Executive Summary

2013 was the year of the Mid Term Programme Review which has shaped UNICEF’s engagement in Turkmenistan for the last three year of the programme cycle. In line with the MTR recommendations, the Country Office’s work was aimed at strengthening the Government’s commitments to ensure adherence to child rights international standards, norms and best practices and the transformation of these into practice.

Knowledge management techniques coupled with evidence based advocacy and effective communication were extensively employed to support national and local stakeholders in meeting their obligations vis-à-vis CRC, CRPD, and undertaking actions in fulfilment of global and regional calls for action.

During the year UNICEF supported the Government in reviewing progress and addressing the realization of child rights gaps through generating evidence on the effectiveness of the social protection system, participatory research into causes of institutionalisation of children under three years of age, and facilitating professional fora on mainstreaming Child Friendly School standards in the education system, which identified a need to design inclusive education policy. This commitment was voiced by the Deputy Minister of Education in support of the call on Education Equity Now. Notable progress was achieved in ‘institutionalizing’ disaster risk reduction through the school curricular and produced teaching aids.

The Government’s signing of the global initiative on child survival accelerated its action on development of an evidence-based national strategic vision and action framework on mother, new-born, and adolescent health and strengthen primary health care delivery to young children and parents in the ECD demonstration regions by addressing weaknesses in capacity of home visiting nurses and system’s ineffectiveness. The National Nutrition Programme adopted in 2013 contributed to a better policy environment in Turkmenistan by providing a framework for infant and young child feeding and food safety. The Breastfeeding Promotion Law adopted in 2009 was amended in 2013 in line with the International Code on Marketing of Breast Milk Substitutes.

More emphasis was given to the capacity development of Government and UNICEF staff in monitoring and evaluation. A monitoring framework for the National Early Childhood Development was developed and real time monitoring tools like LQAS and BABIES were tested and are now managed by the Ministry of Health and the Medical Industry. All planned research activities are undertaken in a participatory way with a mandatory training component on research methodologies. Despite the mentioned advancements, access to and availability of data continue to be extremely limited, and therefore affects the quality of planning and budgeting for children, and the monitoring and evaluation of progress.

2013 was a critical year for the promotion of child participation by engaging over 1200 children in the national consultations on post 2015 agenda, which prioritised high-quality affordable education; improved health care, leisure and sports, employment and welfare; peace and development of international relation; rapprochement of lifestyle in cities and villages; environment protection; development of transport and communication infrastructure; equality of rights and opportunities; and social support and improvement of living conditions of people with disabilities.

Country Situation as Affecting Children & Women

Turkmenistan has the fourth largest reserves of natural gas, and its large hydrocarbon exports have produced strong economic growth over the past decade. Output growth averaged 12 per cent and GDP per capita more than tripled in the last 10 years to reach the upper-middle-income economy level (GDP per capita exceeded US$6,000 by the end of 2012)[1]. Turkmenistan's GDP growth rate amounted to 10.2 per cent in 2013[2].

The Government has committed to raise living standards of people while strengthening national capacities to respond to a fast-changing global environment. Rapid economic growth translates into a large fiscal space that provides more opportunities for increased deployment of public resources to accelerate social development and improve health, education and protection of children in Turkmenistan. A wide range of goods and services are provided to the entire population either for free or at negligible cost. After adjusting
for inflation, wages and salaries increased by 6 per cent in 2013[3]. The largest budget expenditures for centralised capital investments grew by 42 per cent. Funds allocated to education increased by 15.7 per cent, health care 10.8 per cent and culture 22.6 per cent compared to 2012.

In 2013, new education and youth laws were adopted. Turkmenistan’s increasing responsiveness to its international commitments is illustrated by the Government’s signing of the global initiative on child survival, under which it has pledged additional focus on child health and development, and its membership in regional initiatives like Ending Placement of Children Under 3 in Institutions, and Education Equity Now calling for inclusive education reform.

Despite substantial economic progress, the country’s human development has not kept pace. Turkmenistan’s global HDI rank is 102nd out of 187 countries. Considerable disparities in urban-rural access to services, wealth quintile and gender, among others need to be effectively addressed to ensure greater equity in children’s outcomes.

The country appears to be on track to meet most of the MDGs by 2015, having achieved notable development results in several areas. However, official national data is very limited. Turkmenistan’s last national report on the MDGs was prepared in 2003; at the time, the Government reported that the country had already achieved 13 of the 18 global MDG targets for 2015. There are considerable data variances between national and international sources. According to official statistics, the under-five mortality rate was 24.8 per cent, IMR 13.4 per cent and the maternal mortality ratio was 3.8 per cent. The latest data available from international sources indicate an USMR of 53, IMR of 45 and neonatal mortality of 22[4]. These remain high, with Turkmenistan still having more than 20 per cent of its child mortality progress unrealised, far above other countries in the region with similar national incomes. Malnutrition rates remained high, with 14.6 per cent of children stunted and 11 per cent wasted.[5] Micronutrient deficiencies continue to contribute to mortality and morbidity of children and women.

Despite a number of positive provisions in the national legislation and changes introduced since ratification of CRPD, the laws aimed at protecting children still provide for separate services for children with disabilities and do not systematically enforce social inclusion. This is particularly noticeable within the definition of disability, assessment and identification by different sectors in the country.

Access of all children to quality for social services is affected by a highly centralised system of management, poor professional qualifications and persistent data gaps. The quality of primary healthcare and education remains a priority issue, with a need to strengthen institutions in both systems. Financing of infrastructure remains prevalent. In health, continuing bottlenecks require urgent attention for sector management, enhanced monitoring and ensuring sustainability of results.

In education, data shows high and stable school enrolment, retention and completion, accompanied by high national literacy rates.[6] In 2013, a reform focus was on lengthening schooling from ten to twelve years with a six year old entry age in the first grade of the primary school, and revision of curricula and textbooks. It will also entail alignment of a normative base, including education standards; formulation and implementation of policies on preparation of children to school and provision of equal opportunities for all children to education and training and retraining education cadres for all levels of education.

In 2013, there were 1,760 secondary schools, 927 kindergartens, 37 secondary and 64 primary vocational colleges, and 23 institutions of higher education; 967,500 girls and boys studied in secondary schools, of which 193,200 were first graders. In 2013, preschool coverage stood at 33.5 per cent; 81 per cent of preschools were in urban and 19 per cent were in rural areas[7]. The total number of children with disabilities receiving education services was 3,453; 2,409 of them were in boarding schools for special education and 830 received home based schooling[8].

According to the Ministry of Labour and Social Protection of Population, as of 1 January 2013, 10,900 children under the age of 16 receive disability allowances. Those people who have been disabled since childhood and children with disabilities younger than age 16 are eligible for disability allowances. The procedure for obtaining cash benefits are extensively reflected in the Social Protection Code. Although the system of
economic support of families and children in need is established in terms of procedures, mechanisms and institutions responsible to provide economic support, there are challenges to more effective and child-sensitive social protection such as gaps in family and child support system of services at the local level, lack of access to information for families on the entitlements; difficulties in obtaining documentation and burdensome procedures.

Although Turkmenistan was the first nation in Central Asia to sign the CRPD, children with disabilities remain among the most vulnerable and most excluded. They face isolation and major challenges in acceptance into mainstream education as a result of underdeveloped community-based services and a continued medicalised approach.


