Draft country programme document**

Comoros

Summary

The draft country programme document (CPD) for Comoros is presented to the Executive Board for discussion and comments. The Board is requested to approve the aggregate indicative budget of $3,715,000 from regular resources, subject to the availability of funds, and $6,250,000 in other resources, subject to the availability of specific-purpose contributions, for the period 2008 to 2012.
Basic data table†
(2005 unless otherwise stated)

<p>| | |</p>
<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>Child population (millions, under 18 years)</td>
<td>0.4</td>
</tr>
<tr>
<td>U5MR (per 1,000 live births)</td>
<td>71</td>
</tr>
<tr>
<td>Underweight (% moderate and severe)</td>
<td>25</td>
</tr>
<tr>
<td>Maternal mortality ratio (per 100,000 live births)</td>
<td>380</td>
</tr>
<tr>
<td>Primary school attendance (% net, male/female)</td>
<td>80/65</td>
</tr>
<tr>
<td>Primary schoolchildren reaching grade 5 (%)</td>
<td>63</td>
</tr>
<tr>
<td>Use of improved drinking water sources (%)</td>
<td>86</td>
</tr>
<tr>
<td>Adult HIV prevalence rate (%)</td>
<td>&lt;0.1</td>
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<tr>
<td>Child work (% children, 5-14 years old)</td>
<td>30</td>
</tr>
<tr>
<td>GNI per capita (US$)</td>
<td>640</td>
</tr>
<tr>
<td>One-year-olds immunized against DPT3 (%)</td>
<td>80</td>
</tr>
<tr>
<td>One-year-olds immunized against measles (%)</td>
<td>80</td>
</tr>
</tbody>
</table>

† More comprehensive country data on children and women are available at www.unicef.org.

The situation of children and women

1. Comoros, an Indian Ocean nation near northern Mozambique, consists of four islands, one of which remains under French administration. Therefore, the UNICEF country programme of cooperation includes three islands: Grande-Comore, Moheli and Anjouan. The country is in transition to a stable democracy, and the most recent presidential elections were judged free and transparent by international observers. However, Comoros faces serious socio-economic challenges and frequent natural disasters (cyclones and volcanic eruptions) that have serious adverse effects on children and women.

2. Following several years of conflict over control of public finances and security that plunged the country into serious political crisis, the National Assembly adopted legislation aimed at fostering political reconciliation and creating an environment favourable to the sharing of power between the Union and the three islands, while also establishing guiding principles for succession to the presidency of the Union. The presidential elections held in May 2006 marked the start of a relatively stable political and economic era and new impetus to international cooperation. Interest in Comoros has improved substantially, following a Donors’ Conference held in December 2005, during which the country’s poverty reduction strategy and sectoral plans of action were presented. However, Comoros’ political and administrative structure, involving three federated islands and the Union, renders development cooperation rather complex for a small country.

3. Population growth rates far exceed economic growth rates. Data from the 2003 census have not been finalized, but projections from the 1991 census suggest a 2007 population of 841,000 (based on a growth rate of 2.7 per cent) driven by a high fertility rate, resulting in roughly one half the population being under age 18 years. The economic growth rate, however, is virtually nil at 0.1 per cent of per-capita gross domestic product per year. Public finances are characterized by chronic internal and external budget deficits. The shortage of domestic resources is compensated for largely by public development aid and private transfers originating
in the Comorian diaspora, estimated at around $50 million per year. These private transfers are used mainly to meet basic household needs, and they have an important impact on poverty reduction. According to the Integrated Household Survey published in December 2006, poverty levels (defined as people subsisting on $1 or less per day) have dropped by 10 per cent, from 55 per cent in 1995 to 45 per cent in 2004.

4. The situation of children and women remains precarious as a result of chronic poverty and the Government’s difficulties in establishing effective health, education and protection systems. A 2004 survey, partly supported by the United Nations system, indicated that among children under five years of age the prevalence of stunting is 44 per cent. High malnutrition rates are due partly to poverty, food insecurity and high prevalence of disease, and partly to inadequate knowledge about nutrition. The most frequent childhood illnesses are malaria (responsible for 34 per cent of morbidity), diarrhoeal diseases (30 per cent) and acute respiratory infections. Unfortunately, data on causes of mortality are not available, and health data disaggregated by age and sex are also scarce. Information systems need to be greatly strengthened to improve reporting and guide programme interventions.

