

The Gambia

Executive Summary

Significant achievements were registered in the Gambia in 2015, most of them advocacy related, but all noteworthy for the impact they have on the lives of children. UNICEF Gambia, working with its partners, advocated with senior political and policy makers on FGM/C and child marriage, which led to the Presidential Declaration in November 2015 banning FGM/C. In addition, a legislation to ban the practice was passed on December 28 as part of the Women's Act of the Gambia. UNICEF Gambia, UNFPA and UNDP are now strengthening their partnership to ensure that legislation and enforcement go hand in hand with community mobilization for information, education and communication.

With UNICEF Gambia's advocacy, the Gambia was the first country in Africa to pass a presidential declaration to end open defecation by 2017. This was a follow-up to the Ngor Declaration in May 2015 that called for African countries to be "open defecation free" by 2030. The national pronouncement to end open defecation in the Gambia by 2017 was a high level political commitment and demonstrated the importance the Government attaches to improving access to basic sanitation.

The third major achievement was the new 2016 - 2030 Education Sector Policy, a result of UNICEF Gambia's technical and financial support to the education sector. Although largely funded by the World Bank, UNICEF Gambia's comparative advantage on technical support was highly valued. Our equity-focused advocacy influenced the Government to accept universal access to ECD as a priority, and to explore options to reach out-of-school children especially those attending the Daras (Qur'anic learning centres).

Despite the solid achievements, there was limited progress on certain results, such as the revitalization of primary health care (PHC), due to limited capacity at the sub-national level. This significant shortfall underpinned many child survival indicators. At the central level, strategic planning and coordination for PHC remained weak.

There were shifts in 2015 with Nutrition and ECD, both in line with the Strategic Plan 2014-17. Nutrition became a fully-staffed section with resources available to respond to the issue of 25 per cent stunting. ECD was mainstreamed, taking child protection elements into account as well health and others.

Bottlenecks in the programming environment were often linked to a limited capacity, due to the exodus of skilled people from the Gambia. The fixed exchange rate and struggling economy devalued planned and programmed funds, and undermined implementation. In addition, the equity agenda in education was undermined by the lack of regulation in the Daras schools, where many children attend. On child protection related issues, a major bottleneck was the lack of consistency between formal, customary and religious law, and the lack of clarity about the application of the national laws and related policies.

Funding was a major issue in The Gambia. There is only one donor in-country (EU). The Gambia is not a priority for donors in general. There were serious partnership challenges, as there is limited civil society presence. UNICEF Gambia partnered with Child Fund, Child Protection Alliance, Tostan and Concern Universal on child protection issues and cash transfers for Social Protection programming, but certain NGOs are leaving the country or scaling down. UNICEF Gambia developed an important, though informal, partnership with the Office of the First Lady that supported advocacy and contributed towards the banning of Female Genital Mutilation/Cutting (FGM/C), among other results.

The overall political context in The Gambia does not encourage children's participation at policy level in 2015. Although female representation in the three tiers of Government was often cited by Government as a major achievement, there was still need to raise the voices of poor and marginalized women in programming processes.

Humanitarian Assistance

In 2015, UNICEF Gambia strengthened national Ebola Virus Disease (EVD) preparedness and readiness. In collaboration with WHO, UNICEF Gambia provided technical support to the review of the 2014 National EVD Plan as well as the development and implementation of operational plans for case management, coordination, social mobilisation and communication, logistics and safety.

In partnership with WHO and development partners, the CO (CO) supported the upgrading of the sanatorium at central level to a standard Ebola Treatment Centre which was completed and staff trained on EVD case management. A total of 60 health care workers were trained on EVD surveillance and contact tracing, while an additional 30 were trained on the EPI-info application. Through this effort, nine critical border points were staffed with surveillance officers to provide 24 hours screening services for people coming from the EVD-affected countries. The Infection Prevention Control capacity of 88 public health facilities and nine critical border points were strengthened through the provision of essential supplies and equipment such as PPEs, detergents, body bags and disinfectants.

The CO led the WASH, education, communication and social mobilization activities of the National EVD Plan. A total of 6,906 Village Development Committees members from 912 communities were trained on community engagement on EVD for prompt reporting of suspected cases. As part of the school EVD preparedness, 750 hand-washing facilities were distributed to 150 schools to encourage hand washing. In collaboration with the BBC Media Action, a total of 40 journalists and humanitarian communications workers were trained and prepared to respond if and when there is an Ebola outbreak in The Gambia. Radio spots and jingles were regularly played on all community based radio stations to increase public awareness and mitigate unnecessary panic and fear within the population. Despite the geographic proximity of The Gambia to the EVD epidemic foci, by the end of 2015, no confirmed case of EVD were reported in the country.

UNICEF Gambia responded to the on-going nutrition and food security crisis through the joint humanitarian response plan. Overall, with UNICEF Gambia support, 2,892 severely malnourished children under-five were reached with therapeutic care and hygiene messages between January and June. Of these, 1,494 were discharged, with 1,193 (80 per cent) discharged as cured, 197 (13 per cent) defaulted and 62 (4 per cent) died, 42 (2.8 per cent) non recovered. Access to water supply, basic sanitation and hygiene improved in 16 health/nutrition centres to ensure caregivers and SAM children were protected from waterborne diseases.

In response to a trachoma outbreak in a dara (qur'anic learning school) in the Central River Region, 300 talibes (students) were reached with hygiene messages and toilet facilities provided to the centre to improve the poor standards of sanitation. No further cases were reported in the affected communities and its neighbourhood. Storm-damaged classrooms were repaired in 15 schools, restoring access to education for 3,500 pupils.

Summary Notes and Acronyms

C4D – Communication for Development
CMT – Country Management Team
CO – Country Programme
CP – Child Protection
CRC – Contracts Review Committee
CRR – Central River Region
CSD – Child Survival and Development
CSO – Civil Society Organization
DAO – Delivering as One
DHS – Demographic Health Survey
DSW – Department of Social Welfare
ECD – Early Childhood Development
EVD – Ebola Virus Disease
FGM/C – Female Genital Mutilation or Cutting
HACT – Harmonized Cash Transfer
HNO – Humanitarian Needs Overview
IDR – In-depth Review
IHS – Integrated Household Survey
IMEP – Integrated Monitoring and Evaluation Plan
LTA – Long term Agreement
MoBSE – Ministry of Basic and Secondary Education
MoHSW – Ministry of Health and Social Welfare
NaNA – National Nutrition Agency
NaSPAT – National Association of Salt Producers and Traders
NSPSC – National Social Protection Steering Committee
OCHA – Office for the Coordination of Humanitarian Affairs)
OIC – Officer-in-Charge
OMT – Operations Management Team (UN)
OVCs – Orphans and Vulnerable Children
PF4C – Public Finance for Children
PPE – Personal protective equipment
RUTF – Ready-to-Use-Therapeutic-Food
SAM – Severe Acute Malnutrition
SitAn – Situational Analysis
SoP – Standard of Operation
SP – Social Protection
SPKA – Social Policy, Knowledge and Advocacy
SRP – Strategic Response Plan
ToR – Terms of Reference
UNCT – United Nations Country Team
UNDAF – United Nations Development Assistant Framework
UNDP – United Nations Development Programme

UNFPA – United Nations Population Fund
URR – Upper River Region
WaSH – Water, Sanitation and Hygiene
WHO – World Health Organization

Capacity Development

Recognizing the importance of the Department of Social Welfare, UNICEF Gambia has undertaken a capacity assessment of this key department to ensure it is equipped to undertake its mandate. This is on-going work that continues into 2016.

The CO was also instrumental in the design of assistance to the Policy Analysis Unit (PAU), which was under the office of the President. This unit was a key partner in articulating UNICEF Gambia's contributions to national development, and a rapid capacity assessment undertaken by all UN agencies led to shifts in the Government with the creation of a Ministry of Planning and Policy that elevated the role of the PAU. This addressed on-going concerns, both at UNICEF Gambia and other UN agencies, on the need for greater engagement and ownership of partnerships between the UN and the Government.

One example of capacity development was the training of 25 national trainers on Effective Vaccine Management, one recommendation of the EVM assessment conducted in 2014. This was followed by cascade trainings for 200 health facility staff. The lesson learnt from these trainings included the effective management of vaccines, especially at service delivery level, by introducing standard tools for better vaccine management. This is evident by the reduction of high vaccine wastage rates eg. Measles wastage rate reduced nationally from 17 per cent in 2014 to 11 per cent in 2015. The trainings helped improve facility staff understand the better use of the continuous temperature monitoring devices for increased vaccine potency.

Evidence Generation, Policy Dialogue and Advocacy

In 2015, UNICEF Gambia, in partnership with UNDP, conducted a Costing of Minimum Social Protection Package to support the implementation of the National Social Protection Policy (NSPP) 2015-2025. The exercise was to calculate an estimated cost of a minimum social protection programme for vulnerable groups and inform the planning process. It offered a number of policy options for the Government to consider in designing and allocating budget resources. The costing proposal was attached to the NSPP, which was submitted to Cabinet for approval.

UNICEF Gambia supported national partners in developing a Child Protection Strategy based on a previously conducted situation analysis. This was an excellent evidence-based dialogue with the Government to address a wide range of child protection issues in the country. It included a comprehensive implementation plan and resource allocation aligned with the on-going Mid Term Expenditure Framework reform of the Government.

UNICEF Gambia also conducted a capacity building programme for selected national partners on Public Finance for Children. The programme was designed based on the results of a capacity gap analysis of the Ministry of Finance, key sectoral ministries, the National Assembly, and civil society organizations. It focused on raising awareness and strengthening knowledge of the target stakeholders on child-sensitive budgeting and multi-dimensional child poverty, and contributed to triggering debates between line ministries and members of the National Assembly around efficiency, effectiveness and accountability of budget expenditures in favour of children.

As part of the SitAn process, a two-day workshop was conducted for national partners on bottleneck analysis (BNA). The major objective of the workshop was to engage national partners in conducting situation analysis and equip them with basic knowledge of applying BNA to specific thematic areas. The national partners learned how to analyse specific problems and bottlenecks in a broader context through reviewing different domains and determinants.

Partnerships

In a country with limited potential for partnership, where potential partners and capacity is scarce, existing partnerships this year was important to ensure programme delivery objectives. Given this background, UNICEF Gambia in 2015, laid the ground for new partnerships to diversify the partnership portfolio and result in new formal agreements in 2016. This includes working with two INGOs: Child Fund, on Child Protection and Salt Iodization projects, and a possible partnership with Concern Universal for cash transfers under Social Protection programming. These are two of few international NGOs in country. UNICEF Gambia explored a partnership with the National Youth Council to work with adolescents, a key theme under the new regional strategy and an area where the office hopes to work more closely in the future.

Strengthening on-going partnerships was key and UNICEF Gambia worked hard to ensure continuity and progress with existing partners. One important example of this is working with the National Nutrition Agency (NaNA) in a World Bank-funded Results Based Financing model for health outcomes. UNICEF Gambia designed a component in social protection to compliment the World Bank investment to ensure alignment to national strategies and ensure efficacy in aligning the CO's relatively modest funding with more significant funding from the World Bank, where UNICEF Gambia's contribution targets specific nutrition outcomes.

Importantly, the CO developed an important but informal partnership with the Office of the First Lady that assisted with advocacy and led to the banning of FGM/C.

External Communication and Public Advocacy

Public advocacy platforms, including the Day of the African Child and International Children's Day of Broadcasting, ensured that key messages around the vulnerabilities of marginalized children were at the forefront of national development discourses. These evidence-based messages were shared through speeches and promotional materials. All public advocacy events were attended by high-level government officials, Civil Society Organizations (CSOs), the international community, children and the media.

A pivotal event was the launching of UNICEF Gambia's For 'Every Child, a Fair Chance: a Promise of Equity' report, jointly organized with the Government and CSOs, and covered extensively by the local media. Attended by the First Lady, and key Cabinet Ministers including the Vice-President and Minister of Women's Affairs, the launching was an excellent opportunity to intensify advocacy at the highest level for equity. Child representatives from the seven regions of the country presented the outcome of a nationwide consultation with children, focusing on the challenges they face and how they see their future. The consultations were conducted prior to the launching as part of the overall event. Among key issues highlighted by the children was the need to end child marriage and FGM/C. The event contributed significantly to the ensuing proclamation by the President to ban FGM/C in the country.

UNICEF Gambia continued to engage both the print and broadcast media to support public

awareness by strengthening their capacity and exposing them to experts and vulnerable groups for first-hand information and reporting.

The use of the CO website and Facebook page to strengthen visibility for advocacy on children's issues continued. Messages posted on these platforms focus on UNICEF Gambia interventions for the most vulnerable children. Both expanded UNICEF's reach, nationally and internationally.

