunity to increase preparedness measures and improve response capacities of UNICEF and its partners. Significant progress was made with regards to development of sectoral contingency plans on Education and Water, Sanitation and Hygiene (WASH); development of an education sector assessment tool; development of a Humanitarian Performance Monitoring mechanism; identification of relevant partners for conclusion of standby Project Cooperation Agreements.
(PCAs) for effective delivery of humanitarian assistance; and capacity building of UNICEF staff and partners (government, UN agencies and NGOs) on emergency preparedness in line with the Core Commitments for Children in Humanitarian Action.

In October 2014, WFP, the UN Office for the Coordination of Humanitarian Assistance (OCHA) and UNICEF in coordination with the Committee of Emergency Situations and Civil Defence and Tajikistan’s emergency preparedness and response mechanism, REACT, organised a Cross-Border Emergency Simulation Exercise between Tajikistan and Kyrgyzstan. Combining tabletop and field assessment components, the exercise simulated a medium-scale earthquake on the border between Tajikistan and Kyrgyzstan. This was a resounding success in that it engaged multiple layers of coordination mechanisms and challenged participants to practise and improve their response capacities in a cross-border emergency situation. Participation included government officials and regional leadership from the Committee of Emergency Situations and Civil Defence, the UN, the Red Crescent/Red Cross movement and International NGOs from both sides of the border. As a result, REACT in Tajikistan is better prepared to undertake steps that will maximise the effectiveness of its response ability.

Equity Case Study

Over the course of the current programme of cooperation, UNICEF Tajikistan has taken a number of important steps to strengthen its own and its partners understanding of childhood deprivation and the identification of those children who are most disadvantaged and most vulnerable. This has prepared the office well for the preparation of the 2016-2020 country programme, which will be able to focus sharply on reducing equity gaps, based on the deeper insights that were developed.

In 2014, the office conducted a National Multiple and Overlapping Deprivation Analysis (MODA), based on the 2012 Demographic and Health Survey data set. The strength of the MODA methodology is that it allows the consideration of many dimensions of deprivation as they affect individual children simultaneously. In combination with background variables on the children and the families in which they live, the methodology led to the identification of those children who are most at risk of facing a number of different deprivations simultaneously. Armed with the insights of this analysis, the equity focus of the next country programme will be determined.

Also in 2014, UNICEF Tajikistan developed a methodology for a child rights index that can be applied to the district level in the country. The index is based on a number of indicators that are readily available at district level from administrative data sources. Ranking districts in terms of their progress towards the realisation of child rights serves three purposes: it allows the identification of those districts where children are relatively worse off; it will raise awareness on child rights issues at local and national level; and it will create healthy competition between districts to improve their record on child rights.

In the health programme, the equity focus is being improved as a result of the application of the Lot Quality Assurance Sampling (LQAS) method in 2014. A rapid assessment using this methodology was carried out in Isfara, Kulob and Rasht districts, looking at family care practices in relation to child survival. By sampling from different primary health care catchment areas, the assessment was able to highlight specific areas that are lagging behind in terms of family care practices. In collaboration with local authorities, the rapid assessment findings were used to focus the attention of Primary Health Care (PHC) managers. Poor performance in infant feeding practices, hygiene practices and health seeking behaviour was highlighted to strengthen the targeting of interventions. Efforts are underway to institutionalise the use of LQAS in the three
districts and beyond.

A rapid assessment of children in institutions in 2014 provided insights that will promote a stronger equity focus in the child protection programme. A stark finding is that only a very small proportion of children in institutions are orphans and the majority of children who are institutionalised are there for economic or social reasons. The placement of children in institutions because of poverty or social reasons points at the failure of the social protection system in Tajikistan. In UNICEF’s work towards the establishment of an integrated social protection system, attention will be paid to finding ways to avoid unnecessary institutionalisation. The child protection programme will also work towards strengthening the gate-keeping system and the promotion of alternative and family-based care. These measures should help to avoid a situation whereby the most deprived and most vulnerable children end up in an institution.

In the course of implementing the 2010-2015 country programme of cooperation, it has become increasingly clear to the team that children with disabilities (CWD) are amongst the most vulnerable and most disadvantaged children in the country. Concerted efforts were made to embed a focus on CWD in all programme components. The health and nutrition component has started looking at improving early diagnosis of childhood disability and developmental delays, as late diagnosis is a common problem and often presents missed opportunities for the child concerned. The education programme is successfully pushing forward the concept of inclusive education and is making headway in this direction, both at advocacy level and in creating concrete examples of inclusivity. The child protection programme has led a successful application to the UN Partnership to Promote the Rights of Persons with Disabilities (UNPRPD) fund, which will allow UNICEF to launch a comprehensive communication for development (C4D) campaign addressing the negative social norms related to disability. This component also leads the development of community-based services for CWD. The team has also been working to strengthen the capacity of associations of parents of children with disabilities. The communication programme has played a major role in awareness raising for the rights of CWD, by focusing the entire CRC@25 celebration on disability. The rights of CWD will continue to be part of the equity focus of the next country programme.

Summary Notes and Acronyms

Acronyms

AMP: Annual Management Plan
ANC: Antenatal care
APR: A Promise Renewed
ARI: Acute respiratory infections
ARV: Anti-retroviral
ART: Anti-Retroviral Therapy
AS: Agency on Statistics
BCP: Business Continuity Plan
CAE: Centres of Additional Education.
CBR: Community-Based Rehabilitation
CCC: Core Commitments for Children
CEDAW: Convention on the Elimination of all Forms of Discrimination against Women
CMT: Country Management Team
CoES: Committee on Emergency Situations and Civil Defence
COJ: Council of Justice
<table>
<thead>
<tr>
<th>Acronym</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>CRC</td>
<td>Convention on the Rights of the Child</td>
</tr>
<tr>
<td>CRU</td>
<td>Child Rights Unit</td>
</tr>
<tr>
<td>CSO</td>
<td>Community Service Organisation</td>
</tr>
<tr>
<td>CWD</td>
<td>Children with Disabilities</td>
</tr>
<tr>
<td>C4D</td>
<td>Communication for Development</td>
</tr>
<tr>
<td>DCT</td>
<td>Direct Cash Transfer</td>
</tr>
<tr>
<td>DDP</td>
<td>District Development Plan</td>
</tr>
<tr>
<td>DED</td>
<td>District Education Department</td>
</tr>
<tr>
<td>DHS</td>
<td>Demographic and Health Survey</td>
</tr>
<tr>
<td>DIPECHO</td>
<td>ECHO Disaster Preparedness Programme</td>
</tr>
<tr>
<td>DRR</td>
<td>Disaster Risk Reduction</td>
</tr>
<tr>
<td>ECD</td>
<td>Early Childhood Development</td>
</tr>
<tr>
<td>ECE</td>
<td>Early Childhood Education</td>
</tr>
<tr>
<td>EID</td>
<td>Early Infant Diagnosis</td>
</tr>
<tr>
<td>EMIS</td>
<td>Education Management Information System</td>
</tr>
<tr>
<td>EPI</td>
<td>Expanded Programme of Immunisation</td>
</tr>
<tr>
<td>EU</td>
<td>European Union</td>
</tr>
<tr>
<td>EWEA</td>
<td>Early Warning and Early Action</td>
</tr>
<tr>
<td>FT</td>
<td>Fixed-Term (appointment)</td>
</tr>
<tr>
<td>GAVI</td>
<td>Global Alliance for Vaccines and Immunization</td>
</tr>
<tr>
<td>GDP</td>
<td>Gross Domestic Product</td>
</tr>
<tr>
<td>GFATM</td>
<td>The Global Fund to Fight AIDS, Tuberculosis &amp; Malaria</td>
</tr>
<tr>
<td>GPE</td>
<td>Global Partnership for Education</td>
</tr>
<tr>
<td>GSSC</td>
<td>Global Shared Services Centre</td>
</tr>
<tr>
<td>HAC</td>
<td>Humanitarian Action for Children</td>
</tr>
<tr>
<td>HACT</td>
<td>Harmonized Approach to Cash Transfers</td>
</tr>
<tr>
<td>HIV/AIDS</td>
<td>Human immunodeficiency virus infection/ acquired immunodeficiency syndrome</td>
</tr>
<tr>
<td>ICT</td>
<td>Information and Communication Technology</td>
</tr>
<tr>
<td>IDUs</td>
<td>Injecting drug users</td>
</tr>
<tr>
<td>IMEP</td>
<td>Integrated Monitoring and Evaluation Plan</td>
</tr>
<tr>
<td>IMCI</td>
<td>Integrated Management of Childhood Illness</td>
</tr>
<tr>
<td>IPSAS</td>
<td>International Public Sector Accounting Standards</td>
</tr>
<tr>
<td>IYCF</td>
<td>Infant and Young Child Feeding</td>
</tr>
<tr>
<td>JCC</td>
<td>Joint Consultative Committee</td>
</tr>
<tr>
<td>JJAP</td>
<td>Juvenile Justice Alternative Project</td>
</tr>
<tr>
<td>JSR</td>
<td>Joint Sector Review</td>
</tr>
<tr>
<td>LQAS</td>
<td>Lot Quality Assurance Sampling</td>
</tr>
<tr>
<td>LSBHE</td>
<td>Life Skills Based Health Education</td>
</tr>
<tr>
<td>LTA</td>
<td>Long Term Agreements</td>
</tr>
<tr>
<td>MARA</td>
<td>Most at Risk Adolescents</td>
</tr>
<tr>
<td>MBBB</td>
<td>Marginal Budgeting for Bottlenecks</td>
</tr>
<tr>
<td>MCH</td>
<td>Maternal and Child Health</td>
</tr>
<tr>
<td>MEDT</td>
<td>Ministry of Economic Development and Trade</td>
</tr>
<tr>
<td>MODA</td>
<td>Multiple and Overlapping Deprivation Analysis</td>
</tr>
<tr>
<td>MoRES</td>
<td>Monitoring Results for Equity System</td>
</tr>
<tr>
<td>OR</td>
<td>Other Resources</td>
</tr>
<tr>
<td>OOSC</td>
<td>Out of School Children</td>
</tr>
<tr>
<td>PAS</td>
<td>Performance Appraisal System</td>
</tr>
<tr>
<td>PBR</td>
<td>Programme and Budget Review</td>
</tr>
<tr>
<td>PCA</td>
<td>Project Cooperation Agreement</td>
</tr>
<tr>
<td>PHC</td>
<td>Primary Health Care</td>
</tr>
</tbody>
</table>
UNICEF Tajikistan continued its capacity development efforts for the realization of child rights throughout 2014, at community, service delivery and policy making levels.

At community level, a highlight was the capacity building of communities on the use of rapid test kits to determine the level of iodine in salt purchased. Tajikistan has a law on salt iodisation and while the majority of the population consume salt labelled as iodised, testing reveals that the content of iodine is too low. Based on a careful bottleneck analysis, it was found that consumers’ demand for iodised salt is critical and by building consumer’s understanding of the importance of iodine in the diet and introducing them to salt testing, they are empowered to insist that the salt they buy is of adequate quality.

At the level of service providers, a new venture in 2014 was the enhancement of the capacity of teachers and others to deliver psycho-social support in the case of emergencies. Psychology as a profession is not well developed in Tajikistan and there are very few professional psychologists working at community level. The capacity building on psycho-social support, delivered in partnership with a Tajikistan National State University, was delivered in the aftermath of the floods in Khatlon district in spring 2014. In 2015, this capacity will be further enhanced across the country and stand-by PCAs will be drawn up with NGOs who are able to respond quickly to the need for children and parents for psycho-social support in the wake of emergencies.

The capacity of young volunteers and staff of NGO ‘Initiative of Youth of Tajikistan’ in C4D was strengthened, which will support their work in favour of girls’ education in Isfara and Rasht districts.

In terms of policy and decision-making across Government, UNICEF further enhanced national capacity to use the Tojiklnfo database on child-rights related issues. The database was revised and relaunched. Staff at the Agency on Statistics received further training in database
administration; and the capacity of the Ministry of Economic Development and Trade was strengthened to use TojikInfo for the monitoring of national and district-level development plans.

Evidence Generation, Policy Dialogue and Advocacy

In the equity case study, which is part of this annual report, several examples are given of how evidence generation has strengthened the understanding of UNICEF and its partners on equity issues in Tajikistan and how this deepened understanding has subsequently contributed to policy dialogue and advocacy. These examples include Tajikistan’s National MODA, the construction of a district-level child rights index, the application of LQAS to child survival interventions, the causal analysis of infant mortality, the out-of-school children study and the rapid assessment of children in institutions.

