United Nations Children’s Fund
Executive Board
Annual session 2007
4-8 June 2007
Item 9 (a) of the provisional agenda*

Draft country programme document**

Papua New Guinea

Summary

The draft country programme document (CPD) for Papua New Guinea is presented to the Executive Board for discussion and comments. The Board is requested to approve the aggregate indicative budget of $7,150,000 from regular resources, subject to the availability of funds, and $45,000,000 in other resources, subject to the availability of specific-purpose contributions, for the period 2008 to 2012.

** In accordance with Executive Board decision 2006/19 (E/ICEF/2006/5/Rev.1), the present document will be revised and posted on the UNICEF website no later than six weeks after discussion of the CPD at the Board session. It will then be approved by the Executive Board at its second regular session of 2007.

Note: Submission of this document was delayed for technical reasons.
Basic data  
(2003 unless otherwise stated)

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child population (millions, under 18 years)</td>
<td>2.8</td>
</tr>
<tr>
<td>U5MR (per 1,000 live births)</td>
<td>74*</td>
</tr>
<tr>
<td>Underweight (% moderate and severe)</td>
<td>..</td>
</tr>
<tr>
<td>Maternal mortality ratio (per 100,000 live births) (2000)**</td>
<td>300</td>
</tr>
<tr>
<td>Primary school attendance/enrolment (% net, male/female)</td>
<td>../..</td>
</tr>
<tr>
<td>Primary school children reaching grade 5 (%) (2002)</td>
<td>68</td>
</tr>
<tr>
<td>Use of improved drinking water sources (%) (2004)</td>
<td>39</td>
</tr>
<tr>
<td>Adult HIV prevalence rate (%)</td>
<td>1.8</td>
</tr>
<tr>
<td>Child labour (% children 5-14 years old)</td>
<td>..</td>
</tr>
<tr>
<td>GNI per capita (US$)</td>
<td>660</td>
</tr>
<tr>
<td>One year olds immunized against DPT3 (%)</td>
<td>61</td>
</tr>
<tr>
<td>One year olds immunized against measles (%)</td>
<td>60</td>
</tr>
</tbody>
</table>

* This includes the 2000 census data of 93 per 1,000 live births.  

The situation of children and women

1. Papua New Guinea is the largest of the Pacific Island nations, both in terms of population, estimated at 6.1 million, and in terms of land mass, covering approximately 460,000 square kilometres. Around 87 per cent of the population lives in rural areas. The country has a rich and unique cultural and ethnic diversity, with some 800 languages. Estimates suggest that between 40 and 50 per cent of the population is under the age of 18 years. The Human Development Index, reflecting 2004 data, indicates that life expectancy at birth is 55.7 years; the adult literacy rate is 57.3 per cent (with a combined gross enrolment ratio for primary, secondary and tertiary schools of 41 per cent); and the gross domestic product per capita is $2,543.

2. Poor economic management in the 1990s led to the decline of key economic indicators and worsened service delivery, infrastructure development and maintenance. This situation was further aggravated by Papua New Guinea’s susceptibility to natural disasters (volcanic eruptions, tsunamis, water level rises) and by civil conflict in Bougainville. However, in the past four years, the economic climate in Papua New Guinea has improved and growth is projected to continue, mainly due to improved macro-economic policies and spurred by the prediction that commodity prices will remain high.

3. An estimated 30 per cent of the population remains below the poverty line. The infant mortality rate is estimated at 64 per 1,000 live births. The under-five mortality rate is 74 per 1,000 live births, with the major killers of children being malaria, diarrhoea, pneumonia, measles and more recently, HIV/AIDS. About 50 women die every month from complications with pregnancy or childbirth. Only 11 per cent of deliveries take place in a health facility and only 38 per cent of births are supervised by skilled health workers. The rate of access to safe drinking water and sanitation facilities in rural populations remains at 30 per cent.
4. Family violence, abuse and sexual assault, particularly against girls, have become major threats to social stability. An estimated 827,500 to 1,344,600 children live in violent homes, with family violence and sexual assaults being reported at some of the highest rates in the world. Some girls are married under customary law from 12 years of age. The proportion of children not residing with their biological parents at the time of the 2000 census was 22 per cent (589,493 children). Approximately 104,452 children are reported to be maternal orphans, amounting to 4 per cent of all children under 18 years. Around 75 per cent of children who come into conflict with the law experience abuse by police. Birth registration rates have improved from 3 to 10 per cent in some provinces but remain among the lowest in the region.

5. Papua New Guinea’s average gross primary-school enrolment rate is 75 per cent, the lowest in the East Asia and Pacific region. A Department of Education survey conducted in 2006 showed that the primary net enrolment rate is low and varies from 30 per cent in one province to 62 per cent in the National Capital District. The cohort retention rates of grades 1-6 and grades 1-8 are 55 and 36 per cent, respectively. Many children are out of school due to the burden of school fees. Only 51 per cent of females over 15 years are literate, compared with 63 per cent of their male counterparts. Cultural beliefs and practices play a significant part in creating this gender disparity. In addition, distance to school, harassment and abuse at school, increased chance of early pregnancy and exposure to drugs all compel parents to remove their daughters from school at an early age.

