United Nations Children’s Fund
Executive Board
Annual session 2005
6-10 June 2005
Item 5 of the provisional agenda*

Draft country programme document**

Viet Nam

Summary

The Executive Director presents the draft country programme document for Viet Nam for discussion and comments. The Executive Board is requested to approve the aggregate indicative budget of $20,000,000 from regular resources, subject to the availability of funds, and $63,800,000 in other resources, subject to the availability of specific-purpose contributions, for the period 2006 to 2010.

** In accordance with Executive Board decision 2002/4 (E/ICEF/2002/8), the present document will be revised and posted on the UNICEF website in October 2005, together with the summary results matrix. It will then be approved by the Executive Board at its first regular session of 2006.
Basic data†
(2003 unless otherwise stated)

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<table>
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<tbody>
<tr>
<td>Child population (millions, under 18 years)</td>
<td>30.6</td>
</tr>
<tr>
<td>U5MR (per 1,000 live births)</td>
<td>23</td>
</tr>
<tr>
<td>Underweight (% moderate and severe, 2002)</td>
<td>30</td>
</tr>
<tr>
<td>Maternal mortality ratio (per 100,000 live births, 2000/2001)</td>
<td>170</td>
</tr>
<tr>
<td>Primary school enrolment (% net, male/female, 2000/2001)</td>
<td>98/92</td>
</tr>
<tr>
<td>Primary school children reaching grade 5  (% , 2000/2001)</td>
<td>89</td>
</tr>
<tr>
<td>Use of improved drinking water sources (%)</td>
<td>73</td>
</tr>
<tr>
<td>Adult HIV prevalence rate (%) end-2003</td>
<td>0.4</td>
</tr>
<tr>
<td>Child work (% children 5-14 years old)</td>
<td>23</td>
</tr>
<tr>
<td>GNI per capita (US$)</td>
<td>480</td>
</tr>
<tr>
<td>One-year-olds immunized against DPT3 (%)</td>
<td>99</td>
</tr>
<tr>
<td>One-year-olds immunized against measles (%)</td>
<td>93</td>
</tr>
</tbody>
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† More comprehensive country data on children and women is available at www.unicef.org.

The situation of children and women

1. The situation of women and children in Viet Nam is determined by the country’s social and political reform process, called “Doi moi” (renovation), which has generated economic growth rates between 7 and 9 per cent per year over the past 10 to 15 years. Alongside this, the Government’s remarkable commitment to improving the situation of children and women has achieved a halving of poverty, significant reductions in the under-five mortality rate (U5MR) and malnutrition, and high levels of primary education enrolment, with universal lower-secondary education envisaged by 2010. Viet Nam ratified both Optional Protocols to the Convention on the Rights of the Child in 2001 and has shown strong commitment to the Millennium Development Goals.

2. Unfinished social agenda. New opportunities and economic benefits have markedly improved the lives of the majority, but have not been enjoyed equally by all, particularly the poorest. Twenty-nine per cent of the population remains below the poverty line, and growing geographic and economic disparities particularly affect poor children and women, including those from ethnic minorities, and in remote and mountainous areas.

3. U5MR is 23 per 1,000 live births but markedly higher in ethnic minority provinces. Approximately half of all child deaths occur in the first month of life. Maternal mortality is 170 per 100,000 live births but, again, higher in remote and mountainous areas. While 82.5 per cent of households use adequately iodized salt, and vitamin A supplementation coverage is high, 30 per cent of children under five are malnourished, and some ethnic minority areas have under-five malnutrition rates of around 40 per cent. Only 67 per cent of the rural population had access to safe water in 2002; access to clean water and sanitation, for the top 12 provinces was 77 and 75 per cent, respectively, but was 28 and 13 per cent in the bottom 12 provinces, primarily remote and mountainous provinces. Adding to water-quality concerns is the association of low coverage for clean water and sanitation with stunting and
diarrhoea as well as arsenic and fluoride contamination of ground water, particularly in the Red River Delta. Despite net primary enrolment of 96 per cent, only 89 per cent of children reach grade 5, with gender gaps pronounced at the subnational level. Many remote and mountainous areas, including ethnic minority areas, have lower rates of enrolment and coverage of water and sanitation (WES) facilities; for example, several ethnic minority groups have primary enrolment rates between 40 and 70 per cent, and lower-secondary enrolment below 20 per cent, with almost one third of schools in these areas lacking safe water supply and more than half lacking adequate sanitation facilities.