5. Infant, under-five and child mortality rates have all been decreasing in Comoros since 1960, and the country is on target to meet Millennium Development Goal 4. The maternal mortality ratio has declined from 517 to 380 per 100,000 live births, due to increased coverage of prenatal care and skilled attendance at birth. The neonatal mortality rate is 29 per 1,000 live births, contributing 41 per cent to the under-five mortality rate (U5MR). Continued reduction of both maternal and neonatal death rates will require a stronger, integrated approach that includes both facility and community interventions.

6. In dramatic contrast to most countries in Eastern and Southern Africa, Comoros is a success story in terms of maintaining low HIV prevalence thus far, perhaps because nearly 100 per cent of males are circumcised and because of other cultural factors. In addition, the Government, with assistance from the Global Fund to Fight AIDS, Tuberculosis and Malaria and the United Nations system, has been particularly vigilant in terms of routine counselling and testing. Among adolescents, there is currently only one confirmed case of HIV.

7. The net enrolment rate (NER) in primary schools increased considerably between 1996 and 2003, although significant disparities still exist among the islands: from 86 per cent in Moheli, the NER drops to 79 per cent in Anjouan and 66 per cent in Grande Comore, and the gap between boys and girls still remains significant with 65 per cent for girls versus 80 per cent for boys. Cultural beliefs and practices are a major constraint to access to primary education; another is the shortage of classrooms, 78 per cent of which are used for split sessions daily.

8. Gender disparities also affect other aspects of life in Comoros. Women have little role in decision-making; for example, there is only one woman in the central Government, one in the Government of the islands and one in the Parliament. The first report of the Indian Ocean Child Rights Observatory (Observatoire des droits de l’enfant de la région de l’Océan Indien (ODEROI)), published in October 2006, focused on violence against children and underlined various disturbing trends in Comoros: increased sexual assaults; gender-based violence and abuse; exploitation of children for economic reasons; rising juvenile delinquency; and increased school drop-outs. These are major concerns to be addressed by the Government and its
development and civil society partners. Although the legal age of marriage is 18 years for both boys and girls, earlier marriage is still common.

9. As of 2000, 16 per cent of children did not have a birth certificate. This varies quite a bit between the islands: from 10 per cent on Grande Comore to 25 per cent on Anjouan (according to the multiple indicator cluster survey (MICS), 2000). There is also a problem with falsified identity documents. One of the challenges is the harmonization of customary, Islamic and civil laws related to children, and the implementation and enforcement of those laws already harmonized and adopted with support from UNICEF.

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

**Key results achieved**

10. The 2005 mid-term review and annual programme reviews provided an overview of the results achieved by the country programme of cooperation. Vaccination campaigns, in response to the 2005 measles outbreak, resulted in the immunization of more than 95 per cent of children under age five years against polio and measles and 97 per cent of women of child-bearing age with two doses of tetanus toxoid vaccine. However, with better routine immunization, the outbreak could have been prevented. An epidemiological surveillance system was developed in collaboration with the World Health Organization (WHO), and no cases of wild polio virus have been found since monitoring began in 2003. In collaboration with WHO, the United Nations Population Fund (UNFPA) and civil society organizations, UNICEF provided technical assistance to the Government of Comoros to mobilize resources from the Global Fund for essential commodities (insecticide treated nets, intermittent prophylaxis treatment drugs, HIV tests and antiretroviral drugs).

11. Community-based Integrated Management of Childhood Illnesses (IMCI) and growth monitoring provided opportunities for identification and referral of cases of malnutrition. The country programme contributed technically and financially to the establishment of a national emergency response and management structure, which is now operational, and to the development of the national emergency preparedness and response plan. It also contributed to improving access to safe drinking water for 40,000 people in 106 villages affected by the Karthala volcanic eruption of 2005-2006.

12. The programme supported the Ministry of Education in developing the Master Plan of Education and Training for 2005-2009 and the national plan of action 2005-2007 for promotion of girls’ education. This framework facilitated mobilization of significant funding for the education sector (16 million euros from the European Union). The competency-based approach was officially declared a priority of the national education system and is being tested in selected sites.