6. Papua New Guinea faces a serious HIV epidemic. Among sexually active adults, HIV prevalence exceeds 1 per cent in many rural areas, 2 per cent in many urban areas and 3 per cent in Port Moresby. The 2004 National Consensus Report estimated that approximately 80,000 adults and children in Papua New Guinea had HIV at that time. Factors which cause high HIV infection include high rates of multiple sexual partnerships, including sex between young girls and older men; gender violence and sexual coercion; widespread gender inequality; high rates of sexually transmitted infections; and frequent migration due to work in mines, plantations and port trading zones. Stigma results in high levels of denial and poor risk-perception among groups that are most at risk. By 2007, only 90 of the estimated 10,000 children infected by HIV were reported to have started on antiretroviral therapy, and only 110 were registered and awaiting treatment. The rate of access to services for prevention of mother-to-child transmission of HIV (PMTCT) showed slight improvement, from 5 to 10 per cent.

7. Chronic unemployment for young people underlines the challenges of creating economic opportunities for the increasing numbers coming onto the labour market, and for those already out of work. This has played a part in a serious deterioration in law and order and increased the incidence of violence, particularly affecting women and girls. This situation in turn has contributed to a worsening environment for investment, with disproportionately high costs for security protection.

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2 In Papua New Guinea, elementary school is three years (kindergarten and grades 1 and 2), and primary school is six years, from grade 3 to 8. Basic education is the sum of elementary and primary education, totalling nine years.
3 UNICEF midterm review, 2005.
4 World Bank Education Statistics — 2004 figures.
8. The 2004 Millennium Development Goals progress report for Papua New Guinea indicated that progress towards the Goals has been slow and the country is unlikely to achieve any of them. While the report considered the supporting environment “potentially favourable” for attainment of the goals of the national medium-term development strategy, and “fair” for the policy and legislative environment, it rated it as “fair” to “weak” for implementation capacity.

9. International development assistance plays an important role in Papua New Guinea’s economy, with total estimated official development assistance from Australia for 2005-2006 of 492.3 million Australian dollars, representing 18 per cent of the 2006 national budget. Other donors are Japan, New Zealand, the European Union, the Asian Development Bank and the World Bank.

Key results and lessons learned from previous cooperation, 2003-2007

Key results achieved

10. The previous country programme focused on maternal and child survival; child protection; universal primary education and accelerating girls’ education; and HIV prevention and the provision of care and support for women and children affected by HIV/AIDS. With support from UNICEF and partners, supplementary immunization activities resulted in 90 per cent coverage against measles and poliomyelitis and for vitamin A supplementation. At the provincial level, UNICEF has focused its support on improving micro-planning for routine immunization, positive supervisory visits, social mobilization and support to outreach and/or foot patrols. These interventions were supported in six focal provinces, where data from field visits and provincial reports indicate that immunization coverage has increased by up to 10 per cent. The results of national nutrition and micronutrient surveys undertaken in collaboration with the United States Centers for Disease Control and Prevention have led to the development of the World Health Organization/UNICEF infant and young child feeding strategy, national safe motherhood programme and activities in food fortification. The survey results also indicate the near elimination of iodine deficiency in Papua New Guinea as a result of salt iodization. PMTCT programmes are established in 18 health facilities, catering for 80,000 deliveries per year. Of the 17,000 pregnant women who attend three major antenatal clinics, 50 per cent now have an HIV test, compared to fewer than 10 per cent in 2001.

11. In the area of child protection, juvenile justice reforms reached 13 provinces, including seven juvenile courts. Birth registration is decentralized in 10 provinces, and all schools and health centres are now official registration points, increasing registration from 3 to up to 10 per cent in some provinces (and 70 per cent in the National Capital District). Three model family support centres have been established, and the Government now plans to replicate these in the remaining provinces. In addition, 80 psychosocial counsellors have been trained to provide support to children and women who are victims of violence and abuse. Ten of these counsellors are now trained as trainers and continue to provide training to child protection actors in six provinces.

12. The net enrolment rate study, designed to provide age-specific enrolment data from elementary and primary schools in nine provinces and the National Capital District, has indicated an average net enrolment rate of 36 per cent across these
provinces, an informative comparison to the previously cited gross enrolment rate nationally for Papua New Guinea of 75 per cent. This experience has created demand for a nationwide school census to capture net enrolment rate data and other information at the school level. The Department of Education is planning to carry out the census annually from 2007.