4. **Emerging agenda.** Rapid change has generated new challenges. The Viet Nam Multi-Injury Survey showed that nearly 75 per cent of deaths of youths and children over one were due to injury, a fact that brings a new perspective to child mortality and morbidity. Primary causes include drowning and traffic accidents.

5. Adolescents and young people now make up almost 30 per cent of the population, a figure representing a significant demographic change and explaining the increased demand for higher education, employment and opportunities for participation and leisure for these age groups, as well as for protection from drug abuse and conflict with the law. Socio-economic stress on families and the effects of rural-to-urban migration have provoked new social problems, including homelessness, drug abuse, sexual and economic exploitation, trafficking, violence and suicide. There are 2.5 million children in need of special protection, including more than 150,000 orphans, 1.2 million children with disabilities, 16,000 children who live or work on the street, 8,500 children infected with HIV/AIDS and 23,000 child labourers.

6. HIV/AIDS threatens children and youth as well as the country’s broader socio-economic development, with prevalence among 15- to 49-year-olds at 0.4 per cent and over 1 per cent among pregnant women in at least four provinces. People 10-19 and 20-29 years of age account for 8.3 and 62 per cent of infections, respectively. Addressing youth issues will be the key to an effective response.

7. **Emergencies.** Climate change models predict that Viet Nam will remain among the world’s top-ten countries prone to disaster from typhoons, storms, floods, droughts, mudslides, forest fires and saltwater intrusion. Between 1994 and 2004, floods and storms alone resulted in 7,537 deaths as well as the destruction of 11,764 boats and ships and 395,202 houses. Droughts are becoming increasingly common in a number of northern and central provinces. Annually, more than 1 million people living either below or just above the poverty line need emergency relief. Increasing urbanization, industrialization, and changing land-use patterns increase the risk of new types of disasters if these changes are not properly managed.

8. **State environment.** Viet Nam is strengthening the rule of law. The enhanced role of the National Assembly and People’s Councils in law-making and Government oversight provides an opportunity to further institutionalize the rights of children and women. World Trade Organization accession is expected by end-2005, an event that could potentially increase per capita income but also have negative effects on very poor rural households; social safety nets will need to respond. Socio-economic development plans for 2006-2010 will raise issues of social equity and quality of social services. Ongoing national poverty-reduction efforts will need strengthening to reach poor and vulnerable groups more effectively. Government plans to increase the engagement of private-sector
providers and cost recovery from citizens for basic social services through direct and indirect user fees risk undermining poverty-reduction efforts and could lead to the creation of a two-tier system if not properly implemented.

9. Viet Nam’s institutional environment is decentralizing, with provincial authorities receiving lump-sum budgets and having exercised autonomy in budget allocation since 2004. However, subnational capacity and funding levels need to be increased and strengthened.

10. Committee on the Rights of the Child. While commending the Government’s progress on children’s rights, particularly social and economic rights, the Committee’s 2003 review of the Second Report of the Government of Viet Nam focused on vulnerable children, including ethnic minority children, as well as legal reform and juvenile justice and growing disparities. The Committee recommended a human rights-based approach to programming. It also suggested better monitoring of children’s rights and the establishment of “independent and effective mechanisms to monitor the promotion and protection of children’s rights”. The Committee highlighted the important role of civil society and growing problems of child protection, proposing the development of a comprehensive family policy, including the establishment of a professionalized system of social workers.

Key results and lessons learned from previous cooperation, 2001-2005

Key results achieved

11. Laws and Policies. UNICEF provided assistance to the Government in its reporting under international human rights treaties and in its harmonizing national legislation with international standards in many key areas, and provided technical support for National Plans of Action and Government decrees. In close partnership with the Asian Development Bank, the United Nations Development Programme and the World Bank, UNICEF successfully contributed to bringing greater attention to children’s and women’s rights in key policy processes, including the Poverty Reduction Strategy Paper (PRSP) and other poverty-reduction plans and programmes. UNICEF also supported development of sectoral policies in health, injury prevention, water, family policy and education. UNICEF facilitation of cross-border cooperation between Viet Nam and China on the trafficking of women and children led to ongoing dialogue and joint programming. UNICEF also promoted policies on children affected by HIV/AIDS and on child protection.

