Executive Summary

In 2013 the Government of Zambia and UNICEF completed the Mid-Term Review of the 2011-2015 Country Programme. The updated Situation Analysis, the mid-term programmatic review, and the Strategic Moment of Reflection on UNICEF presence in Zambia beyond 2016 all confirmed the strategic direction of the Programme. They highlighted that, despite economic growth, child poverty remains widespread and is reflected in various socio-economic inequalities. They emphasised the need to strengthen programming and coordination for the 'second decade of life'; the significance of early childhood development, nutrition, and disability as major cross-cutting themes; the relevance of strengthening the social protection system; and the need for UNICEF to actively engage with the decentralisation process, including through a smart local presence. The MTR confirmed the alignment of the Country Programme with the Sixth National Development Plan that was revisited in 2013 as well.

Apart from aligning the results framework to that of the new corporate Strategic Plan, the MTR did not lead to significant changes in the programme and staffing structure. In 2013, the Office saw the arrival of new senior management and 10 new international staff members. The Country Programme is fully funded and since 2011 the Office has mobilised over US$150 million, which is 20 percent above the OR ceiling. Strategic financial and technical partnerships with DFID and the European Union (EU) contribute much to this funding situation and to leveraging and delivering results for children in Zambia. Within Government, the Ministry of Community Development, Mother and Child Health (MCDMCH), which is now responsible for primary health care up to district level, and the Ministry of Chiefs and Traditional Affairs (MoCTA) have emerged as key partners for several programme components.

In 2013, the main achievements were:
1. The work of the Sanitation & Hygiene programme led to a total of 804,000 new users of improved sanitation and, through decentralised technical support in 44 targeted districts and an innovative mobile-to-web monitoring system in 16 districts, the programme is on track to reach the goal of 3 million new users by 2015;
2. UNICEF-supported advocacy played a role in the Government decision to significantly increase the budget for cash transfers; technical preparations were completed for a subsequent three-fold caseload increase in 2014;
3. A model for birth registration desks in health centres was rolled-out in two provinces and resulted in a 16-fold increase in the number of births registered;
4. School-Level improvement plans were rolled-out in 424 schools in five provinces, enhancing community-school linkages and improving learner performance and retention, and 12,000 learners in 16 equity districts accessed ECD services;
5. Using technology for development (T4D) approaches, the SMS platform Zambia-U-Report was launched, allowing 21,000 adolescents and youth to interact about HIV-related issues, and Programme Mwana was scaled-up to nation-wide coverage at 572 (out of 800) sites.

Challenges were confronted in the field of child-focused social budgeting across programmes. Despite the overall solid funding situation, the Programme faces shortages in specific areas such as Education and Child Protection.

Country Situation as Affecting Children & Women

The 2010 census, released this year, set the Zambian population at slightly over 13 million, with 50.7 per cent women and 52.5 per cent children; 60.5 per cent live in rural areas. Zambia continued to show steady and robust economic growth with a real GDP growth of 6.6 per cent in 2011, one percentage point lower than 2010. However, poverty indicators do not seem to have followed the same trend and pace. Around 60 per cent (7.9 million) of the entire population lives in poverty and 40 per cent (5.5 million) are extremely poor. It is estimated that 4.6 million (65 per cent) children and adolescents live in poverty. Around 46 per cent of the child and adolescents population lives in extreme poverty. Child poverty is predominantly rural: 85 per cent of poor children lived in rural areas (3.89 million children).
Maternal and under-5 mortality rates have improved from ten years ago, but are still very high at 483/100,000 and 138/1,000 live births, respectively [1]. Major causes are interrelated and can be attributed to: water, sanitation and garbage management; lack of appropriate care for pregnant women; and lack of attention during birth and to care in the initial stages of children’s lives, including nutrition.

Zambia is almost on track to meet the MDG for water supply, but off-track to meet the objectives for sanitation. The data reflects the rural-urban dichotomy: about 64 per cent of the population uses improved drinking water sources; 50 per cent in rural, and 86 per cent in urban areas. Only 42 per cent of the population uses improved sanitation facilities; 56 per cent in urban and 33 per cent in rural areas. The vast majority of people without access to water and sanitation are the poorest 20 per cent of the population: the richest 20 per cent are nine times more likely to have access to safe water, and more than 30 times more likely to have access to sanitation than the poorest 20 per cent.

While 94 per cent of women received antenatal care (ANC) from a skilled provider during their last pregnancy, only 60 per cent of women aged 15-49 who had a live birth in the preceding five years of the DHS had four or more ANC visits. Generally, 52 per cent of the deliveries reported happened at home (91 per cent in rural and 9 per cent in urban areas). Skilled health workers attended less than half of all births. More than 80 per cent of the births that were attended to by skilled workers took place in urban areas.

Malnutrition is the most widespread but least addressed public health problem in Zambia. The prevalence of stunting in children under-five was 45 per cent in 2007 (DHS) and 46.7 per cent in 2010 (LCMS), above the average for Sub-Saharan Africa (42 per cent). About 9 per cent of children under-five had low birth weight (below 2.5kg), reflecting maternal malnutrition, but even this figure is likely to be an under-estimate considering that a large proportion of new-borns are not weighed.

According to UNAIDS 2012 estimates, between 1 million and 1.2 million people in Zambia live with HIV, representing approximately 13 per cent of the population. Urban areas still have higher HIV prevalence than rural areas (20 per cent and 10 per cent respectively). However, numbers are growing in rural areas.

Malaria accounts for 40 per cent of all outpatient attendance, for up to 40 per cent of all infant mortality and for 15–20 per cent of deaths in children below five years of age. Recent data [2] shows that the percentage of infected children under 5 years old has declined in the past years; however, the decline between 2010 and 2012 is very small (from 16 per cent to 14.9 per cent), especially in rural areas (from 20.4 per cent to 20.2 per cent). Among other diseases that have a severe impact on children are pneumonia and diarrhoea.

The proportion of children enrolled in the right grade, according to expected age for grades 1-7, reached 96 per cent in 2012. The proportion of children that started grade one and survived up to grade seven increased nationally from 94 per cent in 2009 to 103 per cent in 2011, while for grade 9 it increased from 52.5 per cent (57 per cent for males; 48 per cent for females) to 62 per cent (67.85 per cent M; 55.97 per cent F). However, the ratio of boys to girls slightly decreased from 1.0 to 0.98. The percentage of grade 1 entrants with pre-primary education decreased from 17.8 per cent to 15.1 per cent during the same period.[3] The number of school-age children who are out of school is 435,430,[4] but analysis using 2010 Census data estimates it at over 1 million. Girls leave school earlier and more often than boys, due to pregnancy and early marriage. The number of reported pregnancies among girls in grades 1 to 9 increased from 3,663 in 2002 to almost 14,000 in 2011. The quality of education and student achievement remains a major concern, as reflected in recent results and national assessments.

There are some 891,000 orphans (0-18 years), representing more than 13 per cent of this age group. Of the total number of orphans, 185,000 have lost both parents. Estimates by UNAIDS attribute AIDS-related mortality to 80 per cent of cases of children becoming orphaned. The 2010 Census also highlighted that 14 per cent of school-aged orphans had never attended school.

The adolescent population poses a major challenge for the country. Most adolescents drop out of school before entering the secondary level. Due to the poor quality of primary education, these children have not acquired the skills necessary for formal employment and informed decision-making; which raises issues such as: high-risk sexual behaviour, teenage pregnancy, early marriage, incomplete education, conflict with the
law and poverty. It is estimated that 80,000-100,000 adolescents (10 - 19 years old) living with HIV were in need of treatment.

Birth registration is the foundation for safeguarding a child's identity as well as civil, political, economic, social and cultural rights. Only 17 per cent of the population below the age of 18 has a birth certificate.

Child marriages are frequent in Zambia. According to an assessment by the Ministry of Gender and Child Development in 2012, 46 per cent of all women were married before reaching the age of 18. Child marriage occurs more frequently among girls who are the least educated, poorest and living in rural areas.

[1] Census 2010

Country Programme Analytical Overview

In 2013, UNICEF Zambia completed the Mid-Term Review of the 2011-2015 Country Programme. The review confirmed the relevance of the overall strategic direction and the existing programme structure. The results framework was re-aligned to the new 2014-2017 UNICEF Strategic Plan. The updated Situation Analysis confirms the relevance of programmatic interventions and highlights deep inequalities driven by poverty and social norms. It also points to a number of deprivations and risks faced by children in their second decade of life. In response, UNICEF will intensify and better coordinate programme interventions for adolescents, in particular adolescent girls. HIV prevention among this age group is considered a critical entry point for a multi-sector approach. The mid-term review discussions on strategic direction, including through the Strategic Moment of Reflection, also highlighted the relevance of achieving a balanced mix between sector-based supply-side support in health, education, and water and sanitation; support to demand- and family-centred social and child protection system interventions; and support to C4D interventions to achieve changes in social norms. Early childhood care and development, adolescents, disability, and nutrition clearly emerge as key issues, and will be the subject of enhanced coordination efforts through the UNDAF outcomes groups and other forms of inter-agency collaboration, including in support of the Scaling-Up Nutrition (SUN) movement. In the second half of the Country Programme cycle (2014-2015), social protection support will be enhanced, with a focus on the Government’s cash transfer programme, the establishment of coordination and referral mechanisms, including with child protection, and the development and use of a child and family welfare systems approach.

Finally, the mid-term review pointed to the need to streamline UNICEF support to the decentralisation process, notably for policy and programme implementation monitoring, strengthened accountability and convergence around an integrated approach to addressing child rights at the sub-national level. The MDG 4 and 5 initiative, funded for over US$50 million by the EU between 2013 and 2017, will start using district-level block grants in an attempt to align with and support decentralisation in the health sector. The Sanitation and Hygiene programme is putting in place support mechanisms at the district level. In 2014, the Office will develop a proposal for establishing a relevant and cost-effective smart presence at sub-national level, which is considered highly strategic for achieving sustainable results for children.

The Country Programme is coherent with national policy frameworks, including the Sixth National Development Plan, which has been revised. A number of revised or new policies and programmes were completed, notably on new-born health, nutrition, ECD, primary and secondary education curriculum and social protection. UNICEF support is required around institutional, systems, and human capacity development to ensure their effective implementation. UNICEF strengthened its partnerships with two ministries in particular: the Ministry of Community Development, Mother and Child Health, which is now responsible for primary health care functions previously under Ministry of Health; and MoCTA for addressing harmful social norms and behaviour, particularly at the local level, in relation to child marriage, sanitation and hygiene behaviour, among others.

Humanitarian Assistance
UNICEF continued to provide technical and logistical support to the Disaster Management and Mitigation Unit
(DMMU) for annual vulnerability assessments (VAC) and formulation of National Annual Contingency Plans. Through DFID funding, UNICEF supported districts in 2013 EPR Planning, IDSR training for 250 health/surveillance officers, meant to impart knowledge and skills on disease outbreak identification and response. In addition, quick epidemic response funds were disbursed to 16 districts that experienced cholera, anthrax, H1N1 and typhoid outbreaks. In education, 44 provincial and district education officials gained increased skills in Emergencies and Disaster Risk Reduction and Contingency Planning. Western Province was supported to construct a flood-proof school at Malabo and school embankments aimed at ensuring that children are able to continue attending school during the flooding season. On WASH emergencies, UNICEF supplied and pre-positioned 20 water quality testers, 50,000 (12*250mls) liquid and 100 x 45kg granular chlorine, 10 x hydrogen sulphide water quality test kits and 5,000 (20*800grams) hand-washing soap were distributed to all the cholera-prone districts through MoH, the Lusaka Water and Sewerage Company and District Development Coordinating Committees.

**Effective Advocacy**

*Mostly met benchmarks*

ZCO carried out sustained engagement of GRZ officials, including parliamentarians, CPs and civil society in advocating for children’s rights issues that cut across the ZCO Programme.

The main achievements were:

Senior government officials were engaged before, during and after the launch of A Promise Renewed in April, 2013 – the launch was led by UNICEF Deputy Executive Director Geeta Rao Gupta and Zambia’s First Lady Dr. Christine Kaseba and received significant visibility. The initiative was taken to the grassroots, including disseminating APR messages to more than 3,000 vulnerable children at the ZCO-supported Barefeet Youth Arts Festival.

Advocacy efforts led to Zambia’s submission of the combined second, third and fourth State Party Report to the CRC Committee (previous submission was 2002).

Through the collection of evidence on maternal and new-born health, ZCO managed to mobilise US$56 million from the EU for a four-year project to accelerate MDGs 1, 4 and 5.

As part of the Delivering as One (DaO) UN mechanism, ZCO led efforts to encourage over 3,000 children to participate in discussions about the post-2015 agenda and the “Zambia that they want.”

As co-lead for the CPs group, ZCO engaged the GRZ on the importance of early childhood education (ECE), which resulted in Government budgeting for the expansion of ECE centres, deploying 1,000 ECE teachers to Government schools to handle scaling-up and quality provision of ECE services in public schools, and continued to influence Government to finalise the ECE Policy, which has been in draft

Through active involvement of the GRZ and traditional leaders, two chiefdoms were declared Open Defecation Free.

Under Unite4Climate, over 500 child climate ambassadors in 40 schools carried out child-led advocacy activities on climate change adaptation and mitigation, plus HIV prevention. Children and youth were actively involved in the promotion of “U-Report,” a free SMS service for young people to receive and share information on HIV/AIDS and STIs. U-Report advocacy efforts included TV and radio PSAs leading to an increase in registered users from 117 in January 2013 to 25,000 in December. A TV PSA was completed featuring Dr. Kaseba, national celebrities, and children.

ZCO supported the MCDMCH to advocate with the Cabinet Office and the Ministry of Finance (MOF) for a budget increase for social cash transfers, including using the findings of the Child Grant impact evaluation, which was released in April. The efforts contributed to an eight-fold budget increase.

After signing an MOU with Zambia Information Communication Technology (ZICTA), ZCO co-funded a high-
level national symposium on digital citizenship and safety in November, where a roadmap was agreed to strengthen measures related to online child protection.