South-South Cooperation and Triangular Cooperation

UNICEF Gambia took advantage of opportunities to ensure partners experience the region and beyond with attendance at international seminars and conferences and exchanges. Over the course of the year, the CO supported government staff on exchanges including a meeting on Early Marriage in Zambia; Financial Tracking of Nutrition in Uganda; WASH innovate financing in Senegal; and the fourth "African San" meeting with UNICEF staff and Government. The Africa San meeting was a platform to discuss Sanitation and Hygiene issues.

UNICEF Gambia took advantage of a visit to Ghana CO to review the cash transfer project funded by USAID and draw lessons learned for UNICEF Gambia's upcoming cash transfer project funded by the EU in 2016. In exchange, the CO received a member of staff from the Ghana CO to assist with building capacity in strategic planning processes; the staff member accompanied the CO in the SMR process.

Identification and Promotion of Innovation

UNICEF Gambia identified opportunities for innovation in both programming and operations by improving practices to increase efficiency and effectiveness and devising new ideas aimed at improving the lives of girls and boys in The Gambia

In a funding environment where large-scale funding is limited on the ground, the CO identified its comparative advantage to identify a niche, notably small-funding envelopes from National Committees for UNICEF. With the relatively small population and grants, small amounts go further in addressing nationwide issues. Private-sector funding, a viable option in many countries, is limited in The Gambia due to its limited private sector. However, the CO will explore this possibility.

Support to Integration and cross-sectoral linkages

With the planning of the next programme cycle, UNICEF Gambia took significant steps to strengthen cross-sectoral linkages, particularly in the area of Early Childhood Development (ECD) and child marriage. Both span various section responsibilities and areas of intervention. For example, the development of strong ECD support to the Government requires the inclusion of other pertinent issues such as child and infant nutrition and child stimulation, as well as ensuring ECD activities are costed into education sector budgets. This in turn impacts sections and improves greater cooperation among the sectors. This working approach will be taken into consideration during the development of the next Country Programme Document (CPD).

Regarding downstream activities, UNICEF Gambia responded to a public health situation in a Dara (Islamic teaching institution) where there were significant cases of trachoma. A joint CO response addressed health with partners, but also education and child protection to address the notably poor conditions under which the children were living. The intervention raised the issue of

public health and child protection in non-standard teaching institutions, with obvious cross-sectoral implications.

Service Delivery

UNICEF Gambia worked hard to ensure optimal use of resources and to strengthen Direct Cash Transfers (DCT) record towards full compliance.

In CSD, the standardization of supplies to the health sector ensured there were no stock-outs in essential supplies such as ready to use therapeutic foods. This was also supported by the establishment of a full-time nutritionist staff, in place of a contractor. This ensured that nutrition supplies were closely monitored and supplies were seamless. The CO, however, still struggled with the supply of basic medicines to community facilities and health nurses where the national system is unable to prioritize and where there was no Government investment in drugs for the last two years.

In education, UNICEF Gambia provided timely and key support to the construction and rehabilitation of classrooms and sanitation facilities to meet the increased demand for schooling created by the removal of school fees by the Government. The threat of Ebola Virus from 2014 into 2015 placed demands on the CO to support preparedness and prevention responses through the 'traditional' areas of Communication for Development (C4D) and WASH. UNICEF Gambia played a key role with technical support and higher level management and coordination for strong UN coherence in the response, in collaboration with WHO, the lead agency.

In the area of sanitation, UNICEF Gambia was at the forefront of ending open defecation; UNICEF Gambia supported triggering of 370 open defecation communities of which 280 and 20,680 are open defecation free.

Human Rights-Based Approach to Cooperation

UNICEF Gambia worked to strengthen rights-based approaches to cooperation, focussing on child rights and concepts enshrined in the CRC. However, the Government of The Gambia faced challenges regarding the relationship with rights and cooperation.

The Government accomplished a number of key areas regarding the rights of the child. A Presidential pronouncement at the end of 2015 made it clear that The Gambia will enforce legislation against FGM/C. This important step forward led to some significant progress in developing legislation to support the proclamation. UNICEF Gambia was instrumental over the last decade with this agenda, and specifically in 2015, working with the First Lady. The First Lady was engaged in the global debate on early marriage and UNICEF Gambia furthered the agenda at a national level for the rights of girls. This agenda item will continue in 2016.

The CO pursued issues on child rights with the media. On-going sensitization and exposure of the media and the public to child rights and the principles of rights-based approaches was a focus for UNICEF Gambia in 2015.

Gender Mainstreaming and Equality

In a bid to push the gender equality agenda forward, UNICEF Gambia advocated for social protection benefits for women and girls to reduce vulnerabilities with high -level advocacy, and by strengthening the capacities of Government and NGOs in gender-sensitive programming and

budgeting. Intrinsic value was placed on women's health, with a focus on the maternal role. A survey to monitor the nutritional status of women of reproductive age was implemented to address key lifesaving gender issues. To improve the overall well-being of girls, HPC vaccination was provided to grade three girls to prevent against cervical cancer.

Recognizing that female education is imperative for reversing gender inequality, UNICEF Gambia focused on gender-specific activities in the education programme with the Gender Training Manual and the Gender Action Packs. These resource materials were used to provide orientation and train teachers on gender equality to stop gender discrimination and underlying gender power dynamics in schools.

Active support to the UNGEI platform continued to increase and improve girl's education. The platform guided the development and implementation of strategies on gender mainstreaming within the education sector.

At the grassroots level, UNICEF Gambia continued to support community initiatives such as the Mothers' Clubs to campaign for girl's education by addressing socially bestowed norms.

UNICEF Gambia intensified its technical and financial support to the technical committees on fFGM/C, which continues to be a harmful and pervasive form of violence against girls. In addition to high-level advocacy, dialogues were held with Islamic religious leaders around the country on the harmful effects on FGM/C, to enlist them to lead the campaign for the abandonment of the practice. In November 2015, the country welcomed perhaps the biggest victory in the reduction of violence against women and girls: a presidential decree banning the practice of FGM/C in The Gambia. This bold move is expected to gather support and eventually lead to legislation outlawing the practice.

Environmental Sustainability

Climate change and environmental degradation are major issues affecting The Gambia. Children, especially the most disadvantaged, are highly vulnerable to climate change impacts like droughts, floods and windstorms, and suffer the consequences such as higher malnutrition rates and childhood illnesses.

UNICEF Gambia advocated for the development of sound national policies and programmes that address child vulnerabilities from climate change and environmental degradation. The CO supported the implementation of Community Led Total Sanitation in 370 communities to reduce risk of environmental pollution by human faeces. In addition, communities in flood prone areas were sensitized on flood risk reduction, particularly the clearing of drains and dump sites along waterways. Despite the heavy downpour in 2015, the number of affected population was less than 10,000 people, relatively low compared to other years. Regular water quality monitoring was conducted in 140 schools and high risk communities to improve water safety.

As household air pollution is linked to acute respiratory infections, which is a major cause of childhood deaths in The Gambia, the CO supported the implementation of C4D activities to promote early health care-seeking behaviours for pneumonia among caregivers, including messages on dangers of indoor smoking. The CO engaged environmental clubs in schools on environmental improvements activities in the schools. The construction of classrooms, and toilet and water facilities for schools was well monitored to mitigate possible environmental damage.

UNICEF Gambia strongly advocated for effective water-resource knowledge and information

systems to be put in place to monitor the underground water status. Under the on-going Water Sector Reform Programme, the Government was supported by the African Development Bank to construct 38 observation boreholes across the country, equipped with data loggers to monitor the status of underground water resources in the country.

Effective Leadership

UNICEF Gambia's oversight structure provided for adequate roles, responsibilities and accountabilities for effective governance, risk management and assurance. The risk profile was uploaded in February and monthly Country Management Team (CMT) meetings monitored management performances and compared them against the key indicators outlined in the Annual Management Plan (AMP). Management consistently consulted the Managers' Dashboard on Insight to monitor alerts.

UNICEF Gambia conducted a self-audit assessment exercise after AMP retreat in April. The Office of Internal Audit and Investigations conducted an audit for UNICEF Gambia from 16th November to 08th December. The final draft of the report is pending.

UNICEF Gambia built upon past accomplishments to enhance Operation Programme efficiency in programme management with strengthened information and communication technology infrastructure using the IP telephony project.

With technical support from Regional Office, with the HACT specialist based in Nigeria, UNICEF Gambia conducted in August a HACT workshop for all UNICEF Gambia partners and staff and a pre-audit of the HACT implementation in The Gambia. This training and the recommendations of the pre-audit had a great impact in the overall understanding of HACT by partners and UNICEF Gambia staff. UNICEF Gambia, UNDP and UNFPA conducted a macro-assessment and UNICEF updated its HACT assurance plan.

UNICEF Gambia managed risks and made the best of early warning indicators to identify, evaluate and respond to changes quickly. Key risks included a challenging environment arising from severe liquidity constraints and limited fiscal space in the Government. This will invariably limit the ability of the Government to sustain current and future programmes.

Financial Resources Management

Key performance indicators were monitored and reported periodically at CMT meetings. A monthly issuance of contributions was shared with CMT and programme sections highlighting expiring grants requiring attention.

BCM was implemented and there was faster fund transfers to beneficiaries with minimum manual intervention. However, the following are still on other payment modalities: travel payments, payment of salary advances and some other small payments.

The CO has no warehouse and goods are directly delivered to partners. Warehouses of partners are visited from time to time.

Bank balances were reconciled monthly and reconciling items were cleared within 30 days. Budgets were regularly monitored. In implementing the Long Term Agreements (LTA) for fuel and internet, significant cost savings were realized and key indicators of performance were regularly monitored.

A refresher training was organized on internal control and ToA during the AMP in February. Assets management was improved through periodic physical verification, updating and reconciliation of assets records. There was one Direct Cash Transfer (DCT) over nine months under review which was linked to Government treasury system upgrade and reported erroneous allocation of the DCT within the treasury. On average, the CO had seven open TAs over 15 days with regular follow-ups made with the relevant staff to ensure that all open TAs were within 30 days.

The non-post cost of the IB allocated in 2015 was fully utilized, and 100 per cent of the Regular Resources allocated was entirely consumed.

Fund-raising and Donor Relations

Funding trends for UNICEF Gambia were characterized by underfunding of key programme areas against significant need. This was mainly due to the limited number, and lack of diversity, of donors supporting the CP.

Fundraising activities were concentrated on diversifying the donor pool and strengthening donor relations, especially with UNICEF Natcoms, for an increase in predictable and flexible funding across all the programmes. Among current strategies: encouraging visits and dialogue with Natcoms, developing and sharing two page concepts with several price points per programme; ensuring that most donor reports were supported by human interest stories and submitted on time; and seeking technical support from UNICEF (RO and HQ) and Natcoms.

Consequently, of the planned programme budget for 2015 (US\$ 3,801,800) as per the CPAP, the office mobilized US\$4,061,560, marginally surpassing the planned ceiling by 6.8 per cent. Of this amount, 43.3 per cent was RR while 57 per cent was mobilized as OR (30 per cent: ORR, 14.8 per cent: ORE, 11.7 per cent: ORT). The main ORR donors were the Natcoms, thematic funds, GAVI, UNFPA joint funds and ECHO.

Several programme areas remained underfunded. The Social Policy and HIV Programmes were unable to mobilize OR, depending on RR support while the Nutrition component was predominantly funded by ORE to address humanitarian needs of vulnerable children. The office received the most OR (over US\$ 470,000) for FGM/C abandonment efforts, and the least for the Education Programme (US\$ 50,159), complemented by thematic funds received in 2014 for 2015.

Through close monitoring and monthly reporting at both programme and CMT meetings, the CO maintained high standards in the effective utilization of its available revenue, ensuring that the utilization rates of all resources, both OR and RR, performed. As of mid-December, 92 per cent of the overall office revenue was absorbed.

Evaluation

The 2015-2016 Integrated Monitoring and Evaluation Plan (IMEP) was based on the Rolling Work Plan (2015-2016). The plan was finalized and shared with the RO in the first quarter of the year. The activities in the IMEP were mainly geared towards filling the knowledge gap of the CP, particularly in developing the next CP. The IMEP is monitored regularly, however a majority of the activities were either delayed or postponed due to unavailability of consultants, timing constraints and limited funding.

The Tostan Community Empowerment Programme Impact Evaluation was one of two evaluations planned for this year; a second draft of the report was submitted. The evaluation was done with consideration of the UNEG guidelines especially in the ethical aspect of the evaluation. The national FGM/C steering committee, under the auspices of the Women's Bureau, doubled as a steering committee to provide oversight so the evaluation was of quality. Some members of the steering committee were given the opportunity to go on a monitoring visit when data collection was on going. The RO, Tostan, and professional staff of the CO also provided technical guidance. The findings of this evaluation will inform the next CP drive the abandonment of FGM/C and child marriage.