12. Service delivery and model development. UNICEF contributed to increasing birth registration, from 72 per cent in 1999 to 95 per cent in 2004 and in bringing immunization coverage of measles to 99 per cent for children between 9 months and 10 years of age, reducing measles cases from 13,475 in 1999 to 2,297 in 2003.

13. Several pilot models, including on prevention of mother-to-child transmission (PMTCT) of HIV, childhood injury prevention, primary environmental care, child-friendly learning environments and healthy-living life skills education, have been developed. Many have been taken to scale or have influenced policies. These include (a) guidelines on WES incorporated into the Prime Minister’s Decision on supporting production-land, housing-land, houses and clean water for disadvantaged households of ethnic minorities; (b) healthy living and life skills components,
expected to be incorporated into the national curriculum; and (c) core curricula on social work approved by the Government. UNICEF also introduced the Regional Buddhist Leadership Initiative in Viet Nam to strengthen community-based prevention and care for families living with HIV/AIDS.

14. **Research and monitoring.** Indicators for the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women were developed and mainstreamed into regular government statistics. The recently established National Statistical Information System includes new indicators, among which are repetition rates, malnutrition rates for under-fives and the proportion of births at health institutions, disaggregated by age. Research on the impact of health and education policies on ethnic minority children helped to highlight these issues in national development planning. The analysis of human rights-based programming in Viet Nam that UNICEF carried out helped to raise awareness about rights and enabled a rights-based Common Country Assessment (CCA)/United Nations Development Assistance Framework (UNDAF). UNICEF supported innovative national surveys on emerging issues, such as the Viet Nam Multi-Injury Survey, the first National Youth Survey and the first National Family Survey as well as studies on Knowledge, Attitudes and Practices in health and nutrition, WES, injury prevention and landmines and education. Systems and tools for local monitoring were developed for health care and nutrition services, WES and education.

15. **Emergencies.** UNICEF has mainstreamed disaster preparedness and response activities into regular programmes and has coordinated these through an internal office task force. The funds used have been regular resources and limited other resources mobilized after flash floods in central Viet Nam for preparedness and response activities in the Mekong Delta, which is affected by recurrent floods. Response items included emergency health kits, school supplies and water filters. Information-sharing and coordination with other United Nations agencies, international non-governmental organizations (NGOs) and UNICEF regional and headquarters offices has been strong.

**Lessons learned**

16. The mid-term review (MTR) of the country programme called for improved knowledge and information management at all levels. While the availability and quality of data on women and children have improved, capacities remain inadequate for data analysis and employment in policy, legislative development and monitoring and evaluation. Counterparts and UNICEF have gained valuable experience in local planning, poverty reduction, participation — including child and adolescent participation — the monitoring of child rights and reaching hard-to-reach groups, with much of the knowledge gained made available to decision makers and policy makers in assessments and evaluations. However, UNICEF projects have achieved minimal convergence of basic services and have failed to link projects closely to local government plans, particularly at the provincial level. In some cases, shortfalls of matching government funds and low counterpart planning and implementation capacity hampered implementation. These linkages and capacities need to be improved. Capacity-building for effective behaviour-change communication remains an essential element for success.
The country programme 2006-2010

Summary budget table

<table>
<thead>
<tr>
<th>Programme</th>
<th>Regular resources</th>
<th>Other resources</th>
<th>Total</th>
</tr>
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<tbody>
<tr>
<td>Health and nutrition</td>
<td>3,220</td>
<td>10,500</td>
<td>13,720</td>
</tr>
<tr>
<td>Water, environment and sanitation</td>
<td>1,820</td>
<td>9,000</td>
<td>10,820</td>
</tr>
<tr>
<td>Childhood injury prevention</td>
<td>700</td>
<td>7,500</td>
<td>8,200</td>
</tr>
<tr>
<td>Education</td>
<td>2,240</td>
<td>9,500</td>
<td>11,740</td>
</tr>
<tr>
<td>Child protection</td>
<td>1,960</td>
<td>7,500</td>
<td>9,460</td>
</tr>
<tr>
<td>Provincial child-friendly programme</td>
<td>4,460</td>
<td>17,650</td>
<td>22,110</td>
</tr>
<tr>
<td>Planning and social policy</td>
<td>2,300</td>
<td>2,150</td>
<td>4,450</td>
</tr>
<tr>
<td>Cross-sectoral costs</td>
<td>3,300</td>
<td>0</td>
<td>3,300</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>20,000</strong></td>
<td><strong>63,800</strong></td>
<td><strong>83,800</strong></td>
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Preparation process

17. The new country programme of cooperation was developed based on the MTR, alongside the CCA/UNDAF and the 2006-2010 Socio-Economic Development Plan. A Joint Strategy Meeting, attended by United Nations agencies and the Government in March 2005, endorsed the proposed programme of cooperation.