[3] State Statistics Committee of Turkmenistan


[6] Ibid.


Country Programme Analytical Overview

The MTR confirmed the relevance of the Government-UNICEF CPAP. However, the programme strategy for 2013-2015 envisions a transformed engagement guided by national children’s priorities, and UNICEF’s Regional framework and the organisation’s comparative advantages.

Building on national priorities, the programme continued to use a three-tier approach of technical assistance in improving legislation and policies, capacity building of institutions and public agencies, and families to care for children. Attention was given to Early Childhood Development as a strong umbrella to bring: synergy among various actors; optimal nutrition; quality and inclusive healthcare and education; to reach all children, particularly children with disabilities, with a range of social protection measures and expanded family support services. 2013 witnessed the endorsement of the National Nutrition Programme and amendment of the Breast-feeding Law. Participatory design of policies and an action plan to strengthen mothers’, children’s and adolescents’ health was undertaken. Stakeholders’ institutional and service capacities were addressed to deliver quality care for children through engaging health, education and social protection decision-makers and professionals in capacity building events, and facilitating their dialogue on changes to ensure enabling environment for children.

UNICEF took advantage of the momentum created by the hearing of Turkmenistan’s state reports on CRC and CRPD to help the Government to review progress and address gaps. Attention was paid to the Conventions’ monitoring, coordination and implementation frameworks. These resulted in the Government’s commitment to complete a child rights action plan in 2014 and consider the issues of establishing a national coordination body and address gaps in monitoring mechanisms and data. In 2013, the General Programme on the Juvenile Justice System Development was enacted.

In light of Turkmenistan’s CRC/CRPD commitments, a strengthened equity focus on the rights of children with disabilities was pursued. Evidence from a review of policies and practices on care solutions for children with disabilities and an assessment of the responsibilities of statutory child protection and welfare services conducted in 2012-2013 will guide the work to address systemic barriers in the realization of child rights. In
2014, UNICEF will support partners in determining a roadmap to strengthen community based family support and establishing social work.

Persistent bottlenecks in availability and quality, range and utilization of data were addressed through support to the census, designing of monitoring framework for the National Early Childhood Development Programme; and capacity development of partners in monitoring of quality of care by using LQAS/BABIES techniques.

The 2013 efforts focused on the provision of tools to reinforce ongoing social sector reforms, and generating knowledge to inform decision making on the most effective areas to reach disadvantaged children. This entailed participatory work in designing child-friendly standards and a certification package to use for promoting quality inclusive education at preschool, primary and secondary school levels, a commitment to design a national inclusive education policy and plans in 2014 for an international inclusive education conference in Turkmenistan. Starting as a pilot initiative eighteen months earlier, in 2013 Disaster Risk Reduction was incorporated into formal primary and secondary education, and DRR standards and indicators became part of the education normative framework.

**Humanitarian Assistance**

Not applicable

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**Effective Advocacy**

*Mostly met benchmarks*

The MTR has recommended that the country office should strengthen systems in optimal early childhood development; quality and inclusive health care and education, and reaching all children, especially children with disabilities, with a range of social protection measures which, inter alia, requires enhanced advocacy to influence key stakeholders who bear responsibility for the realisation of children’s rights. To implement this recommendation the country office broadened the scope of analysis and, based on research findings in health, education, child protection and social protection, developed a strategic advocacy plan. The plan aims to develop a more holistic advocacy approach through systematization and coordination of both internal and external advocacy efforts across all programme components to accelerate UNICEF’s advancement in promoting an enabling policy and legislative environment and equitable allocation of resources. The plan encompasses a range of thematic advocacy messages based on national, regional and global priorities, including calls for actions on child survival and ending the placement of children under three in institutions.

To ensure that voices of children of Turkmenistan are heard and acted upon, the country office successfully advocated for participation of two young representatives in the New York Special Side event on Post 2015 development agenda followed by a number of national advocacy events.

As a key actor for continued advocacy with stakeholders on promotion of the rights of children with disabilities, the country office followed up on last year’s high level policy consultation on CRPD by organizing a technical consultation with the Turkmenistan’s Inter-ministerial Commission on Treaty Body Reporting. The participants reviewed progress and identified gaps in the implementation of the CRC concluding observations and the CRPD provisions and confirmed their commitments to complete in 2014 the development of a child rights action plan, to strengthen child rights monitoring and to address coordination issues.

UNICEF’s effective policy advocacy resulted in the adoption of two key policy documents related to child health and nutrition: the National Nutrition Programme, amendments to the Breastfeeding Promotion Law and development of a long term strategic vision for MNCAH.

Three years of evidence-based advocacy combined with capacity building brought about a decision of the MOHMI to establish a department of developmental paediatrics for the provision of early detection and intervention services in the newly Scientific-Clinical Centre for Maternal and Child Health in Ashgabat.
Capacity Development

Mostly met benchmarks

In 2013 capacity development interventions focused on building stakeholders’ knowledge on the CRC and CRPD. The CO supported the Parliament in conducting a series of seminars throughout the country at which MPs shared knowledge on national legislation and child rights with two hundred representatives from local governance structures. These interactive activities provided an opportunity for MPs to monitor the implementation of child rights. Over a thousand children in summer camps, their parents and caretakers learned about the rights of children with disabilities at participatory workshops.

To strengthen health care delivery for young children, capacity building of partners was focussed on health care system management and the monitoring of the quality of health care. Knowledge and skills of key statistics officials, to track child mortality and report on MDG4, was improved at a UNICEF regional workshop. Capacity development activities resulted in development of action plans that are now implemented by concerned health care staff. Mid-level health managers were trained on new monitoring approaches. The LQAS monitoring technique was tested in selected regions to assess quality of care for young children. Medical college teachers were exposed to innovative child-health cantered training technologies (ICATT) in pre-service and post-graduate education. Capacity of health care staff was developed in strengthening the cold chain management system through the introduction of SOP and preparations for EVM certification.

Programmatic interventions on strengthening the patronage system were expanded to cover remote communities. 95 percent of home visiting nurses in selected health care facilities were trained in early childhood care and development. Effectiveness of training was assessed six months later through a post-intervention survey of 634 caregivers, which revealed better quality of care provided by the trained nurses and 17 percent improvement in parenting skills.

Selected staff from the Medical University and health care functionaries were trained to collect data at maternity facilities and baby homes for participatory research on causes of institutionalisation of children under three. The data is now being analysed to produce a road map for the Government to end placement of children under three in institutions.

Continued capacity building of the multi-disciplinary working group on the National ECD Programme implementation resulted in the development of a Programme monitoring framework. UNICEF in cooperation with the MOE worked on capacity building of children and schools in hazard prone areas to better prepare for, mitigate, and respond to disasters, as well as tackling issues related to disaster risk reduction in the context of the national educational system. Support was provided to teachers and school principals to provide instruction on disaster risk reduction in schools, which is now incorporated into a formal school curriculum.

Identifying, understanding and overcoming the obstacles that could keep young vulnerable children from realising their potential for physical, cognitive, social and emotional development was addressed through a series of trainings and study visits. These resulted in the country’s commitment to introduce development paediatrics approaches in health care and community based supports for children with developmental difficulties, institute social work and develop an incisive education strategy.