13. UNICEF was a key partner with the Government and civil society in the adaptation of pre-school educational material, to make pre-school education more responsive to children’s early development needs. This programme supported partners to conceive and put into operation early learning activities through training of group facilitators, teachers and early childhood development (ECD) trainers.
Twelve Koranic schools were renovated on the three islands, and furnished with educational material. Forty-two per cent of children aged three to five years now benefit from ECD programmes (around half in renovated Koranic or community-based schools) established to promote the integrated development of the young child.

14. To assist the Government to improve education data collection and analysis, UNICEF supported the installation and regular use of the education database StatEduc, at both Union and island levels. UNICEF also sponsored DevInfo training for United Nations and counterpart staff, which enabled the trainees to manage and use a Millennium Development Goals database.

15. The political and legal environment for child protection was improved. A Family Code was adopted and promulgated in June 2005, the legal age of marriage was set at 18 years for both boys and girls, and legislation relating to child welfare, juvenile delinquency and the organization of juvenile courts was adopted in December 2005. UNICEF also supported the development and adoption of the National Child Protection Strategy. Parliament authorized the President to ratify the two optional protocols on the Convention on the Rights of the Child and he is expected to do so by end-March 2007. UNICEF also assisted the Government to prepare and submit its second report to the Committee on the Rights of the Child, covering the period 2000-2005. As a result of a greater awareness among prosecutors and lawyers, the Convention on the Rights of the Child is increasingly used as a point of reference in court proceedings related to children.

Lessons learned

16. The participation of Comoros in ODEROI resulted in increased and improved monitoring, data analysis and reporting on child rights violations. Comoros’ investment in this Observatory and its associated activities has yielded good returns in advocacy and capacity strengthening.

17. Building the capacity of community-based organizations to apply the human rights-based approach to programming, including the mobilization of duty bearers and rights holders to participate in planning and follow-up, resulted in increased and more sustainable achievements in emergency response, girls’ education, educational reform and wider coverage of ECD. The success of the approach resulted in its adoption by other United Nations agencies, non-governmental organizations and the Government.

18. The members of the United Nations system in Comoros have made strong efforts to work together closely, especially on emergency preparedness and response, joint programming for HIV prevention, development of a Road Map for Maternal and Neonatal Mortality reduction, the poverty reduction strategy paper (PRSP) review and the application of the human rights-based approach to programming. This has laid the groundwork for enhanced United Nations collaboration and coherence, thus leveraging better results for children.

19. Despite the many challenges, significant progress was made in developing an enabling national policy and legislative framework to prioritize children’s issues. UNICEF strategically positioned these issues by producing credible and necessary information and applying a rights-based approach. These efforts paid off in terms of
influencing policy, programmes and legislation, yielding stronger results for children.

The country programme, 2008-2012

Summary budget table

<table>
<thead>
<tr>
<th>Programme</th>
<th>Regular resources</th>
<th>Other resources*</th>
<th>Total</th>
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<tbody>
<tr>
<td>Child survival and development</td>
<td>1 359</td>
<td>2 500</td>
<td>3 859</td>
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<tr>
<td>Education</td>
<td>1 019</td>
<td>3 000</td>
<td>4 019</td>
</tr>
<tr>
<td>Social policy, advocacy and communication</td>
<td>760</td>
<td>750</td>
<td>1 510</td>
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<tr>
<td>Cross-sectoral costs</td>
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<td>0</td>
<td>577</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>3 715</strong></td>
<td><strong>6 250</strong></td>
<td><strong>9 965</strong></td>
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* Additional funds may be received through Consolidated Appeals as required.

Preparation process

20. The United Nations country team fully aligned the content and cycle of the new United Nations Development Assistance Framework (UNDAF) with Comoros’ Growth and Poverty Reduction Strategy (GPRS), developing a five-year framework for 2007-2009. As a first step, the United Nations system facilitated a review of the previous UNDAF and the GPRS to identify potential key areas for cooperation. In addition, a study was commissioned on the causes of child and maternal mortality. The UNDAF was developed in support of the GPRS and Millennium Development Goals and incorporates human rights principles. UNICEF was a strong partner in developing the UNDAF outcomes around the four areas in the GPRS where the United Nations could make a difference: economic growth and the fight against poverty; governance; basic social services; and environment and sustainable development. Key UNDAF results were drafted and validated through a consultative process, including a strategic prioritization retreat with government and other development partners.