The Child Survival and Development Programme Evaluation suffered many setbacks in terms of attracting qualified consultants. The job advertisement was posted several times, with only one prospective applicant showing interest. However, this applicant was not available at the time needed to do the evaluation. Hence UNICEF Gambia decided to postpone the evaluation for 2016.

Efficiency Gains and Cost Savings

Some efficiency gains and cost savings were achieved in 2015 at both Management and Operations levels. Within the Operations Management Team group, UNICEF Gambia facilitated the finalization of a joint LTA for the procurement of fuel. The expected gains were about 2.5 per cent on the overall procurement of fuel for the three main agencies (approx. US\$ 300,000). The CO renewed the contract for the CUG with Qcell mobile company, allowing free calls among CUG members and lower cost of calls between UNICEF Gambia staff and other Qcell users not part of the CUG. The main UN agencies involved in the CUG were UNDP, UNICEF, UNFPA.

The fibre optic project (internet) with the national company, Gamcel, registered the most gains, as the office received a 45 per cent decrease in the cost of internet from the beginning of the project in 2014 to date. The costs savings for the two years amounted approx. US\$ 3,000 for UNICEF Gambia alone. The cost of internet through the satellite (global LTA with EMC) reduced by 12 per cent.

The CO implemented the IP Telephony project to improve the communications systems and for cost savings in the overall cost of communications.

In addition, UNICEF Gambia adopted the UN's Delivering as One approach in February 2014, and initiatives were underway at the OMT level to finalize the Business Operations (BoS) Strategy roadmap and document.

The main services targeted from the initial assessment were the procurement of fuel, travel, common land and building/premises, HACT and the UN Dispensary.

The implementation of the BoS strategy will allow for the targeting of specific areas of intervention and give the CO the possibility to have more tangible numbers in terms of cost savings.

Supply Management

The 2015 Supply Plan was developed in collaboration with programme staff and closely monitored every quarter. However, some items were unfunded. The CO ensured that all offshore orders were placed on time and received in good time.

UNICEF Gambia 2015	Value in US\$
Programme	677,014
Operational Supplies	74,749
Services	332,326
Total	1,084,089

The items purchased were: emergency supplies consisting of bleach, soap & water treatment items; cold chain equipment; a vehicle & spare parts; school supplies; therapeutic feed; medical drugs and equipment; a generator; computer equipment; security equipment; fuel; stationery; and office furniture. However, UNICEF Gambia continued to encounter challenges for local procurement due to the small size of the market and closure of some major businesses.

Supplies channelled via Procurement Services	Value in US\$
Channelled via regular procurement services	1,290,906
Channelled via GAVI	2,636,040
Total	3,926,946

The Contract Review Committee met seven times this year to review submissions for procurement of goods and services and all submissions reviewed were approved. The CO maintained an LTA with a supplier for fuel; the discount offered was maintained for the duration of this year's LTA. To improve efficiency and ensure submission of clear specifications by partners, the Supply and Logistics Assistant continued to provide support and guidance to the partners in developing supply specifications. Spot checks were also conducted at partner warehouses to confirm deliveries and conditions of supplies.

Security for Staff and Premises

The UN system is composed of 14 Agencies, with nine housed in the UN House, a common premises in Cape Point, and five located out of the common premises.

In 2015, significant improvements of the common premises were implemented under the leadership of the OMT/UN Country Team. The total common budget for security was US\$ 126,049, of which UNICEF Gambia contributed up to 25 per cent. The following measures were also implemented:

- The configuration of the vehicle entrance and control area were reviewed
- UN building door and entrance gate were reinforced
- Concertina wire was put around the perimeter wall
- Card sweep and turnstile were installed
- Separate entrance for visitors and staff were built
- Search mirror and walk-through metal detector installed at the main entrance

- Parking area paved and cleaned and emergency doors marked
- Bulk SMS was implemented and tested allowing all staff access to information and instructions on major crises/events

Fire prevention measures were implemented to further an assessment conducted by an engineering company last year. The measures put in place after this assessment were the comprehensive upgrading of the distribution board, earthing systems and circuit breakers. Also, the fire alarm system was reinforced and extinguishers replaced. The last part of the recommendations were being implemented related to the installation/change of new switchboards for the generator rooms.

A security and a first aid training were organized for all wardens. The replacement of the radio communication from an analog to a digital system was budgeted in 2015 and implemented with the support of UNDSS Senegal, to be completed in early 2016. The latest SARA and MOSS were dated from August 2014; updated versions are being submitted for 2015. A new MORSS was approved on 15th May with new measures.

Human Resources

The CO staffing structure consists of 27 established posts: IP, NO and GS staff across all functional areas and three non-staff. Of the 27 positions, 13 are female.

Total 5 9 13 1 2

PERs: 32 per cent completion rate for 2014 and 81 per cent for mid-year review. Staff PERs are linked to the CO overall outputs, measured against programme results.

Learning and Development: In line with the approved Learning Plan 2015, two staff benefited from overseas training in Public Procurement and Advanced Geographical Information Systems respectively.

GSS: Work/life balance issues are on-going and addressed as and when needed. SOPs were reviewed, that of Contract Management was done in September 2015. Stretch assignments were pursued and two National Officers benefited and eventually moved on to International Professional category.

UN Cares: One staff member was nominated to attend UN Cares training in Ghana. The implementation of the 10 minimum standards on HIV in the workplace were not yet undertaken including the mandatory e-course.

Staffing Gaps: End of 2015, there were four vacancies: C4D Officer (1), Child Protection Specialist (1), Education Officer (1) and UNV (1). These will be addressed during the upcoming PBR.

ERM Training: A Business Continuity Plan training was carried out in 2014. No training was done in 2015.

Bridge of Funding Gap: There was a need to use RR funds to bridge OR funded position of Social Policy Specialist, P3 in 2015.

Effective Use of Information and Communication Technology

UNICEF Gambia's standard, cloud-based Office Automation tools improved the way staff members do their daily jobs. A major undertaking under Office 365 implementation was the changeover of the email system from Lotus Notes to Microsoft Outlook, built to service different devices anywhere once there is internet connection.

The rollout of Office 365 enabled the staff to access UNICEF Gambia-standard cloud based applications, enhancing both mobility and access to staff email. With automation tools available such as SharePoint, OneDrive for Business and Lync, knowledge management and collaboration among different sections become easier. Additionally, Skype for Business makes it possible for staff to participate in online audio/video meetings and conferences via computer, laptop and tablets.

UNICEF globally stopped using Dropbox and migrated to OneDrive. This allows staff members to share large files, and also work on the same file from one location.

UNICEF Gambia uses social media, such as Facebook, to create awareness and increase visibility of the different programmes.

In order to reduce the ICT footprint, the CO installed network printers in additional sections, and ensured that all printers had a Duplex unit. As part of the on-going PSB recommendations, below standard and obsolete equipment were donated to partners or sold.

As part of the BCP, the alternate site at the residence of the UNICEF Gambia Representative has a 4G WiMAX wireless connection. The Representative, Operations Manager, and Deputy Representative have 4G wireless connection at their residences. The Senior ICT Assistant has a 3G wireless connection as well.

Programme Components from Results Assessment Module

ANALYSIS BY OUTCOME AND OUTPUT RESULTS

OUTCOME 1 By 2016, women and children in the most vulnerable districts have access to quality maternal and child health services, including nutrition, PMTCT and WASH, and especially during emergencies.

Analytical Statement of Progress:

In collaboration with WHO and other partners, UNICEF Gambia was a key stakeholder in the development of the costed National Health Sector Strategic Plan 2014-2020. The costed strategic plan is finalized and operational plans were developed to enable the sector to coordinate the implementation and monitoring of the plan. UNICEF Gambia and WHO also provided both technical and financial support to the EVD preparedness and prevention efforts. UNICEF Gambia focused on the area of WASH as well as communication and social mobilization as outlined in the Ebola Virus Disease Preparedness Plan. WASH supplies were available in 88 health facilities and nine points of entry for infection prevention and control against Ebola, while water storage tanks were installed at the Basse Health Centre (Ebola holding center) to ensure the regular availability of water. UNICEF Gambia supported communication and social mobilization in 912 communities to raise awareness on EVD disease.

The need for regular and timely data was a key recommendation from the In-depth Review of

the UNICEF Gambia country programme 2012-2016 at midterm. This will allow for proper planning and monitoring of progress against indicators. The Health Management Information System (HMIS) data collection tool was revised with the help of UNICEF Gambia and other stakeholders.

In nutrition, UNICEF Gambia and the World Bank supported the scaling up interventions to prevent malnutrition among children under five years through the promotion of optimal Infant and Young Child Feeding Practices (IYCF), complementary feeding. UNICEF Gambia in collaboration with the National Nutrition Agency (NaNA) and IBFAN conducted an assessment on the progress the country made in Infant and Young Child Feeding policies, strategies and programmes. The report was finalized and shared with all key stakeholders. UNICEF Gambia also supported NaNA and Ministry of Health and Social Welfare (MoHSW) to train 35 health workers in IYCF counselling and 102 health workers in the Baby Friendly Hospital Initiative.

UNICEF Gambia continues to be the lead agency in strengthening the treatment of SAM using the IMAM approach, strategies to prevent micronutrient disorders and nutrition assessments, and in strengthening coordination and advocacy. UNICEF Gambia also provided technical and financial support to implement a second national nutrition survey in 2015 to assess the nutritional status of children under five and pregnant and lactating women using the Standardized Monitoring and Assessment in Relief and Transition (SMART) methodology. The preliminary data from the survey showed that the prevalence of Global Acute Malnutrition (GAM) was 10.3 per cent [95 per cent CI: 9.5 –11.5] and Severe Acute Malnutrition (SAM) was 2.2 per cent [95 per cent CI: 1.6 – 2.5].

UNICEF Gambia conducted IMAM technical working group meetings and joint monitoring visits involving almost 80 staff from MoHSW, NaNA, NGO and UN staff. UNICEF Gambia and other partners also supported NaNA to revitalize the National Technical Advisory Committee (NTAC) as a forum for national coordination of nutrition issues in general including the SUN.

In the area of WASH, UNICEF Gambia's and other partners' technical support for internal and external resource mobilization for the water sector was positive. The government secured a 3-year multiyear funding from the Saudi government through the Saudi Sahel Project to install a water reticulation system to 25 rural communities. The WASH Multi-sectoral Working Group continued to be active with two coordination meetings held this year.

The Gambia continues to maintain high immunization coverage rates through the implementation of the Reaching Every District strategies and the country is ranked high in the sub-region as one of the countries with the highest immunization coverage rates; according to 2014 WHO-UNICEF Gambia Joint Reporting Form (JRF) BCG coverage, which is an indicator of children's access to immunization services was at 96 per cent.

The Gambia is making steady progress in the elimination of Mother to Child Transmission of HIV with the support of the Global Fund, UNFPA and UNICEF Gambia. The Global fund and UNFPA were providing support in the area Antiretroviral drugs for the mothers and infants and UNFPA on capacity building on Prevention of Mother to Child Transmission while UNICEF Gambia was focusing on Early infant diagnosis. Forty six per cent (46 per cent) of the children targeted were tested and 46.8 per cent of PMTCT sites are providing testing. The Gambia implemented Seasonal Malaria Chemoprevention for the second year with financial support from Catholic Relief Services; UNICEF Gambia and other partners were members of the taskforce that provided technical input for the implementation of the intervention 88 per cent children under 3-59 months in CRR and URR benefited from the intervention protecting them

against Malaria. The Global Fund and UNICEF Gambia supported with the procurement of drugs for the implementation of malaria in pregnancy intervention; 34,154 pregnant women were reached protecting them from dire consequences of Malaria in pregnancy.

UNICEF Gambia and UNFPA continued to support for the capacity building for the management of maternal complications and new-born care as a follow up to the recommendations of the 2012 EMOC survey. Ninety health workers in 22 health facilities in four out of eight health regions were trained to improve the quality of care for new-borns and during delivery (RCH reports 2015).

UNICEF Gambia is an active member of the Global Fund Country Coordinating Mechanism. UNICEF Gambia participated in the review of the strategic plan which led to the development of the concept note submitted to Global Fund. Both the Malaria and HIV concept notes were approved by the Global fund.

Coordination within the sector remains a challenge and UNICEF Gambia and other partners are working with MoHSW to harmonize programmes.

OUTPUT 1 By 2016, a revitalized PHC strategy operational in the 20 targeted districts.

Analytical Statement of Progress:

Despite been ranked as a key priority within the health sector, the progress on the revitalization of primary health care (PHC) is stagnated due to the inadequate coordination mechanisms within the sector. The development and finalization of the health sector strategic plan presents an opportunity for the sector to be able to monitor and coordinate the implementation and monitoring of the plan that highlights the revitalization of PHC.