Communication for Development

Mostly met benchmarks

During the MTR process, stakeholders - partners from the line ministries, civil society and community members – were consulted to identify structural, underlying and immediate causes across flagship programme areas and to shape future strategic shifts and development priorities. Communication for development was intrinsically integrated both into technical and community consultations. The consultative results were reflected in the ECD SitAn, the MTR report, as well as in the 2014-2015 sectoral joint work plans to bring the equitable impact on the well-being of all children, including those vulnerable.
A wealth of first-hand insights was generated from the stakeholders as a result of the national consultations about the post-2015 development agenda. A multi-stakeholder consultation based on the principles of open dialogue and critical reflection was carried out to express children’s and parents’ vision about the future they want for themselves, their families, local communities, entire country and global humanity. The essential aspect of consultations was its participatory nature that encouraged consideration of the existing socio-ecological environment people live in, while attempting to conceptualize necessary social transformations for their future well-being. Thereby, jointly with its partners, UNICEF embraced the opportunities offered by a post-2015 discourse through exploring bottom-up reflections and promoting citizenry engagement in prioritizing development issues. Survey and qualitative data were analysed and presented in the Country Report to contribute shared aspirations of the Turkmenistan children, parents of young children, as well as of local level authorities about the future they all strive towards to regional and global discussions beyond 2015. The generated stakeholder recommendations were brought up at a number of policy advocacy discussions.

At a system level, health promotion capacities and gaps were identified to strengthen the national system, including its human, organisational, financial, and technical and information resources and structures to benefit the health and well-being of children and families. Key recommendations on strengthening health promotion capacities were incorporated into a strategic action framework of the MNCAH strategy, which was jointly developed with the MOHMI.

To meet the supply side in the provision of the ECD, counselling to and empowerment of families, the adapted Facts for Life book in the Turkmen language was published and made available to the frontline workers of the primary healthcare across the country. This evidence-based and life-saving information and practical resource will enable families and communities in raising healthy children. The utilisation strategy for FFL was supported by a developed communication plan. Additionally, WHO growth monitoring charts were provided for improving quality of child health care services. A PMTCT counselling chart with updated clinical protocol and information for women will help to enhance the prevention of HIV transmission from a mother to a child through strengthened antenatal care services in the country.

### Service Delivery

*Mostly met benchmarks*

The Government was supported in the provision of quality immunization services for children through proper planning and forecasting demand and facilitating procurement of high quality vaccines and HIV test kits in accordance with MOUs with the Ministry of Health and Medical Industry. The CO continued facilitating procurement premix for the flour fortification programme in line with an MOU with the National Bread Association.

### Strategic Partnerships

*Mostly met benchmarks*

UN agencies, programmes and funds resident in Turkmenistan continued to be strategic partners of UNICEF. Between January and May 2013 the post-2015 consultations were conducted in Turkmenistan with the support of all agencies and in cooperation with the MFA, concerned line ministries, Parliament and civil society organisations. The consultations brought together major stakeholders in the country and triggered new discussions in the implementation of the Millennium Development Goals and in the preparation of a strategic vision for Turkmenistan’s development after 2015. UNICEF and UNFPA initiated participation of children and youth in the national consultations to ensure their voices are heard and views are taken into account in the vision of the post 2015 agenda.

Led by the Resident Coordinator, the UN team concentrated efforts on monitoring the progress of Turkmenistan towards the MDGs and preparation of an MDG report. Extensive advocacy efforts and technical assistance to the State Statistics Committee were undertaken by UN agencies to bridge the gap between national statistics and internationally verifiable survey and assessment data.
In support of the Millennium Goal 4 – reducing child mortality and the Government’s commitment to Child Survival: A Promise Renewed, UNICEF cooperated effectively with WHO and UNFPA through synergising comparative advantages and specific technical expertise in the design of the MNCAH strategy and action framework for 2014-2018.

Bilateral partnership with the USAID Quality of Health Care project contributed to training of medical college teachers across the country on the ICATT technology, capacity building of PHC nurses on child health and development in new ECD demonstration areas, post-training monitoring of these trainings’ outcomes and conducting a workshop to present and discuss the draft National Strategy on MNCAH.

UNICEF continued efforts to strengthen partnership with the private sector; cooperation with the RWE DEA AG Branch in Turkmenistan is an example of leveraging resources for young children in the country.

In policy analysis, advocacy and partnerships for children’s rights UNICEF partnered with the Parliament on promoting the rights of children with disabilities; health, education and social protection ministries and local authorities in building an enabling environment for survival, development and protection of vulnerable children, national bodies in charge of treaty body reporting for their capacity building on CRC and CRPD. To strengthen the voice of non-state actors UNICEF, supported NGOs that work to promote and protect the rights of children with disabilities with focus on elimination of stigma and inclusion of these children in society.

**Knowledge Management**

*Mostly met benchmarks*

In 2013, the CO continued to work on incorporation of knowledge management building blocks to increase effectiveness and efficiency of the office operation in programme delivery and capacity development of partners. A knowledge management task force was established to lead the process. The office staff were exposed to the theory of change, cultural web concepts and updates in the Regional Knowledge and Leadership areas.

Overall, efforts were aimed at providing an environment for staff where information sharing, learning and collaboration are strongly encouraged. In addition to investments in human resources through training opportunities, conferences and meetings, considerable attention was given to harnessing the explicit and tacit knowledge of the staff. These included documenting knowledge, lessons learned and best practices, and drawing up a knowledge inventory. The purpose of the latter was to capture generated knowledge, ensure timely access of the staff to up-to-date information and identify knowledge-based assets and gaps. All office data bases were reviewed and recommendations on their systematization were developed. To fill the gaps in knowledge, two important documents were developed: a strategic advocacy plan and a resource leveraging framework for 2014-2018.

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practice: partners were encouraged and supported to use research findings from participatory studies and assessments in the development of child centred strategies and action plans.

To increase effectiveness of training activities and study visits, UNICEF convened concerned partners at post-event meetings to reflect how acquired knowledge could be used to support reforms for children. An example of this is the implementation of LQAS as a real-time monitoring methodology for assessing quality of MCH care. Following a sub-regional training at which five partners participated and follow up capacity building of thirty health staff, LQAS was piloted in five least advantaged districts. Ninety five PHC catchments areas and five hundred forty households were covered by the assessment, revealing barriers and bottlenecks for quality of care. Results of the assessment were discussed with district level managers for evidence-based decisions, and shared with high level ministerial officials for institutionalization of the methodology.

Human Rights Based Approach to Cooperation

Mostly met benchmarks

Optional (Encouraged at least for COs undertaking MTR in 2013 to complete this section): In 2013, UNICEF worked to strengthen the HRBA to programming. The rights of all children to quality health, education and social protection were in the centre of UNICEF programmatic interventions. The overall strategic approach was focused on advocacy and capacity building to integrate best international practices and experiences, based on local needs and evidence, as well as on international standards, and to support the realization of the rights of vulnerable children.

UNICEF partnered with parliamentarians to help them understand their role better vis-à-vis the rights of women and children, with a focus on children in difficult circumstances and children with disabilities. MPs particularly improved their capacity on CRPD principles through participation in a workshop organized with UNICEF support. In turn, this facilitated their countrywide tour to promote the rights of those children with disabilities. In cooperation with the Parliament and DPOs, the Office advocated for the rights of children with disabilities and changing public attitudes to these children.