In addition to these examples, UNICEF Tajikistan completed a study on the bottlenecks for children with disabilities to access benefits and services that they are entitled to. This study, which looked at children with disabilities in Isfara, Kulob and Rasht, identified several issues that have been translated into policy dialogue and advocacy. The most important of the findings was the fact that children with disabilities are diagnosed and registered at a relatively late age, which means that children with disabilities under five in particular are missing out on critical benefits and services. The importance of early diagnosis was included into advocacy work and the capacity for early diagnosis is being built as part of the health and nutrition programme. In addition, the child protection section is preparing for a major C4D campaign to address negative social norms regarding children with disabilities, which will also contribute to early diagnosis and registration.

UNICEF also contributed to the strengthening of national data collections systems. In the education sector, the Education Management Information System is being reinforced to include data and analysis on out-of-school children and children who are at risk of dropping out. This will help to ensure that the children who are most vulnerable also realise their right to a full course of basic education.

Partnerships

UNICEF Tajikistan was particularly successful in 2014 in expanding partnerships to promote the rights of children with disabilities. UN agencies came together and successfully mobilized resources from the UN Partnership to Promote the Rights of Persons with Disabilities (UNPRPD). This will allow the UN in Tajikistan to support the Government as it progresses towards the ratification of the UN Convention on the Rights of Persons with Disabilities. There is also a strong and growing partnership with development partners, civil society organisations and the Government to promote community-based rehabilitation (CBR). This culminated in a well-attended national CBR conference, jointly organized by UNICEF, the World Health Organisation (WHO) and the UN Development Programme (UNDP), which allowed participants to exchange experiences and provide recommendations on how to further developed CBR services in the country. In education, UNICEF took the lead of the inclusive education working group, which is working to ensure access to quality education for all children, including children with disabilities. UNICEF also continued expanding its partnership with parents associations and disabled people organisations. UNICEF actively supported the capacity development of 28 associations of parents of children with disabilities. A partnership with these parents’ associations, the EU, the private sector and the media led to the organization of a gala dinner, the proceeds of which benefitted the parents’ associations. At this event, the first of its kind in Tajikistan, the EU-UNICEF Child Rights Toolkit was also launched. The most innovative partnership was formed in the context of the #IMAGINE project, bringing together children with hearing impairments, a
music school and a famous singer to form an inclusive children’s choir. Children with and without hearing impairments sang and signed John Lennon’s song at various CRC@25 celebrations. UNICEF also joined 20 partners to organise a winter handicap fair, which again focused on the inclusion of persons with disabilities. The fair exposed over 4,000 people to the abilities of persons with disabilities and raised awareness on their rights.

**External Communication and Public Advocacy**

The celebration of the 25th anniversary of the Convention of the Rights of the Child provided a focus for UNICEF’s external communication and public advocacy work in 2014. A series of radio talks with participation of UNICEF staff and partners highlighted key aspects of the CRC on a popular radio station between 1 June (recognized as Children’s Day in this region) and 20 November. On 20 November, a formal event in the capital with participation of Government, civil society and development partners saw the official launch of the State of the World’s Children, the Mother and Child Health handbook, and the #IMAGINE project. The inclusive children’s choir of children with and without hearing impairments singing and signing the John Lennon song attracted a lot of attention and promote the message of inclusion of children with disabilities. It was fortunate that the visit of the ‘Flying High for Kids’ balloon project to Tajikistan also coincided with the CRC@25 celebrations. The balloon flew in Kurgan Tube, south of the capital Dushanbe, in early December. Some 5,000 children participated in the event, which generated a lot of media coverage for UNICEF and for child rights issues. A gala dinner jointly hosted with the EU provided an opportunity to launch the EU/UNICEF Child Rights Toolkit. The Inclusive Winter Handicraft fair was another opportunity to spread child rights messages.

UNICEF Tajikistan is expanding its social media presence to take full advantage of new ICT developments. In addition to a webpage and a Facebook account, the country office also has a Twitter, Flickr and YouTube presence. These various communication tools were used to spread child rights messages, news specific to the activities of UNICEF Tajikistan, and information from UNICEF CEE/CIS Regional Office (RO) and Headquarters.

Work on rolling out the child rights syllabus for journalists is ongoing, with agreements being reached to teach the syllabus in all pre-service training institutes. The body of journalists who are knowledgeable on child rights and able to cover child rights issue is growing steadily.

**South-South Cooperation and Triangular Cooperation**

UNICEF CEE/CIS region has a Regional Knowledge and Leadership Agenda (RKLA), which describes the 10 result areas pursued by UNICEF across the region. Each result area has a reference group, which facilitates knowledge-sharing between UNICEF offices in the region. This has proved to be an excellent tool to promote South-South and Triangular Cooperation.

Examples of how UNICEF Tajikistan and its partners benefited from expertise in other countries in the region included:
- Participation of UNICEF Armenia and Kyrgyzstan offices in the Social Protection workshop UNICEF organized for the Ministry of Health and Social Protection. The workshop aimed to build the understanding of the Ministry and other stakeholders on concepts of social protection and experiences in the region. This was important given that the social protection portfolio was only recently transferred to the Ministry of Health. Experiences from other countries in the region helped participants understand the case for an integrated social protection system in Tajikistan.
- Supported for the Academy of Education to organize an international conference on multi-grade teaching and learning. Multi-grade teaching is a reality in many schools in Tajikistan.
and there are no agreed approaches for this phenomenon, nor support for teachers who teach in multi-grade classrooms. The experience of participants from Kazakhstan and Russia greatly benefited those from Tajikistan.

Support for a Government delegation to attend the regional conference on strengthening child protections systems to protect children from neglect, abuse, exploitation and violence in Minsk, Belarus. Participants increased their understanding of various approaches to child protection across the region and returned with ideas for the strengthening of child protection systems in Tajikistan.

The sharing of human resources between UNICEF country offices in the region continued to be beneficial in 2014. UNICEF Tajikistan benefited from support from the Operations Officer in Kyrgyzstan for the revision of the Business Continuity Plan and from the supply assistant from Turkmenistan to fill a critical gap in staff capacity. The Nutrition Officer supported the Turkey office in responding to the Syrian refugee crisis and the Child Protection Project Assistant rendered support to the RO in the organization of the Minsk Child Protection Conference.

**Identification Promotion of Innovation**

The introduction of a Mother and Child Health booklet was an innovation for Tajikistan in 2014. The booklet, which will be provided to all pregnant mothers from 2015 onwards, contains important advice on child health and nutrition and allows parents and caregivers to record critical information related to immunizations and growth monitoring. While common practice in many countries, this is a new practice in Tajikistan which will empower parents and caregivers and create better interaction and accountability between parents, caregivers and health care providers.

The use of music as a tool to promote child rights was another innovation for Tajikistan in 2014. By bringing children with and without hearing impairments together to sing and sign in the context of the #IMAGINE project, a powerful message on the value of inclusivity was created. The experience was transformational for the children who were involved as well as many of the adults who witnessed it.

In child protection, UNICEF forged a partnership with the local NGO Sarchasma and international NGO HealthProm to pilot foster care in Tajikistan. This will provide a new alternative for children to grow and thrive in a family environment. Foster care is not recognized in Tajikistan and the pilot is aimed at demonstrating the value of this option and its feasibility in the country. A functioning foster care model would contribute to the prevention of institutionalization.

The UNICEF Tajikistan education programme commenced support for the introduction of an early warning system that identifies and supports students at risk of dropping out through work with Parent Teacher Associations. It makes use of technology to track early warning indicators and uses an electronic attendance register with an SMS facility to alert parents or caregivers of children’s absence from school.

**Support to Integration and cross-sectoral linkages**

The rapid assessment on children in institutions, supported by the UNICEF child protection programme, is a good example of how evidence generation promoted intensified cross-sectoral working in UNICEF Tajikistan. The assessment showed that in order to stop preventable institutionalization of children, a joint effort across government sectors is required. Given that
most children are placed in institutions because of economic or social reasons, the social protection system needs to be strengthened to ensure that poverty and vulnerability are identified and responded to before hardship leads to institutionalization. The health system needs to be strengthened to enable early identification of childhood disability and developmental delays, so that early intervention can help children and parents alike. The child protection system in the country needs to contribute through improved gate-keeping, the development of community-based services and alternative family care arrangements. The development of inclusive education will help parents and caregivers keep their children with disability at home as well. The evidence generated by the rapid assessment will therefore lead to a multi-sectoral response to reduce the incidence of institutionalization.

The joint UN programme to empower communities in the Rasht valley with better livelihoods and social protection, funded under the UN Trust Fund for Human Security, is an example of a cross-sectoral UN response to poverty and deprivation in a specific geographic area. It is the first example of its kind in Tajikistan where a broad range of UN agencies come together to jointly respond to development challenges in one particular area. The project helped to demonstrate the added value of the UN delivering together and provided that lessons about implementation are learned, can become a model for similar UN collaboration in Tajikistan and beyond.

UNICEF Tajikistan’s work on mainstreaming the rights of children with disabilities throughout the country programme is another example of how cross-sectoral linkages have been pursued. Based on a detailed analysis and extensive cross-sectoral collaboration, the country programme has a set of complementary activities in different programme components to promote the rights of children with disabilities, who are among the most deprived children in Tajikistan.

Service Delivery

Over the course of the current country programme, UNICEF Tajikistan has supported the modelling of a new form of Early Childhood Education (ECE) Centres, in partnership with the Aga Khan Foundation and the Ministry of Education. These alternative ECE Centres have been recognized in the Law on Preschool Education and are being scaled up by the Ministry of Education and Science, with support from the Global Partnership for Education. As the proportion of children who access formal early learning opportunities is very low (12 per cent, approximately 106,000 out of 884,000 3-6 year olds), a rapid expansion of ECE is a high priority. The alternative ECE Centres are an example of a new service, which can be provided at a lower cost than the traditional Kindergartens and therefore has a higher feasibility of being provided at scale.

There is an acute shortage of day care centres for children with disabilities, which contributes to the institutionalization of those children. Making use of the legal provision that allows the Government to purchase services from NGOs, UNICEF supported a local NGO to establish a day care centre in Rasht valley. The Government will purchase the services of this NGO to run the day care centre. This model holds promise for the scaling up of this type of service throughout the country. It is attractive for the Government given that it does not add to their wage bill and does not add new infrastructure or assets to their inventory. For children with disabilities and their parents and caregivers, this might be the intervention that allows them to stay together in a family setting and avoids placing the children in an institution.

By establishing seven child-friendly courtrooms in select districts, UNICEF has contributed to ensuring a less traumatic experience for children who come into conflict with the law or are
interrogated as victims or witnesses of crime. The child-friendly courtrooms do not have the usual security cage for suspects. An interrogation room with a child-friendly atmosphere and a CCTV link to the main court room makes the experience less harrowing for child witnesses and victims who need to give testimony.

**Human Rights-Based Approach to Cooperation**

In its work on HIV/AIDS, UNICEF noticed a fundamental breakdown of trust between some parents of children living with HIV and duty bearers in the medical profession. In many of these cases, the parents of the child were HIV negative themselves, leading to the suspicion that children might have been infected in a medical setting. This led to a deep distrust of the medical profession and many of the children concerned ended up not receiving anti-retroviral therapy.

To remedy this breakdown of trust between rights holders and duty bearers, UNICEF entered into a partnership with NGO Guli Surkh, itself led by people living with HIV, and the Ministry of Health. Through a combination of awareness raising, psycho-social support and counselling, parents were slowly convinced to allow their children the medication they were entitled to and to work with the duty bearers in the health sector to make this happen. This example demonstrated how UNICEF can be a broker between rights holder and duty bearers, and as a result make a huge impact on children living with HIV.

UNICEF provided detailed briefing on child rights issues in Tajikistan ahead of the EU-Government of Tajikistan Human Rights Dialogue in 2014. As a result, child rights featured for the first time in this dialogue platform. The partnership with the EU was further strengthened on the basis of the joint EU-UNICEF Child Rights Toolkit, which was launched at the end of 2014 and will prove to be a foundation for further joint work.