13. UNICEF supported the establishment of strong legislative and policy frameworks including the Child Welfare Act and a subsequent revision, an updated national health plan, the HIV/AIDS national strategic plan, the national juvenile justice policy and the national education plan 2005-2014. Through UNICEF support, the Government and partners now draw on contemporary data to advocate more effectively for children, including pioneering surveys on immunization coverage, nutrition and child abuse and analyses of the situation of children affected by HIV/AIDS and commercial sexual exploitation.

Lessons learned

14. “Quick wins” for children were achieved in the areas of child immunization, birth registration and juvenile justice through intensive support to provincial capacity-building, decentralized resource allocation, micro-planning and mobilization of church networks and civil society organizations at the community level. To better understand the issues affecting communities from their perspective, consultations used the assessment-analysis-action approach as a programme strategy. This successful approach has since been adopted by the Department for Community Development for policy planning and programme development. Past development cooperation has shown that stronger results for children can be achieved by working at the community level and through district and provincial authorities. This strategy will be intensified in the next country programme but will also be fully integrated into an explicit strategy to ensure that community-level work will form the basis for policy advocacy and to ensure that results achieved at the local level can be applied on a national scale. Additional partnerships were fostered with the church networks that are currently providing over 50 per cent of direct health and education service delivery across the country. Strengthened partnerships with donors have led to a considerable increase in resources for the country programme.

15. Efforts to strengthen advocacy for children and promote effective multisectoral programme strategies were approached through an intensive development and strengthening of partnerships for children. The Department for National Planning and Monitoring established a Government/UNICEF country programme management framework, led at the policy level by a country programme steering committee comprised of the secretaries of relevant government departments and senior UNICEF management. This framework enabled an effective annual review process. The framework has been identified by the Department for National Planning and Monitoring as a good practice model and the United Nations has been asked to adopt it for the management and coordination of the “One United Nations” country programme that is to come into effect in 2008.

16. Drawing from the strengths of Melanesian cultural practice in mediation, reconciliation and reciprocity, the juvenile justice programme, with its emphasis on diversionary alternatives to detention, was able to make significant legal and policy gains in a short period of time. Rather than investing resources in capacity
development of stand-alone institutional structures, UNICEF has channelled technical inputs into an inter-agency working group of 21 government and civil society organizations which are leading the reform process. High-level representation on the working group has ensured that sufficient resources have been leveraged to develop rights-based legislative and policy frameworks, but there is not yet sufficient focus on their implementation and monitoring at the provincial and district levels. To address these challenges, UNICEF is now developing the capacities of a university-based Human Rights Centre and a network of civil society organizations to support children and civil society to demand a violence-free justice system.

17. The midterm review of the last country programme found that a more clearly defined and explicit link is needed between UNICEF work at the subnational level and at the policy and sectoral levels, to ensure that lessons learned at the subnational level can be applied at scale. The midterm review also found that UNICEF needs stronger policy analysis and more capacity to translate lessons learned and experience from other countries to Papua New Guinea. This is being addressed with the ongoing professionalization of UNICEF staff and capacity development of key partners associated with both sectoral programming and monitoring and evaluation. However, the last country programme significantly underestimated the cost of compliance with Minimum Operational Security Standards, which in the next country programme will reduce the funds available for more professional posts.

18. The response to the Manam volcano eruption by the Government, non-governmental organizations (NGOs) and United Nations agencies was delayed, uncoordinated and costly. Government and United Nations emergency preparedness plans exist, but there is lack of trained human resources, funding and weak coordination within the United Nations system and partners. From this experience, the United Nations system, led by the newly established mission of the United Nations Office for the Coordination of Humanitarian Affairs, facilitated the establishment of a coordinating body through which the Government, all donors, NGOs and United Nations agencies meet and share information and resources. This established mechanism has improved monitoring and mobilized additional resources for emergency preparedness and response.
The country programme, 2008-2012

Summary budget table
(In thousands of United States dollars)

<table>
<thead>
<tr>
<th>Programme</th>
<th>Regular resources</th>
<th>Other resources</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health, nutrition and water and environmental sanitation</td>
<td>972</td>
<td>12 405</td>
<td>13 377</td>
</tr>
<tr>
<td>Education</td>
<td>1 766</td>
<td>9 937</td>
<td>11 703</td>
</tr>
<tr>
<td>HIV/AIDS</td>
<td>1 300</td>
<td>11 338</td>
<td>12 638</td>
</tr>
<tr>
<td>Child protection</td>
<td>1 649</td>
<td>8 420</td>
<td>10 069</td>
</tr>
<tr>
<td>Monitoring and evaluation</td>
<td>963</td>
<td>900</td>
<td>1 863</td>
</tr>
<tr>
<td>Cross-sectoral costs</td>
<td>500</td>
<td>2 000</td>
<td>2 500</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>7 150</strong></td>
<td><strong>45 000</strong></td>
<td><strong>52 150</strong></td>
</tr>
</tbody>
</table>