18. Various consultations were held with government counterparts, the National Assembly and mass organizations under the leadership of the Ministry of Planning and Investment. Counterparts requested support in areas including knowledge management, behaviour-change communication, family policy and subnational capacity-building. Given the small share of official development assistance for UNICEF, the multilateral nature of the organization’s support and the 30 years of UNICEF experience in the country, as well as its relationship with the Government, UNICEF and the Government agreed that technical contributions for law and policy development, standard-setting, knowledge management and coordination for certain areas of donor support should become a stronger focus, and that UNICEF support to service delivery should concentrate in selected provinces and be linked to that of provincial authorities.

Goals, key results and strategies

19. The overall goal of the programme of cooperation 2006-2010 is to protect and fulfil the rights of children and women within national reform processes and increased international integration, through (a) poverty reduction, particularly for vulnerable children and women; (b) the response to challenges arising from modernization; and (c) stronger subnational socio-economic policies and programmes that are child- and women-friendly. Agreed expected results for 2010 were the following: (a) national laws and policies for children and women consistent with international standards and commitments; (b) an increased impact of National Targeted Programmes for vulnerable children, including those of ethnic minorities; (c) systems of monitoring and oversight for children’s and women’s rights in place.
at all levels; (d) provisions in place for the participation of adolescents and young people; (e) strengthened subnational capacity for planning, monitoring and evaluation for the village development committees and achievement of the Millennium Development Goals; (f) child-friendly models for subnational socio-economic development plans available and replicated; and (g) improved disaster preparedness and response systems.

20. The five main strategies will be (a) advocacy, awareness-raising and partnership with the Government, the United Nations country team, civil society and donors; (b) technical assistance and capacity-building for law and policy development, knowledge management, standard-setting and monitoring; (c) capacity-building for subnational authorities in child-friendly planning and in monitoring and evaluation; (d) strengthening the participation of children, women, families and communities; and (e) improving access to information and behaviour-change communication. Cross-cutting priorities will include ethnic minorities, adolescents and young people, HIV/AIDS and emergencies within the overall context of poverty reduction and with activities integrated into sectoral programmes.

21. Regarding HIV/AIDS, UNICEF will promote a comprehensive and holistic response to prevention and care. The response will focus on geographic convergence and support for policy development and implementation of the National HIV/AIDS Strategy in areas where the global leadership role of UNICEF is recognized, areas such as prevention among young people, PMTCT and care and support for children. These efforts will be integrated into all programme areas of UNICEF.

Relationship to national priorities and the UNDAF

22. The new country programme supports the priorities of national socio-economic development strategies and plans and the PRSP, including through the development of plans and strategies and their monitoring and implementation. The country programme closely links with the following UNDAF outcomes: (a) Government economic policies in support of growth that is more equitable, inclusive and sustainable; (b) an improvement in the quality of, delivery of, and equity in access to, social and protection services; and (c) policies, laws and governance structures that effectively support rights-based development aiming to realize the values and goals of the Millennium Declaration.

Relationship to international priorities

23. The programme supports the Millennium Declaration and Millennium Development Goals, the related Viet Nam Development Goals and the principles and goals of *A World Fit for Children*. The programme also responds to the priorities and approach of the medium-term strategic plan of UNICEF.

24. The emphasis on child-friendly legislation and policies, disadvantaged children such as ethnic minority children, and protection from the negative impacts of economic transition responds to the recommendations of the Committee on the Rights of the Child and reflects a rights-based approach to programming.