UNICEF also engaged proactively with the first ever joint UN Department of Political Affairs, UN Office of the High Commissioner for Human Rights and UNICEF human rights mission within the framework of the “Rights Up Front” initiative, by ensuring child rights issues were fully taken into account by the mission.

**Gender Mainstreaming and Equality**

UNICEF’s work on girls’ education entered a new phase with a partnership with NGO ‘Initiative of Youth of Tajikistan’. The aim of the partnership is to increase the transition rate of girls from grade 9, the last year of compulsory education, to grade 10. The project is initially being implemented in Isfara and Rasht districts. Youth volunteers involved in the project will use C4D techniques to spread awareness on the importance of girls’ education among schoolchildren, teachers, parents and community leaders and the public. Girls will form clubs in which they pledge to continue their education at least until grade 11 and will support each other and hold each other to account for their pledge. They will also bring in adults who are willing to support them in reaching their ambition, gradually leading to whole communities taking a pledge for girls’ education. The project is based on best practices in C4D. It is expected that the initiative will spread to other districts which have a low transition rate of girls to grade 10.

The UNICEF Country Management Team (CMT) agreed to the country programme undergoing a new gender assessment in the first quarter of 2015, with support of the Regional Office. The last gender assessment was conducted in 2010. The gender assessment will inform the next country programme by suggesting entry points for the integration of gender across programme outcomes and outputs.
UNICEF played an active role in the United Nations Development Assistance Framework (UNDAF) preparation process to ensure that gender equality would be firmly integrated in the next UNDAF document and results framework. UNICEF partnered with UNWOMEN and the UN Gender Theme Group to achieve this. The aim is to ensure standalone outcome on gender equality and women’s empowerment as well as the mainstreaming of gender considerations throughout all UNDAF outcomes.

Environmental Sustainability

Tajikistan is highly vulnerable to the effects of climate change, and environmental sustainability is under severe threat, with potentially devastating impact for today’s and tomorrow’s children. The process of design of the 2016-2020 country programme of cooperation is providing an opportunity to fully integrate these considerations into UNICEF’s Tajikistan’s programme activities and operations.

Effective Leadership

The office governance arrangements established in the Annual Management Plan (AMP) functioned well in 2014.

The CMT met three times. Agenda items included: the adoption of the AMP; revision of standard rates for Implementing Partners; revision of table of authority and in-house Committees; revision of Audit observations for the region, and; optimization of office work processes. Management indicators, implementation of the Integrated Monitoring and Evaluation Plan (IMEP), opportunities for fundraising and staff association issues were addressed at each meeting. The final CMT meeting of the year was joint with the Annual Management Review Meeting. It took stock of implementation of the Management Plan and agreed changes required for 2015.

A working group met in June 2014 to review office work processes and workflows to identify further efficiency gains. Recommendations were presented to the CMT for approval. As a result, some processes were streamlined, including: petty cash management, procurement for amounts below US$2,500, and raising of purchase requisitions. The Contract Review Committee ceiling was raised to US$25,000 from US$10,000 for supply-related cases and US$15,000 for human resource-related cases.

The Contract Review Committee met to review and recommend 21 cases for the Representative’s approval in 2014. Given that the office had detailed programme-focused weekly meetings and that many ad hoc programme meetings were held throughout the year, only one formal Programme Coordination Meeting was held in 2014, which focused on the review of IMEP, update of Early Warning and Early Action template (EWEA), coding of country programme results in line with UNICEF Strategic Plan 2014-2017, Theories of Change and Direct Cash Transfer (DCT) status.

The Local Training Committee met three times in 2014. The Committee reviewed and endorsed the Office Training Plan, as well as individual staff training requests, which were passed to the Representative for approval. The Joint Consultative Committee (JCC) met twice in 2014. Major issues included: a) Introduction and implementation of an updated travel policy; b) Field Monitors’ Concerns; c) Change of the office’s bank, d) Use of staff welfare funds and e) Selection of Peer Support Volunteer. The JCC also considered the results of the regional staff morale survey. The PCA Review Committee reviewed four cases in 2014, which were passed to the Representative for approval. Other committees met as required.
As part of risk mitigation measures, staff’s VISION roles were reviewed and the Table of Authority (TOA) was updated twice in 2014 to ensure proper segregation of duties. The following VISION work processes were reviewed internally and briefing for all staff was organized on: supply and procurement, VISION roles, supporting documents, internal controls, segregation of duties and the Harmonized Approach to Cash Transfers (HACT).

In preparation for the Regional Programme and Budget Review (PBR) on CEE/CIS transition to the Global Shared Services Centre (GSSC), the office conducted a review of work processes and practices to identify opportunities for efficiency gains to be derived from the GSSC. The staffing structure, VISION transactions and other office off-line work processes and arrangements were reviewed and analysed, such as Information and Communication Technology (ICT), administration, driving services, inventory, and warehouse arrangements.

Financial Resources Management

In 2014, the Tajikistan office continued implementation of HACT and simplified procedures on issuance and liquidation of DCTs by using the Funding Authorisation and Certificate of Expenditure form modality. A lot of attention was given to assurance measures, such as field visits and spot checks. Each DCT payment was accompanied by a DCT monitoring plan, which included programmatic and financial monitoring. Each DCT liquidation was accompanied by a report on the findings of the monitoring.

The Deputy Representative, Operations Manager and Administration/Supply Officer attended a regional HACT training in Chisinau in September 2014. An in-house briefing was conducted on the updated HACT framework for all staff during the staff retreat in October 2014. A HACT focal point for the office was identified.

Micro assessments of four community service organisations (CSO) were carried out jointly by Education, Health, Child Protection and Operations sections as part of ongoing HACT audit assurance activities.

Standard Rates for Implementing Partners were reviewed and updated in February 2014, considering increased market rates.

Outstanding DCT balances were closely monitored, reported and followed up with the responsible programme sections and the partners on a weekly basis. At year-end, the outstanding DCT balance above 6 and 9 months was reduced to 0 per cent of the total DCT amount paid in 2014.

Good utilization rates were achieved in 2014. Utilization of regular resources non-grant funds reached 97 per cent and utilization of expiring Other Resources (OR) grants stood at 100 per cent at the end of the year. Utilization of the Institutional Budget was 100 per cent.

Bank reconciliation was processed on time. The few reconciling items were regularly reviewed, followed up and cleared in a timely manner.

The TOA was reviewed and updated twice in 2014 and Delegation of Authority and Acceptance for each individual with TOA roles in the office were produced as per the requirements.
**Fund-raising and Donor Relations**

The fund-raising environment in Central Asia, and in Tajikistan in particular, continues to be constrained, but within this constrained environment 2014 was a successful year for UNICEF Tajikistan’s fund-raising efforts. A total of US$2.6 million of OR was mobilised in the course of the year, of which just under 10 per cent consisted of global thematic funding. Grants were received (in descending order of magnitude) from the United States Agency for International Development (USAID), World Bank, the UNPRPD Trust Fund, UNAIDS and UNDP. The office was especially successful in mobilising funds for the health and nutrition programme (over 80 per cent of newly mobilised funds in 2014). The funding situation is much less positive for the education and child protection programmes. In education, resource mobilisation is urgently required. Global thematic funding for the programme received in 2014 was appreciated, but insufficient in view of the resource requirements of the programme. In child protection, continuity of UNICEF’s work on justice for children is at risk as a major grant from the Swiss Development Corporation (SDC) ended, with no immediate prospects of funding for this results area.

The office was less successful in mobilising resources for humanitarian action. Tajikistan was part of the CEE/CIS Regional Chapter of Humanitarian Action for Children in 2014 and estimated its funding requirement at US$496,800. However, no funds were mobilised.

Given its success in mobilising OR in 2014, a further increase in the OR ceiling was sought and approved. The ceiling now stands at US$19,000,000.

In 2014, the office continued to give top priority to the timely submission of quality donor reports. A total of 13 donor reports were submitted. One of these was submitted slightly late due to an oversight.

**Evaluation**

Tajikistan country programme greatly improved its record on evaluations, by initiating two evaluations in 2014: the Youth Friendly Health Services (YFHS) Programme Evaluation and the Final Evaluation of the Juvenile Justice Alternatives Project (JJAP).

The YFHS Evaluation was completed and a management response will be formulated upon a full discussion of the findings and recommendations with stakeholders in early 2015. It received a satisfactory rating by the Regional Monitoring and Evaluation facility. The evaluation of the YFHS programme was undertaken at a critical time when donor funding for these centres is coming to an end. The evaluation findings will help stakeholders consider how these services can be sustained within the Government’s own resources and further scaled up across the country.

The JJAP evaluation will be finalised early in 2015. Its results will feed further policy dialogue on the best approaches towards diversion and alternative sentencing for children in conflict with the law. It will also support further expansion of the juvenile justice work towards prevention of crime and moves towards a broader justice for children approach. This would respond to the needs of not only children in conflict with the law, but also those of child victims and witnesses of crime, and children involved in court proceedings. The findings of the evaluation will be used by Government to inform the next version of the National Plan of Action on Juvenile Justice. UNICEF will use the findings to inform the next Country Programme, its advocacy and fundraising efforts.

The IMEP is updated on a regular basis and describes all office plans related to surveys,
studies, evaluations, monitoring systems and capacity development. The implementation of the IMEP was reviewed on a regular basis throughout the year. By the end of 2014, 69 per cent of planned studies and evaluations were implemented.

**Efficiency Gains and Cost Savings**

In 2014, the office continued to implement all possible measures to further reduce operational costs. The following cost control measures were implemented:

- Purchasing non-refundable rather than full fare air tickets, resulting in an estimated US$49,890 in savings;
- Better travel planning and coordination, early booking, scrutinizing travel options and travel days kept to the minimum necessary;
- Reduction of overtime; and avoidance of local travel during weekends, unless absolutely necessary;
- Use of cheaper venues for meetings and other events, using, whenever possible, the office’s conference room or conference facilities of government counterparts;
- Saving on utility bills, particularly by switching off the lights, air-conditioners, computers, printers and backup power supplies when leaving the office;
- More efficient use of VSAT data connectivity, which led a saving of US$16,012;
- Use of VOIP (Voice over Internet Protocol) for international calls rather than the local telephone system;
- Field monitors performed their duties from their respective home locations, which resulted in saving on rent of US$2,790;
- Negotiation in November of a better currency conversion rate from Tojiksodirot bank, which led to approximate financial gain of US$500 per month.

In addition, the relocation of emergency supplies from the United Nations Emergency Reserve in Tajikistan warehouse in Kurgan Tube to the Committee of Emergency Situations (CoES) warehouse in Dushanbe in 2013 brought a saving of US$11,452 in 2014.

**Supply Management**

The supply component of the Country Programme in 2014 amounted to US$1,914,470.81, which consisted of:

- Programme Supplies - US$1,593,537.31
- Operational Supplies - US$49,621.06
- Services - US$271,312.44

The office continued to facilitate Procurement Services between Supply Division, Government and other international agencies. The total value of Procurement Services was US$4,915,903.56, for the following partners:

- Tajikistan GAVI - US$2,937,626.83
- UNDP (Global Fund) - US$877,517.21
- MOHSSP Tajikistan - US$801,407.40
- UNFPA Headquarters in Denmark - US$202,794.12
- Japan International Cooperation - US$96,558.00

A number of services were identified for management under the 2014 UN common procurement plan during the year, including: a) vehicle rent: ongoing, led by FAO; b) vehicle maintenance
and provision of spare parts, led by UNICEF, to be finalized in early 2015, and; c) travel services, led by UNDP, which commenced in 2013 and an LTA signed in 2014.

The office continued to use CoES and Republican Medicines Procurement Centre (RMPC) warehouses for storage of pre-positioned emergency items. The total value of supplies received during the year was US$8,118.68. The value of the inventory is US$222,752.16. No supplies were issued from the warehouses in 2014.

A non-expendable property physical count was carried out once and a programme supplies physical count twice in 2014, with no reconciling items.

In 2014, the office engaged a consultant on emergency supply management who analysed and provided recommendations on emergency supplies requirements in the most likely humanitarian scenarios. This led to proposals for more rational prepositioning and the establishment of Long-Term Agreements (LTAs) and PCAs. The recommendations will be taken forward in 2015.

**Security for Staff and Premises**

UNICEF received full support from the UN Department for Safety and Security (UNDSS) on safety and security-related issues.