The ZCO website and social media platforms were effectively used in advocacy, leading to a significant increase in the number of visitors to the website and the growth of Facebook fans from less than 500 in January 2013 to 1,635 in December 2013.

The ZCO held a successful fundraising event for the Brothers for Life campaign with the private sector.

Six UNICEF national committees were hosted with a focus on documenting successes of interventions in health, education, social protection and WASH.

**Capacity Development**

*Mostly met benchmarks*

Capacity development continues to be a key strategy in all of ZCO’s interventions. In 2013, the capacity of 200 government and NGO partners in the Education and Health Sectors in C4D was enhanced resulting in systematic inclusion of C4D activities in programming and a shift towards more effective community engagement. Technical support was given in the area of WASH, for decentralisation in 44 districts, standardisation of the operational approaches for both School WASH and the community-led total sanitation (CLTS) components, harmonisation of toilet designs and monitoring and evaluation (M&E) frameworks. In addition, a new surveillance platform based on mobile-to-web technologies was established in 16 districts, covering a rural population of 1.78 million, along with development of a supply chain and maintenance framework to mitigate the issue of water contamination with iron and sustain access to safe water.

The Ministries of Home Affairs and Health were supported to integrate birth registration and health services by opening birth registration desks in health facilities, aimed at bringing birth registration services closer to communities. Health workers in three provinces gained skills and knowledge on the entire registration process, existing national and sub-national structures and functions, community and social mobilisation, integrating birth registration in existing public services, registration bottlenecks, the births and deaths Act, and birth registration monitoring and evaluation. This resulted in registration of 5,158 children in the 67 health facilities where registration desks were launched in 2013, compared to 299 registered in 2012 through traditional district registration offices.

Technical advisors in Education were deployed in four of the five equity provinces to build capacity of education providers at the sub-national level and enhance delivery of quality education. The advisors supported educational planning, managing and reporting of ECD and quality initiatives. As a result, 16 equity districts produced education profiles, capturing key indicators and actions required to improve education delivery, and 1,600 stakeholders (school heads, teachers, learners and parents) gained skills in school-level planning processes within the child-friendly framework, resulting in the development of 400 school improvement plans. To contribute to national efforts to improve the dire literacy levels in the country, UNICEF supported literacy improvement programmes through which teachers gained specialised knowledge and skills, including delivering literacy through ICT in rural, hard-to-reach schools.

Under the global movement of ‘A Promise Renewed’ UNICEF supported a bottleneck analysis for the Maternal, New-born and Child Health (MNCH) Roadmap, which identified capacity gaps and strategies to address them. UNICEF supported nine hard-to-reach districts to improve availability, access and utilisation of MNCH services, utilising some of the MNCH Roadmap strategies, including: capacity development of district management teams on planning, costing and budgeting; re-hiring retired skilled medical staff; and sponsoring community-identified candidates for nursing training on agreement that they will return to serve in their communities. Finally, UNICEF provided mentorship and capacity building for Zambia U-Report SMS counsellors to improve the platform, promote behaviour change through two-way communication and develop a more systematic approach to counselling via SMS, resulting in over 21,000 adolescents receiving quality HIV and STI counselling via SMS.
Communication for Development

Fully met benchmarks

UNICEF continued working with partners through thematic social mobilisation committees on major campaigns, including: the launch of new vaccines, Child Health Week, clean water and toilets, birth registration, life skills; and early childhood care and development. Using a variety of media and interpersonal communication, UNICEF facilitated development of messages based on data collected from community assessments in order to reach various audiences, including the hard to reach. Audiences were segmented and specific messages designed, based on how they fit into respective communication frameworks. In this way C4D plans were based on the evidence on the ground, collected using various surveys and observations. Materials produced were always pre-tested before they were finally disseminated and a monitoring system/schedule was put in place.

The capacity of 200 GRZ and NGO partners in the education and health sectors was enhanced, resulting in inclusive programmes. The skills and knowledge gained by the Senior Provincial Planning Officers and partners were put to good use during community mobilisation for school-level improved planning in 424 schools, where 37,480 parents, teachers and pupils increased their knowledge on child rights, child protection and parental involvement in education. A nutrition, home fortification and micronutrient C4D strategy was developed with partners.

The right of children to an identity was progressively realised with the on-going birth registration mobilisation through support to community awareness in three provinces. This resulted in increased number of children being registered. Through social mobilisation efforts, over 400 head teachers, 400 learners and 400 parents from 400 schools in 16 low-performing districts gained knowledge and skills in planning for their schools.

Over 60 per cent of parents and caretakers nationwide were reached with IEC materials on new vaccines and information regarding Child Health Week after mass media and community campaigns were launched on new vaccines, Child Health Week, breastfeeding week, micronutrient food, water and toilet days, and Brothers for Life.

Using U-Report, more than 25,000 young people (aged 10-19) have had HIV tests in two districts. U-report also made it easier to gather and involve young people’s views in campaigns. The numbers of young people coming forward for testing as a result of these campaigns signals a shift in behaviour. The Brothers for Life campaign is on-going, with several radio and TV stations running messages on condom use, PMTCT and male circumcision, gender-based violence (GBV), and responsible alcohol drinking. Brothers for Life community engagements started this year and will continue in 2014.

The child-led climate ambassador programme continued growing with 80 new children trained this year, bringing the number of trained ambassadors to 825 since 2010. The ambassadors now provide cross-cutting support to programme, advocating on various themes beyond climate change and HIV prevention.

Some 100 journalists were also trained on AEFI and 40 others on water and sanitation, resulting in substantial media coverage on children’s rights. An average of 10 articles appears each week in daily newspapers or on national radio and TV and community radio stations on UNICEF thematic areas.

Service Delivery

Mostly met benchmarks

The WASH Program contributed to reach the MDGs for sanitation, the Health Program contributed to national coverage of 78 per cent (DPT3) and the Education Program to raising the number of ECD centres from 153 to 269 and a 40 per cent increase in enrolment in ECD. UNICEF ZCO does not have the operational capacity to
cover exhaustively the needs of most vulnerable communities with essential services. However, UNICEF managed to have a strong leveraging effect on key stakeholders for improved delivery of essential services. This was achieved through advocating and influencing government counterparts and key partners for equity-focused targeting of national programmes: in the area of Health, UNICEF supported the identification of areas of lowest coverage based on the analysis of H-MIS data to favour adequate prioritisation; for improved child protection measures, the decentralised birth registration integration in health facilities was established in three provinces with the lowest level of registration; the Education Program boosted interventions in the 16 equity districts; and the WASH Programme targets specifically the communities with the worst situations in terms of access to WASH services (there is strong evidence that the large majority of these communities belong to the poorest quintile of the population).

UNICEF consistently contributed to improved national strategies and operational approaches for improved response to the needs of the most deprived population. This was achieved through:
- Strategic documentation based on specific studies and analysis; for instance, in the framework of its MTR, UNICEF developed a strong Situation Analysis that was used by all programme sections during key strategic reviews and planning processes led by the Government.
- Capacity building, specifically at the decentralised level, was ensured notably through South-South collaboration support by UNICEF: key decision-makers from the Ministry of Home Affairs participated in a study tour to Ghana to benefit from the experience of the Government of Ghana on birth registration.

Other key interventions, at short- and mid-term perspective, allowed UNICEF to identify the following priorities to encourage the use of essential services by most vulnerable Zambians:
- Identification of commodities proven to have high impact (supplies)
- Improve complementarity of approaches between UNICEF and other development agencies
- Overcome cultural barriers in the sustained use of the available services through better understanding of social practices/norms (i.e. formative research, leading to in-depth understanding of determinants of sanitation and hygiene behaviour achieved by the WASH Program in 2013); and
- Support the Government to adopt appropriate measures to ensure availability of skilled staff responsible for the delivery of essential services, with a specific focus on incentives for positions based in less-attractive districts.

**Strategic Partnerships**

*Mostly met benchmarks*

In 2013, the Zambia Country Office further expanded a number of strategic partnerships through which it leverages and achieves results for children.

The Office strengthened its relationship with the MCDMCH, following the transfer of primary health care functions to this Ministry, which has now become a key partner for UNICEF. Together, the Ministry and UNICEF will lead the implementation of the "MDG 4 and 5 initiative", which, between 2013 and 2017, will benefit from an amount of US$56 million made available by the EU. UNICEF will take responsibility for mobilising a range of partners around this initiative to maximise the opportunities for leveraging results for children. Also in 2013, UNICEF further expanded its partnership with MoCTA, with the aim of leveraging its mandate and using the convening and influencing power of chiefs and traditional leaders around behaviour-change issues such as child marriages or sanitation and hygiene behaviour. UNICEF managed to engage both the Ministry’s leadership and technical staff.

UNICEF has a significant portfolio of Project Cooperation Agreements – 25 PCAs valued at over US$8 million. In the water & sanitation sector, UNICEF collaborates with several national and international NGOs to support the Government to extend coverage of CLTS and safe drinking water, reaching out to the larger part of Zambia’s rural areas. In the education sector, UNICEF collaborates with a number of NGOs to improve the quality of learning, with a focus on life skills, literacy, and early childhood development, both seeking wider coverage and informing policy development. It is expected that in view of the current funding situation the PCA portfolio will expand; the Office is taking measures to improve management, monitoring and technical support under these agreements.
The financial resources envelope is an indication of the strengths of partnerships with bilateral donors present in Zambia. Apart from the MDG partnership with the EU, UNICEF Zambia receives significant funding from DFID (sanitation, social protection, health), Irish Aid (social protection, nutrition, co-leading for education sector partners), and the Netherlands (water and education). The strategic level of some of these partnerships (notably DFID and Irish Aid) is high, as funding goes hand-in-hand with joint technical support at country level.

In the area of partnerships, for which results leveraging is key and funding less prominent, UNICEF in 2013 signed an MoU with the Zambia Information and Communication Technology Authority (ZICTA) around Digital Citizenship and Safety. Both partners recognise the obvious complementarity in terms of mandates, expertise and resources that they can bring in to ensure that children benefit from ICT resources and opportunities in a safe way.

Finally, UNICEF developed tripartite partnerships with Government and NGOs to support innovations for children. These include the partnership with the Ministry of Local Government and Praekelt around the use of mobile phone technology for CLTS monitoring, and the partnership with the National AIDS Council and Champ around the SMS platform U-report.

**Knowledge Management**

*Mostly met benchmarks*

To enhance management of knowledge generation, the annual integrated monitoring and evaluation plan (IMEP) was developed through sectoral consultations, as embedded in the rolling work plans. To augment the use of information from different research activities, it was required that each research proposal detail intended users and be accompanied by a dissemination plan. This ensured that for each study the findings were shared both within the organisation and with respective partners. In 2013 the Office embarked on monthly dissemination meetings during which researchers were given an opportunity to present their findings for the seven studies undertaken.

As a major highlight the MoF, with support from UNICEF and as a part of the Mid-Term Review (MTR) process, commissioned the updating of the “Situation Analysis of Children and Women” (SitAn). This research, based on a desk review and secondary data analysis of available datasets using the child poverty analysis and bottleneck analysis framework, provided the latest information on children and women. The MoF is spearheading its publication and wide dissemination through appropriate knowledge products for different audiences.

The SitAn review series that ran over a period of eight weeks provided a forum in which teams from each programme area were given an opportunity to appreciate the findings and share these with the wider Office team. It was further used at the annual review and planning forums where each team took their piece and shared with the partners to inform selection of interventions. In addition to the SitAn, the PMTCT team shared findings from two studies: data quality assessment and evaluability assessment of the national PMTCT programme. The Education team shared research findings on the determinants of pupil absenteeism from national examinations, and literacy for grade ones and twos. The Social Protection group shared findings from the evaluation of social cash transfers. Two other studies: formative research on immunisation and child health by the C4D team and another on menstrual hygiene management by WASH were also disseminated. Each of these instances was a golden opportunity to contribute to better-focused recommendations and action plans.

To enhance the generation and use of knowledge, UNICEF supported the MoF, through its Research Development Program (RDP), to construct the Government-led research agenda, including training in new research methods for 20 officials who are responsible for research from 10 ministries. The practical approach that focused on each ministry team developing a research concept note for a specific area facilitated the generation of areas of research. These concept notes will be collated and incorporated in the Government research agenda for subsequent years.
Under the leadership of the MoF research and development programme, a Community of Practice on Monitoring and Evaluation and Research is evolving. This is intended to provide a platform for learning and use of research findings. Internally, the office is working to append the responsibility of knowledge management to the M&E taskforce and propagate the use of technology intranet for KM.

Human Rights Based Approach to Cooperation

*Fully met benchmarks*

Zambia Country Office has fully met the benchmarks in HRBAP during the year under review. Through its programming, ZCO continued to design programmes that are clearly based on human rights principles. This was reinforced by ensuring that partners and staff are knowledgeable on HRBAP. During the year UNICEF was involved in HRBAP and RBM trainings, through which both UNICEF and UNCT staff increased their knowledge on HRBAP principles.

In the design of programmes UNICEF continued to focus on Zambia’s most vulnerable and hard-to-reach districts. These districts were arrived at after analysis of composite indicators from various national studies that showed that people living in these districts were the most marginalised due a number of factors, including lack of access to essential services such as primary health care and education.

The programming during the year has emphasised strengthening the capacities of duty-bearers, especially the Government, as a key strategy to ensuring the fulfilment of the rights of children and women. This has been done, to a large extent, through skills and knowledge training and advocacy campaigns.

Examples of programming involving the participation of children include:

- As part of the UNCT, 3,000 children participated in discussions about the post-2015 agenda and the Zambia that they want. This contributed to steps by the Government to set up a coordinating mechanism under the Ministry of Finance to spearhead the consultations leading up to 2015.

- In education, school children and parents in selected districts were involved in the design of School Level Improvement Plans (SLIPS). This allowed duty-bearers and rights-holders to jointly analyse barriers and determine solutions around the delivery of holistic, child-friendly learning environments. In addition, advocacy campaigns in Early Childhood Education (ECD) resulted in the first-ever deployment of 1,000 ECD teachers by Government and an overwhelming demand by parents as duty-bearers for ECD services.