At service delivery, UNICEF Gambia supported the government with the annual procurement of additional drugs and essential supplies as a response to the bottlenecks identified in the health sector bottleneck analysis conducted in 2012. Drugs for the treatment of pneumonia and diarrhoea were procured in an effort to decrease morbidity and mortality related to these conditions in 228 PHC villages in three out of eight regions. However, due to the chronic shortage of drugs experienced in the country in 2015, the drugs were only distributed to the major and minor health facilities around the country. UNICEF Gambia was able to obtain 10,000 packets of free-of-charge antibiotics from supply division that had a close expiry date to help mitigate against this chronic shortage; UNICEF Gambia will continue to advocate for the procurement of essential drugs by the government.

UNICEF Gambia supported capacity building for community health workers (CHWs) on, and the validation of, the revised data collection tool. UNICEF Gambia also supported the capacity building of 15 Village Health Workers and 45 Traditional Birth Attendants on the revised data collections tools to ensure regular reporting of diseases for proper monitoring, planning and resource allocation. The supportive supervision visits conducted after the training enabled the Health Management Information System to have accurate and timely data for planning.

UNICEF Gambia's work around the revitalization of PHC will continue to be a priority in 2016 as the strategic plan is being implemented to avoid duplication of activities by partners and maximize on the resources available for the revitalization.

OUTPUT 2 Universal immunization for immunizations, Deworming and VAS by 2016.

Analytical Statement of Progress:

The Gambia continues to maintain high immunization coverage rates through the effective implementation of the Reaching Every District strategies. This elevated the country's status in the sub-region as having one of the highest immunization coverage rates. According to 2014 WHO-UNICEF Gambia Joint Reporting Form, BCG coverage, being an indicator of children's access to immunization services, was 96 per cent.

As a follow-up to the Effective Vaccine Management Training (EVM) assessment conducted in 2014, UNICEF Gambia supported the training of 25 national trainers on EVM, followed by cascade training for 200 health facility staff. These trainings equipped the staff with the capacity to deliver quality immunization services.

The country continues to introduce new vaccines with support from GAVI and partners. UNICEF Gambia supported the successful introduction of IPV into routine EPI services in April 2015 in line with the Polio Endgame Strategy. The introduction of this new vaccine will help boost the herd immunity of Gambian children thereby protecting them from the Polio disease.

The HPV demonstration project entered the second phase in 2015 and UNICEF Gambia supported the Adolescent Health assessment to identify the health intervention that can be co-delivered with the HPV vaccine. The assessment identified deworming as the health intervention, and 92 per cent of the targeted pre-adolescent girls in the demo area were reached with HPV vaccine and deworming tablets to protect adolescent girls against cervical cancer and worm infestations (EPI report 2015).

UNICEF Gambia supported the preparation and submission of a proposal to GAVI, which was approved, for the conduct of the Measles/Rubella campaign targeting all persons aged 9 months to 14 years old (802, 245 children). UNICEF Gambia continued to support the procurement of Vitamin A and deworming tablets. A total of 166,630 children between 6-59 months (56 per cent coverage) and 47,020 postpartum mothers were supplemented with vitamin A.

The EPI Programme, with support from UNICEF Gambia, conducted quarterly supportive supervision, cold chain expansion and preventive maintenance to monitor programme progress and the early identification of bottlenecks and remedial measures taken to avert them. In addition, the country is being supported by UNICEF Gambia to conduct a Knowledge Attitude and Practice study on immunization that will help to identify communication bottlenecks in reaching every child.

Interagency Coordination Committee meetings are held quarterly to put the immunization agenda forward and advance advocacy for increased resource allocation for immunization services.

OUTPUT 3 Comprehensive package of high impact health and nutrition interventions delivered in the 20 targeted districts by 2016.

Analytical Statement of Progress:

UNICEF Gambia is a key partner to the Government of The Gambia, supporting the implementation of high impact health and nutrition interventions in an effort to reduce maternal and under five mortality.

With UNICEF Gambia support, NaNA and the Ministry of Health and Social Welfare (MoHSW) trained 35 health workers in Infant and Young Child Feeding counselling in West Coast regions 1 & 2, 102 health workers in the Baby Friendly Hospital Initiative, sensitized 91 Village Support Group members and other influential leaders on IYCF in the Upper River and Central River regions as part of efforts to prevent malnutrition.

As a follow-up to the salt iodization machines that were procured by UNICEF Gambia in 2012, UNICEF Gambia supported NaNA to hire a consultant to train National Association of Salt Producers and Traders (NaSPAT) members and a local mechanic in the operationalization and maintenance of the machines to enable them to iodize the salt harvested in the country. During the reporting period, UNICEF Gambia strengthened the treatment of SAM using the IMAM approach. A total of 52 health workers were trained in the IMAM approach and 16 pharmaceutical and other health staff were oriented in nutrition supply chain management. A total of 6,210 SAM children were admitted for treatment in the IMAM program of which 3,500 were discharged, with 2,649 (75 per cent) discharged as cured, 607 (17 per cent) defaulted and 171 (4.8 per cent) died.

UNICEF Gambia supported the early infant diagnosis testing with 46 per cent of the children targeted in 2015 for testing, as per the HIV strategic plan, tested in 2015, of which 3.6 per cent tested positive. About 46.8 per cent of PMTCT sites are currently providing testing (NACP reports 2015). This will allow for the positive infants to be put on treatment for HIV. UNICEF Gambia supported with drugs for the implementation of malaria in pregnancy; 34,154 of women were reached, protecting them from the dire consequences of malaria in pregnancy. Capacity building support for the management of maternal complications and new-born care continued with 72 health workers across 22 major and minor health facilities trained to improve the quality of care for new-borns and during delivery (RCH reports 2015). Additionally, 50 nurses and midwives were trained on the use of pathograph to monitor the progress of a woman in labour. This will enable for early referral and the aversion of maternal mortality in the event of an anomaly.

OUTPUT 4 WASH services delivered, utilized and maintained in 200 PIQSS schools and selected communities in the 20 targeted districts.

Analytical Statement of Progress:

At the policy level, UNICEF Gambia provided technical support for the water sector reform programme of the Government to ensure that children's issues were well represented. The 1979 Water Act was revised and submitted to Cabinet for approval, while Human Resource Development and Financial plans were developed for operationalisation of the new proposed water management structure. In the education sector, WASH in schools was included in the revised Education Sector Policy as a priority area.

The WASH programme contributed to the implementation of a cluster randomised controlled trial research by a PhD candidate from Birmingham University. The purpose was to evaluate the effectiveness of a behavioural change intervention on mothers weaning food preparation and handling practices in 15 rural communities within the Central River Region. The preliminary result from the evaluation of this intervention has shown a marked improvement in the practice of hand washing among mothers as well as reduction in the incidence of diarrhoeal diseases among intervention communities. The final result of the evaluation will be validated and published in 2016 to add to the knowledge management on how programming on behavioural change for mothers on hygiene at community level can be taken to scale.

WASH in schools was high on the CO 2015 agenda in order to reach the most vulnerable children. Overall, 32 rural schools in the Central River and Upper River regions, with enrolment of 14,670 pupils, gained access to improved water supply, basic sanitation and hygiene. The quality of water points in 140 PIQSS schools were monitored and disinfected twice in the year to reduce the risk of water borne diseases among school children. A total of 60 teachers, cluster monitors and health workers were trained and engaged in hygiene promotion in schools. Through this effort, hand washing was institutionalized in 120 schools. To ensure children have access to continuous water supply from schools and communities, water systems in 22 vulnerable communities with a population of 17,604 people were rehabilitated and Management Committees established and trained on the maintenance of the facilities.

Despite the above progress, coordination, monitoring and information system for WASH remains a challenge. A WASH bottleneck analysis will be conducted in 2016 to identify barriers to equitable WASH services

OUTPUT 5 DRR strategies in place and 100 per cent of children and women affected by disaster supported timely with supplies, diseases prevention and treatment interventions.

Analytical Statement of Progress:

In collaboration with WHO, the 2014 National Ebola Virus Disease (EVD) Plan was revised based on the WHO new EVD guidelines for high risk countries, and operational plans developed to strengthen national preparedness and readiness. Through strong collaboration between the two agencies, the National EVD taskforce remained active and used the EVD plan to maintain well-coordinated national preparedness efforts with government leadership and define responsibilities.

The upgrading of the sanatorium at central level to a standard Ebola Treatment Centre was completed and water storage tanks installed in the Basse Health Centre (a holding facility) in the Upper River Region. A total of 60 health care workers were trained on EVD surveillance and contact tracing, and posted to critical border points for screening of travellers from affected countries. Infection Prevention Control capacity of 88 public health facilities, including health posts at critical border points, were strengthened through provision of essential supplies and equipment such as PPEs, detergents, body bags and disinfectants.

UNICEF Gambia continued to lead the communication and social mobilization activities of the National EVD Plan. A total of 6,906 Village Development Committees members from 912 communities were trained on community engagement on EVD for prompt reporting of suspected cases. As part of the school EVD preparedness, 750 hand washing facilities were distributed to 150 schools for the promotion of hand washing. In collaboration with BBC Media Action, a total of 40 journalists and humanitarian communications workers were trained and prepared to respond if there is an Ebola outbreak in The Gambia.

The Humanitarian Country Team developed a joint humanitarian strategic response plan for the Sahel nutrition and food crisis. However, this plan was grossly under-funded. Despite this, with UNICEF Gambia support, 2,892 severely malnourished children under-five were reached with therapeutic care and hygiene messages between January and June. Of this number, 1,494 were discharged, with 1,193 (80 per cent) discharged as cured, 197 (13 per cent) defaulted and 62 (4 per cent) died, 42 (2.8 per cent) did not recover. The 2.8 per cent non-recovered were referred to hospitals for further investigation.

Access to water supply, basic sanitation and hygiene was improved in 16 health/nutrition centres, while 90 hygiene animators were trained and engaged in hygiene promotion in 30 communities with high malnutrition rates, reaching 13,000 care givers.

In response to a trachoma outbreak in a *dara* (qur'anic learning school) in a community in the Central River Region, 300 *talibes* (students) were reached with hygiene messages and sanitation facilities. Storm damaged classrooms and WASH facilities were repaired in 15 schools, thus restoring access to education for 3,500 pupils.

OUTCOME 2 By 2016, an increased number of mothers and caregivers in the most vulnerable districts adopted essential care practices for child survival and development.

Analytical Statement of Progress:

UNICEF Gambia supported the promotion of essential family care practices and community empowerment to end open defecation. Twenty four Multi-Disciplinary Facilitation Teams were trained as trainers in North Bank Region East and engaged to conduct cascade training for 350 village support group members from 17 PHC villages. The retraining of MDFTs in Central River and Upper River regions was also conducted to reinforce the knowledge. In an effort to diversify and widen the partnership in the promotion of the key household behaviours, an orientation meeting was held with key NGOs partners in the country.

Through UNICEF Gambia's advocacy, The Gambia was the first country on the continent to have a presidential declaration to end open defecation by 2017 as a follow-up to the Ngor declaration in May 2015 for countries in Africa to achieve open defecation free by 2030. The national pronouncement to end open defecation in The Gambia by 2017 demonstrates the high level of political commitment and the importance the Government attaches to improving access to basic sanitation. There was a launching ceremony at community level attended by the Minister of Health and Minister of Environment. It was also attended by regional governors and community leaders. The launching ceremony provided a platform to break the culture of silence on open defecation. It also provided an avenue at national and regional forums for the subject of ending open defecation is discussed and also reflected in plans for action. A two-year national action plan to achieve the national goal was developed. The action plan was presented to the Ministers of Finance, Health, Environment, Local Government, Education and Justice for their approval. A total of 30 National Assembly Members and 150 regional Technical Advisory Committees and district authorities were sensitized and mobilized for a national drive to end open defecation. Through this, the National Sanitation Policy and Strategic Plan were forwarded to Cabinet for approval after several years of delay.

At the service delivery level, the triggering of communities to end open defecation was conducted. A total of 170 extension workers were trained on community triggering facilitation skills. Through this effort, 370 communities were triggered, of which 270 were certified as Open Defecation Free communities. Access to improved sanitation facility is a challenge, compounded by weak markets for supply of sanitation technologies. Artisans in three regions were engaged and organized into associations for the production and promotion of latrine slabs. Through this, 30 Open Defecation Free communities, with a population of 7,953, were able to achieve access to improved sanitation facilities.

OUTPUT 1 75 per cent of care givers in the 20 targeted districts have functional knowledge and skills in the 4+ 2 key Household practices and are empowered to practice them by 2016.