Trainings and drills were arranged by UNDSS, including first aid training, use of communication equipment for staff with security responsibilities and a warden training for zonal wardens.

An earthquake and fire safety drill exercise was conducted for UN staff located in the common premise building in November 2014 and a warden drill exercise for all UN staff in December 2014.

A radio check was carried out weekly for Security Management Team members, Agency Security Focal Points and Wardens. Security briefings were conducted for all visitors (staff and consultants) within five working days upon arrival.

Regular security updates, including daily updates on road conditions are received from UNDSS.

Measures were taken to increase the office’s compliance with the UN Minimum Operational Security Standards, including:

- Replacement of obsolete fire extinguishers with new ones,
- Enhancement of the office’s card access system equipment by installing panic and door unlock buttons;
- Replacement of two obsolete Mini M satellite phones with new Thuraya satellite Phones.

The UNICEF Tajikistan Business Continuity Plan (BCP) was reviewed with help from the Operations Manager from the Kyrgyzstan office. A successful BCP drill /simulation exercise was conducted at the relocation site in November. During the drill, the office checked its readiness to provide uninterrupted services during an emergency event: ICT services, communication means and mechanisms, remote access to UNICEF business applications, and the office warden system. Key office staff were allocated internet USB modems and laptops as per the BCP.

Tajikistan’s Early Warning Early Action pages were regularly reviewed and updated throughout the year. The threat levels in Tajikistan did not change in 2014. Key actions and preparedness activities were discussed during the programme and annual management review meetings and will continue to be included in the rolling work plans.
Terms of Reference for the Emergency Preparedness and Response Team were adopted by CMT in early 2014. In October, the Regional Office Emergency Section conducted a half-day workshop to refresh knowledge and check progress made since the Emergency Preparedness and Response training in October 2013. Several programme staff members participated in the cross-border simulation exercise between Kyrgyzstan and Tajikistan in Sughd region of Tajikistan.

A full-fledged Risk Control Self-Assessment (RCSA) with Regional Office’s support could not take place as planned in 2014. The office expects to conduct an in-house RCSA exercise in early 2015. A working group consisting of programme and operations staff was established for this purpose.

**Human Resources**

Full transparency was maintained in staff recruitment and placement processes during the year. All vacancies were given wide dissemination through the UN Tajikistan website, newspapers and 'global broadcast'. In 2014, 12 recruitment cases, including Fixed Term (FT) and Temporary Appointment (TA) positions were completed, using the Competency Based Interviewing model. Subject Matter Experts from RO were involved whenever required. One recruitment case for the Communication Assistant position is ongoing.

As a result of a review of staffing in the context of effectiveness and efficiency, the redundancy of one driver’s post was identified. To ensure a transparent recruitment process, the PBR advised the abolition of all five drivers’ posts and the establishment of four new posts. The process of recruitment of drivers and redundancy of one driver was completed.

The office continued to use the Performance Appraisal System (PAS) to promote open dialogue on work plan outputs, competencies and development plan progress. All staff completed their 2013 and the first phase of the 2014 Performance Evaluation Reports on time. In addition, staff members had regular meetings with supervisors to discuss their work, challenges, and career opportunities. All staff were encouraged to have thorough mid-year PAS discussions to address performance needs and issues in a timely manner.

Further to the results of the Global Staff Survey, the office identified the following priorities for action in 2014: staff career and professional development; work-life balance; and improving office business efficiency. The Staff Association led the office in a number of measures to address these priorities.

The office held a three-day staff retreat in October which focused on team building and CPD development. At the retreat, the team signed up to a number of ‘commitments’, to further improve staff motivation and satisfaction levels, aiming to ensure greater efficiency and effectiveness. A further one day retreat was held with to brief the new Representative and further strengthen the team.

The office remained committed to UN Cares on HIV at the workplace and the focal point regularly shared with staff the available info/links on the topic.

The Office Training Plan was finalized in June. Most of the training activities (86 per cent) were completed, including English Business Writing, UNICEF Programme Policy and Procedures, and C4D trainings, which were identified as office priorities. Other learning opportunities which
were taken up by one or more staff members included: Post-Disaster Needs Assessment; Leadership Development Programme; Dynamic Leadership Certificate; Equity; Quality/Leadership in Education; Advances in Social Norms; Procurement of institutional services; First Aid; HACT framework; Warehouse/Inventory Management; Supply Dashboard Training; Emergency Telecommunication; Peer Support Volunteer. The remaining 14 per cent of activities either did not take place or were not pursued by the requesting staff.

In 2014, the office supported the following opportunities for staff to be engaged in development assignments:

- Nutrition Specialist to oversee the nutrition survey and provide Nutrition in Emergency Training to the counterparts in Turkey;
- Programme Assistant, Child Protection for administrative arrangements for the Regional Conference on strengthening child protection systems in Geneva and Minsk.

**Effective Use of Information and Communication Technology**

The office completed all ICT planned tasks and software/hardware upgrades and updates, including migration to the Office365 environment, hardware and software upgrades of servers and user workstations, and deployment of new solutions.

In line with modern technologies and in order to increase effectiveness and efficiency of office operations, a new set of ICT equipment with a higher performance was ordered, including laptops, satellite phones, printers and a photocopier.

The Office365 environment was successfully introduced, including installation of MS Office 2013; migration to Microsoft Outlook replacing Lotus Notes; MS Lync replacing WebEx; changing global e-mailing architecture from distributed Domino servers managed by Field Offices to a centralized Exchange server outsourced to the Microsoft Corporation.

The Riverbed Steelhead appliance was installed, which contributed to improvement of business applications’ performance, such as SAP, Service Manager, Intranet/Icon, APPROVA, ftp, etc.

The office continued benefiting from cost saving measures in VSAT data connectivity, with a saving of US$16,012.

VSAT migration to C-plan 162-349 was implemented, which improved efficiency in service delivery and provided a better latency.

In November 2014, a Business Continuity Plan simulation exercise was held, where vital ICT solutions and services were successfully tested. Internet USB-modems were ordered for key staff to provide immediate access to internet in case of an emergency, thus mitigating business continuity risks.

The ICT assistant participated in the UNICEF Emergency Telecommunication Training, which contributed to an increase of the office capacity in terms of ICT emergency response and ensured compliance as per the Emergency Preparedness Checklist of EWEA.

UNICEF Tajikistan has a growing internet and social media presence, with an internet page, Facebook, YouTube, Flickr and Twitter accounts established.
ANALYSIS BY OUTCOME AND OUTPUT RESULTS

OUTCOME 1 Effective and efficient programme management and operations support to programme delivery

Analytical Statement of Progress:

OUTPUT 2 Effective and efficient management of Human Capacity

Analytical Statement of Progress:

The Office Training Plan was finalized in June. Most of the training activities (86 per cent) were completed, including English Business Writing, UNICEF Programme Policy and Procedures, and C4D trainings, which were identified as office priorities. Other learning opportunities which were taken up by one or more staff members included: Post-Disaster Needs Assessment; Leadership Development Programme; Dynamic Leadership Certificate; Equity; Quality/Leadership in Education; Advances in Social Norms; Procurement of institutional services; First Aid; HACT framework; Warehouse/Inventory Management; Supply Dashboard Training; Emergency Telecommunication; Peer Support Volunteer. The remaining 14 per cent of activities either did not take place or were not pursued by the requesting staff.

The office greatly benefited from the visit of the Operations Manager, Kyrgyzstan, who assisted with the update of the BCP and the BCP drill exercise, in which the office checked its readiness to provide un-interrupted services during an emergency event.

In 2014 the office supported development assignments for two staff members:

- Nutrition Specialist: 5 weeks mission in Turkey to oversee the planned nutrition survey and provide Nutrition in Emergency Training to the counterparts
- Programme Assistant, Child Protection: 3 weeks assignment in Geneva and Minsk to assist the Regional Office in the administrative arrangements in preparation for the Regional Conference on strengthening child protection systems.

Eleven recruitment cases were completed, as follows:

- Two National Officers (FT): Health Specialist and Nutrition Officer;
- Four General Service posts (FT): Drivers (following PBR recommendation);
- Two TAs: National Officer (Admin/Supply Officer) and General Service (Supply Assistant). This was due to the separation of two staff in the supply unit at the end of 2013/early 2014 and a freeze in recruitment of operations and programme General Service staff as part of the organisations’ GSSC implementation plan. As such, two supply staff members were hired on TA contracts. The office greatly benefited from the assistance of the Admin/Supply Assistant from Turkmenistan during the period of recruiting the two new staff.
- Three service contracts: Field Monitors.

Two recruitment cases are ongoing: Programme Assistant, Health and Communication Assistant.

Following the Senior Staff Rotation Exercise, the previous Representative left UNICEF Tajikistan in September and the new Head of Office arrived in October.
Four Job Descriptions (General Service posts) and one Job Profile (National Officer) were updated and reclassified. An exercise on updating outdated Job Descriptions is ongoing.

All staff completed their 2013 and first phase of 2014 Performance Evaluation Reports on time; and nearly all staff completed their mid-year 2014 appraisal reports. In addition to the official performance appraisals, staff members have regular meetings with managers and supervisors to discuss their work, challenges, and career opportunities.

**OUTPUT 3** Effective and efficient Management and Stewardship of Financial Resources

**Analytical Statement of Progress:**
The outstanding DCT balances continued to be regularly and closely monitored and followed up on a weekly basis. The un-liquidated DCT balance above 6 and 9 months is 0 per cent.

Micro assessments of four CSOs were carried out jointly by Education, Health, Child Protection and Operations sections as part of ongoing HACT audit assurance activities.

The office’s Standards Rates were reviewed and updated in February 2014, considering increased market rates.

In June a comprehensive salary survey was successfully conducted by UN agencies, including UNICEF. The results of the survey are yet to be announced.

An outstanding Value Added Tax refund for 2013 was received in June 2014 after intensive follow up with the relevant authorities. The refund for 2014 was received partially.

From November, the office negotiated a better currency conversion rate from Tojiksodirot bank (an additional 0.2 per cent to the official US Dollar to Tajik Somoni conversion rate of The National Bank of Tajikistan) which led to an approximate financial gain of US$500 monthly. As per the Annual Supply Plan for 2014, the Supply Unit, with the support of Programme Sections, completed all procurement cases. A request for Expressions of Interest to identify and prequalify new potential vendors for the most common used categories of programme supplies was announced. The evaluation of the received expressions of interest is ongoing. Three printing companies were prequalified and LTAs signed.

In December 2014, the office announced two Invitations to Bid for provision of internet services (to increase the bandwidth) and for provision of institutional cleaning services, moving away from the current arrangement with cleaners on UNDP service contracts. Both cases are planned to be completed within first trimester of 2015.

In accordance with the UN Common Procurement Strategy Team plan for 2014, the following categories of services and supplies were identified for implementation under the common procurement scheme in 2014:

- **Vehicle rent:** the process is ongoing under the leadership of FAO;
- **Vehicle maintenance and provision of spare parts:** led by UNICEF. Recently, Supply Unit has received inputs from the UN Agencies. The case will be announced in the beginning of 2015 and finalized within the first trimester of 2015;
- **Travel services:** The process of identification and recruitment of a travel service provider for the UN started in 2013 and was completed in 2014. It was led by UNDP, with full participation of UNICEF. As a result, an LTA was signed with the service provider in 2014.
In 2014, the office continued using two warehouses to store emergency supplies: RMPC warehouse for storing of perishable items and COES warehouse for storing of non-perishable emergency items on cost-sharing basis with UNDP.

During August and September, the office engaged a consultant on emergency supply management, with the purpose of identifying the emergency supplies required in the most likely humanitarian scenarios in the country; establishment of cost-effective strategies for sourcing of emergency supplies; development of a warehouse strategy; and identification of the need to establish LTAs for certain categories of goods and services. The Consultant provided an adequate assessment with analysis and recommendations related to various humanitarian scenarios. In the first trimester of 2015, recommendations will be discussed and agreed with office management for further implementation as relevant.

OUTPUT 4 Effective and efficient Governance and Systems

Analytical Statement of Progress:
The established office governance systems continued to function. In-house committees functioned effectively and efficiently and their membership was reviewed and updated by the CMT twice in 2014, in February and December.

The Operations team organized refresher sessions for the office staff on several critical work processes in VISION, including those related to supply and procurement, VISION roles, supporting documents, internal controls, segregation of duties and HACT.