21. Following the finalization of the UNDAF, the UNICEF country programme for 2008-2012 was developed through a participatory and consultative process, involving relevant ministries and civil society through a multisectoral planning team put in place by the National Planning Commission specifically for the United Nations system’s programming process. The draft CPD was discussed in a consultative meeting with all UNICEF partners, including donors. These consultations were followed by a joint discussion of all CPDs (for UNICEF, the United Nations Development Programme and UNFPA) under the leadership of the National Planning Commission and the Ministry of External Relations in order to ensure conformity to the GPRS and to maximize synergies among the three United Nations programmes that operate within the UNDAF. Concluding observations and recommendations of the Committee on the Rights of the Child and the Government’s report on the implementation of Convention on the Elimination of all Forms of Discrimination against Women were also taken into account.
Goals, key results and strategies

22. The goal of the country programme for 2008-2012 is to contribute to the effective realization of the rights of Comorian children and women by creating an enabling policy environment for their survival, development, protection and participation. The country programme is an integral and important component of the UNDAF, and will strongly contribute to efforts by government, civil society and other development partners to achieve the goals and objectives defined in the GPRS and the Millennium Declaration.

23. The expected key results, by 2012 are:

   (a) U5MR reduced from 71 to 40 per 1,000 live births (as per the Government’s official goal);

   (b) Maternal and neonatal mortality rates reduced to 200 per 100,000 live births and 15 per 1,000 live births respectively;

   (c) 80 per cent of families with children under five years of age adopted adequate behaviours and care practices favouring young child survival, growth and development;

   (d) 80 per cent of families have access to safe water and have adopted behaviours to reduce disease;

   (e) Sector-wide approach (SWAp) in education established and funds for education sector increased by 50 per cent;

   (f) 65 per cent of children aged three to five years are enrolled in ECD programmes;

   (g) Inter-island disparities and gender disparities in school enrolment reduced by 10 percentage points;

   (h) 81 per cent of schoolchildren complete primary education having acquired the basic competencies required for the level;

   (i) Transition from primary to class 6 is achieved by 65 per cent of boys and girls sitting the class 6 entrance examination;

   (j) HIV prevalence rate maintained at under 1 per cent;

   (k) 50 per cent of adolescents have access to youth-friendly counselling services;

   (l) Understanding and consensus reached on six agreed targets for a protective environment against all forms of violence, exploitation, abuse and negligence towards children, and agreed targets achieved;

   (m) National capacities to monitor child-related areas and goals in the Millennium Declaration strengthened in collaboration with other partners;

   (n) National Emergency Preparedness and Response Plan is regularly updated and in event of emergency is effectively applied to achieve compliance with UNICEF Core Commitments for Children in emergencies.

24. The human rights based-approach to programming was applied in the design of this country programme, and will be used to implement, monitor and evaluate the country programme. This approach draws on the following strategies: (a) capacity
development of counterparts at the island and community levels; (b) establishment of new and strengthening of existing partnerships with strategic allies within civil society, among children and with prominent citizens and other leaders; (c) stronger application of results-based planning and management, including monitoring and evaluation based on developed information systems and research; (d) support to the Government’s decentralized approach, by strengthening planning capacities at island level, and by allocating resources to local partners and holding them accountable for results; (e) strengthening coordination at the Union Government level for a better synergy of activities and exchanges of best practices among the islands; (f) broader and more inclusive participation by children; (g) mainstreaming gender; (h) evidence-based advocacy to influence policy and decision-making; and (i) reduction of inequities and disparities.

Relationship to national priorities and the UNDAF

25. The country programme is based on four of the following national priorities of the GPRS, which are also UNDAF outcome areas: economic growth and the fight against poverty; governance; basic social services; and environment and sustainable development.

26. Under governance, UNICEF will contribute to the achievement of the outcomes for accessible and functional national systems for the protection and promotion of human rights and gender equity; improved and functional democratic governance mechanisms and social dialogue; a culture of security and resistance to emergencies ensured at all levels, and mechanisms for prevention and management of emergencies that are established and operational; and institutional and human capacities in planning, management, monitoring, evaluation and coordination of development reinforced at the Union and island levels. Under basic social services, UNICEF is the lead or a main partner in all the outcomes, covering health, education, ECD, literacy, nutrition, water and capacity-building in the planning and management of educational systems. Under environment and sustainable development, UNICEF will contribute to water, sanitation and hygiene interventions under the outcome on reversing degradation and reduction in availability of water.