Evidence-informed-programming was promoted through participatory research to identify causes of institutionalization of children under three with a view to the development of a roadmap to end placement of young children in baby homes. In line with the programme equity focus, the analysis of social protection with regard to effectiveness of cash transfers for vulnerable children was undertaken. UNICEF supported the MLSP in exploring opportunities to establish support services for vulnerable children and families, and building social work.

UNICEF provided support to the development of a strategy and vision for juvenile justice reform, culminating in the approval of the new national Juvenile Justice Programme. For the implementation of the Programme regulations a coordinating body was developed and capacity development of law enforcement agencies in juvenile justice standards was conducted.

Following up on last year’s high level policy consultation on the CRPD, a technical consultation was organized with the Turkmenistan’s Inter-ministerial Commission on Treaty Body Reporting to review progress and identify gaps in the implementation of the CRC and CRPD.

Momentum created by the preparation for the Child Protection Forum on the rights of children with disabilities helped national duty-bearers to review and identify gaps in the implementation of human rights obligations stemming from CRC and CRPD. There is growing understanding among duty-bearers of the need to critically analyse and review the national legislation, policy and practice relating to children and harmonise the national legislation with international norms; strengthen legal institutions and administrative structures to be in line with human rights standards and principles and build their capacity as an important component of rights based approach. Equity must be a priority in the design of child survival interventions and delivery strategies, and mechanisms to ensure accountability at national and local levels must be developed.
**Gender Equality**

*Mostly met benchmarks*

Gender aspects continued to be actively threaded through all areas of UNICEF work in the country. In the education sector, gender specific aspects were considered through the process of finalization of the national CFS package with specific gender related standards and indicators. The achievements under mainstreaming disaster risk reduction in education included incorporation of DRR into a school curriculum and development of a DRR school based mechanism which gave prominence to specific vulnerabilities of girls. Piloted family support pre-school education services provide counselling and advice, as well as early learning opportunities based on individual characteristics of boys and girls, including those with developmental difficulties.

In health, capacity building activities expanded into the new ECD pilot area. Monitoring of last year activities on training 155 female family nurses in Abadan district and empowering 376 mothers living in rural area in the basic aspects of child care and ECD proved to be effective. The knowledge level of involved mothers remained to be high (19 per cent improvement). Health education activities in Lebap region of the country impacted 165 female family nurses and empowered 258 mothers (knowledge level increased to 17 per cent). With support of UNICEF, the MOHMI is developing the first National Strategy on the health of mothers, newborns, children and adolescents. A situational analysis and the draft National Strategy includes gender analysis and takes into account gender disparities and inequalities.

Gender was effectively mainstreamed through all activities in the area of social protection, including capacity building activities for newly selected Gengesh (heads of villages) and at CRPD workshops for young boys, girls and their teachers in 18 summer camps.

National consultations on the Post-2015 agenda actively involved more than 1,400 boys and girls from all over the country to participate in sharing views about the future they want. The process involved caregivers as well. Caregivers’ corps was represented by mothers and by fathers, which is a notable accomplishment.

In September 2013, voices of Turkmen children were successfully and equally represented by a young Turkmen girl and boy at the International Youth Voice Side event in New York.

From the staff development perspective, a female staff member was appointed and successfully performed a short term development assignment at the UNICEF CEE/CIS Regional Office.

**Environmental Sustainability**

*Initiating action to meet benchmarks*

The main environmental hazard for Turkmenistan is earthquakes. The country also faces serious environmental threats in the light of climate change.

Considering specific vulnerabilities of girls and boys to natural disasters, including those related to the ongoing climate change, planning and programming is underway to incorporate climate change adaptability as an effective strategy for mainstreaming disaster risk reduction, preparedness and mitigation in education.

**South-South and Triangular Cooperation**

Opportunities of the South-South and Triangular cooperation in 2013 were used for establishing relationships between the national MCH institution under the MOHMI, the Ankara Medical University and the St-Petersburg Early Intervention Institute to introduce principles of developmental pediatrics in the health care system of Turkmenistan. Multi-year cooperation between the MOHMI and the Kazakh Academy of Nutrition facilitated by the CO aimed to translate evidence generated in the field of nutrition into policy development, resulted in the adoption of the National Nutrition Programme for 2014-2017 in 2013.
### Narrative Analysis by Programme Component Results and Intermediate Results

#### Rep. of Turkmenistan - 4360

**PC 1 - Social policy and child rights advocacy**

- **On-track**

  **PCR 4360/A0/04/009**
  +The country fulfils the concluding observations of the CRC on resources for children, awareness and capacities of public sector to formulate and support social policies, reporting and legislation on child rights

**Progress:** Government continues to place the wellbeing of children and families at the top of its socio-economic transformation agenda. This can be attributed in part to continuous advocacy of UNICEF at various levels, which is guided by relevant conventions, observations and recommendations of treaty bodies, including UNCRC, CEDAW and Universal Periodic Review.

In particular, with technical support of UNICEF, the Government has hastened efforts to align its policies and systems with international standards to make them more responsive to emerging contingencies imposed by transition to a more developed economy. These, in turn, were translated into improved and universal child grants, increased in spending for education, health and general social protection of families with particular focus on the most vulnerable (i.e. children with disabilities). Progress was maintained in delivering this result through continuous technical assistance and advocacy with the Ministry of Labour and Social Protection to review cash and no-cash subsidies for the children and families.

The reform of the national legislation pertaining to children remains a critical determining factor for creating a nurturing and enabling environment for all children. The country has continued to improve its legislation. However the new law on Education is not consistent in its terminology pertaining to the children with disability with the CRPD.

The country is steadily fulfilling the recommendations of the Committee on the Rights of the Child. However the recommendations on the establishment of the Coordination body for the children and National Plan of Action is yet to be fulfilled. A new law on Youth Policy calls for establishment of a separate Government body to coordinate the issues pertaining to young people, effectively no such independent body was created. However, guided by the above law, the Government established a new department under the Cabinet of Ministers. The portfolio of this body and its effectiveness is yet to be evaluated.

UNICEF continued to work closely with the Parliament of Turkmenistan, NIDHR, Ministries of Justice and Interior advocating for and providing technical assistance in two major areas: consistency of national child rights legislation with CRC and CRPD, and juvenile justice. Quality data remains yet another, determining factor for effective and efficient government social policies. The fourth round of MICS was determined to be discontinued due to lack of access and possibility to validate the data quality. Technical support to the State Statistics Committee continued to build institutional capacity of the agency to produce data on child rights and determinants of wellbeing.

In light of the transformed post-MTR engagement with the Government and increased demand of the national agencies to a systems strengthening approach in programming, C4D efforts advocated for sustainability, cross-sectorial approach and effectiveness of the institutional communication capacities. Advocacy efforts focused on social inclusion of all children, empowerment of the right holders and creating of the enabling environment by duty bearers.

- **On-track**

  **IR 4360/A0/04/009/001**
  +By 2015 evidence based budget allocations for national plans are increased and equitable

**Progress:** In recent years Turkmenistan has been undergoing profound reforms in all aspects of socio-economic and political life to ensure stable and positive development dynamics, financial and social stability, which strongly influences the wellbeing of children. UNICEF CO continues to synthesize the Government on allocation of more resources for children. To support these advocacy efforts with evidence, UNICEF together with the Government of Turkmenistan commissioned a study on cash and no cash benefits which will demonstrate the need to increase the allocations and introduce additional instruments to effectively decrease vulnerabilities of at risk families and children. The analysis has also focused on the most vulnerable groups of population such as disabled children, children living in institutional settings and children living in remote/rural areas.