The quality of supporting documents was constantly monitored. All payments and DCT liquidations were processed within 5 working days. Payment runs were normally done twice a week. The payroll was processed timely and error free.

The Table of Authority was reviewed and updated twice in 2014: in February and November 2014, in accordance with segregation of duties requirements and following staff changes in the office.

A working group met in June to review office work processes and workflows for the purpose of identification of further efficiency gains. Recommendations were presented to the CMT for approval. As a result, some of the processes were streamlined, including petty cash management, procurement for amounts below US$2,500, and raising of purchase requisitions. The Contract Review Committee ceiling was raised from US$ 10,000 for supply related cases and US$15,000 for HR related cases to US$25,000 for both types of procurement.

In June, the office participated in the Regional PBR on CEE/CIS transition to the GSSC. In preparation of this exercise, the office conducted a review of office work processes and practices to identify and assess opportunities related to potential and anticipated efficiency gains to be derived from the GSSC. The staffing structure was analysed, particularly for posts linked to Financial and HR related transactions. Thirty-four VISION in-scope and out-of-scope workflows were assessed for an estimation of full time equivalence. Additionally, out-of-scope office work processes and arrangements were reviewed and analysed, such as ICT, administration, driving services, inventory, and warehouse arrangements. In the context of efficiency and effectiveness, the office identified the redundancy of one driver’s post. Upon advice of the PBR, all five drivers’ posts were abolished and a new recruitment was initiated against the four remaining drivers’ positions to ensure a fair and transparent selection process.
Two out of 15 audit recommendations from 2010 remain outstanding and continue to require attention. This includes the development of an advocacy strategy. While an informal advocacy strategy is in place, it is not formulated in a consolidated document. The development of a HACT implementation plan jointly with other UNDG agencies is also pending. While UNICEF shifted to HACT as of 2012 and is following its principles, many other UN agencies are not HACT-compliant and do not have a strong desire to work in this direction. A common HACT modality is not yet adopted and a UN Common Activity Assurance Plan is yet to be developed. In September, the Deputy Representative, Operations Manager and Admin/Supply Officer attended a training on the updated HACT framework in Chisinau, Moldova following which an in-house HACT briefing was conducted for all staff during the staff retreat in October.

OUTCOME 2 By 2015, there is an increase in the proportion of vulnerable children who benefit from alternative community-based social services, family substitute care and alternatives to incarceration.

Analytical Statement of Progress:

OUTPUT 1 By 2015, improved policies, practices and services to effectively prevent and respond to unnecessary institutionalization of children (especially children under three and children with disabilities).

Analytical Statement of Progress:

With UNICEF advocacy, a Working Group on CWD was established under the Ministry of Health and Social Protection that reports to the inter-agency Coordination Council under the Government of Tajikistan on Social Protection of People with Disabilities. In 2014, a draft Law on Child Rights and Child Protection was drafted for adoption by the Parliament, with UNICEF successfully advocating to have a comprehensive law instead of three different laws related to child rights.

UNICEF had supported in 2013 the Practical Training Unit for Social Work and Innovations under the Ministry of Health and Social Protection to develop a three day training that was initially delivered to 20 Social Workers from the Social Assistance at Home Units from selected districts. UNICEF collaborated in 2014 with the same Unit to work further on the modules for training and build the capacity of the Social Workers from priority districts, where they will be awarded with State-approved certificates.

UNICEF, together with its partners, specifically WHO and UNDP organised the first ever CBR Conference in Tajikistan that brought together more than 300 people, sharing good experiences and resulting in the Government expressing its commitment to further strengthen its work towards CBR.

Ten Day Care Centres for rehabilitation of CWD were set up in the country, funded by the Ministry of Health and Social Protection within the framework of the Law on purchasing services and run by local NGOs. UNICEF supported an NGO to a first centre of this kind in Rasht, providing basic supplies and building the capacity of 16 staff in the centre.

UNICEF commenced support for the establishment of new Associations of Parents of CWD in 2013. There are now 28 member associations, who reach out to other parents to empower them to demand the rights of their children, including their right to community-based services.

UNICEF led the coordination group for International Disability Day and jointly with UN Agencies
carried out an advocacy campaign for CWD in 2014, including Winter Handicraft Fair, involving more than 4,000 people and 20 organisations over 2 days. In partnership with the EU, a fundraising event was organised to launch the joint EU/UNICEF Child Rights Toolkit and funds were collected to support the Coalition of Associations of Parents of CWD to implement their strategic plan for 2015.

Under a Memorandum of Understanding, UNICEF is working with local NGOs and international NGO Health Prom to support the establishment of social services for vulnerable young children, in particular a pilot model of foster care.

UNICEF conducted a rapid assessment of children in institutions, including children in baby homes and CWD in state care. The study resulted in evidence-based recommendations on how to address gaps in policies and practices, as well as strengthen protective structures and mechanisms in response to unnecessary institutionalization of children in Tajikistan. The assessment found that only a small minority of children in institutions in Tajikistan are orphans and the main driver for placement of children is poverty and single parenthood.

With this outcome, UNICEF Tajikistan contributes the Regional Knowledge and Leadership Agenda, result 1, children’s right to a supportive and caring family environment.

OUTPUT 2 By 2015, children in contact with the law are treated more in compliance with international norms and standards on justice for children.

Analytical Statement of Progress:
With UNICEF advocacy and technical support, a specialized juvenile justice department under the MoJ and an Interagency Working Group were established to support and expedite the implementation of the national plan of action on juvenile justice reform.

Centres of Additional Education (CAE) that are under the Ministry of Education and Science (MoES) provide psychosocial support to children in conflict with the law and at risk of offending. Since 2010, a total of 586 children in conflict with the law and at risk of offending were referred to the CAE. A Working group established under the MoES has drafted a new typical regulation for the CAE to allow implementation of Juvenile Justice Alternative Programmes (JJAPs) as part of the regular services of the CAE. The Ministry of Education shared the typical regulation with relevant ministries and other agencies for their feedback.

UNICEF supported the Training Unit under the Ministry of Health and Social Protection to develop a short-term course on Social work and Children in contact with the Law, to be provided to the staff of Child Rights Units and staff of CAE working as Social Workers. In total, 13 social workers have so far completed this 18 day course.

UNICEF collaborated with the relevant agencies and supported Master Trainers to develop training packages for police, prosecutors and judges, which will lay the foundation for mandatory training on juvenile justice in national training institutes. Specialized courses have been introduced at the Tajik National University and the Police Academy on child rights and juvenile justice. Work is ongoing to incorporate a juvenile justice curriculum for judges and prosecutors as well. More than 250 judges, 185 police officers, 50 prosecutors, 22 defence lawyers and the staff of the Child Rights Units from the JJAP districts were trained on international and national standards of child rights justice for children.

The Council of Justice, with support from UNICEF, established seven child-friendly court rooms

A Child Rights Department was established under the Office of the Ombudsperson to defend and protect the rights of children. Research carried out by this Department and a national NGO on torture and ill treatment of children in the justice system revealed existence of torture of children and made recommendations for its prevention.

An evaluation of the SDC-funded Juvenile Justice Alternatives Project was initiated. Once completed in early 2015, the findings of the evaluation will inform the future direction of work under this output.

The lack of a legislative basis for CAE, absence of officially trained social workers and insufficient provisions in legislation to allow the use of diversion and alternatives are bottlenecks that UNICEF is working to address for realisation of the expected results. In doing so, UNICEF contributes to the CEECIS Regional Knowledge and Leadership Agenda result 2 – children’s right to access to justice.

**OUTCOME 3:** By 2015, children will have increased access to the preschool and basic education system, with particular focus on providing opportunities for out-of-school children, and the quality of education will be improved through a strengthened policy environment.

**Analytical Statement of Progress:**
**OUTPUT 1:** By 2015, the educational framework is improved to ensure better quality basic education in up to 12 priority districts.

**Analytical Statement of Progress:**
The quality of education in Tajikistan is in need of improvement, where teaching-learning techniques are predominantly teacher-centred. To meet the needs of students in Tajikistan and to further advance the quality of education throughout the country, UNICEF, under the framework of the RKLA #4: Including All Children in Quality Education, partnered with the Tajik State Pedagogical University to develop, train, and offer courses in pedagogical approaches for the pre-service teachers.

In order to ensure that students training as teachers are inducted in a variety of pedagogical approaches that promote a child-centred structure, it was found important that university professors master the necessary knowledge of innovative teaching techniques, skills and abilities. To that end, the project has two components:

i. Strengthening the pedagogical methodologies amongst the faculty and teaching staff of the Tajik State Pedagogical University;

ii. Developing the pedagogical skills of Pre-Service Teachers;

A course was developed for faculty and nine staff have been trained as trainers. Through this approach, over 40 faculty staff were trained to improve and vary their pedagogical approaches. A course was developed in partnership with the faculty of the University on pedagogical approaches, which will be integrated into the curriculum for pre-service students commencing September 2015.

The most current data (from 2013) indicates that in Tajikistan, approximately 260 of a total 3,747 schools have some aspect of multigrade teaching occurring in their school. As a result,
more than 7,000 students and approximately 300 teachers are engaged in education in multigrade classrooms. However, there is no specific training for these teachers or other education officials. In addition, there are no teaching and learning materials to support the learning environment in these complex classrooms. In response, in August UNICEF supported an International Conference on Multigrade Teaching and Learning which drew upon experiences of countries in the region to develop an action plan for future development in this area in Tajikistan. To improve the quality of education in multigrade classes, UNICEF is working alongside the Academy of Education to strengthen the policy framework, to develop teaching and learning materials, and to develop an in-service teacher training course on multigrade teaching and learning.

As the Education Cluster lead for Education, UNICEF has worked to strengthen the preparedness planning for the Cluster to respond to and mitigate the impact on the education system in the event of an emergency. A Contingency Plan was finalised, with feedback from Cluster partners and regional Cluster leads. In addition, an assessment tool was developed for the education cluster, in a collaborative process with partners.

In a holistic approach to improve quality of education, UNICEF is working towards the model of Inclusive Education, within Tajikistan. Building on the establishment last year by UNICEF of a working group, in 2014 a booklet was developed for publication which aims to increase awareness at the school and community level regarding the right of all children to access quality education in a mainstream school.

**OUTPUT 3:** By 2015, the number of children (including children with disabilities, children from disadvantaged social backgrounds, girls, children of ethnic minority, and children with multiple disadvantages) have increased access to education.

**Analytical Statement of Progress:**
The Out-of-School Children (OOSC) Study conducted by UNICEF with the UNESCO Institute for Statistics found that there were 674,955 primary-aged children aged 7 to 10 years old in 2010, with an estimated 15,013 out-of-school (2.2 per cent). In addition, there were 864,896 lower-secondary-school-aged children between the ages of 11 and 15, and an estimated 31,386 of them were out-of-school (3.7 per cent). The study found that the majority of these children were girls, children with disabilities, children of migrant parents; children working and living on the street; orphans; and children at conflict with the law.

From 2010 until 2013, UNICEF had been working towards addressing issues related to girls’ education. But, as a result of the findings of this study, it was decided at the Mid-Term Review (MTR) to create a new Output to address all issues relating to out-of-school children, including, but not limited to girls. Work undertaken in 2013 laid the groundwork for the changes, in raising capacity and understanding of issues related to OOSC, and establishing a working group to address issues related to OOSC.

To facilitate this work, under the Regional Knowledge and Leadership Agenda (RKLA) #4: Including All Children Out of School in Quality Learning, UNICEF supported the establishment of a Working Group on OOSC, under the Ministry of Education and Science. To address the bottleneck in a lack of pathways for OOSC to complete their basic education, UNICEF and the Working Group developed the conceptual framework, curriculum for all subjects and levels, teachers’ guide and entry placement tests for an Accelerated Learning Programme which will enable students to complete their basic education and transition back into the mainstream education system or into the workforce.
At the policy level, a considerable challenge in addressing the needs of OOSC has been the lack of available data. This is compounded by a lack of key indicators that are needed to track, monitor, and programme for OOSC. To that end, UNICEF and the Working Group developed indicators and their definitions, including: drop-out and at-risk, which will be adopted by the Ministry of Education and Science in January 2015. A consultant was recruited to develop calculation methodologies for the terminologies and working towards incorporating the definitions and indicators into the Education Management Information System (EMIS), which will result in more accurate representation of the situation, starting from 2015-2016.