The use of technology also played a big role. SMS technology was used to raise the adolescents and HIV agenda during the 2013 HIV Prevention Convention by capturing the voices of 15,000 adolescents and young people across the country in less than a week. The “Voice of Youth” statement was prepared by a group of 50 adolescents and presented to the President of Zambia. This statement informed the barriers and solutions to utilisation of services by adolescents (testing and counselling, male medical circumcision, condoms). Young people’s recommendations were reflected in the overall recommendations of the 2013 HIV Prevention Convention.

UNICEF also helped strengthen Governments’ capacity in birth registration by establishing alternate mechanisms for birth registration. These involved the use of health centres to register children. In Luapula, birth registration increased from an aggregate of 149 children registered in 2012 to 3,149 by August 2013. All this work is being supported by robust M&E systems that will help the Country Office to draw important lessons learnt for scaling-up.

Gender Equality

*Partially met benchmarks*

In 2012 UNICEF advocated, together with partners, for creation of a Ministry specifically for gender issues. This resulted in the creation of Ministry for Gender and Child Development at the beginning of 2013. In order to address GBV, UNICEF provided technical and financial support for the implementation of the Anti-Gender
Based Violence Act of 2011. This involved support for the development of a national training manual for service providers on GBV and violence against children (VAC) and technical support to World Vision to establish 12 new One-Stop Centres (OSCs), bringing the number of districts with OSCs from 10 to 22. Vulnerable young women are supported through the provision of business and entrepreneurial skills, enabling their independence. UNICEF is conducting research on the norms, beliefs and practices associated with child marriage in support of the National Campaign against Child Marriage.

For Government to track discrimination between the sexes, UNICEF, through the Child Protection Programme, supports Government in strengthening its birth registration system as a starting point for any measurement of progress on child rights.

The M&E framework of the WASH programme disaggregates all data by sex, making it possible to track results of activities for women and girls. The results of a study on menstrual hygiene management in schools will inform programme interventions. Field observations show that the CLTS programme especially empowers women to take up leading and active roles, and efforts need to be made to involve men for better results.

According to the National Education gender score card, Zambia is set to attain MDG 2 “achieving universal primary education” by 2015. However, targets for MDG 3 “promoting gender equality and empowering women” and related EFA goals cannot be met, as transition and completion rates for girls remain low. The gender gap in learning achievement was widest (averaging 6 percentage points) at grade 9 and 12. Poverty, pregnancy, child marriage, low female staffing, poor water and sanitation and unsafe school environments continue to create barriers for girls. UNICEF worked with the Government on disseminating and implementing the revised re-entry policy, in response to low numbers of girls taking advantage of this opportunity, and commenced development of a teen pregnancy reduction strategy. CSO partners worked with Community Action Groups, traditional leaders and schools to address social-cultural impediments to girls’ education, monitoring of girls’ attendance and performance, and life skills interventions to boost participation and retention.

The health sector has used communication strategies targeting men and women separately to get messages across. Research showed that women get their information through radio, TV and community meetings. These mediums were used to convey messages on the importance of immunising children, family planning and PMTCT. The Brothers-for-Life campaign targets men through male role models. The men are encouraged to take responsibility for their life and health, for instance, by using condoms. They are also encouraged to support their families and take their wives for antenatal services. In this way, both the pregnant woman and her husband will be involved in PMTCT, facilitating common decision-making on the baby and enhancing care for the child.

**Environmental Sustainability**

*Mostly met benchmarks*

UNICEF contributed to environmental sustainability by (i) building resilience among children, GRZ and communities to cope with environmental issues, including climate change, and (ii) developing approaches and standards that have a decreased impact on the environment.

Key achievements included:

- Development and piloting of low-cost water supply and sanitation facilities: low-cost design for child-friendly school latrines allowing access to disabled persons (for US$1,000 per latrine against US$2,500 for the former design used by the Government), thanks to a very significant decrease (more than half) of the volume of cement and other construction material, which has a heavy impact on carbon footprint). UNICEF also built capacity of private entrepreneurs to provide low-cost water supply through manually drilled boreholes in three vulnerable districts; this can be extended to many other districts after appropriate documentation of lessons learnt.
- Support to 825 child climate ambassadors in 10 provinces covered; waste management in schools and communities (33,000 people reached); seven districts using radio shows (at least 1/week) to sensitise more
than 1.5 million persons on climate change issues; 3,000 planted trees in 10 provinces by the ambassadors; and the establishment of environmental clubs in 44 schools in provincial capitals.
- Through the Child Protection Programme, 500 children were consulted on key issues they face as Zambian children. The Ministry of Justice integrated these into the state’s party report, becoming a part of the CRC reporting. Among issues faced, pollution of drinking water was reported to be one of the most important. Children were also consulted on the preparation of the new national Child Protection Policy. Major concerns raised, including environmental sustainability will be reflected in the new policy document.
- UNICEF promoted safe disposal of clinical wastes: procured safe boxes for all districts and trained district management teams country-wide on WHO guidelines for clinic waste management.
- In the area of Education, environmental concerns are being addressed through the new Teacher Training and school curriculum aimed at equipping learners with knowledge and skills in environmental sustainability. UNICEF supported the Provincial Education Office in Western Province to construct a flood-proof school and school embankments aimed at ensuring that schools are flood proof/resistant during flood times. Key gaps and priorities identified to contribute further to environmental sustainability include:
  - Support more studies and analyses to better identify key environmental stresses in Zambia (i.e. deforestation linked to uprooting, burning charcoal) in link with UNDP (which is managing the UNRRAED, a large-scale program with focus on environmental sustainability (ES));
  - Include ES sections in existing curriculum to train health workers (in addition to medical waste management);
  - Support more in-depth analysis of cholera patterns in Zambia and build a strategy to eradicate this disease (beyond emergency response); and
  - Enhance UN staff capacity in ES for improved internal practices (i.e. education on paper use) and for improved technical support to partners (building resilience to climate change, increase use of equipment, material and technologies that have a low impact on environment).

**South-South and Triangular Cooperation**

As Zambia is currently undergoing reforms aimed at improving its civil registration system, UNICEF Zambia supported a delegation comprising representatives from the Department of National Registration, Home Affairs Research and Information Department and UNICEF to take part in a one-week Uganda study tour from 1-6 September 2013. The Zambian delegation joined 100 other participants from different countries. Organisers designed the Study Tour as a "South-to-South" learning experience. The tour enhanced knowledge and provided input to current efforts in Zambia, especially on the integration of the birth registration and the health sector. A number of lessons selected during the tour of health facilities in Uganda are being implemented in the on-going Zambian pilot, including procedures for registering children born in health facilities as well as ensuring that children born at home are registered during subsequent visits to health facilities.

To prioritize Hygiene and Sanitation on government agendas in the sub-region – taking into account the huge burden of stunting – in collaboration with the African Ministers’ Council on Water and Sanitation the Water and Sanitation Programme of the World Bank and WaterAid, UNICEF supported the Government to host the AfricaSan Southern African Sub Regional Conference. Eighty-nine representatives from 10 countries, including 34 line ministry representatives and 58 delegates from international organisations, non-governmental and civil society organisations participated to this important event. The meeting provided an opportunity for countries to: (i) review progress on their Sanitation action plans, (ii) review progress on the eThekwini commitments, and (iii) engage in peer learning and knowledge-sharing with other countries in the region.

UNICEF will work with Government and other partners to strengthen the CRVS system through the use of technology similar to what the team learnt in Uganda. This will bring about efficiency in the registration system by connecting and linking provincial and district registration offices to the main server in Lusaka, which will, among other things, reduce the physical movement of paperwork. Furthermore, national data compilation and disaggregation will also be simplified. The Ministry of Home Affairs has already procured the main server, and what remains is to procure the necessary equipment for district offices.
Zambia - 4980

**PC 1 - Child and maternal survival**

**PCR 4980/A0/04/808 WASHE**

**IR 4980/A0/04/803/001 WASHE**

- On-track

**PCR 4980/A0/04/809 Children, mothers and pregnant women benefit from high impact interventions contributing to the attainment of MDG targets for child and maternal survival and development.**

**Progress:**

The Government of Zambia sharpened and costed its four-year roadmap for reaching MDG targets on maternal, new-born and child health under “A Promise Renewed”. UNICEF, with other UN agencies, successfully mobilised funds to accelerate progress towards targets for MDG 1c, 4 and 5 and secured US$63 million from the European Union. These resources will facilitate increased utilisation of quality health and nutrition services by vulnerable women, adolescents and children in 10 districts, accounting for 30 per cent of the total population. The country, with support from UNICEF, WHO, GAVI and other partners, introduced and rolled-out nationally two new vaccines, namely Pneumococcal Conjugate Vaccine that prevents pneumonia and Rota Virus Vaccine that prevents diarrhoea, and included a second dose Measles Conjugate Vaccine into the immunisation programme to boost immunity amongst children below five years. The proportion of under-five children sleeping under insecticide-treated nets increased from 50 per cent in 2011 to 57 per cent in 2012 although it remains below the national target of 80 per cent.

The unprecedented national interest in the Scaling Up Nutrition (SUN) movement for nutrition and the 1000 Days Programme (2013-2015) culminated in the endorsement of the Global Nutrition for Growth Compact by the government, committing to: resolving human resource gaps for nutrition in five key ministries, increasing financial allocations to nutrition by at least 20 per cent annually and improving nutrition governance with oversight of the Office of the Vice-President. Establishment of a roadmap with concrete actions and measures of progress is needed to meet these commitments.

Zambia has made remarkable progress in provision of antiretroviral drugs. By the last quarter of 2013, over 99 per cent of HIV-infected pregnant women (seen at ANC) received anti-retrovirals to reduce mother-to-child transmission, and 43,742 HIV-infected children under 15 years (49 per cent of children in need of treatment) received anti-retrovirals. UNICEF advocated and provided financial and technical support to the development of the implementation plan for option B+ and adaptation of the new WHO consolidated guidelines to ensure that all children under 15 years are put on treatment regardless of CD4 count and WHO staging, and that all HIV-positive pregnant and breastfeeding women are put on lifelong treatment. The use of SMS technology for transmission of test results for early infant diagnosis of HIV expanded from 271 facilities in 2012 to 585 in 2013 through UNICEF support, including software development, evidence generation, coordination and management.

During the reporting period, a total of 198,333 people in 20 target rural districts gained access to safe water facilities through construction of 863 new water supply facilities. A total of 588,288 people gained access to improved sanitation and 2,610,000 people were reached with hygiene messages. Progress on sanitation appears to be accelerating, with two new chiefdoms celebrating Open Defecation Free (ODF) and many more chiefs ready to follow suit in 2014. The SWAp continues to evolve, with the roll-out of basket funding (supported by GIS, KFW, Danida and UNICEF) and improved partnership among NGOs and Government to support the CLTS approach.

- On-track

**IR 4980/A0/04/809/001 MoH and NFNC formulate updated policies, strategies and guidelines for demand generation and equitable access to nutrition, maternal, new-born, child health and paediatric HIV prevention, care, treatment and support services by 2015**

**Progress:** The sharpened and costed “A Promise Renewed” MNCH Roadmap 2013-2016 was launched in April, as was the National Food and Nutrition Strategic Plan and the 1000 Most Critical Days Programme. Further, the National New-born Care Framework 2013, PMTCT/Paediatric HIV care scale-up plan (2011-2015) and IMCI scale-up plan were finalised with technical support from UNICEF. With the foregoing Zambia is poised to meet its maternal, new-born and child survival targets under the MDGs and beyond.

- On-track

**IR 4980/A0/04/809/002 Consumption of micro-nutrient rich food by pregnant women and children increase in target districts by 2015**

**Progress:**
Major strides were made under the Universal Salt iodization (USI) programme. Capacity for regulatory salt monitoring and on-spot quantification of iodine in salt was built at the Botswana and Namibia borders. These are strategic borders for USI, as they account for 98 per cent of the salt imports. Another notable achievement was the implementation of the first national iodine deficiency survey among pregnant women. Survey results were indicative of adequate iodine nutrition in pregnant women and confirmed the remarkable progress achieved since 1993, when Zambia adopted USI as the main strategy to eliminate iodine deficiency disorders. A new comprehensive Statutory Instrument for salt was drafted to comply with global recommendations. The operational research on home fortification with micronutrient powders as an integrated component of Infant and Young Child Feeding (IYCF) began in Mbala district. A baseline survey showed high level of anaemia (57 per cent) and iron deficiency (42 per cent) in the targeted age group (6-12 months). Multiple micro-nutrient powders are being distributed through the health care system every two months, with impact evaluations being scheduled after six and 12 months. The flour fortification initiative, suspended a couple of years ago, was reactivated by developing a detailed road map and reviewing the Statutory Instrument for maize flour fortification.

**On-track**

**IR 4980/A0/04/809/003** All health facilities in target districts have capacity to provide antiretroviral drugs to reduce mother to child transmission of HIV by 2015

**Progress:**

Zambia has made remarkable progress and achieved 99 per cent coverage of HIV-infected pregnant women (attending ANC) receiving antiretroviral to reduce MTCT. The implementation plan for option B+ (Lifelong treatment for pregnant and breastfeeding women living with HIV) was finalised. A training/orientation package was developed based on the adapted WHO consolidated guidelines for Use of ARVs for treating and preventing HIV infection. PMTCT routine data were validated through data audit to assess quality. In addition, a Data Quality Assessment (DQA) that informed the design and site selection of PMTCT programme evaluation was completed. Comprehensive PMTCT/Paediatric Care services were provided at 40 health facilities in three hard-to-reach vulnerable districts. To increase uptake, retention and adherence for Option B+, "Chiefs" have been acting as "Option B+ Champions" in selected districts. The process of accreditation of health facilities to implement Option B+, combined with coordination challenges between MOH and MCDMCH, will delay the scale-up of Option B+.