Programme components

25. **Health and nutrition.** This programme will consolidate previous achievements while responding to emerging health and nutrition issues through
policy support, model-building, monitoring, behaviour-change communication and partnership. The expected key results at the national level are the following: (a) the development of policies and plans of action to promote equity in, and access to, health care services for children, mothers and poor populations, with these efforts including improved implementation of policies on free health care for children under six, universal salt iodization, and infant and young-child feeding; (b) the harnessing of national efforts on surveillance and response to the HIV/AIDS epidemic, including the development, evaluation and replication of interventions for PMTCT, treatment and care; (c) increased government funding for successful public interventions, including an expanded programme on immunization and micronutrient deficiency control, to enhance sustainability; (d) strengthened staff capacity in behaviour-change communication in the health sector and in communities in areas at high risk of micronutrient deficiencies and vaccine-preventable diseases; (e) improved national and local capacity to monitor progress towards the Millennium Development Goals related to health and nutrition, to assess the impact of reforms on the health and nutrition status of children and women and to use evidence to inform policies and interventions; and (f) improved capacity of personnel in the Ministry of Health for disaster preparedness and response.

26. At the subnational level. UNICEF will develop innovative strategies to promote child survival, improve maternal and child nutrition and reduce maternal mortality, especially in provinces with highly vulnerable populations. These will link and contribute to national policies and standards.

27. Partners will include the Ministry of Health and United Nations agencies, including the World Health Organization (WHO), the Joint United Nations Programme on HIV/AIDS, and the United Nations Population Fund. The programme will also foster partnerships with emerging stakeholders in the health sector such as the private sector, NGOs, professional associations, and national centres of excellence.

28. Water and environmental sanitation (WES). As an integral part of strategies on child survival and malnutrition and the reduction of maternal mortality, this programme will continue to support the Government’s priority of improving rural access to clean water and sanitation, with a particular focus on sanitation and hygiene behaviour-change for poor and ethnic minority areas, and hence the achievement of related Millennium Development Goals.

29. Key expected results at the national level are the following: (a) improved policies and standards, with updated national action plans on rural water supply, environmental sanitation and hygiene behaviour-change communication, including messages on HIV/AIDS, and the development of a distinctive sanitation action plan; (b) improved rural water quality and an arsenic mitigation action plan and its implementation; (c) strengthened national capacity in management, coordination and research; (d) increased investment in water and sanitation supply for vulnerable communes and schools, aided by the documentation of lessons learned, advocacy, networking and partnerships; (e) improved rural WES data-quality and monitoring capacity, with uniform indicators in place for monitoring national goals and Millennium Development Goals; and (f) improved counterpart capacity in disaster preparedness and response.

30. Key expected results at the subnational level are the following: (a) the piloting and taking to scale of models linked to national policies and standards in several
areas, namely, child-friendly community and school WES facilities, private sector participation, rural water quality, sanitation and hygiene, management and cost recovery, and operation and maintenance; (b) the strengthened participation of primary stakeholders, including ethnic minority women and children, in the planning and management of WES services; (c) strengthened local capacity in participatory WES planning, monitoring, and operation and maintenance; and (d) updated local WES plans that include improved provincial regulations and resource mobilization.

31. UNICEF will play an active coordination role. Key partners will include the Center for Rural Water Supply and Sanitation/Ministry of Agriculture and Rural Development, the Ministry of Health, the Ministry of Education and Training, provincial and local authorities, mass organizations, including the Viet Nam Women’s Union, Farmers Associations, the Youth Union, United Nations agencies, bilateral, multilateral and non-governmental organizations, and research institutions.

32. **Childhood injury prevention.** This programme, supporting cross-sectoral interventions for child survival, is the first of its kind in the developing world and responds to a key Government priority for the next five years. UNICEF will help to gather information on and replicate experiences from countries with similar epidemiological challenges. UNICEF will also support the development and implementation of laws and regulations, improved knowledge and monitoring, awareness-raising and capacity-building to better address childhood injury prevention. Key expected results are the following: (a) the development and enforcement of national laws and regulations on child safety, including on child-safe homes, schools, kindergartens, child-care centres and public spaces; (b) greater awareness at all levels of the contribution of injuries to mortality and morbidity and of prevention measures for major child injuries, including those caused by unexploded ordnance/landmines; (c) comprehensive models for community- and institution-based injury prevention, covering swimming skills, environmental modification and alternative parental supervision during school holidays, with such models developed, evaluated and taken to scale through a national policy on safe communities; (d) reduced-risk behaviour adopted by adolescents; (e) the development of cost-effective child-safety devices to be promoted through new safety legislation; (f) the establishment of an effective accident and injury surveillance system; and (g) strengthened coordination and government response on mine action. At the subnational level, UNICEF will work for the greater incorporation of childhood injury prevention into subnational development plans.