Preparation process

19. In early 2006, the United Nations agencies in Papua New Guinea started developing a fully integrated United Nations country programme, which is based on the analysis supporting the medium-term development strategy, Papua New Guinea’s overarching plan for economic and social recovery and development. The United Nations country programme has been developed in place of the traditional Common Country Assessment and United Nations Development Assistance Framework. The process was led by the Government and involved close consultation with civil society organizations, churches and faith-based organizations. The United Nations country programme has five outcome areas: governance and crisis management; foundations for human development (health, education and child protection); sustainable livelihoods and population; gender; and HIV and AIDS. Although separate country programme documents are being presented to the Executive Boards of the United Nations Development Programme/United Nations Population Fund and UNICEF, at the Government's request, a single integrated country programme action plan will be developed reflecting the principles, results and strategies of the United Nations country programme.

Goals, key results and strategies

20. The overall goal of the country programme is to support to the Government and people of Papua New Guinea to realize their development goals for children, envisaged in the medium term-development strategy. The overarching strategy of the country programme will be to focus programming on the most vulnerable children and their families.

21. The programme will be guided by the following interrelated strategies:

(a) Partnerships. The single United Nations country programme will greatly strengthen the partnership between United Nations agencies. However, it will also enhance the overall partnership between the United Nations and the Government. The United Nations will also strengthen its partnerships with civil society,
particularly churches and faith-based organizations, with UNICEF focusing on
children’s and young people’s organizations. The United Nations will focus on its
comparative advantage as an “honest broker” between other actors, especially the
Government and the major donors in Papua New Guinea;

(b) Advocacy for the Millennium Development Goals and human rights,
based on knowledge generation through the analysis of data from routine and
periodic data sources, complemented by strategic studies and evaluations. Sex- and
age-disaggregated data and analysis will support gender equality goals;

(c) Capacity development at national and in particular at subnational levels
will strengthen policies, laws, institutions and planning and budget processes, and
build capacities to protect and promote the rights of all children. Linkages will be
strengthened between national and provincial-level planning processes, and human
resources developed;

(d) Programme communication will promote social change, supporting
children, young people and communities to participate in decision-making and to
adopt and sustain healthy behaviours. Communities will be mobilized using
innovative, participatory, culturally appropriate and gender-sensitive methods of
communication, such as community theatre;

(e) Mainstreaming of emergency preparedness and response is a key strategy
that will be integrated in all programme components. Coordination between the
Government, the United Nations country team and other partners will be
strengthened.

Relationship to national priorities

22. The United Nations country programme will support the Government in the
implementation of the medium-term development strategy in areas where the United
Nations system has a comparative advantage. The three functional roles of the
medium-term development strategy are to: (a) articulate a core development strategy
that provides the guiding framework for the Government’s expenditure programme;
(b) identify the supporting policy framework that will facilitate the enabling
conditions for recovery and development; and (c) strengthen Papua New Guinea’s
public expenditure management system. The medium-term development strategy is
complemented by a number of sectoral plans, most of which have a 10-year
perspective. Budget allocations from the Department of Finance and Treasury are
provided under a medium-term expenditure framework (which is a rolling three-year
budget).

Relationship to international priorities

23. The country programme is guided by the Convention on the Rights of the
Child and Convention on the Elimination of all Forms of Discrimination against
Women, the subsequent recommendations of the Committee on the Rights of the
Child and other guiding international frameworks and treaties to which Papua New
Guinea has made a commitment, including the Millennium Development Goals and
the goals of *A World Fit for Children*. It is further guided by each focal area and
cross-cutting issue identified in the UNICEF medium-term strategic plan.
Programme components

24. Contributing to the achievement of the Millennium Development Goal 4, reduce child mortality, and Goal 5, improve maternal health, the **health, nutrition, water and environmental sanitation** programme will focus on child and maternal survival and health, particularly in disadvantaged areas, to achieve: (a) basic health services strengthened to deliver the child survival package; (b) immunization coverage increased from 60 to 80 per cent; (c) micronutrient deficiency reduced in children under five years of age; (d) supervised deliveries increased from 38 to 60 per cent; (e) coverage of antenatal care increased from 39 to 60 per cent; and (f) national and subnational service delivery strengthened to enable greater access to safe water and sanitation, medical supplies and trained health personnel.

25. UNICEF will work together with the Department of Health, United Nations agencies and development partners within the Health Services Improvement Programme, a sector-wide approach (SWAp), to train health workers and strengthen the health system to implement the child survival package. UNICEF will continue to support the Department’s Healthy Islands (Home Fit for Children) approach to stimulate community involvement in health, which uses community based structures as key entry points. The focus for safe water supply, hygiene and sanitation interventions will be in poor rural communities. UNICEF will ensure that in declared emergencies, every child has access to life-saving interventions by ensuring timely and quality rapid assessments, and the immediate provision of immunization services, nutritional supplementation and safe drinking water.