**On-track**

**IR 4980/A0/04/809/004** All health facilities in target districts have capacity to provide antiretroviral therapy to children under 15 years by 2015

**Progress:**

Zambia has made significant progress in increasing the number of HIV-infected children under 15 years receiving antiretroviral therapy: from 12,653 in 2007 to 43,742 by June 2013. UNICEF supported the adaptation of the new WHO 2013 guidelines through the development of the first Zambia Consolidated Guidelines for Treatment and Prevention of HIV Infection, which aims to place more children on treatment by expanding eligibility criteria to all children under 15 years old regardless of WHO stage and CD4 count. Programme Mwana (SMS technology for transmission of results for early infant diagnosis of HIV) expanded from 271 facilities in 2012 to 595 in 2013 through support from UNICEF on software development, evidence generation, coordination and management. Through advocacy, technical and financial support from UNICEF, MOH conducted the first national paediatric antiretroviral treatment consultative and review meeting, which addressed challenges through "A call to action for increasing children and adolescents access to antiretroviral therapy in Zambia" endorsed by all stakeholders. Among the resolutions involving UNICEF's comparative advantage is the scale-up of innovations to optimize identification, initiation and retention of ART treatment in children and adolescents.

**On-track**

**IR 4980/A0/04/809/005** All health facilities in target districts have capacity to provide community based health care by 2015

**Progress:** The national rollout of integrated community case management (iCCM) of common childhood illnesses has been slow, but the Global Fund for AIDS, Tuberculosis and Malaria's (GFATM) announcement that countries can include aspects of iCCM in their applications for funding presents a huge opportunity for the potential scale-up of iCCM in Zambia. UNICEF, with support from the Bill and Melinda Gates Foundation, catalysed national dialogue between the Malaria Programme and the Child Health programme to ensure common understanding of iCCM. The recently completed national gap analysis on iCCM will inform the national concept note to the Global Fund. Further, a capacity gap analysis in four districts under the CIDA-supported Health for the Poorest of Population (HPP), identified inadequacy of health workers trained on supervising community-based providers of primary health care services such as iCCM. Consequently, UNICEF supported training of community health workers (CHWs) on iCCM and new-born care, in partnership with two non-governmental organisations namely (Churches Health Association of Zambia and World Vision). These CHWs now have capacity to identify and classify common childhood illnesses, treat uncomplicated ones and facilitate referral of complicated cases.

**On-track**

**IR 4980/A0/04/809/006** 80 per cent families and communities in target districts adopt key family practices and promote male involvement for nutrition, maternal, new-born, child survival as well as paediatric HIV prevention, care, treatment and support by 2015

**Progress:**
Zambia's progress in malaria control and prevention and its aspiration for malaria elimination continues on a positive trajectory as evidenced by the findings in the latest malaria indicator survey-2012. The country has reviewed its national malaria strategic plan and extrapolated it up to 2016, in readiness for application to the GFATM’s new funding mechanism in the coming year. The five districts (Serenje, Chama, Chadiza, Kalabo, Lukulu) implementing the UN joint programme (H4+) finalised (C4D) action plans on accelerating progress towards maternal and neonatal morbidity and mortality reduction in the first half of 2013. These plans have well-defined district-level strategies and activities for promoting key family practices; specifically, prevention and promotion actions towards improved maternal and child health. Monitoring and supporting the full implementation of the plans will be crucial for the actual adoption of positive behaviours and care-seeking. The integration of PMTCT in the MNCH platform will provide more focused opportunities for male involvement. Support for this element will be essential to the success of this initiative.

### On-track

**IR 4980/A0/04/809/007** Health facilities in target districts provide high impact interventions and quality clinical services for maternal, new-born and child survival by 2015

**Progress:**

In 2013 Zambia launched two new vaccines: the pneumococcal and rotavirus and a second dose of measles were incorporated into the national immunisation schedule. These high-impact interventions are targeted at reaching more than half a million infants and 2.5 million children under five years of age annually. The human papilloma virus vaccine was launched on a limited scale to inform and catalyse action for nationwide introduction in due course. The national malaria strategic plan was reviewed and extrapolated in anticipation of applying for resources under the new GFATM funding model. At the micro-level, capacity for programme planning and implementation was built in nine hard-to-reach and most vulnerable districts under the CIDA-supported 'Health for the Poorest Population' and H4+ projects. Among other actions in the nine districts, retired health personnel were hired and some nurses identified by the local leadership and sponsored for midwifery training; in addition, some basic equipment and supplies were provided and maternity wings renovated.

### On-track

**IR 4980/A0/04/809/009** Halve the proportion of population without access to sustainable and safe drinking water in target districts by 2015

**Progress:** A total of 198,333 people in the 20 target rural districts got access to safe water facilities through new construction of 726 and rehabilitation of 137 water points, bringing the total to about 863 water supply facilities. To date over 400,000 people have gained access to safe water in 20 target districts which is 61 per cent showing that progress is well on track. Additionally, 26 of the targeted 120 water points with high iron content were equipped with iron filters. Data on treatment of water at household level was not available; however, 934 boreholes were initially treated prior to hand-over. Some 1,358 communities were sensitised, well above the target of 885 communities, benefiting 339,500 people. Some 761 village WASH committees (V-WASH) were established and educated in operation and maintenance (O&M) approaches and management of WASH facilities. 120 Area Pump Minds (APMs) were trained in rehabilitation and maintenance of water supply facilities. This training proved to be very successful, in that these APMs were contracted to undertake rehabilitation of 137 water points in their respective districts. UNICEF played a key influential role and was successful in persuading the Ministry of Local Government to scale up use of the Afridev hand pump in areas where it is more suitable and effective. So far more than 25 per cent of all new and rehabilitated water points supported by UNICEF are equipped with Afridev hand pumps.

### On-track

**IR 4980/A0/04/809/010** Halve the proportion of the population without access to an improved sanitation facility in target districts by 2015

**Progress:** Analytical Statement: In addition to the 31 districts trained in Community Led Total Sanitation (CLTS) 2012, 15 new districts were trained in CLTS during the reporting period. As a result of this training, all the14 newly trained districts have implemented CLTS and are currently monitoring progress. Five new partnerships were developed with NGOs to support the programme in the areas of: service delivery, monitoring, evaluation and advocacy. With the development of an advocacy plan, the level of awareness on Sanitation and Hygiene issues has increased among sector partners. A total of 910,000 people gained access to improved sanitation during the reporting period. So far 1,466 villages in four Chiefdoms reached open defecation-free status and 11 districts completed their sanitation plans.

### On-track

**IR 4980/A0/04/809/011** 60 per cent households in target districts adopt improved hygiene practices including hand washing with soap by 2015.

**Progress:** The behaviour change communication strategy was developed with Government and is expected to be formally launched early next year. So far, 2,610,000 people have been reached with hygiene promotion messages, including about 1,810,000 exclusively reached through interpersonal communication, 500,000 through both interpersonal and media communication and 500,000 exclusively through the media. A communication agency was contracted to design a brand and develop IEC materials, such as posters, and these are being pretested. Media reach was improved through 13 different media outlets, including: Zambia's three national newspapers, eight radio channels, the national TV channel ZNBC and Muvic TV.
**IR 4980/A0/04/809/012** Government and partners at national and sub-national level has capacity to meet SPHERE standards for safe water, sanitation and hygiene by 2013

**Progress:** UNICEF support to the Government included provision of: 20 pool testers for residue chlorine, 50,000 (12*250mls) shippers of liquid chlorine, 100 (45kg) drums of Granular chlorine, 10 boxes of H2S strips (water quality test kits) and 5,000 (20*800grams) boxes of soap, which was distributed to all cholera-prone districts for response to and prevention of diarrhoeal diseases.

- On-track

**IR 4980/A0/04/809/013** MoLGH rolls out a comprehensive monitoring and information system in all provinces by 2013

**Progress:** Following the review of the national WASH information management system, UNICEF's sanitation and hygiene programme adopted a mobile web IMS tool that is being implemented in the 20 target districts. UNICEF agreed to harmonise its approach in supporting the national system, and will also facilitate and fund the recruitment of a monitoring and evaluation officers to manage the database. Eleven districts were introduced to the full training in mobile technology and equipment. Training was completed in 11 districts covering 7,244 villages in 215 wards, and for 232 community champions, 104 EHTs; 17 CLTS FPP were trained in data collection, tool usage and surveillance. By end-2013, 265 reports had been received. Meanwhile MLGH has developed a simplified excel sheet for piloting in 15 districts under the National Rural Water and Sanitation programme. Currently pilot districts are developing databases. MLGH will adopt the mobile data collection technology.

**IR 4980/A0/04/809/014 IR 114 Project Costs - Health**

**IR 4980/A0/04/809/015 IR 215 Project Costs - WASH**

- On-track

**IR 4980/A0/04/809/016 Support Capacity building for emergency**

**Progress:** Reasonable progress was made towards achieving the result. Districts now have finalised district EPR plans, facilitated by the development of the district EPR planning template. This was made possible by UNICEF technical support and funding from DFID. The EPR plans developed also incorporated disaster risk reduction activities from other stakeholders. Capacity on integrated disease surveillance and reporting was enhanced through the training of trainers conducted for all provinces except Luapula and Western Province. After the TOTs, provincial trainers conducted training for key officials and workers in all districts of their respective provinces.

**PC 2 - Children and adolescent are able to develop, learn and participate and enabling environment**

- On-track

**PCR 4980/A0/04/810 Children and adolescents are able to develop, learn and participate in a protective and enabling environment**

**Progress:** Children in Zambia constitute about 54 per cent of the country's population, of which 13 to 15 per cent are orphaned. Many children continue to face multiple protection problems: violence, abuse, neglect and exploitation, and inadequate access to health, education and social services. To improve birth registration, 67 birth registration desks were opened in health centres and 80 health and registration officers trained, significantly increasing the proportion of children registered (from 0.3 per cent to 5 per cent) between 2012 and 2013. The 2006 Child Policy was reviewed, the national coordination mechanism for child development re-installed, advocacy to address children in prisons intensified and community networks were strengthened to prevent and respond to violence against children and GBV.

Student enrolment and completion rates improved in 2013. The number of learners enrolled in Grades 1-9 increased to 3,591,736 in 2012 from 3,478,898 in 2011, while completion rates for Grade 7 and Grade 9 were 107 per cent[1] and 64 per cent respectively, exceeding the target for Grade 7, but falling short for Grade 9 due to high dropout rates, highlighting the need to intensify interventions to improve progression into secondary school to ensure the 75 per cent target is met by 2015. Of the 508,460 grade 1 entrants in 2012, 18.7 per cent had some form of ECD experience; a 3.5 per cent increase from the 15.2 per cent reported in 2011, due to increased demand for ECD. The Gender Parity Index for grades 1-9 increased from 0.98 in 2011 to 0.99 in 2012. Although the country has attained gender parity at the lower levels, girls’ retention remains a challenge due to high pregnancy levels, early marriages and lack of an enabling school environment. Part of the challenge is the absence of a clear strategy to address issues of girls’ education. Quality of learning is also a major concern, as reflected in the dismal Grade 5 National Assessment results (35.4 per cent in English; 38 per cent in Mathematics). UNICEF continued advocacy and focus on improving equitable access to quality ECD, and supported the revision of the curriculum for early education to high school, to increase synergy across the sub-sectors, respond to emerging needs and improve learning outcomes, with special attention to literacy skills through use of a familiar language. The piloting of the interim WASH in Schools package was completed, and schools were provided with sanitation facilities. Over 92 of a target 125 schools gained access to water facilities. In addition, over 40,600 pupils (19,982 girls and 20,618 boys) are benefitting from construction of 156 user-friendly latrines with hand-washing facilities. Hygiene education using SLTS was conducted in 144 schools resulting in the formation of WASH clubs to spearhead sanitation and hygiene activities with community outreach activities. Over 58,452 pupils were reached with Health Education messages and encouraged to practice hand-washing with soap.

[1] above 100 per cent is a variance between education data as collected in the school census form and the population data used which is collected by CSO

- On-track

**IR 4980/A0/04/810/001 Children's access to early learning and development increased by 15 per cent in target provinces by 2015**
Progress: The 2012 Educational Statistical Bulletin shows a 3.5 per cent increase in the number of grade 1 entrants with pre-school experience, from 15.2 per cent in 2011 to 18.7 per cent in 2012. Nationally, there is an increase in access to early learning, although disparities continue to exist along geographical and socio-economic lines. The increase in access can be attributed to factors tied to both supply and demand for ECD. There is increased Government commitment to expanding early education, as evidenced in the recruitment of 1,000 teachers in 2013. Additionally, Government has put in place an interim institutional arrangement for coordination of ECD services, which will result in improved coordination within the Ministry of Education. Government commitment to roll out ECD services beyond the 16 targets districts is another sign of commitment, which will make these services available to more children. In the 16 equity districts, enrolment increased from 8,000 reported at the end of 2012 to 12,000 vulnerable children now benefitting from early education by late 2013. Finalisation of the ECD policy faced a setback when the Minister of Education requested a revision of the draft policy, to focus on early education rather than the integrated ECD framework. Challenges of coordination with external stakeholders (such as other lines ministries) continued, which negatively affected the quality of ECD services. Scaling-up advocacy for improved coordination and for an integrated ECD policy framework will continue to be a priority in 2014. UNICEF support to various systems development programmes such as: ECE curriculum, materials development, ECE teacher training and caregiver package and development of a school-readiness assessment tool, has cumulatively contributed to improved services for children. Ninety-seven early childhood education teachers and caregivers received training, which resulted in improved skills in child-friendly teaching methodologies.

A total of 13,487 parents (5,457 males and 8,030 females) were reached with parenting messages, resulting in increased knowledge in care and support of children at the household level. Strategic partnerships with NGOs such as Save the Children, Plan International, DAPP and ZANEC have been effective in delivering the results obtained. In 2013 UNICEF concluded a partnership with ZANEC for advocacy and C4D around ECD, which will result in increased awareness, knowledge and action taken by communities and policymakers in support of ECD.