33. Major partners in this area will include the Ministry of Health, the Committee for Population, Family and Children, the National Assembly, the Ministry of Defence, the National Sport Committee, the National Transport Safety Committee, mass organizations, including the Youth Union, Viet Nam Women’s Union, the Viet Nam Consumer Association, WHO and international NGOs.

34. **Education.** This programme will support the implementation of laws and policies, including the National Education Strategy, Education for All (EFA) Plan, National HIV/AIDS Strategy and Millennium Development Goals, focusing on education quality and disparities at the early childhood, primary and lower-secondary levels. The programme will reach children and young people who are both in school and out of school, giving strengthened emphasis to gender, child and adolescent participation, ethnic minority girls’ education, bilingual education,
school readiness, transition from primary to secondary education, and learning achievement. Key expected results at the national level include the following: (a) evidence-based policies and strategies across the education sector developed and implemented; (b) strengthened collaboration, understanding and acceptance among policy makers, education managers and development partners regarding standards for quality and equity; (c) strengthened monitoring and evaluation for education; and (d) the mainstreaming of gender and child rights across the curriculum, with life skills education, including HIV/AIDS, incorporated at the lower-secondary level.

35. At the subnational level, the programme will build on its established grass-roots approach while concentrating efforts geographically. Key expected results include the following: (a) sustainable targeted assistance for child-friendly learning across the sector, including in bilingual education and in transition and quality education for disadvantaged groups; (b) the consolidation of existing pilots in the areas of advocacy, community participation and capacity-building; and (c) the replication of participatory youth-friendly life skills education for youth in strategic locations who are in school or out of school.

36. These, as well as the subnational education interventions supported through the Provincial Child-Friendly Programme will inform national and subnational plans and policies, including the EFA and the Socio-Economic Development Plan.

37. There will be a focus on maximizing linkages between education and other programme areas, as well as a strengthening of partnerships within the context of EFA and education sector-wide approaches.

38. Major partners will include the Ministry of Education and Training, the Viet Nam Women’s Union, the Viet Nam Youth Association, United Nations agencies and bilateral, multilateral and non-governmental organizations.

39. **Child protection.** This programme will focus on assisting the Government in reforming, strengthening and providing personnel-training for legal and institutional structures to address emerging child protection issues, as part of the national social-protection strategy to protect the vulnerable. Key expected results at national level are the following: (a) the development of a comprehensive legal framework for children and adolescents in need of special protection (CNSP) and other vulnerable children and adolescents, including those from ethnic minority groups; (b) strengthened government capacity in monitoring and analysing the situation of CNSP; (c) improved awareness, behaviours and participation among the general public, civil society and children regarding child protection; (d) improved justice for children; and (e) programmes and budgets in place and implemented to reduce the vulnerability of children and to protect them from abuse, violence and exploitation, including sexual exploitation, trafficking, and child labour, HIV/AIDS and deprivation of liberty.

40. Key expected results at the subnational level are the following: (a) the piloting of policies and guidelines for the establishment of protective environments for children, including multi-sectoral community-based child protection services and networks for CNSP, local ombuds-systems for children and adolescents, and alternative care for CNSP; and (b) the increased capacity of partners, through the training of social workers, counsellors and law enforcers, to provide support services for children and families in selected project areas. The programme will support only pilot models, which will be closely linked to policy and programme
development to influence national policies and practices to improve child protection.

41. Major partners will include the Committee for Population, Family and Children, the various concerned Ministries (Labour, War Invalids and Social Affairs; Public Security; Justice; and Foreign Affairs), the Viet Nam Women’s Union, the Youth Union, the National Assembly, the People’s Courts, the People’s Procuracy and civil society.

42. **Provincial child-friendly programme.** The programme aims to build government capacity in pro-poor socio-economic development planning at the subnational level and to develop models to reach vulnerable families, using criteria from the Convention and the Law for Protection, Care and Education for Children. The programme also supports the implementation of the Decision of the Committee for Population, Family and Children on “Communes Fit for Children”, based on *A World Fit for Children*.