In 2014, UNICEF started a partnership with the Committee of Youth Affairs, Sports and Tourism and a youth civil society organisation, Initiative Youth of Tajikistan, to work towards increasing the percentage of girls transitioning from compulsory to non-compulsory education in two districts of Tajikistan, which remains a national concern. A facilitation workshop with youth of two project districts was conducted, whereby participants: a) increased their knowledge and awareness about the importance of girls’ education; b) increased their understanding of behavioural and social change communication theory and practice, and; c) contributed to the development of Information, Education and Communication messages, slogans and materials. The participating youth and adolescents from two project districts are better prepared to promote expected positive attitudes, practices and behaviour of stakeholders to support girls’ education. This work aims to address significant bottlenecks in social norms that is a barrier for girls’ in accessing education.

At the school-level, there are various bottlenecks to children enrolling and fully participating in the education system. To address this, UNICEF works with schools, communities, PTAs, and parents in absenteeism management, UNICEF developed an early warning system to identify children at-risk of dropping out and implement dropout prevention interventions. For this, UNICEF, in partnership with a local civil society organisation, Economics and Education, is modelling the early warning system in 30 project schools in three districts of Tajikistan. This work was complemented with a partnership with another local civil society organisation, which is adding on to the work of the early warning system with an online real-time monitoring system to track attendance and other records in 10 schools of Dushanbe.

OUTPUT 7: By 2015, the education system ensures increased access to an affordable and quality pre-school education system in 12 priority districts.

Analytical Statement of Progress:
In Tajikistan, early childhood education opportunities reach less than 12 per cent of children, the lowest rate in the region.

To work towards increasing access to early childhood education, under the RKLA #3: Early Learning and School Readiness, UNICEF, with the Aga Khan Foundation and Ministry of Education and Science developed a low-cost, half-day model. From 2008, UNICEF has established 184 Early Childhood Education (ECE) models. These centres have been created in the most rural and disadvantaged areas of the country. This model was successfully replicated by local education officials and other partners, totally more than 1,000 ECE centres in Tajikistan, ensuring preschool education access to more than 25,000 preschool aged children. The growing commitment to the expansion of ECE amongst Government and development partners was also reflected in Tajikistan’s Global Partnership for Education Round 4, which has a strong emphasis on ECE. This will result in the further expansion of ECE through the development of 450 new centres and provision of ECE teacher training to 900 ECE facilitators, and a further
11,250 preschool aged children having access to ECE.

To ensure quality teaching and learning in these centres, UNICEF and Aga Khan Foundation previously supported the Academy of Education to revise the ECE curriculum in line with the Early Learning Development Standards. In addition, UNICEF and the Aga Khan Foundation partnered to develop a module on Inclusive Education to ensure that the most marginalized students have access to a supportive and quality learning environment in the early childhood education centres. In 2014, UNICEF supported the Republican Institute for Teacher Training, under the Ministry of Education and Science, to train more than 200 ECE facilitators and management in the revised curriculum.

Despite efforts, early childhood education still remains inaccessible for many children in Tajikistan. To address this bottleneck, UNICEF partnered with Open Society Institute and the Ministry of Education and Science to develop a children’s animation which aims at promoting early childhood development principles. In the first half of 2014, key stakeholders were trained on programming for children, and the development of 25 episodes is underway. It is expected that more than 100,000 preschool aged children will be reached with this programme. In addition to contributing to RKLA #3, this work also contributes to RKLA #7: Young Child Well-Being.


With UNICEF support, the Parliament passed the Law on Pre-School Education in 2013, which recognizes alternative models for ECE. To continue the work in strengthening the normative framework of the sector, during 2014 UNICEF supported the Ministry of Education and Science to review and revise existing regulations in order to comply and adhere to the new Law.

OUTCOME 5 By 2015, the Government allocates proportionately more resources to critical social protection sectors (preschool education, neonatal care, family based care and protection) based on evidence and general public support.

Analytical Statement of Progress:
OUTPUT 1 By 2015, disaggregated data on the wellbeing of children is available in a timely manner and used to inform policy and its implementation

Analytical Statement of Progress:
In 2014, UNICEF supported the Agency on Statistics to provide a further update of the regional Transformative Monitoring for Enhanced Equity (TransMonee) database. A country analytical report was prepared on the topic of alternative forms of childcare in Tajikistan.

The UNICEF partnership with the Agency on Statistics resulted in a revision of the Tojikinfo database, which now has approximately 200 child rights-related indicators. The capacity of Tojikinfo administrators in the Agency on Statistics was enhanced through training in-country and a Training of Trainers organized in India. Data on children and women is available for users through the re-launched Tojikinfo web page. A partnership with the Ministry of Economic Development and Trade (MEDT) is in place, which gave an opportunity for the MEDT employees to get acquainted with Tojikinfo and its possibilities to track implementation of national and district-level development plans. MEDT district-level data will be uploaded to the
Tojikinfo web site and further opportunities for application of Tojikinfo in the Ministry will be explored.

UNICEF piloted a district ranking that allows a systematic comparison of districts on the status of child rights, using a standardised set of indicators. A ranking methodology was prepared and a list of child rights indicators formulated. Data for select districts was collected from local and national institutions according to the list of indicators, in order to assess the feasibility of the index and to demonstrate its usefulness. The methodology for district child rights ranking was finalised successfully and will form the foundation of a first national district child rights ranking in 2015. It is anticipated that the district ranking will raise awareness of child rights and prompt concerted efforts to improve the situation of children at district level.

OUTPUT 2 Strong Partnership for children's rights is developed with mass media, national and local government, civil society and other development partners

Analytical Statement of Progress:
UNICEF supported the Child Rights Syllabus’ Working Group to adapt and translate the Child Rights Course for journalists into the Tajik language and to present it to the Ministry of Education and Science for acceptance and introduction of this course to all journalism faculties and departments at tertiary level in the country.

The office organised two consecutive C4D workshops for staff and partners. An international consultant in co-facilitation with a C4D Specialist from the Uzbekistan Country Office conducted the workshops using the global 5-day C4D learning workshop agenda and regional learning materials. The capacity of staff and partners to promote social norms, cultural behaviour and collective practices which promote children’s rights was boosted significantly.

UNICEF Tajikistan continued to disseminate key messages, update both global and national media about children’s situation in Tajikistan, feed UNICEF websites, including social media with news on the country programme activities and strengthen UNICEF visibility during activities and at project sites. The office created additional social media platforms on Flickr and Twitter in order to highlight UNICEF programme activities in Tajikistan and pursue public advocacy.

To mark the 25th anniversary of the Convention on the Rights of the Child, UNICEF organized a series of successful activities and events. A series of radio talks on different aspects of child rights were broadcast throughout the year in the run up to the 25th anniversary. On 20 November, the State of the World’s Children 2015 Report was launched, alongside a new “Mother and Child Health” booklet. This local innovation contains critical information about the first 1,000 days of the child’s life from conception and allows parents and caregivers to record important information on their children such as immunizations received. The booklet will be provided to each pregnant woman from 2015 onwards. The CRC@25 event also highlighted innovation for inclusion within the #IMAGINE project, by a children’s inclusive choir of children with and without hearing impairments. The children sang and signed John Lennon’s song in Tajik and English. The CRC@25 celebration also included the launch of the UNICEF Hot Air Balloon during a visit of the “Flying High for Kids” project. The balloon was inflated and flown in front of an audience of 5,000 in Kurgan Tube city. This attracted considerable attention from the media and provided another opportunity to raise awareness of child rights issues.

The office mobilised the private sector in Tajikistan to raise funds for the Coalition of Associations of Parents of Children with Disabilities, during a gala dinner, which also saw the
launch of the EU-UNICEF Child Rights Toolkit. UNICEF was also an active partner in the winter handicraft fair in Dushanbe, highlighting the rights of children with disabilities once more.

**OUTPUT 3** By 2015, public policy and budgeting supports child-friendly social sector development.

**Analytical Statement of Progress:**
UNICEF continued its partnership with the MEDT to support the child rights mainstreaming process in six pilot districts. Four of this six completed revised district development plans with more explicit consideration of children’s issues. Collaboration will continue to strengthen the monitoring and evaluation system to track progress made in socio-economic development and in promotion of the realisation of child rights. In the course of 2015, experiences with child rights mainstreaming in target districts need to be documented and disseminated, with the aim of promoting national roll out of child rights mainstreaming into district planning and budgeting processes.

UNICEF continued to lead the development partners in their engagement with Government on social protection reform, as chair of the Donor Coordination Council social protection sub-group. After a slow start to the year, caused by the transfer of the social protection portfolio for the old Ministry of Labour and Social Protection to the new Ministry of Health and Social Protection of the Population at the end of 2013, a productive partnership was established with the Ministry of Health and Social Protection of the Population. At the request of the Ministry, UNICEF led the organization of an international round table on social protection, aimed at enhancing the capacity of Government staff on different aspects of social protection. UNICEF mobilized expertise from Kyrgyzstan and Armenia country offices for this round table meeting. The meeting was the kick-off of the development of a new national Social Protection Strategy. UNICEF provides the lead technical assistance in this process. UNICEF facilitated a series of consultation events with national stakeholders and supported the Government with an international consultant to work towards the design of the new Strategy. Work on social protection reform contributes to the regional CEECIS priority on children’s right to social protection (RKLA 8).

UNICEF applied a multiple and overlapping deprivation analysis (MODA) to the 2012 Demographic and Health Survey data set, with support from EPRI (Economic Policy Research Institute). The analysis will help to sharpen the equity focus of Government policies and programmes and will also inform the next UNICEF country programme. The analysis helps in identifying the most disadvantaged children, facing different types of deprivations in Tajikistan. In 2015, the analysis will be finalized, children’s deprivations will be identified and will feed discussions on the implication of MODA results for UNICEF to target most marginalized children and design its policy dialogue accordingly.

**OUTCOME 6** By 2015, in all reproductive health centres and maternity houses of 18 districts, pregnant women of at risk profile receive VCT and if HIV positive, receive antiretrovirals (ARV) in accordance with PMTCT protocol; and HIV positive children have access to ARV prevention, treatment and social services.

**Analytical Statement of Progress:**

**OUTPUT 1** By 2015, the Ministry of Health provides all children under-5, including newborn infants in priority districts with quality child survival interventions in accordance with international standards.
Analytical Statement of Progress:
UNICEF support in 2014 took into account the issues identified by the infant death causal analysis:
- concentration of the infant deaths in the first week of life;
- lack of quality of care;
- lack of equipment and commodities in maternity/neonatal units;
- association with maternal health services, family planning, and nutrition;
- disparity by geographical locations and socio-economic status.

In this context, UNICEF, in close cooperation with GIZ, an American NGO, and Aga Khan Foundation supported the Government in conducting training of 250 health workers on neonatal resuscitation and management of postnatal bleeding. More than 1,000 copies of the newborn care algorithms were printed and distributed to all maternity and newborn units across the country. A monitoring tool to ensure quality implementation of the existing neonatal protocols is under development. Essential newborn care equipment (baby warmers and oxygen generators) were procured and delivered to the Ministry of Health and Social Protection. UNICEF initiated the procurement of additional items based on a comprehensive inventory taken on the maternal and newborn care equipment across the country. The development of a comprehensive plan to improve newborn survival will remain as the priority for the UNICEF support in 2015.

In addressing the equity concerns through local level planning processes, UNICEF supported a rapid assessment using LQAS methodology in three priority districts. Poor complementary feeding practices (content and frequency), low knowledge of parents about danger signs, poor health seeking behaviour and hygiene practices were common problems identified across all three districts. The assessment also identified pockets of low performing areas within the districts. The results were discussed with key district partners for immediate remedial actions, which will be followed up in 2015.

Furthermore, in light of the poor family care practices observed in some of the remote and mountainous districts of Rasht valley and Kulob region, UNICEF provided support to the IMCI (Integrated Management of Childhood Illness) centre for the training of 02 primary health care workers (out of 584 PHC workers working in nine target districts). The training paid special attention to the Care for Development module, with a view to integrating early childhood development and early detection and interventions for children with developmental disorders / disability into the service provided by home visiting nurses (RKLA#7). At national level, the updated IMCI guidelines as part of the pre-service curriculum of Tajik Medical University were finalized and printed with UNICEF support.