IR 4980/A0/04/810/003 100 Basic and Community Schools in selected districts have capacity to provide child friendly learning environment by 2013

Progress: Overall, at the national level dropout rates have shown marginal improvement, from 2.35 per cent (1.8 per cent males; 2.9 per cent females) in 2010 to 1.9 per cent (1.6 per cent males; 2.3 per cent females) in 2012. Student transition rates for grade 9-10, have increased nationally by 5.6 per cent, from 41.05 per cent (41.4 per cent males; 40.7 per cent females) at baseline to 46.7 per cent (46.5 males; 47 per cent females) in 2012. This signifies an increased capacity of the system to retain learners in schools and facilitate the transition to grade 10. However, the percentage of children with special education needs decreased marginally from 5.5 per cent (6 per cent males; 6.4 per cent females) to 4.5 per cent in 2012. UNICEF contributed to the improvement of access and retention through various quality improvement initiatives in partnership with stakeholders. As part of the continued efforts to provide a framework for quality improvement in Zambia, UNICEF supported the Ministry to develop comprehensive national quality standards. The standards are based on the child-friendly school (CFS) framework, care and support for teaching and learning framework and other existing MESVTEE standards and policy guidelines for quality improvement. Additionally in the period under review, 424 schools in 16 targeted districts (23 per cent of all schools in these districts) had increased capacity to implement a set of CFS standards through the roll-out of school level improvement plans benefitting over 212,000 learners. The SLIPs are aimed at improving school-community linkages, child participation and child-centred teaching methods. Some 2,000 learners in 25 schools in Petauke District benefited from the modelling of a comprehensive literacy improvement program (early grade reading and writing). Materials developed for this literacy model have been adopted by the Ministry of Education for use in the country wide roll-out of a new national curriculum in 2014.

IR 4980/A0/04/810/004 500 schools meet child friendly schools standards for provision of water and sanitation infrastructure and hygiene education in selected districts by 2015

Progress: Piloting of the interim WASH in Schools package was completed in two districts of Kapiri Mposhi and Mkushi where 12 schools were provided with 14 sanitation facilities and another seven schools were piloted for non-subsidised School-Led Total sanitation (SLTS) with no infrastructure. The facilities have been well accepted by the users and will be scaled up in over 1,000 schools across 43 rural districts. Ninety-two of the targeted 125 schools gained access to water facilities. In addition, 156 user-friendly latrines with hand-washing facilities at 82 schools were constructed, benefiting 40,600 pupils (19,982 girls and 20,618 boys). Hygiene education using SLTS was conducted in 144 schools, resulting in the formation of WASH clubs to spearhead sanitation and hygiene activities with community outreach activities. Some 58,452 pupils were reached with Health Education messages and encouraged to practice hand-washing with soap. A total of 4,000 leaflets on “A Guide to School Sanitation” were distributed in 62 schools in southern and central provinces during the reporting period. In order to raise awareness about hand-washing and WASH in emergencies, 45 copies of Raising Even More Clean Hands were distributed to the five District Education Board Secretary (DEBS) and seven partners; and 20 copies of “WASH for School Children in Emergencies” were distributed to DEBS in five districts. The pilot study on Menstrual Hygiene Management was completed in October 2013 in 15 schools and the draft report was presented to the partners in December 2013; recommendations from the pilot study will be used for a full-scale study planned for 2014 by the School WASH partners. Collection of data from School WASH interventions was initiated and is on-going with WASH partners. Until the interim WASH in Schools package was developed, scaling-up of WASH in Schools in Zambia was constrained due to limited funding from the Government and the high unit cost of constructing the latrines. Since the development and approval of the interim standards, scale-up and implementation of low-cost units and SLTS was initiated in over 450 schools for completion by March 2014.
also made good progress in development of Life Skills materials, particularly pupils’ and teachers’ books. The plan was to develop books for Grades 1-9, which was spread over the last few years. CDC is developing the last batch for Grades 8 & 9, and also developed IEC materials including seven posters and two brochures with messages on HIV prevention, drug abuse and gender. In addition, the pre-service Life Skills framework was finalised, the purpose of which is to ensure all pre-service teachers are equipped with skills to deliver life skills by the time they graduate. The Ministry also made progress towards a delivery model (video and guidelines), which is intended to respond to the gap in knowledge transfer from teacher to learner. Finally, partners are complementing Ministry efforts to enhance delivery of Life Skills and HIV and AIDS education mainly through peer-to-peer and sports/extra-curricular interventions; several partners place special emphasis on girls. However, persistently low levels of HIV knowledge and rising rates of pregnancies in schools point to a need to continuously monitor and assess interventions and scale up those proven to be working. While the result of equipping teachers with skills will be met, going forward, the focus must be on ensuring that all work with teachers results in effective delivery and ultimately, change in behaviour among learners.

On-track

**IR 4980/A0/04/810/006 Ministry of Education and partners at national, sub-national levels have capacity to meet CCC standards for education in emergencies including DRR by 2013**

**Progress:** The process of developing the education sector national and provincial emergency contingency preparedness plans was completed through stakeholders’ participation. This plan fed into the national Disaster Management and Mitigation Unit (DMMU) contingency planning. To strengthen capacity for disaster preparedness and prevention, the construction of the Malabo flood-resistant school in the Zambezi flood plains began in 2013 and embankments for two flood prone schools are being constructed. Training of stakeholders in education in emergencies and DRR was carried out through a partnership with the Save the Children in the flood-prone districts of western province. The Curriculum Development Centre reviewed the national curriculum and incorporated some elements of DRR and safety in the curriculum.

Constrained

**IR 4980/A0/04/810/007 By 2015, develop and strengthen multi-sectoral mechanisms at national and sub-national levels for prevention, care and protection of children, including in emergency situations.**

**Progress:** The review of the 2006 National Child Policy is almost complete and will contain Government’s vision and principles on national efforts needed for improving the lives of children. It will provide a basis for the development of a child protection (CP) system policy and framework. Strengthening coordination of stakeholders through the revitalisation of the OVC steering committee led to development of a draft Work Plan. The preparations for a VAC survey are being coordinated through this body. Traditional chiefs play an important role in communities and therefore, potentially, in the protection of children. Through support to MoCTA’s campaign to stop child marriage, UNICEF supported the Government to create a knowledge base on this form of abuse to inform future planning. Through engagement with MoCTA, chiefs are formally involved in child protection activities. Gender inequality underlies many child protection abuses. In order to develop an improved policy and legal framework UNICEF is supporting the review and revision of the Gender policy. UNICEF provided both technical and financial support to develop the national training manual for service providers dealing with GBV and VAC. Through a UN Joint Programme on protecting migrant children from trafficking and abuse, UNICEF will develop and roll out an information campaign. The programme as a whole will help strengthen the protection of children on the move and is geared towards implementing systemic changes. These results contributed to the Government’s objective to put in place a sustainable and comprehensive policy and implementation plan for a Child Protection system, including regulatory frameworks, service delivery systems, social change strategies and M&E capacity.

No progress was made in strengthening Government capacity in community-based care, as opposed to institutional care.

On-track

**IR 4980/A0/04/810/008 By 2014, Government and its civil society partners have the capacity to provide children affected by AIDS with appropriate social welfare and child protection services in selected districts**

**Progress:** Under this IR UNICEF is supporting the Government in modelling child protection systems at the district level. One of the shortcomings identified in the child protection systems mapping was weak coordination. This called for a more in-depth analysis of the current mechanisms for effective coordination at district level, needed to improve service delivery. As a first step UNICEF’s Child Protection section is working with the Social Policy section to include child protection skills into the capacity assessment of Community Welfare Assistance Committees, as well as the development of a training manual. Progress was made in strengthening the referral and response capacities of social welfare services in the area of violence against children, resulting in improved services (including legal) to victims of abuse. The One-Stop Centre model, including prevention and referral at community level through community groups, was extended to one more district and strengthened in two other districts. In preparation for the scale-up of the model to 10 more districts, UNICEF provided technical support for the training of 960 key stakeholders working in or with the Centres. To harmonise training a training manual was developed and printed by the MCDMCH. Together with Plan International and Save the Children International, UNICEF is building the capacity of the ChildLine as an easy accessible service for children. UNICEF support has focused on technical capacity strengthening of 30 ChildLine councillors as well as development of a referral directory. The councillors are now able to refer a child to a nearby service provider when needed. With regard to strengthening the alternative care system, progress was slow mainly due to shortcomings in funding. The minimum standards for child care facilities, which were developed in 2010, were finally reviewed by the Cabinet and validated in December.

On-track

**IR 4980/A0/04/810/009 By 2015, Government system has capacity to prevent and respond to children in contact with the law at all stages of the justice system**
**Progress:** UNICEF supports the Government in transforming the justice system to make it more responsive and accountable to the rights and needs of children by focusing on strengthening its data collection systems and building capacity of key stakeholders for improved coordination and monitoring of child justice activities.

To strengthen capacity for monitoring children in prison and correctional facility systems, UNICEF supported 15 representatives from key child justice institutions to attend a training workshop on the harmonisation of data collection tools and setting key indicators. They further participated in data collection and monitoring of children in prisons and other correctional facilities. The monitoring exercise found 113 boys and five girls in three children's correctional centres (Katombora Reformatory school, Nakambali Approved schools and the Insakwe Probation Hostels for girls). A total of 395 children (11 girls, 327 boys and 24 circumstantial children) were found in adult prisons. They were either serving a jail term, on trial, awaiting conveyance to the children’s facilities or incarcerated with their mothers. Too many children end up in the justice system for minor offences. Based on these findings and to support government efforts to prevent children from entering the justice system unnecessarily, UNICEF together with NGOs is providing technical and financial support to Government for the development of guidelines for bail applications and diversion models. Once finalised and implemented these will enable police and magistrates to divert children for easier processes and more diversion of children away from the justice system.

To inform the strategy for preventing child crime, UNICEF will support a study on the circumstances under which children come into conflict with the law. Technical support was given for the development of a TOR for the study by the Zambian Police Service. In the first half of 2013 support was given to inception visits in another five districts in order to scale-up the Child Justice Forums from 45 to 50 districts. Through the CJF, coordination on case management of child justice cases is strengthened and the time children spend in the justice system reduced. UNICEF’s advocacy contributed to raising the age of criminal responsibility in the draft Constitution from eight to 12 years. Advocacy is on-going to raise the age to 14 and to ensure that the social work system is strong enough to deal with children under 14 who commit serious offences.

**IR 4980/A0/04/810/010** By 2014, birth registration increased from 10 per cent to 50 per cent amongst under five age group and from 10 per cent to 30 per cent amongst 6-18 years

**Progress:** This IR aims at supporting the Government to strengthen the civil/birth registration system by putting in place policies, laws, services, structures and stimulating demand for birth registration. UNICEF supported the Government in developing a model for decentralised registration and reviewing the Births and Deaths Registration Act to fully allow for decentralisation of the issuance and certification of births. The overall goal of this collaboration with Government and other partners is to make birth registration services available and accessible at the community level, in order to reduce on both the time and cost for people to register their children. UNICEF supported the Ministry of Home Affairs in the establishment of 35 birth registration desks in health facilities of Luapula Province. A further 32 were established in Eastern Province. UNICEF also worked with the Ministry and convened a number of civil registration stakeholders meetings to come up with a coordination mechanism and national plan of action to contribute to the overall civil registration system. Through these initiatives a number of other cooperating partners, such as UNFPA, WHO and AFDB, have come on board, which has greatly assisted in leveraging both financial and human resources. Currently UNICEF and partners have provided technical and financial resources to the on-going national Civil Registration and Vital Statistics (CRVS) assessment, which will inform policy, legal, capacities and structural reforms.

The main challenge during the reporting period was the slow pace at which legal reforms are being implemented due to rigid and bureaucratic Government procedures involved. A low awareness level among communities on the importance of birth registration is another challenge, and UNICEF will prioritise this in the 2014/15 work plan.

**IR 4980/A0/04/810/012** IR 412 Project costs - Child Protection

**IR 4980/A0/04/810/013** IR 313 Project cost - Education

**IR 4980/A0/04/810/014** IR 302 Reduce out of school children aged 7-14 years nationally to 80,000 by 2015

**Progress:**

Available evidence indicates that the number of out-of-school children (OOSC) has increased from the baseline figures of 259,390 (96,260 males; 163,130 females) to 411,536 (170,971 males; 240,565 females), according to the 2012 Statistical Bulletin. This signifies that there has been no progress toward achieving the target at a national level. This could be attributed to inadequate national focus by MESVTEE and partners on how to bring OOSC back to school, by reducing dropouts and increasing retention. These gaps were addressed in the education Sector plan (2011 to 2015), which was finalised in March 2013 and included specific actions aimed at promoting retention and transition. In the period under review, evidence on OOSC (as documented in the Zambia Country Report 2013) was disseminated to the Education sector at the 2013 Joint Annual review. Through this high-level dissemination the issues affecting OOSC were highlighted and formed part of the discourse and key recommendations on addressing the barriers to education, especially for girls, as reflected in the aide memoire that was signed after the review by the Ministry Of Education, cooperating partners and civil society representatives. The aide memoire contains key priorities and actions for partners for the period 2013 to 2014. The Ministry of Education, with support from UNICEF, began the roll-out of school-level improvement plans in 400 schools in 16 targeted districts (22 per cent of all schools in these districts). Key components of the SLIP include bringing back the school-aged OOSC through school catchment mapping and community action. SLIPs are contributing to the CFS framework. Additionally, the MESVTEE, with support from UNICEF, as part of the efforts at bring back out of school children into school, NGOs such as FAWEZA and ZANECC with support from UNICEF undertook community mobilisation interventions such community sensitization, community action groups aimed at encouraging communities to support bringing back school age children to school and also monitor school attendance.
throughout the year.