Analytical Statement of Progress:

The emergence of EVD in the sub-region caused a slight shift of focus for the Directorate of Health Education and Promotion from the promotion of key household behaviours to communication and social mobilization for EVD. Nonetheless, UNICEF Gambia supported the scaling up of the promotion of key household practices for enhanced child care practices. Twenty four Multi-Disciplinary Facilitation Teams (MDFTs) were trained as trainers in North Bank Region East (NBRE). These change agents trained and equipped 350 village support group members from 17 PHC villages in NBRE with the knowledge, skills and portable visual communication materials to facilitate family and community dialogue for improved child care. Refresher trainings were conducted for 12 community health nurses in the Upper River Region (URR) and 17 in the Central River Region (CRR) to enable them to better promote the key household behaviours. These interpersonal communication efforts were complemented with interactive radio programmes in CRR, URR and NBRE. A booster campaign for the key household behaviours is planned for early 2016 with the UNICEF Gambia Goodwill Ambassador to reinforce the messages that were disseminated. The Gambia expanded the number of primary health care villages and the key household behaviours trainings will be conducted in these communities.

In an effort to diversify and widen the partnership in the promotion of the key household behaviours, an orientation meeting was held with all key NGOs in the country. This advocacy and orientation meeting was to get more partners involved in funding the key household behaviours interventions.

A major constraint for the implementation for key household behaviours is the departure of the C4D officer to take up post in another country office. This caused a delay in the implementation of some of the activities and some had to be postponed due to the lack of human resources. A Knowledge Attitudes and Practices survey was planned but could not be conducted, as well as an indicative study in one district in CRR on the effect of the promotion of the key household behaviors on under five morbidity and mortality.

OUTPUT 2 By 2016, 600 communities are committed to abandonment of open defecation and implemented CLTS action plan.

Analytical Statement of Progress:

The Gambia is committed to meeting the national target of universal access to basic sanitation by 2020. Through UNICEF Gambia's continuous engagement and advocacy with policy makers, in August 2015, the President officially declared to end open defecation in The Gambia by 2017. The launching of this Presidential declaration, conducted during a press briefing at community level, broke the culture of silence on open defecation. This provided an avenue at national and regional forums where the subject of ending open defecation is being discussed and also reflected in plans for action. A two-year costed action plan to end open defecation in The Gambia was developed, focusing on coordination and monitoring, to end open defecation in rural and urban communities and in institutions. The action plan was presented to the Ministers of Finance, Health, Environment, Local Government Education and Justice for their approval. A total of 30 National Assembly Members as well as 150 regional Technical Advisory Committees and district authorities were sensitized and mobilized for a national drive to end open defecation. As a result, the national sanitation policy and strategic plan was forwarded to Cabinet for approval after several years of delay.

UNICEF Gambia supported the implementation of Community Led Total Sanitation (CLTS) in the rural areas. A total of 170 extension workers were trained on the concept of CLTS to address the human resource gap. These facilitators, and those previously trained, triggered

and followed up on 370 open defecation communities. Of this number, 270 villages – with an estimated population of 20,684 people – were certified Open Defecation Free communities (CLTS data base, 2015). However, planning and monitoring of quality CLTS activities at regional level is a challenge. In 2016, the CO will provide support to strengthen planning and monitoring capacity of the regional taskforces through coaching.

Access to improved sanitation facility is a challenge compounded by weak markets for supply of sanitation technologies. Artisans in three regions were engaged and organised into associations for production and promotion of latrine slabs. Through this, 30 Open Defecation Free communities, with a population of 7,953, were able to achieve access to improved sanitation facilities. The national campaign for total sanitation as a national norm is gaining momentum and support from other players. The National Nutrition Agency, through World Bank funding, is rewarding communities for availability and usage of a latrine and hand washing practices.

OUTCOME 3 Improved quality of education in 40 per cent of Lower Basic Schools in the most vulnerable areas nationwide, especially CRRS, CRRN and URR.

Analytical Statement of Progress:

The specific progress achieved against this PCR was the result of the work of many partners including the Ministry of Basic and Secondary Education (MoBSE), the Local Education Group (LEG) and local NGOs such as FAWEGAM and Future in Our Hands.

At upstream level UNICEF Gambia supported the development of a national in-service training plan and the coordination of the implementation of that plan. UNICEF Gambia's specific contribution was mainly at downstream level focusing on the implementation of the Programme for Improved Quality Standards in Schools (PIQSS). The PIQSS strategy focuses on 4 areas of quality improvement namely: school environment and management, teaching and learning, learners' welfare, and sustainable community participation. Cumulatively from 2012, in 2015 the PIQSS was implemented in 120 schools and was seen to be an effective strategy by the MoBSE in the overall improvement of learning outcomes for children.

Improving the National Assessment Test (NAT) performance is a main activity in the school improvement plans which every school is required to develop annually. Under the PIQSS, UNICEF Gambia supported the provision of educational supplies and the training of teachers in child-centred methodologies, gender responsive pedagogy and inclusive practice. Support to the implementation of the School Star Award System also promoted in schools the culture of self-assessment and taking remedial actions towards improving weaknesses. These contributed to overall performance in the 2015 NAT results. In 2015, NAT was conducted for Grade 3 but not for Grade 5. In Grade 3, the overall national performance from public schools at Grade level competency (i.e. 40 per cent – 100 per cent of scores) increased from 56 per cent (2014) to 58.5 per cent (2015), with English at 64.8 per cent, and Mathematics at 52.2 per cent. In one of UNICEF Gambia's intervention regions, the Central River Region (CRR) which also has the worst development indicators, the overall Grade 3 performance increased from 39 per cent (2014) to 45.8 per cent (2015), with English at 51.3 per cent and 40.5 per cent for Mathematics. Similarly, in the Upper River Region (URR), another vulnerable region, there was an overall increase from 42 per cent (2014) to 50.6 per cent (2015), with 56.7 per cent (English) and 44.6 per cent (Maths).

As a first step in implementing the national training plan which was developed in 2014, the MoBSE used the successes of the national language pilot, the EGRA, using the Jolly Phonics and Serholt Early Grade Reading Assessment (SEGRA) methodologies to adopt a common

approach to developing reading skills in schools. Under the synchronised approach, the medium of instruction for the early Grades would be in the local languages with English Language treated as a subject. UNICEF Gambia's support to this new approach is in strengthening the coordination mechanism and monitoring activities in UNICEF Gambia intervention regions. Assessment of SEGRA in Grade 1 showed that 59 per cent of the children tested were able to recognize, sound and blend. In Grade 2, 65 per cent of the children tested were able to recognize, sound, blend and read simple short sentences. In the same vein, 57 per cent of the Grade 3 children tested were able to read and comprehend short passage which is an improvement over the group tested in 2014 when 46 per cent were able to read, showing an 11 point increase in one year.

According to the Education Management Information System (EMIS), the national Primary Completion Rate in 2015 is 73.6 per cent (Boys: 72.8 per cent, girls: 74.4 per cent) showing a marginal drop of 0.2 per cent from 2014. This may be the effect of the School Improvement Grant, educational supplies from UNICEF Gambia or the interventions to support Mothers' Clubs and School management Committees. Specifically, the rates in CRR and URR are as follows: CRR dropped from 40.7 per cent in 2014 to 39.5 per cent in 2015 and URR marginally increased from 53.5 per cent in 2014 to 53.6 per cent in 2015. The two regions are still performing below the national average.

In the ECD school readiness initiative, UNICEF Gambia supported ECD annexed facilities in 30 PIQSS schools in 2015, in addition to the 30 previously supported. As a result, 60 ECD facilitators are now equipped to use the UNICEF Gambia ECD Kit; 60 now have skills in ECD toy making; and about 90 parents were introduced to improved parenting and child care practices. The results of these interventions are demonstrated in increased ECD enrolment from 41.1 per cent in 2014 to 45.4 per cent in 2015.

OUTPUT 1 Implementation of national education strategic plans and policies informed by equity focused research including inclusive education for children with disability.

Analytical Statement of Progress:

The most significant result of this IR was the effectiveness of UNICEF Gambia's advocacy and technical support on ECD and out-of-school children. The advocacy resulted in the prioritization of these issues in the new 2016 – 2030 education sector policy pronouncements. UNICEF Gambia participated in the thematic working group and presented two technical papers (one on ECD and another on Inclusive Education) during the national Conference on Education. As a result of UNICEF Gambia's evidence-based advocacy, the Education Sector was encouraged to accept universal access to ECD and to explore options to reach out-of-school children especially those attending the *Daras* (Qur'anic learning centres). The School Improvement Grant, which significantly reduced cost burden of education on parent, could also be expanded to cover ECD in the new policy.

UNICEF Gambia continued to support the development of sub-sector operational policies for Inclusive Education and ECD. The inclusive Education policy was finalized and the stakeholders are being sensitized on the content. The ECD operational policy was revised to integrate the elements of the WCARO ECD prototype, especially early learning assessment and parenting education.

Additionally, UNICEF Gambia, as the chair of the Local Education Group (LEG), facilitated the review of the Education Sector draft policy pronouncement for the 2016 – 2030 Education Policy. As a result of the review work, the policy pronouncement were much more focused and

sharper. The LEG ensured that the Education Sector Policy options are aligned with the Sustainable Development Goals.

OUTPUT 2 By 2016, an in service Teacher training system is operational and the pre-service curriculum at the Gambia College and the Primary Teachers Extension Training Programme includes child centred and ECD modules.

Analytical Statement of Progress:

From the lessons learnt during the implementation of the national language pilot, the Jolly Phonics and the Serholt Early Grade Reading Assessment, the Ministry of Basic and Secondary Education adopted a common reading approach call *Gambia Read*. In 2015, UNICEF Gambia supported the national coordination mechanism and monitoring of *Gambia Read*. This common reading approach is now developed and all stakeholders are using it for early grade reading activities under the national training plan.

Under this IR, the support to the Gambia College was for the revision of the Early Childhood Development (ECD) curriculum (syllabus and modules). The ECD Certificate Programme is a 3-year part-time programme designed to cover the needs of ECD facilitators. The curriculum for the existing programme had been in place nearly 10 years without being revised. The revision is intended to modernize it. The new curriculum covers new elements such as ICT and is more focus on developmental domains (cognitive, physical, linguistic, and socio-emotional) rather than early literacy and numeracy skills development. The draft syllabus and modules are available and would be finalized in early 2016.

OUTPUT 3 By 2016, 200 Lower Basic Schools in 20 targeted districts implement the PIQSS package, including ECD.

Analytical Statement of Progress:

In 2015, the PIQSS package reached 120 schools in the UNICEF Gambia intervention regions of Central River and Upper River regions (CRR, URR). Progress on the four components of the PIQSS package in 2015 include:

1. **Improved school environment and management:** 18 new fully furnished classrooms, each with a capacity of 50 students, were constructed and an additional 54 VIP toilets were built. All new PIQSS schools had environmental clubs established to ensure clean learning environment for the children. The management skills of 30 head teachers in PIQSS schools were improved through delivery of the Curriculum Management module of PIQSS.
2. **Improved teaching and learning:** About 186 teachers in the 2015 cohort of PIQSS schools are now applying improved teaching methodologies such as child centred teaching methods, inclusive pedagogy and gender responsive methodologies. All the 30 schools of the 2015 cohort (6,896 children) were provided with adequate educational supplies and the 30 schools of the 2013 cohort (5,932 children) were provided with supplementary supplies. The cost burden of education on parents is much reduced and students' attendance improved to more than 80 per cent as a result. The improved performance in the National Assessment Test testifies to these improved learning achievement of the children.
3. **Improved Children's wellbeing:** Over 120 teachers and 480 students from the 120 PIQSS schools acquired increased knowledge on nutrition education and HIV/AIDS

prevention. The 54 VIP toilets constructed and fitted with hand washing facilities encouraged both students and teachers to practice hand washing. This was seen as good practice in the prevention of EVD. As a result of the new toilets, about 1,350 children (ratio of 1 toilet to 25 children) would directly benefit.

Sustainable and improved Community Participation: As a follow-up to the 2014 nationwide child-to-child census, a targeted community sensitization was conducted in the communities with large numbers of out-of-school children. Communities in the low enrolment districts, especially in CRR and URR, were targeted. The results would be reflected in the 2016 EMIS report. Furthermore, the Mothers' Clubs of the 2015 cohort were also supported to promote awareness of the importance of education with the view to improving retention, completion and performance. These figures were still high and necessitated the intensification of communication and advocacy interventions to reduce the number in 2015.