Relationship to international priorities

27. This programme will contribute to achievement of the specific Millennium Development Goals shown in the appended summary results matrix. Moreover, the programme will contribute to the implementation of the National Plan of Action to follow up the General Assembly Special Session on Children and its outcome document, A World Fit for Children, and will strengthen national capacities for implementation of the Convention on the Rights of the Child and the Convention on the Elimination of all Forms of Discrimination against Women. The three defined programmes address priority topics defined in the UNICEF medium-term strategic plan, the Beijing Plus 10 and Abuja resolutions, other international resolutions on combating HIV/AIDS and the Unite for Children, Unite against AIDS campaign.

Programme components

28. The country programme comprises three synergistic programmes: (a) child survival and development; (b) basic education; and (c) social policy, advocacy and communication. HIV and AIDS prevention, monitoring and evaluation, programme
communication and emergency preparedness and response are mainstreamed within all of these programmes.

29. The child survival and development programme aims at reducing U5MR through implementation of a package of high-impact interventions, including routine health and nutrition services; antenatal care (including prevention of mother-to-child transmission of HIV (PMTCT)); and water, sanitation and hygiene promotion. Community and family capacities to ensure adequate feeding and care practices for pregnant and lactating women as well as for the young child will be strengthened through community-based nutrition interventions and IMCI.

30. As an integrated package of maternal and child health interventions, this programme component will: (a) support biannual family health weeks to improve utilization of preventive health interventions by women and children; (b) strengthen routine immunization services through implementation of the Reach Every District approach and supporting government efforts for polio eradication, elimination of maternal and neonatal tetanus and measles control; (c) decrease malaria morbidity and mortality by ensuring that 80 per cent of pregnant women attending antenatal care receive intermittent preventive treatment and increasing utilization of insecticide-treated nets by pregnant and lactating women and children under age five years to 80 per cent, in collaboration with the Global Fund and WHO; (d) strengthen both community care practices and birth delivery and neonatal care at clinics in order to accelerate reduction of maternal and neonatal death rates; (e) prevention of HIV/AIDS will be further strengthened through provision of a PMTCT plus package of services to pregnant women receiving antenatal care; and (f) increase access to safe drinking water for rural communities and promote improved and adequate hygiene and sanitation practices through the participatory hygiene and sanitation transformation approach in schools and communities.

31. Emergency preparedness and response will be mainstreamed throughout the child survival and development programme to assure life-saving interventions for young children in humanitarian situations, as per the UNICEF Core Commitments for Children in emergencies.

32. The basic education programme aims at improving access to and quality of basic education for boys and girls in all districts, with particular emphasis on the zones with the lowest enrolment rates. The programme also includes policy development and advocacy focusing on educational reform, based on evidence and analysis; and development of a SWAp that will attract a larger budget allocation for education.

33. The programme will focus particularly on girls’ education, aiming to reduce the disparity in school enrolment between girls and boys from 13 to 3 percentage points. To do this, the programme will overcome not just physical barriers to access such as lack of classrooms and sanitation facilities, but also cultural barriers such as traditional beliefs about keeping girls at home or marrying them at young ages. Thus, child-friendly and girl-friendly schools will be promoted. This will include, inter alia, construction of separate water, hygiene and sanitation facilities.

34. The programme will scale up the competencies-based approach to all public and private primary schools. This scaling-up will be concurrent with strengthening planning and management capacities among educators and administrators, to ensure that the approach is sustained and successful.
35. The programme’s contribution to education system reform will focus on the improvement of quality, effectiveness and efficiency in the management of the education system. These improvements, along with increased access and reduced disparities between girls and boys and among islands, should all contribute to achieving retention and completion of the primary education cycle so that transition from primary to class 6 is achieved by 65 per cent of girls and boys taking class 6 entrance examinations.

36. The education programme will also focus on the integrated development of the young child through advocacy for the integration of survival, nutrition and birth registration into ECD programmes, to improve children’s developmental readiness to start primary school on time, especially among girls and vulnerable children. It will also advocate for the Fast-Track Initiative and for scaling-up of renovated Koranic schools, using the mother tongue as the teaching language.

37. The Ministry of Education will be assisted in establishing a SWAp to facilitate wider and better coordinated participation in the support, coordination, funding, development, implementation and monitoring of a comprehensive National Education for All Plan, and in the mobilization of Fast-Track Initiative funding.