In 2013, with UNICEF technical support, members of the Parliament and a number of key government representatives were exposed to best practices in social protection, planning and resource allocations through intersectoral study visits and workshops. It is envisaged that these efforts will help alleviate some of the bottleneck in policy and legislation by enabling the stakeholders to contribute to an expanded investment for the well-being of children and families, particularly, for early childhood development, quality health care and social protection.

- **On-track**

  **IR 4360/A0/04/009/002**
  +Child rights legislation and reporting to children's legislation and rights and maintains national reporting function on the state of the children's rights

**Progress:**

As in the previous year the alignment of national legislation with international child rights standards remained an important area of collaboration with the Parliament of Turkmenistan. Amendments to penal, criminal, criminal procedural and labour codes were introduced to bring them closer to the international standards and to decriminalise number of acts for young people.
A number of new legislative acts, particularly on education and youth policy, have been introduced. However, there are number of inconsistencies in the legislation which were brought to the attention of the legislators and requires urgent action.

During the reporting period technical support to the State Statistics Committee in conducting MICS 4 and the census helped to produce some improvements in child rights monitoring through the collection and analysis of data on the determinants of child wellbeing. However, the lack of access and transparency in data collection, entry and analysis made it impossible to validate the data.

Members of Parliament continued awareness-raising sessions for children and teachers about the social model of disability within the framework of the child-friendly CRPD during the summertime at children’s recreation centres. This approach takes trained children as young advocates and peer-educators who will disseminate further the inclusive concept of disability among their peers across the country. In the wider context, UNICEF maintained policy advocacy dialogue to address social and cultural norms to create accessible and inclusive environment for children with disabilities.

Within the health domain, key recommendations aimed at strengthening the national health promotion system have been incorporated into the newly developed MNCAH strategy. This will require mid and long term structural reforming of the health promotion system to benefit the ‘demand side’ of communication for development and for use of the lifespan approach. Meanwhile, the new edition of the Facts for Life has been launched and disseminated nationally to the PHC frontline workers to support essential routine counselling of the families who have young children. UNICEF will also follow-up on building better caretaking skills at the community level though different media channels and expanded ECD services.

PC 2 - National and local systems strengthening

On-track

PCR 4360/A0/04/008 + Nationally, vulnerable children benefit from improved health, education and protection and prevention services

Progress: Improvement of data collection, analysis and utilization for evidence- informed decision making remains a priority in health, education and child protection areas. A monitoring framework to track progress of the National ECD and School Readiness Programme has been developed. The LQAS methodology has been introduced for monitoring of inequity and bottlenecks at the sub-national levels and the BABIES matrix utilization revitalized for analysis of causes of child mortality nationwide. Evidence gathered last year has been successfully translated into the policy review in the field of PHC Home Visiting and MNCAH.

As a result of UNICEF continuous effective advocacy and knowledge management, the government has decided to introduce early detection and intervention services for children with developmental difficulties into the MCH system in Turkmenistan; establishment of a Developmental Pediatrics Department has been put into the project of a newly built MCH centre which is expected to be finalized by mid-2014. Capacity of core MCH staff in this new area is being developed in cooperation with the Ankara University and St Petersburg Institute of Early Interventions.

To support implementation of the National Nutrition Programme adopted this year, preparations have made for conducting a research in the field of IYCF with focus on young child complementary feeding practices using the ProPAN methodology; the 2nd version of the ProPAN module has been translated into Russian with vision of conducting assessment next year following the sub-regional orientation training that is planned to be held in Turkmenistan with support of HQ and RO.

Introduction of high-impact child health interventions in the medical education curricula using new technologies continued this year targeting the medical colleges countrywide.

UNICEF has continued efforts to promote principles of inclusiveness in education. New community based family support preschool education services are currently piloted through the two model ECD Centres to ensure optimal development of children, including those with developmental difficulties, and their smooth transition from pre-primary to primary education.

Strong UNICEF technical support has led to development and finalization by the MoE of a national child friendly school (CFS) certification package to serve as a platform to improve quality and inclusive standards in education policy. Progress has been achieved in incorporating disaster risk reduction in a formal school curriculum. The effectiveness of UNICEF support to the promotion of the CFS initiative in Turkmenistan is being assessed through evaluation of the country’s progress in mainstreaming the CFS standards and approaches in the education system.

Within the framework of the international commitments and the Call for Action to end the practice of placement of children under three in institutional care. the Government of Turkmenistan has undertaken the review of causes of placement of the children under three in...
formal care, which will help to identify ways to strengthen the national child protection system to support vulnerable families and prevent the institutionalization of children.

UNICEF has continued to support the government to carry out implementation of the National Programme on the reform of the Juvenile Justice System of Turkmenistan through capacity building and knowledge management.

**Progress:**

**On-track**

IR 4360/A0/04/008/001 By 2015, health system delivers quality service in mother and child health, in line with international standards

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**On-track**

IR 4360/A0/04/008/002 By 2015, Education system meets international standards on ECD and CFS

**Progress:**

In 2013, UNICEF continued to support the on-going education sector reform that aims to align the education system with the international standards. The above support is primarily done through technical assistance to implement the National Programme on ECD and School Readiness for 2011-2015 and institutionalize the child-friendly principles.

UNICEF provided continuous support to strengthen capacity of the national multi-disciplinary Working Group on ECD for planning, implementing, coordinating and monitoring of the National Programme. The above resulted in piloting of new community-based family support preschool education services that aim to improve access to and quality of pre-school education and school readiness for all children. Importantly, these services, piloted through the two model ECD Centres, introduce an inclusive education concept as they contribute to all families’ improved knowledge and skills to ensure optimal development of their children, including those with developmental difficulties, and their smooth transition from pre-primary to primary education. A monitoring and evaluation indicator framework for the National Programme was drafted for piloting and further adoption to measure the effectiveness of the programme implementation.

Strong UNICEF technical support led to development of a national child-friendly school (CFS) certification package that is not only an assessment and monitoring instrument, but is also expected to serve as a platform to improve and/or develop quality standards in education, including minimum standards for quality of education services, performance management (professional) standards as well as strategic planning for professional training / retraining. Overall, the above makes the document an effective tool to advance the quality and equity of education in the country. Development and inclusion of specific Disaster Risk Reduction (DRR) indicators in the CFS package, coupled with incorporation of DRR into formal primary and secondary education, have been significant achievements to ensure advancing and mainstreaming of culture of safety and resilience in the education system.

**On-track**

IR 4360/A0/04/008/003 Relevant authorities administer policies in line with international standards for vulnerable children

**Progress:**

UNICEF CO continued efforts on building capacities and improving the child protection system which remains to be a critical determining factor for sustainable improvement of policy and inclusive environment for the most vulnerable children and families.

During the reporting period of UNICEF continued to support the National Institute for Democracy and Human Rights (NIDHR), Ministries of Interior and Justice which sought the assistance of UNICEF Turkmenistan to carry out implementation of the National Programme on the reform of the Juvenile Justice System of Turkmenistan.

Representative of the Ministries of Interior and Justice participated at the ministerial meeting on justice for children organised by UNICEF and European Council to share the successes and barriers toward creating a more friendly justice system for the young
offenders and at risk youth.