43. The primary value added by this programme is the demonstration of coordinated multisectoral investment for children and women. Models will include components and capacity-building for all programme sectors, including (a) child survival through health and nutrition services; (b) adequate water and sanitation; (c) child injury prevention; (d) child-friendly learning environments at home, school and community levels; (e) environments for children that protect them from violence, abuse and neglect; and (f) programming and planning for children and women, including through community-based monitoring and evaluation and the involvement and participation of children and youth.

44. The subnational support of UNICEF will converge in selected provinces with situations where high disparities persist or where children are particularly vulnerable to the challenges of urbanization and industrialization. Models for capacity-building, participatory planning, monitoring and service delivery for hard-to-reach children will be evaluated and replicated within a child-friendly roll-out of the decentralization process and the implementation of the Comprehensive Poverty Reduction and Growth Strategy (Poverty Reduction Strategy Paper). The programme will pursue resource-leveraging within subnational plans for children and women.

45. Main partners for this programme will be the Provincial People’s Committees, subnational Committees for Population, Family and Children, the Viet Nam Women’s Union, the Youth Union and line Ministries. National ministries will provide technical assistance and monitoring. The Ministry of Planning and Investment and the Committee for Population, Family and Children will be supported to (a) build capacity at the subnational level for the development and implementation of laws and policies regarding children’s rights, planning methods, and monitoring and evaluation; and (b) to replicate proven models.

46. **Planning and social policy.** This programme will support the Government and the National Assembly to maximize the quality and effectiveness of legislation and strengthen capacity at the national level to address issues affecting children and women in socio-economic development planning. Key expected results include the following: (a) an increased awareness among elected, party officials, and legal and other government officials of the rights of women and children, as defined in international and national instruments; (b) improved legislation on children and
women in line with international standards; (c) strengthened policies on ethnic minorities, particularly for ethnic minority children; (d) increased knowledge available to policy makers and the public on new areas of social policy and their impact on children; (e) improved monitoring and evaluation of the situation of children and women and the impact of programmes aimed at realizing their rights, including implementation of *DevInfo* and stronger knowledge-management; and (f) strengthened capacity at the national level for participatory formulation, implementation and monitoring of socio-economic development plans.

47. Major partners will include the General Statistical Office; the Committee for Ethnic Minorities; the Committee for Population, Family and Children; the Ministry of Labour, War Invalids and Social Affairs; the Office of the National Assembly and People’s Councils; the Ministry of Planning and Investment; United Nations partners; key bilateral and multilateral donors; NGOs; and mass organizations.

48. The planning and social policy section of UNICEF will also undertake various cross-sectoral functions, including performance-monitoring, internal planning, financial monitoring and oversight of the country programme.

49. **Cross-sectoral costs** will cover the operational costs of salaries of the cross-sectoral staff as well as the communications staff coordinating communication activities across all programme areas. It will also cover security equipment, training costs, financial monitoring, programme communication, public information for fund-raising and other purposes, staff capacity-building, travel and operating costs.

**Major partnerships**

50. The country programme will be implemented in collaboration with all United Nations agencies within the UNDAF, government counterparts at all levels, mass organizations, civil society, the National Assembly, the People’s Councils and other United Nations agencies in areas such as youth, HIV/AIDS, migration and education, with particular emphasis placed on a joint programme in the central highlands.

51. UNICEF will maintain close contact with funding partners, including governments and National Committees for UNICEF, to maximize resources and benefit from their inputs into reviews and assessments. UNICEF will actively participate in coordinating forums of the Government and donors to ensure the prioritization of children’s and women’s rights.

**Monitoring, evaluation and programme management**

52. The country programme will be managed by the Ministry of Planning and Investment and coordinating agencies. Programme monitoring will include mid-year and annual reviews undertaken with partners, alongside field visits, evaluations and surveys as indicated in the Integrated Monitoring and Evaluation Plan. Indicators tracked in *DevInfo* will provide both (a) external monitoring of the situation and of the progress towards realizing the rights of children and women, and (b) internal monitoring of programme performance.

53. The 2008 MTR will evaluate the effectiveness of national and subnational child- and women-friendly socio-economic development policies and programmes in reaching vulnerable groups. UNICEF will support the UNDAF evaluation in collaboration with United Nations agencies and government and national partners.