Control of vaccine-preventable diseases is another main priority of the National Health Strategy for 2010-2020 in Tajikistan. Although the recent Ministry of Health official immunisation figures record more than 95 per cent coverage against all Expanded Programme of Immunisation (EPI) antigens in Tajikistan, the findings of the 2012 Demographic and Health Survey (DHS) indicate that the proportion of 18-29 month old children who have received a full course of immunization (BCG, measles, DTP, polio) was only 89 per cent. Full immunization coverage was particularly low for children of mothers with higher education (77.7 per cent), which is potentially linked with the rise of online anti-vaccination sentiment in the Region. Against this background, the intensified social mobilisation and enhanced immunisation coverage monitoring are critical. This was translated into the GAVI Health System Strengthening proposal under finalization with significant inputs from UNICEF and WHO. UNICEF’s support in the development of the DHS communication strategy was provided in the context of new vaccine introduction (rotavirus and
IPV). The strategy, which outlines the messages and communication channels by different segments of population based on the comprehensive analysis of barriers to vaccination and information source, is expected to address overall demand-side bottlenecks to immunisation. Along with the strategy, materials were also developed, including a booklet and a poster on immunization, leaflets on rotavirus and polio, and TV and Radio spots.

Following the recommendations of the European Regional Certification Commission for Poliomyelitis Eradication, UNICEF, in collaboration with WHO and KfW, supported the supplementary immunization activities with polio vaccine in early 2014. The campaign reached more than 1.2 million children 0-5 years of age. In 2015, UNICEF will continue to support the Government in implementation of the 2012 EPI assessment recommendations, capacity building of health workers on new vaccines, and cold chain assessment.

UNICEF Tajikistan’s activities are aligned with RKLA# 6 (a child’s right to health) and RKLA#7 (comprehensive well-being), and the global call to action ‘A Promise Renewed’.

OUTPUT 5 By 2015, pregnant women, at risk children and youth receive HIV counselling and testing, and if positive, a full package of Anti-retroviral Therapy (ART) and associated services, according to national protocols.

Analytical Statement of Progress:
Since its inception in 2008, the Prevention of Mother to Child Transmission programme has been rapidly scaled up in Tajikistan, with 79 per cent coverage of pregnant women with HIV voluntary counselling and testing (VCT) at antenatal care and 86 per cent coverage of HIV positive pregnant women with ARV, according to the UNGASS report 2014. However, the same report indicates an increase in vertical transmission from mother to child from 11 cases in 2009 to 47 in 2013. For almost all those cases, mothers did not attend ANC services and were not tested for HIV during the pregnancy and after childbirth. This points to the need to further increase the VCT coverage for pregnant women, which was constrained especially in remote areas outside the 30 pilot districts due to: 1) limited availability of commodities and overall funding shortage for the PMTCT programme; 2) insufficient programme monitoring; and 3) lack of women’s empowerment preventing pregnant women from taking decisions related to utilization of health services including antenatal care.

In 2014, UNICEF assisted the Government to include the PMTCT diagnostic supplies in the state budget planning process, based on the national instruction for procurement of PMTCT related supplies. This effort was successful, but according to the approved medium-term expenditure framework 2015-2017, the state budget will cover only one-third of the annual requirement for HIV rapid test kits in 2015. By leveraging UNFPA resources, UNICEF assisted the Ministry to cover another 50 per cent of the supply needs for the PMTCT programme. To further ensure sustainable financing, UNICEF also advocated for inclusion of PMTCT and Paediatric AIDS as priority programming areas for a Global Fund proposal. While this effort was not successful, it gave additional pressure for the Government to increase allocation of its own budget for PMTCT and Paediatric AIDS. Strengthening PMTCT programme monitoring, conducted in partnership with the National Reproductive Health Centre was another focus of UNICEF support in 2014.

The PMTCT programme coverage in Tajikistan has been further compromised by 1) the limited capacity of the service providers to administer ART for HIV positive pregnant women as per the new PMTCT clinical protocol incorporating 2012 WHO recommendations, and; 2) absence of early infant diagnosis (EID) of HIV, impeding access to optimal treatment and care for HIV
exposed infants born from HIV positive mothers. For the first bottleneck, UNICEF, through engagement of international experts, supported training sessions on ART for PMTCT for 82 health specialists. As a follow-up, on-the-job coaching and mentoring is being organized for these trained specialists in order to ensure the retention of the acquired knowledge and skills.

UNICEF assisted the Ministry of Health in development of the protocol to introduce the EID programme to detect the HIV status among infants born from HIV positive mothers in the first 48 hours, using the Dry Blood Spot method (DBS) at the PCR laboratory. UNICEF further supported round table discussions and orientation sessions for 35 health managers on EID and on the approved national protocol, as well as the training on the use of dry blood spot for laboratory specialists from the Republican AIDS Centre at the Research Institute of Epidemiology in Moscow. A study tour to the Russian Federation with associated technical assistance also contributed to the improved understanding of the Ministry of Health managers about EID programme management, including the referral system and coordination mechanism.

Despite the progress made in PMTCT, there is an increasing number of new HIV cases among children. For the majority of the cases, the main mode of HIV transmission is unknown, indicating the possible nosocomial infection in health care setting. In the first six months of 2014 alone, 112 new cases were registered among children, out of whom only 15 children have started ART. The low coverage of quality paediatric AIDS services is mainly because of: 1) caretakers’ low level of confidence in health system and awareness about the available services; 2) absence of policy and protocols to promote systematic approach in paediatric AIDS, and; 3) lack of capacity among paediatricians in management of paediatric AIDS cases and opportunistic infections.

To address the first bottleneck, UNICEF partnered with civil society organization Guli Surkh, with multi-disciplinary mobile teams successfully reaching out to 310 additional children living with HIV/AIDS to initiate ART in 2014. While provision of psychosocial support to the parents of HIV positive children is critical, limited human resources capacity in psychological counselling in the country is a major challenge. In this context, UNICEF recruited an international expert, who facilitated a series of trainings, which equipped 25 service providers as well as 15 peer leaders among parents/caregivers with skills to provide psycho-social support in order to facilitate early initiation and subsequent adherence of ART among HIV positive children. The guideline for the health workers and other key service providers in the Paediatric AIDS programme to provide psychosocial support for HIV positive children and their parents/caretakers was also developed.

To address the policy-level bottleneck, UNICEF facilitated a round table discussion with policy makers and specialists, highlighting the challenges related to coordination, linkages/referral and integration of services relevant for HIV positive children. Subsequently, a working group was established within the Ministry of Health to develop a national paediatric AIDS programme management plan with support of an international expert. The same expert also provided technical assistance in revision of the clinical protocol on paediatric AIDS and facilitation of the training of trainers for 17 paediatricians based on the updated protocol. The national plan of action and protocols are under final review by the Ministry of Health.

As a part of regional capacity building initiative under RKLA #5, UNICEF, in collaboration with the Paediatric European Network for the Treatment of AIDS, also supported the training of five paediatricians from the AIDS centre on how to better manage the treatment and care for children and adolescents with complex manifestations of HIV, including co-infections with TB and Hepatitis. The training was extremely relevant as HIV-TB co-infection rates are very high (out of the total HIV positive children reached by the multi-disciplinary mobile team mentioned
above, one third nationally and up to 50 per cent in Khatlon region were diagnosed with TB).

With a view to increasing access to HIV services among youth, UNICEF assisted the Ministry of Health to establish, scale up and integrate Youth Friendly Health Services (YFHS) into the extensive network of reproductive health and dermatovenerology centres across Tajikistan since 2006. In 2014, UNICEF conducted an evaluation of the YFHS programme. The findings and recommendations will be discussed in depth with the Government and other stakeholders in January 2015, as they guide the future direction of adolescent health policy/programming.

Through this output, UNICEF Tajikistan makes a significant contribution to the RKLA#5 (the right to be born HIV-free) and RKLA#10 (a second chance for adolescents).

**OUTPUT 6** By 2015, the Ministry of Health provides all children under-5 in priority districts with priority child nutrition and selected ECD interventions in accordance with international standards.

**Analytical Statement of Progress:**

The joint UNICEF-World Bank Nutrition Situation Analysis for Tajikistan, published in April 2012, suggested that over a third of economic losses attributable to poor nutrition could be prevented by introduction and nation-wide implementation of cost-effective, evidence-based interventions, such as promotion of good child feeding practices, micronutrient supplementation, universal salt iodisation, and management of severe and acute malnutrition.

Lack of appropriate parental knowledge and skills about infant and young child feeding practices, managing common childhood illnesses and seeking timely medical attention play a critical role in children’s nutritional status. However, results of the Demographic Health Survey (DHS) in Tajikistan show major gaps in this area, particularly the social and cultural practices related to breastfeeding and infant young child feeding (IYCF). During the breastfeeding week in 2014, a communication campaign on exclusive breastfeeding was conducted through the nationwide airing of TV spots and distribution of 10,000 posters to the health facilities throughout the country. Information on family care and feeding practices also feature the Maternal and Child Health (MCH) Handbook, which was launched during the 25th anniversary of CRC. In 2015, UNICEF will continue to support the Government in rollout of the MCH handbook within the public health system in order to systematically educate mothers, fathers and families on maternal, newborn and child care practices and record health status of mothers and children focusing on the period from conception through the first two years of life – 1,000 critical days – which can impact a child’s long term health and development for a lifetime.

With UNICEF support, a semi-annual Vitamin A supplementation campaign successfully reached over 90 per cent of the national target group of 6-59 month old children (99 per cent and 94 per cent coverage for the first and second campaign respectively). Also, in collaboration with USAID and the Russian Federation, UNICEF supported the Government in implementation of a micronutrient supplementation programme: iron and folic acid pills for all 83,612 pregnant women and home fortification of micronutrient powders for 122,000 children in 31 districts (out of 64 districts in the country). As the programme provides additional contacts between health workers and caregivers for disseminating messages related to family practices, UNICEF supported the Government to integrate C4D into the programme as well as enhancing monitoring and quality assurance mechanisms. Given that the poor IYCF practices among parents and caretakers mirrors the poor functioning of patronage system/home visits, capacity strengthening of Primary Health Care workers in IYCF and community IMCI is being supported as part of the micronutrient supplementation programme, with 150 PHC workers trained during
2014. Whilst distribution and monitoring of supplements to end-users is being carried out through the Government health system, in recognition of the fact that reaching out to the communities / families in the last mile from the primary health care facilities to the households is always a challenge, UNICEF partnered with an NGO to establish an additional monitoring mechanism with attention to not only ‘distribution’ but also ‘utilisation’.

The IYCF counselling package was finalised and approved by the Ministry of Health and Social Protection of the Population. During 2015, the focus on optimizing IYCF practices will be intensified through scaling up community based interventions and improving interpersonal communication skills of frontline health workers.

Poor monitoring and enforcement of legislation poses an obstacle to all health and nutrition interventions, and universal salt iodisation, in particular. According to the iodised salt coverage survey conducted in Khatlon oblast, only 25 per cent of households are using adequately iodised salt (>15 ppm). Poor level of iodine (<15 ppm) was observed in 43 per cent samples and almost one third (32 per cent) of the tested samples had no iodine at all. This suggests that significant problems remain in iodised salt production, quality control and regulation, despite the relative success in social mobilisation for families to adopt a lifestyle that includes regular purchase of salt labelled as iodised, which was also confirmed by a comprehensive Salt Situation Analysis (SA) conducted in 2013 with UNICEF support. In 2014, UNICEF supported the capacity building of the salt producers and inspection agencies on iodised salt production and quality control and assurance though provision of laboratory equipment and training workshops. In addition, in order to create population demand for testing the salt before purchasing and thereby creating continuous pressure for the producers to comply with the quality standard, UNICEF supported the accelerated implementation of the rapid test kit strategy in close collaboration with village leaders, retailers, PHC workers, local authorities and inspection agencies. A total of 25 training sessions were conducted, involving 1291 community leaders from all districts in Khatlon oblast who received rapid test kits, posters (“iodised salt-clever salt”) and a copy of the law on salt iodisation. Subsequently, intensive follow-up monitoring and support are being provided through the partnership with NGOs.

For the management of severe acute malnutrition, UNICEF procured therapeutic food to treat 670 children in line with international standards. To address the underlying causes of malnutrition, UNICEF and WHO also supported the Ministry of Health in conducting deworming campaign, through which 1,530,729 children 5-14 years (96.85 per cent coverage) received deworming tablets and appropriate hygiene promotion messages.