26. Contributing to Millennium Development Goal 2, achieve universal primary education, and Goal 3, promote gender equality and empower women, the **education** programme will work towards universal primary education through the following results: (a) a universal primary education strategy and monitoring system developed and implemented; (b) an education SWAp established; and (c) gender disparity decreased through expansion of the child-friendly schools strategy.

27. UNICEF will support the Department of Education, in cooperation with development partners, to develop a SWAp to promote the national agenda to achieve universal primary education. Specifically, UNICEF will assist the government-led universal primary education task force to develop a strategic plan, carry out costing and identify programmes, in collaboration with the Departments of National Planning and Monitoring and of Finance and Treasury, and the National Economic and Fiscal Commission. UNICEF will also assist the Department of Education to strengthen its mechanism to monitor progress towards universal primary education, building upon the experience of the net enrolment study and school census.

28. Building on the achievements made in the previous programme, UNICEF will continue to collaborate with various actors to advocate for girls’ education. UNICEF will cooperate with churches, civil society organizations and the media to challenge negative cultural beliefs and practices and sensitize policy makers to prioritize girls’ education. UNICEF will continue to assist the Government to carry out birth registration in schools.

29. UNICEF will continue to support ongoing programmes that contribute to making schools more girl-friendly, such as the child-friendly school strategy and school-based counselling. UNICEF will also support efforts to address the importance of care for young children through early childhood care and
development, enabling young children to learn and embrace the principles of gender equality at a young age. UNICEF will equally assist the Department of Education to implement its HIV/AIDS policy.

30. The child protection programme will support Papua New Guinea to increase protection for children from violence, abuse, exploitation and discrimination, empowering them to seek timely, appropriate and effective support to address child protection concerns. Results sought will be: (a) child protection legislation operationalized; (b) provincial and national data collection mechanisms institutionalized; (c) national and provincial plans of action to address commercial sexual exploitation implemented; and (d) provincial juvenile justice working groups and juvenile courts strengthened.

31. The family violence/child abuse component will support communities and families to build appropriate safety nets to prevent and mitigate child abuse, especially the protection of girls, orphans and vulnerable children from abuse and violence. It will focus on empowering family support groups, youth and children to develop their knowledge of risks of abuse, their abilities to communicate and their capacities to respond as individuals or groups. Community-based monitoring and follow-up systems to identify and analyse abuse cases will be strengthened, enabling communities to remain informed on the situation of child abuse and violence. Data and information from communities will feed into national policy reviews and formulation of child protection programmes. Guided by the protective environment for children framework, this component will contribute to the achievement of Millennium Development Goal 3, promote gender equality and empower women and Goal 6, combat HIV/AIDS, malaria and other diseases.

32. The children and justice component will contribute to Goal 1, eradicate extreme poverty and hunger, by ensuring that the country has accurate population estimates from which to plan poverty alleviation and social service delivery programmes and, through the promotion of non-violent, diversionary alternatives to arrest and detention, decrease marginalization and improve the likelihood of children escaping poverty.

33. UNICEF will continue to support the development of stronger partnerships between the Department for Community Development and the National Statistics Office and other key departments to establish and maintain data collection mechanisms to monitor the nature, extent and trends in violence against women and children. To strengthen the capacities of communities to provide protective environments for children, UNICEF will continue to work with the Government and civil society to identify risks to children and women and develop community-based protective responses. These will include supporting communities to use the assessment-analysis-action approach to identify and support orphans and other vulnerable children.

34. Building on the achievements of the child protection programme in strengthening systems, UNICEF will continue to support the law and justice sector to monitor the enforcement of key protective legislative and policy frameworks. UNICEF will support the police force to conduct effective training of officers, identify and support the implementation of programmes that offer diversionary alternatives to detention and enhance the accountability of police through developing the capacities of civil society to document police abuse and provide care, support and advocacy.
35. Contributing to Millennium Development Goal 6, combat HIV/AIDS, malaria and other diseases, the HIV/AIDS programme will strengthen capacities of children and their communities to halt the spread of HIV and access care and support when required by achieving these results: (a) community-led prevention efforts strengthened through life-skills education, voluntary testing and counselling and the development and implementation of community action plans; and (b) national and subnational service delivery mechanisms strengthened to provide treatment and care, including greater access to antiretroviral treatment and PMTCT services, particularly in remote areas.

36. To do so, UNICEF and other United Nations agencies will support the implementation of the national HIV/AIDS strategic plan 2006-2010 to strengthen capacities of communities to develop and implement HIV prevention, care and support strategies, particularly for orphaned and vulnerable children, and health care systems to provide comprehensive support to people with HIV/AIDS, especially children, women and youth.