Although NIDHR has moved forward with the agenda on children in conflict with the law there was very little progress in its implementation in addition, preparation and endorsement of the National Plan of Action for Children still remains unendorsed as well as there was no action on establishment of the coordination body as recommended by the Committee on the Rights of the Child in its previous observations to the country.

**PC 3 - Cross-sectoral**

- **On-track**

**PCR 4360/A0/04/010 Adequate support to effective programme implementation and joint UN activities**

**Progress:** After the MTR, the major objective of the management strategy has been to make the UNICEF country office the first stop for knowledge on children and, through a strategic shift of aligning core roles and core resources and concentrating on relevant RKLA. Efforts were made to adopt innovative approaches to advocate the realization of rights of the most vulnerable children and leverage public resources for children. The county office has developed a resource leveraging strategy that specifies UNICEF’s advocacy role in leveraging public and private resources for the goals of the programme of cooperation and national and regional programmes targeted at children to have the full weight of national resources behind them. Also, a strategic advocacy plan was designed to systematize and coordinate both internal and external advocacy efforts across all programme components and accelerate UNICEF’s advancement in promoting an enabling policy and legislative environment and equitable allocation of resources. Effective cooperation with UN resident agencies, funds and programmes resulted in successful conducting of national Post 2015 consultations and production of two reports, one of which is on children's participation and their views about the 'world they want'.

- **On-track**

**IR 4360/A0/04/010/001 Operational support to programme implementation**

**Progress:** Cross-sectorial costs cover staff costs and provide for cross-cutting services for utilities, transport and information technology equipment. Organizational support to the implementation and achievement of all programmatic goals and objectives are supported through provision of day to day operational support as well as guidance and monitoring of the resource disbursement. Office various activities are covered by the cross-sectorial costs.

In 2014 the UNICEF Common Services share will be paid out these funds as well as the salary of one office driver, including overtime payment.

- **On-track**

**IR 4360/A0/04/010/002 Joint UN activities**

**Progress:**

In 2013 communication and public advocacy priorities supported the programme, advocacy and resource leveraging objectives of UNICEF.

The office’s focus on evidence-based and coordinated advocacy stemmed from the MTR recommendations that proposed to strengthen systems in optimal early childhood development; quality and inclusive health care and education, and reach all children, especially children with disabilities, with a range of social protection measures. The Office has developed a strategic advocacy plan to systematize and coordinate both internal and external advocacy efforts, and to accelerate UNICEF’s strategic programmatic and equity focused efforts across all programme sectors for creating an enabling policy and legislative environment and allocate resources equitably. The plan encompasses a range of thematic advocacy messages based on national, regional and global priorities, including calls for actions on child survival and ending the placement of children under three in institutions.

To promote children's participation in the development process and ensure their voices are heard and acted upon, the Office has successfully advocated for sending two young representatives to New York Special Side event on Post 2015 development agenda followed by a number of national advocacy events. As a key actor for continued upstream advocacy with stakeholders on promotion of the rights of children with disabilities, the Office followed up on last year’s high level policy consultation on CRPD by organizing technical consultation with Turkmenistan’s Interministerial commission on treaty reporting to fulfill the Government’s commitments towards the implementation of the CRPD with focus on children, and has strengthened partnership with civil society organizations working on disability issues.

Classified as an upper middle income country, Turkmenistan now has an obligation to fully utilize its potential to finance social investments for children. In light of these changes, the CO has developed a resource leveraging strategy that specifies UNICEF's advocacy role in leveraging public and private resources for the goals of the programme of cooperation and national and regional programmes targeted at children to have the full weight of national resources behind them. The Office has also successfully advocated for a new cooperation modality where the government contributes resources to joint programmes whereas UNICEF gives more attention to policy advice and technical expertise.
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On-track

**PCR 4360/A0/04/804 Governance structures and systems to adequately manage risks and achieve programme results.**

**Progress:** The office employed management practices to improve and rationalise governance systems, improve management and stewardship of resources and human capacities. To adequately manage risks, internal controls were strengthened to ensure effective oversight and assurance with regard to the use of UNICEF resources. The relevance, efficiency, effectiveness, sustainability and impact of the UNICEF programme were prioritized. Quality of financial information was assured. Communication technology resources and assets were effectively maintained and regular stocktaking was undertaken. Implementation of administrative policies, procedures and systems was under regular control.

On-track

**IR 4360/A0/04/804/001 Governance and systems**

**Progress:**

The results of management meetings, such as programme coordination and operations meetings, convened according to a schedule, were included into the CMT standard agenda. The CMT discussed recommendations of these meetings and monitored the implementation agreed actions and decisions. Progress and/or completion of these actions were reported at the next CMT meetings. Discussions also addressed the UNICEF’s role in the implementation of the United Nations reform at the country level, through joint United Nations initiatives (UNDAF, HACT, UN advocacy and communication). The work of UNICEF statutory committees was executed during the year. All committees including CMT, PSB, CRB, JCC, CRC, HRD and PCA functioned on a regular basis and upon office needs. The office paid special attention to staff related issues and found ways to support the employees in cases of urgent needs. Monitoring of office events and activities was done regularly.

On-track

**IR 4360/A0/04/804/002 Effective management and stewardship of financial resources**

**Progress:** This IR covers management of financial and other assets of the organization, including activities and costs associated with office administration, salaries and related non-staff costs of Administration and Finance, rent, office furniture and equipment, office security, maintenance and vehicles. The Institutional Budget was utilized and implemented in accordance with the organization needs to cover corresponding activities. UNICEF uses national currency - Manat for payments of national consultants and DCTs. Bank transfers are used for almost all payments.

Communication costs, V-Sat remained the main budget consumed activity. The Common Services share was another point of big investment as UNICEF is using common building and is obliged to contribute its share into budget.

HACT has been deferred in Turkmenistan as the Government has not agreed to comply with HACT’s requirements.

On-track

**IR 4360/A0/04/804/003 Effective and efficient management of human resources**

**Progress:** Based on the approved PBR after an MTR process, the CO started recruitment process for two newly established NOC posts: Education Specialist and Social Protection Specialist and three GS6 posts in programme section: two Programme Assistants and Program/Admin Assistant. All new established posts are effective 01 January 2014. The staff member at NOB level on post abolishment has been selected and hired for the post of Social Protection Specialist. The post of Education Specialist was re-advertised to expand the pool of candidates. Three GS posts were filled by the two GS6 current incumbents on post abolishment and re-employment of former staff member.

Performance appraisal is closely monitored, with emphasis on identifying competencies that would greatly help staff enhance their knowledge and skills and meet performance expectations.

UN Cares in Turkmenistan succeeded in piloting an HIV training session for children of UN staff in collaboration with the UNICEF Staff Association, as well as in introducing HR Briefing Kit, including a section on UN Cares, main sources of information on UN policies and benefits relating to HIV, and key information about PEP starter kits and custodian contact details. UN Cares materials, brochures, and HIV related information are also provided in the corridors of the UN offices in Ashgabat for the benefit of all UN staff members and any visitors to the office. UNICEF staff retreat concluded with a session on HIV prevention and UN Cares and best ways to ensure compliance and implementation of the Minimum Standards in the national context of Turkmenistan, with remaining challenges related to access to quality HIV counselling and testing, treatment and care services in the country.
**Effective Governance Structure**

In 2013, the Country Management Team met regularly to discuss issues related to operations and programme management and outline priorities for better performance. Management issues related to office strategic directions, programme/management priorities, funding, donor reporting, major programme planning, work processes, HR issues, training/learning, office/staff security and other management issues were under discussion and close review.