OUTCOME 4 Enrolment and completion rates in lower basic schools particularly for girls in rural areas reach 70 per cent and 30 per cent respectively in CRR & URR

Analytical Statement of Progress:

UNICEF Gambia's contribution to this PCR was through provision of classrooms and toilet facilities in deprived communities; provision of learning materials to reduce cost burden on parents; and empowerment of Mothers' Clubs and School Management Committees to conduct enrolment campaigns in their local communities. In the UNICEF Gambia intervention regions, Central River and Upper River regions (CRR, URR), some progress were made but there is still a lot to be done as these two regions continued to perform below the national means in many education indicators.

The Gross Enrolment Ratio (GER) for Lower Basic Schools nationally increased from 97.1 per cent in 2014 to 101.2 per cent in 2015 (EMIS, 2015). The GER reached 64.8 per cent in CRR (boys: 57.4 per cent, Girls: 72.3 per cent), and 95.2 per cent in URR (boys: 95.9 per cent, girls: 94.5 per cent) surpassing the target of 70 per cent. Similarly, the Net Enrolment Ratio improved in CRR to 54 per cent (boys: 47.4 per cent, girls: 60.7 per cent), and URR to 73.1 per cent (boys: 73.4 per cent, girl: 72.9 per cent) surpassing the target of 70 per cent. The Net Attendance Ratio for Lower Basic Schools also improved to 86 per cent (National Census, 2013). The completion rates that were as low as 24 per cent in CRR and 18 per cent in URR in 2010 also saw some significant improvements over 2014 with CRR registering 40.7 per cent but dropped slightly to 39.5 per cent in 2015; and URR registering 53.5 per cent in 2014 which marginally increased to 53.6 per cent in 2015 (EMIS 2015). The national completion rates for primary in 2015 were 73.6 per cent (girls – 74.4 per cent) and for Secondary School, 34.5 per cent (girls – 33.5 per cent).

UNICEF Gambia's contributions to these results were through the classrooms and toilet constructions, advocacy and communication interventions. In 2015, 18 fully furnished new classrooms, and 54 VIP toilets were constructed in deprived rural and urban areas with UNICEF Gambia support. The improved toilet facilities enhanced the school environment for over 1,350 children.

The gradual roll-out of the School Improvement Grant to Senior Secondary Schools in 2015, substantially reduced the cost burden of education on parents and thus created the opportunity for increased enrolment, retention, re-entry of students who drop out, and availability of learning materials for improved performance. UNICEF Gambia support, by way of providing teaching and learning materials for the 120 PIQSS schools, also contributed to improving the overall

retention rates and quality of education in the schools.

The major constraint in achieving this PCR was that, while enrolment and completion were slowly improving, they are still affected by issues of child marriage, poverty and parental preference for basic religious education as opposed to formal education in a school setting. The Cash Transfer pilot, intended to improve enrolment, was also closed.

OUTPUT 1 Community Engagement

Analytical Statement of Progress:

The Mothers' Clubs in 30 PIQSS schools acquire skills to conduct enrolment campaign and mobilize parents to participate in school activities, which they put to use. The impact of their work will be captured in the 2016 EMIS report; however, the motivation of parents is demonstrated in a few new schools started in 2015. Mothers' Clubs in these schools embarked on cultivating school farms; the harvest will be used to supplement school meals or sold to provide education supplies for needy children. This year, 10 Mothers' Clubs were provided with seed money to support their income generation activities. Most of the Mothers' Clubs face challenges such as lack of farm or horticultural inputs thus reducing their capacities to support their respective schools.

In 2015, the communities of 30 PIQSS schools in CRR and URR were engaged in enrolment and retention campaigns through the training of their School Management Committees, the Village Development Committees and the local authorities. Communities with low enrolment rates were also targeted through outreach activities and community radios.

OUTCOME 5 By 2016, vulnerable children in the most vulnerable districts have access to functioning child protection systems and services that protect them from violence, abuse, and exploitation

Analytical Statement of Progress:

Protecting children from violence, exploitation and abuse is an integral component of protecting their rights to survival, growth and development. Child Protection (CP) Systems are described as 'a set of laws, policies, regulations and services, capacities, monitoring, and oversight needed across all social sectors—especially social welfare, education, health, security, and justice—to prevent and respond to protection-related risks.' Thus responsibilities for CP System components are often spread across government agencies, with services delivered by local authorities, non-State providers, and community groups, underscoring the importance of multi-sectoral and multidisciplinary approaches, coordination and referral mechanisms. An effective CP System has both the prevention dimension and a response capability to respond to cases of violence, abuse and exploitation of children where prevention fails.

Child protection seeks to guarantee the right of all children to a life free from violence, abuse, exploitation and neglect in both emergency and non-emergency settings. In The Gambia as in most other countries with a similar context, many actors are engaged in child protection, including children and youth, families, communities, government, civil society and private organizations. International experience demonstrates that all these actors need to work together to ensure that child protection is effective for all children. Achieving child protection goals requires the following elements: (i) a strong framework of policies, legislation and regulations; (ii) a clear understanding of the roles, functions and relationships of the various actors, strong

capacity to carry out those roles, and coordination and collaboration among them; (iii) supportive social norms, including traditional beliefs and customs; (iv) effective promotion, prevention and response actions; (v) high quality evidence and data for decision-making; and (vi) sufficient resource allocation and efficient fiscal management.

In 2015, a major milestones away from project- and issue-based approach to a system approach to child protection was accomplished. The first ever national child protection strategy was developed, validated and finalized. It covers 2016-2020. The strategy is underpinned by the vision of “a country where all children receive comprehensive protection that contributes to the achievement of their full potential, and participate in their own protection from risks of violence, abuse, neglect and exploitation”. The changes had to achieve such a vision and thus to strengthen the child protection system in The Gambia, and the principles underlying the changes were also identified. The strategy consists of six long-term goals and six major objectives along the following lines:

1. To promote the right to protection;
2. To Strengthen the legal framework;
3. To bring about effective coordination and collaboration;
4. To develop human capacity and ensure financial resources;
5. To expand preventive and protective services; and
6. To create the necessary knowledge and information.

A costed child protection plan of action, which operationalizes the Child Protection Strategy, was equally developed, validated and finalized. The plan of Action covers 2016 to 2018. A series of national consultations were undertaken on the two strategic documents. The consultations were done at national level and also in the 8 regions. The purpose of the consultations were to get buy-in from all the stakeholders at national and decentralized level and also get local government, NGOs, community institutions such as the village development committees, the *Alkalo*, District Chiefs, the Imam as well as allied sectors such as Health, Education, Justice, Security, Judiciary and Interior to understand, recognize, accept and fulfil their roles as duty bearers in child protection system building and strengthening.

In a bid to enhance coordination, to make the process more participatory and inclusive and ensure national ownership of the process and the product, a national child protection steering committee was set up in 2015 and it remained operational throughout 2015. It is already considering a number of initial activities that could be implemented in 2016 to lay a strong foundation for the Child Protection System going forward.

This PCR was delayed by the low capacity, both technical and human resources, of Department of Social Welfare (DSW); the lack of a Ministry for Children to push for cabinet approval on major strategic documents; and poor management and leadership of DSW. There is also poor coordination of the sector as well as limited number of actors working in child protection and severe shortage of funding for child protection.

OUTPUT 1 By 2016, a comprehensive child protection system developed and functional.

Analytical Statement of Progress:

In 2015, the Child Protection system strengthening took a major milestone forward, following the completion of the Child Protection system mapping in 2014. The National Child Protection Strategy was completed through a consultative and multi-stakeholder participatory process. Through the same process, a Costed Plan of Action for the implementation of the Strategy was

completed. A national consultation followed by 8 regional consultations were held on the Child Protection Strategy and the Costed Plan of Action to get buy-in from the community members, local governance, NGOs and other stakeholders. The Child Protection Strategy and Costed Plan of Action are now finalized and awaiting cabinet approval.

A briefing paper was developed which summarizes the main findings of the mapping, the conclusions and the recommendations to build and/or strengthen the Child Protection system. The Briefing paper also outlined the roles and responsibilities of Ministries, Departments and Agencies such as social sectoral ministries like health, justice and education in child protection system approach as well as the linkages between the indigenous modes of child protection and the formal child protection system which operates at national level and reaches only few children and their families with a model of child protection services based on the European model delivered by formally trained social workers and other professional protectors. The briefing paper was shared with key stakeholders during consultations with senior staff of Ministry of Health, Education, Justice, The Judiciary, and Interior. The Consultations were meant to ensure that Allied Sectors recognize, understand and appreciate their role in child protection and garner commitment and support from them towards building and strengthening the Child Protection system.

OUTPUT 2 By 2013, DSW/Min. of Children affairs at central and regional levels have capacities to plan, implement, monitor and report on child protection services including during emergencies.

Analytical Statement of Progress:

In 2015, a costed capacity Building Plan of Action for the Department of Social Welfare was completed. Capacity Building plan followed a DSW Capacity assessment in 2014. It envisaged a DSW with the requisite technical, human, management and financial capacities at both national and regional levels as the core of the Child Protection system. Such a DSW should be able to plan, develop, implement, coordinate and monitor child protection programmes in the country. The costed capacity Development Plan of Action was finalised and is at the level of cabinet awaiting formal approval.

Since 2014, The Gambia moved away from line item budgeting to Medium-Term Expenditure Framework (MTEF) and Programme Based Budgeting (PBB). In 2015 as part of their capacity building support in planning, budgeting and financial management, DSW was supported in the preparation of their MTEF and Programme Based Budget to Ministry of Finance. The MTEF and PBB support to DSW will ensure that the country moves to these budget frameworks and that Child Protection becomes a programme or sub-programme which would ensure government budget is secured for child protection programme implementation for the MTEF planning cycle of 2015-2017. The capacity of key DSW staff was built in MTEF and PBB. The MTEF and PBB had performance targets that ensured efficiency in budget execution and that resources were tied to measureable results. That will also help DSW in the performance management of the department as a whole as well as the units and individuals under the department.

The Output was initially planned to be completed by 2013. However the output was severely delayed due to the unavailability of Maestral Consultants and the fact that the DSW Capacity assessment which was conducted together with the CP System Mapping and Assessment were seriously underestimated in terms of the complexity of the task and the time needed to achieve consensus and political buy-in from government. Thus during the In-depth Review of 2014, the output was amended with a new completion date set for 2016 instead of 2013.

OUTPUT 3 By 2016, core child protection services available and communities empowered to respond to child protection issues, especially in the targeted districts

Analytical Statement of Progress:

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OUTCOME 6 Reduction of Violence abuse and exploitation as a result of positive changes in gender and social norms

Analytical Statement of Progress:

In 2015, through the concerted efforts of UNICEF Gambia, its partners and other stakeholders such as UNFPA, UNDP, WHO and NGOs such as GAMCOTRAP and BAFROW, significant progress was made towards this PCR. Progress was registered at both the upstream policy level and downstream community level. Through the work of Tostan, GAMCOTRAP, BAFROW and other NGOs, a significant number of parents, girls and community members were reached with information on the harmful effects of FGM/C, child marriage, violence against children and wife-beating. In the Upper River Region (URR) this year, the Tostan Community Empowerment Programme was implemented. Thirty Fulla villages involved in the CEP completed Aawde I and made mini-declarations with six adopted villages to abandon FGM/C, child marriage and violence against children. By the end of 2016, when they complete Aawde II, they will make a public declarations to abandon all three forms of violence against children. This will bring the number of villages in URR that would have made public declarations to abandon FGM/C, child marriage and Violence against children to 181, out of 400. This represents 45 per cent of all the villages in URR.

GAMCOTRAP, BAFROW, UNFPA, ActionAid, Activista, Network on Gender-based Violence, ADWAC and the Women's Bureau all continued work on FGM/C and child marriage in the Central River, Upper River, Lower River, North Bank and West Coast Regions as well as other parts of The Gambia, ensuring that more children benefited from significantly reduced levels of violence in 2015 as a result of changes in gender and social norms.

UNICEF Gambia forged a strategic partnership with the Office of the First Lady and her foundation, Operation Save the Children Foundation (OSCF). UNICEF Gambia was the only UN agency invited to the drafting of the OSCF Strategic Plan. UNICEF Gambia immediately seized this opportunity to push for inclusion in the Strategy Plan some difficult child protection issues such as FGM/C and child marriage. UNICEF Gambia also advanced for the participation of the First Lady in the AU Girls Summit to end child marriage held in Lusaka, Zambia, in November 2015. All these efforts generated renewed high-level political interest and commitment to FGM/C and child marriage.

At the high-level policy level, UNICEF Gambia, working with its partners, sustained its advocacy with senior political and policy makers on FGM/C and child marriage in 2015. This led to the Presidential Declaration in November 2015 banning FGM/C. While the Presidential ban is a major achievement, it still needs to be translated into law. Further, social mobilization needs to continue at community level to motivate voluntary abandonment of FGM/C rather than forcing people to abandon it because of a law or presidential declaration. At the moment UNICEF Gambia is working with the Women's Bureau, UNFPA, UNDP and other stakeholders in drafting a bill that will prohibit FGM/C. It is hoped that the bill will become law in early 2016. Nevertheless, UNICEF Gambia will continue with social mobilization and social norms transformation at community level as well as develop a comprehensive C4D plan to support the implementation of the presidential ban and the law.