37. Through training and capacity-building in selected provinces, UNICEF will work with civil society organizations, including young people’s organizations and mass media, to address the gaps in knowledge and risk perception, particularly of males, adolescents and young people who are most at risk. The programme will also facilitate capacity-building for national-level provision of life-skills based education, and support youth organizations to provide psychosocial life skills to other young people who are out of school and most at risk.

38. In parallel, selected government systems and faith-based organizations will be strengthened to provide youth-friendly health services and PMTCT, and to strengthen innovative strategies to integrate paediatric AIDS services in existing maternal and child health services, and support initial care and support services for orphaned and vulnerable children.

39. Cross-sectoral costs cover cross-cutting administrative, research and development, and other costs not attributable to any of the other programmes.

Major partnerships

40. UNICEF continues to work with a wide range of national and local civil society partners in all programme areas, and further private sector partnerships will be forged to support education. UNICEF will continue to strengthen its partnerships with international donors, especially the Governments of Australia, Japan and New Zealand and the European Union. UNICEF has developed a strategy to scale up youth participation in all aspects of the country programme. UNICEF will lead the component of the United Nations country programme on foundations for human development, which encompasses education, health and child protection and also continues to work with other United Nations agencies to mainstream such cross-cutting issues as human rights and gender.

Monitoring, evaluation and programme management

41. The UNICEF programme is integrated in the United Nations country programme and will be guided by a Government-United Nations programme Steering Committee, headed by the Department of National Planning and Monitoring and implemented through a joint country programme action plan and
partnership agreement. In collaboration with the eight resident United Nations agencies, the Department of National Planning and Monitoring will ensure the participation of civil society partners in the formulation and implementation annual work plans.

42. The implementation of the United Nations country programme will support sector-wide programme approaches, aligned with the medium-term development strategy priorities, sectoral plans and programmes and the Millennium Development Goals. The United Nations country programme will be managed through existing sectoral and programme mechanisms. A relevant government department will chair each of these groups and be responsible for coordination of planning, implementation, review and monitoring.

43. The United Nations Coordination Office, led by the United Nations Resident Coordinator, will ensure that mechanisms are in place to facilitate coordination between United Nations agencies and their external partners. It will oversee the implementation of United Nations commitments to the Government-United Nations partnership, including the reduction of transaction costs for the Government.

44. The management of the United Nations country programme will apply new procedures for the transfer of resources. The basic principles are the harmonization and simplification of procedures among the concerned United Nations agencies enabling a greater focus on delivery of results.

45. Quarterly project progress reports and joint annual reviews will be conducted to monitor and assess the overall contribution of the United Nations-supported programmes to national priorities and the impact of these programmes on the lives of women and children. The organizational delivery structure of the United Nations country programme will be evaluated in the last semester of 2009 and recommendations used to determined a final structure.