**PC 3 - Policy advocacy and partnerships**

- **On-track**

**PCR 4980/A0/04/811** The rights of children, adolescents and women, especially the most vulnerable, are prioritised and inclusive in national policy, planning, monitoring and budgeting processes

**Progress:** In 2013 Zambia reviewed its Sixth National Development Plan. The strategic focus now puts emphasis on employment and job creation, rural development and inclusive growth. The revised SNDP carries a stand-alone chapter on Social Protection and Disability, reflecting a key policy priority of the Patriotic Front Government that bears high relevance to children. This was also reflected in the submission to Cabinet of a comprehensive National Social Protection Policy, which benefited from UNICEF technical advice and exposure to relevant international normative frameworks. The broad policy framework encompasses a (child) protection pillar, which lays a strong foundation for improved policy coherence and coordination of child-centred social protection programmes. Together with the on-going revision of the National Child Policy, the development of an Early Childhood Development Policy and the completion of key programmes in the fields of new-born health and nutrition, these measures substantiate the emergence of a robust social policy framework that is conducive to change for children.

The process of harmonising national laws with the Convention on the Rights of the Child (CRC), CEDAW and other international instruments continued, among others with the validating of a Children’s Code Bill, which includes several child-related laws. The Parliamentary Caucus on Children was supported by UNICEF to develop a four-year strategic plan, through which the capacity of Parliament will be strengthened to appraise child-related bills. Government submitted its 2nd, 3rd and 4th State Party report to the Committee on the Rights of the Child in Geneva, showing its commitment to the CRC and its implementation in Zambia. In terms of child-centred budget allocations, in 2013 the Government decided on an eight-fold increase in the budget for its social cash transfer programme. Expenditure on education in 2014 will represent slightly over 20 per cent of the budget, up 3 per cent from the 2013 budget. The allocation to the health sector decreased, from around 11 per cent to 10 per cent for 2014. These figures continue to hide inefficient intra-sector allocations, which need to be addressed through social budget analysis and dialogue. In addition, accountability for budget execution and effective and quality service delivery remains low and the Country Programme supports models that strengthen the role of rights-holders in the budget process.

The 2013 revision of the National Decentralisation Policy is generally considered as reflecting Government commitment to push forward this agenda. In fact, policy and programme implementation and monitoring at district level and below remains a bottleneck for achieving equitable access to basic social services. In various areas, the Country Programme is supporting the development of institutional, systems, and human resource capacity to address this. This includes building district-level management and situation analysis capacity in the WASH, Education, and Health & Nutrition sectors; introducing mobile technology-based approaches to monitoring; training policy makers and frontline service providers in several social sectors; and – at central level – supporting various sector Management Information Systems and the cross-sector ZAM-D database for situation and programme monitoring under the National Development Plan.

- **On-track**

**IR 4980/A0/04/811/001** Ministry of Finance (RDP) coordinates a strategic programme of research, analysis and evidence generation on the fulfilment of rights of vulnerable children and women by 2015

**Progress:** UNICEF continued to provide technical and financial support to the Ministry of Finance’s Research and Development programme (RDP) to coordinate and implement strategic research that is sensitive to the rights of vulnerable women and children. With UNICEF support, the RDP coordinated the update and analysis of the situation of women and children in Zambia (SitAn). Findings revealed that children are among the most affected by poverty. The analysis further revealed that among all those aged 0-18 years in Zambia, 65 per cent live in poverty and of those, 46 per cent live in extreme poverty. Knowledge gained from the SitAn was later used in the revision of the national development plan conducted by the MOF. National and subnational dissemination of the SitAn results is planned by the MOF for the beginning of the next year. The Ministry remains committed to strengthening public sector research and evaluation capacities; with support from UNICEF a training was conducted in October 2013 where research knowledge and skills of 18 government sector M&E staff were increased, The training not only increased public sector staff ability to manage research and evaluations, but it is expected that this training and subsequent capacity building efforts (such as UNICEF support to the development of a community of practice - COP); will be open to professionals who conduct evaluations as well as Government sectors commissioning and utilising evaluations. All of this will contribute to enhancing the culture of evidence-based programming and policy making for women and children in Zambia. Some challenges were experienced during the period under review, such as Government delay in the development of the COP due to unclear conceptualisation of the COP. To accelerate the development of the COP, UNICEF will in the first quarter of 2014, support the Ministry of Finance to rethink and re-strategize the development and operationalisation of the COP.

- **On-track**

**IR 4980/A0/04/811/002** Ministry of Finance, the National AIDS Council and Gender in Development Division (GIDD) to support and monitor the mainstreaming of HIV and gender into policy, planning and monitoring systems in key sectors under the SNDP by 2013

**Progress:** Government contribution to the ARV drug budget increased from 3 million in 2012 to 39.3 million (13 times increase) in 2013 to meet the increasing demand for more efficacious strategies to prevent and control HIV epidemic (including early treatment for all pregnant women - Option B+ - and for all children aged below 15 years). The Joint mid-term review of the National HIV/AIDS Strategic Framework (2011-2016) was completed and addressed children, adolescents and HIV response, with the participation of adolescents. More than 15,000 adolescents and youth (10-24 years, 43 per cent female and from all the 10 provinces) who are members of the “U-Report programme” shared their opinions on using mobile phone SMS, as well as on bottlenecks and solutions to increase utilisation of
HIV testing and counselling, voluntary medical male circumcision and condom use. Their recommendations "Voice of Youth" were presented at a high-level national event "National HIV Prevention Convention", attended by the Vice-President of Zambia. These recommendations informed the Convention's resolutions, as well as the first Report Card on Adolescents in Zambia that provides a cross-sectoral perspective on the situation of adolescents, HIV and its structural determinants.

**Progress:**

The year 2013 was characterised by two significant developments that moved forward the establishment of child- and HIV-sensitive social protection measures in Zambia. These were: 1) The eight-fold increase in the Government's budget allocation to the Social Cash Transfer programme, facilitating a scale-up from 65,000 recipients in 2013 to an estimated 189,000 recipients in 2014 and 2) The submission to Cabinet of the National Social Protection Policy and release of the Revised SNDP with a dedicated chapter on Social Protection and Disability – both laying a strong foundation for enhanced coherence, coordination, and financing of social protection interventions. UNICEF supported the Ministry of Community Development in its advocacy towards the Ministry of Finance and the Cabinet's Office for the budget increase, using the draft framework of the social protection policy and the preliminary findings from the Child Grant impact evaluation to make an investment case for effective pro-poor spending. UNICEF also coordinated technical assistance to the development of the National Social Protection Policy, ensuring exposure of the Technical Working Group to relevant international standards and policy documents in the region, facilitating provincial stakeholder consultations and technical assistance with the drafting of policy measures. Findings from the UNICEF-managed 24-month Child Grant impact survey revealed significant impacts, which can be attributed to the programme. These most notably include a reduction of the poverty gap (11 per cent), an increase in food security (8 per cent increase in the proportion of households having two or more meals per day), nutrition security (infant and young child feeding indicators up by 22 per cent), and a reduction in diarrhoea prevalence (4.9 per cent). In addition, the survey findings reveal significant productive impacts as well as strong local economy multiplier effects.

**Progress:**

In 2013, the Government decided to increase the budget allocation to the Social Cash Transfer programme from ZMW17.5 million (about US$3.5 million) in 2013 to ZMW150 million ZMW (about US$30 million) in the fiscal year 2014. This represents a significant eight-fold increase. Among the factors that influenced this budget decision, UNICEF contributed through making available in a timely manner the findings from a cash transfer impact evaluation that reveal their strong impact on poverty reduction. Also, in a move to seize political momentum around enhanced pro-poor spending following the removal of maize and fuel subsidies, UNICEF collaborated with the Ministry of Community Development and the World Bank to prepare cost and caseload scenarios for cash transfer expansion, and by using the framework of the draft social protection policy, to make the case for more effective and balanced pro-poor spending. In particular between social assistance (cash transfer) and fertiliser support. The Ministry of Finance was involved in conducting the analysis. Further, 2014 sector allocations to education and health increased by 3 and 1.5 per cent, respectively, bringing their respective shares in the overall budget to 17.5 per cent and 11.3 per cent. In terms of public expenditure tracking, no significant advancements were made in 2013. UNICEF prepared a new partnership with the NGO Civil Society for Poverty Reduction (CSPR) to conduct regular public expenditure tracking and service delivery monitoring exercises in 10 communities across 10 districts. Due to conflicting priorities, this new PCA could only start in December. Also in 2014, and in partnership with CSPR and the Platform for Social Protection, UNICEF aims to strengthen the social protection budget analysis to underpin a joint advocacy strategy for effective, balanced public spending across the four pillars of the newly adopted National Social Protection Policy.

**Progress:**

During the period under review, UNICEF supported the Government through the Zambian Law Development Commission and the Ministry of Justice in the on-going review of child-related laws, to bring them in line with the CRC and other international standards. Earlier the three bills focusing on correctional and criminal services, personal and social laws, economic and education laws drafted in 2012 were codified into a single Bill; the Children's Code Bill, in 2013 and subsequently validated. With regard to the submission of a combined 2nd, 3rd and 4th CRC State Party report, the Department of International law and Agreements, concerned with reporting in the Ministry of Justice, submitted the report to Geneva. UNICEF continued to work with the Parliamentary Caucus on Children (PCC) as an important partner for the promotion of children's rights. UNICEF supported the development of a four-year strategic plan by the PCC, which was launched in July 2013. A high-level meeting was organised by UNICEF to garner support for a process of strengthening the independent human rights institution for children.

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UNICEF Zambia’s advocacy work was highlighted through regular updates of the website, twitter and Facebook page plus media releases on important events such as the “A Promise Renewed” and launches of new vaccines, ending child marriages, Parliamentary Caucus of Children Strategic Plan, Child Health Week, and the Home Fortification programme. Significant numbers of donor visits were facilitated (Government of Norway and U.S., Dutch and German Natcoms) plus the Deputy Executive Director, with more coming before the end of the year. The donor visits contributed to raising funds for the CP. An advocacy kit was developed, which needs to be printed and distributed. All three daily papers and national TV and radio and community radio stations have carried several articles based on the advocacy efforts. By late in the year more than 50 articles had been published in the press. C4D continued its capacity building, training 100 journalists on how to report on new vaccines (PCV, MSD and HPV) and also on CLTS. UNICEF also trained 30 Education Section partners on C4D and how to apply it in their programme planning and implementation. Correct reporting was observed after the trainings and a number of articles were published. More than 30 partners in the education sector were trained in a combined C4D and material materials development skills, with draft IEC materials as outputs. More than 60 stakeholders, including the Department of National Registration, health sector and others, were trained to mobilise communities on birth registration in Luapula province and now manage their programmes well. C4D community engagements on safe water and sanitation are underway in two districts of Western Province. The “Brothers for Life” campaign, which combines mass media with interpersonal communication, is on-going, with a community-focussed roll-out planned for Mpika district in late 2013. All milestones are on track. However one challenge was the linkages between milestones and indicators; during the MTR recommendations were made to bring more logic and clarity. For example, no baseline data was prepared to assess the knowledge levels of journalists and general public on CRC and CEDAW.

**IR 4980/A0/04/811/304 Ministry of Finance, key sector ministries and selected local authorities collect, collate, analyze and disseminate disaggregated data relevant to children and women by 2013**

**Progress:** In order to make government statistics readily available to the public, government and academic institutions, UNICEF supported the Ministry of Finance to develop an implementation plan for the roll-out and operationalisation of “Zam-D”, which is a central database using Devinfo technology launched by the Government in 2012. It was designed to facilitate monitoring of MDG and national development indicators at sectoral and provincial levels. It is expected that operationalisation of the plan will enable Zam-D to serve as a dissemination tool as well as a tool for monitoring the revised Sixth National development plan and other Government frameworks, such as the Performance Assessment Framework (PAF). To kick start the roll-out of Zam –D, UNICEF supported the update of the database with 2010 census data, LCMS and data on all key performance indicators of the national development plan (ZNDP). As a result of increased capacity strengthening on Zam-D, the MOF is now ready to migrate the current Zam-D from the DevInfo 6 platform to the versatile Devinfo platform 7, which will make Zam-D more accessible and will facilitate the development and production of sub national data profiles and an informative dashboard. The dashboard will serve as an online resource and advocacy tool for the database while the profiles will contain, trend charts, maps all based on a rational set of core indicators from different sectors. Although major delays were experienced in rolling out the Zam-D as a result of conflicting priorities, such as the revision of the SNDP, the Ministry of Finance has an opportunity in 2014 to strengthen and institutionalise Zam-D within the government-wide M&E framework now under construction. It is anticipated that by 2014 Zam-D will represent the cornerstone of SNDP monitoring and lay a strong foundation for enhanced accountability and learning in relation to the delivery of key results.

**IR 4980/A0/04/811/305 DMMU and partners have capacity to plan, coordinate and respond to the rights of children and women affected by humanitarian crisis by 2013**

**Progress:** UNICEF continued to work closely with the Disaster Management and Mitigation Unit (DMMU) to provide technical support in the development of the annual contingency plans and disaster management framework for the country. and capacity building for decentralised coordination systems. UNICEF provided logistical and technical support to the Annual Vulnerability Assessment which showed low scale of flood-effects and number of cholera cases in the country. Support was also provided for data collection, supervision, analysis and reporting. Less than 500 cases of cholera were recorded countrywide in 2012, compared to an average of 7,000 in 2009 and 2010. The Lusaka District Commission’s Office was supported to conduct public awareness campaigns on epidemics in 20 primary schools targeting 150,000 children from communities often affected by cholera, typhoid and measles. Seventy-eight curriculum specialists and education planning officers increased their knowledge and capacity on Disaster Risk Reduction and ways to incorporate it into the national school curriculum currently under review. Planning Officers are expected to develop and implement district- and school-level DRR action plans. Nearly 40 participants from UNICEF, other UN agencies, Government and NGOs acquired skills on Emergency Risk-Informed Programming through training.

**PC 4 - Cross-sectoral costs**

**Progress:** An Annual Management Plan was prepared at the start of 2013, setting out the key priorities for the year for management, programme and operations. The AMP also captures the main oversight mechanisms. The CMT met periodically throughout the year, with the major focus being on the Mid-Term Review and the related update to the Country Programme Management Plan. Statutory committees were in place and functioning well throughout the year.

In support of the Mid-Term Review, the Office conducted an Office-wide Programme Policy and Procedure (PPP) training in the third quarter of 2013. The training built capacity of new staff and was a good refresher for existing staff members around the key principles of
programming. Key issues discussed included revision of the HACT framework and the revised results structure framework. The training was also helpful during the work process review undertaken immediately after the PPP training.