The national nutrition programme, including the cost-effective, evidence-based interventions described above, is almost entirely supported by external funding. Since Tajikistan joined the Scaling up Nutrition movement in September 2013, UNICEF together with USAID, as donor co-conveners, have been assisting the government in setting up a multi-sectoral/stakeholder platform as a basis for joint collaborative work toward improving both nutrition-specific and nutrition-sensitive interventions. In 2014, a kick-off workshop on SUN was organised, which brought around 50 stakeholders together from all relevant sectors: health, agriculture, industry, social protection, economic development and education, alongside civil society, international development partners, and experts from Kyrgyzstan, Nepal and the SUN Secretariat. This, along with the participation of the Government representative at the SUN Global Gathering and Second International Conference on Nutrition in Rome, Italy, enhanced the stakeholders’ understanding of the SUN global movement and helped them visualize how to advance the movement in the context of Tajikistan. In 2015, building on the preliminary work done by MQSUN (a consultancy group for SUN), UNICEF with other stakeholders plan to provide further
support to develop a Common Results Framework and a costed multi-sectoral plan for nutrition. This will also allow resource tracking and mobilisation.

The work UNICEF Tajikistan does under this output contributes to RKLA#6 (a child’s right to health) and #7 (comprehensive well-being) along with the global call to action ‘A Promise Renewed’.

OUTCOME 7: By 2015, children will have increased access to the preschool and basic education system, with particular focus on providing opportunities for out-of-school children, and the quality of education will be improved through a strengthened policy environment.

Analytical Statement of Progress:
In 2014, UNICEF supported the Ministry of Education and Science to undertake the first Joint Sector Review. An analysis of the sector, utilising EMIS data, and triangulated with studies, reports, and statistics from other Governmental agencies, yielded a comprehensive overview of the Education sector in Tajikistan.

The JSR calculations indicated that there is a critical shortage of early learning facilities across the country, with children in rural areas and from poor households least-served. However, since 2007, the number of children accessing formal early learning opportunities has increased by five per cent; and, early learning models developed by UNICEF with other partners were officially recognised by the Government under the Law on Preschool Education.

The report also noted that only 67.2 per cent of girls transition from compulsory to non-compulsory education. In addition, children with disabilities, children in conflict with the law, children working and living on the street, and children in rural areas face specific challenges in accessing the education system. Even children from more disadvantaged groups who are able to continue their education often miss classes, leading to low achievement and eventual drop-out before completing basic education. The JSR also found that the quality of education is negatively impacted by learning environments that are not child-friendly, with non-interactive teaching, a shortage of trained teachers and materials, limited teaching and learning materials, and non-accessible infrastructure, resulting in poor learning outcomes.

Taking into consideration these findings, equitable access to quality education is UNICEF Tajikistan’s overarching concern, promoting access to quality education for all, with a special focus on the most marginalised of students. The aim is to work both at project and policy level, with each informing the other to further develop the Government education system.

In 2014, UNICEF’s work with the Ministry of Education and Science and development partners continued to yield positive results that contribute to the achievement of the overall outcome. These include promotion of early learning and childhood development through alternative means to ensure expanded access to all children; development of partnerships with youth to promote girls’ education, particularly in transitioning from compulsory to non-compulsory education; and working with the Tajik State Pedagogical University to develop the pedagogical skills of faculty and pre-service teachers.

UNICEF has ensured that disability is mainstreamed in all aspects of the programme in an inclusive education approach. UNICEF takes these interventions forward as an integrated package so that the key education issues are effectively addressed in a comprehensive manner.
A variety of bottlenecks impact progress. They include, but are not limited to, overall budget availability for the sector; and access to quality services.

Activities under this outcome are directly in line with the RKLA#3 (early learning) and #4 (inclusive quality education).

OUTCOME 8 By 2015, the Government allocates proportionately more resources to critical social protection sectors (preschool education, neonatal care, family based care and protection) based on evidence and general public support.

Analytical Statement of Progress:
Two new data initiatives were launched in 2014, with a view to contributing to a better focus of Government policies, programmes and budgets on child rights. The Multiple and Overlapping Deprivation Analysis was applied to the 2012 Demographic and Health Survey data set, to gain a better understanding of childhood deprivation. By considering different dimensions of deprivation, this analysis will result in better profiling of the most deprived children and will facilitate a stronger equity focus in Government and development partner programmes. The second new initiative is a district-level child rights ranking, in which all districts of the country will be compared based on a standard set of indicators. This will serve to promote further debate on child rights at national and sub-national levels and could spark more focused efforts to address child rights issues in the country.

UNICEF’s partnership with the Agency on Statistics led to a revision of the Tojikinfo data platform for child rights. The revised version of the Tojikinfo application provides data users, in particular policy makers, with improved access to an expanded data set on children and women in Tajikistan.

UNICEF worked closely with national level institutions, in particular the Ministry of Economic Development and Trade (MEDT), to support integration of child rights issues into planning and budgeting at district level. This initiative has reached six districts and is reaching maturity for national rollout, once fully documented. Capacity development workshops and consultations were organized both at national and local levels to strengthen civil servant’s skills and knowledge related to the mainstreaming of child rights into local planning and budgeting mechanisms. A district level youth-led situation analysis on child rights in three pilot districts contributed to a better reflection of the perspective of children and young people in local planning and budgeting processes. UNICEF support to active engagement of youth and adolescents contributes to the regional CEECIS priority on adolescents (RKLA#10).

The celebration of the 25th anniversary of the Convention on the Rights of the Child in a series of events provided an opportunity to boost awareness of child rights. Celebration events were covered widely by mass media and thousands of people participated in person. Throughout the celebration, the rights of children with disabilities received special emphasis. Journalists trained on child rights applied their new skills and knowledge through a wide reflection of the celebration events in the mass media.

OUTCOME 10 By 2015, there is an increase in the proportion of vulnerable children who benefit from alternative community-based social services, family substitute care and alternatives to incarceration.
Analytical Statement of Progress:

Within the framework of Country Programme Action Plan, UNICEF continued to work with the Commission on Child Rights, relevant state agencies and development partners to address these bottlenecks and to contribute to the achievement of the planned Outcome. Main achievements included:

- Establishment and reorganising of an inter-sectoral Working Group on Children with Disabilities led by the Ministry of Health and Social Protection;
- Finalisation and Adoption of the Concept on Social Services with the support of development partners and UNICEF;
- Successful conduction of the Fourth Central Asia Child Protection Forum in partnership with the Government of Tajikistan to advocate for the realisation of the rights of CWD and consideration of ratification of the Convention on the Rights of Persons with Disabilities;
- Capacity building of the Social Assistance at Home Units through providing training sessions on social work through state run Social Work Training Centre;
- Widening the network of parent’s associations of the National Coalition of Associations of Parents of CWD in the country to ensure quality family support for CWD and the development of community-based services;
- Involvement of Government, development partners, associations, UN Agencies to advocate for the right of CWD though IDD and different campaigns;
- Awareness raising at national and regional levels to prevent institutionalization of children under three, initiation of piloting of foster care as alternative family based care in the country and completion of a rapid assessment of children in institutions (covering baby homes and residential care institutions for CWD);
- Development of a Child Protection in Emergencies Contingency Plan and capacity building of psychosocial service providers in selected districts of the country to address the issues of child protection in emergencies;
- Child-friendly investigation and court rooms established in selected districts to hear children’s cases and guidelines and protocol drafted for police and judges for child friendly procedures;
- Capacity building of police, judges, prosecutors and social workers to administer a child-friendly justice system and advocacy for a sustainable standard training program for these professionals. Supported the Police Academy to introduce a 12-hour course on child rights and juvenile justice;
- Preparation of a draft law on prevention of juvenile offending and regulation for Centres for Additional Education pending their approval.

UNICEF Tajikistan’s work under this outcome contribute to RKLA#1 (children’s right to a supportive and caring family environment) and #2 (children’s right to access to justice).

OUTCOME 11: Effective and efficient programme management and operations support to programme delivery.

Analytical Statement of Progress:

Office governance arrangements established in the Annual Management Plan functioned well throughout 2014. The Table of Authority was reviewed and updated twice in 2014, in accordance with VISION requirements and segregation of duties regulations.

The outstanding DCT balances were closely monitored: un-liquidated DCT balance outstanding over 6 and 9 months was reduced to 0 per cent by the end of 2014.
The office continued implementation of VISION/SAP project and International Public Sector Accounting Standards.

In-house refresher training and briefings were organized for all staff on the major work processes, such as supply/procurement, Table of Authority, segregation of duties and financial controls, VISION roles, HACT and business continuity. The office’s Business Continuity Plan was updated and a successful BCP drill exercise was conducted in November 2014, with assistance from the UNICEF Kyrgyzstan Operations Manager.

### Document Centre

#### Evaluation

<table>
<thead>
<tr>
<th>Title</th>
<th>Sequence Number</th>
<th>Type of Report</th>
</tr>
</thead>
</table>

#### Other Publication

<table>
<thead>
<tr>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 types of JJAP leaflets; Tajik</td>
</tr>
<tr>
<td>What is the budget and why do youth need to learn about it? (in Russian and Tajik)</td>
</tr>
<tr>
<td>Report on the results of situation analysis on child rights in Kulob, Rasht and Isfara districts</td>
</tr>
<tr>
<td>Convention on the Rights of the Child: 25 Years of Progress</td>
</tr>
<tr>
<td>WASH Package (including teacher instructional guide, teaching and learning material)</td>
</tr>
<tr>
<td>Printing of the Education Joint Sector Review</td>
</tr>
<tr>
<td>Guidelines for Child Friendly Court Rooms training</td>
</tr>
<tr>
<td>Creating inclusive policies, systems and services for children with disabilities in accordance with the UN convention on the rights of persons with disabilities, 4th Child Protection Forum for Central Asia, English</td>
</tr>
<tr>
<td>Creating inclusive policies, systems and services for children with disabilities in accordance with the UN convention on the rights of persons with disabilities, 4th Child Protection Forum for Central Asia, Russian</td>
</tr>
<tr>
<td>CD, Creating inclusive policies, systems and services for children with disabilities in accordance with the UN convention on the rights of persons with disabilities, 4th Child Protection Forum for Central Asia, English</td>
</tr>
<tr>
<td>Social Work training manual + CD; Tajik</td>
</tr>
<tr>
<td>Child Protection in Emergencies Contingency Plan, in Tajik</td>
</tr>
<tr>
<td>Juvenile Justice Alternatives Project (JJAP) Skills Game; Russian</td>
</tr>
<tr>
<td>Juvenile Justice Alternatives Project (JJAP) Skills Game; Tajik</td>
</tr>
<tr>
<td>Juvenile Justice Alternatives Project (JJAP) Skills Game; English</td>
</tr>
<tr>
<td>Legislative Reform Guidance document; Russian</td>
</tr>
<tr>
<td>JJAP Posters; Tajik</td>
</tr>
<tr>
<td>JJAP Brochure; Tajik</td>
</tr>
<tr>
<td>Youth Friendly Health Services Evaluation (Russian and English versions)</td>
</tr>
<tr>
<td>Youth Friendly Health Services certification (Russian and English)</td>
</tr>
<tr>
<td>Psychological support to parents with Children Living with AIDS (CLWA) to increase Anti-Retroviral Therapy (ART) and its adherence (Rus)</td>
</tr>
<tr>
<td>Printing of law on salt iodization</td>
</tr>
<tr>
<td>-----------------------------------</td>
</tr>
<tr>
<td>Poster on salt iodization</td>
</tr>
<tr>
<td>Guidelines about how to use Rapid Test Kits for salt iodization</td>
</tr>
<tr>
<td>Breastfeeding poster for supporting breastfeeding campaign</td>
</tr>
<tr>
<td>Feeding infants and young children counselling package (composed of cards and brochure)</td>
</tr>
<tr>
<td>Booklets 3 types (how to feed child after 6 months, (70000) Nutrition during pregnancy and breast-feeding (50000), child supplementation (50000).</td>
</tr>
<tr>
<td>EPI poster</td>
</tr>
<tr>
<td>EPI Booklet</td>
</tr>
<tr>
<td>Leaflet on Rotavirus</td>
</tr>
<tr>
<td>Leaflet on Polio</td>
</tr>
<tr>
<td>IMCI Handbook</td>
</tr>
<tr>
<td>Infant death causal analysis</td>
</tr>
</tbody>
</table>