46. Monitoring and evaluation will be guided by the integrated monitoring and evaluation framework for 2008-2012, which is further integrated into the United Nations country programme result matrix. The inter-agency task group on monitoring and evaluation will develop a mechanism to coordinate field visits for efficient data collection and monitoring projects in the usage of DevInfo for evidence-based reporting. The Government is currently implementing DevInfo, enabling joint monitoring of progress towards the Millennium Development Goals.
<table>
<thead>
<tr>
<th>UNICEF medium-term strategic plan focus area</th>
<th>Key results expected in this focus area/baseline estimate for these results</th>
<th>Key progress indicators</th>
<th>Means of verification of results</th>
<th>Major partners, partnership frameworks and cooperation programmes</th>
<th>The expected key results in this focus area will contribute to:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Young child survival and development</td>
<td>1.1. Basic health services strengthened to deliver the child survival package</td>
<td>1.1.1. Number of health facilities in underserved areas offering the child survival package 1.1.2. IMR 1.1.3. U5MR</td>
<td>1.1; 1.2; 1.3; 1.4; 1.5; 1.6. National Department of Health (NDOH) monitoring reports and surveys</td>
<td>- NDOH  - Provincial and district Governments  - WHO  - UNFPA  - AusAID  - Global Fund to Fight AIDS, Tuberculosis and malaria</td>
<td>United Nations country programme (UNCP) outcome: Foundations for Human Development</td>
</tr>
<tr>
<td></td>
<td>1.2. Immunization coverage increased from 60% to 80%</td>
<td>1.2.1. Immunization coverage (DPT3); 1.2.2. Incidence of vaccine preventable diseases</td>
<td>NDOH statistics and monitoring reports</td>
<td>- NDOH  - Provincial and district Governments  - WHO  - UNFPA  - AusAID  - Global Fund to Fight AIDS, Tuberculosis and malaria</td>
<td>MDG: Reduce child mortality MDG: Reduce maternal mortality</td>
</tr>
<tr>
<td></td>
<td>1.4. Rate of supervised deliveries increased from 38% to 60%</td>
<td>1.4.1. Proportion of deliveries supported by trained health workers;</td>
<td>- NDOH  - Provincial and district Governments  - WHO  - UNFPA  - AusAID  - Global Fund to Fight AIDS, Tuberculosis and malaria</td>
<td>- NDOH  - Provincial and district Governments  - WHO  - UNFPA  - AusAID  - Global Fund to Fight AIDS, Tuberculosis and malaria</td>
<td>MDG: Reduce child mortality MDG: Reduce maternal mortality</td>
</tr>
<tr>
<td></td>
<td>1.5. Antenatal coverage increased from 39% to 60%</td>
<td>1.5.1. Low birth weight (Z-score); 1.5.2. MMR 1.5.3 Availability of trained staff, medical supplies, health materials and training</td>
<td>- NDOH  - Provincial and district Governments  - WHO  - UNFPA  - AusAID  - Global Fund to Fight AIDS, Tuberculosis and malaria</td>
<td>- NDOH  - Provincial and district Governments  - WHO  - UNFPA  - AusAID  - Global Fund to Fight AIDS, Tuberculosis and malaria</td>
<td>MDG: Reduce child mortality MDG: Reduce maternal mortality</td>
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<td></td>
<td>1.6. National and subnational service delivery strengthened to enable greater access to safe water and sanitation, medical supplies and trained health personnel</td>
<td>1.6.1. % of schools, health facilities and districts in 6 provinces who have access to safe water and sanitation facilities 1.6.2. % of children and communities access to quality information on safe water, sanitation, hygiene and sustainable safe water practices</td>
<td>- NDOH  - Provincial and district Governments  - WHO  - UNFPA  - AusAID  - Global Fund to Fight AIDS, Tuberculosis and malaria</td>
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**Summary results matrix: Papua New Guinea programme of cooperation 2008-2012**
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<tr>
<th>UNICEF medium-term strategic plan focus area</th>
<th>Key results expected in this focus area/baseline estimate for these results</th>
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<th>Major partners, partnership frameworks and cooperation programmes</th>
<th>The expected key results in this focus area will contribute to:</th>
</tr>
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</table>
| 2. Basic education and gender equality    | 2.1. Universal primary education strategy and monitoring system developed and implemented | 2.1.1. Universal primary education strategy in place  
2.1.2. Universal primary education monitoring system in place  
2.1.3. Universal primary education implementation plan in place  
2.1.4. Evidence that strategy is being implemented  
2.1.5. Gross enrolment rate  
2.1.6. Net enrolment rate  
2.1.7. Completion rates | 2.1. National Department of Education (NDOE)  
Universal primary education progress reports | - NDOE  
- Provincial and district governments  
- AusAID  
- European Union |  
2.2. Education SWAp established | 2.2.1. Education SWAp established  
2.2.2. Evidence that education SWAp is being implemented  
2.2.3. Number of education SWAp meetings in which UNICEF participated  
2.2.4. Early childhood care and development implementation plans in place  
2.2.5. Early childhood care and development technical working group established | 2.2. NDOE SWAp progress reports; UNICEF internal records |  
2.3. Gender disparity decreased through expansion of the child friendly schools strategy | 2.3.1. Gender-disaggregated primary school net enrolment, gross enrolment and completion rates  
2.3.2. Number of child-friendly schools  
2.3.3. Gender-disaggregated enrolment and completion rates at child-friendly schools compared with other schools | 2.3. NDOE statistics; Net enrolment reports; child-friendly school monitoring reports; UNICEF field monitoring reports |  