In area of wife-beating, the Network on Gender-based Violence continued its radio and TV spots with messages discouraging wife beating and child marriage. The network also set-up two new He4She platform in URR and CRR.

The indicator for this PCR is from the MICS is conducted every three to five years. As a result, lack of annual data to measure progress of this indicator remained a major challenge in 2015. Another constraint was the late finalization and signing of the PCA with Tostan. Consequently, the implementation of the CEP activities were seriously delayed. A third constrained was the loss of UNICEF Gambia's C4D officer. Many GBV activities that needed C4D inputs were therefore not implemented.

OUTPUT 1 By 2016, 100 per cent of communities participating in the community empowerment programme are committed to abandon FGM/C, child marriage, violence against children and declare it in a public declaration.

Analytical Statement of Progress:

In 2015, UNICEF Gambia signed a new PCA with Tostan to support the introduction of the Tostan's Community Empowerment Programme (CEP) into 30 new Fulla communities in the Upper River Region (URR). In this new PCA, the partnership was broadened to ensure a more specific focus on child protection, especially in the area of violence against children, child marriage and FGM/C. As of December 2015, 150 classes were held for the 1,580 adults and 1,159 children who are enrolled on the CEP informal classes which teaches literacy skills, health risks and complications of FGM/C and child pregnancies, among others. The informal classes also provided participants the platform to debate and reconsider practices and social

norms that were previously accepted without question, such as FGM/C, child marriage, violent discipline, and other forms of gender-based violence.

In addition to the classes, 100 radio programmes covering the various aspects of the programme, including the social norms associated with the harmful traditional practices, were broadcasted bi-weekly on air. Moreover, six rounds of social mobilization activities and five inter-village and five inter-zonal meetings were held in and around intervention communities to reach members of the communities not participating in the CEP classes. They also served to foster community dialogue on harmful traditional customs affecting the wellbeing of women, in a bid to challenge and change the social norms which accepted these customs.

Through the informal classes and social mobilizations activities, communities learned about issues related to children's rights including child marriage, FGM/C, violence against children and other harmful practices. Communities were therefore provided with the requisite knowledge to empower them to protect vulnerable women and children and to join the expanding grassroots movement to abandon harmful practices that affect women and children. In December 2015, as a result of the programme, 100 per cent of the enrolled Fulla communities publically declared to abandon harmful traditional practices of violence against children, FGM/C and child marriages.

An outcome evaluation of Tosatn's CEP was commissioned in 2015. The preliminary reports of the evaluation revealed that the CEP was effective and relevant, although some FGM/C practices still continued in communities after the public declarations. However, as it was not a prevalence survey, it was not possible to determine from their evaluation the prevalence of FGM/C in Tostan communities that already made public declaration compared to before they made the declarations.

OUTPUT 2 By 2016, acceptance of domestic violence and FGM/C at the national level decreased by 25 and 22.5 percentage points respectively

Analytical Statement of Progress:

FGM/C and wife beating are two forms of violence against women widely accepted and practised. According to the 2013 DHS, 58 per cent of women, aged 15-49, think that a husband is justified in beating his wife for any of five reasons. For FGM/C, both practice and acceptance is high with a national prevalence rate of 75 per cent and an approval of 65 per cent according to the 2013 DHS.

In a bid to reduce acceptance and prevalence of violence against women and specifically domestic violence and FGM/C, in 2015 UNICEF Gambia intensified its support to the Government and other partners, both at the national and community level, through the National Steering Committee on FGM/C and the implementation of the Tostan CEP.

UNICEF Gambia supported the functioning of the National Steering Committee on FGM/C, which continues to coordinate and oversee FGM/C abandonment campaign nationally. The strengthened committee resulted in greater collaboration of stakeholders. UNICEF Gambia also supported dialogue with religious leaders on FGM/C, reaching 150 Islamic religious leaders in five regions with messages on the harmful effects of FGM/C in a bid to move them towards the abandonment of the practice. In November 2015, the country witnessed a presidential ban on FGM/C. It is anticipated that this will soon be followed by legislation banning the practice.

In the area of GBV, the Communication Plan against wife beating was finalized and validated. Implementation of the plan commenced in 2015. A committee to oversee the implantation of the

plan was established to which UNICEF Gambia provided technical and financial support. UNICEF Gambia also supported the development of messages for various segments of society to stop the practice. Significantly, 240 community leaders, which included chiefs, council of elders, religious leaders and women councillors, were reached with key messages against wife beating for their active involvement in the campaign against this practice.

OUTCOME 7 National capacities strengthened to design and implement child friendly policies, legislative measures and budgets.

Analytical Statement of Progress:

In 2015, UNICEF Gambia worked at the upstream level with particular focus on further advocating for the approval of a national social protection policy and supporting the MTEF and PBB process through advocacy and capacity-building programmes. This year, a major focus was also on contributing to the formulation of a new UNDAF and CP by participating in the Common County Analysis and SITAN.

UNICEF Gambia supported the government in: (i) policy dialogue on, and advocacy for, social protection and expanded fiscal space for social sectors (health, nutrition, education and social protection); (ii) generating knowledge and evidence to inform decision-making on inclusive and integrated social protection systems; (iii) strengthening coordinating mechanisms, and increasing capacity of government and civil society partners on equitable social and economic policies; and (iv) promoting and strengthening innovative partnerships.

The 4th Social Protection forum was conducted under the leadership of the National Social Protection Steering Committee, bearing the theme: “Social Protection – inclusive growth”. As in previous high-level meetings, the 4th Forum brought together over 100 officials from the Government, international and donor agencies, non-government organizations, and the local media, among other partners. This was a good opportunity to update all respective stakeholders about progress on Social Protection by presenting and discussing the newly developed National Social Protection Policy and resource mobilization opportunities for its implementation. As part of the Social Protection Forum, UNICEF Gambia conducted a one-day workshop on resource mobilization for the implementation of National Social Protection Policy by engaging key stakeholders.

The draft National Social Protection Plan (NSPP) was submitted to Cabinet for further approval. UNICEF Gambia, together with other UN agencies, was advocating for approval of the policy paper for implementation to begin in 2016. The NSPP defines a comprehensive and crosscutting social protection agenda and proposes a set of priority actions to guide the gradual establishment of an integrated and inclusive social protection system in The Gambia. The Policy sets out in detail the Government’s vision and commitment to modernize the social protection system as well as the steps it will take to broaden coverage to those in need of support. The long-term vision of the policy aims to: establish, by 2035, an inclusive, integrated and comprehensive social protection system that will effectively provide protective, preventative, promote and transformative measures to safeguard the lives of all poor and vulnerable groups in the Gambia and contribute to broader human development, greater economic productivity and inclusive growth.

The current budget structure does not specify expenditures on Social Protection with a separate budget line. It is reported that the country spends about 1.2 per cent of GDP on social protection programmes. The vast majority of social protection programmes are funded by international donors targeting specific vulnerable groups of the population.

In 2015, UNICEF Gambia, in collaboration with UNDP, completed a Costing of Minimum Social Protection packages as part of supporting NSPP. The document will provide necessary guidance for the government to set up an inclusive Social Protection Floor by prioritizing target groups and gradually increasing its budget expenditure.

UNICEF Gambia led the UNDAF Thematic group on Social Protection and contributed to building synergy and collaboration for enhancing UN interventions and achieving better results as one.

OUTPUT 1 Print and broadcasting media have capacities to effectively analyze and popularized the equity agenda, child rights and protection issues.

Analytical Statement of Progress:

Two training sessions conducted this year for media representatives ensured continuity of minimum knowledge on the CRC and ethical reporting of children, and partially addressed the gap created by frequent attrition of media professionals. Continued exposure of the media to UNICEF Gambia funded projects and advocacy issues through field activities and public advocacy days such as the DAC, ICDB, and launching flagship reports heightened understanding of the vulnerabilities of marginalized children and consequently improved their reporting skills. Articles written by journalists over the past two years were consolidated into a magazine to determine their reporting ability and gauge their understanding of child rights issues. Basic equipment such as cameras and microphone recorders were purchased for selected journalists. Once distributed by year-end, the equipment will address basic operational gaps within these media houses and help them better popularize the child rights issues.

To enrich the media programme and build on strengthening media capacity, a study tour to Senegal was conducted for two representatives from the Government Department of Information Services, and one from Young People in The Media (YPM), a youth organization. The team learned about best practices in media relations from both public and private media institutions and some of the NGOs working with them. The knowledge derived from the tour was documented and will inform the development of an enhanced and more strategic media programme for the next country programme.

YPM had a weekly radio programme that allowed children to speak out about issues that affect them and share positive experiences with other children. Information and ideas emanating from these sessions were shared through a quarterly newsletter called *Halel* (children) as well as with journalists during training workshops for the media.

A major challenge for the programme was the low level of capacity within the media due to frequent attrition. Consistent media training will continue to minimize this challenge.

OUTPUT 2 The budget observatory platform has capacities to advocate, analyse and monitor public expenditures in the social sectors and key ministries', decentralized levels and national assembly member's skills are upgraded to design, approve and implement child friendly and equity- focused policies and legislative measures.

Analytical Statement of Progress:

In 2015, UNICEF Gambia collaborated and dialogued with the Ministry of Finance and Economic Affairs and the National Assembly.

As a result of UNICEF Gambia advocacy, the Budget Observatory Platform (BOP) was established under the National Assembly. It is chaired by the Deputy Speaker of the National Assembly and includes representatives from the National Assembly, Accountant General and Civil Society Institutions. The major goal of setting up the BOP is to support the National Assembly in the monitoring and evaluation of public expenditure as part of fulfilling its legislative mandate. In the long-term, this will contribute to strengthening the oversight role of the National Assembly and strengthen the capacity of the Public Accountant committee of the National Assembly.

In 2015, UNICEF Gambia organized capacity building programmes on Public Finance for Children (PF4C) targeting the representatives of Ministry of Finance, Sectoral Ministries, National Assembly and Civil Society Organizations. The training module was developed based on a capacity gap analysis of key target stakeholders.

Capacity-building on PF4C in The Gambia will also contribute to stakeholders' abilities to implement relatively sophisticated policy, budget, expenditure and impact analyses such as Public Expenditure Reviews (PERs), Public Expenditure Tracking Surveys (PETs) and Beneficiary Incidence Analyses (BIAs).

The budget projections for 2016 estimated a significant decline in the tax revenue capacity. This is associated with the poor macro-economic situation in the country. The share of borrowing in total revenue is expected to increase from 10 per cent in 2015 to 28 per cent in 2016. This approach will have a number of implications on the state budget expenditures.

OUTPUT 3 Social Protection Forum is formed and dialogue initiated on options for a social protection system

Analytical Statement of Progress:

The 4th Social Protection Forum was conducted under the leadership of the National Social Protection Steering Committee (NSPSC), bearing the theme: "Social Protection – inclusive growth". The Vice President and Minister of Women's Affairs, Dr Aja Isatou Njie-Saidy, attended this high-level meeting. The Forum brought together over 130 officials from the government, international and donor agencies, NGOs and the local media, among other partners. This was a good opportunity to update all respective stakeholders about progress on Social Protection by presenting and discussing the newly developed National Social Protection Policy (NSPP) and resource mobilization opportunities for its implementation.

UNICEF Gambia conducted a one-day workshop on resource mobilization for the implementation of the National Social Protection Policy by engaging key stakeholders. The workshop worked to increase Government budget allocations by engaging different stakeholders in the process.

The draft NSPP was submitted to Cabinet for further approval. UNICEF Gambia jointly with other UN agencies advocated for approval of the policy paper in order to start implementation in 2016. The NSPP defines a comprehensive and cross-cutting social protection agenda and proposes a set of priority actions to guide the gradual establishment of an integrated and inclusive social protection system in The Gambia.

The Gambia faced rising malnutrition rates linked to chronic food insecurity and a deteriorating

ability of rural communities to cope due to recurrent drought crises in 2011/2012 and 2013/2014 (reducing production – by 50 per cent on average for rice, maize, sorghum and groundnuts, according to some recent estimates). In order to respond to this emerging nutrition issues, UNICEF Gambia started a dialogue with the EU Delegation to mobilize resource to provide cash transfer programmes for women with children under two years. The EU approved a grant of US\$ 3,380,400 for delivering cash transfer programme in selected rural areas from 2016 to 2018.