38. Preparation for and restoration of access to education in emergency situations will be fully integrated into the education programme.

39. The social policy, advocacy and communication programme will focus on data collection, analysis and communication for advocacy in support of the aims of the education and child survival and development programmes, as well as for the creation of a protective environment against all forms of violence, exploitation, abuse and neglect of girls, boys and women. The programme will build Union and island government capacities for child-friendly budget analysis, expenditure and reporting. Data collection, analysis, and reporting will be carried out with, and in support of, the Government’s initiatives around the PRSP, United Nations partners (through the UNDAF), and other development partners (via SWAps) so that, in keeping with the Paris Declaration principles, development efforts are coherent and aligned and national systems are strengthened and used. Key to this effort will be leveraging resources to carry out a household survey and increasing the number of administrators and users of DevInfo.

40. The communication component of the programme will focus on providing information through the media and other means, using evidence to inform decision-making, shape public opinion and influence development partners in favour of leveraging resources and results for children. UNICEF will also promote and engage in policy and strategy discussions with the Government, civil society and other development partners on issues such as child survival and development; birth registration and protection of vulnerable children. Harmonization of customary and Islamic laws, enforcement of legislation adopted and integration of Koranic schools in the education system will also be addressed.

41. Cross-sectoral costs (comprising administration, programme supplies, information and communication technology, financial and human resources) will provide operational support to overall programme management and implementation.
Major partnerships

42. Within the UNDAF, the programme will strengthen and consolidate synergies and coherence with other United Nations agencies. Joint programmes and joint programming will be implemented within the existing structure of UNDAF theme groups. The partnership built with the European Union in the education sector and with the Global Fund on HIV/AIDS and malaria prevention will be strengthened. Partnerships will be developed with the French Cooperation Agency, the International Organization of the Francophone Countries, the United Nations Educational, Scientific and Cultural Organization and the World Bank. Civil society, including women’s associations, and national and community media, will play an important role in the achievement of expected programme results. Partnerships with opinion leaders, political authorities, parliamentarians and religious, traditional and administrative leaders will be reinforced. Children, young people and adolescents will be empowered to participate as appropriate to their capacities, at different stages in policy development, programme design, implementation, monitoring and evaluation.

Monitoring, evaluation, programme management and coordination

43. The monitoring framework for the country programme will be set out in a five-year integrated monitoring and evaluation plan (IMEP), consistent with the UNDAF and the GPRS monitoring matrices. The CPD summary results matrix includes key child development indicators to assess progress against expected results; results, indicators, baselines and targets will be further elaborated in a country programme action plan. UNICEF will contribute its support to either a MICS or a demographic and health survey. Other sources of data will be routine monitoring systems and field monitoring visits. The IMEP will also include thematic studies and a national study to analyze education and health data. Periodic evaluations, undertaken jointly with other United Nations agencies and partners, where appropriate, will be built into the annual work plans and reflected in annual IMEPs. Evaluations with donors will be conducted as required. DevInfo will continue to be developed as a tool for national and island-level monitoring and reporting on Millennium Development Goals, and this database will be linked to EduStat (the education database). Strong ties will be maintained with ODEROI in Mauritius.

44. The country programme will be coordinated by the National Planning Commission. The planning, implementation and supervision of activities and the monitoring and evaluation of the annual work plans will be ensured by the ministries of the Union and those of the autonomous islands for each component of the programme. Each ministry will indicate one or more technical staff with decision-making authority to be in charge of this. Annual UNDAF reviews and a mid-term review will be carried out jointly with the Government and other United Nations agencies, coordinated by the Resident Coordinator’s Office. A country programme management plan will be written, in which all financial and human resources, as well as office structure, will be closely linked to the key results in the summary results matrix. The country office will monitor and regularly report to the Regional Office on agreed performance management indicators for the UNICEF country programme.