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<td><strong>3. HIV/AIDS and children</strong></td>
<td>3.1 Community-led prevention efforts strengthened through life-skills education, voluntary testing and counselling and the development and implementation of community action plans</td>
<td>3.1.1. Number of communities self-assessed and involved with HIV and AIDS prevention, care and support 3.1.2. Number of provinces/communities with developed action plans for raising awareness against HIV and AIDS 3.1.3. Number of communities with implemented plans in providing care and support to orphans and vulnerable children</td>
<td>3.1; 3.2; 3.3. - NDOH reports - National AIDS Council Secretariat (NACS) reports - National Department for Community Development (NDCD) reports - UNICEF field monitoring reports</td>
<td>- NDOH - NACS - Provincial AIDS councils - Provincial and district governments - UNAIDS - WHO - UNFPA - Global Fund, - AusAID, - Asian Development Bank</td>
<td>UNCP outcome on HIV/AIDS WFFC goal to promote healthy lives MDGs: Combat HIV/AIDS; Protect the vulnerable</td>
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<td>3.2 60% of youth in six provinces have acquired the knowledge and skills to protect themselves from HIV/AIDS/sexually transmitted infections</td>
<td>3.2.2. Number and reach of youth-friendly centres 3.2.3. Number of youth participating in life-skills education, disaggregated by gender and school enrolment status</td>
<td>3.1; 3.2; 3.3.</td>
<td>- NDOH - NACS - Provincial AIDS councils - Provincial and district governments - UNAIDS - WHO - UNFPA - Global Fund, - AusAID, - Asian Development Bank</td>
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<td>3.3 National and subnational service delivery mechanisms strengthened to provide treatment and care, including greater access to antiretroviral treatment (ART) and PMTCT and paediatric AIDS services, particularly in remote areas</td>
<td>3.3.1. Number of women and men receiving voluntary counselling and testing (VCT) 3.3.2. Number of women receiving PMTCT, disaggregated by HIV status 3.3.3. Percentage of women living with HIV on ART; 3.3.4. Number of district with at least one functional VCT and ART site 3.3.5. Percentage of children living with HIV accessing ART 3.3.6. Percentage of children living with HIV receiving follow-up care at family and community level</td>
<td>3.1; 3.2; 3.3.</td>
<td>- NDOH - NACS - Provincial AIDS councils - Provincial and district governments - UNAIDS - WHO - UNFPA - Global Fund, - AusAID, - Asian Development Bank</td>
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<td><strong>4. Child protection</strong></td>
<td>4.1. Child protection legislation operationalized</td>
<td>4.1.1. Number, relevance and range of basic services that are accessible to vulnerable children, particularly in rural areas; 4.1.2. Number of OVCs accessing health, education, welfare and birth registration 4.1.3. Reduction in family violence in one province in each region by 25% 4.1.4. Degree of implementation and monitoring of the policy for orphans and vulnerable children</td>
<td>4.1. (NDCD) reports; NDOE enrolment stats; NDOH statistics; NGO and internal UNICEF reports 4.2. NSO and NDCD reports 4.3. NDCD progress reports 4.4. DJAG and police progress reports</td>
<td>- Department of Justice and Attorney General (DJAG)  - University of PNG Police  - NDCD  - NDOE  - NDOH  - Provincial and district governments  - CSO/NGOs</td>
<td>UNCP outcome on Foundations for Human Development  WFFC goal to promote healthy lives, provide quality education  MDGs: Protect the vulnerable (Millennium Declaration), combat HIV/AIDS</td>
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<td>4.2. Provincial and national data collection mechanisms institutionalized</td>
<td>4.2.1. Progress reports incorporating national and subnational data prepared and disseminated to stake holders</td>
<td>4.2.1. Progress reports incorporating evidence of implementation of national and provincial plans prepared and disseminated</td>
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<td>4.3. National and provincial plans of action to address commercial sexual exploitation implemented</td>
<td>4.3.1. Progress reports incorporating evidence of implementation of national and provincial plans prepared and disseminated</td>
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<td>4.4. Provincial juvenile justice working groups and juvenile courts strengthened</td>
<td>4.4.1. Proportion of children who come into conflict with the law diverted away from formal system; 4.4.2. No. child victims, witnesses protected by due legal process</td>
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<td>5. Policy advocacy and partnerships for children's rights</td>
<td>5.1. Monitoring of MDG and medium-term development strategy (MTDS) operational</td>
<td>5.1.1. No. of national and subnational plans that incorporate MDGs 5.1.2. Frequency and depth of information recorded in DevInfo 5.1.3. Amount and proportion of annual budget allocated for children</td>
<td>5.1. DevInfo national and subnational plans; Department of National Planning and Monitoring (DNPM) reports</td>
<td>- DNPM  - National Statistics Office  - DJAG  - DCD  - NDOE  - NDOH  - Provincial and district governments</td>
<td>- Children's rights and participation: UNCP  - Outcomes on Governance and Crisis Management: Foundations for Human Development: Gender and HIV/AIDS  - WFFC Goals to promote healthy lives  - MDG Goals to reduce poverty and developing a global partnership</td>
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<td>5.2. Government is aware of, respects and provides for human rights, and citizens are empowered to demand protection of these rights</td>
<td>5.2.1. No. of human rights instruments ratified by Government 5.2.2. Frequency of reporting on the status of implementation of the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women with participation from government and civil society 5.2.3. Frequency of monitoring of the child protection legislation and the universal primary education, OVC &amp; youth policies, with participation from government, youth and civil society 5.2.4. No. of advocacy reports produced by civil society or Government 5.2.5. Efficiency of government response to humanitarian needs during emergencies 5.2.6. No. women Members of Parliament increased from 1 to 5, and 10% of women in senior positions in political parties and government</td>
<td>5.2. Published reports Policy implementation reports; Government statistics, NDCD reports, UNICEF internal reports</td>
<td>- DNPM  - National Statistics Office  - DJAG  - DCD  - NDOE  - NDOH  - Provincial and district governments</td>
<td>- Children's rights and participation: UNCP  - Outcomes on Governance and Crisis Management: Foundations for Human Development: Gender and HIV/AIDS  - WFFC Goals to promote healthy lives  - MDG Goals to reduce poverty and developing a global partnership</td>
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