The major objective of the project is to improve the nutrition status of about 7000 lactating women and children under two years in the North Bank Region (NBR), Upper River Region (URR), and Central River Region (CRR) of The Gambia. This model of social protection has multiple outcomes, most importantly the improving household capacity to address food insecurity.

UNICEF Gambia is planning to use this project as evidence-based advocacy for introducing government funded cash transfer programmes for vulnerable groups in the country.

OUTCOME 8 Government capacity strengthened to collect analyse and use data to inform policy and decision makers and conduct evaluations on policies and programmes by 2016.

Analytical Statement of Progress:

The importance of strengthening the Government's capacity to produce timely reliable and quality disaggregated data to inform policies and programmes is one area that UNICEF Gambia, together with other development partners, is constantly working on. On numerous occasions, the development partners collaborated to jointly support major surveys such as the Gambia Demographic and Health Survey (GDHS), completed in late 2014 and disseminated in 2015. The GDHS was jointly funded by UNICEF Gambia, UNFPA, UNDP, WHO, UNAIDS, USAID and the Global Fund. Another major survey jointly supported by the UN agencies this year was the Integrated Household Survey that will be completed in 2016 to inform the development of the National Development Plan 2017-2021, the UNDAF 2017-2021 and the UNICEF CPD.

In strengthening routine data systems, the Education sector was ahead of their peers in producing and timely disseminating the 2015 statistical information related to Basic and Secondary Education from Early Childhood to Senior Secondary Education. The publication included a selection of data from all educational institutions, both government and private, including the Madrassahs (formal Quranic schools). The publication has information on various education matrices such as: the core indicators of access and equity; the number of schools including ECD; enrolment; quality; teachers and teacher utilization; and efficiency indicators from the EMIS database. The availability of quality disaggregated data supported the sector to produce top notch sector policies and programmes and to monitor performance.

The Health sector was limited in terms of routine data production and dissemination. Data was collected at all levels of the sector but not analysed and disseminated on time. At times, there was a lapse over a year before publication and dissemination of data. This impacted the sector's planning and monitoring of programmes.

There was an executive order for all evidence-generation activities to go through screening at the Cabinet level before dissemination. This took up to a year or more and by approval, the data

was out-dated to inform the major policies and programmes it intended to inform. This situation discouraged development partners from supporting the activities.

OUTPUT 1 By 2016, equity based quality data is available and used for advocacy, designing, implementation, monitoring and reporting of national programmes, policies and laws.

Analytical Statement of Progress:

In 2015, UNICEF Gambia supported Government to produce equity-based quality data for advocacy, implementation, monitoring as well as for effective programming. One key activity being supported both financially and technically by UNICEF Gambia and other UN agencies is the Integrated Household Survey (IHS). The Gambia Bureau of Statistics was supported to conduct this survey and UNICEF Gambia sat in as a member of the technical committee to ensure that the survey's quality and implementation according to the agreed timelines. The IHS will be completed by June 2016 and will provide the most recent data on income poverty. The data will be used to support baselines for some of the indicators in the SGDs, the National Development Plan 2017 -2020 and the UNDAF 2017 – 2021. UNICEF Gambia also plans to use the data for further analysis, such as the Multi-dimensional Poverty Index, to inform the social protection programmes of the country.

UNICEF Gambia provided support to the National Nutrition Agency (NaNA) to collect and analyse data for the Standardized Monitoring and Assessment of Relief and Transitions (SMART) survey, to assess the nutritional status of children under five. Internationally comparable nutritional data was needed to inform policies and prepare for the recurrent nutrition crisis in the Sahel which the country suffers from. A diverse team was set up to conduct the survey from the Gambia Bureau of Statistics, Ministry of Health and NaNA. This team was trained on anthropometry, data collection and analysis. In addition to the support given by the CSD programme and the M&E officer, UNICEF Gambia also provided technical support from a consultant to oversee the survey and ensure quality. The results of the survey were presented to Cabinet for approval, pending dissemination, and will be used as baseline for nutrition indicators for the UNDAF and other development plans.

UNICEF Gambia fully supported the study of the Situation Analysis of Women and Children (SitAn) in 2015 to inform the development of the Country Programme 2017-2021. The SitAn involved national partners as members of the national taskforce responsible for providing oversight and assuring quality and as participants of the bottleneck analysis workshops to share experiences. Most importantly, it reinforced collaboration with the National Youth Council in conducting in-depth children's workshops to ensure that the voices of the children are heard and included in the analysis. The final report of the study is available and will form the basis of UNICEF Gambia's intervention for the next CP.

OUTPUT 2 By 2016, Key Social Sectors including the regional offices enhanced capacities in Programme planning, monitoring and evaluation.

Analytical Statement of Progress:

The development of the CP 2017-2021 started in 2015 and planning activities were conducted with stakeholders. A multi-sectoral meeting was held with partners as part of the Strategic Moment of Reflection where partners contributed on the development of the strategies for the next CP and shared with UNICEF Gambia their sectors' opportunities and emerging issues that could be seized to advance the welfare of children in the country. The UNDAF is being developed concurrently and key social sectors are actively participating in the identification of priorities and development of the M&E framework.

UNICEF Gambia is a member of the M&E Technical Working Group for the national development plan 2017-2020 and led the subgroup responsible for developing the tools for results framework and accompanying guidelines. These hands-on experiences enhanced the capacities of partners in the planning and monitoring of these development blueprints.

As part of enhancing capacities in monitoring programmes, a three-day joint monitoring exercise was conducted by UNICEF Gambia and partners from both the central and regional levels of the Ministry of Basic and Secondary Education (MoBSE) and the Ministry of Health and Social Welfare (MoHSW) to track the process of the implementation of the rolling work plans 2015 using UNICEF Gambia monitoring checklist. The exercise allowed the Government participants to determine areas of potential collaborations and learn from each other on best practices in the field.

The TOSTAN evaluation was conducted with close collaboration from partners in many aspects of the evaluation. The national FGM/C Steering Committee was also the Steering Committee of the Evaluation and, through this experience, they were exposed to how an evaluation is conducted and had the opportunity to go on a field monitoring visit when data collection was on-going for the evaluation.

OUTCOME 9 Cross Sectoral cost, supply and procurement.

Analytical Statement of Progress:

The purpose of the programme component was to support costs of Programme Implementation. The main result of this component was the efficient and effective implementation of the CP 2012 – 2016, focusing on on-going reviews and enhancement of management systems and processes, aiming at accelerating results for Gambian children and achievement of greater programme effectiveness and efficiency through:

- The development of staff capacity to fulfil their work by providing training, adjusting the work processes and adhesion to enhanced rules and procedures;
- Strengthening control mechanisms for planning, implementation and monitoring,
- Promoting a dynamic work environment that will help all staff to perform at their best capabilities while promoting staff professional and personal growth.

OUTPUT 1 Effective and Efficient Programme delivery, supply and procurement

Analytical Statement of Progress:

Transactions under cross sectoral were processed expeditiously. They ensured an optimal use of resources and achievement of all planned results under the four main Programme Components: Child Survival and Development, Basic Education, Child Protection, and Social Policy, Knowledge and Advocacy. The Standard Operating Procedures were in place and functioning. A risk self-assessment exercise was conducted in April 2015 involving all staff and covering various areas alike Governance, HACT/DCT, and Programme and Operations Support. This exercise led to a review and update of the Table of Authority. The CO reviewed its ERM in February 2015. A simulation of BCP and security at the inter-agency level were conducted in April 2015. TGCO was rolled out in 2015 with the implementation of the new Bank and Communication Management System (BCM).

OUTCOME 10 Programme Support

Analytical Statement of Progress:

Transactions were processed expeditiously. Through common services, TGCO reduced transaction costs in common services. UNICEF Gambia and other UN agencies had an LTA on fuel that gained two per cent discount on all procurement.

Through the UN operations management team ICT taskforce, the cost of internet service per month was reduced by 45 per cent, making a cost saving of US\$5 per month per staff.

In April 2015, the Gambia CO conducted a Risk Control Self-Assessment exercise involving all staff.

There was a HACT training intended for all staff and partners as well as a pre-audit of the TGCO coupled with a pre-audit of the HACT implementation in The Gambia. The TGCO developed a strategy and systematically followed-up on implementation of the recommendations of both the pre-audit and assessments.

The Business Continuity Plan (BCP) was updated and missing equipment was installed.

OUTPUT 1 Human Capacity**Analytical Statement of Progress:**

All office statutory committees were in place in 2015 and performed their assignments as per their Terms of Reference. The AMP 2015 was the result of a two-day planning retreat. The key results and management priorities were derived from an analysis of the lessons learned from the previous year (2014), regarding the internal office systems and business processes as well as programme planning, implementation and coordination mechanisms. In July 2015, a mini retreat was organized to review the key priorities when the new Representative joined the CO. A consultative process between the programme and operations sections and between staff and management helped in contributing to a smooth office management.

OUTPUT 2 Financial Resources and Stewardship**Analytical Statement of Progress:**

A macro-assessment was jointly conducted by the three ex-com agencies (UNICEF Gambia, UNDP, UNFPA) under the lead of the HACT working group chaired by UNICEF Gambia. The Regional HACT specialist from Nigeria supported the CO through the training of all UNICEF partners and staff and the pre-audit of HACT in The Gambia.

The non-post cost of the IB allocated in 2015 was fully utilized, and 100 per cent of the RR allocated was expensed. The amount was used to cover costs of the Communication for Development Officer, the Supply and Logistics Assistant, one Programme Assistant, one programme and Budget Assistant, one administrative assistant and three drivers. Moreover, the funds contributed to costs of common premises and services of the UN House, the implementation of the BCP recommendations, the renewal of the Representative vehicle, various ICT equipment for the Senior Executive Assistant and the Administrative Assistant, contract of photocopying services, and supply and procurement of essential items for programme implementation and monitoring such as fuel and office supplies.

Funds were also used to balance part of communications costs, and some activities for staff development and travel related costs. The IP telephony project was implemented in order to

strengthen the office communications systems and rationalize the cost of telephone and internet.

OUTPUT 3 Human Capacity

Analytical Statement of Progress:

Throughout the year, the CO did not have any outstanding salary payments for the office staff (in November there were some delays due to some technical issues with the Standard Chartered Bank). The CO used the Standard Chartered Bank electronic banking platform as the e-banking module of VISION for the direct deposit of staff salaries and other transfers. UNICEF Gambia closely monitored expenditures incurred throughout the year in the areas of Common Premises and Common Services. UNICEF Gambia's share of Common Services was processed and paid on time.

OUTPUT 4 HR

Analytical Statement of Progress:

The completion rate of PERs for 2014 was at 32 per cent, however mid-year review completion was at 81 per cent (September 2015). The region moves towards rolling out the new talent management system for recruitment, and Achieve for Performance management, and the CO consciously worked towards making this a reality through the guidance of both RO and HQ.

In line with the approved Learning Plan 2015, the Supply/Logistics Assistant and the Senior ICT Assistant benefited from training in Procurement Training and Certification (CIPS) and Advanced Geographical Information Systems respectively. In addition two National Officers participated in stretch assignments in Sierra Leone and Moldova respectively, both which culminated in International Professional appointments (in Sierra Leone and Ethiopia). The Operations Manager supported the Burkina Faso CO during the country's political crisis in October on a two month mission.

In September 2015, the CO received on mission the Regional Chief of Human Resources. The purpose was to review HR systems in line with the Field Result Group recommendations which were implemented.

Management and the Local Staff Association jointly worked towards the attainment of the action plan of the Global Staff survey, which highlighted three areas, mainly: Work/Life Balance, Career Development, and Office Efficiency and Effectiveness. Work life balance was a work in progress and Career Development was completed. Office Efficiency and Effectiveness was also work in progress. During the period under review, no training on Business Continuity Plan was carried out although one was done in 2014.

The CO was committed to the cause of UN Cares and nominated one staff member to attend the UN Cares training in Ghana in October 2015. However, the implementation of the 10 minimum standards on HIV in the workplace was yet to be undertaken including the mandatory e-course. Staff were encouraged to enrol in the mandatory e-course on Agora.

Staffing gaps remain a challenge and will be addressed during the upcoming PBR. There are currently four vacancies: C4D Officer (one), Child Protection Specialist (one), Education Officer (one) and UNV (one).

OUTPUT 5 Governance and Systems

Analytical Statement of Progress:

All office statutory committees were in place in 2015 and performed their assignments as per their Terms of Reference. The AMP 2015 was the result of a two-day planning retreat. The key results and management priorities were derived from an analysis of the lessons learned from the previous year (2014), regarding the internal office systems and business processes as well as programme planning, implementation and coordination mechanisms. In July 2015, a mini retreat was organized to review the key priorities when the new Representative joined the office. A consultative process between the programme and operations sections and between staff and management helped in contributing to a smooth office management.