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In view of UNICEF resources optimization and in line with the global policy, in 2013, the office made a decision to abolish the post of Admin/Supply Assistant given the small supply component in the country.

Procurement services, mostly related to the health programme component will be executed by the Health Section while other administrative issues will be distributed between the Social Protection Programme Assistant and the IT Programme Assistant.

**Strategic Risk Management**

During an annual review of potential risks the office identified five strategic risks in areas which can affect its operations, namely: predictability of funding; partner capacity for programme and financial management; UN coherence; systems and IT infrastructure and natural disasters.

Strategies to address those risks or deal with residual risks were implemented by using existing controls against each risk; estimation of effectiveness of the controls, and identification of residual risk once the controls were applied. Action plans to further manage residual risks and description of what the office was doing to mitigate the risk were prepared and uploaded into the Vision Performance - the Risk Management Module.

The EWEA system was used to monitor the performance of CO emergency/crisis preparedness; emergency risk assessment was updated twice a year in consultation with all office staff.

In 2013, UNICEF continuously addressed emergency preparedness capacity for the implementation of the CCCs at CMT, programme and staff meetings, and during its technical and advocacy discussions with the key stakeholders. This covered issues related to the need to increase staff’s awareness about strategic commitments of UNICEF in humanitarian action; better understanding of knowledge and capacity gaps in the implementation of programme commitments in emergency; revision of operational capacity vis-à-vis operational commitments; safety and security of the staff and UNICEF assets.

Within the framework of 2014 planning, the CO envisages to include an issue of strengthening national emergency preparedness and response capacity into the UNICEF Advocacy Plan; design advocacy, communication and programme interventions to build sustainable national capacity in CCCs and DRR, including CCCs capacity building events for the inter-sectoral group of stakeholders (at the level of decision makers) to sensitize the Government about the CCCs in HA, and to initiate upstream dialogue with the
Government aiming to reach agreement on cooperation with governmental partners in implementing CCCs. Under the umbrella of UNCT, in 2014 UNICEF plans to build the capacity of the UN personnel and concerned partners, trainings on the application of the cluster approach in humanitarian action, the use of Multi-Cluster/Sector Initial Rapid Assessment and a simulation exercise.

**Evaluation**

The IMEP for 2013 was approved at the beginning of the year with two studies, three surveys and one evaluation. Upon the recommendation of the HQ the survey on the situation of children with disabilities was postponed to 2014 and subsequently the IMEP was adjusted. Baseline and post intervention surveys on the disaster risk reduction in education were completed. A Child-Friendly School (CFS) baseline study was also conducted to inform the evaluation of the CFS programme.

Creation of a child-friendly learning environment in Turkmenistan is one of the key areas under the current joint Government of Turkmenistan–UNICEF Programme of Cooperation and one of the two proposed UNICEF strategic priorities in the education sector. UNICEF has been working in partnership with the Ministry of Education to implement the CFS framework in the country to promote quality and child centered approaches in education.

In 2013, UNICEF conducted an evaluation of its Child Friendly School Programme. The evaluation being an important milestone of the 2013 Integrated M&E Plan was conceptualised to assess relevance and efficiency of UNICEF assistance in the education sector and to contribute to future planning processes.

More specifically, the evaluation aims to a) analyse the relevance, effectiveness, efficiency and sustainability of UNICEF strategies aimed to incorporate CFS standards and dimensions in the secondary education system of Turkmenistan; b) analyse UNICEF’s strategic positioning with regards to its contribution to education quality; c) identify strengths, weaknesses and challenges of current UNICEF CFS related programmatic interventions that have implications for the secondary education reform; d) highlight barriers and difficulties that limit UNICEF’s programmatic effectiveness in integrating the CFS standards in the secondary education system of Turkmenistan; e) assess potential modalities and strategies for the mainstreaming/scaling up of the CFS framework (inclusiveness, child centeredness and stakeholders’ participation) to the education sector reform; f) determine where and how limited resources of UNICEF should be applied to ensure the achievement of the CPAP result; and g) provide forward-looking recommendations for strengthening UNICEF programming in the mainstreaming/scaling up of the CFS initiative.

A combination of both qualitative and quantitative methods were used for data collection to triangulate data, including secondary data collection and analysis on CFS; questionnaires and interviews with key informants; direct observations while visiting schools and education authorities at national and velayt levels. The first evaluation draft was submitted to the CO at the end of 2013. It will be validated with partners and competed in the first quarter of 2014.

**Effective Use of Information and Communication Technology**

The country office followed corporate best practices and made maximum use of shared services like common workspace (Sharepoint), NYHQ and RO FTP servers, internal VoIP communication to deliver quality and cost effective support to the office and implemented programmes and projects.

Keeping the practice of using the Supply Division as the main source of equipment procured for the office needs, it allowed the CO to meet all global UNICEF ICT standards. Same measures were applied to software standards and solutions. The office fully complied with policies and standards with continuously updating the latter. Furthermore, it also took an active role in pilot projects contributing to the development of new ICT solutions for global organization’s implementation.
**Fund-raising and Donor Relations**

An important part of UNICEF work in 2013 was focused on leveraging resources for vulnerable children. Classified as an upper middle income country, Turkmenistan now has an obligation to fully utilize its potential to finance social investments for children. In light of these changes, the county office has developed a resource leveraging strategy that specifies UNICEF’s advocacy role in leveraging public and private resources for the goals of the programme of cooperation and national and regional programmes targeted at children to have the full weight of national resources behind them. The office also successfully advocated for a new cooperation modality where the government contributes resources to joint programmes, whereas UNICEF gives more attention to policy advice and technical expertise.

Under the leadership of the Regional Office, UNICEF collaborated with EU ECHO to promote sustained national investments that leveraged human and financial resources for building resilience of children in cases of natural disasters, through implementing a disaster risk reduction programme. Focusing primarily on the education sector, the programme is enhancing national policies and capacities to better integrate elements of risk reduction within national education curricula, teacher training and day-to-day management of schools. Collaborating with USAID Quality of Health Care project in knowledge generation, institutional capacity building, and policy advocacy in MCH, UNICEF succeeded in attracting resources for MCH related publications and training workshops.

**Management of Financial and Other Assets**

The Institutional Budget and Cross–sectoral funds were utilized and implemented in accordance with the organizational needs to cover corresponding activities. Management of institutional budget is administered by the Operations Manager and the Representative.

UNICEF uses national currency - Manat - for payments of national consultants and DCTs. Bank transfers are used for almost all payments. However, there were a few cases when UNICEF had to issue checks to partners.

Communication costs - V-Sat remained the main component of the communication budget. The Common Services share was the other cost component.

HACT has been deferred in Turkmenistan, as the Government has not agreed to comply with HACT requirements.

**Supply Management**

The programme supply component for the year 2013 is estimated at US$ 64,194. In 2013, the procurement of programme supplies/equipment was related to the establishment of two ECD centres, disaster risk reduction activities and printing of health related materials for the MOHMI. There were no emergency interventions during the reporting period. The CO continued to facilitate procurement services for the Ministry of Health and Medical Industry and National Bread Association. In 2013, the total amount of Procurement Services for the MOHMI was worth of US$ 3,812,365. This included the procurement of vaccines, cold chain equipment, syringes and premix for the flour fortification.