Following migration to VISION, Country Office transaction processes have stabilised, and in the course of 2013 the CMT explored ways of maximising benefits from VISION. The CO engaged DFAM to explore the possibilities of migrating to e-banking, given that VISION had the facility and could be programmed to support electronic banking. This was also in line with one of the 2011 audit recommendations by the Office of Internal Audit. DFAM responded positively and set up ‘S2B’ (the Standard Chartered Bank e-banking platform), which was operational by the 2nd quarter of 2013. This move has not only improved payment efficiency but also reduced bank reconciliation completion time by over 75 per cent, as we no longer have to manually upload the bank statement in VISION. This is done automatically as the bank processes transactions.

All other audit recommendations were closed, and the Office periodically reviewed to ensure that the actions taken were sustained.

**On-track**

| IR 4980/A0/04/800/001 IR801 - Governance and Systems-staffs in front offices, programme coordination, communication and ICT |

**Progress:** An Annual Management Plan was prepared at the start of 2013, setting out the key priorities for the year for management, programme and operations, and the main oversight mechanisms. The CMT met periodically throughout the year, with the major focus being on the Mid-Term Review and related update to the Country Programme Management Plan. Statutory committees were in place and functioning well throughout the year. An Annual Management Review was held at the end of the year, to review progress against the AMP priorities and to set out key areas for management focus in 2014. Although progress was made across all six management priorities, as a result of the Mid-Term Review and changes in all senior management positions during the year, there are still areas for further follow-up. These were integrated into the priorities for 2014. Following migration to VISION, the CO’s transaction processes have stabilised, and during 2013 the CMT explored ways of maximising benefits from VISION: work processes were reviewed and new licences are planned to enhance segregation of duties. All audit recommendations were closed, and the Office periodically reviews to ensure that the actions taken were sustained. During the year, the Office undertook improvements in ICT; changes in the ICT infrastructure and equipment resulted in increased power load, and a new high-capacity and reliable power backup system was installed to provide instant support in the event of power failure. There was also a marked improvement in Office communication facilities, such as the video and audio conferencing. ICT also successfully provided support to T4D initiatives such as Programme Mwana, Connecting Classrooms/Voices of Youth and Zambia U-Report.

**On-track**

| IR 4980/A0/04/800/002 IR802 - Financial Resources and Stewardship of Resources staffs - Staff learning and development cost - Staff safety and security |

**Progress:** The Zambia Country Office continued to improve on its contributions management, budget control and financial procedures with strict monitoring of expenditure, grant expiry and donor conditions. As a result 100 per cent of RR was utilised, and the Office ensured 100 per cent expenditure of all expiring grants in 2013. One grant extension was also requested and approved. The CO implemented e-banking by the second quarter of 2013, resulting in the automation of the bank statement upload. Electronic banking implementation has made payment processing efficient by reducing the turnaround time to within 24 hours after payments are received in Finance without queries. All Bank reconciliations were sent before the HQ deadline dates with work associated with bank reconciliation reduced by about 75 per cent. The CO also prioritised cash flow forecasting in the course of 2013, resulting in closing balances being within the acceptable bench mark of US$200,000 for the Country Office. The bank signatory panel was also kept up-to-date during the year and HQ was informed every time changes were made. A comprehensive Harmonised Approach to Cash Transfer (HACT) action plan was in place and staff from programme and operations participated in assurance/check activities. This was further supported by two dedicated HACT consultants. Micro-assessments for new partners were conducted. The outstanding Direct Cash Transfers (DCT) of nine months and more was 1 per cent, while six-to-nineteen months’ DCT outstanding stood at 8 per cent at the end of 2013. The Office has also maintained an up-to-date asset register throughout 2013. Supply support to programme was greatly enhanced during 2013 with total throughput for procurement of goods being US$2.9M. Supply unit also procured complex services through institutional contracts for evaluation, research, impact assessment, media buying, etc. for US$6.4M.

**On-track**

| IR 4980/A0/04/800/003 IR803 - Human Capacity Costs staffs - Administrative staffs- Supply & Logistics staffs - Office operating costs |

**Progress:**

The LLTC plan for 2013 focused on local group trainings that strive to enhance skills that will result in greater internal Office efficiency and a supportive work environment. In support of the Mid-Term Review, the Office conducted an office-wide PPP training in the third quarter of 2013. The training built capacity for new staff and was a good refresher for existing staff members around the key principles of programming. Key issues including the revision of the HACT framework and the revised results structure framework were discussed. The training was also helpful during the work process review undertaken immediately after the PPP training. Two sessions of the Managing Performance for Results for supervisees were conducted this year in addition to those conducted last year to enhance supervisory skills and encourage performance for all staff members. Furthermore, to strengthen staff capacities in the areas of M&E several brown bag lunches were organised by SPPME on all programme areas. These meetings created a forum to share information on a wide range of issues. Staff learning and development continued to receive high priority to strengthen staff skills to manage organisational changes. Due to sensitisation through Managing Performance for Results, with close follow-up, the HR unit realised 66 per cent PAS completion of part 2.1 in 2013 compared to 40 per cent in 2012. EPR training was facilitated by the Regional Security Advisor in the second quarter to increase security awareness and preparedness. “Caring for Us” works closely with both the Staff Association...
and management on key issues affecting staff wellbeing.
Effective Governance Structure

As Zambia is currently undergoing reforms aimed at improving its civil registration system, UNICEF Zambia supported a delegation comprising representatives from the Department of National Registration, Home Affairs Research and Information Department and UNICEF to take part in a one week Uganda study tour from 1-6 September 2013. The Zambian delegation joined 100 other participants from different countries. Organisers designed the Study Tour as a "South-to-South" learning experience and it served to enhance knowledge and provide input to current efforts in Zambia, especially on the integration of birth registration and the health sector. A number of lessons from the tour of health facilities in Uganda are being implemented in the on-going Zambian pilot, including procedures for registering children born in health facilities as well as ensuring that children born at home are registered during their subsequent visits to health facilities.

To prioritise Hygiene and Sanitation on the agenda of governments in the sub-region – taking into account the huge burden of stunting – in collaboration with African Ministers’ Council on Water and Sanitation, the World Bank Water and Sanitation Programme and Wateraid, UNICEF supported the Government to host the AfricaSan Southern African Sub-Regional Conference; 89 representatives from 10 countries, with 34 line ministry representatives and 58 delegates from international organisations, non-governmental and civil society organisations participated in this important event. The meeting provided an opportunity for countries to: (i) review progress on their Sanitation action plans, (ii) review progress on the eThekwini commitments, and (iii) engage in peer learning and knowledge-sharing with other countries in their region.

UNICEF will work with Government and other partners to strengthen the CRVS system through the use of technology similar to what the team learnt in Uganda. This will bring about efficiency in the registration system by connecting and linking provincial and district registration offices to the main server in Lusaka, which will, among other things, reduce on the physical movement of paper work. Furthermore national data compilation and disaggregation will also be simplified. The Ministry of Home Affairs has already procured the main server and what is remaining is to procure the necessary equipment for the district offices.

Strategic Risk Management

Risk Management

The Country Office updated its risk control library as part of the MTR process, with the intention to ensure all anticipated risks that have come with the increased budget in the second and third year of the current Country Programme are taken into account and mitigating measures put in place. This follows the rapid growth of the Zambia CO budget: a revision to the OR ceiling has been approved from US$83 million to US$123 million and the revised ceiling has already been exceeded by over 20 per cent. The risk assessment identified two areas as ‘high’ risk; eight as ‘medium to low’ risk and two were as ‘low to very low’ risk. The risk mitigation action plan was developed at the end of May 2013 and implementation is in progress. Further, the CMT recommended the development of a Country Office risk management strategy to ensure follow-up on the action plan and oversight by management.

In addition, the allocation of roles and responsibilities in VISION were reviewed to ensure effective segregation of duties and proper application of internal controls.

The Office also supported the implementation of the One UN macro- and micro-assessment plans. Progress at the inter-agency level has, however, been slow in part due to differences in levels of operations, the type of partners and funding modalities across agencies. The Country Office had to move forward with most HACT activities independently of the other UN agencies. The activities carried out in 2013 include periodic on-site reviews and programmatic monitoring. Scheduled audits are planned for the second quarter of 2014 as most PCAs are still on-going. No special audits have been commissioned so far.

Emergency Preparations

In order for UNICEF to respond in the shortest possible time during emergencies, LTAs for WASH supplies and
The BCP site was set up at the Country Representative’s residence. Internet is via a 4G service provider facilitating connection to UNICEF ICT core resources; that is, Lotus Notes via Inter-Notes, VISION via Citrix. There is however, consideration to setting up a Memorandum of Understanding with a UN agency at another location to have a full-fledged BCP site set up there, in line with recommendations made by the Regional Security Advisor following his visit and assessment in September 2013.

The last BCP simulation was conducted in April 2011 with the help of then Uganda ICT specialist Khalid Arbab. The constraints hampering proper BCP implementation were largely due to limited, unreliable and very expensive local ISP services.

ICT will support training for critical staff, especially for section chiefs to carry out transactions usually done by support staff, but further work is needed in 2014 with the full involvement of all sections to ensure preparedness to work under BCP conditions.

**Evaluation**

The 2013 IMEP was compiled based on the identified need for information as highlighted in the results matrices and the rolling work plans. The plan was approved by the Country Management Team based on the basic criteria of the value added for programme management and decision-makers by the identified research and evaluation areas. The Office continues to implement a rigorous process for ensuring that quality evaluations are conducted, including clearance by the CMT and several steps of quality check for terms of reference, protocols and recruitment of evaluators, including oversight by the Regional Office. The IMEP was updated and reviewed quarterly by CMT. In accordance with the MTR revised results matrices, the five-year IMEP is being updated to appropriately respond to identified data gaps and required information for programme planning and implementation.

The Country Office also initiated the development of Standard Operating Procedures (SOPs) for implementation of the IMEP. This SOP outlines the internal work process, procedures and standards for the planning, implementation, dissemination and use of IMEP activities (research and evaluations). The SOP encourages the design of utilisation-focused evaluations by emphasising that evaluation quality and identification of intended users, including dissemination plans and development of action plans in response to recommendations, are maintained as key factors, to make evaluations usable.

The Office therefore continues to make it a point to ensure that management responses are completed for each finalised evaluation within four weeks of its submission by the responsible programme section, discussed at CMT and signed by the Representative. Implementation of planned actions is reviewed at the mid-year and end-year reviews and actions taken are updated in the tracking system. In 2013 the Office developed an action plan for recommendations of the United Nations Joint programme on Human Trafficking, successfully completed in 2012. The activities in this management response are being monitored closely for closure on a quarterly basis by the CMT. This year the Office also cleared a backlog of actions for pending management responses from previous years, and is in the process of developing a management response for the just-completed evaluation of the impact of ‘Mama Kits’ on facility-level delivery.

UNICEF continues to work with the Ministry of Finance (MoF) and cooperating partners on statistics to strengthen national capacity for evaluation. The government has clearly identified in its revised Sixth National Development Plan that national capacity for evaluation needs to be enhanced, and dedicated a chapter of the plan for this. This is an opportunity to partner with Government to develop in-country capacity for quality evaluations. UNICEF plans in 2014 to ensure that there are certified officials (by the Institute of Economic and Social Research) in the area of evaluation in each key social sector. This will facilitate proper design and management of evaluations. Through the MoF, the community of practice on M&E will be strengthened and the role of the Zambia Evaluation Association streamlined.
Effective Use of Information and Communication Technology

During 2013 the Office undertook some changes and improvements in ICT. The changes in the ICT infrastructure and equipment resulted in increased power load, and with the office not spared from constant countrywide power outages, the existing power backup system was not adequate to sustain uninterrupted business operations. A new high-capacity, reliable power backup system was installed to provide instant support in the event of power failure. There was also a marked improvement in the communication facilities in the Office, such as video and audio conferencing as well as interactive equipment such as smart boards for easy delivery of presentations during meetings.

ICT has also successfully provided support to Technology for Development initiatives such as Programme Mwana, Connecting Classrooms/Voices of Youth and Zambia U-Report, an SMS-based innovation designed to revolutionise adolescent and youth participation in programming for HIV/AIDS, STIs and related issues.

The Office also ordered Wi-Fi equipment and plans to have the wireless network service installed before the end of the year to provide mobile user access to ICT resources, as well a platform for other innovations in the office.

Servers and laptops were configured to periodically receive updated security updates through an automated Windows Security Update Server (WSUS).

In a bid to initiate the One UN project, the Office is sharing bandwidth costs for the Internet backup link by using one service provider.

An ICT task force committee was also set up and Terms of Reference drawn. The purpose of this committee is to review, advise and make appropriate recommendations in the area of ICT to the CMT.

While basic ICT infrastructure for remote access of UNICEF core ICT resources was set up at the Representative’s residence using a 4G service provider, there are still areas of improvement to make the location a fully equipped alternative BCP site. Simulations have not been done since 2011, and BCP documents need updating following significant staff changes since then. Plans are also underway to set up an MOU with another UN urgency located elsewhere in the city for a BCP site. There is also need to sensitize staff on the importance of involvement and participation in the BCP exercises.

Fund-raising and Donor Relations

In 2013, ZCO efficaciously observed the importance of timeliness in donor reporting: 46 reports out of 48 due in 2013 were submitted on time, representing 96 per cent of donor reports. Regular alerts and internal deadlines for donor reports devised by the CO contributed to timeliness in submission. The intention in 2014 is to reach 100 per cent of timely submission. The technical and financial review process in place contributed to improved quality of reporting. Donor feedbacks and ZCO adherence to PARMO requirements continued to prove useful in improving expected quality reporting standards. In 2014, the donor review process will be reviewed, training on professional writing skills and results reporting, which could not take place in 2013 will be a priority for next year, with the aim of further improving reporting on results for children.

ZCO successfully achieved 100 per cent utilisation rate for all grants that expired during the reporting period, a record that the Office intends to uphold. Grant management for optimal utilisation of resources will be reinforced in 2014 to sustain this record.