45. United Nations joint working groups to oversee, coordinate and monitor implementation of the programmes in the UNDAF will be coordinated with
governmental working groups established for the GPRS. The aim is to ensure that the United Nations is not working in parallel, but rather in an integrated manner with the Government’s GPRS. These working groups will also ensure linkages and promote synergies between different sector-specific programmes.
<table>
<thead>
<tr>
<th>UNICEF MTSP focus Area</th>
<th>Key results expected in this focus area</th>
<th>Key progress indicators</th>
<th>Means of verification</th>
<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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<tbody>
<tr>
<td><strong>Focus Area 1:</strong> Young child survival and development</td>
<td>1.1 U5MR reduced from 71 to 40 per thousand (as per government official goal)</td>
<td>1.1.1 U5MR 1.1.2 % of 1 year olds fully immunized 1.1.3 % of children &lt;5 year olds have received vitamin A and de-worming during the last 6 months</td>
<td>Demographic Health Survey (DHS) Campaign and routine service data Programme Evaluations</td>
<td>Ministry of Health, community based organizations, NGOs Expanded Programme on Immunization, National Programme</td>
<td><strong>UNDAF expected outcome:</strong> Access, quality &amp; utilization of basic social services are improved <strong>WFFC goal:</strong> Promote healthy lives <strong>MDG:</strong> 4. Reduce child mortality 5. Improve maternal health 6. Combat HIV/AIDS, malaria and other diseases</td>
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<td></td>
<td>1.2 80% of families with children &lt;5 years of age adopted adequate behaviors and care practices favoring young child survival, growth and development</td>
<td>1.2.1 % of undernourished children under five (weight for age) 1.2.2 % of infants exclusively breastfed for 6 months 1.2.3 % of children receiving appropriate complementary feeding after 6 months 1.2.4 % of sick children receiving timely and quality home-based care (including antibiotics for ARI, appropriate anti-malarial &amp; continued feeding)</td>
<td>DHS Integrated Household Survey</td>
<td>Ministry of Health (MOH) Health Promotion Department</td>
<td></td>
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<tr>
<td></td>
<td>1.3 80% of &lt;5 year old children and 80% of pregnant women sleeping under ITN</td>
<td>1.3.1 Percent of pregnant women and percent of children under age 5 who slept under an insecticide impregnated net the night before the survey (Baseline: 34%)</td>
<td>DHS Integrated Household Survey</td>
<td>MOH, Malaria Control Programme</td>
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<td></td>
<td>1.4 80% of families are using safe water and improved sanitation facility</td>
<td>1.4.1 % of households that use safe water, by urban and rural 1.4.2 Proportion of population using an improved basic sanitation facility, by urban and rural</td>
<td>DHS Integrated Household Survey</td>
<td>Ministry of Energy and Water</td>
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<td>UNICEF MTSP focus Area</td>
<td>Key results expected in this focus area</td>
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<td>(3)</td>
<td>(4)</td>
<td>(5)</td>
<td>(6)</td>
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<tr>
<td>2.1 65% of children 3-5 years old are enrolled in ECD services</td>
<td>2.1.1 Pre-school net enrolment rate</td>
<td>Educational Statistics (StatEduc)</td>
<td>Ministry of National Education, Communities, UNESCO and NGOs Emergency Coordination Centre</td>
<td><strong>UNDAF expected outcome:</strong> Access, quality &amp; utilization of basic social services are improved <strong>MDG:</strong> 2. Achieve Universal Primary Education 3. Promote Gender Equity and empower women. <strong>WFFC Goal:</strong> Provide quality basic education</td>
<td></td>
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<tr>
<td>2.2 Inter-island and gender disparities in school enrollment each reduced by 10 percentage points</td>
<td>2.2.1 Primary school net enrolment rate by island 2.2.2 Gender disparity index for primary school, net enrolment</td>
<td>Educational Statistics (StatEduc)</td>
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<td>2.3 81% of school children complete primary education having acquired the basic competencies required for the level.</td>
<td>2.3.1 Primary school completion rate by age, sex and island 2.3.2 % of children having acquired primary school basic competencies</td>
<td>Monitoring Learning Achievement programme monitoring and evaluation</td>
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<td>2.4 Transition from primary to class 6 is achieved by 65% of boys and girls sitting the class 6 entrance examination</td>
<td>2.4.1 Primary to class six transition rate, by sex and island</td>
<td>Educational Statistics (StatEduc)</td>
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<td>2.5 Children’s right to education safeguarded in situations of emergency and post-emergency through provision of safe, gender-sensitive, quality learning spaces and re-establishment of education</td>
<td>2.5.1 Safe learning spaces established and schools reopened in the 1st 6-8 weeks of an emergency 2.5.2 Primary education re-established, quality education activities resumed, and appropriate community service established near schools after the initial response</td>
<td>Emergency Response Reports</td>
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