During the reporting period there was direct order procurement for the office needs (procurement of IT and satellite equipment). There was no in-kind assistance in the country. Because of the low value supply component for UNICEF assisted programmes, the CO does not have an in-country warehouse. The supplies procured within the framework of Procurement Services are directly received by government partners who are fully responsible for stockpiling of programme supplies in government warehouse facilities and distribution of the supplies to end-users in five velayats. The supply related services by the Supply Division are provided in a timely manner.
Human Resources

During the reporting period, the office had to cope with the absence of a driver (he was granted disability benefit by UNJSPF in May 2013). A temporary driver was hired by the office to fill the gap. Recruitment of FT GS2 post of driver was completed in November 2013.

Due to the abolishment of the post of Admin/Supply Assistant, GS6, the office redistribute tasks with an objective of enhancing capacity of current staff strengths and complementing specific competencies. The duties were delegated and distributed between 5 GS6 posts: Finance/HR, ICT and three Programme Assistants.

The 2013 training plan was prepared at the beginning of the year and shared with all staff in the office. The training plan was monitored and progress review was undertaken at the end of year. The staff were encouraged to enhance their professional capacity through available UNICEF online courses and use of external learning opportunities.

Performance appraisal is closely monitored, with emphasis on identifying competencies that would greatly help staff enhance their knowledge and skills and meet performance expectations.

UN Cares in Turkmenistan in collaboration with the UNICEF Staff Association succeeded in organising an HIV training session for children of the UN staff. The children were exposed to information on UN policies and benefits relating to HIV, PEP starter kits and custodian contact details. UN Cares materials, brochures, and HIV related information are made available for the UN staff and visitors in the lobby of the UN House. The UNICEF staff retreat concluded with a session on HIV prevention and UN Cares and the best way to ensure compliance and implementation of the Minimum Standards in the national context of Turkmenistan.

Challenges related to access to quality HIV counselling and testing, treatment and care services in the country were highlighted and discussed during the session.

Efficiency Gains and Cost Savings

The office continued to execute the policy of cost saving that is already in use. Correspondingly, the office identified new ways for more efficient and effective use of UNICEF resources. This included optimization of drivers' work by establishing fixed hours for correspondence delivery. Saving energy to encourage “green behaviour” of all staff; reducing the quantity of printers and implementing green policy by two sided printing, reducing printing materials and paper recycling was also introduced. The garage was renovated to provide a more efficient use of space.

Changes in AMP & CPMP

In 2013, the Office completed an MTR process with a high level meeting on 12 March 2013. The 2013 AMP reflects a strategic move from survival and supplies to systems strengthening, knowledge management, communication and policy advocacy. In the light of MTR recommendations the office identified a need to strengthen the capacity of primary health care to deliver better quality services for young children; and the capacity in education reform with a focus on quality and continuity of preschool, pre-primary and primary education and inclusive education. In social policy more attention will be given to strengthening the normative base, coordination and management, preventive and protective services for children under child and social protection systems. Monitoring and evaluation for quality assurance and data generation from the implementation of the Programme of Cooperation and for capacity development of partners will be prioritised.

A new CPMP was prepared to capture required changes in management, programme and staffing stemming from transformed engagement of UNICEF in Turkmenistan. The major objective of the management strategy is to make the UNICEF country office the first stop for knowledge on children and, through a strategic shift of aligning core roles and core resources and concentrating on relevant RKLAs, to achieve the planned key results formulated in the CPD and CPAP. Purposefully, the office will employ management practices to improve and rationalise governance systems, improve management and stewardship of resources and human
capacities; adopt innovations, including increased cooperation and sharing of resources with other COs, to maximize programme and operational effectiveness and efficiency, in line with regional priorities around core resources for core roles and the leadership agenda.

**Summary Notes and Acronyms**

**Acronyms**

AIDS
Acquired Immune Deficiency Syndrome

AMP
Annual Management Plan

BFHI
Baby-Friendly Hospitals Initiative

BCP
Business Continuity Plan

CAT
Committee Against Torture

CCC
Core Commitments for Children

CEDAW
Convention on Elimination of All Forms of Discrimination Against Women

CERD
Convention on Elimination of Racial Discrimination

CFS
Child-Friendly Schools

CHL
Certification in Humanitarian Logistics

CMT
Country Management Team

CO
Country Office

CPAP
Country Programme Action Plan

CPD
Country Programme Document

CPMP
Country Programme Management Plan

CRB
Central Review Body

CRC
Convention on the Rights of the Child

CRC
Contract Review Committee

CRPD
Convention on the Rights of People with Disabilities

DCT
Direct Cash Transfer

DHS
Demographic Household Survey

DPO
Disability Public Organizations

DRR
Disaster Risk Reduction

ECD
Early Childhood Development

ECHO
Long Term Agreement
MCH
Mother and Child Health
MDGs
Millennium Development Goals
MFA
Ministry of Foreign Affairs
MICS
Multi-Indicator Cluster Survey
MLSPP
Ministry of Labour and Social Protection of Population
MMR
Maternal Mortality Rate
MNCAH
Maternal, Newborn, Child, Adolescent Health
MOE
Ministry of Education
MOHMI
Ministry of Health and Medical Industry
MOU
Memorandum of Understanding
MP
Member of Parliament
MTR
Mid Term Review
NIDHR
National Institute of Democracy and Human Rights
OCHA
Office for the Coordination of Humanitarian Assistance
ODA
Official Development Assistance
OR
Other Resources
PBA
Programme Budget Allotment
PBR
Programme Budget Review
PCA
Programme Cooperation Agreement
PCR
Programme Component Result
PHC
Primary Health Care
PMTCT
Prevention of Mother to Child Transmission
PPP
Programme Policy and Procedure
PSB
Property Survey Board
PSV
Peer Support Volunteer
RCF
Regional Contingency Funds
RKLA
Regional Knowledge and Leadership Agenda
RO
## Evaluation

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<tr>
<th>Title</th>
<th>Sequence Number</th>
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<tr>
<td>Turkmenistan IMEP 2013</td>
<td>2013/001</td>
<td>IMEP</td>
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<tr>
<td>Evaluation of UNICEF Contribution to Promotion of Child Friendly Schools in Turkmenistan</td>
<td>2013/005</td>
<td>Evaluation</td>
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<tr>
<td>Baseline Survey on DRR</td>
<td>2013/002</td>
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<td>Study of the Impact of the cash and none cash benefits for children</td>
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<td>CFS Baseline Study</td>
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## Other Publications

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<tr>
<td>&quot;Facts for Life&quot; book in Turkmen</td>
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<tr>
<td>Series of HIV/AIDS related publications in Turkmen: Pre-test HIV counselling session cards; Leaflet &quot;Protect yourself, your child and your family from HIV / AIDS&quot;; National PMTCT Pr</td>
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<tr>
<td>Growth Monitoring Charts in Turkmen</td>
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<td>Teacher's manual on DRR</td>
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<td>School textbooks, Grades: 1-5</td>
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<td>School textbooks, Grades: 6-10</td>
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<td>Board Game &quot;Riskland&quot;</td>
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