The positive trend in fund-raising that commenced in the second half of 2011 continued into 2012 and 2013. The cumulative total of resources mobilised at the time of reporting is estimated at US$152,975,383.89, exceeding the new CPD figures of US$123,765,000 approved in 2012 by about 24 per cent. Of this total, an estimated US$66,297,978 was raised in 2013.

In the Health and Nutrition sector, ZCO received US$56 million in funding from the EU to focus on the
implementation of MDG 4 and 5 initiatives. From 2014 onwards, ZCO will aim to extend partnerships in the field of Nutrition (DFID, Irish Aid, NatComs) to mobilise additional funds. Until 2015, a substantial Sanitation and Hygiene Grant from DFID (US$30 million) will be utilised. With this in mind, ZCO intends to extend partnerships with the German and Netherlands governments in the Water sector, ending in 2014. In the social protection sector, collaboration with DFID, the Government of Finland and Irish Aid will continue, with the aim to extend agreements to 2016. In view of a significant increase in the 2014-2016 Government cash transfer budget, increased technical assistance funds are expected to be channelled through UNICEF. Whilst ZCO aims to capitalise on a number of on-going HIV prevention initiatives with possibilities for more structural fund raising, the funding outlook in the Education sector requires attention, particularly beyond 2014. Although Child Protection remains a difficult field for attracting donors, the Office will systematically make the connection with social protection, to focusing on areas of concern like violence against girls.

From 2014 onwards, focus will be on effective implementation, quality donor reporting, and mobilising funds for programme components that are less well-funded. ZCO will update its Fund Mobilisation Strategy to address funding uncertainties at the global and country levels.

Six Natcoms were hosted with a focus on documenting the success of interventions in health, education, social protection and WASH. The visits resulted in financial contributions towards achieving results for children.

Management of Financial and Other Assets

In 2013 ZCO continued to improve on its contributions management, budget control and financial procedures, with strict monitoring of expenditure, grant expiry and donor conditions. As a result 100 per cent of RR was utilised and the Office also ensured 100 per cent expenditure of all the expiring grants in 2013. One grant extension was requested and approved.

More VISON licenses were acquired to further ensure segregation of duties in the Office and strict adherence to the internal control policy. The Office also embarked on reviewing work processes in 2013 to make programme implementation efficient and effective. The review exercise involved all key staff from programme and operations to ensure ownership and wider consultation, participation and feedback before finalisation.

The CO implemented e-banking by the second quarter of 2013 and this resulted in the automation of the bank statement upload. Electronic banking implementation has made payment processing efficient by reducing the turnaround time to within 24 hours after payments are received in Finance without queries. All bank reconciliations were sent before the HQ deadline dates, with work associated with bank reconciliation reduced by about 75 per cent.

The CO also prioritised Cash Flow forecasting in the course of 2013, resulting in closing balances being within the acceptable bench mark of US$200,000 for the Country Office; however, challenges were faced as a result of the low exchange rate offered by our house bank, which resulted in the a request for local currency from HQ. In September the bank used by HQ was not able to deliver the local currency on time, resulting in some payments, especially DCTs, being carried over to October 2013 instead of being paid in September 2013 hence distorting our forecasts/bank optimisation reports. The bank signatory panel was also kept up-to-date during the year and HQ was informed every time changes were made.

A comprehensive HACT action plan was in place and staff from programme and operations participated in assurance/spot checks activities, with further support by two dedicated HACT consultants. Micro-assessments for new partners were conducted and continue as and when new partners come on board. Scheduled audits are planned for 2014 as most PCAs will be coming to an end in the second quarter. The outstanding DCT of nine months or more is 1 per cent, while six-to-nine months DCT outstanding stood at 8 per cent at the end of 2013.

The Office has also maintained an up-to-date asset register throughout 2013. With the migration of the fixed assets to VISION and introduction of IPSAS, a concerted effort was made to ensure adherence to policy and monitoring of attractive items. One physical count was completed and the asset register reconciled.
Supply Management

Supply support to programmes was greatly enhanced during 2013, with total throughput for procurement of goods being US$2.9M. Supply unit also procured complex services through institutional contracts for evaluation, research, impact assessment, media buying, etc. for US$6.4M. During the rainy season, when cholera can be a challenge, Supply procured emergency WASH supplies and advocacy material to respond to an eventual emergency.

Supply renewed/established LTAs for goods and services that are repeatedly procured and are strategic inputs for UNICEF programmes; roughly US$1.4M were procured through LTAs.

While there were minor delays, supplies were received from local and offshore suppliers in time to meet programme requirements. Challenges include the fact that most of the commodities are imported either from South Africa or from the East. Additionally, supplies have to cross at least one other country before reaching landlocked Zambia.

Local markets are growing and the Supply unit conducts regular market surveys to update supplier profiles. A database model is being developed to capture basic supplier information.

In-Kind assistance of Mebendazole and Vitamin A were received, totalling US$135,000. These were distributed through Government channels during Child Health Week campaigns.

Strategic support continued to both the Government under procurement services and UNDP through procurements from the Global Fund. UNDP and WFP are also procuring services through UNICEF-established LTAs for printing, clearing and forwarding.

Supply unit is working with the Ministry of Health and other cooperating partners in the rollout of the Essential Medicines Logistics Improvement Programme. UNICEF, in collaboration with DfID, is also piloting the Enhanced Zambia Inventory Control System. The project will facilitate the implementation of an integrated supply chain information system that will guarantee access to reports for stakeholders, shortened order turn-around time and accurate data for quantification and procurement planning, through a Digital Information System that will transfer stock card data digitally (through mobile technologies and internet transmission) from the health facilities to Medical Stores Limited.

With the immense increase in the supply component in 2013 and the Government not fully geared up to take on the role of clearing and distribution, UNICEF provided significant support in this area. Currently, the Office is not managing a warehouse; all supplies are directly handed over to the implementing partners. Goods procured for the health sector are directly delivered to the Government-run Medical Stores, from where further distributions are managed to the final destinations and end-users. Pre-positioned supplies are also stored in Government warehouses with the Disaster Management and Mitigation Unit reporting to the Vice President’s office

End-user monitoring was conducted in conjunction with the Programme section, but there is a need to further strengthen it. Contracts for drilling and supervision of 799 boreholes for approx. US$6.2m established in 2012 were ongoing this year, and Supply continued to support WASH on aspects related to contract management.

Supply Division continued to provide oversight and guidance, especially in the procurement of health-related products such as vaccines, cold chain equipment and nutrition products.

Human Resources

The Office continued its efforts to strengthen the management and development of human resources, in line with global strategic direction. Systems and processes were strengthened to ensure speedy recruitment of competent staff in the shortest possible lead time, establishing a staffing mix in terms of profiles, gender parity and geographical mix. Selection panels and CRB functioned smoothly, and necessary orientations were provided to the members as well as other key staff to ensure that selection policies and procedures are fully understood and implemented accordingly. HR Unit provided effective support to efficiently manage staff selection using competency-based techniques, appointments and promotions, benefits, career development,
training, talent and performance-management.

Among the many focus areas was recruitment, which was at its peak in 2013 with the high staff turn-over. The year recorded an increase in vacant positions as a result of the high exodus of IP staff, including a major shift in management, with all three top senior management positions becoming vacant in a space of three months and being filled with new staff during the same year. Recruitments completed included critical positions, that is, the Representative, Deputy Representative, Chief of Operations, Chief of Education, Supply and Logistics Specialist and C4D Specialist positions. Due to new EU funds (MDGi), six positions were created through May 2013 mailpoll which added the number of recruitment cases.

The LLTC plan for 2013 focused on local group trainings that strive to enhance skills that will result in greater internal efficiency and a supportive work environment. Two sessions of the Managing Performance for Results for supervisees were conducted this year in addition to those conducted last year to enhance supervisory skills and encourage good performance by all staff members. Furthermore, to strengthen staff capacities in the areas of M&E, several brown bag lunches were organised by the SPPME on all programme areas. These meetings created a forum to share information on a wide range of issues. Staff learning and development continued to receive high priority to strengthen staff skills to manage organisational changes.

Due to the sensitisation through the MP4R, with close follow-up, the HR unit realized 66 per cent PAS completion of part 2.1 in 2013, compared to 40 per cent in 2012. EPR training was facilitated by the Regional Security Advisor during the second-quarter to increase security awareness and preparedness. “Caring for Us” works closely with both the Staff Association and management on key issues affecting staff wellbeing.

The Staff Association continued programmes aimed at addressing some of findings from the 2011 Global Staff Survey. The Office scored lowest on biased/prejudiced treatment. As a follow-up, the Country Representative held several meetings with different categories of staff to provide an avenue of open communication on issues of concern. Some of the good practices of Office governance continued in the year, which provided avenues for staff-management engagement. Three JCC meetings were held and nine CMT meetings were held. These forums provided opportunities for sharing of concerns from both management and staff.

### Efficiency Gains and Cost Savings

Significant economies of scales were achieved through UNICEF’s membership in the local Operational Management Team and Common Premises Administrative Team and its participation in Delivering as One) projects, and thereby benefiting from common LTAs: duty-free fuel, common conference rooms, provision of rent-free offices, security, building maintenance, repairs and maintenance of equipment and motor vehicles etc. There were further efficiency gains due to reduction in staff time to evaluate bids, contract negotiation awarding of contracts and so on. The Zambia Country Office is housed at the UN House, which involves several cost-sharing mechanisms. An estimated sum of US$154,000 was saved on the provision of rent-free offices by UN Common Services.

All supplies purchased locally were wholly exempt from 16 per cent VAT as stipulated in the BCA; all supplies procured abroad through Supply Division were also exempt from all import duties. This translated into significant savings for the Country Office for the year 2013. For example, UNICEF Zambia made savings on VAT for vehicle repairs and maintenance amounting to an estimated US$25,000.

International Travel was also kept to a minimum and only for events/trainings that were absolutely necessary and would benefit other staff members as well. All those that were trained were required to train others upon their return. The vehicle fleet was maintained at the same level, but with effective repairs and maintenance, thus significant savings were made in this area as well. A well-maintained fleet costs much less in repairs and maintenance than a poorly maintained one.

The Country Office runs projects in many parts of the country, requiring significant road travel as ZCO has no sub-offices. To carry out monitoring visits, pool vehicles are used and due to the bad roads the vehicles must be in very good condition to get there safely. This is achieved by maintaining a well-serviced and properly functioning vehicle fleet so that all projects are monitored in a timely and effective fashion, to inform
programming. There are limited flight options to these areas. In some practical instances, three to four staff members used the same vehicle to a common destination, saving around $1,000.00 in fuel and DSA costs per trip.

**Changes in AMP & CPMP**

The Mid-Term Management Review (MTMR) made some proposals for adjustment to the Country Programme Management Plan for the remaining period, through December 2015. The recommendations aimed at improvements in management practices for better programme outcomes. The overall staffing structure was reviewed in line with the priorities of the current Country Programme, to which the following adjustments have been recommended in the MTMR, in light of opportunities, constraints and lessons learnt:

- Abolishment of seven positions/creation of eight positions in the area of programme/operations to effectively implement and monitor programme activities;
- Changes in reporting line of eight positions to ensure distribution of responsibilities and accountabilities at various supervisory levels of professional staff;
- Conversion of three positions from OR to RR to achieve consistency in funding such positions.

Due to changes in senior management (Representative, Deputy Representative and Chief of Operations), and based on the Regional Office’s recommendations, the submission of MTR/MTMR was delayed until late October 2013. Hence, the above proposals will be effective only as of 1 January 2014.

The Office will have to review some functions of programme officers/assistants to align their roles in VISION and re-distribution of responsibilities. However, this will not make any impact on MTMR proposals.

Both Work processes and VISION Roles will be reviewed and aligned in VISION to streamline the work processes and avoid conflicting roles in VISION.

**Summary Notes and Acronyms**

**Acronyms**

AMP - Annual Management Plan  
ANC – Ante-natal Care  
APR - A Promise Renewed  
AWPs - Annual Work Plans  
BCA - Basic Cooperation Agreement  
BCP - Business Continuity Plan  
C4D - Communication for Development  
CAP - Country Assessment Plan  
CCC - Core Commitment for Children  
CD - Country Document  
CEDAW - Convention on the Elimination of all forms of Discrimination Against Women  
CHWs - Community health workers  
CLTS – Community-Led Total Sanitation  
CMT - Consultative Management Team  
COAR - Country Office Annual Report  
CPAT - Common Premises Administrative Team  
CPD - Country Programme Document  
CPMP - Country Programme Management Plan  
CRC - Convention on the Rights of the Child  
DaO - Delivering as One  
DCT - Direct Cash Transfer  
DDCCs - District Development Coordinating Committees  
DED - Deputy Executive Director  
DFAM - Division of Finance & Administrative Management
UNRAED
VAC – Violence against Children
VAT - Value Added Tax
VMMC - Voluntary Medical Male Circumcision
WSUS - Windows Security Update Server
YCSD - Young Child Survival and Development
ZCO - Zambia Country Office
ZICT - Zambia Information Communication Technology

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**Document Centre**

**Evaluation**

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<tr>
<th>Title</th>
<th>Sequence Number</th>
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<tr>
<td>1 A baseline assessment on grade 1 and 2 literacy skills in Petauke and Katete districts in the eastern province</td>
<td>2013/002</td>
<td>Survey</td>
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<tr>
<td>2 Assessment of targeting mechanisms under the Social Protection Expansion Programme</td>
<td>2013/003</td>
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<tr>
<td>3 Formative research on C4D and health (knowledge and practices on key area of health and nutrition, barriers to health seeking behaviour, communication assessment)</td>
<td>2013/004</td>
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4 Survey for monitoring of Brothers for Life campaign through focus group discussions and self-administered questionnaire with selected groups 2013/001 Survey

Lessons Learned

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<td>1 Scaling-up of the flagship Hygiene and Sanitation Program to meet the objective of reaching 3 million new users of improved sanitation and practising hand washing with soap/with ashes by the end of 2015</td>
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